

SELF-HURT BEHAVIOURS AMONG  
MALAYSIAN CHINESE  
ADOLESCENTS

GUAN TEIK EE @  
KUAN TEIK EE

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SELF-HURT BEHAVIOURS AMONG  
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ADOLESCENTS

by

GUAN TEIK EE @  
KUAN TEIK EE

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## LIST OF ABBREVIATIONS

ANR	Automatic Negative Reinforcement
APR	Automatic Positive Reinforcement
SNR	Social Negative Reinforcement
SPR	Social Positive Reinforcement
ANOVA	Analysis of Variance
N	Sample Size
<i>df</i>	Degrees of freedom
$\chi^2$	Chi-square
<i>M</i>	Mean
<i>SD</i>	Standard Deviation

# TINGKAH LAKU MENCEDERAKAN DIRI DALAM KALANGAN REMAJA CINA MALAYSIA

## ABSTRAK

Kajian ini menggunakan kaedah gabungan untuk meninjau pengalaman tingkah laku mencederakan diri dalam kalangan remaja. Instrumen yang digunakan adalah *Self-hurt Assessment* yang telah diubah suai daripada *Functional Assessment of Self-mutilation* (Lloyd-Richardson, Kelly, & Hope, 1997). Peserta-peserta kajian adalah dari Sekolah Menengah Jenis Kebangsaan dan Sekolah Menengah Kebangsaan di Pulau Pinang, yang terdiri daripada 602 orang remaja dalam lingkungan yang berumur 13 hingga 16 tahun. Peserta-peserta tersebut kemudian dibahagikan kepada dua kumpulan, iaitu Kumpulan Umur 1 (13-14 tahun) dan Kumpulan Umur 2 (15-16 tahun). Dari kalangan peserta tersebut, didapati 342 (56.81%) orang menunjukkan tingkah laku mencederakan diri. Dalam lingkungan semua umur tersebut, secara umumnya, lebih ramai remaja perempuan daripada remaja lelaki mempunyai tingkah laku mencederakan diri. Lima jenis tingkah laku mencederakan diri yang paling tinggi (disenaraikan mengikut urutan frekuensi) adalah: (1) “memotong kulit saya dengan apa-apa objek yang tajam;” (2) “menggunakan pembaris untuk memotong tangan saya atau mana-mana bahagian badan saya,” (3) “menggunakan pemadam untuk memadam kulit saya;” (4) “mengikis kulit saya;” dan (5) “menggigit kuku saya.” Analisis log-linear menunjukkan bahawa lebih ramai peserta daripada Kumpulan Umur 1 (13-14 tahun) mempunyai tingkah laku mencederakan diri dari peserta Kumpulan Umur 2 (15-16 tahun). Analisis ujian ANOVA dua-hala menunjukkan lebih ramai perempuan dalam Kumpulan Umur 2 (15-16 tahun) memberi sebab mencederakan diri di bawah konstruk *Automatic Negative*



*Reinforcement* (“memberhentikan perasaan yang tidak menyenangkan dan memberi perasaan lega”) dan *Social Negative Reinforcement* (“mengelakkan diri daripada membuat sesuatu yang tidak diinginkan.”) Tanpa mengambilkira mana-mana jantina, kajian ini juga mendapati lebih ramai peserta Kumpulan Umur 1 (13-14 tahun) memberi sebab mencederakan diri di bawah konstruk *Automatic Positive Reinforcement* (“memberangsangkan perasaan.”) Lapan orang subjek dipilih daripada 342 orang peserta untuk ditemubual secara lebih lanjut supaya dapat memahami pengalaman tingkah laku mencederakan diri mereka dengan lebih terperinci. Dengan menggunakan prosedur yang dikemukakan oleh Braun dan Clarke (2006), hasil kajian ini menunjukkan sejurus sebelum tingkah laku mencederakan diri, subjek diselubungi oleh pelbagai perasaan yang negatif, di mana kesedihan, ketidakseronokan, dan kekecewaan adalah dominan. Sejurus selepas tingkah laku mencederakan diri, kebanyakan subjek melaporkan perasaan yang positif. Ini menunjukkan konstruk yang paling dominan sebab-sebab mencederakan diri dalam kajian ini adalah *Automatic Negative Reinforcement*. Keputusan data kualitatif juga menunjukkan *support system* remaja-remaja adalah kawan-kawan mereka. Walau bagaimanapun, kawan-kawan subjek menggunakan cara ugutan untuk menghalang subjek dari melakukan tingkah laku mencederakan diri. Kajian ini juga mendapati tiada subjek ingin berjumpa dengan kaunselor tentang masalah tingkah laku mencederakan diri dan kebanyakan mereka melaporkan bahawa mereka tidak mempercayai kaunselor.

# **SELF-HURT BEHAVIOURS AMONG MALAYSIAN CHINESE ADOLESCENTS**

## **ABSTRACT**

This mixed-methods study examined the experiences of adolescents who engaged in self-hurt behaviour. The instrument used was the Self-hurt Assessment, which was modified from the Functional Assessment of Self-mutilation (Lloyd-Richardson, Kelly, & Hope, 1997). The participants were from National Type Secondary Schools and National Secondary Schools within Penang, which comprised of 602 adolescents of ages 13-16 years. The participants were further divided into two groups, i.e. Age Group 1 (13-14 years old) and Age Group 2 (15-16 years old). Of these participants, 342 (56.81%) were found to engage in self-hurt behaviour. In general, more female adolescents engaged in self-hurt behaviour than male adolescents in all age groups. The five highest types of self-hurt behaviour (listed in order of frequency occurrence) were: (1) “used any sharp object to cut my skin;” (2) “used ruler to cut my hand or any part of my body;” (3) “used eraser to erase my skin;” (4) “scraped my skin;” and (5) “bit my nails.” Log-linear analysis revealed that Age Group 1 (13-14 years old) participants engaged more in self-hurt behaviour than Age Group 2 (15-16 years old) participants. A two-way ANOVA showed that more females in Age Group 2 gave reason for self-hurt under Automatic Negative Reinforcement (“to stop bad feelings and to provide relief”) and Social Negative Reinforcement (“to avoid doing something unpleasant that one does not want to do”) constructs. It also revealed that more Age Group 1 (13-14 years old) participants gave reason for self-hurt under Automatic Positive Reinforcement (“to generate feelings”) construct, regardless of gender. Eight

