



Development and Psychometric Properties of Self-Harm Intention Scale in Indonesian Students

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Abstract: This study aims to develop and evaluate the validity and reliability of the Self-Harm Intention Scale based on Ajzen's Theory of Planned Behavior, comprising two components: attitude toward the behavior and subjective norm. A quantitative approach was employed involving 206 school and university students in Bandung, with data collected through an online survey. Item analysis using item-rest correlation identified five items with discrimination indices below 0.30, while the remaining items demonstrated acceptable discriminatory power. Content validity, assessed using Aiken's V, yielded a value of 1.00 for 27 items, indicating excellent agreement among experts. Confirmatory Factor Analysis (CFA) indicated an adequate model fit, and the scale demonstrated very high internal consistency, with reliability coefficients ranging from 0.962 to 0.978. Overall, the findings suggest that the scale has strong potential as an early screening tool for self-harm intention. These results underscore the importance of educational settings in identifying early signs of self-harm intention and suggest that schools and higher education institutions can play a more active role in early detection and prevention when supported by a valid and reliable measurement instrument. Future studies are recommended to examine the external validity of the scale and to involve more diverse samples.

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Introduction

The prevalence of the Basic Health Research (2018) report on Emotional Mental Disorders in West Java Province shows that approximately 11.70%, or around 11,968 adolescents and young adults aged 15–24 years, experience emotional mental disorders (Hutami et al., 2020). Mental disorders are characterized by an abnormal combination of thoughts, emotions, behaviors, and social relationships. Mental health disorders are more likely to occur in adolescents and young adults. Stress and depression often arise due to academic pressure, emotional instability, and poor social relationships. Uncontrolled emotional distress can drive individuals to express negative feelings through risky behaviors, one of which is self-harm (Suryananta & Wilani, 2024).

In Indonesia, numerous studies on self-harm have been conducted, but most of them still focus on actual self-harm behaviors rather than on intentions. Nasution & Angraini (2021) investigated various types of self-harm behaviors carried out by adolescents and found that releasing negative emotions was the most commonly used method. Kurniawan et al. (2024) found that self-harm was very common among high school and university students, reaching 17-40%. Suryananta & Wilani (2024) showed that social and psychological factors, such as loneliness, parenting style, and maladaptive coping, influence



this behavior. A study by Afrianti (2020) found a significant relationship between parent and child communication patterns and the tendency to engage in self-harm. According O'Connor et al. (2011), the emergence of self-harm thoughts and the execution of self-harm behaviors are influenced by different factors. Motivational factors may shape the thoughts, whereas volitional factors and levels of life stress determine whether these thoughts translate into actual self-harm behavior.

Early adulthood is a transitional stage from adolescence to adulthood, characterized by the need to adjust to new life patterns and social expectations, in which individuals are expected to assume new roles, develop attitudes and values, and achieve independence in facing these demands (Purwandura, Pertiwi, & Novitasari, 2022). However, not all individuals are able to cope effectively with these challenges, as some perceive self-injury as a way to relieve the pressure they experience, with physical pain considered easier to manage than emotional or psychological distress (Kurniawaty, 2012 in Purwandura, Pertiwi, & Novitasari, 2022). This condition is reflected in the increasing phenomenon of self-harm among students, indicating that schools are a strategic setting for intervention, as they serve as the primary environment for social interaction, norm formation, and direct access to psychological support through teachers and counselors (Liyana & Laily, 2025). In line with this, the vulnerability of university students in regulating their emotions, which can lead to self-harm behavior, further highlights that universities also play a crucial role as strategic settings for intervention by providing psychological support and preventive services through educational and counseling systems (Shafira & Hargiana, 2022).

