

Exposure to domestic violence and self-injurious behaviors: the role of emotional suppression in adolescents

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KEYWORDS

Domestic violence
Emotional regulation
Non-suicidal self-injury
Students

ABSTRACT

The present study examined the effect of emotional suppression between exposure to violence at home and self-injurious behaviors in Peruvian adolescents. The sample consisted of students of both genders in first and second grade of secondary education from two public educational institutions. Three instruments were administered: self-injury questionnaire, violence exposure questionnaire, and emotional regulation questionnaire. The analysis of the structural equation model, performed using the Robust Maximum Likelihood estimator, showed an adequate adjustment, confirming the study hypotheses. A direct effect of exposure to direct violence on self-injury ($\beta = .49, p < .001$) and of exposure to indirect violence ($\beta = .13, p = .017$) was found. Likewise, mediation analysis confirmed the mediating role of emotional suppression in the relationship between exposure to direct violence and self-injury ($\beta = .025, p = .024, CI\ 95\% [0.00, 0.02]$). It is concluded that youth who experience violence in the home and resort to emotional suppression as a coping strategy may be more likely to develop self-injurious behaviors.

Exposición a la violencia en casa y conductas autolesivas: el rol de la supresión emocional en adolescentes

PALABRAS CLAVE

Violencia intrafamiliar
Regulación emocional
Autolesión no suicida
Estudiantes

RESUMEN

En la presente investigación se examinó el efecto de la supresión emocional entre la exposición a la violencia en casa y las conductas autolesivas en adolescentes peruanos. La muestra estuvo constituida por estudiantes de ambos géneros que cursaban primer y segundo grado de educación secundaria de dos instituciones educativas públicas. Se administraron tres instrumentos: cédula de autolesiones, cuestionario de exposición a la violencia y cuestionario de regulación emocional. El análisis del modelo de ecuaciones estructurales, realizado mediante el estimador de Máxima Verosimilitud Robusta, mostró un ajuste adecuado, confirmando las hipótesis del estudio. Se encontró un efecto directo de la exposición a la violencia directa en las autolesiones ($\beta = .49, p < .001$) y de la exposición a la violencia indirecta ($\beta = .13, p = .017$). Asimismo, el análisis de mediación confirmó el rol mediador de la supresión emocional en la relación entre la exposición a la violencia directa y las autolesiones ($\beta = .025, p = .024, CI\ 95\% [0.00, 0.02]$). Se concluye que los jóvenes que experimentan violencia en el hogar y recurren a la supresión emocional como estrategia de afrontamiento pueden presentar mayor probabilidad de desarrollar conductas autolesivas.

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Adolescence is a stage characterized by multiple changes at the physical, emotional, and social levels (Medeiros et al., 2025). During this process, it is common for adolescents to engage in a search for identity, which in some cases may lead to risk behaviors (Ntshalintshali & Maepa, 2025). Among these are self-injurious behaviors, which are often associated with adverse experiences during childhood or within the family environment (Diaz et al., 2020). In fact, the home, rather than being a protective space, can become the primary setting where adolescents are exposed to various forms of violence, whether directly or indirectly (Evans et al., 2008; Simões et al., 2024).

Several studies have shown a rise in the incidence of these behaviors among adolescents. A meta-analysis revealed that 22% of adolescents have engaged in self-injury, raising concerns in educational and clinical settings (Kandsperger et al., 2021; Xiao et al., 2022). It is estimated that over 15% of adolescents have had at least one self-injury episode in their lifetime (Gillies et al., 2018; Muehlenkamp et al., 2012), and approximately 10% of these cases require hospitalization (Gillies et al., 2018). The most frequent methods include drug use and cutting the skin (Asociación Española de Psiquiatría del Niño y el Adolescente [AEPNYA], 2008; Hawton & O'Connor, 2012). However, it is estimated that only one in eight adolescents seeks professional help after self-injuring, limiting the ability to timely identify the issue and provide adequate care (Hawton et al., 2012; Jeréz-Cañabate et al., 2023).

This section will present the central concepts of the study to theoretically support the relationships between the variables and their relevance to the field of mental health.