subjects were selected from 342 participants for further interview to gain a better understanding of their experiences of self-hurt behaviour. With the procedures described by Braun and Clarke (2006), this study found that immediately before self-hurt behaviour, subjects were overwhelmed by multiple negative feelings in which sadness, full of bad feelings, and disappointment were dominant. Immediately after self-hurt behaviour, most of the subjects reported positive feelings, indicating that the most dominant construct for reason for self-hurt in this study was Automatic Negative Reinforcement. Qualitative data results also revealed that most of the adolescents' support systems were friends. However, the subjects' friends used the "threat" method to stop subjects from self-hurt behaviour. This study also revealed that none of the subjects were willing to see counsellors for their self-hurt problem, and most of them reported that they did not trust counsellors.

# **CHAPTER 1**

## **INTRODUCTION**

### **1.1 Preamble**

Adolescence is the stage between the phase of growth and that of exploration (Super, 1957). At this stage, despite rapid growth in the physical body, adolescents are emotionally vulnerable. Hall (1904), therefore, used the term “storm and stress” to describe the adolescence stage. In their daily lives, adolescents attempt to tackle problems in an ever-changing and diverse society. It is society’s responsibility to ensure that they have good problem-solving skills and succeed to become well-balanced individuals, so that they may learn the proper ways to handle problems during this stage, a time of rapid growth and change. Today, however, it is common for us to discuss various surgeries in this modern world, but we shrink from discussing emotional or mental pain. Emotional or mental pain could lead to many side effects especially during adolescence. One of them involves adolescents trying to hurt themselves when they cannot handle problems. The basis of this study is the investigation into self-hurt problems that exist among Chinese adolescents in the state of Penang in Malaysia.

### **1.2 Background of the study**

The World Health Organization (WHO, 2001) reported that self-hurt had emerged as one of the factors contributing to the rise in morbidity and mortality rates. Literature also shows that repetitive self-hurt increased the risk of completed suicide with people who self-hurt, being 18 times more likely to kill themselves (van Sell et al., 2005).

In America, about one percent of the population used self-hurt as a means of dealing with overwhelming situations or feeling (van Sell et al., 2005). In the school setting, self-hurt had become a phenomenon addressed daily by school counsellors (Janet & Moyer, 2004), and the majority of self-hurt behaviours began during adolescence (Kubal, 2005). In view of the seriousness, in recent years international concern about young people engaging in self-hurt behaviours has prompted many researchers to carry out studies in the west.

In 2006, the Camelot Foundation & Mental Health Foundation United Kingdom reported at least one out of 15 young people in the United Kingdom had self-hurt problem (Brophy, 2006). In the United Kingdom alone, the rates of self-hurt in teenagers were among the highest in Europe (Anderson, Woodward & Armstrong, 2004). The teenagers ranged from ages 11 to 25, and the average age of onset in the United Kingdom was 12 years old (Brophy, 2006).

Self-hurt was reported to be prevalent not only in the west, but also in the developing world. Eddleston (2000) claimed that it was a major problem responsible for around 600,000 deaths in 1990. He postulated that intentional acts of self-hurt were first noticed in children at age seven, increased in frequency, and by the age of 16, children were hurting themselves as often as any age group of adults (Eddleston, 2000).

According to the Southeast Asian Medical Information Center, the death rates of suicide and self-hurt in 1988 alone in Indonesia, Japan, Singapore, and Thailand were around 7, 38, 28, and 13 per 100,000 population respectively (Southeast Asian Medical Information Center, 1991). In the decade that followed, many studies suggested that the prevalence of self-hurt was higher in adolescents than in adults (Hjelmeland & Grøholt, 2005), especially moderate forms of self-hurt which were most common and responsible

for at least 1,000 per 100,000 population per year (Favazza, 1998). In view of the rising number of incidents, Favazza and Conterio (1988) and Gratz, Conrad, and Roemer (2002) argued that self-hurt was more common than previously thought. Self-hurt is a significant predictor of future suicide and it is associated with significant psychological morbidity (Thompson & Hasking, 2009). Self-hurt, therefore, is an urgent disciplinary and social problem in homes and schools, and counsellors have become the first personnel to be consulted should self-hurt happen, whether voluntarily or involuntarily. It is pertinent to extend the concern and provide multi-faceted services to children and parents in curbing this problem.

In Malaysia, *Sin Chew Jit Poh* (Three hundred cases of deliberate self-harm, 2008, August 11) reported a trend of self-hurt among secondary school students from a number of schools in Johor Baru. *Sin Chew Jit Poh* further reported that in 2007 itself, there were about 300 cases, most of the students using knives to cut their wrists. More recently, *Guang Ming Daily* (Girls cutting wrists to release tension, 2010, June 27) reported that there were students cutting their wrists to release tension in a school in Penang. There were about one or two cases of self-hurt every month in that particular school when the behaviour was at its peak. The news was confirmed by the State Education Department and action was taken to help the students.

