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Family Dysfunction and Frustration on Adolescence Perception: A Case Study

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ABSTRACT

Adolescents raised in dysfunctional families can produce frustration. Adolescents who are still developing in making information and making decisions including in processing frustration can lead to non-suicidal acts of self-injury. The pose of this study was to obtain an overview of frustration and family dysfunction in adolescents with non-suicidal self-injury behavior. This research uses a case study approach. The participant of this research is adolescence aged 18 years and female. Data collection techniques using semi-structured interviews and observation. The results of this study indicate that O's frustration comes from family relationships that lack cohesiveness and communication so that adolescence does non-suicidal behavior.

Keywords: Family Dysfunction, Frustration, Adolescent, Non-Suicidal Self-Injury

1. INTRODUCTION

Adolescence is a period of transition from childhood to adulthood which includes changes in physical, cognitive, emotional, and psychosocial [1]. Lovell and White in Tandiono, Dewi and Soetikno [2] add that adolescents begin to meet psychological problems such as depression, anxiety, self-injury, eating disorders, and drug use.

According to Erikson in Gunarsa and Gunarsa [3], adolescents will enter a stage of psychosocial development, namely identity vs identity confusion. The main characteristic at this stage is the search for identity, the ability to be able to deal with conflicts over different values, norms, mindsets, and points of view. As well as adolescence will try to be able to put themselves in a new friendship environment, if adolescence manages to get through this crisis, adolescence will become more mature individuals [1].

According to Bronfenbrenner, the family environment and social environment will influence the response and behavior patterns of adolescents on aspects of social skills such as the ability to communicate, interact with the surrounding environment, solve problems, have good interpersonal relationships, and can build cooperation with others. But often, adolescents, especially late adolescence have low levels of self-confidence, causing self-rejection and low self-assessment [4]. If adolescents do not manage to get through social pressure from the family environment and social environment, they will feel frustrated. Feelings of frustration felt by adolescents can cause feelings of anger that trigger aggression [5]. Feelings of anger can arise if the source of frustration is judged to have alternative behavior other than the behavior that causes the feeling of frustration [6], thus making adolescents use non-

adaptive coping strategies such as non-suicidal self-injury behavior [7].

Although non-suicidal self-injury has a different definition of attempted suicide and is not fatal, individuals who have been involved in non-suicidal self-injury tend to be more likely to consider or attempt suicide than individuals who have not. have been involved in non-suicidal self-injury [8]. Non-suicidal self-injury is an act in which individuals injure or injure their bodies intentionally and directly without any intention of committing suicide, where this action is not socially and culturally acceptable [9].

Factors that can cause adolescents to commit non-suicidal self-injury are child maltreatment, genetic factors, peer influence, feelings of loneliness, adverse family-life events, and general quality of parent-child relationships [10], [11], [12], [13]. In addition, according to Nock in Martin et al. [13], inadequate interpersonal experiences (such as poor communication between family members) showed a positive relationship with the emergence of non-suicidal self-injury behavior in adolescents. Many studies show that various events that occur in the family can increase the risk of individuals committing non-suicidal self-injury behavior [13].

Linehan's biosocial model [14] suggests that individuals who experienced experiences in the family environment that was invalid during childhood (such as emotional experiences being omitted or ignored) could hinder cognitive, emotional, or behavioral development. This deficit is believed to put individuals at risk of engaging in less-than-optimal ways of coping with emotional distress, including non-suicidal self-injury. Linehan in Baetens et al. [15] hypothesized that invalid relationships with caregivers, characterized by inadequate parenting and family functions, could lead to individuals having poor

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emotional regulation abilities and social skills. This deficit can increase individuals using inadequate coping strategies such as non-suicidal self-injury behavior [15].

Similarly, a developmental psychopathology framework can be used to study the relationship between adverse family life events and non-suicidal self-injury [13]. Martin et al. [13] revealed that individuals who received adequate or responsive parenting experiences during childhood could increase the likelihood of individuals to develop good emotional regulation whereas individuals who received inadequate or atypical parenting experiences could increase the likelihood of individuals experiencing emotional deficits and encourage individuals to experience emotional deficits to engage in negative coping (such as performing non-suicidal self-injury).