Self-injurious behaviors

Self-injurious behaviors (SIB), also known as non-suicidal self-injury (NSSI), represent a global public health issue (Buerger et al., 2022). These behaviors are defined as the deliberate act of harming oneself without suicidal intent (Javdan et al., 2024; Klonsky, 2011). They frequently emerge during adolescence and are more prevalent among females (Gillies et al., 2018; Muehlenkamp et al., 2019).

SIB are among the main causes of disability-adjusted life years (DALYs) (Zanus et al., 2021), a metric that combines years of life lost due to premature death and years lived with disability, thus estimating the overall burden of diseases and disabilities (Alvis & Valenzuela, 2010). There are various forms of self-injury, including cutting, scratching, hitting, burning, and other atypical behaviors (Fleta, 2017). These injuries are often inflicted on less visible parts of the body, such as the wrists, arms, and legs (Belletich et al., 2019). Gender differences have been noted in self-injury methods: females are more likely to cut themselves, while males tend to hit themselves (Albores-Gallo et al., 2014).

Regarding prevalence, international studies report rates of SIB in adolescents ranging from 11.5% to 19.2% (Sarmiento et al., 2019). In the Peruvian context, it has been found that 19.8% of adolescents have engaged in SIB, with cutting being the most commonly reported method, especially among females (Cabrera de la Cruz, 2021). Several risk factors have been associated

with these behaviors, including domestic violence (Cabrera de la Cruz, 2021; Fleta, 2017). From a functional perspective, it is argued that the primary function of SIB is to reduce aversive emotional or cognitive states (Nock & Prinstein, 2004). The affective regulation model posits that such behaviors serve as a strategy to alleviate intense emotional distress (Klonsky, 2007). Moreover, they are maintained by four reinforcement mechanisms: positive intrapersonal (driven by a sense of emptiness), negative intrapersonal (to eliminate negative emotions), positive interpersonal (as a means of communication or seeking attention), and negative interpersonal (to escape or avoid a situation) (Nock & Prinstein, 2004), underscoring the importance of understanding the underlying triggers.

Exposure to domestic violence and SIB

Exposure to violence occurs in various contexts and in different forms (Burgos-Benavides et al., 2025). It may be direct—through physical, emotional, or sexual abuse or neglect—or indirect, such as witnessing violence against others (Bautista-Aranda et al., 2023; Buka et al., 2001). One of the earliest and most damaging adverse experiences is being exposed to violence at home, which undermines physical and emotional well-being and a sense of security (Baek et al., 2024; Xiao et al., 2023).

In Latin America, two out of three children and adolescents are victims of domestic violence (UNICEF, 2022). In Peru, during 2024, the Women's Emergency Centers (CEM) provided assistance to 5,182 boys and 13,955 girls aged 12 to 17 who had been victims of domestic violence (Ministerio de la Mujer y Poblaciones Vulnerables [MIMP], 2024).

Research shows that violent behavior by parents affects children's socioemotional development (Thompson-Walsh et al., 2021). Witnessing violence at home from a young age is associated with emotional instability, self-injury, and even suicide attempts (Bonet et al., 2020; Moe et al., 2021; Vázquez et al., 2023).

Constant exposure to violence can lead to a prolonged state of fear and hypervigilance, hindering the development of emotional, cognitive, and behavioral capacities (Evans et al., 2008; Franzese et al., 2014; Moe et al., 2021). It becomes difficult to identify, express, and manage emotions (Gross, 2002). Domestic violence has been identified as a predictor of self-injury (Fleta, 2017), as individuals exposed to it are more likely to adopt avoidant coping strategies (Kaplow et al., 2014), using self-injury as a way to reduce the distress associated with intense emotions or difficult situations (González-Arrimada et al., 2023). Therefore, the data reported by UNICEF (2022) and MIMP (2024), along with theoretical evidence regarding the emotional consequences of growing up in a violent environment, justify the present study's focus on exposure to domestic violence (EDV), due to its high frequency and profound impact on adolescents' socioemotional development.