Cleaver (2007) claimed that young people who self-hurt were more likely to repeat the behaviour, and this tendency, in turn, increased their risk of completed suicide (Hawton, Fagg, Simkin, Bale, & Bond, 2000; Cleaver, 2007). Thus, identification of vulnerable adolescents who deliberately hurt themselves, how they hurt themselves, and the reasons behind the behaviour may help to prevent escalation of suicidal behaviour.

### **1.3 Rationale of the study**

This study was conducted on Chinese adolescents in Penang, Malaysia. Penang was chosen mainly because it has the largest number of ethnic Chinese as compared with other states in Malaysia (Department of Statistics, Malaysia, 2012).

Another reason for choosing Penang in this study is that Penang is largely urban. Generally, urban adolescents face a much more challenging life-style than rural adolescents (Sebald, 1992). Growing up in a modern urban-industrial society is a complex venture especially in an urban area. The societies surrounding the adolescents are more fast-paced, so that social conflicts and peer pressures are heightened. As the adolescents are emotionally vulnerable, these social conflicts and peer pressures become the risk factors for them to “malfunction” emotionally. A review of the literature suggests that self-hurt becomes one of the problematic behaviours among adolescents because in the development of self-identity, urban adolescents face much more hardship than their rural peers.

Recent years have seen a number of literature reviews focusing on self-hurt in urban areas. For example, Hatzitolios et al. (2001) did a study on self-poisoning presenting in an acute medical service ward in a Greek hospital between January 1998 and December 2000. They found that most of the patients (76.2%) were from urban areas. Likewise, Ross (2004), in her study on ethnicity and family structure, revealed a high percentage of Caucasian students who self-hurt in urban high schools.

In a comparison of adolescents who self-hurt in Germany and in the United States of America, Plener, Libal, Keller, Fegert and Muehlenkamp (2009) also recruited schools situated around cities, suggesting that these clusters of adolescent needed to be given priority should research be carried out.

The choice of an urban setting for this study concurs with that by other researchers. O'Loughlin and Sherwood (2005) chose a town to carry out a 20-year review of trends of self-hurt behaviours. Heath, Toste, Nedecheva, and Charlebois (2008) also chose "a large urban university" to carry out research on self-hurt behaviour among college students, arising from a suggestion by Sebald (1992) -- that adolescents face a greater number of new hardships nowadays than in the past, especially for those who live in urban areas.

In urban areas, most parents work away from home resulting in the adolescents being unsupervised in the afternoon after they return from school. Sebald (1992) mentioned that the negative consequences are that the children are prone to experience feelings of neglect, even rejection, thus developing behavioural problems. They frequently have feelings of anxiety and stress and find it hard to control their impulses. They are suffused with tremendous sexual energy and may find it difficult simply to be around with their parents, especially with working parents who spend less time with them.

In more advanced societies, children often abandon their parents' ways and model their behaviour mostly on that of friends, incorporating images from the mass media. They insist on being independent decision-makers in areas previously under parental control. The evolution of urban culture complicates the inter-generational conflict. The urban lifestyle accentuates the adolescent experience. Penang is a developed state, much of which is urban. Hence, Penang was chosen for this study.

The ethnic Chinese were selected because records from some non-governmental organizations show a higher incidence of self-hurt in this community than in the other communities. For example, counselling records from the Agape Counselling Centre,



Malaysia (2011) show that Chinese youngsters had the highest record of self-hurt problems as compared with adolescents of other races. Therefore, it was compelling that this community of adolescents be first looked into.

Additionally, the ethnic Chinese were chosen as it was hypothesized that their religious and daily practices play some part in contributing towards adolescent self-hurt behaviours. In terms of religion, unlike the Malays in Malaysia who are constitutionally required to follow Islam and have been exposed to the teachings of Islam since young; the Chinese religious commitment varies among individuals. This is because the Chinese “religion” and culture incorporate elements of Buddhism, Taoism, Confucianism, and ancestor-worship. Thus, individuals could claim to be Buddhist or Taoist, but the difference between the two is often blurred. In daily life, it is up to the individuals to show their commitment to their religion in their own way. Adolescents who are not strong in the teaching of religion are, during the time of adjustment, more prone to finding extreme ways to escape when they are dismayed or stressed.

Culture includes everything that a group of people think, say, do, and make sense (Dahlia Zawawi, 2008). It is, therefore, an important element in how people understand issues regarding self-hurt. Most Chinese in Malaysia have maintained their cultural identity. This tradition incorporates a premium value on academic and economic success. The Chinese, therefore, monitor the link between the effort they put in and the outcome they receive. To them, studying well to achieve economic success is supreme. In terms of education, the Chinese encourage their young ones to be the best by using direct and obvious approaches. Chinese parents, therefore, generally emphasize directly to their children to be competent and to achieve good academic results in school and

success in their education. They believe that being educated is the first step towards achieving success.

Being brought up in this environment directly creates some tension and stress among the adolescents, the relief of which is one of the reasons for self-hurt (Lloyd-Richardson, Perrine, Dierker, & Kelley, 2007). It is not surprising, therefore, that most of the self-hurt cases reported in Malaysia involved the ethnic Chinese as reported in *Guang Ming Daily* (Girls cutting wrists to release tension, 2010, June 27) and some non-governmental organizations such as the Agape Counselling Centre Malaysia (2011).

Furthermore, to most Chinese families, the provision of material needs is of supreme importance. According to Dahlia Zawawi (2008), the Chinese are “doing-oriented” performers -- they are extremely hard-working. They want to be successful economically, so they put in a lot of effort and time in order to achieve a good living standard. Hence, some families are constantly father-absent or mother-absent and some even parents-absent. Adolescents are vulnerable to this effect of anomie. The quality of interaction in the adolescent’s family has a definite influence on the adolescent’s behaviour. The Chinese traditional family characterized by patriarchal authority, familistic attitudes, and domicile-work combination has almost vanished in favour of the modern equalitarian family, which emphasizes individualism over familism (Sebald, 1992). Such situation has probably caused the adults not to give equal attention towards their children’s emotional needs, resulting in the lack of relationship with their children, who ultimately develop feelings of abandonment and rejection.

