Non-Suicidal Self-Injury in the Media

By Amanda Purington, M.P.S., and Janis Whitlock, Ph.D.

Entering "self-injury" as a search term in Google yields over 15 million results. Using the same term to search YouTube brings up 2,140 videos[1]. Self-injury appears in popular movies, music lyrics, and music videos. It is described in books, the news, and on the Internet. Ask any adolescent today what self-injury is, and not only will he or she likely be able to define it, nearly half asked will personally know someone who has engaged in the behavior. Self-injury has become such a part of the social landscape today there are even jokes about it: "I wish my grass were Emo so it would cut itself." How are these two phenomena, presence of self-injury in the media and widespread knowledge of it in adolescent populations, related?

Non-suicidal self-injury (NSSI) is defined as the deliberate, self-inflicted destruction of body tissue without suicidal intent and for purposes not socially sanctioned (International Society for the Study of Self-Injury, 2007). Notably common in adolescent and young adult populations (e.g., ages 13–24), studies have found that between 14% and 23% have engaged in NSSI at some point in their lives (e.g., Muehlenkamp & Gutierrez, 2007; Ross & Heath 2002; Whitlock, Eckenrode, & Silverman, 2006) and studies of mental health providers consistently find broad agreement that prevalence has increased over time (Heath, Toste, & Beettam, 2006; Purington, Whitlock, & Pochtar, 2009; Whitlock, Eells, Cummings, & Purington, 2009). With such widespread use of NSSI amongst youth, awareness of NSSI across mental health providers, and large numbers of today's youth reporting they personally know at least one person who has self-injured (i.e., 41% of all respondents in a large 8 college sample; Whitlock, 2009), some have gone so far as to call NSSI the "next teen disorder" (Welsh, 2004). Whether this characterization would garner widespread agreement or not, one thing is clear: self-injury is now a common feature of the adolescent and young adult social landscape. What is less clear is this: what makes NSSI, often used as a maladaptive coping method (Klonsky, 2007; Nock, 2009), so common now?

The answer may be what epidemiologists call "social contagion." Like bacteria that result in disease, behaviors and attitudes are transmissible. The acceptance and adoption of certain behaviors can be communicable and passed from one person to another through vehicles not always recognized for this capacity.

[1] Google and YouTube searches were run 10/20/09.

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Evidence of contagion has been clearly documented in the adoption of fashion trends (Gladwell, 2000), disordered eating (Crandall, 1988), smoking cessation (Christakis & Fowler, 2008), and even suicide (Phillips, 1974). If NSSI is increasing in prevalence, it is highly likely that contagion is at work in the spread of NSSI as well. But just how do ideas and behaviors, like NSSI, spread? While peer-to-peer interactions are certainly influential, their effects are likely to be restricted to small, relatively isolated groups. Moreover, this level of influence does not explain how NSSI could have spread so far and wide over a fairly short period of time. To understand this, the remainder of this article first examines the influence of the media, then explores the growth of NSSI in various forms of media, and concludes with a brief discussion of media literacy as one possible method to reduce the influence of the media in the spread of NSSI.

NSSI in the media was rare prior to the 1980s.

MEDIA INFLUENCES

In contrast to mid-twentieth century images of families gathered around a single television, media now saturates our lives in and outside of the home. From hundreds of television channels and radio stations to movies, magazines, billboards, books, and newspapers, the presence of the media is ubiquitous. The Internet adds yet another dimension to an increasingly complex and interactive media landscape, combining more traditional forms such as music and news with social networking sites, message boards, and video-sharing sites. Adolescents are major consumers of media. Roughly three-quarters of teens own a game console, an iPod or MP3 player, and/or a cell phone (Lenhart, 2009). Nearly all youth ages 12–17 go online, and over half go online daily (Lenhart, 2009). Television and music remain very popular among teens (Lenhart & Madden, 2005; Roberts, Foehr, & Rideout, 2005). The average adolescent is exposed to more than 8.5 hours of media messages each day as a result of "media multitasking" (Roberts et al., 2005).

Society has worried about the impact of the media, particularly on youth, for centuries. For example, the Werther Effect has been identified and extensively studied in recent decades (e,g., Gould, Jamieson, & Romer, 2003; Phillips, 1974). It is named after a rash of copycat suicides that followed the 1774 publication of *The Sorrows of a Young Werther,* a story in which the main character commits suicide; copycat suicides prompted several countries to ban the book (Coleman, 2004). This effect has been so well studied now that researchers surveying relevant literature concluded, "the existence of suicide contagion should no longer be questioned" (Gould et al., 2003, p. 1,273). Recent studies of media effects on behaviors such as disordered eating, aggression, and suicide find similarly: media is a powerful purveyor of knowledge, attitudes, and behavior, and adolescents and young adults are particularly susceptible (Congressional Public Health Summit, 2000; Gould et al., 2003). The number of media portrayals of NSSI has risen in direct proportion to increased awareness and perceived prevalence, suggesting the media contagion effect applies to NSSI as well. Although discerning a causal link is nearly impossible, the trends are clear and suggest that media do play a role in introducing and normalizing NSSI in mainstream culture.