Emotional suppression and SIB

Emotional suppression (ES) is a type of emotion regulation (ER) strategy (Gross, 2001) that involves inhibiting the external

expression of emotion (Gross, 2002; Gross & Cassidy, 2024; Thuillard & Dan-Glauser, 2020). When used excessively, this strategy can produce a rebound effect, intensifying the emotions being suppressed (Kaplow et al., 2014), and leading to physiological and behavioral activation in response to emotional stimuli (Gross & Levenson, 1993).

According to Gross's (1998) ER model, healthy emotion regulation involves identifying emotions, defining goals regarding their intensity (increasing or decreasing), and applying adaptive strategies. However, when strategies are applied dysfunctionally, such as through chronic use of ES they may result in maladaptive responses (Hervás & Vázquez, 2006), reducing one's ability to manage emotions effectively (Gross & John, 2003). According to Kaplow et al. (2014), frequent use of ES as a coping strategy significantly increases the likelihood of suicidal behavior, suggesting that this form of coping can heighten emotional vulnerability in adolescents.

Scientific literature supports this theoretical framework, identifying a relationship between ES and SIB among adolescents (Barreto et al., 2023; Clapham & Brausch, 2022; Palmer et al., 2019). Previous studies have also examined ES in relation to variables such as depression, childhood maltreatment, and self-compassion (McLean et al., 2007; Olaseni et al., 2024; Wu et al., 2023), as well as its interaction with affective mediators like guilt, shame, or prosocial behaviors between childhood maltreatment and self-injury (Zhang et al., 2023). However, a research gap exists regarding the mediating role of ES between EDV and SIB, highlighting the need for further investigation into this relationship.

ES as a mediator between EDV and SIB in adolescents

From this perspective, it is proposed that ES mediates the association between EDV and SIB. When adolescents grow

up in violent environments, they are emotionally impacted. In many cases, if they lack appropriate tools to manage their emotions, they may begin to suppress them as a coping mechanism (Franzese et al., 2014; Moe et al., 2021). However, frequently repressing one's feelings may hinder proper emotional processing, and over time, this emotional buildup may lead adolescents to seek alternative means of relief, such as SIB, which may serve as an outlet (Klonsky, 2007).

Thus, continued research in this field is crucial, as a deeper understanding of these relationships can enhance our knowledge of the psychological processes underlying self-injury and provide empirical evidence for developing specific interventions to prevent and treat these behaviors in adolescence.