Adolescence is a transitional stage of development from childhood to adulthood, characterized by various changes in biological, cognitive, and socio-emotional aspects (Karimah, 2021). The human developmental phase in which numerous biological, psychological, and social changes occur. During this transitional stage from childhood to adulthood, individuals often experience emotional turbulence and internal conflict (Suryananta & Wilani, 2024). According to Karimah (2021), adolescence is a period in which individuals undergo various changes, yet their thinking has not fully reached a mature level. Among university students who fall within early adulthood mental and physical challenges are common, as they face demands and responsibilities that differ significantly from those encountered during adolescence (Awalinni & Harsono, 2023).

The condition can trigger the emergence of deviant behaviors, especially when there is no supervision from the family, particularly parents, due to an unhealthy family relationship. Along with the various changes experienced by adolescents, they also face numerous challenges and difficulties. Some adolescents experience significant developmental changes physically, emotionally, and cognitively. Facing these challenges and pressures, some adolescents may struggle to manage their emotions and stress, placing them at risk of engaging in self-harm as a way to express their feelings or cope with the pressures they experience. Adolescents may engage in self-harm as a way to cope with the challenges and stress related to this developmental stage, such as identity formation, peer relationships, academic pressure, and family conflicts (Andrei et al., 2024). After passing through adolescence, individuals enter early adulthood, which is also filled with social and psychological demands. Within the age range of 18 to 25, early adults begin to adapt to new roles in higher education, employment, and social interactions. These challenges can lead to loneliness, stress, and emotional pressure, all of which increase the risk of mental health problems (Kurniawan et al., 2024).



Studies show that self-harming behavior is also quite common in this age group. A survey conducted by YouGov in 2019 found that 36.9% of Indonesians had intentionally harmed themselves, with this age group being the most involved. (Suryananta & Wilani, 2024). Self-harm or self-injury is a form of behavior carried out to cope with emotional pressure or emotional pain by hurting and harming oneself without the intention of committing suicide (Tarigan & Apsari, 2022). Self-harm and self-inflicted injury are forms of behavior used to cope with emotional pressure, and although they are not classified as mental disorders, several conditions such as borderline personality disorder, depression, bipolar disorder, and schizophrenia are often associated with self-harm behavior itself (Fajaruddin & Sahrul, 2024). Phenomenon is commonly found during adolescence because adolescence is a transitional stage from childhood to adulthood, during which individuals experience various physical and emotional changes (Hasibuan & Rahmawati, 2019 as cited in Aufa & Hasibuan, 2024).

These complex developmental changes often create high psychological pressure in adolescents, making them more likely to seek maladaptive ways to cope with it. In the current era of modernization, adolescents aged 14–21 are highly vulnerable to engaging in self-harm as a way to replace psychological pain with physical harm, which may be triggered by difficulties in problem-solving, feelings of loneliness, difficulties and low tolerance in dealing with negative experiences, parenting patterns, as well as other external and internal factors (Saputra et al., 2024). According to Fajaruddin & Sahrul (2024) self-harm behavior cannot be easily eliminated and requires effort and courage to reduce such behavior.

Depression in adolescents is not merely a temporary feeling of stress or sadness, but a serious and persistent condition that can negatively affect behavior, emotions, and cognitive functioning, thereby requiring proper intervention. If left unaddressed, it may lead to prolonged psychological distress and increase vulnerability to maladaptive coping strategies, including self-harm, as individuals struggle to manage overwhelming negative emotions such as sadness, hopelessness, anxiety, and despair (Dirgayunita, 2016, in Ramadhany, Sulistyawati, & Saelan). In this context, self-harm behavior cannot be easily eliminated and requires substantial effort and personal courage to reduce such behavior (Anugrah et al., 2023). One of the challenges in early detection and prevention efforts related to self-harm is that not all individuals who have a tendency to harm themselves will immediately express it through actual behavior. Many of them hold the intention or desire to hurt themselves but have not yet acted on it. Therefore, it is important to have a measurement instrument capable of identifying an individual's intention or conscious desire to engage in self-harm before the actual behavior occurs. This is crucial because if an individual already has the intention to self-harm and has engaged in self-harm, they are more likely to perform more extreme actions to end their life (Anugrah et al., 2023).