These problems are intensified in adolescents when they need to face the demands of culture and society and at the same time deal with processes of individuation and development of self-identity and self-esteem (Mathews, 2011). Adolescents need to

perform according to cultural and parental expectations. When self-efficacy is deficient, individuals struggle with negative perceptions causing them to be preoccupied with themselves and become emotionally aroused.

A range of factors interact to make a vulnerable individual react in different ways when they are stressed, thus probably pushing them towards an increased likelihood of self-hurt. In view of the extreme demands that the Chinese place on their children when compared with other races, it is logical to first look into the Chinese adolescents with regard to self-hurt.

This research, being a pioneer study, has chosen for its subject the ethnic Chinese in Penang. To identify the prevalence of self-hurt among Chinese adolescents as stated in Research Question 1, it is appropriate to start with an urban setting in carrying out the study, in order to give a better understanding of adolescent self-hurt behaviour in Malaysia. It is therefore a contextual study that the findings can tentatively be extrapolated to other groups and settings in future studies.

#### **1.4 Understanding self-hurt through Freud's and Erikson's theories**

According to the theory of personality proposed by Freud (Freud, 1923/1974), there are three principal constructs in an individual's personality: the *id*, the *ego*, and the *superego*.

The *id* is an instinct and its main function is to fulfil its pleasure principle. In order to fulfil a wish, the psychic energy can be discharged from *id*, thus making one act blindly. The *id* cannot tolerate tension. Whenever tension and pain exist, an individual will act on something to achieve homeostasis, which is a state of tension-free comfort. For example, when a baby is hungry, out of the demand of *id*, the baby's immediate

action is to cry until he/she gets milk. With the milk, the baby has gratified the pleasure principle. If the baby is not fed immediately, a primary process of a memory image of food is produced in order for the baby to reduce tension from hunger. The formation of an image of a tension-reducing object is called wish-fulfilment. The investment of energy in the form of an image of an object that will satisfy an instinct, is called object-cathexis.

The *ego* represents what may be called reason and common sense (Freud, 1923/1974). It acts as the intermediary between the id and the external world and needs to transform the id's will into action (Freud, 1923/1974). The ego is governed by the reality principle. The aim of the reality principle is to postpone the discharge energy of id. That means the ego has to be able to tolerate tension until it can be discharged by an appropriate form of behaviour. It does not mean that the pleasure principle is forsaken but only that it is temporarily suspended in the interest of reality. At this point, logical thinking (the ego) takes the place of wish-fulfilment (id); the development of realistic thinking (the secondary process) will take the place of hallucinatory wish-fulfilment (the primary process). The secondary process is nothing more or less than what is ordinarily called problem-solving.

The *superego* acts as the moral arm of personality. It represents the ideal rather than the real, and it strives for perfection rather than for reality or pleasure. It can block the psychic energy if it thinks it is immoral, or it can direct the discharge of energy through the ego if it thinks it is right (Gilliland & James, 1998). If the idealized-cathexes (moral forces) of the superego thinks it is immoral, anti-cathexes (resisting forces) will be induced to block the discharge of instinctual energy. That is, the conscience of superego opposes the id and tries to suspend the operation of the pleasure

principle. The superego is our sense of right or wrong: it provides guidelines for making judgments. It is like a secret police department, unerringly detecting any trends of forbidden impulses (Horney, 1939).

The anti-cathexes (resisting forces) of the superego differ from those of the ego. The resisting forces of the ego serve the purpose of delaying final action in order that the ego can work out a satisfactory plan. The prohibitions of superego, on the other hand, attempt to abolish all thought of action whatsoever. The superego says “No” to the instinct, while the ego says “Wait.” According to Freud, a person who has a strong superego spends much of his/her energy to defend against the id. As a consequence, he/she becomes “rigid.” The superego is the representative in the personality of the traditional values and ideals of society as they are handed down from parents to children. It is nurtured by our parents and the society in which we grow up.

In reality, if we were to rule entirely by pleasure principle (id), it becomes disruptive and socially unacceptable. Therefore the ego comes in to ensure that the impulses of id can be expressed in a manner acceptable in the real world. For example, when one is hungry, the craving of eating is high (id), but one knows that he cannot steal to get his food (superego), so he has to buy it (ego). The ego seeks to bring the influence of the external world to bear upon the id and its tendencies.

There are no sharp boundaries between the three systems. Perception plays the part which the id falls to instinct (Freud, 1920). The ego is formed out of id and the superego is formed out of the ego. These three constructs essentially contribute towards building up a person’s character (Freud, 1923/1974). The id and the ego are not antagonistic to each other, since the final goal is the same; the discharge of tension. The

id is to allow pleasure to be obtained, in accordance with reality (ego) and not necessarily as quickly as the id would dictate (Fancher, 1973).

The dynamics of personality consists of the changes in the distribution of energy. Whether one is moralistic, realistic, or impulsive depends on the energizing of one system and the de-energizing of other system. A person with a strong ego will have a weak id and superego. When the ego waxes in strength, the id wanes; if the ego fails in its task of satisfying the demands of the id, the ego can fall back to instinctual forces and the infantile wish-fulfilment reigns again. During the development of personality during adolescence, it is influenced by the environment, heredity, and the maturational process.

