

Self-Injurious Behaviour and Depression among Residents of Shelter Homes

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Abstract

Depression and self-injurious behaviour are interrelated phenomena. Studies have highlighted the relationship between depression and self-injurious behaviour. In the current study, the residents of shelter homes were studied to find the inter-relationship between self-injurious behaviour and depression along with demographic differences such as gender, age and length of time. The Zung self-rating depression scale and the Ottawa self-injury inventory were administered on a conveniently selected sample of 300 residents of shelter homes along with the demographic sheet. The results revealed a significant positive correlation between depression and self-injurious behaviour. Age was negatively related to both depression and self-injurious behaviour. The study also revealed significant gender base differences in depression and self-injurious behaviour. Residents of shelter homes with longer duration reported more depression and self-injurious behaviour. The study provided a baseline for mental health professionals to better understand the interrelationship and design interventions for reducing depression and self-injurious behaviour.

Keywords: depression, self-injurious behaviour, gender differences, age, shelter homes,

Introduction and Literature Review

Homelessness is defined as a state where an individual is unable to find proper and regular residence. Due to homelessness, an individual is forced to stay outside in shelter homes, temporary centers, and even in places such as bus and train stations, under bridges and on footpaths. It is well-documented that individuals residing in shelter homes are prone to mental health problems (Robinson, 2017). Homelessness is the most significant social problem nowadays. Homelessness impacts the health of homeless individuals both physically and psychologically. Being kept away from the basic necessities of life, homeless individuals suffer from poverty, face hunger and have unhygienic foods. Due to the homeless, their chances of suffering from diseases such as hepatitis, cancer, sexually transmitted diseases and many others

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increase manifolds. Homeless individuals also suffer from depression, anxiety, and other cognitive and behavioural problems (Alowaimer, 2018).

Jonker et al. (2019) defined depression as a state that affects an individual's actions, feelings and thinking, and the individual loses interest in everyday life. They pointed out several emotional manifestations, such as feelings of guilt, sadness, and loneliness. They also experience irritability, emptiness and ineffectiveness in their daily routine.

Depressive disorder is considered the most accumulative and devastating form of psychopathology, with a lifetime prevalence of 16.6%, whereas females report higher levels of depression. Above thirty million adults are diagnosed with depression, causing impairment globally (LeMoult & Gotlib, 2019). Studies have shown that homelessness is associated with a higher risk of mental health issues such as depression and self-injurious behaviour (Buelens et al., 2019; Gleeson et al., 2018; Hack & Martin, 2018; Jonker et al., 2019).

Moschion and Ours (2021) investigated the causal relationship between becoming homeless and depression. The results indicated that homeless individuals have a higher risk of developing depression and a lower probability of being cured. Homelessness itself contributed to the developmental trajectory of depression.

Self-injurious behaviour, or self-mutilation and self-harm, is described as deliberately causing harm to oneself. The person may use a variety of methods, such as hair pulling, cutting, crippling and other painful methods (Hendrick, 2016). Non-suicidal self-injury is voluntarily damaging the body without the intention to die. Non-suicidal self-injury is the core characteristic of borderline personality disorder and has a prevalence rate of 2.7% in the general population. The prevalence rate is higher in adolescents, from 4% to 7% (Rehman et al., 2021).

Taylor et al. (2021) categorized heavy dose, piercing, biting and self-harm under non-suicidal self-injuries. Self-harm is regarded as a significant public health concern due to its greater prevalence globally.

Results obtained from many researches have proved that depression is associated with an increased risk of engaging in self-harming behaviours. Brown et al. 2017) pointed out that self-harming behaviour can be used as a defense mechanism. to eliminate depression and emotional pain caused by depressive thoughts.

Hayes-Skelton & Eustis (2020) proposed the Experiential Avoidance Model. Experiential Avoidance Model (Angelakis & Gooding, 2021; Haywood et al., 2023; Wang et al., 2024) explains how negative experiences like depression can increase the likelihood of the self-injurious behaviour. Another model that explains the relationship between depression and self-injurious behaviour is Emotional Regulation Failure (Chen & Chun, 2019). According to them, the individuals engage in self-injurious behaviour to avoid negative, intense feelings and thoughts.

Objectives of Study

The objectives of the present study are as under

1. To find out the relationship among age, depression, and self-injurious behaviour among residents of shelter homes.
2. To examine the differences with respect to gender and duration of residence in depression and self-injurious behaviour.

