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Correlation Between Difficulty in Emotional Regulation and Self Harming Tendencies: A Study of Young Adults

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ABSTRACT: The study aimed to investigate the relationship between trouble with emotional regulation and self-harming tendencies in young adults. The stratified random sampling method was employed to ensure that all the ages were represented in the sample, allowing for more accurate group comparisons. Demographic information such as age, gender, and qualifications were also collected from the respondents. Two surveys were used for this aim. The Difficulty in Emotional Regulation Scale (DERS) is a self-report measure designed to assess various aspects of emotional regulation difficulties experienced by individuals. The Self-Harm Inventory, a structured assessment tool designed to evaluate the frequency, severity, and methods of self-harm behaviours in individuals, was also used.

I. INTRODUCTION

EMOTIONS

Emotions are energy in motion that run through our body, emotions are a chemical reaction that happens due to thoughts that are neutral in nature. These are mental reactions which happen consciously and they are subjectively experienced by humans towards an event, stimuli or a person.

EMOTIONAL REGULATION

Emotional regulation is a valuable ability that allows people to effectively manage their emotions in a variety of settings. It entails the ability to recognise, comprehend, and moderate one's emotional responses in a way that promotes well-being and healthy interactions with others. Effective emotional regulation enables people to negotiate pressures, disappointments, and disputes more effectively, resulting in increased resilience and improved mental health. Mindfulness practices, cognitive restructuring, problem-solving strategies, and social support networks can all help with emotional control. Individuals who practise emotional regulation skills can benefit from enhanced self-control, better decision-making, and healthier relationships, resulting in a more fulfilling and balanced existence.

DIFFICULTY IN EMOTIONAL REGULATION

Emotional regulation difficulties refer to a variety of obstacles that people have when it comes to successfully managing and responding to their emotions. This can appear in a variety of ways, including powerful emotional reactions, difficulties moderating emotional responses, impulsivity, emotional avoidance, trouble dealing with stress, and interpersonal conflicts caused by emotional volatility. These challenges can have a considerable influence on one's health, relationships, and general functioning. Addressing these issues frequently entails increasing emotional awareness, learning adaptive coping techniques, improving emotional literacy, and getting help from mental health experts or support groups. Individuals who actively engage in efforts to increase emotional regulation might nurture stronger emotional resilience and traverse life's ups and downs more effectively.

SELF HARMING TENDENCIES

Self-harming inclinations, a complicated and very troubling issue, emerge in a variety of ways and affect people from all demographics. Self-harm, defined as the intentional inflicting of bodily hurt or damage, is frequently used as a coping method for intense mental discomfort or inner conflict. While cutting is often associated, alternative methods include burning, scraping, punching, and even engaging in dangerous behaviours. Despite its frequency, self-harm is heavily stigmatised, causing many sufferers to hide their troubles out of fear or shame.

Self-harming inclinations are fueled by a complex web of underlying psychological causes. Some people may use it to externalise their internal agony, giving them a tangible outlet for abstract emotions like despair, anger, or numbness. People may see self-injury as a sort of retribution, self-punishment for perceived failings or inadequacies, or punishment directed at people who have caused emotional hurt. In either situation, self-harm alleviates mental discomfort by providing a brief sense of control or relief in the midst of overwhelming chaos

Understanding the motivations for self-harm needs a careful evaluation of personal experiences and traumas. Childhood hardship, such as abuse, neglect, or dysfunctional family relationships, frequently sets the stage for maladaptive coping techniques later in life. Furthermore, mental health illnesses such as depression, anxiety, borderline personality disorder, and post-traumatic stress disorder (PTSD) typically coexist with self-harming behaviours, aggravating emotional instability and discomfort.

The public image of self-harm as attention-seeking or manipulative exacerbates the difficulties faced by people coping with these impulses. Misconceptions about self-harm reinforce damaging stereotypes and prevent open discourse, making it difficult for victims to seek help or access appropriate resources. As a result, many people turn to concealment, concealing their traumas and internal conflicts from loved ones and specialists.

Addressing self-harming behaviours necessitates a multimodal approach that prioritises empathy, education, and access to comprehensive mental health services. Creating safe environments for open discussion and destigmatizing conversations about self-harm are critical to increasing understanding and support. Educating others, particularly carers, educators, and healthcare professionals, on the complexity of self-harm is critical for recognising warning signs and intervening appropriately.

II. METHODOLOGY

OBJECTIVE: To study the correlation between difficulty in emotional regulation and self-harming tendencies in young adults.

RESEARCH QUESTION: Does difficulty in emotional regulation create self-harming tendencies in young adults?

HYPOTHESIS:

Compared to people with greater emotional regulation abilities, those who struggle with emotional regulation are more likely to display tendencies towards self-harm.

