

Suicidal Idealization And Self-Harming Behaviors In Adolescents

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Abstract

The present study will be designed to investigate the prevalence of suicidal ideation and self-harming behavior in adolescents. The sample will consist of 1000 American adolescents and will be selected from different schools. It will be hypothesized that the prevalence of suicidal ideation and self-harming behavior in adolescents has increased; there will be a positive predictive relationship between suicidal ideation and self-harming behavior in adolescents. It will also assume that females show increased suicidal ideation and self-harming behavior. The suicidal ideation questionnaire and self-harming behavior scale will be used to assess suicidal ideation and self-harming behavior in adolescents, respectively. Results will indicate the one-fourth prevalence of self-harming behaviors and one-third of suicidal ideation. It will also conclude that suicidal ideation and self-harming behavior in adolescents are positively associated, and females will score high on suicidal ideation and self-harming behavior than males. The present research will have significant implications in the field of developmental psychopathology.

Introduction

Suicide is the third leading cause of death in adolescents aged 15-24 years. Research has shown some reasons behind it including intrapersonal and interpersonal. To avoid the stress caused by interpersonal and intrapersonal conflicts, individuals use self-harming behavior as a coping strategy (Nixon, Cloutier, & Jansson, 2008). Self-harming behavior increases with age from childhood to adolescence, as adolescence is a period of storm and stress, and most of the time, it becomes difficult for youngsters to cope with the challenges of life. According to researchers, self-harming behavior usually begins in early adolescence age, that is, 12-14 years, and the prevalence rate keeps on increasing as it has reached almost 41.9% in adolescents, which is an alarming situation (adolescents (Hilt, Nock, Lloyd-Richardson & Prinstein, 2008; Muehlenkamp, Claes, Havertape, & Plener, 2012).

Self-Harming Behavior

Self-harming behavior, also known as self-injury- is defined as the direct, deliberate destruction of body tissue with and without a suicidal attempt (Nock & Favazza, 2009). It was once thought to be associated with depression, eating disorders, borderline personality disorder, or any other pathological symptoms. But now, some studies have reported that the non-psychiatric population is

also showing this behavior, and it is most commonly observed in adolescents (Cerutti, Manca, Presaghi, & Gratz, 2012). Research has explored many factors that lead to self-harming behaviors, and the most common are intrapersonal and interpersonal issues. Intrapersonal factors include variables that are related to identity crisis, academic anxiety, emotional regulation, and depression, whereas interpersonal issues are related to peer relationships, intimate relationships, and parenting (Nock & Prinstein 2004). Many researchers have shown that adolescents who are engaged in self-harming behaviors to cope with anxiety, depression, psychological distress, conduct behavior, and anger outbursts (Nock, 2009; Baetens, Claes, Muehlenkamp, Grietens, & Onghena, 2012). So, self-harming behavior is an escape strategy from painful emotions (Chapman, Gratz, & Brown, 2006).

Self-harming behavior and suicidal attempts are quite related and are reported in some studies, but still, the results are ambiguous. Some of the studies suggest that self-harming is utilized to alleviate the symptoms of stress rather than attempting suicide, whereas some studies suggest that self-harming behavior is a way to avoid suicide (Alderman, 1997). So, research shows an ambiguous relationship between the two variables as some show self-harming behavior is an initiation of a suicidal attempt while some suggest that it is a way to avoid suicide. According to Walsh (2006), both suicide and self-harming behavior are completely distinct behavioral and psychological phenomena.

Suicidal Ideation

Suicidal ideation refers to active thoughts about killing oneself or pervasive thoughts about wanting to be dead and is not associated with preparatory behavior. Research has confirmed that self-harming behavior is linked to suicidal attempts (Miller & Smith, 2008). Adolescents who experience stressful situations utilize different strategies to change such situations and minimize their impact. Adolescents rely on available social resources, including interpersonal networks such as family and friends, or psychological resources such as changing things, using defenses, and other behavioral strategies (Lazarus & Folkman, 1984). However, those individuals who do not have a supportive network or some psychological resource system often feel isolated and depressed and start using drugs, and when the problem becomes totally out of control, they prefer to start having self-killing thoughts. However, the major problem lies in finding which variable is the predictor and what the outcome is.

Literature Review

Literature has shown a strong relationship between self-harming behavior and suicidal ideation. During adolescence, a high percentage of boys (83%) who have inflicted self-harm had also shown suicidal ideation as compared to those who have never inflicted self-harm (29%) (King et al. 2001; Muehlenkamp & Gutierrez, 2004). Having suicidal thoughts is considered an important indicator of emotional illness; as in adolescents, suicidal ideation is strongly linked to psychiatric symptoms such as low self-esteem, stress, anxiety, sleep and eating disturbances (Stewart, Donaghey, Deary, & Ebmeier, 2008). Research has also shown that adolescents with high suicidal ideation are at a higher

risk of attempting suicide (Reinherz, Tanner, Berger, Beardslee, & Fitzmaurice, 2006).

The literature on gender differences shows that females show an increased practice of self-harming behavior as compared to males (Whitlock, Eckenrode, & Silverman, 2006). Findings by Whitlock, Muehlenkamp, and Eckenrode (2008) conclude that there are different classes of self-injury groups, but one of them is boys who use 'self-battery' a form of self-injury behavior that practices such behaviors in different social settings. Results concerning race and self-harming behaviors are mixed, as some studies suggest that it is more frequent in Caucasians, while others show increased rates in the sample of minorities (Whitlock, Eckenrode, & Silverman, 2006).

