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RESEARCH ARTICLE / ARTIKEL PENELITIAN

The Role of Self Criticism as a Mediator between Dating Violence and Non-suicidal Self-Injury

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ABSTRACT

Non-suicidal self-injury (NSSI) is a deliberate self-harm without suicidal intent. Dating violence (DV) as the role of self-criticism (SC) are known risk factors for NSSI, however research on this topic is limited. This study examines the role of SC in the relationship between DV and NSSI using a quantitative approach with a correlational design. The participants were 159 young adults aged 18-24 years old. The instruments used were Deliberate Self-Harm Inventory (DSHI; $\alpha=0.9$), Dating Violence Questionnaire-R (DVQ-R; $\alpha=0.901$), and Forms of Self-Criticizing/Attacking & Self-Reassuring Scale ($\alpha=0.887$). This study found that SC acts as a mediator in the relationship between DV and NSSI, $\beta=0.047$; (95% CI:0.021; 0.088); $z=2.694$; $p<0.05$. These findings suggest that SC may be a key psychological mechanism linking DV to NSSI, highlighting its relevance for preventive and clinical interventions.

Keywords: dating violence, emerging adulthood, non-suicidal self-injury, NSSI, self-criticism

ABSTRAK

Non-suicidal self-injury (NSSI) adalah tindakan menyakiti diri sendiri secara sengaja tanpa disertai niat bunuh diri. Kekerasan dalam pacaran (DV) merupakan salah satu faktor risiko NSSI, namun penelitian tentang hubungan ini masih terbatas, terutama terkait peran *self-criticism* (SC). Studi ini mengeksplorasi peran SC dalam hubungan antara DV dan NSSI menggunakan pendekatan kuantitatif dengan desain korelasi. Peserta penelitian terdiri dari 159 dewasa muda berusia 18-24 tahun. Instrumen yang digunakan meliputi Deliberate Self-Harm Inventory (DSHI; $\alpha=0,9$), Dating Violence Questionnaire-R (DVQ-R; $\alpha=0,901$), dan Forms of Self-Criticizing/Attacking & Self-Reassuring Scale ($\alpha=0,887$). Studi ini menemukan bahwa SC berperan sebagai mediator dalam hubungan antara DV dan NSSI, $\beta=0,047$; (95% CI:0,021; 0,088); $z=2,694$; $p<0,05$. Temuan ini menunjukkan bahwa SC mungkin merupakan mekanisme psikologis kunci yang menghubungkan DV dengan NSSI, menyoroti relevansinya untuk intervensi pencegahan dan klinis.

Kata kunci: dating violence, dewasa awal, non-suicidal self-injury, NSSI, self-criticism

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INTRODUCTION

Non-suicidal self-injury (NSSI) is a serious mental health concern that continues to attract research attention, especially due to its rising prevalence in recent years (Carvalho et al., 2015). NSSI refers to a form of deliberate self-harm without suicidal intent, characterized by behaviors such as cutting, burning, scratching, hitting, or bumping oneself, with the intention of causing only minor to moderate physical injuries (American Psychiatric Association, 2022; Klonsky et al., 2014). Although official records on NSSI prevalence are limited, numerous studies reported a consistent increase over time (Arifin et al., 2021; Hooley & St. Germain, 2014; Megawati et al., 2019; Nock, 2010). These behaviors are especially common among adolescents (12-16 years old) and young adults (18-24 years old; Claes & Muehlenkamp, 2014; Gandhi et al., 2018; Klonsky et al., 2011). Hamza and Willoughby (2016) noted that 30-50% of early adults reported engaging in NSSI. In Indonesia, the numbers reached 75.3% at the age of 18-24 years (Kaligis et al., 2021). The high prevalence led us to focus on young adults aged 18-24 years.

The causes of NSSI behavior in early adulthood are related to differences in developmental stages, such as heavier demands and new experiences, without proper maturity levels and life experiences (Arinda & Mansoer, 2020; Jannah et al., 2022; Megawati et al., 2019). NSSI can also be motivated by various risk factors (Chen, 2022). According to Claes and Muehlenkamp (2014), there are two risk factors for NSSI behavior: distal factors (temperament and personality traits, family environment, cultural or social pressure, and traumatic experiences) and proximal factors (emotional dysregulation, low body esteem, cognitive distortion, dissociation, peer influence, and psychiatric disorders). More than one of these risk factors motivated individuals who commit NSSI. Individuals with a history of psychiatric disorders are more prone to NSSI, although this does not exclude the possibility of those with no psychiatric history (Nock et al., 2006). In DSM-5-TR, NSSI is categorized under "other conditions that may be a focus on clinical attention," and further research is recommended to explore its risk and protective factors (American Psychiatric Association, 2022). In line with these considerations, this study aimed to examine two potential risk factors for NSSI: dating violence (DV) and self-criticism (SC).

Vaughn et al. (2015) found that individuals engaged in NSSI are often victims of violence, particularly intimate partner violence (IPV) or dating violence (DV). DV is experienced by individuals who are in a romantic relationship. It can be physical, psychological, or sexual (Murray et al., 2008; Rodríguez-Franco et al., 2010). DV is considered to be a subset of IPV and is particularly prevalent among younger age groups. According to *Annual Record of Violence against Women* published by Komnas Perempuan (2020 to 2023), between 2019 and 2022, there were 3,386 cases of DV and violence by former partners (VFP). These cases seemed to increase every year, predominantly among early adults aged 18-24.

DV is a distal risk factor for NSSI behavior (traumatic experience; Claes & Muehlenkamp, 2014). A number of studies have confirmed a positive correlation between DV and NSSI (Murray et al., 2008; Baker et al., 2015; Vaughn et al., 2015; Weiss et al., 2015; Adams et al., 2021; Carranza et al., 2022; So'diyah, 2022). Involvement in DV has been shown to increase the risk of both NSSI ideation and behavior (Adams, 2010; Carranza et al., 2022). Community-based research indicates that up to 50% of individuals engaging in NSSI have experienced IPV (Vaughn et al., 2015). McCollum et al. (2024) reported that 10.3% of 4,694 participants engaged in NSSI, while 12.3% experienced IPV. In addition, involvement in IPV influenced suicidal ideation, suicide attempts, and NSSI. Supporting this, So'diyah (2022) also found that DV accounted for 26.7% of self-injury behaviors, with severity of abuse associated with increased NSSI risk (So'diyah, 2022).

