

Peran Koping Religius dalam Memoderasi Hubungan antara Stres dan Perilaku Non-Suicidal Self-Injury (NSSI) = The Role of Religious Coping in Moderating The Relationship between Stress and Non-Suicidal Self-Injury (NSSI)

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Abstrak

Non-suicidal self-injury (NSSI) merupakan isu kesehatan global dengan prevalensi yang tinggi dan meningkat di kalangan dewasa awal. Penelitian ini bertujuan untuk mendapatkan gambaran mengenai kecenderungan perilaku NSSI pada dewasa awal di Indonesia serta menemukan hubungan antara stres, koping religius positif dan negatif, dan keparahan perilaku NSSI. Data dikumpulkan dari 311 partisipan berusia 18–29 tahun ($M = 23.37$, $SD = 2.38$) menggunakan kuesioner daring, yang mencakup alat ukur stres (Perceived Stress Scale-10), koping religius positif dan negatif (Brief RCOPE), serta karakteristik perilaku NSSI (Non-Suicidal Self-Injury Function Scale). Dalam penelitian ini, 40.2% partisipan pernah atau masih melakukan NSSI. Hasil menunjukkan bahwa kenaikan pada stres secara statistik signifikan memprediksi peningkatan pada keparahan perilaku NSSI. Koping religius negatif memiliki efek moderasi yang signifikan secara statistik pada hubungan antara stres dan keparahan NSSI, namun koping religius positif tidak memiliki efek moderasi yang signifikan secara statistik. Penelitian ini mendemonstrasikan bahwa stres dan koping religius negatif memainkan peran penting dalam memperparah perilaku NSSI. Penelitian ini mengilustrasikan pentingnya program prevensi dan intervensi untuk NSSI yang menargetkan stres dan koping religius negatif.

.....Non-suicidal self-injury is a global health issue with a high and increasing prevalence among emerging adults. This study is aimed to examine the tendency of NSSI among emerging adults in Indonesia while also investigating the relationship between stress, positive and negative religious coping, and NSSI severity. Data was gathered from 311 participants aged 18–29 years old ($M = 23.37$, $SD = 2.38$) using online questionnaire, which included measures of stress (Perceived Stress Scale-10), positive and negative religious coping (Brief RCOPE), and NSSI severity (Non-Suicidal Self-Injury Function Scale). This study revealed that 40.2% of participants had or were still engaging in NSSI. Results indicated that an increase in stress predicted with statistical significance an increase in NSSI severity. Negative religious coping had a statistically significant moderation effect on the relationship between stress and NSSI severity, while positive religious coping did not. Thus, this study demonstrated that stress and negative religious coping play important roles in exacerbating NSSI. This study illustrated the importance of prevention and intervention programmes for NSSI that target stress and negative religious coping.