Suicidal ideation can be understood as thoughts and considerations about ending one's life, which occur along a continuum ranging from a vague desire to die without any specific plan to more active forms involving clear plans and strong intentions to act (Song & Bae, 2022 in Saputra et al.). These thoughts may appear as general reflections on death (passive ideation) or develop into concrete and detailed suicide plans (active ideation). In addition, suicidal ideation can be viewed through two dimensions, namely covert and overt, which help classify the level of risk based on the individual's degree of intent. The overt dimension involves suicidal thoughts that are consciously acknowledged and openly expressed, including specific plans and preparations, whereas the covert dimension reflects



implicit suicidal desires that are not directly communicated by the individual (Artissy et al., 2022 in Saputra et al.). Intention is a strong predictor of behavior according to the Theory of Planned Behavior (Ajzen, 1991). The relationship between NSSI and suicidal behavior demonstrates a continuity of complex behaviors, in which the intention to die becomes the primary distinguishing factor (Grandclerc et al., 2016).

In Indonesia, there is the Self-Harm Inventory (SHI), which functions as an instrument to assess self-harming behavior in psychiatric clinical settings. (Kusumadewi et al., 2020). Various studies on self-harm conducted in Indonesia (Nasution & Angraini, 2021; Kurniawan et al., 2024; Suryananta & Wilani, 2024; Afrianti, 2020) show that social, emotional, and parenting factors are associated with self-harm behavior. Afrianti (2020) investigated self-harm tendencies based on parental communication patterns and found a significant relationship between the two. According to the findings of (O'Connor et al., 2011), self-harm among adolescents is influenced by multiple factors.

This study shows that the emergence of self-harm thoughts and the execution of self-harm behaviors are influenced by different factors. Motivational factors do not distinguish individuals who think about self-harm from those who engage in self-harm, whereas the main differences lie in volitional factors and levels of life stress, which determine when self-harm thoughts are translated into actual behaviors. The core principle of this model states that the factors and processes influencing the emergence of thoughts about self-harm differ from those associated with the enactment of self-harm behaviors or suicidal actions (O'Connor et al., 2011).

Although emotional mental disorders are quite common and numerous studies on self-harm have been conducted, most research in Indonesia still focuses on actual self-harm behavior rather than on the intention or desire to harm oneself (Nasution & Angraini, 2021; Kurniawan et al., 2024; Suryananta & Wilani, 2024; Afrianti, 2020). In fact, not all individuals with a tendency to self-harm immediately express it through actual behavior; many only have the desire or intention to harm themselves without yet acting on it (O'Connor et al., 2011). This indicates that there is a difference in the measurement of self-harm intention, particularly among adolescents and young adults in Indonesia. Most of the measurement tools currently available have been developed abroad, and therefore may not fully align with the social, cultural, and linguistic context of the Indonesian population (Kusumadewi et al., 2020).

Therefore, the researcher intends to develop a self-harm intention scale to address the existing research gap. This study focuses on identifying an individual's intention or conscious desire to engage in self-harm before any actual behavior occurs. The development of this measurement tool is expected to assist researchers and psychology practitioners in detecting self-harm intention more accurately, reliably, and in a way that is relevant to the Indonesian context. Intention itself is a psychological variable that has been proven to be a strong predictor of behavior, as explained in the Theory of Planned Behavior (Ajzen, 1991). The core principle of this theory is also aligned with the model proposed (O'Connor et al., 2011), which states that the factors and processes influencing the emergence of self-harm thoughts differ from those related to the enactment of self-harm behaviors or suicidal actions.



Research Method

This study employed a quantitative research design with a focus on instrument development and psychometric evaluation to construct and validate the Self-Harm Intention Scale (SISH). The number of participants used in this study was 206 participants. The participants consisted of school students and university students who resided in Bandung City, West Java. The participants were selected using a purposive sampling technique based on predetermined inclusion criteria. Most of the participants were female (54.2%), while males comprised 45.8% of the total. The inclusion criteria for the research subjects were school students and university students aged 17 years and above, who were residents of Bandung, West Java, and willing to participate in the study. Before completing the questionnaire, all participants were provided with informed consent containing an explanation of the research objectives, data confidentiality, and their voluntary participation. The questionnaire was distributed online using Google Forms, and participants were recruited through an online survey prepared by the researchers.