Even though both DV perpetrators and victims have been found to engage in NSSI behaviors (Carranza et al., 2022), this study focused on the victims. Previous studies suggested that NSSI among DV victims' functions as a response to the abuse for several purposes. First, NSSI may be used as an attempt to overcome interpersonal difficulties, including attempts to emotionally influence or manipulate partners and/or significant others (Carranza et al., 2022). Second, it may serve as an attempt to relieve the negative emotions, such as sadness, excessive guilt, anxiety, depression, or symptoms of post-traumatic stress disorder (Klonsky et al., 2014; Crapolicchio et al., 2021; Naismith et al., 2022). Over time, NSSI is eventually carried out as a form of negative emotion regulation strategy (Nagy et al., 2021).

In addition to these functions, NSSI behavior may also be used as a form of self-directed anger or self-punishment (Klonsky et al., 2014). DV victims tend to blame themselves, which stems from negative self-assessment—this is highly associated with self-criticism (SC) (Gilbert et al., 2004; St. Germain & Hooley, 2012; Perkins et al., 2020; Nagy et al., 2021; Gao et al., 2023). SC arises when individuals experience DV (Crapolicchio et al., 2021; Naismith et al., 2022) and is recognized as a proximal risk factor for NSSI, reflecting underlying cognitive distortions (Claes & Muehlenkamp, 2014). Individuals who engage in NSSI tend to exhibit significantly higher levels of SC compared to those who do not (Glassman et al., 2007; St. Germain & Hooley, 2012; Perkins et al., 2020). Thus, NSSI serve as an unhealthy coping strategy to manage intense self-critical thoughts (Nagy et al., 2021).

Based on these findings, SC may influence the cognitive process of DV victims who engage in NSSI behavior. However, research on this particular subject is limited. Murray et al. (2008) suggested further research on the relationship between DV and NSSI. Similarly, DSM-5-TR highlights the importance of further research on NSSI and its associated risk factors (American Psychiatric Association, 2022). Given the high prevalence of both NSSI and DV in early adulthood—and the scarcity of related studies in the Indonesian context—this study aims to explore SC as mediating variable in the relationship between DV and NSSI. Previous studies have supported the mediating role of SC, such as between emotion dysregulation and NSSI (Jannah et al., 2022), and between self-concept and NSSI among bullying victims (Arifin et al., 2021). Accordingly, the hypothesis of this study posits that SC mediates the relationship between DV and NSSI.

METHOD

Research Design

A quantitative study with a correlational design was conducted to examine the relationship between DV, SC, and NSSI. The data were collected online by Google Form. Participants were given consent forms that outlined the research objectives, their rights, and the research procedures prior to filling out the questionnaire and were given the opportunity to withdraw from the study without any consequences.

Participants

Participants were recruited using purposive sampling. Participant criteria were young adults aged 18-24 years, residing in Java, and are currently experiencing or have had experienced violence in a romantic relationship within the past 12 months. Screening questions were included to verify participants' age, domicile, and their dating violence experience, such as psychological, physical, and sexual abuse. This study obtained ethical clearance from Health Research Ethics Commission, Faculty of Medicine, Semarang State University, on August 5, 2024 (No. 457/KEPK/FK/KLE/2024). The sample size was measured using G*Power 3.1.9.7 (Faul et al., 2009) with a minimum of 61 participants.

Measurements

The 17-item Deliberate Self Harm Inventory (DSHI) developed by Gratz (2001) was used to measure NSSI behavior. The version of the DSHI used in this study was adapted into Indonesian by Sugianto (2020). A validity test using the Confirmatory Factor Analysis (CFA) technique indicated good model fit ($Chi-Square=120.82$; $df=97$; $p-value<0.05110$; $RMSEA=0.035$). The scale demonstrated very high internal consistency ($\alpha=0.9$). Responses are rated on a Likert scale: (1) never, (2) once, (3) more than once, and (4) often.

Dating Violence Questionnaire-R (DVQ-R) developed by Rodríguez-Díaz et al. (2017) was used to measure DV. The DVQ-R is a shortened version of the Dating Violence Questionnaire for Victimization and Perpetration (DVQ-VP) by Rodríguez-Franco et al. (2010). The DVQ-R used was adopted into Indonesian by Waluyo (2024). This scale consists of 20 items and demonstrates very high internal consistency ($\alpha=0.901$). DVQ-R consists of 5 dimensions of DV, i.e., detachment, humiliation, coercion, physical, and sexual. Responses were in the form of a Likert scale, with (0) never, (1) rarely, (2) sometimes, (3) often, and (4) always.

The scale used to measure SC was Form of Self-Criticizing/Attacking & Self-Reassuring Scale (FSCRS) developed by Gilbert et al. (2004) and adapted into Indonesian by Altiany (2019). A validity test using Confirmatory Factor Analysis (CFA) technique showed good model fit ($Chi-square = 194.04$; $df=1.64$; $p-value=0.05445$; $RMSEA=0.027$). FSCRS consists of 22 items, comprising 9 items on the Inadequate Self, 8 items on the Reassured Self, and 5 items on the Hated Self. The reliability of FSCRS demonstrated high internal consistency ($\alpha=0.887$). Responses to both favorable and unfavorable items are rated using a Likert scale, i.e., strongly agree (SS), agree (S), disagree (TS), and strongly disagree (STS).

Data Analysis

Data analysis was performed using JASP Version 0.19.1.0 (JASP Team, 2024). Inferential analysis with linear regression analysis was conducted to examine the influence of DV and SC in predicting NSSI behavior, as well as mediation analysis to examine the role of SC as a mediator.

RESULTS

The number of participants was 159 ($M_{age}=21.5$; $SD_{age}=1.52$). Among them, 3 participants (1.9%) were 18 years old, 12 (7.5%) were 19, 28 (17.6%) were 20, 32 (20.1%) were 21, 37 (23.3%) were 22, 30 (18.9%) were 23 years, and 17 (10.7%) were 24. From these data, 143 (89.9%) participants were female, and 16 (10.1%) participants were male. Most participants were from Central Java (93 participants; 58.5%), followed by West Java (39; 24.5%), DKI Jakarta (11; 6.9%), D.I. Yogyakarta and East Java each (7; 4.4%), and Banten (2; 1.3%).

There were 20 (12%) participants in the high category of DV, 87 (55%) in the medium category, and 52 (33%) in the low category. Most participants, 140 (88%) reported engaging in NSSI behaviors, while 19 (12%) did not. Among the 140 individuals who engaged in NSSI, 8 (5%) were in the high category, 28 (8%) in the medium category, and 104 (77%) in the low category.