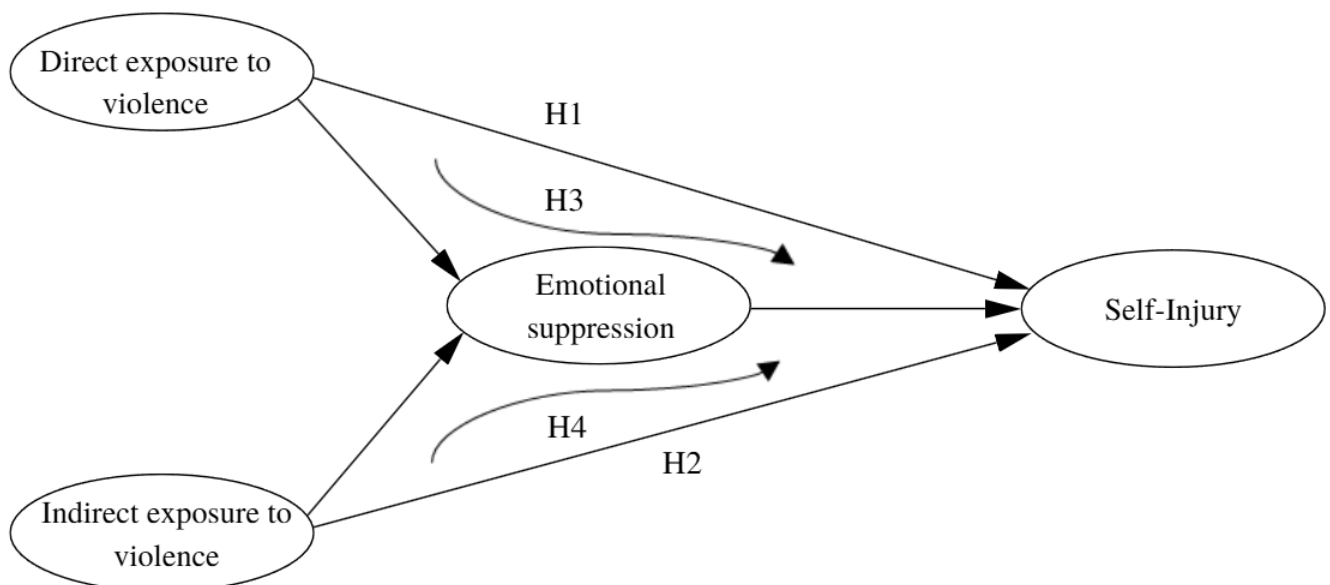
The present study

The theoretical review shows that both EDV and frequent use of ES are related to the occurrence of SIB in adolescents. However, previous studies present methodological gaps in integrating these variables, particularly regarding the mediating role of ES in this relationship. Therefore, to better understand the psychological processes underlying the development of these behaviors, further investigation of this potential mediation is required.

In this context, the present study aims to analyze the mediating role of ES in the relationship between EDV and SIB among Peruvian adolescents (Figure 1). The following hypotheses are proposed: H1. Direct exposure to violence (DEV) has a direct effect on SIB; H2. Indirect exposure to violence (IEV) has a direct effect on SIB; H3. ES mediates the relationship between DEV and SIB; H4. ES mediates the relationship between IEV and SIB.

Figure 1

Theoretical model



Method

Type of study

A cross-sectional and explanatory study was conducted, considering latent variables represented through a structural equation model (Ato et al., 2013).

Participants

The sample was selected through non-probabilistic sampling, with the inclusion criterion being male and female students enrolled in the first and second grades of secondary education. Exclusion criteria included students with special educational needs and those who responded to the surveys in a biased or incomplete manner.

A total of 547 students from two public educational institutions in the city of Huaraz (Peru) participated. The average age was 13.09 years ($SD = .75$), ranging from 12 to 16 years old.

Instruments

Non-Suicidal Self-Injury Form Based on the DSM-5, developed by Albores-Gallo et al. (2014). The validated instrument consists of 12 Likert-type items, with response options ranging from 1 = *Never* to 5 = *Always*. It covers two dimensions: subdermal self-injury (five items) and cutaneous self-injury (seven items). The introductory question guiding the application of the instrument is: "Have you ever intentionally hurt yourself to the point of bleeding or pain in any of the following ways?" The first dimension includes behaviors such as "cutting the skin," while the second includes actions such as "inserting an object under your nails." Factor analysis revealed factor loadings greater than .4 for each dimension. Cronbach's alpha coefficients were acceptable: subdermal self-injury $\alpha = .78$, cutaneous self-injury $\alpha = .76$, and overall internal consistency $\alpha = .84$ (Vilchez, 2016).

Exposure to Violence Questionnaire (CEV), developed by Orue and Calvete (2010), includes six items that assess victimization or direct and indirect exposure to violence in four contexts: school, neighborhood, home, and TV. For this study, only items measuring direct and indirect exposure to violence at home were used (e.g., "How often have you been insulted at home?", "How often have you witnessed someone insulting another person at home?"). Responses are rated on a five-point Likert scale from 0 = *Never* to 4 = *Every day*. The scale has shown good fit indices (CFI = .93, NNFI = .92, RMSEA = .07).

Emotion Regulation Questionnaire (ERQ), developed by Gross and John (2003) and adapted for adolescent populations (Navarro et al., 2018), consists of 10 items rated on a Likert scale from 1 = *Strongly disagree* to 5 = *Strongly agree*. It includes two dimensions: cognitive reappraisal (six items; e.g., "When I want to feel more intensely a positive emotion like joy or happiness, I change what I'm thinking about") and suppression (four items; e.g., "I keep my emotions to myself"). The psychometric properties of the ERQ-CA confirm the two-fac-

tor structure in its adaptations (explained variance of 41.26%, $\lambda > .4$), with internal consistency of .61 for suppression and .64 for cognitive reappraisal. The instrument also demonstrates satisfactory test-retest reliability (Gullone & Taffe, 2012).