The frequency and intensity of self-harm behaviours are positively correlated with the degree of emotional regulation issues. Those with trouble regulating their emotions will be less likely to self-harm if they receive psychological treatments targeted at enhancing their emotional control abilities.

VARIABLES:

Independent Variable: Difficulty in emotional regulation

Dependent Variable: Self-Harming tendencies

SAMPLE:

Sample population: Young adults between the age of 18-25 years.

Sample size: 192 (94 females, 4 non-binary and 94 males)

Sampling technique: Purposive sampling.

INCLUSION CRITERIA:

Young adults who fall under the age group of 18-25 years of age.

English speaking population.

EXCLUSION CRITERIA:

People who do not belong to the young adult age criteria.

RESEARCH DESIGN:

The research design employed in this study is the correlational research methodology.

TOOLS

The Difficulty Emotional Regulation Scale (DERS) measures difficulty to manage and respond to emotions effectively. It assesses factors like impulse control, coping strategies, and emotional awareness. Difficulty in emotional regulation can lead to challenges in relationships, work, and overall well-being, highlighting the importance of developing these skills for a balanced life.

The Self-Harm Inventory (SHI) Scale is a tool used to assess the frequency, severity, and nature of self-harming behaviors in individuals. It helps clinicians understand the extent of self-harm and develop appropriate interventions. The scale typically includes



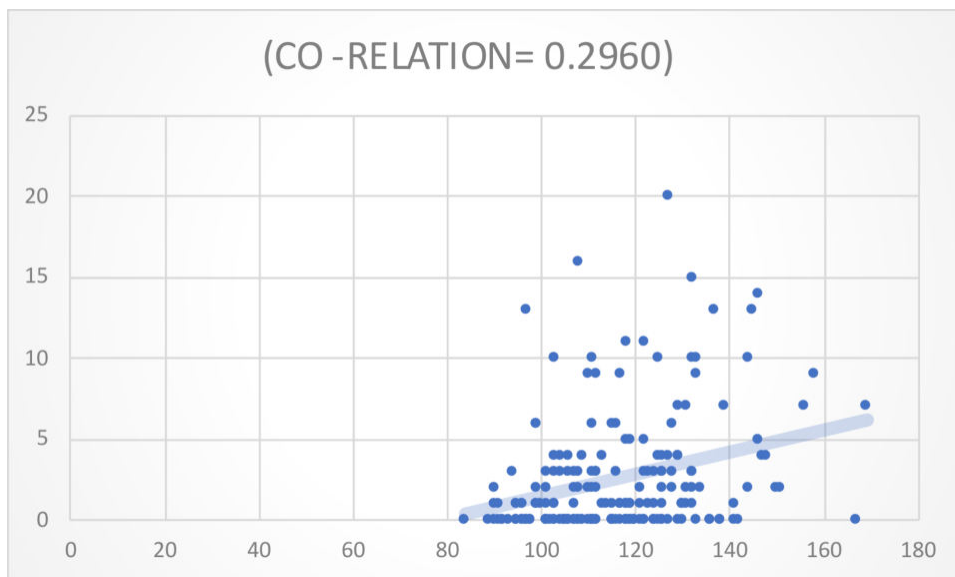
questions about different forms of self-harm, such as cutting, burning, or hitting oneself, as well as the frequency and triggers of these behaviors. It’s an important tool in mental health assessment and treatment planning for individuals struggling with self-harm tendencies.

PROCEDURE

The study was designed to and take out correlation between difficulty in emotional regulation and self harm tendencies in young adults . Clear criteria were established for selecting participants based on it. The purpose of the study and then using the established criteria, participants meeting the specific requirements outlined for the study were selected. Participants were given a set of questionnaires carrying Difficulty in emotional regulation scale (DERS) and Self Harm Inventory (SHI). Scales were distributed to everyone, and instructions were properly given for each scale. After the data collection, scoring was done for each item in all three scales. Afterwards, SPSS software was used for further calculation to find the results. After the calculations and results, discussions and implications were written.

III. RESULT

TABLE .1



The correlation coefficients between Difficulty in emotional regulation (D E.R) and self-harm tendencies (S.H). If "DE.R 1" and "S.H 1" represent the same variable, indicating a perfect positive correlation, and "S.H 0.2960438" represents the correlation coefficient between two different variables, indicating a positive correlation but not perfect, then it suggests a relationship between emotional regulation difficulties and self-harm tendencies.