Table 1. General description of participants ($N=159$)

Characteristics	Categories	Total	Percentage
Sex	Male	16	10.1%
	Female	143	89.9%
Age	18	3	1.9%
	19	12	7.5%
	20	28	17.6%
	21	32	20.1%
	22	37	23.3%

	23	30	18.9%
	24	17	10.7%
Domicile	Banten	2	1.3%
	DKI Jakarta	11	6.9%
	DI. Yogyakarta	7	4.4%
	West Java	39	24.5%
	Central Java	93	58.5%
	East Java	7	4.4%
Occupation	Students	129	81.1%
	Fresh Graduate	2	1.3%
	Employee	28	17.6%
Sexual Orientation	Heterosexual	150	94.3%
	Homosexual	2	1.3%
	Bisexual	5	3.1%
	Asexual	2	1.3%

Dating Violence as a Predictor of NSSI

The simple linear regression analysis results showed that DV significantly predicted NSSI behavior ($\beta = 0.507$; $t(158) = 7.379$; $p < 0.05$; 95% CI [0.222, 0.384]). DV was also found to significantly explain a large proportion of the variance in NSSI behavior, $R^2 = 0.258$; $F(1,157) = 54.448$; $p < 0.05$. The positive regression coefficient indicates that higher levels of DV are associated with greater involvement in NSSI behavior, and vice versa.

Table 2. Simple Linear Regression Test Results of DV as a Predictor of NSSI

Model fit Measures

Model	R	R²	Adjusted R²	RMSE	p
M ₁	0.507	0.258	0.253	8.072	<.001

Model Coefficients

	Sum of Squares	df	Mean Square	F	p
Dating Violence	3547.285	1	3547.285	54.448	<.001
Residual	10228.464	157	65.149		

Note. The intercept model is omitted, as no meaningful information can be shown.

ANOVA

Predictor	Estimate	SE	t	p	Stand. Estimate	95% CI
Intercept	16.153	1.500	10.768	<.001		(8.694; 11.608)
Dating Violence	0.303	0.041	7.379	<.001	0.507	(0.222; 0.384)

Self-criticism as a Predictor of NSSI

The simple linear regression analysis results showed that SC significantly predict NSSI behavior ($\beta = 0.426$; $t(158) = 5.899$; $p < 0.05$; 95% CI [0.250, 0.501]). SC was also found to significantly explain a large proportion of variance in NSSI behavior, with $R^2 = 0.181$; $F(1,157) = 34.796$; $p < 0.05$. The positive regression coefficient indicates that higher levels of SC are associated with greater involvement in NSSI behavior, and vice versa.

Table 3. Simple Linear Regression Test Results of Self Criticism as a Predictor of NSSI

Model fit Measures

Model	R	R²	Adjusted R²	RMSE	p
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M ₁	0.426	0.181	0.176	8.475	<.001
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Model Coefficients

	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>p</i>
<i>Self Criticism</i>	2499.237	1	2499.237	34.796	<.001
<i>Residual</i>	11276.511	157	71.825		

Note. The intercept model is omitted, as no meaningful information can be shown.

ANOVA

<i>Predictor</i>	<i>Estimate</i>	<i>SE</i>	<i>t</i>	<i>p</i>	<i>Stand. Estimate</i>	<i>95% CI</i>
<i>Intercept</i>	4.915	3.664	1.341	0.182		(-2.323; 12.153)
<i>Self Criticism</i>	0.375	0.064	5.899	<.001	0.426	(0.250;0.501)

The Role of Self-criticism as a Mediator in the Relationship between Dating Violence and NSSI

The results of multiple linear regression analysis demonstrated that DV and SC simultaneously predict NSSI behavior ($F(2,156)=42.636$; $p<0.05$). This indicates that NSSI behavior may be influenced by the combined presence of DV and SC. The proportion of variance in NSSI explained by both predictors was 35.3% ($R^2=0.353$). Therefore, it can be concluded that both DV and SC jointly influence NSSI behavior. Furthermore, to strengthen and clarify the specific role of each variable—especially SC as a mediator—it is important to conduct a mediation analysis.

Table 4. Multiple Linear Regression Test Results Dating Violence and Self Criticism as Predictors of NSSI

Model fit Measures

<i>Model</i>	<i>R</i>	<i>R²</i>	<i>Adjusted R²</i>	<i>RMSE</i>	<i>p</i>
M ₂	0.594	0.353	0.345	7.556	<.001

Model Coefficients

	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>p</i>
<i>Regression</i>	4868.705	2	2434.353	42.636	<.001
<i>Residuals</i>	8907.043	156	57.096		

Note. The intercept model was omitted, as no meaningful information was presented.

Mediation analysis was conducted to examine the role of SC as a mediator in the relationship between DV and NSSI, in order to clarify the mechanism by which SC influences this relationship. The analysis first revealed significant direct effect of DV on NSSI ($\beta=0.255$; [95% CI: 0.159, 0.354]; $z=6.493$; $p<0.05$), indicating that DV has a positive and significant direct influence on NSSI behavior. Additionally, the analysis found a significant indirect effect of DV on NSSI through SC as a mediator ($\beta=0.047$; [95% CI: 0.021, 0.088]; $z=2.694$; $p<0.05$), suggesting that SC acts a mediator in this relationship. The presence of SC as a mediator strengthens the overall influence of DV on NSSI, as reflected in the total effect ($\beta=0.303$; [95% CI: 0.208, 0.398]; $z=7.417$; $p<0.05$), which is the sum of the direct and indirect effect.

Table 5. Results of Direct Effect and Indirect Effect Mediation Analysis

		<i>Estimate</i>	<i>Std. Error</i>	<i>z-value</i>	<i>p</i>	<i>95% Confidence Interval</i>	
						<i>Lower</i>	<i>Upper</i>
Dating Violence	→ NSSI	0.255	0.039	6.493	<.001	0.159	0.354
Dating Violence	→ Self Criticism → NSSI	0.047	0.018	2.694	0.007	0.021	0.088

DISCUSSION

The data analysis results supported our hypothesis, proving that the relationship between DV and NSSI is mediated by SC. The role of SC in the influence of DV on NSSI behavior lies in its function as a negative thought process, in which individuals blame themselves for the abuse, leading to self-punishment and emerging a belief that they deserve to be abused (Klonsky et al., 2014; Fox et al., 2018; Nagy et al., 2021).

The positive correlation between DV and SC indicates that individuals who experience DV are more likely to develop heightened levels of SC. DV can trigger negative emotions, such as sadness, anxiety, self-hatred, and excessive guilt (Crapolicchio et al., 2021), it may foster SC. This interpretation is supported by Naismith et al. (2022), who found a significant relationship between intimate partner violence (IPV) and SC.

Furthermore, the findings of this study indicated that SC significantly predicted NSSI behavior. This supports the findings of Zerkowicz (2019). Moreover, SC has been shown to predict NSSI behavior longitudinally (Perkins et al., 2020). SC is characterized by persistent negative self-assessment, leading to negative effects on the individual (Gilbert et al., 2004). Individuals with high levels of SC tend to lean on the negative thoughts than positive thoughts about themselves, causing the sense of inferiority (Gilbert et al., 2004). It also leads to emotional disturbance, frustration, and increased psychological distress (Gao et al., 2023).

