

**RESEARCH PAPER****A Qualitative Exploration of Intentional Indirect Self-Harm on Adolescents****¹Rehana Batool Niazi* and ²Dr. Iffat Rohail**

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ABSTRACT

The purpose of this study is to investigate the causes and manifestations of intentional indirect self-harm among adolescents in Islamabad and Rawalpindi, Pakistan. By diving into adolescents' personal experiences and perceptions, A qualitative method was used to acquire a thorough knowledge of adolescents' experiences and attitudes on indirect self-harm. Semi-structured interviews were performed with a purposively selected sample of adolescents aged 13 to 19 from various schools and localities in Islamabad and Rawalpindi. Thematic analysis was used to discover reoccurring themes and patterns about the motivations, circumstances, and consequences of indirect self-harm. The study identified numerous major themes Intentional indirect self-harm, including the secondary themes include various intentional indirect self-harm behaviors such as injuries, hitting, cuts, overeating, snatching, drug usage, fast driving, punching, vomiting, motorbike driving, frustration, emotional distress, and smoking. The Adolescents reported engaging in these activities as coping methods in response to mental discomfort, a lack of parental support, and feelings of inadequacy. The study also found that cultural stigmas around mental health and a lack of supportive services are significant obstacles to obtaining treatment. The government and mental health professionals should work together to establish a supportive atmosphere that promotes open discussions about mental health and equips teenagers with the tools and resources they need to deal with stress and emotional issues in a healthy and productive manner.

Keywords: Adolescents, Intentional Indirect Self-Harm, Qualitative Research**Introduction**

Every adolescent has immense obstacles as they approach the challenging stage of emerging maturity. Among the traits that characterize youth are self-discovery, life instability, a self-focus, and an abundance of there are many prospects for the future. During this transitional phase, many adolescents' individuals often feel stuck, as if they have failed. The term "failure to launch" is commonly used to describe the disappointment felt by adolescents who struggle to achieve the significant milestones expected of their age (Boll, 2017). For some, this inability to navigate the transition within the expected time frame can lead to a sense of ineffectiveness, which may be intensified by underlying mental health problems and harm. To help emerging adolescents cope with this crucial life transition, it is crucial to understand the growing hindrance they experience. However, if indirect self-harm is left unchecked, it can contribute to mental health issues.

Intentional indirect self-harm is a term used to describe behaviors that, while not directly causing harm, can lead to self-destructive consequences. Adolescents are particularly vulnerable to engaging in such behaviors. This study aims to explore intentional indirect self-harm among adolescents, shedding light on their perspectives and experiences. This study focuses on intentional indirect self-harm among adolescents and aims to gain valuable insights into complex human behaviors. Qualitative research is employed using

interviews, which are analyzed using content analysis. This approach is considered more effective than surveys and quantitative measures of personal experiences (Denzin & Lincoln, 2000; Parmenter, Galliher, Yaughner, & Maughan, 2020). The emotion model proposed by Izard (1993) is taken into account, which encompasses subjective experience, physiological responses, social expressions, and purposive aspects.

Extensive research on intentional indirect self-harm has been carried out, especially in India and the Western world. However, the viewpoint of emerging adults regarding this subject remains relatively unexplored. The phenomenon of intentional indirect self-harm has been extensively studied in adolescents. Therefore, the purpose of this study is to explore how intentional indirect self-harm among adolescents.

Literature Review

It is crucial to identify intentional indirect self-harm from direct self-harm actions in order to understand it in adolescents. When someone engages in direct self-harm, they usually mean to inflict immediate bodily pain, including cutting or burning. On the other hand, deliberate indirect self-harm refers to a range of actions that have an indirect effect on a person's health, such as those that include emotional, psychological, or social components.

Studies conducted worldwide on the mental health of adolescents reveal a worrisome increase in self-harming behaviors, with deliberate indirect self-harm emerging as a significant trend. These behaviors are not universally prevalent across countries and locations, suggesting that societal norms and environmental circumstances have an impact on adolescents coping strategies and ways of expressing pain. The incentives behind deliberate indirect self-harm is crucial for efficacious management. These behaviors are influenced by internal causes such as low self-esteem, mental health problems, and emotional disturbance. Adolescents' decisions on intentional indirect self-harm are greatly influenced by outside variables such as peer pressure, cultural norms, and the universal effect of social media.

