



Deliberate self-harm in adolescents: hopelessness, depression, problems and problem-solving

JO-ANN McLAUGHLIN, PETER MILLER AND HILARY WARWICK

This study looks at a group of adolescents who have taken overdoses and examines the type and severity of their problems. It measures hopelessness and depression, and whether these adolescents feel their parents understand them. The study also examines the ways in which these adolescents perceive their overdose as a problem-solving mechanism.

The study shows that hopelessness in adolescent self-harm is an important independent variable over and above the level of depression. The adolescents report a wide range of problems with severe and significant problems particularly in the area of family relationships and school.

Finally, the paper postulates links between severity of problems, hopelessness and deficits in problem-solving abilities, and suggests areas for potential therapeutic interventions.

© 1996 The Association for Professionals in Services for Adolescents

Introduction

Since the late 1960s non-fatal deliberate self-harm (DSH) in adolescence has greatly increased (Kreitman and Schreiber, 1979). This increase slowed during the mid 80s but more recently has started to increase again (Hawton and Fagg, 1992). There have been advances in the understanding of this behaviour, although some aspects remain uncertain. Consequently, management is often difficult, particularly in an area where clinical resources are scarce.

DSH is associated with significant morbidity and mortality in this age group. Various studies have reported the risk of repetition as between 12–40% (Hawton, 1986), the greatest risk of repeat being within the first few months of an attempt. Otto (1972) found 4.3% of adolescent suicide attempters in Sweden had died by suicide during the subsequent 10–15 years, and Goldacre and Hawton (1985) reported a figure of 0.24% for the Oxford region during a mean follow-up period of 2.8 years.

Reduction in the rate of suicide has recently been highlighted as a target in the Government White Paper "The Health of the Nation" (Secretary of State for Health, 1991). Prediction and prevention of suicide in this high-risk group remains a poorly understood area. Areas of possible interest are the concepts of hopelessness and problem-solving.

It has been proposed (Stotland, 1969; Beck *et al.*, 1975) that an individual's sense of hopelessness can be defined in terms of a system of negative expectancies concerning his or herself and his or her future life. A sense of hopelessness may originate out of a temporary or

Reprint requests and correspondence should be addressed to Dr J.-A. McLaughlin, Consultant Child Psychiatrist, Child and Family Therapy Clinic, 18/19 St Johns Street, Mansfield, U.K.

permanent cognitive deficiency, with difficulty in generating solutions to problems, leading to a state where one feels there is no way out of a stressful situation. It is hypothesized that this state leads to the use of maladaptive problem-solving techniques such as self-harm.

The importance of hopelessness in suicide and DSH is well recognised in adults. Research has identified the factor of hopelessness as the key variable linking depression and suicidal behaviour (Beck *et al.*, 1975). Depression and suicidal intent show little or no correlation when hopelessness scores are controlled for, while suicide intent is highly associated with hopelessness, even when depression scores are controlled for. In a group of depressed inpatients, hopelessness was the best predictor of suicide at 10-year follow-up (Beck *et al.*, 1985). Compared with adults, adolescents have fewer life experiences upon which to draw and therefore fewer problem-solving resources to call on. The critical role played by problem-solving appraisal in predicting both hopelessness and suicidal ideation in a group of young adults has been confirmed in adults by Rudd *et al.* (1994).

Hopelessness and its links to inadequate problem-solving may be an important factor contributing to DSH in adolescents. A sense of hopelessness has been shown to differentiate a group of self-harming adolescents from a depressed "at-risk" group (Swedo *et al.*, 1991). In contrast Rotheram-Borus and Trautman (1988) studied a group of 44 Hispanic and Black female adolescents and found hopelessness was not predictive of suicidal behaviour. This point of view is supported by Cole (1989), who found that depression rather than hopelessness predicted self-harming ideation and attempts in a group of adolescent college students.

Sadowski and Kelly (1993) showed that a group of adolescents who had self-harmed had poorer social problem-solving skills than a group of psychiatric patients and normal controls although this was not linked with either hopelessness or depression. Hawton (1986) has pointed out that current understanding of the motivation leading to DSH in adolescence is inadequate. In a study of reasons given to explain DSH (Hawton *et al.*, 1982) marked differences were found in the ways such attempts were explained by the adolescents and how they were viewed by their assessors, both in terms of suicidal intent and motivation. Clinicians rarely judged the behaviour as intended to result in death, and were more likely to attribute the behaviour to hostile or manipulative motives. Further investigation of this important area is necessary. Better understanding of the links between problems, hopelessness and motivation for DSH may make it easier to identify those at-risk of further self-harm. Such an understanding may also indicate those likely to benefit from specific interventions, such as cognitive therapy.

The role of the parents of adolescents who self-harm is of the greatest importance, both in the understanding of the problems and motivation precipitating DSH, and in the outcome of subsequent treatment. However, there has been little research comparing the parent's perception of the reasons for the DSH with the child's view of the situation. It may be that many parents are unaware of the extent of their child's concerns and feelings of hopelessness prior to a serious suicide attempt, and have therefore not sought appropriate help. Many parents underestimate the seriousness of an episode of DSH (Hawton, 1986) and it may be that a clear demonstration of their child's feelings might lead to better compliance with future treatment.

In addition Reder *et al.* (1991) has outlined a hypothesis that links deliberate self-harm and problem-solving in adolescence, suggesting that the act of DSH can be underrated as an attempt to resolve relationship difficulties.

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات