
Exploring Non-Suicidal Self-Injury among Young Muslims: An Integrative Study from an Islamic Perspective and Contemporary Mental Health Insights

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ABSTRACT

This research aims to explore the phenomenon of Non-Suicidal Self-Injury (NSSI) among young individuals from an Islamic perspective. It delves into spiritual, ethical, and mental health aspects to provide a comprehensive understanding. The approach combines Islamic principles with contemporary mental health perspectives to offer insights into prevention and intervention strategies. Through a scoping review methodology, this study synthesizes relevant literature using keywords such as "non-suicidal self-injury" to examine motivations, risk factors, and psychological impacts. The discussion incorporates Islamic teachings on mental health, self-care ethics, and the importance of seeking help within a supportive community. The findings aim to contribute to a holistic understanding and culturally sensitive strategies for addressing NSSI among young Muslims.

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1. INTRODUCTION

Non-suicidal self-injury (NSSI) is a phenomenon that has garnered global public health attention (Nock, 2010; Wang, Xu et al., 2024;). This phenomenon involves purposeful acts of damaging one's body tissues, such as self-cutting, burning, and severe scratching, done without suicidal intent and for reasons not socially recognized (Wang, Li et al., 2024; Klonsky and Muehlenkamp, 2007; Nock, 2010). NSSI is highly prevalent, especially among adolescents. A meta-analysis on community samples (Swannell et al., 2014) revealed a lifetime prevalence of 5.5% in adults (aged ≥ 25 years), 13.4% in emerging adults (aged 18–24 years), and 17.2% in adolescents (aged 10–17 years). Similarly, a recent meta-analysis focusing on adolescent studies reported lifetime and 12-month prevalence rates of 22.1% and 19.5%, respectively (Lim et al., 2019). When considering clinical samples, the lifetime prevalence may reach as high as 30% to 82% (Hooley and Franklin, 2018). These figures indicate the substantial prevalence of NSSI within a population. Unfortunately, there is currently no detailed and specific data related to NSSI in Indonesia. It is highly likely that the prevalence of NSSI in Indonesia is similarly high, given the characteristics of Indonesian youth who tend to be involved in toxic relationships (Permana et al., 2023), struggle to recognize and manage emotions (Permana, 2021), and often lack clear life goals, leading to uncertain life paths (Permana & Lestari, 2022).

NSSI differs from self-harm or even lethal suicidal behavior (Andover et al., 2013), as numerous studies consistently identify NSSI as one of the strongest long-term predictors of subsequent suicide attempts. This means that the predictive power of NSSI often exceeds that of previous suicide attempts (Asarnow et al., 2011; Mars et al., 2019; Ribeiro et al., 2016; Victor and Klonsky, 2014). Additionally, NSSI has demonstrated its capacity to forecast subsequent psychopathological outcomes. For example, Bjureberg et al.

(2022) noted that adolescents engaged in NSSI have a higher longitudinal risk of developing alcohol/substance use disorders compared to their non-NSSI counterparts. Similarly, Kiekens et al. (2021) found that even after controlling for pre-existing psychological disorders, NSSI continued to predict the emergence of future psychological disorders and forecasted the persistence of generalized anxiety disorder and bipolar mood disorder at a 12-month re-assessment.

The causes of Non-Suicidal Self-Injury (NSSI) are highly diverse, involving various sociodemographic and educational elements, negative life events, family challenges, and psychiatric and psychological factors (Hawton et al., 2012). Factors such as low socioeconomic status, adverse childhood experiences, and instances of abuse, for instance, heighten vulnerability to NSSI. Additionally, psychiatric factors, including depression, also contribute to the complex nature of NSSI (Hawton et al., 2012; Wang et al., 2024). Among these factors, child maltreatment and bullying have emerged as global public health concerns. According to the World Health Organization (WHO), Harsh parenting and child maltreatment constitutes abuse and neglect occurring to individuals under 18 years of age, affecting one in three children globally and doubling the risk of developing mental illness (Chandan et al., 2019; Gu et al., 2024). Likewise, data from 68 low-income and middle-income countries indicates an overall prevalence of bullying, regardless of age and sex, at 34.4%, at least once in the past 30 days (Han et al., 2019). Bullying, defined as behavior intended to cause harm or discomfort to another individual, involves intentionality, repetitiveness, and an imbalance of power. It is recognized as a risk factor for mental health issues (Olweus, 2013; Lereya et al., 2015).