SC increases the risk of engagement in NSSI by the feelings of dissatisfaction, self-hatred, and disgust (Gilbert et al., 2004; Xavier et al., 2016). Self-hatred results in a desire to punish oneself due to the feeling of deserving punishment (Klonsky et al., 2014). Self-punishment through NSSI behavior is an emotion dysregulation strategy (Nagy et al., 2021).

The results also showed that DV has a significant positive direct effect to NSSI. In other words, DV can influence NSSI, even without the mediating role of SC. This finding supports the research by So'diyah's (2022), which reported a significant positive relationship between dating violence and self-injury. Furthermore, other studies have found that individuals who experience IPV—which includes DV—are more likely to engage in NSSI behaviors (Carranza et al., 2022). The experience of being a victim of DV leads to negative feelings internalization, which in turn elicit negative emotions (Crapolicchio et al., 2021). DV victims also exhibit an aggressive disposition, particularly those related with rage and aggression (Rizzo et al., 2014). DV victims are also prone to feelings of guilt related to the abuse (Naismith, 2020). Such emotional responses may trigger psychological symptoms, such as anxiety, particularly in response to emotional neglect (Levesque et al., 2010). NSSI behaviors performed by DV victims may serve as a maladaptive stress management strategy in response to negative emotions or psychological distress. This is supported by Levesque et al. (2010) and Silva et al. (2017), who suggested that such behavior often arises from an inability to regulate emotions and manage distressing situations.

Although the results showed that SC mediates the relationship between DV and NSSI, the effect was relatively low. In contrast, the direct effect of DV on NSSI was higher, indicating that the main influence stems from the direct relationship between DV and NSSI. These results also suggest that other factors may play a more substantial role in mediating the relationship between DV and NSSI. For example, PTSD that has been found to mediate the relationship between IPV and deliberate self-harm (Weiss et al., 2015).

However, this study found that SC significantly mediates the relationship between DV and NSSI. DV underlies the emergence of negative emotions and psychological symptoms, leading to increased SC. High levels of SC may lead to self-punishing behavior through NSSI, driven by a sense of deserving punishment. The findings of this study provide insight into key factors underlying NSSI and may inform the development of more targeted and effective interventions.

CONCLUSIONS

This study aimed to examine the role of SC as a mediator in the relationship between DV and NSSI. The results showed that SC indirectly mediated the relationship between DV and NSSI, however the primary influence stemmed from the direct effect of DV and NSSI, given its greater magnitude. Considering the limitations of this study, further research is encouraged to use longitudinal research to strengthen and broaden the generalizability of the findings. Additionally, further research should explore the various forms of DV and their differential impacts on victims. It is also recommended that future research focus on clinical samples.

The findings of this study have important implications for educational services, particularly in the development of education and prevention programs targeting NSSI behaviors and their associated risk factors. These programs should be complemented by the provision of improved counseling services. In addition, professional mental health providers are encouraged to give greater attention to SC as a contributing factor to NSSI among DV survivors, by designing more effective assessments and interventions strategies.

Peran *Self Criticism* sebagai Mediator antara *Dating Violence* dengan *Non-suicidal Self-Injury*

Non-suicidal self-injury (NSSI) merupakan masalah kesehatan serius yang terus menjadi fokus kajian, terutama karena peningkatan prevalensinya dalam beberapa tahun terakhir (Carvalho dkk., 2015). NSSI termasuk dalam perilaku *self-harm* atau *self-injury behavior* yang merujuk pada tindakan menyakiti diri sendiri secara langsung tanpa intensi melakukan bunuh diri. NSSI mencakup tindakan memotong atau mengiris, membakar, mencakar, memukul, ataupun membenturkan diri dengan harapan perilakunya hanya menyebabkan luka diri kecil atau sedang (American Psychiatric Association, 2022; Klonsky dkk., 2014). NSSI sering tidak tercatat secara resmi, tetapi beberapa penelitian menunjukkan peningkatan prevalensi setiap tahunnya (Arifin dkk., 2021; Hooley & St. Germain, 2014; Megawati dkk., 2019; Nock, 2010). NSSI umum terjadi pada remaja (12 – 16 tahun) dan dewasa muda (18 – 24 tahun; Claes & Muehlenkamp, 2014; Gandhi dkk., 2018; Klonsky dkk., 2011). Hamza dan Willoughby (2016) menyatakan bahwa 30 – 50% individu dewasa awal melaporkan keterlibatan dalam NSSI. Di Indonesia, angkanya bahkan mencapai 75,3% pada usia 18-24 tahun (Kaligis dkk., 2021). Mempertimbangkan prevalensi NSSI, fokus penelitian ini dilakukan pada dewasa awal berusia 18-24 tahun.

Beberapa alasan individu dewasa awal melakukan perilaku NSSI berkaitan dengan perbedaan masa perkembangan, seperti banyaknya tuntutan dan hal-hal baru yang tidak diimbangi dengan kemampuan, kematangan, dan pengalaman kehidupan yang cukup (Arinda & Mansoer, 2020; Jannah dkk., 2022; Megawati dkk., 2019). NSSI pada individu juga dapat dilatarbelakangi oleh berbagai macam faktor risiko (Chen, 2022). Menurut Claes dan Muehlenkamp (2014), terdapat dua faktor risiko perilaku NSSI; faktor distal (sifat temperamen dan kepribadian, lingkungan keluarga, tekanan budaya atau sosial, serta pengalaman traumatis) dan faktor proksimal (disregulasi emosi, penghargaan tubuh yang rendah, distorsi kognitif, disosiasi, pengaruh teman sebaya, serta gangguan psikiatri bawaan). Meskipun individu dengan riwayat gangguan psikiatri lebih rentan, bukan berarti individu yang tidak memiliki riwayat psikiatri terbebas dari NSSI (Nock dkk., 2006). Dalam DSM-5-TR, perilaku ini dikategorikan sebagai “*other conditions that maybe a focus on clinical attention*” serta saran untuk penelitian selanjutnya mengenai perilaku NSSI, baik faktor risiko maupun penghambatnya (American Psychiatric Association, 2022). Mempertimbangkan hal-hal yang telah dibahas, penelitian ini bertujuan untuk melakukan kajian terhadap faktor risiko perilaku NSSI yaitu *dating violence* (DV) dan *self-criticism* (SC).