The instrument used in this study was the Self-Harm Intention Scale (SISH), which was developed by the researcher to measure the level of individuals' intention to engage in self-harming behavior among school students and university students. This scale aims to identify the level of self-harm intention that emerges in individuals within that age range, as well as to serve as an early detection and prevention tool for the potential increase of self-harm behavior among adolescents and early adults.

The Self-Harm Intention Scale consists of 32 statement items constructed based on two main aspects, namely attitude toward behavior and subjective norm, both of which refer to the components that form intention in the Theory of Planned Behavior (Ajzen, 1991). These two aspects are used as the foundation because this theory explains that intention is formed by an individual's attitude toward the behavior as well as perceived social influence. (1) Attitude Toward Behavior (Self-Harm), which describes an individual's attitude toward self-harming behavior, including the extent to which the behavior is perceived as positive, negative, or acceptable. (2) Subjective Norm, which describes the social influence from the surrounding environment, such as family, friends, or significant others, on an individual's tendency to engage in self-harm. The items were constructed using a frequency scale with five response options, namely: 1 (never), 2 (rarely), 3 (sometimes), 4 (often), and 5 (very often). Higher scores indicate a higher frequency of self-harm intention in the individual.

Table 1. Blueprint

Dimension	Indicator	Item Number		
		Weight	Fav	Unfav
1. Attitude toward behavior	Self-harm can be a way to reduce stress	12.5%	1,2,3	4
	Self-harm is a way to control emotions	12.5%	5,6,8	7
	If engaging in self-harm, one may feel relieved	12,5%	10,11,12	9
	Feeling calm when engaging in self-harm	12,5%	13,15,16	14
	Feeling an urge to harm oneself	12,5%	17,19,20	18
	There is a tendency to engage in self-harm as a form of emotional release	12,5%	22,23,24	21
2. Subjective norm	Feeling that close friends will understand if one engages in self-harm	12,5%	25,26,27	28
	Feeling that the environment is quite open to accepting someone who engages in self-harm	12,5%	29,31,32	30
TOTAL		100%	24	8



The development procedure for the self-harm intention instrument was structured based on the stages of psychological scale construction proposed by Azwar (2016), which emphasize that instrument development begins with defining the measurement objective and continues through the compilation of the final scale. This study focuses on developing a self-harm intention scale for school students and university students in the city of Bandung aged 17 years and above, based on the Theory of Planned Behavior (Ajzen, 1991). This theoretical foundation provides an initial understanding of the cognitive and social factors underlying intention. After the measurement objective was established, the domain of the construct was delineated and broken down into two behavioral aspects: attitude toward the behavior and subjective norm. These aspects were then further specified into more detailed behavioral indicators as a step in operationalizing the construct, allowing the indicators to serve as the basis for constructing the scale blueprint.

The test development began with content validation of the indicators to ensure that they adequately represented the theoretical aspects, attitude toward behavior and subjective norm. Once the indicators were validated, the format of the stimuli and response options was determined. This study used a five-point Likert scale with response options ranging from (1: Never) to (5: Very often). The next stage was item writing, which resulted in 32 initial items derived from all indicators. Each item was designed to capture the frequency with which individuals experienced urges, beliefs, and social influences related to self-harm behavior within the past month. After the items were drafted, two experts conducted an item review (expert judgment) to evaluate item and indicator fit and adherence to item-writing guidelines. This process also served as item content validation, and in this study, all 27 evaluated items obtained an Aiken's V value of 1.00, indicating full validity.

