The developmental psychopathology of self-injurious behavior:
Compensatory regulation in posttraumatic adaptation

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Abstract

This article utilizes a developmental psychopathology framework to explicate one pathway, originating in
childhood traumatic experience, toward the development of self-injurious behavior (SIB). The descriptive
psychopathology of SIB is summarized first, followed by an overview of theoretical interpretations of SIB within
psychoanalytic, neo-analytic, behavioral, and biological paradigms. Building on these empirical and theoretical
foundations, a developmental psychopathology framework is used to model the development of SIB in the
aftermath of childhood traumatic experience, particularly maltreatment. In this model, maltreatment undermines
positive adaptation at motivational, attitudinal, instrumental, emotional, and/or relational levels of competence.
In turn, vulnerabilities in the child’s adaptive resources necessitate the application of alternative regulatory and
relational strategies, such as self-injury, to the negotiation of contemporaneous and prospective developmental
issues. The article concludes with a discussion of the empirical and clinical implications of a developmental
understanding of SIB as a compensatory regulatory strategy in posttraumatic adaptation.

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We turn to the body because it cannot be denied. We get old, we die, we disintegrate into dust, but our
living bodies are proof of our here-and-now existence in a world that is too often numb and confusing. (Hewitt, 1997, pp. 20–21)
1. Introduction

There is a significant and growing body of empirical research on self-injurious behavior (SIB; see Feldman, 1988; Lester, 1972; Winchel & Stanley, 1991, for reviews). To date, however, the literature on SIB remains predominantly descriptive. There is a pressing need for a unifying theoretical framework to organize the extant data on SIB and to guide future research. Developmental psychopathology provides a conceptual framework for understanding SIB. In particular, the organizational theory of development (Cicchetti & Schneider-Rosen, 1986; Cicchetti & Sroufe, 1978; Sroufe, 1990b; Sroufe & Rutter, 1984) can contribute to a developmental understanding of the widely observed association between childhood trauma and SIB. Although self-injury manifests itself across an array of populations and a broad continuum of behaviors, the relation between childhood trauma and self-injury is particularly robust (Low, Jones, MacLeod, Power, & Duggan, 2000; van der Kolk, Perry, & Herman, 1991; Wiederman, Sansone, & Sansone, 1999).

This article reviews the empirical and theoretical literature on self-injury and introduces a developmental psychopathology model of SIB in the aftermath of childhood traumatic experience, particularly maltreatment. Section 2 provides an overview of the varied contexts within which SIB occurs and of issues pertaining to the classification and definition of pathological SIB. Section 3 reviews epidemiological and empirical research on the descriptive psychopathology of SIB. Section 4 summarizes diverse theoretical interpretations of SIB within psychoanalytic, neo-analytic, behavioral, and biological paradigms. Section 5 provides an overview of the developmental psychopathology perspective, as conceptualized within the organizational theory of development. Section 6 explicates the role of childhood trauma in development with respect to its negative impact on multiple levels of competence (i.e., motivational, attitudinal, instrumental, emotional, and relational; see Sroufe, Egeland, & Carlson, 1999, for discussion). A developmental model clarifies how childhood traumatic experiences can instantiate vulnerabilities across core aspects of adaptive functioning. In turn, these vulnerabilities in adaptive resources predispose the individual to turn toward self-injury as a compensatory regulatory and relational strategy that enables the negotiation of future developmental issues. The article concludes with a discussion of empirical and clinical implications of a developmental psychopathology perspective on SIB to inform future research and intervention efforts.

2. Classification and definition

Favazza (1987/1996) was among the first scholars to articulate a meaningful distinction between SIB occurring in a ritualized or group context and pathological SIB. Rituals involving SIB (e.g., adolescent rites of passage) maintain the stability of the community and its social order. Although the modern body modifier engages in SIB (e.g., piercing, tattooing, branding) to mark her/himself as different from the mainstream culture (Myers, 1992; Sanders, 1989; Vale & Juno, 1989), modern body modifications, like ritualized self-injuries, are usually planned, decorative, and socially contextualized in a way that pathological SIB is not (Hewitt, 1997). The major difference between ritualized or group body modifications and pathological self-injury is the sociocultural and intrapsychic context: “one is a shared act of pride [or defiance]; the other a secretive act steeped in shame” (Gasperoni, 1998, p. 78).
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