

Aggression Leads to Non-Suicidal Self-Harm Among Youths

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Abstract: The objective of the current paper is to correlate the relation between aggression level of an individual and their involvement in non-suicidal self-Injury (NSSI). It was hypothesized that there will be a strong correlation among aggression and NSSI. To test this hypothesis, aggression questionnaire by Buss and Perry and FASM was administered on a college sample of 120 students, 60 male and 60 females with mean age being 20 years. The results showed correlation between aggression and NSSI with coefficient of correlation being 0.14. A detailed discussion is also presented about the various forms of self-harm being reported and their frequency.

Keywords: Aggression, Non-suicidal self-harm, NSSI, Youth.

1. Introduction

Youth is the period between childhood and adult age. The UN would define 'youth' as a period of age group between 15 and 24 years. Youth is a phase in life where everyone tries to explore and enhance as an individual but sometimes few acts lead to inappropriate behavior. The incidents of self-harm injury amongst the youth have increased drastically over the past years. Hence, a need for relevant information, training and treatment strategies were realized specially among the school and university counselors because most of the self-harm injury has been reported by them.

Non-suicidal self-injury (NSSI) can now be found on ground levels and a genuine cause of concern than it was previously thought. NSSI has been correlated with many psychological components such as comorbidity with depression, anger, frustration and presence of mixed emotional states. Aversive emotions such as anger, depression, loneliness and frustration have been reported to reduce when indulged in such self-destructive behaviors, followed by a sense of comfort and satisfaction.

According to American Psychological Association (2015) Non-Suicidal Self-Injury commonly known as NSSI is generalized as calculated, intentional self-harming injury which is not attempted with suicidal intentions. Muehlenkamp et al., (2009) found out that females indulged more in NSSI activities as compared to males whereas males depicted a decline in NSSI activities. Tang et al., (2016) found that students who are better at managing their emotions were at a less chance of attempting non-suicidal self-injury activities.

A contrary set of ideas had been reported by males and females indulging in self-harm. Males indulged in self-harm to influence/communicate others or out of sheer boredom, whereas females indulged in self-harm activities for seeking relief of intra-punitive factors such as self-hatred, depression, loneliness (Richardson et al., 2007)

Self-injurious commonly cut their skin, hit or push objects causing injuries to themselves, overall, they may perform activities with less severe harm than suicide which might not end their life.

The causal factors of NSSI includes both to regulate emotional states and to gain social reinforcement by influencing others. The most common reason for endorsement in non-suicidal self-injury (NSSI) was 'to feel relaxed' and 'to get control of the situation', and the least frequent reason found was 'to make others angry' and 'to avoid college, work, or other activities' (Kharsati & Bhola., 2015).

Although self-injurers may harm any part of their body, some of the most frequently self-injured parts are hands, wrists, stomach and thighs. Jennifer et al., (2009) concluded that India encounters 33.8% cases of NSSI, wherein 19.4% of them are minor indulgent and 14.6% are major NSSI cases. It was further reported that at least 6.8% of proportion indulged self-injurious activities along with suicidal tendencies.

It was found that aggression is an important causal factor in NSSI. As demonstrated in Diathesis Stress Model given by John Mann, one crucial constitutional predisposition to injurious behavior. Individuals who encounter more aggression in daily life tend to indulge in self-injurious activities more often. Aggression can be used to anticipate a suicide and increases the rate of suicidal behavior (Tang et al., 2013).

Tang et al., (2013) found that high commonness of NSSI and established correlation between hostility, verbal and indirect aggression forms which are the potential risk causing attributes for NSSI amongst students.

Zhang et al., (2012) found that hostility and physical aggression are correlated with suicidal attempts. It was further discussed that trait anger was negatively associated with suicidal attempt whereas hostility was positively correlated. It was concluded that hostility, physical aggression and trait anger are predictors of suicidal behavior amongst adolescents.

Waterman et al., (2015) research supports an association

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between aggressions and self-harm through data on the frequency with which the individuals exhibit both behaviors. It was found that most case-control studies had elevated levels of aggression in self-harming population Kleiman et al (2015) found that higher levels of trait aggression differentiated those who engaged in hitting NSSI from those who were not associated with greater frequency of hitting non-suicidal self-injury.

Silverman et al (2018) found that participants with non-suicidal self-injury history reported poorer social adaptation and greater alienation and boredom, aggression, and emotional lability than control. Izutsu et al., (2006) research indicates that self-harm is an important problem, even among children as young as junior high-school age.