Vaughn dkk. (2015) menemukan bahwa individu yang terlibat dalam NSSI seringkali menjadi korban kekerasan, terutama *intimate partner violence* (IPV) atau *dating violence* (DV). DV dialami oleh individu yang menjalin hubungan romantis. Kekerasan ini dapat berupa kekerasan fisik, psikologis, dan seksual (Murray dkk., 2008; Rodríguez-Franco dkk., 2010). DV dianggap sebagai subset dari IPV dan terutama prevalen di kalangan kelompok usia muda. Menurut Laporan Tahunan Kekerasan terhadap Perempuan yang diterbitkan oleh Komnas Perempuan (2020 hingga 2023), pada rentang tahun 2019-2022 terdapat 3.386 kasus *dating violence* (DV) dan kekerasan oleh mantan pasangan/*violence by former partners* (VFP). Jumlah kasus DV tampaknya meningkat setiap tahun, terutama di kalangan dewasa muda berusia 18-24 tahun (Komnas Perempuan, 2020; 2021; 2022; 2023).

DV merupakan faktor risiko distal perilaku NSSI (pengalaman traumatis) (Claes & Muehlenkamp, 2014). Sejumlah studi telah mengonfirmasi korelasi positif antara DV dan NSSI (Murray dkk., 2008; Baker dkk., 2015; Vaughn dkk., 2015; Weiss dkk., 2015; Adams dkk., 2021; Carranza dkk., 2022; So'diyah, 2022). Keterlibatan dalam DV telah terbukti meningkatkan risiko, baik pemikiran maupun perilaku NSSI (Adams, 2010; Carranza dkk., 2022). Penelitian berbasis komunitas menunjukkan bahwa hingga 50% individu yang terlibat dalam NSSI telah mengalami IPV (Vaughn dkk., 2015). McCollum dkk. (2024) melaporkan bahwa 10,3% dari 4.694 peserta terlibat dalam NSSI, sementara 12,3% mengalami IPV.

Selain itu, keterlibatan dalam IPV memengaruhi ide bunuh diri, upaya bunuh diri, dan NSSI. Mendukung hal ini, So'diyah (2022) juga menemukan bahwa DV menyumbang 26,7% dari perilaku menyakiti diri sendiri, dengan tingkat keparahan kekerasan terkait dengan peningkatan risiko NSSI (So'diyah, 2022).

Meskipun baik pelaku maupun korban DV telah diketahui melakukan perilaku NSSI (Carranza dkk., 2022), penelitian ini lebih berfokus pada korban. Penelitian sebelumnya menunjukkan bahwa NSSI di antara korban DV berfungsi sebagai respons terhadap kekerasan yang dialami dan bertujuan untuk beberapa hal. Pertama, NSSI dapat digunakan sebagai upaya untuk mengatasi kesulitan interpersonal, termasuk upaya untuk memengaruhi atau memanipulasi pasangan dan/atau orang terdekat secara emosional (Carranza dkk., 2022). Kedua, NSSI dapat berfungsi sebagai upaya untuk meredakan emosi negatif yang timbul dari DV, seperti kesedihan, rasa bersalah yang berlebihan, kecemasan, depresi, atau gejala gangguan stres pascatrauma (Klonsky dkk., 2014; Crapolicchio dkk., 2021; Naismith dkk., 2022). Seiring waktu, NSSI dilakukan sebagai strategi regulasi emosi negatif (Nagy dkk., 2021).

Selain fungsi-fungsi tersebut, perilaku NSSI juga merupakan bentuk kemarahan yang terarah pada diri sendiri atau hukuman terhadap diri sendiri (Klonsky dkk., 2014). Korban DV cenderung menyalahkan diri sendiri, hal ini berkaitan erat dengan *self-criticism* (SC). SC berhubungan dengan penilaian negatif terhadap diri sendiri dan berakibat pada penyalahan diri sendiri (Gilbert dkk., 2004; St. Germain & Hooley, 2012; Perkins dkk., 2020; Nagy dkk., 2021; Gao dkk., 2023). SC muncul ketika individu mengalami DV (Crapolicchio dkk., 2021; Naismith dkk., 2022). SC diidentifikasi sebagai faktor risiko proksimal untuk NSSI, mencerminkan distorsi kognitif yang mendasar (Claes & Muehlenkamp, 2014). Penelitian menunjukkan bahwa individu yang terlibat dalam NSSI cenderung menunjukkan tingkat SC yang jauh lebih tinggi dibandingkan dengan mereka yang tidak (Glassman dkk., 2007; St. Germain & Hooley, 2012; Perkins dkk., 2020). Dengan demikian, NSSI dapat berfungsi sebagai strategi koping yang tidak sehat untuk mengelola pikiran-pikiran kritik diri yang intens (Nagy dkk., 2021).

Berdasarkan temuan ini, SC dapat memengaruhi proses kognitif korban DV yang melakukan perilaku NSSI. Meskipun demikian, penelitian tentang subjek tertentu ini masih terbatas. Murray dkk. (2008) menyarankan penelitian lebih lanjut tentang hubungan antara DV dan NSSI. Demikian pula, DSM-5-TR menyoroti pentingnya penelitian berkelanjutan tentang NSSI dan faktor risiko yang terkait (American Psychiatric Association, 2022). Mengingat tingginya prevalensi NSSI dan DV pada masa dewasa awal, dan langkanya penelitian serupa di Indonesia, penelitian ini bertujuan untuk mengeksplorasi SC sebagai variabel mediasi dalam hubungan antara DV dan NSSI. Penelitian sebelumnya telah mendukung peran mediasi SC, seperti antara disregulasi emosi dan NSSI (Jannah dkk., 2022), dan antara konsep diri dan NSSI di antara korban bullying (Arifin dkk., 2021). Oleh karena itu, hipotesis penelitian ini menyatakan bahwa SC memediasi hubungan antara DV dan NSSI.

METODE

Desain Penelitian

Studi kuantitatif dengan desain korelasional digunakan untuk menguji hubungan antara DV, SC, dan NSSI. Pengumpulan data dilakukan secara daring melalui Google Forms. Partisipan memperoleh informasi mengenai tujuan penelitian, hak-hak, dan prosedur penelitian melalui *informed consent*. Partisipan memberikan persetujuan sebelum mengisi kuesioner dan diberi kesempatan untuk mengundurkan diri dari penelitian tanpa konsekuensi.