NSSI IN THE MEDIA

NSSI in the media was rare prior to the 1980s and, when present, was most commonly depicted as an indicator of mental illness and a harbinger of suicidality. For example, although NSSI is demonstrated by the main character in the 1968 film *I Never Promised You a Rose Garden,* she is clearly suffering from mental illness. Thus, while viewers likely sympathize with her, few can easily relate to her character or context, rendering her an unlikely role model for NSSI behavior. *Crosses,* identified as the first young adult novel to include characters engaging in NSSI (published in 1991), offers a similar portrayal. The main character and her friend not only engage in NSSI but drink alcohol, use drugs, and ultimately commit suicide, an extreme combination and frequency of risky behaviors to which few readers can readily relate.
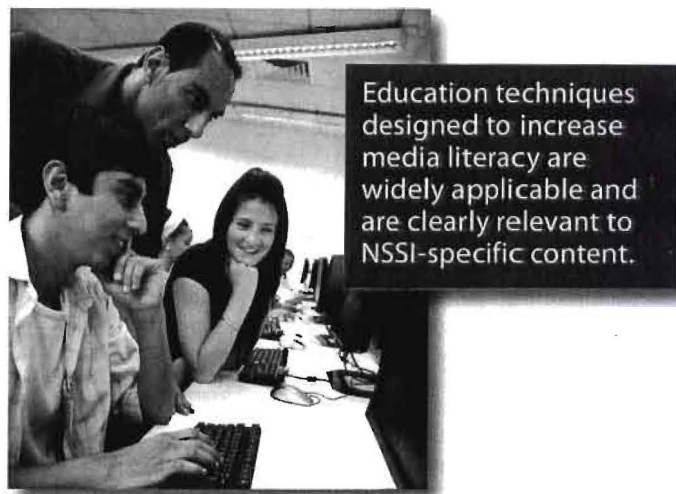
In contrast, more recent NSSI media depictions portray protagonists and situations with which consumers may easily identify. For example, in *Thirteen* (2003), the main character is a normal teenager, struggling to reconcile her fledgling sense of independence and autonomy with a deep desire to fit in with popular peers. The movie graphically depicts her using NSSI to cope with negative feelings. In these scenes, NSSI is portrayed as a coping method that is both readily accessible and effective for a typical young person facing developmentally average life challenges.

> It is rare for current depictions of NSSI to show lasting consequences of the behavior.

Media depictions of NSSI are also growing in frequency. A study of movies containing scenes of NSSI reveals a dramatic increase in number over time, from just 3 in the 15 years from 1966 to 1980 to 23 in the 5-year period from 2001 to 2005 (Whitlock, Purington, & Gershkovich, 2009). Even more dramatic is the increase in music lyrics containing reference to NSSI, with none identified until the period 1981 to 1985, in which one was found, to 38 in the 2001 to 2005 period (Whitlock, Purington, & Gershkovich, 2009). Although there are serious methodological limitations to studies seeking to discern historical trends in self-injury prevalence in media because of unreliable methods for identifying self-injury content in media, such limitations do not exist in searches of self-injury prevalence in written news media. Queries of search engines capable of cross-referencing key terms with newsprint media show a nearly identical historical pattern as that reported above: only one news article referencing NSSI was published between 1966 and 1970 while this number exploded to 1,750 articles between 2001 and 2005 (Whitlock, Purington, & Gershkovich, 2009). While not definitive, such trends suggest that NSSI presence in the media, whether reflective of or responsible for extant trends, has increased awareness of the behavior.

Although normalizing NSSI in mainstream media may help those who engage in NSSI feel less isolated, media depictions of self-injury may have important and little considered negative consequences as well. For example, it is rare for current depictions of NSSI to show lasting consequences of the behavior. Not only do few fictional characters seek help in order to stop self-injuring, media depictions of NSSI rarely show wounds that are more severe than intended, medical treatment that is needed and often avoided for these injuries, and lasting scars. Omitting accurate descriptions of possible consequences and highlighting potential short-term usefulness may glamorize the use of NSSI.

Next to fictional accounts, real stories of NSSI experience have the potential to address this criticism by providing details of NSSI consequences. Interviews with stars such as Angelina Jolie, Johnny

Education techniques designed to increase media literacy are widely applicable and are clearly relevant to NSSI-specific content.

Depp, and Christina Ricci reference celebrity use of NSSI, but rather than completing the portrait these interviews often enhance the mystery of and further romanticize NSSI.