In a system where the ego is working well, the personality is considered balanced and healthy if it has a good blend of these three principal constructs (Gilliland & James, 1998). Equilibrium may be established from the development of habitual displacements, sublimations, and compromises until a stabilized personality is formed. Stabilization in this sense means that the variation will conform to a fairly consistent and predictable pattern (Hall, 1979). It does not mean that stabilized personality has no frustration, anxieties, or tensions. Rather, the stabilized personality is one in which more or less permanent arrangements for dealing with increases of tension have been made. Therefore, Freud (1920) believed that in order for the secondary process (realistic thinking) to function efficiently, it is necessary to check the object-cathexes (id) and the idealized-cathexes (superego) by erecting anti-cathexes (resisting forces) against them, otherwise these cathexes (driving forces) will tend to distort the reality principle of the ego by contaminating it with wishful and moralistic thinking. For this reason, Hall (1979) opined that the experiences of the first twenty years have taught one how to

compromise to some extent, which, if not satisfying, would at least help one to endure pain or anxiety.

Throughout life, human beings make an effort to organize a sense of themselves in relation to their external environment as a means of achieving physiological and emotional homeostasis (Connors, 1996a). When pain is experienced without appropriate intervention, adolescents are left to achieve a sense of equilibrium on their own. As a result, a range of techniques is utilized, including self-hurt behaviour (Berger, 2003).

Erikson's Developmental Theory (Erikson, 1963) postulated that there are eight stages of man, with puberty and adolescence representing the fifth stage (identity-versus-role confusion). This puberty-and-adolescence stage is a time of the achievement of much greater competence and independence. It is a time of greatest biological, psychological, and social change. Adolescence is, therefore, a time of greatest turbulence (Briggs, Lemma & Crouch, 2008). When individuals attempt to resolve the conflict of Stage 5, where there is identity-versus-confusion, the issues of achievement, moratorium, foreclosure, and diffusion may at any time trigger their problematic behaviour if not carefully handled.

When they find themselves alienated from their families and peers and society, adolescents may join cults or other extremist groups, uncritically adopting a way of life that is different from that in the past. Some tend to go along with whatever the "crowd" is doing at the moment. Erikson (1963) suggested that identity problems are more of a social matter, in that the adolescents are afraid of not fitting in with their peers. Most of them are afraid of rejection by people on whom they depend for affection and self-esteem, which explains why adolescents always want recognition by their peers and

want to feel that they are part of their cliques. Thus, identity, even though a task extending over a lifetime, becomes a crisis during adolescence.

Also at this stage, they are breaking ties with their parents. Briggs et al. (2008) suggested that this is the most difficult period of their lives as they have to face the disillusionment that their parents can no longer provide a protective screen of thinking for their children in a way that they once did. This loss exposes the youngsters to the cold draught of reality as they face the world. That is why puberty brings increased parent-child conflict, and adolescents usually become argumentative and find fault with authority figures.

Furthermore, owing to physical and hormonal changes, adolescents become interested in the opposite sex. Consequently, young people feel that they are no longer somebody's son or daughter, but rather somebody's potential husband or wife. Free expression of the sexual and aggressive drives of adolescents may also create a lot of conflicts within them as they are bombarded with many "shoulds" and "should nots" by society.

The biological, psychological, and social factors that cause change in the life of adolescents interact strongly with their infantile feelings (Briggs et al., 2008), resulting in confusion about social conflicts and demands around them. They need to adjust their patterns of life into different multi-positional segments (Sebald, 1992). For example, they are expected to respect their parents at home, to conform with what they learn in schools, and to abide with their religion which they, with their scientific understanding, hardly comprehend (Sebald, 1992). In other words, changes in environment, family, school, religion, peers, and living surroundings all call for different manners and values,



so that a teenager's instinctual drives may contribute to their identity problems. They can become clannish, intolerant, indecisive, vulnerable, and self-conscious.

Adolescence is known to be a time of great change, with puberty being an overwhelming experience in a person's life, and it can be frustrating to many as they try to adjust. The movement towards adulthood, therefore, requires the ability to deal with such change. Even though all of us grapple with failure to some extent, those who arrive at adolescence with impairment in their ability can feel like dealing with an unbridgeable abyss (Briggs et al., 2008). It is during these episodes that all the major developmental processes of adolescence are being played out at the beginning of young adulthood. It is not easy to grow into greater independence, which does not happen smoothly. The deepest infantile desires do not go away, and many old mechanisms need to be revived.

Erikson (1963) explained that almost all adolescents need to re-fight many of the battles of earlier years in their search of a new sense of continuity and sameness of a final identity. Their moods usually swing and sometimes they feel as if their impulses are out of control (Moyer, 2005). As a consequence, uncomfortable emotional feelings such as sadness, anger, fear, anxiety, tension, frustration, and hopelessness become the most common psychological problems of the teenage years. They add to the problems of parental hostility and lack of support associated with adolescent frustration. At this stage adolescents need to find ways to reduce the negative emotion so that they can cope with life.

Almost all adolescents, regardless of their upbringing, experience some type of difficulty in adjusting to changes (Moyer, 2005). This stage of overwhelming change causes turbulence especially when many adjustments need to be made while adolescents are searching for identity. The id comes in whenever there is conflict between the life-

and-death drives, and the id can be mediated through the ego by the way of self-hurt behaviour (Hall, 2006) for those who do not have other coping strategies to achieve homeostasis, a tension-free status. In serious cases, some may attempt suicide (Papalia, Wendkos, & Duskin, 1998). Although all adolescents face a host of developmental stressors that may trigger problematic behaviour, certain teens are at higher risk for self-hurt (Plante, 2007).