The research has discovered a number of distinct manifestations of intentional indirect self-harm in the adolescent population. For example, the dynamics of social media contribute to the issue by encouraging feelings of social isolation and inadequacy through distorted comparisons. Another common kind of bullying those damages adolescents' emotions and makes them more vulnerable is class room bullying. Substance abuse may also be a coping strategy; it's a kind of indirect self-harm that can have long-term effects on mental health. Although the literature offers insightful information, there are still significant gaps in our knowledge of adolescent intentional indirect self-harm. The various cultural subtleties impacting these behaviors have not received much attention in study, and longitudinal studies are required to follow the course and consequences of intentional indirect self-harm across time. For a thorough knowledge to guide focused preventative tactics and mental health treatments for adolescents going through this particular type of suffering, it is imperative that these gaps be filled. In order to present a thorough understanding of this increasingly important and intricate facet of adolescent mental health, we will go deeper into the expressions, causes, and effects of intentional indirect self-harm among adolescents in the sections that follow.

Material and Methods

The present research qualitative typically involves using the interview method, which is a common approach used in many studies, as demonstrated by Smith and Osborn in their 2008 work. In this particular study, they used semi-structured interviews to obtain detailed descriptions from adolescents about their experiences with intentional indirect self-harm. To investigate the knowledge of focused indirect self-harm, 69 adolescents (36

men and 33 females) ranging in age from 11 to 19 years were recruited from various schools in Rawalpindi and Islamabad. In qualitative research, there is consensus on the use of a small sample size for deep analysis and developing rich insight. Before conducting the interviews, they obtained formal consent through informed consent procedures. The questions were carefully crafted to allow participants to express their experiences in their own words, using a neutral and open-ended approach. For example, one of the questions asked was, "Can you give a personal perspective on intentional indirect self-harm?" Even though the questions were prepared beforehand, the interviewer remained flexible during the interviews and adjusted the questions based on the information provided by the respondents.

The research design used in this study was influenced by Creswell's work on qualitative research design and methodology (Creswell, 2013). On average, each interview lasted approximately 15 to 20 minutes, which allowed the participants to share their experiences without feeling rushed or constrained by the interviewer. The researcher accurately recorded the responses of each participant in the form of interview transcripts. Establishing a trusting and comfortable atmosphere was a primary goal for the researcher to encourage participants to speak freely. Additionally, probing questions were used to delve deeper into the participants' responses during the interviews.

Ethical Consideration

Participants were given written information about the research and provided written consent to participate

Results and Discussion

Table 1
Demographics with percentage

Demographics	Group	f	%
Gender	Female	33	48
	Male	36	52

In table 1, Demographic Features of The Participants (N= 69). The study sample included 69 adolescents, with a small majority (52%) being male and the remainder 48% female. This near-equal relationship demonstrates that both genders' perspectives and experiences are adequately included in the study, leading to a balanced picture of intentional indirect self-harm behaviors among adolescents. The demographic characteristics of the participants are critical for understanding the context and generalizability of the study's findings. The nearly equal proportion of male and female participants enables a thorough examination of gender-specific variables that may impact indirect self-harm practices

Table 2
Primary theme, Secondary themes and percentage (N=69)

Primary Theme	Secondary themes	f (%)		
		Male (n=36)	Female (n=33)	Total (N=69)
Intentional Indirect self-harm	Injuries	25 (69%)	31 (93%)	56 (81%)
	Hitting	34 (94%)	21 (63%)	55 (79%)
	Cuts	35 (97%)	20 (60%)	55 (79%)
	Over eating	36 (100%)	19 (57%)	55 (79%)
	Snatching	34 (94%)	21 (63%)	55 (79%)
	Drug usage	23 (63%)	21 (63%)	44 (63%)
	Fast driving	27 (75%)	13 (39%)	40 (57%)
	Punching	19 (52%)	11 (33%)	30 (43%)
	Vomiting's	19 (52%)	10 (30%)	29 (42%)

Motor bike driving	20 (55%)	9 (27%)	29 (42%)
Frustration	20 (55%)	9 (27%)	29 (42%)
Emotional	15 (41%)	10 (30%)	25 (36%)
Smoking	3 (.08%)	2 (.06%)	5 (7%)