Alongside growing media presence of NSSI, the Internet allows ordinary people to communicate and exchange their experiences with NSSI. While venues such as NSSI message boards, social networking groups or video posts are often used to exchange social support, they also provide opportunity for the transmission of NSSI ideas and techniques as well as provide social reinforcement of NSSI stories and causes (Murray & Fox, 2006; Whitlock, Powers, & Eckenrode, 2006; Whitlock, Purington, & Gershkovich, 2009). For those visitors with no or limited experience with self-injury, NSSI-focused sites may inadvertently (or overtly) suggest NSSI as an effective coping method or show how it may be useful in response to a multitude of stressful situations. Web-based NSSI images or descriptions, many of which are quite detailed since many sites are used as a means of chronicling experiences and thoughts, can also impart new ideas for injuries or trigger NSSI episodes among those who practice NSSI. Moreover, since membership in on-line communities are often used to fill core developmental needs related to community and belonging, deciding to stop the behavior may run head long into the desire to maintain community and, ultimately, interfere with cessation efforts. (For more information on this topic, see Whitlock, Powers, & Eckenrode, 2006; and Whitlock et al., 2007.)

How might media exercise this power? There are multiple means through which media influences behavior. Simply exposing young people to NSSI will likely increase the number who will consider using it (Hodgson, 2004). Similarly, providing "scripts" as to when and how to employ it and normalizing its use by portraying average youth as those who self-injure also likely increase the chance of its adoption, as social learning, disinhibition, script, and emergent norm theories suggest (Abelson, 1976; Bandura, 1977; Freedman, 1982; Turner, 1964). Publicized accounts of celebrity self-injury may also increase copycat self-injury as they do for suicide (Coleman, 2004).

Despite all this, the presence of NSSI in the media is not entirely negative. NSSI representations can increase public awareness and decrease stigma, potentially enhancing the likelihood that someone struggling with NSSI will disclose his or her behavior and even seek treatment (D'Onofrio, 2007; Whitlock, Lader, & Conterio, 2007). For example, in an episode of the television show *Seventh Heaven* designed to raise NSSI awareness, producers featured a realistic portrayal of a character's struggle with NSSI. Responsible, in-depth media descriptions of NSSI, such as can be found in the 2006 documentary *Cut: Teens and Self-Injury,* represent thoughtful and realistic efforts to educate rather than entertain. Additionally,

because of the heightened awareness it brings, NSSI in the media may also encourage treatment professionals to learn more about assessing and treating NSSI (D'Onofrio, 2007).

USING MEDIA LITERACY TO REDUCE THE SPREAD OF NSSI

It is nearly impossible to avoid the reach of the media in contemporary communities. Yet, while the media clearly has the power to influence, individuals need not be passive media consumers. Media education, through the teaching of "media literacy" skills, enables consumers to recognize and examine media messages by challenging the subconscious and unexamined meaning of those messages and promoting skills for questioning core ideas and beliefs. This approach to reduce the influence of the media, particularly in the spread of negative behaviors, is gaining widespread support (American Association of Pediatrics, Committee on Public Education, 1999). While schools could clearly play a role in teaching media literacy skills, this education can begin at home with parents encouraging their children to question the media messages they receive. Developing media literacy skills can be part of a conversation, a stand-alone program in a school, an integrated part of a class, or a several-day long special training[2].

Educational techniques designed to increase media literacy are widely applicable and are clearly relevant to NSSI-specific content. These techniques commonly encourage media consumers to note and question the creator and sponsor of the media message, consider how the message gained their attention, question how others might perceive the same message, unearth persuasive or biased content,

[2] See The Center for Media Literacy (www.medialit.org), Project Look Sharp (www.ithaca.edu/looksharp/), or the Media Literacy Program of the Academy of Motion Picture Arts and Sciences (www.oscars.org/education-outreach/medialiteracy) for more information.

consider what is highlighted or may be missing in the depiction, and question why the message itself has been created (Center for Media Literacy, 2002–2007; Project Look Sharp, 2009). Actively applying these techniques to media content depicting NSSI has the potential to both limit the negative impact of and promote conscious questioning of the cultural narratives that render NSSI an attractive option. This approach may be beneficial in helping to slow the spread of NSSI to those who have never engaged in the behavior and help those trying to stop self-injuring.

SUMMARY

The factors that result in NSSI are multifaceted, but it is likely that contemporary media may be playing a role in its current spread. Depictions of NSSI abound in the media, and this behavior is increasingly shown as a coping mechanism used by ordinary and as well as exceptional people. While these depictions have done much to decrease the stigma of NSSI, it may also be contributing to its normalization. Efforts to minimize media contributions to NSSI adoption should capitalize on the opportunities presented by media literacy approaches to enhance the identification and conscious examination of core messages about NSSI effectiveness and popularity. ᕽ

Amanda Purington, M.P.S., is a research support specialist in the Family Life Development Center and study coordinator of the Cornell Research Program on Self-Injurious Behavior in Adolescents and Young Adults at Cornell University, Ithaca, NY. She can be contacted at ald17@cornell.edu.

Amanda Purington   Janis Whitlock

Janis Whitlock, Ph.D., M.P.H., is a research scientist and director of the Cornell Research Program on Self-Injurious Behavior in Adolescents and Young Adults at Cornell University, Ithaca, NY.

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