Procedure

In September 2023, authorization was obtained to administer the questionnaires in two educational institutions, with approval from principals and academic coordinators to access each grade and section under teacher supervision. The questionnaires were administered in person. Participants were informed about the purpose of the study, and it was emphasized that participation was voluntary. All students who agreed to participate were evaluated anonymously and confidentially, thereby eliminating any ethical risk. Contact information for the research team was provided to address any questions or requests for additional information during or after the study. The study was approved by the Ethics Committee of the School of Psychology at César Vallejo University under code PID 047/5-2023-II.

Data analysis

Descriptive statistics were calculated. The independent samples t-test was used to assess differences in scores by gender, with a 95% confidence level, along with Cohen's d to determine the effect size of the differences (Dominguez-Lara, 2018). Pearson's correlation coefficient was used to examine the relationships between variables (Cohen, 1988).

The research model was analyzed using structural equation modeling (SEM) with the Robust Maximum Likelihood estimator (MLR), due to its robustness against deviations from normality (Muthen & Muthen, 2017). Acceptable model fit was determined using the following criteria: CFI > .9 (Bentler, 1990), RMSEA < .08, and SRMR < .08 (Browne & Cudeck, 1992). Statistical significance in mediation analysis was estimated using the bootstrapping method with 5,000 iterations and a 95% confidence level (Yzerbyt et al., 2018). Reliability was assessed using internal consistency through Cronbach's alpha (α) and Omega (ω) coefficients. Analyses were performed using R software version 4.2.3 and the "lavaan" package version 0.6-15 (Rosseel, 2012).

Results

A reliability analysis was conducted for the dimensions under study. The scores for the variables were scaled to a range from 0 to 30 to improve readability without affecting the correlations between them. Table 1 presents the descriptive statistics, including skewness (S), and the correlations among the study variables, which ranged from .12 to .66. The internal consistency coefficients (Cronbach's alpha) ranged from .69 to .79.

Table 2 presents a gender-based comparative analysis, revealing statistically significant differences with small to moderate effect sizes in both types of exposure to violence, emotional

Table 1

Descriptive statistics, internal consistency coefficients, and correlations among study variables

Variables	<i>M</i>	<i>SD</i>	<i>S</i>	α	ω	1	2	3	4	5
1. Direct exposure to violence	6.7	6.4	0.8	.79	.79	–				
2. Indirect exposure to violence	6.5	6	0.8	.69	.71	.6*	–			
3. Emotional suppression	14.5	7.6	-0.1	.71	.73	.18*	.12*	–		
4. Subdermal self-injury	3	4	2.2	.72	.78	.47*	.33*	.18*	–	
5. Cutaneous self-injury	3.6	4.2	1.8	.74	.76	.48*	.37*	.22*	.66*	–

Note. *M* = Mean; *SD* = Standard deviation; *S* = Skewness; α = Cronbach's Alpha; ω = McDonald's Omega.

* $p < .01$.