In table 2, the data shows the number and percentage of responses that each interview provided for the secondary themes. (N =69). The secondary themes include various intentional indirect self-harm behaviors such as injuries, hitting, cuts, overeating, snatching, drug usage, fast driving, punching, vomiting, motorbike driving, frustration, emotional distress, and smoking. The frequency and proportion of these activities are provided for both male (n = 36) and female (n = 33) participants. A high proportion of individuals reported self-inflicted injuries, with 69% of males and 93% of females indicating this activity, for a total of 81%. Hitting was quite common, with 94% of males and 63% of females engaged in the behavior, for a total of 79%. Similarly, cuts were reported by 97% of men and 60% of women, for a total of 79%. Overeating was observed in all male subjects (100%) and 57% of females, totaling 79%. Snatching behaviors were reported by 94% of men and 63% of women, for a total of 79%. Both genders reported drug usage at the same rate (63% each), accounting for 63% of the total sample. Fast driving was recorded by 75% of men and 39% of women, accounting for 57% of all participants. Punching was reported in 52% of men and 33% of women, for a total of 43%. Vomiting as a self-harm habit was reported by 52% of men and 30% of women, for a total of 42%. Motorbike driving was recorded by 55% of males and 27% of females, totaling 42%. 55% of males and 27% of females reported frustration-related behaviors, accounting for 42%. Emotional self-harm behaviors were reported by 41% of men and 30% of women, for a total of 36%. Smoking was the least recorded behavior, with 8% males and 6% females, accounting for 7% of total participants. This extensive analysis of secondary themes focuses on the prevalence and gender variations in various forms of intentional indirect self-harm among adolescent participants.

Discussion

The study gives insight into the prevalence and nature of intentional indirect self-harm behaviors among adolescents in Islamabad and Rawalpindi, revealing significant gender gaps and emphasizing the complex relationship of emotional, psychological, and cultural aspects. The findings highlight the crucial need for focused mental health interventions and support systems in these communities. Females had higher rates of self-inflicted injuries, indicating a proclivity to internalize emotional pain and utilize self-harm as a coping strategy. Males, on

the other hand, were more likely to engage in risky behaviors such as speeding and punching, showing a predisposition to externalize their upset through aggressive or dangerous actions. These gender-specific behaviors underscore the need for personalized interventions that address emotional and psychological problems. Several actions, such as striking, cutting, overeating, and snatching, were highly widespread in both genders, indicating comparable stress-coping techniques. The equal incidence of drug use among men and women implies that substance addiction is a normative coping method in this society, posing substantial cultural and legal hurdles in addressing the problem. Males were more likely to report risky behaviors such as speeding and motorcycle driving. These activities not only imperil the adolescents themselves but also represent greater public health hazards, underscoring the need for programs that address thrill-seeking and the various ways in which male and female adolescents manifest and cope. The analysis conducted showed that intentional indirect self-harm was associated with various emotions such as aggression, conflict, anxiety, stress, helplessness, and loss of confidence, which is consistent with previous studies (Akrani, 2011; Boll, 2017).

Moreover, it revealed additional emotional responses, including irritation, disappointment, loss of interest, sadness, instability, mental pressure, upset, and inability, which contribute to the existing literature. Many participants reported cognitive styles as an integral part of their experiences with intentional indirect self-harm. Cognitive styles play a substantial role in influencing the extent of intentional indirect self-harm experienced by individuals. Participants described various cognitive emotions, including overthinking, tension, burden, loss of interest, and negative thinking.

For instance, one participant shared, "I feel upset and burdened when I am grappling with intentional indirect self-harm."

During a discussion, one of the participants expressed that when faced with a difficult situation, they tend to develop a negative outlook, lose interest, and feel overwhelmed. In 2011, Harrington noted that having low tolerance towards frustration can lead to negative self-confidence and a perfectionistic approach to thinking. The lower frequency of emotional self-harm and smoking suggests that, while these habits are less frequent, they remain significant areas of concern. Emotional self-harm indicates profound psychological difficulties that, while less evident than physical self-harm practices, are just as harmful. The low smoking frequency among Pakistani teens may be due to cultural taboos and tougher tobacco laws. The study's findings underscore the critical need for comprehensive mental health education programs that are customized to Pakistan's unique cultural and socioeconomic environment. Increasing parental knowledge and involvement in adolescents' life is critical for providing the essential support and direction. Research has also shown that having specific thoughts such as lack of control can lead to intentional indirect self-harm. (Brissett & Nowicki, 1973) and perceptions of unfairness (Cival, 2013).