In short, Freud's Theory of Personality (Freud, 1923/1974) believes that self-hurt is a method to satisfy innate drives (Hall, 2006). Erikson's Developmental Theory (Erikson, 1963) explains emotional development during adolescence can bring about times of frequently fluctuating moods and feelings of instability (Moyer, 2005). Personal struggles with self-identification, feelings of awkwardness about one's body, high expectations of oneself, and fear of rejection by significant others all become new problems to adolescents (Moyer, 2005). Self-hurt acts help individuals to calm down and reduce feelings of anxiety and stress, arising from family discordance, friendships, and society (Levenkron, 2006). It is a way of dealing with very difficult emotions that build up and people who inflict physical hurt on themselves are trying to maintain psychological integrity (Moyer, 2005). Many authors, therefore, agree that self-hurt is concentrated on a select part of the body in order to spare the entire body from destruction (Moyer, 2005).

From the theories discussed earlier, Nock and Prinstein (2004) investigated various reasons given by adolescents to explain why they hurt themselves using one part of measurement (reasons for self-hurt) from the Functional Assessment of Self-mutilation (FASM) developed by Lloyd-Richardson, Kelly, and Hope (1997). They concluded that self-hurt behaviour resulted either intra-personally or inter-personally, or,

more specifically, internally or externally. Nock and Prinstein (2004) termed them as “automatic” (internal) versus “social” (external). The measurement of this study, namely Self-hurt Assessment, is a modified version of FASM.

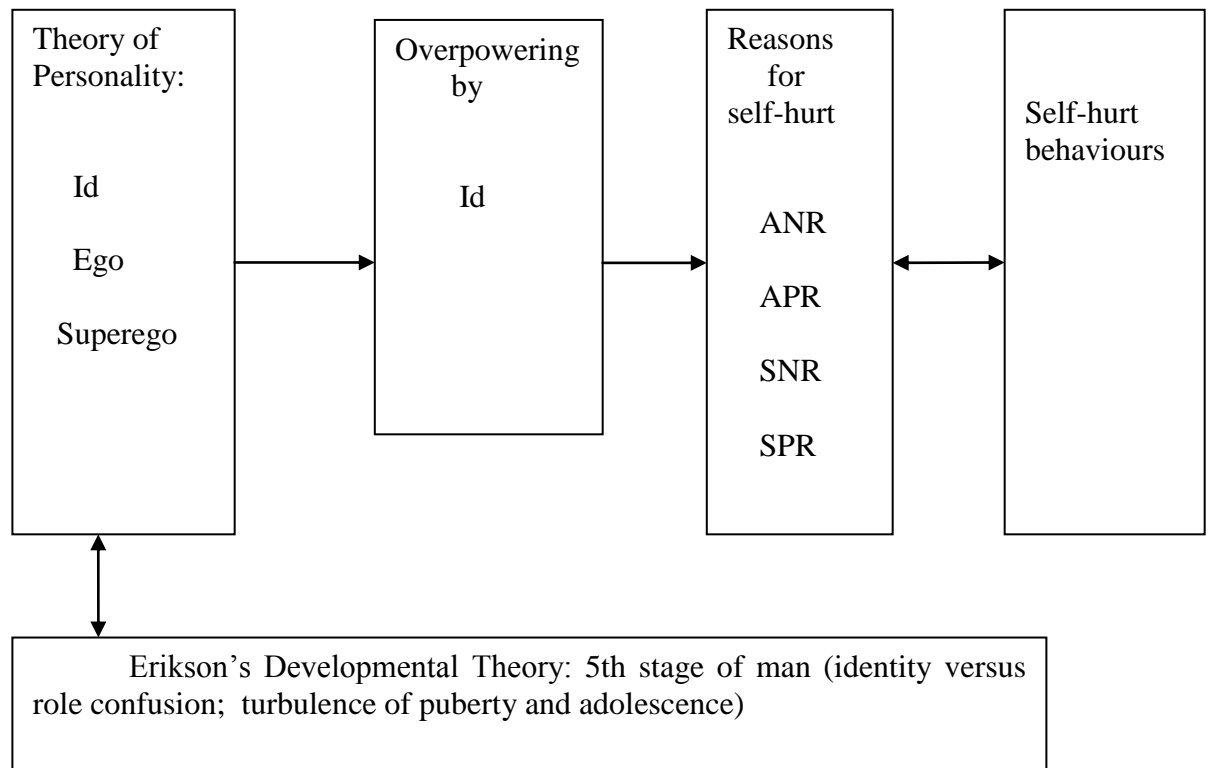
While performing “automatic” or “social” self-hurt behaviour, Nock and Prinstein (2004) again suggested that reasons for self-hurt are either to generate feelings or to stop feelings. In this sense, Nock and Prinstein (2004) termed them as “positive reinforcement” versus “negative reinforcement.” If the reinforcement is positive, then presentation of a favourable stimulus would follow after self-hurt behaviour. If the reinforcement is negative, removal of an aversive stimulus would followed after self-hurt behaviour. Hence, the four domains of all the reasons for self-hurt are: (1) Automatic Negative Reinforcement (ANR), (2) Automatic Positive Reinforcement (APR), (3) Social Negative Reinforcement (SNR), and (4) Social Positive Reinforcement (SPR) (Nock & Prinstein, 2004).

If a person performs self-hurt behaviour because of internal reasons (automatic) and wants to stop bad feelings (negative), this self-hurt behaviour is termed “Automatic Negative Reinforcement.” On the other hand, if a person performs self-hurt behaviour in order to have some feelings (positive), the behaviour is termed, “Automatic Positive Reinforcement.” Thus, we can say that ANR is a reduction of tension and other negative affective states, be they anxiety, hostility or affect regulation; while APR is to the creation of a desirable physiological state (Privé, 2007).

