

Effectiveness of Dialectical Behavior Therapy on Difficulty Coefficient, Life Expectancy and Emotional Processing of Adolescents with Self-injury Background

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Introduction

Adolescence is an important period of human development that is associated with neurological, hormonal, physiological and social changes. During this period, teenagers cope with many stressful factors. Self-injurious behaviors appear in different ways. He has divided self-injurious behaviors into three categories: 1. severe self-injurious behaviors that are observed in mental patients and because of which a person causes serious damage to his own body tissue, such as cutting off a limb from the body. 2- Stereotyped (involuntary) self-harming behaviors that are observed in mentally retarded people with autism or Tourette syndrome. In such a situation, the person involuntarily and repeatedly hits himself (such as banging his head against the wall). 3- Self-harm behaviors are the most common type and are done under the influence of fashion or other factors, such as scratching and cutting the skin, picking wounds, nail-biting, cosmetic surgery, and skin carving. One of the most common problems among teenagers today is self-injurious behavior, which is found to a large extent in all cultures. The aim of this research was to evaluate the effectiveness of dialectical behavior therapy on

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the coefficient of difficulty, life expectancy and emotional processing of adolescents with self-harm.

Method

The research method was semi-experimental with a pre-test and post-test design with experimental and control groups. The statistical population of the research included all female students of the second secondary level of Bushehr 2019-2020 academic year who had a history of self-injury. And the sample size includes 40 people; 20 people were randomly placed and selected in the experimental group and 20 people in the control group. The experimental group underwent dialectical behavior therapy intervention, and the control group did not receive any intervention. The research tools were the self-injurious behavior questionnaire (Sanson et al., 1998), response to difficulty profile (Stoltz, 1997), Miller Hope Scale (1986) and emotional processing questionnaire (Baker et al., 2010).

Results

The results showed that the intervention has increased the difficulty coefficient, life expectancy, and reduced maladaptive emotional processing in adolescents ($p < 0.05$). Also, the research findings indicated that dialectical behavior therapy is an effective method in emotional processing ($p < 0.001$). It shows the results of the univariate analysis of covariance to investigate the effect of the independent variable on each of the dependent variables. The F value obtained for all dependent variables is significant at the $P < 0.05$ level. Therefore, it can be said that dialectical behavior therapy influences emotional processing variables, difficulty coefficient and life expectancy.

Discussion

According to the results of the research, this intervention can be used to improve the difficulty factor, life expectancy and emotional processing of adolescents with self-injury, along with other therapeutic interventions. Also, the focus of dialectical behavior therapy on mindfulness, which is done to observe and describe events non-judgmentally, and awareness and alertness focused on the present moment, leads to the natural development of distress tolerance, and the person learns to deal with emotions without evaluating and trying to change or control them and without arousal. Or experience distress and thereby learn the skill of coping with adverse events, which leads to an increase in the level of difficulty in facing adverse and stimulating life events.

Dialectical behavior therapy, by providing a platform for adolescents to participate in educational groups, attempts to bring the individual to a kind of synthesis through the confrontation of thesis and antithesis. Therefore, by participating in dialectical behavior therapy sessions, adolescents learn to observe the natural cycle of their emotions and clearly see their ups and downs as new emotions replace previous ones.

On the other hand, the adolescent learns that he is able to tolerate his intense emotions without avoidance or resistance. Finally, in the skill of facing emotions, if the adolescent wants to get rid of the emotion he is experiencing or wants to turn his emotion into action (for example, to engage in self-injurious behavior), he experiences facing his emotion by learning the skill of staying with the emotion. In fact, by learning the concept of emotion, the individual realizes that initial discomfort in facing life's adversities is a natural human characteristic, and this inevitable process should not be considered a sign of incompetence or weakness of oneself or others. Also, the focus of dialectical behavior therapy on mindfulness, which is done in order to observe and describe events non-judgmentally and to be aware and alert in the present moment, leads to the natural development of distress tolerance, and the individual learns to experience emotions without evaluating them, trying to change or control them, and without arousal or distress. In this way, the individual learns the skill of coping with adverse events, which leads to an increase in the difficulty factor in facing adverse and arousing life events.

Keywords: dialectical behavior, difficulty factor therapy, emotional processing, life expectancy, self-injury

Author Contributions: Author 1 was responsible for leading the overall research process. Author 2 was responsible for research plan design, data collection and analysis and all authors discussed the results, reviewed and approved the final version of the manuscript.

Acknowledgments: The authors thank all dear teachers who have helped us in this research.

Conflicts of interest: The authors declare there is no conflict of interest in this article.

Funding: This research is not sponsored by any institution and all costs have been borne by the authors