Participants reported experiencing emotional and indirect self-harm, such as sadness, stress, anxiety, and hopelessness.

An instance of a participant sharing their opinion is when one of them said,

"I felt anxious and hit to do punching when I couldn't complete tasks on time".

Another participant explained,

"I experienced a sense of helplessness and profound disappointment when faced with situations where I couldn't accomplish my goals."

These results are consistent with earlier studies. (Calkin et al., 2002; Degnan et al., 2008), which suggests that intentional indirect self-harm can have an impact on mood and thinking styles (Harrington, 2011). Previous studies (Powell et al., 2013) have found that emotions like anxiety, sadness, depression, and stress are frequently associated with intentional indirect self-harm. Moreover, intentional indirect self-harm has been linked to emotions such as perceived powerlessness, helplessness, and hopelessness. (Lewandowski, 2003). The results of this study underscore the significance of comprehending how adolescents interpret their experiences to facilitate their recovery and prevent the overlooking of essential developmental milestones for healthcare professionals dealing with adolescents engaged in intentional indirect self-harm

Conclusion

This research paper has identified intentional indirect self-harm is a complex facet of human behavior that affects individuals throughout their lives. It represents a natural response to challenges and obstacles encountered in life. Intentional indirect self-harm is closely intertwined with feelings of anger and disappointment and typically arises when individuals perceive resistance to the realization of their personal goals and desires

(Pramanik, 2016). This study gives a thorough insight of the frequency and characteristics of intentional indirect self-harm behaviors among adolescents in Islamabad and Rawalpindi. The findings show significant gender differences, with females more likely to internalize their unhappiness through self-inflicted injuries and males more likely to externalize it through risk-taking and violent behaviors. Common behaviors like striking, cutting, overeating, and snatching demonstrate that people use similar coping techniques to deal with emotional and psychological stress. The high frequency of drug use and dangerous behaviors like rapid driving and motorcycle riding highlight the crucial need for tailored interventions. Furthermore, the low but considerable prevalence of emotional self-harm and smoking indicates areas that require greater investigation. Several restrictions were taken into consideration throughout this investigation. The study was limited to Pakistan's largest cities and the sample size was somewhat small. In isolated locations and smaller cities, results could vary. This study emphasizes how important it is to understand the ways in which developing adolescents engage in intentional indirect self-harm, underscoring the necessity for healthcare practitioners to attend to their unique needs and difficulties.

Recommendations

Based on the findings of this study on intentional indirect self-harm among adolescents in Islamabad and Rawalpindi, numerous recommendations are made to completely address these serious issues. First and foremost, specific mental health education initiatives must be implemented in schools and communities. These programs should be culturally sensitive and adapted to the specific requirements of Pakistani adolescents, with a focus on preventing self-harm, supporting mental health, and teaching healthy coping skills. Integrating mental health education into the curriculum allows educators to play an important role in early intervention and prevention. Second, there is an urgent need to increase parental involvement and awareness. Workshops and instructional sessions should be held to educate parents on the indicators of self-harm and good communication skills with their children and the significance of obtaining expert assistance when needed. Empowering parents to notice and treat their adolescent's mental health difficulties can help to create a supportive home environment. Another important recommendation is to have easily available counseling services. Schools and community institutions should offer confidential and nonjudgmental counseling services that are easily available to adolescents. These services should be staffed by trained experts who can provide emotional support, advice, and therapeutic approaches targeted to the specific issues that adolescents experience. Furthermore, gender-specific interventions are necessary. Interventions should be tailored to the varied ways in which male and female adolescents express and cope with emotional discomfort. Programs for females may focus on managing internalized distress and fostering self-care habits, whereas interventions for males may address risk-taking behaviors and promote healthy ways to express aggression. Mental health practitioners should work together to create and execute policies that eliminate stigma associated with mental health concerns while also ensuring enough resources. Communities can assist to destigmatize obtaining help for psychological issues by creating a friendly environment and encouraging open discussions about mental health. Lastly, constant research and evaluation are critical. Further research should look into the underlying causes of self-harm among Pakistani adolescents, as well as the efficacy of interventions that have been applied. Continuous monitoring and evaluation will allow organizations to fine-tune strategies and interventions based on emerging trends and changing needs. To conclude, by implementing these recommendations, organization can aim to reduce the prevalence of intentional indirect self-harm behaviors among adolescents in Islamabad.

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