External reasons (social) are another consideration, as when a person performs self-hurt behaviour in order to avoid something (negative), for example to avoid being with people, the term used here is “Social Negative Reinforcement.” However, if a person wants to receive something, for example attention, then the term used is “Social

Positive Reinforcement.” Thus, SNR is used for self-hurt to escape from inter-personal task demands, whereas SPR is used when an individual wants to gain access to something (Privé, 2007).

Figure 1.1 shows the theoretical framework of this study. Erikson’s Development Theory (Erikson, 1963) postulated that throughout the growing process, adolescents face a multitude of problems arising from the conflicts dealing with adjustment with their families, peers, and society. At the same time, they need to think about their future career paths and to handle problems such as puberty and inner conflicts resulting from identity and role confusion. They are confused and distressed with alternatives before settling on values and goals. They are also confused and disturbed by social conflicts and demands. At this time, young people grow so fast and change in so many ways that they are uncertain about who they are. Their moods are usually unstable and at times overwhelming. When they cannot adjust well with some matters, their id would overpower their ego and superego, thus bringing them to the crisis of committing self-hurt for various reasons such as ANR, APR, SNR, and SPR in order to cope with life to achieve homeostasis. Freud’s Theory of Personality and Erikson’s Developmental Theory form the basis of this study.



Notes. ANR = Automatic Negative Reinforcement; APR = Automatic Positive Reinforcement; SNR = Social Negative Reinforcement; SPR = Social Positive Reinforcement

Figure 1.1 : Theoretical framework of this study.

### 1.5 Strengths of Nock and Prinstein (2004) four-construct model

Nock and Prinstein (2004) developed a four-construct model as an aid to understand the various reasons given by adolescents to explain why they hurt themselves from the Functional Assessment of Self-mutilation (FASM) developed by Lloyd-Richardson, Kelly, and Hope (1997).

In terms of statistics, with the confirmatory factor analyses, Nock and Prinstein (2004) managed to yield four constructs, namely ANR, APR, SNR and SPR. They also found that this model has adequate structural validity and reliability with adolescents reporting engagement in self-hurt behaviour for FASM. The subsequent analyses by

Nock and Prinstein (2005) have supported the construct validity of this model for FASM (Hunsley & Mash, 2008).

In terms of comparison with other clinical works, Nock and Prinstein (2005) demonstrated how and why these constructs are related to self-hurt behaviours, thus further elucidating the nature of self-hurt behaviour and facilitating research and clinical work in self-hurt. For example, Nock and Prinstein (2005) explained that hopelessness represents a negative cognitive state from which one is likely to try to escape, and that it is an antecedent condition increasing likelihood of escape behaviour. Likewise, suicide attempts represent a behavioural response that is often performed for the purpose of escape from negative affective or cognitive states. Nock and Prinstein (2005) then used regression analyses and eventually proved that ANR (to stop bad feelings and to provide relief) was uniquely associated with hopelessness and a history of suicide attempts. Similarly, the observed relations between APR (to generate feelings) and symptoms of major depressive disorder and post-traumatic stress disorder supported their hypothesis that the experience of feelings of emptiness, detachment, and anhedonia were to generate certain sensations.

Nock and Prinstein (2005) also found that both social constructs were related to perfectionism -- as SNR (to avoid doing something unpleasant that one does not want to do) when adolescents attempted to remove the perceived expectations of others; and as SPR (to get attention or manipulate significant others) when adolescents attempted to use self-hurt behaviour to solicit assistance from others.

Nock and Prinstein (2005) stressed that the four-construct model offers clear targets for assessing antecedents and consequences of self-hurt behaviours in both research and clinical settings. Therefore it is easy to anticipate ANR to be related to

high emotional reactivity; APR to be related to low reactivity and dissociation; and social reinforcement to be associated with additional problems with social interaction and communication skills. Researchers and clinicians when developing programmes can consider the different antecedents, correlates, and consequences associated with each construct and tailor treatments accordingly, rather than use a one-size-fits-all approach to the treatment of self-hurt behaviour.

In terms of the number of constructs, this model has only four constructs, yet is able to explain reasons for self-hurt fully. Therefore Nock and Prinstein (2004) concluded that self-hurt behaviour resulted either inter-personally or intra-personally, and, that reasons for self-hurt are either to generate feelings or to stop feelings. These four domains of all the reasons for self-hurt differ only along two dichotomous dimensions, making it easier to explain why people engage in self-hurt behaviour. Nock and Prinstein (2005) further highlighted that individuals who hurt themselves are not alike and the consideration of using this framework can guide one's clinical and research conceptualizations.

This study found that the Nock and Prinstein model of four constructs (2004) has clear directions for assessment of self-hurt behaviour. In view of the aforementioned points, it is appropriate to use this framework as it is very likely to further enhance understanding of self-hurt behaviour to explain reasons for self-hurt for Self-hurt Assessment (SHA), a modified version of FASM.

## **1.6 Statement of problem**

Mental health is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realizes his/her own potential, can cope with the

normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his/her community (World Health Organization, 2014). However, in recent years, self-hurt has become a common mental health problem encountered by adolescents (Matsumoto et al., 2008). Adolescent self-hurt behaviour has raised much concern internationally (Burns, Dudley, Hazell, & Patton, 2005).

Surveys reveal that adolescents and young adults are at higher risk of engaging in self-hurt behaviour (Hoyt, 2002). Literature suggested that repetitive self-hurt increased the risk of completed suicide with people who self-hurt, being 18 times more likely to kill themselves (van Sell et al., 2005). Hawton & Harris (2008) even suggested that people who self-hurt had suicide risk 100 times higher than that in the general population.

According to the statistics obtained from the World Health Organization, about one million people worldwide die from suicide every year, that is one death every 40 seconds (Jans,Taneli & Warnke, 2012). As suicide rates throughout Asia are higher than in Western countries (Mishara, 2007), Thompson and Hasking (2009) hypothesized that it might be true that rates of self-hurt are also higher.