Based on the explanation of the above phenomenon, researchers are interested in giving an overview of frustration and family dysfunction in adolescents with non-suicidal self-injury behavior.

2. RESEARCH METHODS

The participant in this study was an 18-year-old girl who had thoughts of hurting herself. This study uses a sampling technique in the form of non-probability sampling. The sampling technique used is purposive sampling. The sampling technique was determined based on the 20 determined characteristics of the participants.

Method used in this study is qualitative in the form of a case study. A case study is a type of research that focuses on exploring one case in detail by extracting in-depth data. Various sources of information-rich in context were used for data mining [18]. Data collection techniques with semi-structured interviews and observation.

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3. RESULTS AND DISCUSSION

3.1. Results

Researchers conducted interviews with subjects with the initials O. O is female and currently, O is 18 years and 1 month old. O is the eldest of two siblings. O lives with her stepfather, mother, and stepbrothers.

Based on the observations and interviews that have been carried out, a result is obtained that when O tells the happy events that have occurred in his life, O often smiles and laughs. However, when O told them the problem with her parents, O's face immediately turned sad. When O speaks and answers questions, the pronunciation and intonation of O's voice tends to sound good and clear and does not stutter, but the intonation of O's voice changes when O tells the problem that O is experiencing with her parents and returns to not vibrating when O tells the event-events that make O happy. On the right and left hands, there are many cutting scars.

During the interview process, O seemed enthusiastic in answering the questions that the researcher O answered all that was asked in a clear, communicative, and open manner with the questions asked. O has a good memory and is coherent in telling the events that have happened in her life. O had no difficulty in answering the questions asked.

Often makes eye contact with the researcher when the researcher is asking questions, but when answering questions from the researcher or telling about the problems she has, O tends to avoid eye contact by always looking up and down.

The beginning of hurting herself, when O was in elementary school (sixth grade) and until now O still hurts herself when O feels sad or if she feels pressured to vent what he feels to cause a feeling of relief. At first, O had the idea of hurting herself because she imitated what her upperclassmen did, her upperclassmen often hurt themselves when she fought with her mother. So that after O heard a story from an upperclassman that after hurting herself, the negative feelings she felt were quite reduced, O tried to imitate what her upperclassman did when she felt she was depressed. After O tried this, O felt that the negative emotions she had suppressed so far, were felt less, and felt that she was happier than before.

O explained that she usually self-injury in her room by using sharp objects she encounters such as razors, scissors, or pressing nails into the skin until they bleed. Until the incident was known by her boyfriend and her boyfriend confiscated all sharp objects in O's room. When the sharp objects she had been confiscated by her boyfriend so that when she felt very sad and thought she could be relieved when she hurt herself, O pry the shavings to get the razor and hurt yourself. The left arm and right hand are body parts that have a lot of cutting marks.

O has a close relationship with her grandmother because since O's biological father died when O was little, O lived with her grandparents so that since then O was taken care of and raised by her grandparents until O entered junior high school and then lived again with her stepfather, mother, and stepbrother. O already considers her grandmother as her second mother, every time O hurts herself, the thing she is most afraid of is if her grandmother finds out what she is doing, her grandmother will think about it and will get sick.

O explained that O did not have a very close relationship with her parents because O's parents always demand that O always do things according to the wishes of her parents. O explained that her relationship with her brother was not very close. O feels that her brother is a spoiled, lazy, less intelligent person and is always assisted in doing tasks.

O felt that her father and mother often treated her unfairly and her brother in academic matters. O always tries to do her best in academic and non-academic fields by always winning the class or participating in competitions outside the region, but O's parents have never had enough of what O has achieved and have never appreciated what O has done.

O explained that conflict within the family is often one of the reasons why O feels uncomfortable at home. The

conflict that O means is when parents argue with each other and cannot set a good example for O and her brother. O felt that her parents could not provide comfort and happiness. O is happier if she can spend time outside the house like visiting her grandmother, where when O visits her grandmother's house, O can be an open person and not pressured because, at her grandmother's house, O gets the warmth and affection that O needs.

