Contents lists available at ScienceDirect

Journal of Adolescence

journal homepage: www.elsevier.com/locate/jado

Social exposure and emotion dysregulation: Main effects in relation to nonsuicidal self-injury

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ARTICLE INFO

Article history: Received 10 February 2017 Received in revised form 23 July 2017 Accepted 24 July 2017

Keywords: Social learning Self-injurious behavior NSSI Emotion regulation

ABSTRACT

We examined the relation of interpersonal and media exposure to nonsuicidal self-injury (NSSI) among 340 university students in the southeastern United States (73.5% female, M age = 19.38 years, SD = 1.15). We also assessed interactions and main effects of each exposure and emotion dysregulation in relation to NSSI, testing the social learning hypothesis of NSSI. Most participants endorsed medium to high levels of exposure to NSSI via media sources. More than one-third of participants were somewhat or very familiar with someone who engaged in NSSI. Almost half reported occasional or frequent conversations about NSSI. Both exposure forms were significantly related to NSSI history. However, hurdle regression analyses revealed that interpersonal exposure and emotion dysregulation, but not media exposure, were significantly associated with NSSI history and frequency. We did not find evidence for an emotion dysregulation-by-interpersonal-exposure interaction. We discuss implications for theoretical models of NSSI, limitations, and future directions.

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Social cognitive theory suggests that modeling can lead to the acquisition of unhealthy as well as healthy behaviors (Bandura, 2001). Previous work has documented the effect of social learning on suicidality, substance abuse, disordered eating, as well as positive behaviors such as exercise (e.g., Akers, 1977; DiLorenzo Stucky-Ropp, Vander Wal & Gotham, 1998; Fischer & Smith, 2008; Gould, Jamieson, & Romer, 2003; Levine & Smolak, 1998). Recently, researchers have examined social learning as an etiological mechanism underlying nonsuicidal self-injury (NSSI; e.g., Hasking, Andrews, & Martin, 2013; Heilbron & Prinstein, 2008). NSSI is defined as direct and intentional destruction of body tissue without the intent to die that is distinct from socially condoned behaviors such as tattooing or piercing (Nock, 2010). Such behaviors occur across the lifespan, but are particularly prevalent among adolescents and young adults (Nock, 2010; Swannell, Martin, Page, Hasking, & St. John, 2014). Although researchers have begun to document the effect of social learning on NSSI among adolescents, less is known about its function among young adults (e.g., Claes, L., Houben, A., Vandereycken, W., Bijttebier, P., & Muehlenkamp, 2010; Jarvi, Jackson, Swenson, & Crawford, 2013; Muehlenkamp, J. J., Hoff, E. R., Licht, J., Azure, J. A., & Hasenzahl, S.J., 2008; You, Lin, Fu, & Leung, 2013). In the current study, we measured both media and interpersonal exposure to NSSI among a sample of young adults. We then examined the social learning hypothesis of NSSI, which states that social exposure to the behavior (via media or through contact with peers) combines with underlying psychological vulnerabilities such as emotion dysregulation to impact engagement in the behavior (Nock, 2010).

http://dx.doi.org/10.1016/j.adolescence.2017.07.015

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Past studies highlight the high prevalence of NSSI among young adults and emphasize the importance of conducting research on the topic. A meta-analytic review of research in non-clinical populations estimated NSSI prevalence rates at 13.4% of the young adult population, with rates from individual studies ranging from as low as 3% to as high as 52% (with the majority of the variance accounted for by methodological factors; Swannell et al., 2014). NSSI has been linked to a broad range of psychopathologies including depression, anxiety, substance abuse, anger, assault, and disordered eating (e.g., Hilt & Hamm, 2014; Jarvi et al., 2013; Weismoore & Esposito-Smythers, 2010). Alarmingly, recent or persistent engagement in NSSI even predicted suicidal ideation in a sample of university students (Hamza & Willoughby, 2014). Given these findings, it is important to examine possible influences for the behavior, so as to guide prevention and intervention efforts.