Researchers in the west suggest that self-hurt is growing significantly among young people and is becoming a public health problem. It was reported that the lifetime prevalence of self-hurt behaviour ranged from 13.9% to 65.9% (Ross & Heath, 2002; Zoroglu et. al., 2003; Lundh, Karim, & Quilisch, 2007; Hilt, Nock, Lloyd-Richardson & Prinstein, 2008). In Asia, the Mainland China statistics suggest that the prevalence rate of self-hurt was 22.3% out of a total of 10,894 Chinese high school students (Sun, 2008). As in Hong Kong, overall 15% out of a total of 6,374 adolescents engaged in self-hurt behaviours (You, Leung, Fu, Lai, 2011); while in Taiwan, the prevalence rate of self-



hurt was 11.3% out of 742 high school students reported by Tsai, Chen, Y.H., Chen, C.D., Hsiao, and Chien (2011) .

In Korea, out of 1,857 adolescents, 10.51% of the girls and 7.85% of the boys reported self-hurt behaviour (Shin et al., 2009). In Japan, Matsumoto et al. (2008) showed that the prevalence rate of self-hurt, such as committing a life-time history of self-cutting was 9.9% out of 165 adolescents. In 2012, Watanabe et al. (2012) reported a 3.3% of junior, and 4.3% of senior high school out of 18,104 Japanese students having hurt themselves. These figures show that self-hurt behaviour in countries with Chinese population such as China, Hong Kong, Taiwan, Korea, and Japan was prevalent and significant. They further indicated that it is a great importance to investigate Chinese adolescent self-hurt behaviour in these regions. Even though self-hurt is a common behaviour among Chinese adolescents as claimed by You, Leung, Fu, Lai (2011), very little data existed on self-hurt among this ethnic group of adolescents.

Similarly, Malaysia, a developing country, had a population of 29.2 million in 2012, most of which were relatively young (Department of Statistics, Malaysia, 2012). Despite anecdotal reports suggest that self-hurt is increasing in Malaysia, Thompson and Hasking (2009) in his review paper claimed that not a single study explicitly examined self-hurt behaviour conducted with Malaysian participants, not to mention adolescent self-hurt behaviour, particularly among the Chinese adolescents.

In Malaysia, some counselling sessions have been recorded by some non-governmental organizations and schools regarding self-hurt among Chinese adolescents. For example, in 2008 alone, the Agape Counselling Centre Malaysia (Johor Bahru Branch) handled almost 300 cases of self-hurt behaviour (Three hundred cases of deliberate self-harm, 2008, August 11); while in 2009, the Agape Counselling Centre

Malaysia (Penang Branch) handled around 80 cases of self-hurt behaviour in schools in Penang (Agape Counselling Centre Malaysia, Penang Branch, 2009).

In Malaysia, the subject of self-hurt is taboo, and self-hurt is still not an easy topic to bring up. Adolescent self-hurt, which is very much under-studied, constitutes a poorly understood phenomenon. Significant gaps exist in empirical research in this area and studies are needed to explore the scope of self-hurt experienced among adolescents and factors relating thereto. Herein lies the root of the research problem. To date, the state of well-being of our adolescents is uncertain. Are they following the trend of self-hurt of the western countries or are they isolated cases?

According to Erikson's Developmental Theory, adolescents face great turbulence during puberty. At this stage, they are full of impulses. Freud's Theory of Personality pointed out that if adolescents are out of control, sometimes the id will overpower the ego and superego, and the adolescents will find ways to achieve homeostasis. One of the alternatives is engaging themselves in self-hurt behaviour. Since literature provides much evidence on gender and age associated with self-hurt behaviour, there is an urgent need to measure self-hurt behaviour in terms of gender and age factors. Hence, the answers to the question of whether self-hurt behaviour exists among Chinese adolescents, and how serious such behaviour is in Malaysia could fill the gaps in the empirical studies about self-hurt behaviour among Chinese adolescents in Malaysia.

It is certainly not enough just to know the seriousness of the problem. We need to know the reasons why these adolescents hurt themselves. This study simplified all the reasons for self-hurt into four constructs, namely ANR, APR, SNR, and SPR (Nock & Prinstein, 2004). In order to know in depth about the reasons adolescents hurt themselves, we, therefore, need to interview the subjects and have them explicitly

explain their experiences of the behaviours they chose, so that proper prevention strategies can be adequately planned for each gender and age group. Successful strategies must be based on fundamental understanding of the issue. With the information given, we would know the extent to which the problem prevailed, and such information would be of crucial importance, especially to counsellors. It is timely to consider the issue seriously so that the problem can be treated and managed before it worsens.

Previous documents show that self-hurt usually goes with population in clinical settings, such as patients with schizophrenia, depression, physical or sexual abuse, and substance dependency. However, experts have observed the biggest increase in self-hurt behaviour among those who had no history of these disorders (van Sell et al., 2005), indicating that more needs to be learned about self-hurt among young people in non-clinical settings and factors relating to it. Research suggests that most of the self-hurt behaviours are hidden (Madge et al., 2008) and can go on for a long time before they are revealed. There is a huge area of unmet needs, so that much work has to be undertaken to bring this hidden problem into light.

As adolescents are the pillars of the future of the country, it is crucially important to produce adolescents with good mental health, thus contributing to the “betterment of the family, the society, and the nation at large.” (Ministry of Education, 2006). The examination of self-hurt may shed light on ways to prevent and treatment to self-hurt behaviour and later suicide, and ultimately to fulfil one of the objectives of the Malaysian National Philosophy of Education by producing individuals capable of achieving a high level of personal well-being.