The confirmation stage involved a field test to obtain empirical data on item quality. The data were analyzed for item selection and reliability estimation using the split-half Spearman-Brown method, Rulon's formula, Feldt's test, and Cronbach's alpha. This stage also included preparations for construct validation, which Azwar considers a crucial step to ensure that empirical evidence supports the theoretical structure. The entire process concluded with the final compilation, resulting in the selection of 27 psychometrically sound items as the final instrument for measuring self-harm intention.

Test administration was carried out online using a Google Form prepared by the researcher, which was distributed to school students and university students aged 17 and above in Bandung. Participants were first asked to complete an informed consent form containing information about the purpose of the study and the confidentiality of their data. Higher scores indicate greater self-harm intention. Interpretation of results takes into account the participant's age and emotional condition, and comparisons between groups are made only among equivalent demographic categories.

Result

This study involved young adults and adolescents in the city of Bandung. Data was collected online via Google Forms. Most participants were between the ages of 17 and 25, with a relatively balanced gender ratio.

Table 2. Participant demographic data

Variable	Category	Count (n)	Percentage (%)
Gender	Male	97	47.09
	Female	109	52.91
Age	17–19 years old	21	10.19
	20–25 years old	185	89.81



Education	High school student	21	10.19
	University student	150	72.82
	Working	35	16.99

Reliability

Reliability refers to the extent to which a measurement instrument produces stable and consistent data when used repeatedly to measure a phenomenon (Anggraini et al., 2022). In this context, reliability also reflects the degree to which an instrument possesses internal consistency in measuring the intended construct. The reliability test results for the self-harm intention scale show a very high value. According to Taherdoost (2016), an instrument can be considered reliable if its Cronbach's Alpha exceeds 0.60. Therefore, these results indicate that the self-harm intention scale has very good reliability and is consistent in measuring the targeted construct.

Table 3. Reliability

Variable	Reliabilities	
	Self-Harm Intention	Spearman-Brown
Rulon		0.962
Feldt		0.976
Alpha Cronbach		0.978

Validity

Content validity examines the extent to which the items in an instrument are able to accurately represent the characteristics or behaviors intended to be measured (Utami et al., 2024). One of the commonly used methods to evaluate content validity is Aiken's V index. This method is widely chosen because its calculation is relatively simple, and it provides a clear interpretation through numerical values that indicate the level of item relevance based on expert evaluations (Utami et al., 2024).

In this study, content validity was analyzed using Aiken's V formula for 27 items in the self-harm intention scale. The assessment was conducted by two experts using a five-category rating scale. The results showed that all items received an Aiken's V value of 1.00. This value meets the minimum requirement for two raters with five categories, which is 1.00. Therefore, all items are considered to have good content validity and are viewed as representative in measuring the construct of self-harm intention.

The high Aiken's V values indicate consistent ratings between the experts regarding how well each item matches the aspect being measured. This means that the instrument is considered suitable to move forward to the next testing stages, such as construct validity and reliability tests. The construct validity of the self-harm intention scale was examined using Confirmatory Factor Analysis (CFA). After adjusting the model based on the modification indices for the residual covariances, the chi-square test still indicated that the model was not fit. However, this result can be explained because the chi-square statistic is known to be sensitive to sample size. Even so, other fit indices showed very good model fit. The Root Mean Square Error of Approximation (RMSEA) was 0.059, indicating a model fit that is close to very good. The Standardized Root Mean Square Residual (SRMR) was 0.028, which is far below the recommended maximum threshold. In addition, the Comparative Fit Index (CFI) was 0.995, the Tucker-Lewis Index (TLI) was 0.994, and the Relative Noncentrality Index (RNI) was 0.995. All three indices are above the ideal cutoff values for good model fit. Based on these findings, the measurement model for the self-harm intention scale demonstrates strong construct validity

Table 4. Construct validity index

Model	Factor	Chi-Square	df	p	CFI	TLI	RNI	RMSEA	SRMR	Conclusion
Self-Harm Intention	2	479.253	279	<0.001	0.995	0.994	0.995	0.059	0.028	Fit