Conceptual Framework of Study

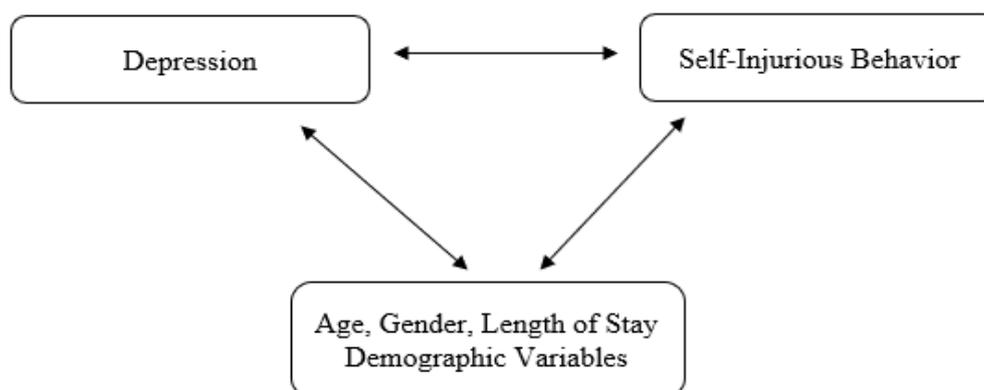


Fig 1: Conceptual Diagram

Hypotheses of the Study

The following hypotheses were formulated for the current study.

1. Depression is positively related to self-injurious behaviour among homeless individuals.
2. Age is negatively related to depression and self-injurious behaviour among homeless individuals.
3. Females will have higher scores on depression and self-injurious behaviour as compared to males.
4. Individuals living in shelter homes for longer duration will have higher levels of self-injurious behaviour and depression than those living in shelter homes for a shorter duration.

Materials and Methods

Participants

The current study sample consisted of N= 300 residents of shelter homes conveniently selected from the shelter homes of Khyber Pakhtunkhwa. The sample was further segregated according to the gender of the participants, age and duration of stay at shelter homes.

Operational Definitions of Variables

Depression. According to Higuera (2020), depression is defined as a loss of interest in daily life activities. The person suffering from depression feels worthless, empty, sad, and even angry. Current research operationalizes it on scores obtained on the Zung Depression Scale.

Non-suicidal Self-injury. Samari et al. (2020) defined non-suicidal self-injury as harming oneself physically through burning, cutting, biting, self-poisoning, beating, hair pulling, and overdose. Current research operationalizes it on scores obtained on the Ottawa Self-Injury Inventory.

Measures

For the current research, two questionnaires Ottawa Self-injury Inventory (OSII) and the Zung Self-Rating Depression Scale (ZSRDS), were used to collect data.

Ottawa Self-injury Inventory. The Urdu version of the Ottawa Self-injury Inventory (OSII; Lewis et al., 2019) comprises 31 items. The scale has response categories ranging from 0 to 4 on a Likert scale. Nixon et al. (2015) reported that it has an alpha reliability coefficient value of .84. In current research, the alpha reliability of the scale is .89.

Zung Self-Rating Depression Scale. Zung Self-Rating Depression Scale (ZSRDS; Zung, 1965) is a 20-item Likert-type scale. The scale consists of a score range of 1 to 4 and a response category of little of the time to most of the time. In current research, the alpha reliability of the scale is .81.

Statistical Analysis

The data were analyzed for descriptive and inferential statistics. Alpha reliability of the scales was computed and correlation, t test was applied to test the hypotheses.

Procedure

The data were collected after obtaining permission from concerned authorities of shelter homes, while adequate ethical considerations were considered. The residents were approached individually and briefed about the nature of the research. They were briefed about the confidentiality and privacy of the data. The participants were also briefed about voluntary participation in the study. All the questionnaires were collected after completion, and participants were thanked for their valuable time and contribution.

Ethical Consideration

The participants were ensured about the privacy and confidentiality of the data. The procedure did not involve any harmful procedure and participant were free to take part in the research. They were also advised to seek professional help for their problems.

Results

Table 1

Correlation between Zung self-rating depression scale and Ottawa self-injury inventory among residents of shelter homes (N= 300)

	1	2	3	M	SD
1.ZSRDS	-	.24***	-.35***	48.04	15.92
2.OSII	-	-	-.29***	51.86	16.14
3. Age			-	24.55	5.74

Note. ZSRDS= Zung self-rating depression scale; OSII= Ottawa self-injury inventory. * $p < .001$.