Partisipan

Partisipan direkrut menggunakan metode sampling purposif. Kriteria partisipan meliputi individu berusia 18-24 tahun, tinggal di Jawa, dan pernah atau sedang mengalami kekerasan dalam pacaran selama 12 bulan terakhir. Pertanyaan penyaringan dimasukkan untuk memverifikasi usia, domisili, dan pengalaman partisipan dengan kekerasan dalam pacaran, termasuk kekerasan psikologis, fisik, dan seksual. Penelitian ini telah memperoleh izin etika dari Komisi Etika Penelitian Kesehatan, Fakultas Kedokteran, Universitas Negeri Semarang, pada tanggal 5 Agustus 2024 (No. 457/KEPK/FK/KLE/2024). Ukuran sampel minimum yang diperlukan ditentukan menggunakan G*Power 3.1.9.7 (Faul dkk., 2009), yang menunjukkan setidaknya 61 partisipan.

Perhitungan parameter yang digunakan yaitu *statistic test F-test: Linear Multiple Regression, Fixed Model, R-squared deviation from zero* dan metode *a priori* dengan jumlah 2 prediktor. Berdasarkan penelitian oleh So'diyah (2022) ditemukan pengaruh DV dalam hubungan positif dengan *self-injury* sebesar 26,7% ($R^2=0,267$). Penentuan jumlah sampel dilakukan dengan analisis kekuatan *a priori* menggunakan perangkat lunak G*Power dengan *effect size* sebesar 0,267, taraf signifikansi sebesar 0,05, dan *statistical power* sebesar 0,95 atau 95%. Hasil dari perhitungan diperoleh jumlah minimal partisipan sebanyak 61 partisipan.

Pengukuran

Deliberate Self Harm Inventory (DSHI) 17-item oleh Gratz (2001) digunakan untuk mengukur perilaku NSSI. DSHI yang digunakan merupakan hasil adaptasi ke bahasa Indonesia oleh Sugianto (2020). Uji validitas dengan teknik *Confirmatory Factor Analysis* (CFA) menunjukkan kriteria model yang fit ($\chi^2=120,82$; $df=97$; $p<0,05$; $RMSEA=0,035$). Nilai reliabilitas skala ini sangat baik ($\alpha=0,9$). DSHI disajikan dalam bentuk skala Likert, yaitu (1) tidak pernah, (2) pernah, (3) lebih dari sekali, dan (4) sering.

Dating Violence Questionnaire-R (DVQ-R) oleh Rodríguez-Díaz dkk. (2017) digunakan untuk mengukur DV. DVQ-R merupakan versi pendek dari *Dating Violence Questionnaire for Victimization and Perpetration* (DVQ-VP) oleh Rodríguez-Franco dkk. (2010). DVQ-R yang digunakan merupakan hasil adaptasi ke bahasa Indonesia oleh Waluyo (2024). Skala ini memiliki 20 item dengan nilai reliabilitas sangat tinggi ($\alpha=0,901$). DVQ-R terdiri dari 5 dimensi DV, yaitu *detachment*, *humiliation*, *coercion*, *physical*, dan *sexual*. Respons berbentuk skala Likert, yaitu (0) tidak pernah, (1) jarang, (2) kadang, (3) sering, dan (4) selalu.

Skala yang digunakan untuk mengukur SC adalah *The Form of Self Criticizing/Attacking & Self Reassuring Scale* (FSCRS) oleh Gilbert dkk. (2004) dan telah diadaptasi ke bahasa Indonesia oleh Altiany (2019). Uji validitas dengan teknik *Confirmatory Factor Analysis* (CFA) menunjukkan $\chi^2=194,04$; $df=1,64$; $p=0,05445$; $RMSEA=0,027$. FSCRS berisi 22 item, dengan rincian dimensi *inadequate self* sebanyak 9 item, *reassured self* sebanyak 8 item, dan *hated self* sebanyak 5 item. Nilai reliabilitas FSCRS tinggi ($\alpha=0,887$). Respons item *favorable* dan *unfavorable* direspons dengan skala Likert, yaitu sangat sesuai (SS), sesuai (S), tidak sesuai (TS), dan sangat tidak sesuai (STS).

Analisis Data

Analisis data dilakukan dengan JASP Version 0.19.1.0 (JASP Team, 2024). Analisis inferensial dengan analisis regresi linear dilakukan untuk menguji pengaruh DV dan SC dalam memprediksi perilaku NSSI, serta analisis mediasi untuk menguji peran SC sebagai mediator.

HASIL PENELITIAN

Partisipan penelitian berjumlah 159 ($M_{usia}=21,5$; $SD_{usia}=1,52$), dimana sebanyak 3 orang (1,9%) berusia 18 tahun, 12 orang (7,5%) berusia 19 tahun, 28 orang (17,6%) berusia 20 tahun, 32 orang (20,1%) berusia 21 tahun, 37 orang (23,3%) berusia 22 tahun, 30 orang (18,9%) berusia 23 tahun, dan 17 orang (10,7%) berusia 24 tahun. Dari data tersebut, 143 (89,9%) partisipan berjenis kelamin perempuan dan 16 (10,1%) partisipan berjenis kelamin laki-laki. Partisipan didominasi oleh individu yang berasal Jawa Tengah sebanyak 93 orang (58,5%), diikuti Jawa Barat 39 orang (24,5%), DKI Jakarta 11 orang (6,9%), D.I. Yogyakarta dan Jawa Timur masing-masing 7 orang (4,4%), serta Banten 2 orang (1,3%).

Partisipan yang mengalami DV kategori tinggi sebanyak 20 (12%), kategori sedang 87 (55%), dan kategori rendah 52 (33%). Sebagian besar partisipan, 140 (88%), melaporkan pernah melakukan perilaku NSSI, sementara 19 (12%) tidak melaporkan keterlibatan dalam NSSI. Dari 140 individu yang terlibat dalam NSSI, 8 orang (5%) berada dalam kategori tinggi, 28 (8%) dalam kategori sedang, dan 104 (77%) dalam kategori rendah.

Tabel 1. Gambaran Umum Partisipan Penelitian (N=159)

Karakteristik	Kategori	Jumlah	Persentase
Jenis Kelamin	Laki-laki	16	10,1%
	Perempuan	143	89,9%
Usia (Tahun)	18	3	1,9%
	19	12	7,5%
	20	28	17,6%
	21	32	20,1%
	22	37	23,3%
	23	30	18,9%
	24	17	10,7%
Domisili	Banten	2	1,3%
	DKI Jakarta	11	6,9%
	DI. Yogyakarta	7	4,4%
	Jawa Barat	39	24,5%
	Jawa Tengah	93	58,5%
	Jawa Timur	7	4,4%
Status Pekerjaan	Pelajar atau Mahasiswa	129	81,1%
	Fresh Graduated	2	1,3%
	Bekerja	28	17,6%
Orientasi Seksual	Heteroseksual	150	94,3%
	Homoseksual	2	1,3%
	Biseksual	5	3,1%
	Aseksual	2	1,3%

Dating Violence sebagai Prediktor NSSI

Hasil analisis regresi linier sederhana menunjukkan bahwa DV secara signifikan memprediksi perilaku NSSI ($\beta=0,507$; $t(158)=7,379$; $p<0,05$; 95% *CI* [0,222, 0,384]). DV juga diketahui mampu menjelaskan secara signifikan besar perubahan proporsi varian perilaku NSSI, $R^2=0,258$; $F(1,157)=54,448$; $p<0,05$. Koefisien regresi positif menunjukkan bahwa tingkat DV yang lebih tinggi berhubungan dengan keterlibatan yang lebih besar dalam perilaku NSSI, dan sebaliknya.