O explained when she felt alone, the actions or mistakes she had done in the past suddenly came and she could never escape the mistakes she had made. O feels that it was a mistake in the past that she had made, which made her what she is now, but O is confused about what to do to get out of this situation. O envies other children that when other children have problems, they can tell their parents about their problems, but O cannot do that. O felt that when she told her mother about the problems she was having, her mother made matters more complicated and added a burden to her.

O who are not good at expressing their emotions choose to hurt themselves to get a feeling of relief and satisfaction rather than taking it out on others with anger which will ultimately hurt other people's feelings. The feeling of O after self-injury is feeling satisfied and feeling that the negative emotions she has suppressed so far are less and feel that she is happier than before.

O wants to change so she doesn't hurt herself again, O knows that it is wrong to hurt herself, this action is unacceptable both religiously and the views of the surrounding community but O does not know how she can vent her emotions that she to hide when you feel depressed without hurting yourself and to change so you don't hurt yourself anymore, it's not that easy, not only by listening to advice from others, O no more hurting yourself. O has tried to vent her emotions by doing other activities but the activities that O does not get the support and approval from her parents so that O still often takes non-suicidal self-injury actions to vent her emotions.

The factor that caused O to self-injury was the lack of a warm and harmonious relationship with her parents and brother. This is because O and her parents often have differences of opinion, O's parents always demand O to do something according to the choices that O's parents have made, but O thinks that everyone has their own life choices and different thoughts, so that O cannot always follow what her parents want which causes O's parents to be angry with her. O also wants to be understood, O wants other people to see it from her point of view too. In addition, O's parents care more about and care for her brother than she does. O explained that if O's brother got good grades, O's parents would appreciate what O's brother had achieved. However, if O manages to become the class champion and wins a competition, O's parents do not praise O's achievements and do not give appreciation for what O has obtained but when O's achievement declines, O's parents scold O. O once asked her parents why her younger brother was getting more attention. O's parents replied that her younger brother was not as smart as she was, so she needed more attention. O felt that because she always excelled, she did not need to be

praised anymore. O was upset and angry about it. Lack of attention from parents and demands from parents to always be understood makes O feel depressed and causes O to hurt herself.

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3.2. Discussion

The results of this study indicate that O has a not too close relationship with his family. According to The Circumplex Model theory [17], it is explained that cohesiveness or emotional bonding between family members is a very important dimension in a family system. Olson [17] explains that if a family has a level of cohesiveness that is too high or too low, it can cause problems for everyone in the family and relationship problems in the family. In addition, communication also plays a very important role in a family. Communication is a forum used by family members to pay attention to each other or respect each other between family members, helping to find a way for the family together and being able to express emotions or feelings they have to other family members.

Shek in Tandiomo, Dewi and Soetikno [2] adds that family functioning is an important factor in every individual development where the higher the dimensions of flexibility and cohesion between family members, the higher the emotional well-being of children in the family. If adolescence can solve their problems by taking advantage of positive things around them such as family, then it is less likely that adolescence will hurt themselves.

Linehan [14] explains that individuals who experience invalid family experiences in childhood (such as emotional experiences being excluded or ignored) can hinder cognitive, emotional, or behavioral development. Linehan in Baetens et al. [15] added that this deficit is believed to put individuals at risk of engaging in less-than-optimal ways of coping with emotional distress, including non-suicidal self-injury.

The results of this study are also in line with the theory of the function of a family, which is to foster affection to create a healthy family. In addition, a family can provide a sense of security and self-acceptance to create a meaningful life. Being able to provide satisfaction and a more meaningful life is a satisfaction that cannot be provided by work or others because the continuity of relationships in life in pairs or friendships may last temporarily or not forever while relationships between family members last forever. And the family environment has a very important role in teaching children to behave properly and correctly following the values or norms in the surrounding environment, setting goals in life, and teaching them to have a good attitude. This is because the family environment is the first environment in teaching children the rights, obligations, and responsibilities, as well as the actions, were taken by children, can be like parents which will later be influenced by the outside environment and peers when children begin to enter the adolescent's phase [18].