The results in Table indicate that depression significantly correlates with self-injurious behavior. The results also indicate that age has significant negative correlations with depression self-injurious behavior.

Table 2

Mean, Standard Deviation and *t*-values among shelter home residents living for long and short duration on the Zung self-rating depression scale and Ottawa self-injury inventory (*N* = 300)

Variables	Male (<i>n</i> =133)		Female (<i>n</i> =167)		<i>t</i> (298)	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
ZSRDS	45.73	3.94	50.34	6.77	6.95	<.001	0.79
OSII	41.61	5.27	60.04	17.19	11.91	<.001	1.54

The results in Table 2 indicate that there is a significant difference between males and females with respect to depression and self-injurious behavior, with males obtaining lower scores on both variables.

Table 3

Mean, Standard Deviation and *t*-values among shelter home residents living for long and short duration on the Zung self-rating depression scale and Ottawa self-injury inventory (*N* = 300).

Variables	Shorter (<i>n</i> =168)		Longer (<i>n</i> =132)		<i>t</i> (298)	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
ZSRDS	47.45	5.55	49.35	6.65	2.70	.007	0.31
OSII	45.07	10.08	60.39	18.18	9.05	<.001	1.43

The results indicate that there is a significant difference in depression and self-injury behavior with respect to the duration of stay at shelter homes. Individuals living for a longer duration had significantly higher levels of depression and self-injurious behavior.

Discussion

The present research aimed to explore the relationship between non-suicidal self-injury and depression among the residents of shelter homes. It was also aimed to explore the gender differences and differences in duration of stay in non-suicidal self-injury and depression. The preliminary result indicated that the Ottawa self-injury inventory and Zung self-rating depression scale had reliability coefficients of .89 and .81 respectively. The reliability coefficients indicate that both scales are reliable for the current population.

The hypothesized relationship between self-injurious behaviour and depression among residents of shelter homes was confirmed. Non-suicidal self-injury has a positive correlation with depressive and mood disorders, along with other mental health problems. The results are in line with the theoretical frame works presented in the Wang et al., 2024. According to Wang and Colleagues negative experiences such as depression are associated with self-injurious behaviour. Ballard et al. (2015) found a positive relationship between non-suicidal thoughts and depressive symptoms among homeless individuals. A recent study by Chartrand et al. (2020) found that non-suicidal self-injury has a positive relationship with depression.

It was also hypothesized that age was negatively related to depression and Moran et al. (2012) found that age is negatively related to both depression and self-injurious behaviour. De

Luca et al. (2023) reported that non-suicidal self-injuries are at peak during adolescent, decreasing in intensity thereafter.

The results indicated that the males scored significantly lower as compared to females on depression and self-injurious behaviour. The results are in line with previous research. Gender differences were reported in depression and females scored higher on depression (Wang & Liu, 2019). Similarly, females engage in self-injurious behaviours more often (Miller et al., 2021).

Significant differences were noted with respect to the duration of the stay at shelter homes in depression and non-suicidal self-injurious behaviour. Individuals staying for a shorter duration ($M = 47.45$, $SD = 5.55$) had significantly lower scores on depression as compared to individuals staying for a longer duration ($M = 49.35$, $SD = 6.65$). Similarly, individuals staying for a shorter duration scored significantly less on the self-injury scale as compared to individuals staying for a longer duration. Previous literature proved the fact that living in shelter homes for a longer duration is related to a higher level of depressive symptoms and more non-suicidal self-injurious behaviours (Harvey et al., 2019; Quarshie et al., 2020).

Conclusion of the Study

The present research found that depression is negatively related to self-injurious behaviour among residents of shelter homes. Age was negatively related to both depression and self-injurious behaviour. Females scored higher on both variables, and individuals with longer stay at shelter homes felt more depressed and engaged in more self-injurious behaviour.

Limitations and Suggestions

Due to variations in social scientific research, there are certain limitations in each social scientific research. The current study included residents of shelter homes from different areas of Khyber Pakhtunkhwa. Different geographical regions from Pakistan can improve the generalizability of the results. Due to limitations in time and resources, only limited demographics were studied. Further research can be conducted on a number of other variables, such as precipitating events, personality factors, and social and environmental influences.

Implications of the Study

The current study can be used for further intervention by clinical professionals, social workers, and therapists in the targeted population. Strategies can be adopted to enforce affiliation, love, care, warmth and support in their environment to optimize the quality of life among residents of shelter homes.

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