Youth with high-frequency non-suicidal self-injury (NSSI) were also more likely to utilize emotional discharge as an unhealthy coping response than controls. Palmer & Marrrtin (2016) found that children indulged in self-harm activities basically to regulate their emotional outburst.

Young et al. (2007) found out that students who were studying in full-time educational setting are more likely to indulge in self-harm with the main intention of reducing anxiety. Emotional dysregulation was found to account for vulnerability to aggression and self-injury (Terzi et al., 2017). Klonsky (2007) reported that self-harm injury is more commonly practiced in order to reduce negative emotions.

Taliaferro et al., (2012) reported that factors such as depressive symptoms, hopelessness, physical abuse, less parent connectedness, running away from home, and maladaptive dieting behavior are related with self-harm among students. Amanda et al., (2016) explored causal factors of self-harm. It was found that dealing with distress and exerting interpersonal influence was the most researched causal factor of self-harm. They also found that people would engage in self-harm for self-validation, or to achieve a sense of mastery. Plener et al., (2009) did the comparative study on the students of USA & Germany and found that maximum students were endorsed at least one act of non-suicidal self-injury (NSSI) in their lifetime and some of them hurt themselves repeatedly. Laporte et al., (2017) found that students who had engaged in non-suicidal self-harm at some point in their life they are more likely to do self-harm in several occasions.

In the current paper, it is hypothesized that there a strong correlation between aggression and indulgence in Non-Suicidal Self Harm. Those that involve in Self-harm activities such as cutting, picking a wound, hitting object etc., tend to be high on aggression too. Since it has been reported by most of the individuals who indulged in self-harm activities on a more frequent basis that doing such activities helped them release their anger and helped them calm down. The core objective of this paper is to establish a theoretical framework in understanding the density of NSSI occurrence amidst the youth in India and also figure out the causal factors associated with such harming behaviors. Aggression on any grounds is rather harmful and requires a less disturbing way to sublimate it, and on the contrary indulgence in self-harming behaviors can be quite dangerous and in extreme fatal. There is a lack of

scientific study on this topic especially in Indian context. Therefore, the current paper shall be useful in eliminating that gap and also raise awareness regarding NSSI.

2. Methodology

Sample:

In the present study the sample comprised of 120 students across India. The sample covered the students' age group from 19-23 years (60 males & 60 females).

Tools Used:

Aggression Questionnaire:

The Aggression questionnaire is developed by Buss and Perry in 1992. It is one of the most commonly administered scales for assessment of Aggression. The Aggression scale consists of a total number of 29 items scored on a 5-point Likert scale where 1 refers to "extremely uncharacteristic of me" and 5 refers to "extremely characteristic of me". The scale assesses aggression on 4 factors, Physical Aggression (PA), Verbal Aggression (VA), Anger (A) and Hostility (H). Physical aggression refers to indulgence in aggression with the intend to physically harm others. Verbal aggression refers to the aggression in terms of communication such as arguments in order to raise their supremacy over the situation. Anger component refers to general feeling of frustration and irritability that results in an all-round negative affect. Hostility refers an unfriendly or hostile state, sometimes comorbid with paranoid thought patterns. The test-retest reliability of the scale was found out to be 0.78. The discriminant validity of the scale was found out to be 0.92.

The Functional Assessment of Self-Mutilation (FASM):

The FASM is developed by Lloyd, Kelley & Hope in 1997. It is a commonly administered scale used to measure non-suicidal self-injury. It is useful for the assessment of frequency, functions, and other attributes of self-mutilating behaviors. The scale addresses to questions concerning such as the degree of physical pain experienced, approximate time they assumed to be indulged in the behavior, usage of any kind of toxication such as drugs or alcohol during the period. It consists of two sections; first section is of checklist format stating 11 self-harming behaviors such as burning, cutting, erasing the skin etc. The second part of the scale is especially for the people who indulged in the Self-mutilating Behaviors which includes 22 items questioning the reasoning of indulgence. These items are on a 4-point Likert scale, where 0 represents "never", 1 is "rarely", 2 stands for "some" and 3 is "often". The FASM requires a respondent to endorse or deny 12 NSSI methods and for each endorsed item, to report the frequency and whether medical treatment was necessary. The test-retest reliability of the scale was found out to be 0.44 and the concurrent validity was 0.54.