Recent research suggests that experiences of child maltreatment and being bullied can alter the hypothalamic-pituitary-adrenal axis and other stress response systems (Turecki et al., 2012) or lead to long-term increases in inflammatory processes from childhood to young adulthood (Copeland et al., 2014). Significantly, both child maltreatment and school bullying substantially elevate the risk of self-harm. Extensive meta-analyses consistently establish a connection between childhood maltreatment—encompassing sexual abuse, physical abuse, neglect, and emotional abuse—and Non-Suicidal Self-Injury (NSSI) (Liu et al., 2018). Moreover, persistent exposure to bullying is strongly linked to increased rates of self-harm, even after adjusting for emotional and behavioral issues, low IQ, and family environmental risks (Fisher et al., 2012). Additionally, various forms of bullying victimization, including cyber-bullying and traditional bullying, have been found to heighten the risk of major depressive disorder, self-harm, and suicidality (Islam et al., 2020).

In the context of rapidly evolving societal norms and global challenges, young individuals face various pressures that affect their mental well-being. The increasing prevalence of Non-Suicidal Self-Injury (NSSI) among youth demands a deeper understanding from an Islamic perspective. This research aims to bridge contemporary mental health concerns with Islamic teachings regarding NSSI. Given the rising cases of NSSI among youth, this study addresses the urgent need to integrate Islamic perspectives into the discourse on mental health. By exploring the motivations, risk factors, and psychological consequences of NSSI, this research aims to provide insights that can guide preventive measures and interventions within an Islamic framework. The primary goal is to explore the phenomenon of NSSI from various recent research perspectives and how the Islamic viewpoint can contribute to preventing or reducing the potential occurrence of NSSI.

This study adopts a theoretical framework that integrates principles from Islamic teachings, contemporary mental health perspectives, and ethical considerations related to self-care. This approach aims to offer a comprehensive understanding of NSSI within the context of culture and religion. Its significance lies in its potential to inform culturally sensitive preventive strategies and interventions. By merging Islamic principles with mental health insights, this research contributes to a deeper understanding of NSSI among Muslim youth, facilitating targeted support and guidance.

2. RESEARCH METHOD

This study employs a scoping review methodology to explore and synthesize relevant literature on NSSI among young individuals. By using keywords such as "non-suicidal self-injury," the study aims to provide a comprehensive overview of motivations, risk factors, and psychological impacts from both Islamic and contemporary perspectives. Systematic online searches will be conducted on databases such as PubMed, PsycINFO, and Google Scholar. The broad selection of databases aims to encompass multidisciplinary literature relevant to NSSI among youth.

Articles selected for review must meet the following criteria: 1) Investigate or discuss NSSI among young individuals; 2) Focus on motivations, risk factors, or psychological impacts of NSSI; 3) Published in peer-reviewed scholarly journals. Articles that do not meet the inclusion criteria or are irrelevant to the research focus will be excluded. The selection process and data extraction will be based on abstracts initially, followed by a thorough evaluation of selected articles for data extraction. Relevant information on motivations, risk factors, and psychological impacts of NSSI will be extracted for analysis. Data extracted

from selected articles will be analyzed descriptively, categorizing findings based on themes related to motivations, risk factors, and psychological impacts of NSSI. This synthesis aims to present a clear overview of the complexity and variations within the relevant literature. To enhance validity and reliability, strict criteria for literature selection and data extraction will be applied. Regular discussions within the research team will ensure consistent and accurate interpretation of findings. The outlined methodology aims to provide a rigorous and comprehensive approach to exploring NSSI among young individuals from an Islamic perspective. By synthesizing relevant literature, the study aims to provide valuable insights that can inform culturally sensitive strategies for prevention and intervention.

3. RESULTS AND DISCUSSION

This research utilized 30 research articles as analytical tools to explore the dynamics of NSSI from various findings, aiming to investigate the NSSI phenomenon from recent studies and how the Islamic perspective can contribute to preventing or reducing the potential occurrence of NSSI. Findings from each article were discussed and analyzed narratively in this section.