IV. DISCUSSION

A correlation coefficient of 0.2960 suggests a moderate positive relationship between difficulty in emotional regulation and self-harm tendencies. This means that as difficulty in emotional regulation increases, self-harm tendencies also tend to increase, but not strongly. The result shows positive correlation between Difficulty in emotional regulation and Self Harm tendencies ,it shows that a perfect positive correlation ,that as emotional regulation difficulties increase ,self harm tendencies in young adults also increase in a very linear manner.The correlation of 0.2960438 suggests a less than perfect but significant positive relation between the variables.This states the the individuals experiencing higher levels of emotional regulation difficulties are likely to exhibit self harm tendencies, though not in a perfectly linear manner.While the coefficients are positive and provide valuable information it is necessary to acknowledge the flaws and the shortcomings of the research ,as it does not imply the reasons of Difficulty in emotional regulation and how it impacts the individual to dwell in Self harm tendencies. There is a considerable association between the two variables, as indicated by the correlation coefficients between self- harm inclinations (S.H) and difficulty in emotional regulation (D.E.R). Even a positive correlation coefficient of 0.2960438 between two variables indicates a significant relationship; a perfect positive correlation denotes a strong association. This implies that emotional regulation issues may play a role in the development of self-harming inclinations, underscoring the significance of addressing emotional regulation in

interventions aimed at preventing self-harming behaviours.

V. CONCLUSION

The capacity to control and react to one's emotions in a variety of contexts is known as emotional regulation. It includes actions like identifying feelings, comprehending their causes, and putting techniques in place to control them in a healthy way. People who have trouble controlling their emotions can suffer with intense emotions like anguish, annoyance, or despair, which can lead to negative behaviours like self-harm. Self-harm tendencies and emotional regulation issues are positively correlated, as indicated by the correlation value of 0.2960438. Although this association is not perfect, it does indicate that tendencies towards self-harm rise in tandem with issues in emotional regulation. The complex interaction between self-destructive behaviours and emotional well-being is highlighted by this relationship.

The observed correlation could be the result of several reasons. People who have trouble controlling their emotions might not have good coping strategies for handling stress or unpleasant feelings. They might turn to self-harm as a maladaptive coping mechanism to ease emotional suffering or reclaim control if they don't have access to healthy outlets. Furthermore, the cycle of self-harm can exacerbate emotional dysregulation by sustaining emotions of guilt, shame, and low self-esteem. Understanding that correlation does not indicate causation is crucial. Although the correlation coefficient points to a connection between self-harm tendencies and issues with emotional regulation, it does not prove that the two are causally related. Emotional regulation and self-harm behaviours can also be influenced by other factors, such as traumatic experiences, underlying mental health issues, or interpersonal connections.

Comprehending the correlation between challenges in emotional regulation and inclinations towards self-harm holds significant consequences for attempts aimed at intervention and prevention. This information can be used by mental health practitioners to create focused interventions that will enhance emotional regulation abilities and lessen self-harming behaviours. Among the strategies that have showed potential in addressing these problems include dialectical behaviour therapy, emotion- focused interventions, and cognitive-behavioral therapy.

To sum up, the correlation coefficients shown indicate a favourable relationship between emotional regulation difficulties and self-harming tendencies. These results highlight the significance of treating emotional regulation issues in the prevention and treatment of self-harm behaviours, even though more investigation is required to clarify the underlying mechanisms and causal pathways. We may endeavour to lessen the incidence and effects of self-harm in our communities by encouraging emotional resilience and giving people alternate coping mechanisms.

REFERENCES

1. Nock, M. K., & Prinstein, M. J. (2004). A functional approach to the assessment of self-mutilative behavior. *Journal of Consulting and Clinical Psychology*, 72(5), 885– 890. [Link](<https://psycnet.apa.org/record/2004-20128-005>)
2. Gratz, K. L., & Roemer, L. (2008). The relationship between emotion dysregulation and deliberate self-harm among female undergraduate students at an urban commuter university. *Cognitive Behaviour Therapy*, 37(1), 14–25. [Link](<https://www.tandfonline.com/doi/abs/10.1080/16506070801890302>)
3. Claes, L., Vandereycken, W., & Vertommen, H. (2001). Self-injury in female versus male psychiatric patients: A comparison of characteristics, psychopathology, and aggression regulation. *Personality and Individual Differences*, 30(3), 521–530. [Link](<https://www.sciencedirect.com/science/article/abs/pii/S0191886900001174>)
4. Selby, E. A., & Joiner, T. E. (2009). Cascades of emotion: The emergence of borderline personality disorder from emotional and behavioral dysregulation. *Review of General Psychology*, 13(3), 219–229. [Link](<https://journals.sagepub.com/doi/10.1037/a0015688>)
5. Gratz, K. L., & Tull, M. T. (2010). Emotion regulation as a mechanism of change in acceptance- and mindfulness-based treatments. *Assessing Mindfulness and Acceptance Processes in Clients: Illuminating the Theory and Practice of Change*, 107–133. [Link](<https://guilfordjournals.com/doi/abs/10.1521/978.1.541.92731.6>)



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