Table 2

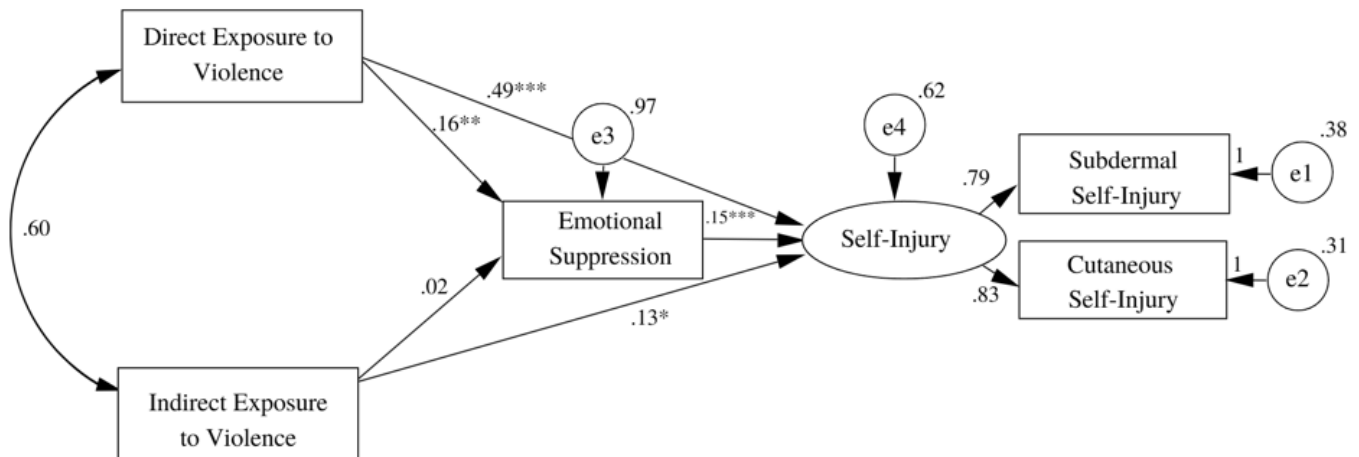
Gender-based comparative analysis

Variables	Group	<i>N</i>	<i>M</i>	<i>MD</i>	<i>SD</i>	<i>t</i>	<i>p</i>	<i>d</i>
Direct exposure to violence	Female	271	8.02	7.5	6.7	4.82	< .001	.41
	Male	276	5.44	2.5	5.7			
Indirect exposure to violence	Female	271	7.1	5	6.3	2.36	.018	.2
	Male	276	5.9	5	5.7			
Emotional suppression	Female	271	15.1	16.88	7.5	6.38	< .001	.55
	Male	276	13.91	15	7.6			
Subdermal self-injury	Female	271	4.02	3	4.5	5.83	< .001	.5
	Male	276	1.91	0	3.1			
Cutaneous self-injury	Female	271	4.66	3.21	4.7	1.84	.067	.16
	Male	276	2.65	2.14	3.3			

Note. *N* = Sample size; *M* = Mean; *MD* = Median; *SD* = Standard deviation; *t* = Student's t-test value; *p* = Statistical significance; *d* = Cohen's d effect size.

Figure 2

Results of the explanatory structural model of the relationship between exposure to violence and self-injury. Standardized path coefficients are shown



suppression, and subdermal self-injury. However, no statistically significant differences were observed for cutaneous self-injury.

The analysis of the proposed model showed a good fit: $\chi^2(2) = 2.1$, $p = .354$, CFI = 1, RMSEA = .008, SRMR = .007. A direct effect of direct exposure to violence (DEV) on self-injury was observed ($\beta = .49$, $p < .001$), as well as a direct effect of indirect exposure to violence (IEV) on self-injury ($\beta = .13$,

$p = .017$). These findings are illustrated in Figure 2. To test the mediation hypothesis, statistical significance of the indirect effect was estimated using bootstrapping with 5,000 iterations. A significant indirect effect of DEV on self-injury through emotional suppression was found ($\beta = .025$, $p = .024$, 95% CI [0.00, 0.02]), while the indirect effect in the case of IEV was not statistically significant.

Discussion

The objective of this study was to analyze the impact of domestic violence on SIB among Peruvian adolescents, as well as the mediating role of ES in this relationship. The findings confirmed the first and second hypotheses, showing a direct effect between EDV and SIB. A significant effect was found for DEV, and a moderate effect for IEV. These results are consistent with previous studies identifying violent family environments as a significant risk factor for emotional and behavioral problems in adolescents (Fleta, 2017; González-Arrimada et al., 2023; Kaplow et al., 2014). Violence, as a direct threat to physical and psychological integrity, is linked to intense emotional impacts. In this regard, the findings align with Bonet et al. (2020) and Franzese et al. (2014), who assert that such experiences significantly affect ER processes.

The results also confirmed the third hypothesis, demonstrating that ES significantly mediates the relationship between DEV and SIB. This mediation suggests that ES may function as a dysfunctional coping strategy in response to witnessing domestic violence. These findings are supported by Gross's (1998) ER model, which argues that chronic use of techniques like ES impairs one's ability to effectively manage emotions. Similarly, Kaplow et al. (2014) highlight that adolescents exposed to adverse experiences who frequently rely on ES are more prone to develop suicidal behaviors.