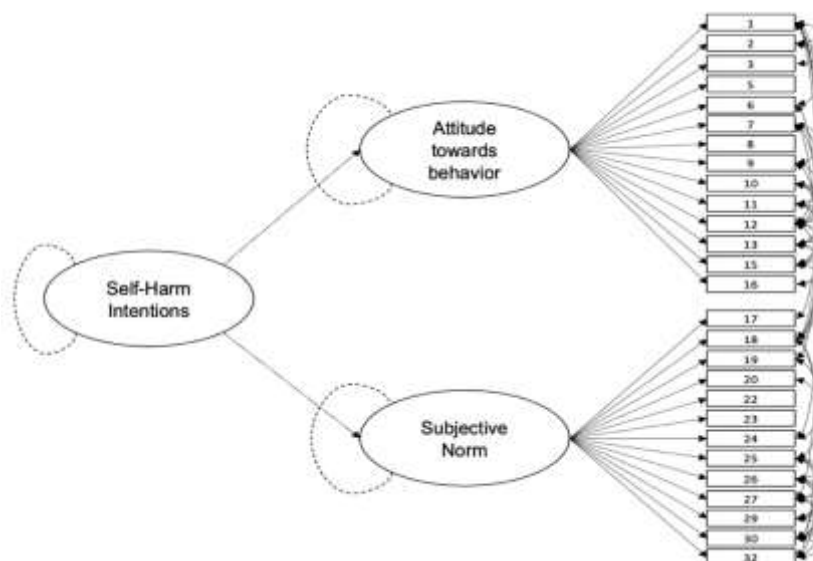


Figure 1. Self-harm Intention Model

Figure 1 shows the measurement model of the self-harm intention scale, which consists of two latent factors, Attitude toward Behavior and Subjective Norm, based on the Theory of Planned Behavior. Each factor is measured by multiple observed items, as indicated by the arrows pointing from the latent variables to their respective indicators. The CFA results show that all items load significantly onto their respective factors, indicating that the items are valid representations of the underlying constructs. The correlation between the two factors suggests that they are related but distinct dimensions in explaining self-harm intention. In addition, the presence of correlated error terms between some items was accounted for through modification indices to improve model fit.

Discussion

This study aimed to develop and test the validity and reliability of a self-harm intention measurement scale. The scale was developed based on the Theory of Planned Behavior (Ajzen, 1991). There are two main aspects that form intention, namely attitude towards the behavior and subjective norm. These two aspects are important components in explaining a person’s intention to engage in self-harming behavior. The initial instrument consisted of 32 items. However, based on the item-rest correlation analysis, it was found that 5 items had correlation values below 0.30. Items with a discrimination index of at least 0.30 are considered successful (Azwar, 2016). Items with low correlations were considered less capable of measuring an individual’s self-harm intention and could reduce the overall reliability of the instrument. Therefore, these five items were eliminated, and further analysis was conducted on the remaining 27 items. Reliability testing of the 27 items was carried out using several methods, including split-half Spearman-Brown, Rulon, Feldt, and Cronbach’s Alpha. According to Azwar (2017), The higher the Cronbach’s Alpha value, the more



consistent the instrument is, and reliability is considered good if it is above 0.70. The results showed very high reliability values, ranging from 0.962 to 0.978, indicating that the items are capable of measuring their respective aspects. The high reliability also supports the assumption that this instrument is unidimensional within each measured factor.

In terms of content validity, all items used were evaluated by two experts using Aiken's V index, and each item received a value of 1.00. This value meets the minimum threshold required for two raters with a five-point rating scale, indicating that the items have content validity and are representative of the intended construct. Construct validity was then confirmed through Confirmatory Factor Analysis (CFA). The measurement model consisted of two latent factors, namely attitude toward the behavior and subjective norm, measured by a total of 27 items. After adjusting the model based on modification indices for residual covariances, the results indicated a very good model fit. The RMSEA, SRMR, CFI, TLI, and RNI values demonstrated strong model fit according to the criteria from Hu & Bentler (1999).