Tabel 2. Hasil Uji Regresi Linier Sederhana DV sebagai Prediktor NSSI

Model fit Measures

Model	R	R ²	Adjusted R ²	RMSE	p
M ₁	0,507	0,258	0,253	8,072	<,001

Model Coefficients

	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>p</i>
Dating Violence	3547,285	1	3547,285	54,448	<,001
Residual	10228,464	157	65,149		

Catatan. Model intersep dihilangkan karena tidak ada informasi bermakna yang dapat ditampilkan.

ANOVA

<i>Predictor</i>	<i>Estimate</i>	<i>SE</i>	<i>t</i>	<i>p</i>	<i>Stand. Estimate</i>	<i>95% CI</i>
Intercept	16,153	1,500	10,768	<,001		(8,694; 11,608)
Dating Violence	0,303	0,041	7,379	<,001	0,507	(0,222;0,384)

Self Criticism sebagai Prediktor NSSI

Hasil analisis regresi linier sederhana menunjukkan bahwa SC secara signifikan memprediksi perilaku NSSI ($\beta=0,426$; $t(158)=5,899$; $p<0,05$; 95% CI [0,250, 0,501]). SC juga ditemukan secara signifikan menjelaskan sebagian besar varian dalam perilaku NSSI, dengan $R^2=0,181$; $F(1,157)=34,796$; $p<0,05$. Koefisien regresi positif mengindikasikan bahwa semakin tinggi SC, semakin besar pula keterlibatan perilaku NSSI, begitupun sebaliknya.

Tabel 5. Hasil Uji Regresi Linear Sederhana *Self Criticism* sebagai Prediktor NSSI

Model fit Measures

<i>Model</i>	<i>R</i>	<i>R²</i>	<i>Adjusted R²</i>	<i>RMSE</i>	<i>p</i>
M ₁	0,426	0,181	0,176	8,475	<,001

Model Coefficients

	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>p</i>
Self Criticism	2499,237	1	2499,237	34,796	<,001
Residual	11276,511	157	71825		

Catatan. Model intersep dihilangkan karena tidak ada informasi bermakna yang dapat ditampilkan.

<i>Predictor</i>	<i>Estimate</i>	<i>SE</i>	<i>t</i>	<i>p</i>	<i>Stand. Estimate</i>	<i>95% CI</i>
Intercept	4,915	3,664	1,341	0,182		(-2,323; 12,153)
Self Criticism	0,375	0,064	5,899	<,001	0,426	(0,250;0,501)

Peran Self Criticism sebagai Mediator dalam Hubungan antara Dating Violence dengan NSSI

Hasil analisis regresi linier berganda membuktikan bahwa DV dan SC secara simultan memprediksi perilaku NSSI ($F(2,156)=42,636$; $p<0,05$). Hal ini menunjukkan bahwa perilaku NSSI kemungkinan dipengaruhi oleh kombinasi keberadaan DV dan SC. Proporsi varians dalam NSSI yang dijelaskan oleh kedua prediktor tersebut adalah 35,3%. ($R^2=0,353$). Oleh karena itu, dapat disimpulkan bahwa DV dan SC berpengaruh secara bersama-sama terhadap perilaku NSSI. Selanjutnya, untuk memperkuat dan memperjelas peran masing-masing variabel, khususnya SC sebagai mediator, maka penting untuk dilakukan analisis mediasi.

Tabel 6. Hasil Uji Regresi Linier Berganda *Dating Violence* dan *Self Criticism* sebagai Prediktor NSSI

Model fit Measures

<i>Model</i>	<i>R</i>	<i>R²</i>	<i>Adjusted R²</i>	<i>RMSE</i>	<i>p</i>
M ₂	0,594	0,353	0,345	7,556	<,001

Model Coefficients

	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>p</i>
Regression	4868,705	2	2434,353	42,636	<,001
Residuals	8907,043	156	57,096		

Catatan. Model intersep dihilangka karena tidak ada informasi bermakna yang dapat ditampilkan.

Analisis mediasi dilakukan untuk menguji peran SC sebagai mediator dalam hubungan antara DV dan NSSI, guna mengklarifikasi mekanisme pengaruh SC terhadap hubungan tersebut. Analisis tersebut pertama-tama mengungkapkan adanya pengaruh langsung yang signifikan dari DV terhadap NSSI ($\beta=0,255$; [95% CI: 0,159, 0,354]; $z=6,493$; $p<0,05$), menunjukkan bahwa DV memiliki pengaruh langsung yang positif dan signifikan terhadap perilaku NSSI. Selain itu, analisis tersebut menemukan efek tidak langsung yang signifikan dari DV terhadap NSSI melalui SC sebagai mediator ($\beta=0,047$; [95% CI: 0,021, 0,088]; $z=2,694$; $p<0,05$), yang menunjukkan bahwa SC berperan sebagai mediator dalam hubungan ini. Kehadiran SC sebagai mediator memperkuat pengaruh DV secara keseluruhan terhadap NSSI, sebagaimana tercermin dalam *total effect* ($\beta=0,303$; [95% CI: 0,208, 0,398]; $z=7,417$; $p<0,05$), yang berasal dari penjumlahan *direct effect* dan *indirect effect*.

Tabel 7. Hasil Efek Langsung (*Direct Effect*) dan Efek Tidak Langsung (*Indirect Effect*) Analisis Mediasi

			<i>Estimate</i>	<i>Std. Error</i>	<i>z-value</i>	<i>p</i>	<i>95% Confidence Interval</i>	
							<i>Lower</i>	<i>Upper</i>
<i>Dating Violence</i>	→	NSSI	0,255	0,039	6,493	<0,001	0,159	0,354
<i>Dating Violence</i>	→	<i>Self Criticism</i> → NSSI	0,047	0,018	2,694	0,007	0,021	0,088

DISKUSI

Hasil analisis data mendukung hipotesis penelitian yang menunjukkan terdapat hubungan antara DV dengan NSSI yang dimediasi oleh SC. Peran SC dalam pengaruh DV terhadap perilaku NSSI terletak pada fungsinya sebagai proses berpikir negatif, di mana individu menyalahkan diri sendiri atas kekerasan yang mereka alami, yang menimbulkan perasaan menghukum diri sendiri atau pemikiran bahwa mereka pantas menerima perlakuan buruk (Klonsky dkk., 2014; Fox dkk., 2018; Nagy dkk., 2021).