Procedure:

To conduct the research permission was taken from the university. Students were asked to fill Consent form priorly. Snowball sampling technique was employed for the study. The students were given individual attention while filling in the questionnaires. Scoring was done as per the manual & correlations were calculated for data analysis.

Table 1
The correlations for aggression and non-suicidal self-injury for mixed sample

	Mixed Sample (Males and Females)
Correlation (Aggression and Non suicidal self-injury)	0.14 **

**sig. at .05

3. Results, Discussion and Conclusion

In the present study, Aggression and Non-Suicidal Self Injury were found to be significantly correlated. This shows that youth indulge in self harm activities have higher level of aggression. Table 1 shows the value of correlation. The results revealed that youth showed positive correlations between Non-Suicidal Self Injury & Aggression. Also, the pie chart depicts the percentage of Self harming behavior among males and females (See Figure 1).

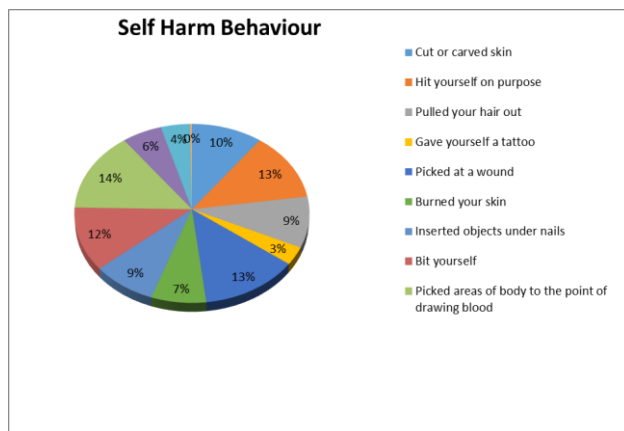


Fig. 1. Pie diagram showing the percentage of Self-harming among males and females

Now-a-days the indulgence of the youth in Non-Suicidal Self Harm has increased to an alarming rate. The causal factors include unsolved emotions, anxiety, rebellious behavior, frustration arising due to environmental and personal stressors. According to Nock's theory (2009), individuals with less positive emotionality differentiation will be more prone to engaging in Non-Suicidal Self harming activities. All of these factors' effects youth's overall psychological wellbeing and their adjustment towards the society (Ferrara.,2012). Almost all the self-injurers claimed they tend to indulge in self-harming activities in order to eliminate negative emotions. Non-Suicidal Self Harm has been present in the society in approximately 10% of the population at present time (Halicka & Kiejna., 2018). Non suicidal Self Harm was previously not considered as a mental illness which made the society pay less attention to this behavior which explains the rising prevalence of Non-Suicidal Self Harm all around the world.

The present study focused on the relation between aggression level of an individual and the involvement in Non-Suicidal Self harming activities. Self-administrative questionnaire was administered on a college sample of 120 students, 60 boys and 60 girls with their mean age being 20 years. Evidence suggests that aggression and self-harm frequently co-occur. The results showed a strong correlation between aggression level and indulgence of an individual in Non-Suicidal Self Harm with the correlation coefficient being 0.14 at a significance of 0.5.

Some of the common forms of indulgence in self harming activities including cutting arms, picking a wound, hitting objects etc. A pie chart depicting the indulgence of youth in various forms of self-harming behaviors has been shown in the present paper (Fig. 1).

The root causes of non-suicidal self-harm are still unknown as there is no single reason. Although it has been empirically studied that poor coping mechanisms and difficulty in handling in one's emotion may have an impact on indulgence in such behavior. Indulgence in such harmful behaviors often results due to inability to find a healthy alternate to let go off emotions and get rid of them. It has also been observed that the people who indulge in these behaviors have low emotional Intelligence. They face challenges in dealing with emotions, understanding emotions and also in expressing emotions. There is a bundle of emotions in them, which are usually a complicated blend of emotions. In some cases, the act of self-harming may be perceived as giving punishment to oneself. The indulgent may also enjoy the feeling of control they get over their body and the tolerance of pain is perceived as a sign of superiority and bravery.

In order to minimize the effects of Self harming activities one must take psychological counseling sessions which are especially aimed at boosting the self-injurers self- esteem and helping them eliminate their negative emotions and also teaching ways to channelize their negative emotions in a more productive and socially acceptable manner.

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