Young people naturally need to recognize and identify themselves as part of their quest for identity (Permana, 2020). This search process often requires extensive exploration, sometimes exploiting the relationships they have. It's not uncommon for this exploration to end in problematic relationships, often referred to as toxic relationships (Permana et al., 2023). Indonesian youth often struggle to explore their relationships due to negative perceptions of family and marriage (Permana & Medina, 2021). Apparently, this perception arises because Indonesian youth often lack clarity about life goals and aspirations (Lestari & Permana, 2022). This confusion and lack of clarity in life then manifest in the form of relational expressions, such as sexual behavior (Mellin et al., 2024). Thus, for a young person, engaging in active sexual relationships becomes a means of expression necessary within relationships.

This is what later becomes the initial impetus for someone to engage in self-injury, namely, the strong need to express oneself. Sexual behavior as a form of self-expression and self-harm also occurs due to the ambiguity and lack of clarity in an individual's pain threshold (Kao et al., 2024). Kao et al. (2024) explored sensitivity to pain as a marker and potential predictor for NSSI in adolescents, highlighting the interaction between physical and psychological factors in self-injurious behavior. The ambiguity of this pain threshold explains that self-injury is not just a psychological phenomenon but also significantly affects an individual's physical health. An individual's sensitivity to pain is crucially related to their safety and survival, making it very dangerous. Losing this pain threshold then becomes a unique phenomenon known as Alexithymia. Alexithymia refers to a condition where an individual no longer feels anything about events that would normally elicit specific emotional expressions (Ruan et al., 2024; Pourramzani et al., 2024).

Non-suicidal self-injury (NSSI) has increasingly become a subject of research interest, as evidenced by the growing number of recent studies examining various aspects of this phenomenon among adolescents and young individuals. Nam and Cha (2024) investigated the high tendency among young people to contemplate future suicide, not just for themselves but collectively within their community. This suggests that NSSI is not merely a personal and individual phenomenon but also a collective and social one (Swannell et al., 2014). Furthermore, the phenomenon extends to communities of NSSI, comprising young people with backgrounds of running away from home or experiencing homelessness, with a very high prevalence rate (Armoon et al., 2024).

In addition to cognitive and physiological factors explaining NSSI at the personal and individual levels, the fact that NSSI also becomes a collective and social phenomenon highlights the significant role of family dynamics in influencing the emergence of NSSI. Gu, Chen, and Cheng (2024) investigated the longitudinal relationship between harsh parenting and NSSI in adolescents, revealing the influence of frustrated basic psychological needs and self-concept clarity in this relationship. Moreover, Zhou et al. (2024) demonstrated the ability to predict youth NSSI from their family background levels through regression equations and machine learning. The strong and significant influence of the family is thus evident in explaining NSSI at the collective and social levels.

Besides family, childhood experiences, and early predictors also contribute to understanding NSSI. Wichstrøm and Wichstrøm (2024) investigated childhood predictors of NSSI in adolescence, providing insights into the developmental trajectories of self-injurious behavior. Wang, Li, Chen, and colleagues (2024) proposed a new conceptual framework for understanding NSSI subtypes, synthesizing existing literature to depict different representations of self-harm, especially in terms of whether it occurs at the personal individual level or the collective and social level. Ruan et al. (2024) examined the pathways linking alexithymia and peer victimization, delineating the collective and social psychological mechanisms behind NSSI in adolescents. The social dimensions of NSSI have also been investigated by Steggals, Graham, and Lawler (2024) through an intersubjective approach to NSSI, emphasizing the social context and implications

of self-injurious behavior in interpersonal or relational settings. Furthermore, Joiner (2024) provided a theoretical framework for understanding suicide in the context of interpersonal relationships, offering insights into the mechanisms behind suicidality, from the emergence of suicidal ideation to the progression to suicidal behavior.

The processes and psychological dynamics involved are in-depth studies related to the motivation and function of NSSI that have been researched in recent studies. For example, Park, Qu, and Ammerman (2024) explored the characteristics and functions of NSSI that provide information about suicide risk, emphasizing the importance of understanding the motivations underlying self-injurious behavior. Zhou et al. (2024) developed a predictive model for NSSI in adolescents at the family level, highlighting the role of family factors in identifying at-risk individuals. Additionally, psychological factors such as depression and rumination have been associated with NSSI. Zhu, Zhang, Chen, and Teicher (2024) investigated the concurrent pathways of depression and rumination as predictors of NSSI, highlighting the importance of emotion regulation in self-injurious behavior. Rumination is the scientific term for overthinking, which is often a popular concept in society. Furthermore, O'Loughlin, McClure, and Ammerman (2024) developed and validated the Self-Injury Stigma Scale, which addresses stigma associated with NSSI and its impact on help-seeking behavior.

