



Original article

Non-suicidal self-injury among Dutch and Belgian adolescents: Personality, stress and coping



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ABSTRACT

Background: This study examines: (1) the prevalence of Non-Suicidal Self-Injury (NSSI) among Dutch and Belgian adolescents, (2) the associations between Big Five personality traits and NSSI engagement/versatility (i.e., number of NSSI methods), and (3) whether these associations are mediated by perceived stress and coping.

Methods: A total of 946 Flemish (46%) and Dutch (54%) non-institutionalized adolescents (Mean age = 15.52; *SD* = 1.34, 44% females) were surveyed. Measures included the NSSI subscale of the Self-Harm-Inventory, the Dutch Quick Big Five Personality questionnaire, the Perceived Stress Scale and the Utrecht Coping List for Adolescents. Examination of zero-order correlations was used to reveal associations, and hierarchical regression analysis was used to reveal potential mediators which were further examined within parallel mediation models by using a bootstrapping-corrected procedure.

Results: Lifetime prevalence of NSSI was 24.31%. Neuroticism; perceived stress; and distractive, avoidant, depressive, and emotional coping were positively associated with NSSI engagement, whereas Agreeableness, Conscientiousness; and active, social, and optimistic coping were negatively associated with NSSI engagement. Observed relationships between personality traits and NSSI engagement were consistently explained by perceived stress and depressive coping. A higher versatility of NSSI was not associated with any Big Five personality trait, but was associated with higher scores on perceived stress and depressive coping and with lower scores on active and optimistic coping.

Conclusion: Our study suggests that a specific personality constellation is associated with NSSI engagement via high stress levels and a typical depressive reaction pattern to handle stressful life events.

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1. Introduction

Non-suicidal self-injury (NSSI) refers to the deliberate and direct injury to one's own body surface without suicidal intent, and includes behaviors such as cutting, scratching and burning the skin [19,53]. NSSI typically starts and peaks in adolescence [37,58]. A recent meta-analysis estimated a pooled lifetime prevalence of 26.70% when specifically investigating NSSI methods, and demonstrated equivalent NSSI engagement across gender [64]. However, methods of NSSI have been suggested to be different between the two sexes, with females more likely to engage in self-cutting or

self-scratching, and males more likely to engage in self-hitting, self-burning and head banging [3,7,8,9,69]. Because NSSI poses a health concern among youth worldwide [50,64], a deeper understanding of this destructive behavior is highly needed. The latter was recently emphasized in *DSM-5*, with the new inclusion of Non-Suicidal Self-injury Disorder as a “condition requiring further study” [6,72]. From previous studies, it is known that NSSI is more common in people with mental disorders (specifically mood disorders) [34,55], those with a history of childhood adversities [49], or those with suicidal ideation [25]. However, most people with these risk factors alone do not engage in NSSI. There is evidence that personality traits also contribute to problem behaviors [40], and that certain personality traits are related to NSSI engagement. Previous research with the Big Five personality model – which is a valid way to differentiate

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individuals [47] – suggested that self-injurers score higher on Neuroticism and Openness to experience, and lower on Agreeableness and Conscientiousness than their peers without NSSI [14,18,30,42]. Furthermore, NSSI versatility (i.e., number of NSSI methods), which can be considered as a measure of NSSI severity [55,63], was also associated with more Openness to experience and less Conscientiousness [60]. Moreover, self-injurers were found to be more likely to have a personality disorder (specifically cluster B) [20,55]. However, although research has consistently shown relations between personality and NSSI, it is unclear why this relation may exist.

Adolescence is a potential stressful period with important biopsychosocial changes taking place; adolescents are thus confronted with several challenges in their psychological functioning (e.g., separation from the parental environment) [4]. In a transactional approach, personality is assumed to influence the amount of stress individuals experience [41]. Individuals with high scores on Neuroticism are expected to experience more stress, whereas those with high scores on the other Big Five personality traits will experience less stress on a daily basis [5,31,56,68]. Besides the influence on perceived stress, a transactional model also assumes that personality affects the coping strategies to get over stressful events [41]. A meta-analysis by Connor-Smith and Flachsbart [24] found that, in general, neurotic individuals express negative emotions and use avoidance-oriented coping such as withdrawing from stressful situations. Furthermore, individuals with high scores on Agreeableness and Conscientiousness were more likely to use approach-oriented coping strategies (like cognitive restructuring or problem solving). Emerging evidence is suggesting that perceived stress and coping may mediate the relationship between personality and psychopathological symptoms [12,16,70,71]. Interestingly, NSSI engagement was already found to be associated with more perceived stress [27], and more emotional and avoidance-oriented coping [2,15,17,26,33]. However, so far, no study has investigated the role of perceived stress and coping as factors potentially underlying the relationship between personality and NSSI engagement/versatility, leaving an important gap in the existing knowledge on potential pathways leading to NSSI.