Adolescence is a period of transition from childhood to adulthood, where during adolescence they experience

many changes in themselves such as changes in cognitive, emotional, and psychosocial. According to Erikson in the adolescent phase, individuals will begin to search for their **16**entity. Erikson defines identity as a self-concept, setting goals, values, and beliefs to which the individual is strongly committed. At this stage, a person realizes herself as part of health, which aims to build in the adolescent phase in the aspects of trust, autonomy, initiative, and industry, as well as as a basis for overcoming challenges in adulthood [1].

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Erikson argues that the main task of adolescence is to face the crisis of identity versus identity confusion or identity versus role confusion. Adolescents will begin to have a sense of their own identity, a sense that they are unique human beings. Adolescence will begin to realize the feelings attached to her such as what he likes and does not like, the goals she wants to achieve in the future, and the power to control his own life [1].

However, sometimes the transition from childhood to adolescence will experience difficulties, this is because adolescents not only experience changes that occur in themselves, but adolescents will also experience changes in the attitudes of parents, other family members, teachers at school and changes in relationships with other people [3].

Adolescents will also begin to form a group with peers, formation with peers means that they will begin to recognize new values, norms, procedures, and customs. So that the values and norms that have been adhered to so far will experience shock and affect the formation of different because they find opinions and opinions that have been believed so far [3].

Although this period of crisis is experienced by all adolescence, it should not be left alone. This critical period is a common and normal period, where adolescence will often find many conflicts that can be used as lessons for the future and can be used as opportunities to get a body and develop in a better direction. If adolescents successfully pass this critical period, they will produce a harmonious and mature personality [3]. Meanwhile, if adolescents do not make it through this crisis period, they will experience feelings of frustration within themselves and use non-adaptive coping strategies such as non-suicidal behavior to overcome this frustration [7].

According to Yates [19], one of the factors that cause individuals to commit non-suicidal self-injury is because it is influenced by factors of low self-defense mechanisms or coping strategies that are not adaptive in overcoming problems they have such as having a history of trauma or childhood abuse (especially childhood abuse), sexual or emotional), poor communication between family members, lack of harmony and warmth in the family [19], [20].

According to Zakaria and Theresa [7], non-suicidal self-injury acts are carried out as a form of poor or non-adaptive coping mechanism in dealing with social pressures in the surrounding environment and as a form of channeling or expressing negative emotions caused by psychological pain experienced by the perpetrator. difficult to describe or explain in words. Boyes reported that

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individuals who engage in non-suicidal self-injury are individuals who tend to be more sensitive to emotional stimuli and experience an increase in the intensity of their emotions than individuals who do not engage in non-suicidal self-injury [21]. Taylor adds that individuals hurt themselves because they want to reduce negative emotions or unwanted feelings [22].

Knigge [23] explained that when individuals injure themselves, the brain releases endorphins, whose effects are similar to those of morphine so that individuals do not feel pain when injuring themselves. Endorphins can also cause pleasurable physical sensations or feelings of euphoria and make self-harm an easy experience for many people.

This study has several limitations, namely, data retrieval which is done online makes it limited in observing the movements made by participants during the interview process or observing the client's physical condition. In addition, the unstable internet connection made researchers and participants thrown out of the meeting room.

4. CONCLUSIONS

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Based on the results of interviews and observations with O, it can be concluded that O lives in a dysfunctional family which lacks cohesiveness and good communication between family members. So that it causes frustration in O and O to perform non-adaptive coping strategies to overcome this frustration by taking non-suicidal self-injury actions.

O can try to find other adaptive activities that are more useful for dealing with the frustration such as doing activities that she likes, venting her feelings of frustration in a personal journal, spending time with loved ones. In addition, O can try to build better communication with family members or strengthen relationships with other family members and learn to control emotions more and be more patient.

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The researcher suggests that other researchers who are interested in exploring frustration in the family can conduct interviews with each family member to get a more in-depth picture of the condition of the family.

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