These results indicate that the two-factor structure of this instrument is appropriate, and each item is able to measure its respective construct aspect consistently. Therefore, the developed self-harm intention scale meets the criteria for adequate construct and content validity and demonstrates high reliability. This supports the use of the instrument in both research contexts and practical assessments to understand individuals' intentions to engage in self-harm.

The validity of the Attitude toward Behavior and Subjective Norm dimensions is also relevant when considering the Indonesian context. Indonesia is a collectivist society, where family relationships and social bonds strongly influence how individuals think and behave (Kholiq et al., 2025). This means that Subjective Norm, which reflects how much a person is influenced by the expectations of those around them, is especially relevant in Indonesia. This is supported by Afrianti (2020), who found that communication patterns between parents and children are related to tendencies toward self-harm. Similarly, Maravilla et al. (2025) found that social support from family and peers can reduce the likelihood of self-harm among adolescents. When adolescents are unable to manage stress, they may turn to maladaptive coping strategies, including self-harm. Therefore, capturing both attitudinal and social dimensions of self-harm intention is important, and this instrument is considered suitable for use in the Indonesian context.

This study has several limitations. The results of the Confirmatory Factor Analysis (CFA) showed that the chi-square test indicated a lack of fit. Additionally, the study only involved a sample from a specific group, so the population representation is limited. Future research is recommended to use a larger and more diverse sample to achieve more stable and representative model fit results. Furthermore, it is important to examine external validity to ensure that the instrument performs well across different social and cultural contexts in Indonesia.

This instrument can also be practically useful for school counselors and educators in Indonesia. Schools and universities are one of the most accessible places to provide mental health support for adolescents (Nawaz et al., 2024). By using this scale periodically, school counselors and university staff can identify students who may show early signs of self-harm intention, whether through negative attitudes toward self-harm or through feeling pressured by their social environment. Students who score high on either dimension can then be referred to counselors or mental health professionals for further follow-up. This can be especially useful for students who may be using self-harm as a way to cope with academic



stress, as Kurniawan et al. (2024) noted that peer influence and stress are among the factors associated with self-harm among Indonesian students. With the results from this scale, counselors can design more targeted programs to help students develop healthier coping strategies, allowing educational institutions to respond more proactively rather than waiting until self-harm behavior has already occurred.

Conclusion

This study successfully developed and tested a valid and reliable instrument for measuring self-harm intention among adolescents and early adults, based on the Theory of Planned Behavior. The analysis results showed that this instrument consists of two main aspects, namely attitude toward behavior and subjective norm, which were found to explain individuals' tendencies in forming the intention to engage in self-harm. All items in the instrument were assessed as content-valid, with an Aiken's V value of 1.00. The Confirmatory Factor Analysis results also confirmed the suitability of the measurement model, indicated by fit indices that met the ideal criteria, and demonstrated very high reliability, ranging from 0.962 to 0.978. Therefore, the Self-Harm Intention Scale (SISH) can be used as an effective instrument for detecting self-harm intention among adolescents and early adults in Indonesia. This instrument is expected to assist researchers and psychology practitioners in efforts for early prevention and intervention regarding self-harm behaviors. In the context of education, these findings highlight the importance of schools and higher education institutions in identifying early signs of self-harm intention. With the availability of a valid measurement tool, educational settings can become more responsive to students' psychological conditions and play a more active role in supporting early detection and prevention strategies.

Recommendation

Based on the findings of this study, future research is encouraged to examine the external and predictive validity of the scale by involving a broader and more demographically diverse sample. The use of a longitudinal design is also recommended to observe the consistency and development of intention over time. In addition, this instrument has the potential to be further developed as an early screening tool in educational and mental health settings, provided that ethical considerations and professional support are properly maintained. For educational practitioners, including school teachers and college leaders, it is recommended to consider utilizing this instrument as part of early identification efforts for students who may be at risk. This can be integrated with counseling services or student support systems within schools and universities, to ensure that appropriate assistance and follow-up interventions can be provided in a timely and responsible manner.

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