Ultimately, cultural factors and experiential avoidance have also been investigated in relation to NSSI. For example, Permana and Riyani (2024) explored the concept of cultural tolerance and its implications for understanding the potential emergence of NSSI in Indonesian society. Haywood, Hasking, and Boyes (2024) unraveled the link between experiential avoidance and NSSI, highlighting the multidimensional nature of this relationship. In summary, recent research on NSSI has revealed its complex nature, involving cognitive, physiological, family, social, and psychological factors. Understanding the complex interactions of these factors is crucial for developing targeted interventions and support strategies for individuals experiencing NSSI.

In addressing and responding to the challenges of NSSI, Muslim academics and the Islamic movement can take various holistic steps based on Islamic values. Firstly, they can utilize a preventive approach by raising awareness among the community about the risks and consequences of NSSI through religious-based education. This can be done through sermons, lectures, and Islamic educational programs that incorporate materials on mental health and self-harming behavior within the context of Islamic teachings. Additionally, they can provide resources and support for individuals who may experience NSSI or are at risk of NSSI. This can include counseling or psychotherapy services that integrate Islamic principles with clinically proven practices for addressing mental health issues. The Islamic movement can also mobilize communities to support affected individuals and reduce stigma associated with mental health problems.

The importance of creating an inclusive and supportive social environment should also not be overlooked. Muslim academics and the Islamic movement can promote a culture that encourages open communication, empathy, and appreciation for human values, in line with Islamic teachings on compassion and peace. This can be achieved through social activities, community program development, and advocacy for policies that support mental well-being. In the educational context, Muslim academics can strengthen Islamic education curricula by incorporating lessons on mental health, stress management, and Islamic approaches to emotional regulation. This helps foster a better understanding of the importance of self-care and mental health within Islamic teachings, enabling individuals to identify and address feelings and thoughts that may lead to NSSI.

Furthermore, Muslim academics can play a role in researching and developing culturally sensitive and Islam-based intervention models to address NSSI. This includes exploring concepts such as repentance (taubah), trust in Allah (tawakkal), and patience (sabar), and applying them in the context of therapy and psychosocial support. Additionally, Islamic outreach (dawah) also plays an important role in addressing NSSI by spreading messages that prioritize compassion, healing, and solidarity among individuals. Through calls for mutual assistance, compassion, and strengthening social bonds within communities, Islamic outreach can be a tool for shaping environments that support mental health and prevent self-harming behavior. In conclusion, Muslim academics and the Islamic movement have a significant role to play in addressing NSSI by providing education, support, inclusive environments, and Islam-based interventions. With a holistic approach covering educational, social, clinical, and spiritual aspects, they can positively contribute to efforts to prevent and address NSSI among young Muslim individuals and the general population.

4. CONCLUSION

In conclusion, this research delineates the complexity of Non-Suicidal Self-Injury (NSSI) phenomenon and highlights diverse contributing factors to its emergence. From a psychological perspective, NSSI is not merely a personal individual issue but is also associated with family dynamics, childhood experiences, and

cultural factors influencing individuals. Findings from various studies indicate that awareness of NSSI risks and prevention efforts need to be enhanced holistically. Additionally, this research demonstrates that an Islam-based values approach can significantly contribute to addressing NSSI. Muslim academics and the Islamic movement play a crucial role in providing education, support, and culturally sensitive interventions. They can mobilize communities to support affected individuals and reduce stigma associated with mental health issues.

The importance of preventive approaches and comprehensive interventions is also emphasized in this conclusion. Through education, counseling services, community program development, and policy advocacy, NSSI prevention efforts can become more effective. This also includes enhancing understanding of mental health within the context of Islamic teachings and developing intervention models based on these values. Islamic outreach can also be a powerful tool in shaping environments that support mental health and prevent self-harming behavior. By disseminating messages of compassion, solidarity, and understanding of humanitarian values, Islamic outreach can help alleviate psychological stress and enhance mental well-being in society.

Overall, this research underscores the importance of collaboration among Muslim academics, the Islamic movement, and mental health practitioners in addressing NSSI. By combining knowledge, values, and cross-sectoral efforts, we can create a more inclusive, caring, and supportive environment for individuals vulnerable to NSSI.

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