



ELSEVIER

Available online at www.sciencedirect.com

 ScienceDirect

Journal of Adolescence 32 (2009) 1125–1136

Journal of
Adolescence

www.elsevier.com/locate/jado

Factors associated with deliberate self-harm behaviour among depressed adolescent outpatients

Virpi Tuisku^{a,b,*}, Mirjami Pelkonen^{a,c}, Olli Kiviruusu^a, Linnea Karlsson^{a,d,1},
Titta Ruutu^{a,c}, Mauri Marttunen^{a,c,e}

^a National Public Health Institute, Department of Mental Health and Alcohol Research, Mannerheimintie 166, FIN-00300 Helsinki, Finland

^b Department of Psychology, University of Tampere, Tampere, Finland

^c Department of Adolescent Psychiatry, Hospital for Children and Adolescents, Helsinki University Hospital, Peijas Area, Vantaa, Finland

^d Department of Psychiatry, Turku University Central Hospital, Turku, Finland

^e Department of Psychiatry, University of Kuopio and Kuopio University Hospital, Kuopio, Finland

Abstract

This study examined whether depressed adolescent outpatients with deliberate self-harm behaviour (DSH) differed from non-suicidal depressed adolescent outpatients in depressive and anxiety symptoms, alcohol use, perceived social support and number of negative life-events. Depressed adolescent outpatients ($n = 155$) aged 13–19 years were interviewed using K-SADS-PL for DSM-IV Axis I diagnoses and completed self-report questionnaires. Suicidal behaviour was assessed by K-SADS-PL suicidality items. Depressed adolescents with DSH were younger, perceived less support from the family, had more severe depressive symptoms and used more alcohol than non-suicidal depressed adolescents. Adolescents with DSH and suicidal ideation or suicide attempts had more depressive and anxiety symptoms than adolescents with DSH only. Adolescents with severe internalizing distress symptoms are at risk not only for DSH, but also additional suicidal behaviour. Family interventions may be needed in the treatment of depressed adolescents with DSH.

* Corresponding author. National Public Health Institute, Department of Mental Health and Alcohol Research, Mannerheimintie 166, FIN-00300 Helsinki, Finland. Tel.: +358 9 47448656; fax: +358 9 47448478.

E-mail addresses: virpi.tuisku@ktl.fi (V. Tuisku), mirjami.pelkonen@ktl.fi (M. Pelkonen), olli.kiviruusu@ktl.fi (O. Kiviruusu), lin.haa@utu.fi (L. Karlsson), titta.ruutu@ktl.fi (T. Ruutu), mauri.marttunen@ktl.fi (M. Marttunen).

¹ Lehmustie 12B, 20720 Turku, Finland.

© 2009 The Association for Professionals in Services for Adolescents. Published by Elsevier Ltd. All rights reserved.

Keywords: Deliberate self-harm; Adolescence; Depression; Alcohol; Social support

Introduction

Deliberate self-harm (DSH) is defined as the intentionally injuring of one's own body without apparent intent to die (Brunner et al., 2007). Understanding deliberate self-harm (DSH) is, however, complicated by the multiple terminology used to describe the behaviour and the confusion as to whether or not DSH represents a suicide attempt (Muehlenkamp & Gutierrez, 2004). Actions with a low likelihood of death but covered by the term "self-harm" have been described as suicidal behaviours, deliberate self-harm, other self-harm behaviours, self-mutilation, self-wounding and self-injurious behaviour (Skegg, 2005). A suicide attempt, by definition, is an intentional action to end life (Nock, Joiner, Gordon, Lloyd-Richardson, & Prinstein, 2006). The most serious forms of DSH relate closely to suicide, while behaviours at the milder end of the spectrum merge with other reactions to emotional pain (Skegg, 2005). Previous studies have shown that it is difficult to draw the line between suicide attempts and DSH acts of adolescents because of the serious forms of DSH and complexity and mix of intentions behind the latter (Skegg, 2005).

Between 5 and 9% of adolescents in Australia, USA and England report having self-harmed in the previous year, with few episodes seeming to be true suicide attempts (Skegg, 2005). The incidence of DSH among adolescent inpatients is much higher, ranging from 40% to 61% (Suymoto, 1998). DSH is linked with suicide, since 25–50% of those committing suicide have previously self-harmed (Hawton & James, 2005). Previous research has shown high prevalences of depressive disorders (Burgess, Hawton, & Loveday, 1998; Harrington et al., 2006) in adolescents presenting to hospitals or psychiatric services following DSH. Moreover, in a prospective cohort study rates of depression distinguished adolescents with DSH who self-harmed in adulthood from those who did not (Harrington et al., 2006). Besides depression, common disorders among hospitalized adolescents with DSH have been oppositional defiant disorder, conduct disorder, substance use disorders, post-traumatic stress disorder and generalized anxiety disorder (Burgess et al., 1998; Nock et al., 2006). Further, adolescents with DSH have had higher levels of depressive (Haavisto et al., 2005; Hawton, Rodham, Evans, & Weatherall, 2002; Ross & Heath, 2002) and anxiety symptoms (Haavisto et al., 2005; Ross & Heath, 2002) in community samples. Most studies of DSH have been conducted on adolescent community samples or adolescent inpatients, so information regarding depressed adolescent outpatients with DSH is scarce.

Despite the high prevalence of risks related to DSH among adolescents, little is known about the determinants of DSH. Previous studies show that family structure, parental divorce, severe illness of a parent, and living apart from parents are associated with DSH both in community studies (Haavisto et al., 2005; Mittendorfer-Rutz, Rasmussen, & Wasserman, 2004) and among adolescent inpatients (Beautrais, 2001; Haavisto et al., 2005; Skegg, 2005). Moreover, heavy alcohol use has been shown to increase the risk of DSH (Haavisto et al., 2005; Skegg, 2005).

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