Adanya hubungan positif antara DV dan SC menunjukkan bahwa individu korban DV cenderung memiliki tingkat SC yang lebih tinggi. DV dapat memicu emosi negatif, seperti kesedihan, kecemasan, kebencian terhadap diri sendiri, dan rasa bersalah yang berlebihan (Crapolicchio dkk., 2021), sehingga dapat memicu SC. Interpretasi ini didukung oleh Naismith dkk. (2022), yang menemukan hubungan yang signifikan antara *intimate partner violence* (IPV) dengan SC.

Selain itu, temuan ini menunjukkan bahwa SC merupakan prediktor signifikan terhadap perilaku NSSI, mendukung temuan Zerkowitz (2019). Selain itu, SC telah terbukti memprediksi perilaku NSSI secara longitudinal (Perkins dkk., 2020). SC ditandai dengan pikiran negatif yang persisten tentang diri sendiri yang berdampak negatif pada individu (Gilbert dkk., 2004). Individu dengan tingkat SC yang tinggi cenderung fokus pada pikiran negatif tentang diri mereka daripada pikiran positif, membuat mereka rentan terhadap perasaan inferioritas (Gilbert dkk., 2004). Hal ini menyebabkan gangguan emosional, frustrasi, dan peningkatan gangguan psikologis (Gao dkk., 2023).

SC meningkatkan risiko keterlibatan dalam perilaku NSSI akibat ketidakpuasan, kebencian pada diri sendiri, dan perasaan jijik (Gilbert dkk., 2004; Xavier dkk., 2016). Kebencian terhadap diri sendiri memicu keinginan untuk menghukum diri sendiri melalui perilaku NSSI karena perasaan pantas

menerima hukuman (Klonsky dkk., 2014). Penghukuman diri melalui perilaku NSSI merupakan strategi regulasi emosi yang tidak efektif (Nagy dkk., 2021).

Hasil penelitian juga menunjukkan bahwa DV memiliki pengaruh langsung yang signifikan sebagai prediktor NSSI. Dengan kata lain, DV dapat memengaruhi NSSI, bahkan tanpa peran mediasi SC. Temuan ini mendukung penelitian So'diyah (2022), yang melaporkan hubungan positif yang signifikan antara kekerasan dalam pacaran dan tindakan menyakiti diri sendiri. Selain itu, penelitian lain menemukan bahwa individu yang mengalami IPV—termasuk DV—lebih rentan melakukan perilaku NSSI (Carranza dkk., 2022). Pengalaman menjadi korban DV menyebabkan internalisasi perasaan negatif yang kemudian memicu emosi negatif (Crapolicchio dkk., 2021). Korban DV juga menunjukkan disposisi agresif, terutama yang berkaitan dengan amarah dan agresi (Rizzo dkk., 2014). Korban DV juga rentan terhadap perasaan bersalah terkait pengalaman kekerasan yang mereka alami (Naismith, 2020). Respons emosional semacam itu dapat memicu gejala psikologis, diantaranya kecemasan, hal ini merupakan respons terhadap pengabaian emosional (Levesque dkk., 2010). Perilaku NSSI yang dilakukan oleh korban DV dapat berfungsi sebagai strategi manajemen stres yang maladaptif dalam menanggapi emosi negatif atau tekanan psikologis. Hal ini didukung oleh Levesque dkk. (2010) dan Silva dkk. (2017), yang menyatakan bahwa perilaku semacam itu seringkali timbul dari ketidakmampuan untuk mengatur emosi dan mengelola situasi yang penuh tekanan.

Meskipun hasil penelitian menunjukkan bahwa SC memegang peran mediasi dalam hubungan antara DV dan NSSI, efek mediasi tersebut relatif kecil. Sebaliknya, efek langsung DV terhadap NSSI lebih besar, yang menunjukkan bahwa pengaruh utama berasal dari hubungan langsung antara DV dan NSSI. Hasil ini juga menunjukkan bahwa faktor lain mungkin memegang peran yang lebih besar dalam memediasi hubungan antara DV dan NSSI. Misalnya, penelitian sebelumnya telah mengidentifikasi bahwa PTSD bertindak sebagai mediator dalam hubungan antara IPV dan tindakan menyakiti diri sendiri secara sengaja (Weiss dkk., 2015).

Meskipun demikian, penelitian ini menemukan bahwa SC secara signifikan memediasi hubungan antara DV dan NSSI. DV mendasari munculnya emosi negatif dan gejala psikologis yang menyebabkan peningkatan SC. Tingkat SC yang tinggi dapat menyebabkan perilaku menghukum diri sendiri melalui NSSI, didorong oleh perasaan pantas dihukum. Temuan penelitian ini memberikan wawasan tentang faktor-faktor utama yang mendasari NSSI dan dapat menjadi dasar pengembangan intervensi yang lebih terarah dan efektif.

SIMPULAN

Penelitian ini bertujuan untuk meneliti peran SC sebagai mediator dalam hubungan antara DV dan NSSI. Hasil penelitian menunjukkan bahwa SC secara tidak langsung memediasi hubungan antara DV dan NSSI. Namun, dilihat dari besarnya pengaruh, efek langsung DV dan NSSI memiliki pengaruh lebih tinggi. Mempertimbangkan keterbatasan penelitian ini, penelitian selanjutnya disarankan untuk menggunakan rancangan penelitian longitudinal untuk memperkuat dan memperluas generalisasi temuan. Penelitian selanjutnya juga sebaiknya mengeksplorasi berbagai bentuk DV dan dampaknya yang berbeda-beda terhadap korban. Selain itu, partisipan penelitian dapat difokuskan pada sampel klinis.

Temuan penelitian ini memiliki implikasi penting bagi layanan pendidikan, terutama dalam pengembangan program pendidikan dan pencegahan yang menargetkan perilaku NSSI dan faktor risiko yang terkait. Program-program ini harus dilengkapi dengan penyediaan layanan konseling yang lebih baik. Selain itu, penyedia layanan kesehatan mental profesional didorong untuk memberikan perhatian lebih besar terhadap SC sebagai faktor yang berkontribusi terhadap NSSI di antara penyintas DV, dengan merancang penilaian dan strategi intervensi yang lebih efektif.

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DECLARATION OF POTENTIAL CONFLICTS OF INTEREST / DEKLARASI POTENSI TERJADINYA KONFLIK KEPENTINGAN

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