



Brock University

Research Snapshot

Centre for Lifespan Development Research

Nonsuicidal Self-Injury *How does it link to suicide?*

Nonsuicidal Self-Injury – What is this research about?

Nonsuicidal self-injury (NSSI) refers to behaviours in which an individual directly or deliberately injures or alters their own bodily tissue without the intent to end their own life, such as self-cutting, hitting or burning. NSSI is a common behaviour among clinical populations, but it also is an emerging health concern among university students. Approximately **15-19% of students** report engaging in NSSI while in university. Additionally, roughly 40% of individuals who engage in NSSI report that they began this behaviour during the university years. Given these findings, the Mental Health Commission of Canada issued a report in January 2015 identifying NSSI use among university

students as an area of great concern.

It is important to note that although NSSI is different from suicide behaviours on the basis of nonlethal intent (i.e., those engaging in NSSI are not attempting to end their lives), these behaviours often co-occur. Suicide is an important mental health concern for youth. Currently, it is the second leading cause of death among youth aged 15 to 24. Thus, understanding the potential link between NSSI and suicide is very important.

Why NSSI is linked to suicide is not clear. One compelling theory that has been proposed to account for the link is Joiner's Interpersonal Theory of Suicide. Joiner's theory posits that in order to attempt suicide or to die by suicide, individuals must not only desire to end their own life (i.e., have suicidal ideation) but they also must be able to overcome the basic human instinct for self-preservation (i.e., have acquired a capability for suicide). **Acquired capability for suicide** is thought to develop over time through repeated exposure to painful and provocative experiences (PPEs), such as abuse, injury, contact sports, etc. Researchers also have suggested that NSSI may be a PPE that increases acquired capability for suicide by desensitizing individuals to the fear and pain associated with suicide over time.

Most research connecting NSSI with acquired capability for suicide has been cross-sectional, meaning that participants were studied only at one time point. With cross-sectional research it is not clear whether NSSI leads to decreased pain sensitivity and fear of death over time (i.e., acquired capability for suicide) or whether individuals with lower pain sensitivity and fear of death are more likely to engage in NSSI over time. To assess the direction of effects, Dr. Teena Willoughby, Co-Director of the Centre for Lifespan Development Research, conducted a longitudinal study.

How did they do it?

Longitudinal examinations require that the same participants be assessed on the same measures at multiple time points. In order to conduct her research Dr. Willoughby focused on a sample of 782 university students who were in their fourth year of university. Students completed measures of NSSI, acquired capability for suicide, and suicidal ideation two times, one year apart.

Results

Dr. Willoughby's research revealed expected prevalence numbers for NSSI engagement among senior university students (see Figure 1 on next page). Among those who engaged in NSSI, the most commonly endorsed types of self-injury were head banging, cutting, and biting. Additionally, the majority of individuals engaging in NSSI reported using more than one method of NSSI (see Figure 2 on next page).

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Most importantly, Dr. Willoughby was able to provide empirical support for Joiner's theory, by discovering that higher frequency of past year engagement in NSSI at Time 1 predicted increases in acquired capability for suicide at Time 2 (see Figure 3). Moreover, the results of this work indicated that this relationship was unidirectional – from NSSI to acquired capability but not acquired capability to NSSI. Overall, engaging in NSSI tends to increase an individual's acquired capability for suicide over time.

So what – Where can this research be used?

Practitioners/Clinicians – The work of Dr. Willoughby indicates that NSSI has predictive considerations

for suicide risk. This finding has important implications for practitioners and clinicians, suggesting that targeting individuals who engage in NSSI could help to prevent individuals from acquiring the ability to enact more lethal forms of self-injury. Specifically, practitioners/clinicians can use this work to help inform prevention methods and suicide risk assessments.

Future Research – Future research should continue to focus on employing longitudinal examinations of NSSI and suicide risk, while expanding samples beyond university populations, assessing behaviours in real-time, and examining Joiner's theory in its entirety.