In order to address these limitations, the purpose of the present study was to examine the relationship between personality, perceived stress, coping and NSSI engagement/versatility. Therefore, the aims of this study were threefold. First, to examine the lifetime prevalence and methods of NSSI in a sample of Flemish and Dutch adolescents. Second, to examine associations between personality traits, perceived stress, coping, and NSSI engagement/versatility. Third, to examine perceived stress and coping strategies as factors potentially underlying the relationship between personality traits and NSSI engagement/versatility.

2. Methods

2.1. Procedure

The target population was Dutch and Belgian adolescents in the 8th to 12th grade. After obtaining ethical approval, participants were recruited from classes in grades 8 through 12 (convenience sampling, i.e., each school board decided their participation rate) across 6 randomly selected high schools located in different areas of the Flemish-speaking part of Belgium and in the Netherlands. An average of 159 pupils per school participated (range 41–296). The parents of selected participants were informed about the nature of the survey through a letter sent home, and no parents refused participation of their child. However, a potential bias due to absenteeism on the days the survey was administered cannot be excluded. Pupils signed an informed consent form, which

emphasized the confidentiality, the background of the study, and the voluntary nature of participation. All adolescents who were present agreed to participate and completed a paper-and-pencil survey of approximately 30–40 minutes. After completing the survey, forms were returned in sealed envelopes. Adolescents were not compensated for their participation.

2.2. Subjects

One thousand thirteen adolescents provided data. Sixty-seven cases were excluded because they gave no answer on the NSSI questions, with the excluded cases being more likely male, younger, and less neurotic, open to experience, agreeable and conscientiousness than the included cases (all $P < .05$; data on request). The final sample consisted of 508 Dutch and 438 Flemish-speaking Belgian adolescents, of whom 408 were female and 511 were male (27 did not provide information about their gender). The mean age was 15.52 years ($SD = 1.34$, range 12–19 years), with boys [$M(SD) = 15.64(1.33)$] being slightly older than the girls [$M(SD) = 15.37(1.33)$], $F_{1,874} = 9.01$, $P = .003$. Of the 946 high school pupils, 105 were 8th graders, 179 9th graders, 210 10th graders, 287 11th graders and 151 12th graders (14 did not provide their grade). Given that some participants had missing values on at least one of the independent study variables, the mediation analyses were run on 819 high school pupils (i.e., listwise deletion), who were older, more neurotic, less open to experience, experienced more stress and used more distractive coping than the cases with item-missingness (all $P < .05$; data on request).

2.3. Instruments

2.3.1. Non-suicidal self-injury

The NSSI subscale of the Self-Harm-Inventory was used to assess the presence of prior NSSI [62]. Participants were asked in a yes/no question format whether they had “ever intentionally, or on purpose” engaged in seven self-injurious methods without suicidal intent (i.e., cutting oneself, burning oneself, hitting oneself, head banging, scratching, preventing wounds from healing or others). Engagement in NSSI was considered affirmative, when participants indicated to have engaged at least once in one of the specified behaviors. Kuder-Richardson coefficient (KR-20) provided an internal consistency of 0.70 for the current sample. Besides the lifetime prevalence of the specified behaviors, participants also indicated the age of onset of NSSI and NSSI versatility, which was calculated by counting the number of methods endorsed by self-injuring participants, ranging from 1 to 7. Although the absolute skewness of 1.73 was not considered problematic [39], NSSI versatility was log10-transformed to increase normality.

2.3.2. Personality

Personality traits were assessed by means of the Dutch Quick Big Five Personality questionnaire [67], a shortened Dutch translation of Goldberg's original 100 item-adjective list [29]. Each personality disposition is measured by 6 adjectives. Examples of items are “nervous” (i.e., Neuroticism), “talkative” (i.e., Extraversion), “creative” (i.e., Openness to experience), “pleasant” (Agreeableness), and “accurate” (Conscientiousness). Participants indicated, on a 7-point Likert scale, to what extent the adjectives applied to them. Composite scores ranged from 1 to 7, with higher scores indicative of higher levels of the specific trait. Because the scales appeared to correlate with criterion variables such as depressive feelings, convergent validity is suggested to be good [67]. In this sample, Cronbach's alpha coefficients were: .83 for Neuroticism, .73 for Extraversion, .84 for Openness to experience, .84 for Agreeableness and .87 for Conscientiousness.

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