Longitudinal predictors of past-year non-suicidal self-injury and motives among college students

MAJOR FINDINGS:

Non-suicidal self-injury (NSSI) is the direct and intentional destruction of one’s body tissue without suicidal intent, and includes self-cutting, scratching, burning, and implanting objects under the skin. Based on previous research, it is estimated that approximately 15% of adolescents and 5% of adults engage in NSSI. This study presented new findings regarding prevalence, motives, triggers, and correlates of NSSI among college students.

Out of a sample of 1,081 college students, 7% reported NSSI within their lifetime and 2% within the past year. Among those who had ever self-injured, 7% had done so only once, while 51% had self-injured at least six times. Compared with the whole sample, individuals with a history of NSSI were more likely to be female (73% of all self-harmers vs. 54% of the sample) and non-heterosexual (21% vs. 8%). Those who identified their sexual orientation as homosexual, bisexual, or unsure, were six times more likely during the past year to self-harm than heterosexuals and almost four times more likely during their lifetime.

This study helped elucidate common motives for self-injury. For a majority of self-harmers (60%), the motive for NSSI was mental distress, such as feelings of anger, anxiety, or sadness. NSSI was also commonly cited as a coping mechanism (28%) or a response to situational stressors (25%). Less common motives (fewer than 10% of responses) included alcohol problems, sensation seeking, and attention seeking.

NSSI seems to be triggered by a combination of personality factors and exposure to certain environmental stressors. In this study, individuals with affective dysregulation, a severe and persistent inability to control one’s mood, were more likely to have engaged in NSSI sometime in their life and represented 36% of self-harmers. Environmental triggers linked to lifetime NSSI in this sample included history of victimization and exposure to domestic abuse. Having been diagnosed with depression and having a parental history of depression were also highly associated with lifetime NSSI. Looking at the correlates of lifetime and past-year NSSI separately, the researchers found that paternal depression was related to lifetime NSSI, whereas maternal depression and affective dysregulation predicted past-year NSSI. Childhood conduct problems, impulsivity, and alcohol or marijuana use disorder were not associated with NSSI.

The present study advances the existing body of literature on NSSI, especially because it describes NSSI in a non-clinical sample that had passed the peak period of risk for NSSI. Little research has been done on NSSI that persists into adulthood. Results suggest that NSSI that persists into young adulthood might be different from adolescent-limited NSSI, based on the differences in the correlates of lifetime and past-year NSSI in this study. Moreover, given that internal motives for NSSI (such as mental distress) were more important than social motives (unlike in prior studies of younger samples), the researchers speculate that motives for NSSI might change over the course of development, or that individuals whose NSSI persists into adulthood might have different motives.

Of major interest to:

- College Administrators
- Parents
- Educators
- Health Professionals
- Students
- Law and Policy Makers
The College Life Study (CLS) is a longitudinal study of 1,253 college students at a large, public, mid-Atlantic university. This study is one of the first large-scale scientific investigations that aims to discover the impact of health-related behaviors during the college experience. Any first time, first-year student between 17 and 19 years old at the university in the fall of 2004 was eligible to participate in a screening survey. The researchers then selected students to participate in the longitudinal study, which consisted of two-hour personal interviews administered annually, beginning with their first year of college. A full description of the methods used is available.¹,² Inherent to all self-reporting research methods is the possibility for response bias. Because the sample is from one large university, the ability to generalize the findings elsewhere is uncertain. However, response rates have been excellent and attrition bias has been minimal.

For more information about the study, please visit www.cls.umd.edu or contact Amelia M. Arria at the University of Maryland School of Public Health at aarria@umd.edu.


This research brief was prepared by Olga Moshkovich and disseminated by the Treatment Research Institute (TRI), a non-profit research and development group specializing in science-driven transformation of treatment and policy in substance use/abuse. Click here to learn more about TRI.