Figure 1: Percentage of sample engaging in NSSI in past year at Time 1 and Time 2

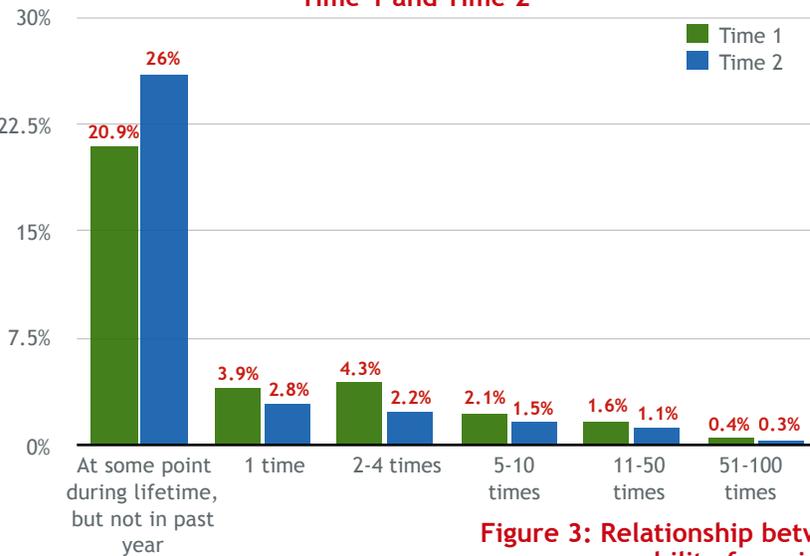


Figure 2: Number of methods of NSSI at Time 1 and Time 2

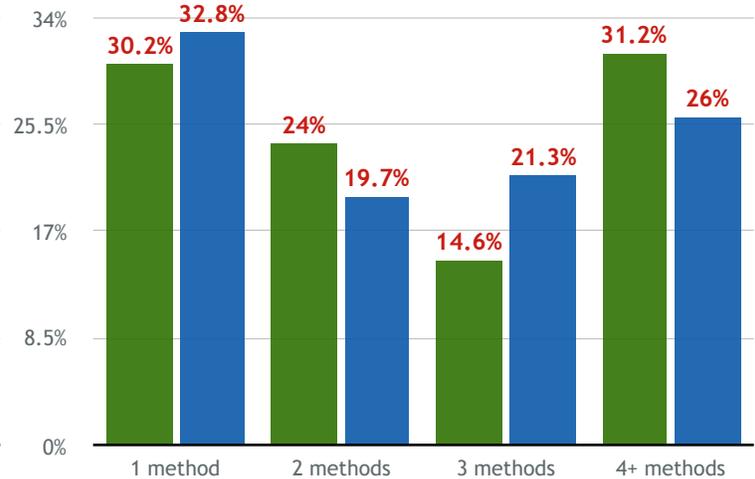
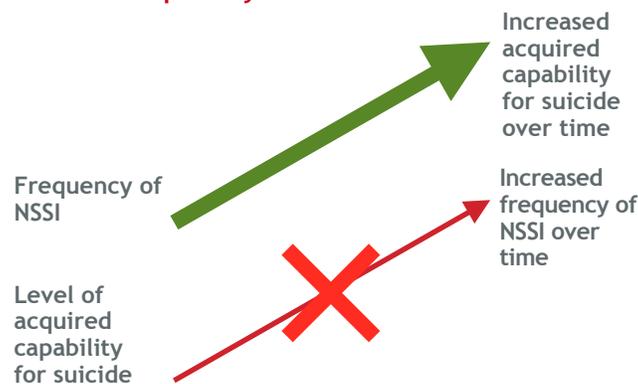


Figure 3: Relationship between NSSI and acquired capability for suicide over time



Want to read more on this research?

Find it online here: <http://psycnet.apa.org/journals/abn/124/4/1110/>

Citation: Willoughby, T., Heffer, T., & Hamza, C. A. (2015). The link between nonsuicidal self-injury and acquired capability for suicide: A longitudinal study. *Journal of abnormal psychology, 124*(4), 1110.

Want More Information?

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