Moreover, the experiential avoidance model (Klonsky, 2007) helps explain how, when emotions cannot be adequately expressed or channeled, some adolescents may resort to self-injury as a form of immediate relief. In this context, ES not only intensifies affective distress but also contributes to the maintenance of SIB as a dysfunctional emotional regulation strategy, particularly in the face of intense emotions such as guilt, anger, or hopelessness. Regarding the fourth hypothesis, the mediation of ES in the relationship between IEV and SIB was not confirmed. ES has been linked to anxiety, depression, and post-traumatic stress disorder (Kaplow et al., 2014). Additionally, studies suggest that exposure to violence is associated with greater internalizing difficulties (e.g., depression, anxiety, eating disorders) and externalizing behaviors (e.g., substance abuse, conduct disorders) (Thompson-Walsh et al., 2021). The emotional impact of witnessing violence may also be connected to cognitive distortions, such as negative beliefs about oneself or the world (Margolin & Gordis, 2004). In this light, the lack of a mediating effect for ES may indicate that other psychological mechanisms are at play, highlighting the need to explore new variables in future research.

Furthermore, it was observed that girls experienced higher levels of violence than boys, reflecting greater exposure to risk situations. Violence against women remains a global public health issue (Garcia-Moreno et al., 2006). Although both genders can be victims, such cases are more frequent among females (Johnson, 2008). These statistics reveal an urgent need to develop public policies and support programs to address this problem and improve the mental health and social integration of affected individuals. Additionally, studies have shown that adolescent girls in North America and Europe are twice as likely

as boys to engage in self-injury, a behavior strongly associated with increased suicide risk (Moloney et al., 2024). These results emphasize the importance of addressing the issue through a gender-sensitive approach, as the causes and effects of violence can differ significantly between males and females.

Practical implications

This research offers important contributions both practically and methodologically. In particular, it highlights the urgency of developing intervention programs focused on enhancing ER strategies among adolescents who have experienced violence. Implementing these programs within school settings would be key for early identification of at-risk adolescents. Furthermore, such programs could help adolescents develop emotional competencies that promote psychological well-being and improve their quality of life (Gross & John, 2003; Hervás & Vázquez, 2006).

Limitations

When interpreting the findings of this study, several limitations should be considered. Given the cross-sectional design, causal relationships between variables cannot be established, only correlations. Future studies are therefore encouraged to implement longitudinal designs to better analyze the temporal dynamics of violence exposure, ES, and SIB. Another limitation is the reliance on self-report measures as the main data collection method, which may introduce response bias. To address this, future research should consider complementary techniques such as interviews, observations, or reports from close informants.

Additionally, the sample was selected through non-probabilistic sampling and limited to a single city in Peru, which restricts the generalizability of the findings to the national level. To broaden the applicability of results, future research should consider samples with different geographic locations and socio-demographic characteristics. It would also be beneficial to compare mediation models based on variables such as age, sex, or region to identify potential differences.

Finally, although the study addressed EDV globally, it did not differentiate between the agents involved (e.g., father, mother, others). Analyzing these differences may provide deeper insight into how these experiences affect adolescent well-being. It is also recommended that future studies examine other ER strategies and their interactions with EDV and SIB, and further explore gender differences in the relationship between ES and SIB, considering prior research indicating higher prevalence of both ES and SIB among females (Cabrera De la Cruz, 2021).

Conclusions

The findings of this study demonstrate that ES plays a mediating role in the relationship between DEV and SIB. Adolescents who witness or experience violence and resort to ES as a coping strategy are more likely to engage in self-injurious behaviors. These results underscore the importance of promot-

ing adaptive ER strategies to reduce such behaviors in contexts where violence is prevalent. Consequently, it is essential to implement educational programs that support early identification of vulnerable adolescents and foster the development of their emotional skills. Moreover, given the high prevalence of domestic violence and its disproportionate impact on females, public policies must include specialized psychosocial support for at-risk adolescents.

Author contributions

Conceptualization: L. M.-P., G. P.-E., R. C.-B.
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Writing – Original draft: L. M.-P., G. P.-E., J. R. P.-D.
Writing – Review & editing: J. R. P.-D., J. L.-S., L. M.-P., G. P.-E.

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Conflict of interest

The authors declare no conflicts of interest.

Data availability statement

The data supporting the findings of this study are available from the corresponding author upon reasonable request.

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