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Psychological characteristics of self-injurious behavior

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Abstract

This investigation explored the psychological characteristics of self-injury, as well as the frequency of self-injury in a college sample. Two hundred and twenty individuals who self-injure were recruited from a self-help website. These were compared to college students who were not specifically seeking help for self-injury. It was found that 20% of the college students reported having self-injured at some point in their lives. The participants were given the following measures: Dissociative Experiences Scale (DES), Toronto Alexithymia Scale (TAS), the Childhood Trauma Questionnaire (CTQ), and the Trauma Symptoms Checklist (TSC). A discriminant function analysis was conducted to differentiate the groups. Depression from the TSC and emotional neglect from the CTQ most strongly differentiated the internet group from the college non-self-injuring group. Additionally, the TAS was strongly related to the function differentiating these groups. The college self-injury group could not be differentiated from either of the two groups. This study suggests that individuals who self-injure may not have received adequate emotional nurturance, and currently have high levels of negative affect which they wish to avoid.

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Keywords: Self-injury; Trauma; Alexithymia; Neglect; College students

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1. Introduction

Self-injury can be characterized as a behavior in which a person causes deliberate harm to his or her body without suicidal intent. Self-injurious behavior has been differentiated from suicidal attempts (Muehlenkamp, 2005; Muehlenkamp & Gutierrez, 2004) as well as from body modification practices such as piercing and tattooing (Walsh, 2006). Although self-injury is often seen in individuals with developmental disability or psychosis (Favazza, 1998), it has become an increasingly prevalent phenomenon in individuals without these disorders and is considered by some to be a separate clinical syndrome worthy of a category in the DSM (Muehlenkamp, 2005). It is estimated that approximately two million Americans engage in this activity (Favazza & Conterio, 1988; Favazza, DeRosear, & Conterio, 1989). While this phenomenon has recently gained more attention in the research literature, much of that research has tended to focus on individuals with major psychiatric disorders, most commonly Borderline Personality Disorder (BPD) (e.g. Bohus et al., 2000; Kemperman, Russ, & Shearin, 1997; Russ et al., 1996; Shearer, 1994). There has also been little research exploring the psychological differences between those who self injure and those who do not.

The reported rates of self-injury in the general population have varied greatly. The most widely reported rate for the general population is 750 in 100,000 (Favazza & Conterio, 1988). However, this number is clearly outdated, as more recent studies have pointed to much greater rates among non-psychiatric patients. Rates in a college population have ranged from 14% to 41% in recent investigations (Favazza et al., 1989; Gratz, Conrad, & Roemer, 2002; Paivio & McCulloch, 2004). Given the wide variation in reported percentages of people engaging in SIB, further investigation of the frequency of SIB in non-clinical samples is warranted.

While better understanding how frequently SIB occurs in a college sample is useful, it is also important to investigate what could be motivating individuals to self-injure. Collectively, research involving both clinical and a few non-clinical samples have found several variables which seem to predict self-harming behavior. These include: trauma (Zlotnick, Mattia, & Zimmerman, 2001), emotional and physical neglect (Bernstein et al., 2003; Gratz et al., 2002; van der Kolk, Perry, & Herman, 1991), sexual abuse (Bernstein et al., 2003; van der Kolk et al., 1991), alexithymia (Zlotnick et al., 1996, 2001), and dissociation (Saxe, Chawla, & Van Der Kolk, 2002; Zlotnick et al., 2001).

1.1. Trauma

A history of trauma has been one of the risk factors most strongly related to self-injury. Specifically, childhood trauma has been found to be highly predictive of future self-injury, with childhood sexual abuse (Favazza, 1992; Favazza & Conterio, 1989; Herman, Perry, & van der Kolk, 1989; Low, Jones, MacLeod, Power, & Duggan, 2000; van der Kolk et al., 1991; Zlotnick et al., 1996) and physical abuse (Favazza, 1992; Favazza & Conterio, 1989; van der Kolk et al., 1991) the most strongly related. In a study with those diagnosed with a personality disorder, van der Kolk et al. (1991) found 79% of those patients who reported self-cutting also reported a history of childhood abuse and 89% reported parental neglect. Recently, parental maltreatment was found to distinguish college students who self-injured from those who did not (Gratz, 2006).

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