Individuals overwhelmingly report engaging in NSSI to regulate negative affect, and emotion regulation difficulties consistently emerge as correlates of the behavior (Brickman, Ammerman, Look, Berman, & McCloskey, 2014; Gratz & Roemer, 2008; Klonsky, 2007; Zelkowitz, Cole, Han, & Tomarken, 2016). Nock's four-function model suggests that NSSI serves as a negative reinforcer insofar as it helps to reduce unwanted emotions (Bentley, Nock, & Barlow, 2014; Nock, 2009, 2010; Nock & Prinstein, 2004.) Studies among college students have shown that the down-regulation of negative emotion is a particularly salient motivation for this population (e.g., Anderson & Crowther, 2012; Armey, Crowther, & Miller, 2011; Whitlock et al., 2011). Additional studies have further supported these findings by demonstrating that individuals often report a significant reduction in negative affect immediately after engaging in NSSI (e.g., Armey et al., 2011; Nock, Prinstein, & Sterba, 2009). Chapman, Gratz, and Brown (2006) posited that heightened negative emotions and deficits in the ability to regulate emotions predispose one to engage in NSSI. Etiological theories have highlighted the interplay between distal social, biological, or demographic characteristics and proximal attributes such as emotion dysregulation in the prediction of NSSI (e.g., Nock, 2009). McKenzie and Gross (2014) also outline multiple mechanisms by which individuals may use NSSI, in lieu of more adaptive approaches, to regulate their emotions. Although research supports the statistically significant role of emotion dysregulation in NSSI, effect sizes are relatively small. In addition, other research suggests emotion regulation functions for other dysfunctional behaviors besides NSSI, such as substance abuse and disordered eating (e.g., Aldao, Nolen-Hoeksema, & Schweizer, 2010). These observations suggest the need to consider additional, NSSI-specific, etiological processes in tandem with or as moderators of emotion dysregulation.

Social exposure to NSSI represents one such process to explore. People may learn about NSSI through the media or via their own interpersonal networks (although people may also discover the behavior independently via processes such as pain offset relief; e.g., Franklin, Lee, Hanna, & Prinstein, 2013). Preliminary research suggests that both in-person and media exposure are associated with greater rates of NSSI. Work by Hasking et al. (2013) showed that among Australian adolescents, having friends who engaged in NSSI predicted their own NSSI one year later. In a sample of Chinese adolescents, You et al. (2013) found that having a best friend who engages in NSSI or belonging to a peer group in which the behavior is prevalent significantly increased risk of NSSI after six months. Additional cross-sectional studies have shown that adolescents with friends who engage in NSSI are significantly more likely to engage in NSSI themselves (e.g., Claes, Houben, Vandereycken, Bijttebier, & Muehlenkamp, 2010). The role of social learning in NSSI among university students has received comparatively less attention. In one of the few examinations of social exposure to NSSI among university students, Hasking and Rose (2016) identified a significant association between number of friends who engage in NSSI and lifetime history of the behavior; however, we know little about the means by which such interpersonal exposure occurs (e.g., via conversation or direct observation). Consequently, one goal of the current study was to obtain more nuanced information about the role that interpersonal exposure occurs (e.g., via conversation or direct observation).

Previous research also suggests that exposure to NSSI-related content in the media may influence behavior (e.g., Jarvi et al., 2013; Lewis, Heath, Michal, & Duggan, 2012). In studies of online references to NSSI, participants have reported feeling triggered by graphic videos of the behavior on the Web and learning strategies for engaging in NSSI from those who engage in it (Lewis & Seko, 2016; Lewis et al., 2012; Whitlock, Powers, & Eckenrode, 2006). Initial findings conflict about the impact of NSSI references in movies. Radovic and Hasking (2013) found that greater exposure to NSSI references in movies and greater identification with the movie characters related to increased likelihood of engaging in NSSI. In contrast, Hasking and Rose (2016) found no relation between number of movies with NSSI references and either probability of engaging in any NSSI or frequency of NSSI acts. Given these conflicting results, more research is clearly needed to understand how media exposure relates to behavior in this population. Consequently, a second goal of the current study was to obtain detailed information about the nature of media exposure and its relation to NSSI.

Important work has examined social exposure to NSSI via the framework of social learning and social cognitive theory (Bandura, 1977, 1986). This work has generally focused on identifying main effects of social exposure to NSSI on the behavior and the interactions of social exposure with expectancies about the behavior (e.g., Hasking & Rose, 2016). Nock's theory of the etiology of NSSI, however, posits social learning as one mechanism by which individuals with underlying cognitive or emotional deficits might select NSSI versus another maladaptive behavior (Nock, 2009, 2010). Empirical evidence for this hypothesis would stem from either (1) a multiplicative interaction effect, in which social exposure to NSSI increases the relation of emotion dysregulation to NSSI, or (2) a set of additive main effects, in which both social exposure to NSSI and emotion dysregulation relate significantly to NSSI.

The present study had three main aims. Our first aim was to characterize the extent of both interpersonal and media exposure to NSSI in a sample of university students by considering multiple types of media and a range of interpersonal domains. Our second major aim was to examine how such social exposures to NSSI relate to self-reported history of the behavior. Our final aim was to examine the combined effects (via either interactions or main effects) of emotion

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