Researchers emphasize that it is important to identify suicidal ideations as, most often, it leads to self-harming actions; moreover, knowing suicidal ideation is a way to detect self-harming behaviors that will help in initiating prevention strategies. Based on available literature present study is aimed to investigate the prevalence of suicidal ideation and self-harming behavior in adolescents, along with studying the relationship between suicidal ideation and self-harming behavior.

Research Question

1. What is the prevalence of suicidal ideation and self-harming behavior in adolescents?
2. What is the relationship between suicidal ideation and self-harming behavior in adolescents?
3. What are the gender and age differences in suicidal ideation and self-harming behavior?

Method

Research Design

Survey research will be carried out to investigate the prevalence of suicidal ideation and self-harming behavior.

Sample

A sample of 1000 boys and girls with an age range of 12 – 24 years of age will be selected from different schools in the city.

Instruments

A pack of three questionnaires will be used to collect the data.

Demographic Questionnaire

It will consist of 12 items that include information regarding demographic variables such as gender, date of birth, parents alive, parents living together, parental age, parental education, family socioeconomic status, family structure, number of siblings, birth order, grade, and last class scores.

Suicidal Ideation Questionnaire

Suicidal Ideation Questionnaire (SIQ; Reynengage, 1988), a self-reported measure consisting of 30 items, will be used to study the current level of suicidal ideation. It is a 7-point Likert scale ranging from 6 = *almost every day* to 0 = *I never had this thought*, with a total score ranging from 0 to 180.

Self-Harm Questionnaire

Self-Harm Questionnaire (SHQ; Ougrin & Boege, 2013) will be used to identify self-harming behavior in adolescents. It consists of three screening questions, such as *"Have you ever thought about harming yourself on purpose?"* along with questions that inquire about any past behavior related to self-harming behavior or thinking. Suppose the participants report that they have previously been involved in self-harming behavior. In that case, a further 12 open-ended questions like *"What feelings do you have before self-harm?"* will be assessed about the previous self-harming behaviors, functions, severity, and consequences.

Procedure

The main study will be conducted using surveys; adolescents will be approached at different schools. Permission will be taken from the school administration to conduct the survey. The purpose of the study will be explained to them, and their written informed consent will be taken from the school administration. Students will be approached in classes, and questionnaires will be distributed. They will be asked not to disclose their identity anywhere on the questionnaires.

Results

The data will be analyzed using SPSS. Means, standard deviations, frequency, and percentages of the different variables will be calculated. The table of descriptive will show an increased mean value of suicidal ideation in females as compared to males. I would expect that students who report self-harming behavior will use more than one method, including self-scratching, wrist cutting, head hitting, etc. Females will be more likely to be involved in self-scratching behavior, whereas boys will be involved in head-hitting behavior. The expected reason for self-harming behavior will be peer

rejection and stress dissolution. The Pearson product-moment correlation will be used to investigate the relationship between suicidal ideation and self-harming behavior in adolescents.

I would expect a significant positive relationship between suicidal ideation and self-harming behavior. An Independent sample test will be used to find out the gender differences in suicidal ideation and self-harming behavior. I would expect significant gender differences in both variables, and females will score high on both scales. Age of the participants will be distributed into three categories: young adolescents (12-15), middle adolescents (16-19), and late adolescents (20-24). ANOVA will be used to assess the mean differences in 3 age groups. ANOVA will indicate that middle adolescents will score high on suicidal ideation, whereas self-harming behavior would be high in both young and middle adolescents as compared to older adolescents. Regression analysis will be used to find out the predictive relationship between demographic variables, suicidal ideation, and self-harming behavior. Results of regression analysis will indicate that suicidal ideation, age, and poor academic grades will be significant predictors of self-harming behavior.

Discussion

Self-harming behavior and suicidal ideation have gained much attention in the past few decades as a common psychological problem, especially in adolescents. We investigated the prevalence rate of suicidal ideation and self-harming behaviors in adolescents. We explored the relationship between suicidal ideation and self-harming in a sample of American adolescents. Our first research question was about finding out the prevalence of suicidal ideation and self-harm in adolescents. We assumed that one-fourth of our sample was involved in self-harming behaviors and one-third of them had suicidal ideation once in a lifetime.

We also studied the most prevalent self-harming behaviors in adolescents, including self-scratching, head hitting, and wrist cutting. Females will be more likely to be involved in self-scratching behavior, whereas boys will be involved in head-hitting behavior. A significant positive relationship between suicidal ideation and self-harming behavior will be observed in the present study. Results of regression analysis will indicate that suicidal ideation, age, and poor academic grades will be significant predictors of self-harming behavior. The present findings are also inconsistent with the past findings that indicate the strong predictive relationship between suicidal ideation and self-harming behavior (Dougherty et al., 2009).

I would expect significant gender differences in both variables, and females will score high on both scales. The findings will be supported by past findings that indicate that girls tend to be involved in self-harming behavior more than males (Nixon, Cloutier, Jansson, 2008). Middle adolescents will score high on suicidal ideation, whereas self-harming behavior would be high in both young and middle adolescents as compared to older adolescents. These results will also be confirmed by past findings that early and middle adolescents are at more risk of involving in self-harming behaviors.

The present also has some limitations: firstly, the data was collected from schools only, and the majority of the adolescents studying there belong to healthy families. So, there are some issues related to external validity. Therefore, in the future, data should preferably be collected through random sampling from homes instead of schools. Secondly, this study includes self-reported measures only. Rather triangulation method should be used to collect data. The study has significant implications in the field of developmental psychopathology. Serious intervention should be implemented in further true for the solution of these behaviors and thoughts. In the future, it is recommended to conduct a study to explore the psychosocial factors involved in causing suicidal ideation and self-harming behavior.

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