



SOCIAL-PSYCHOLOGICAL PREVENTION OF SELF-DESTRUCTIVE BEHAVIOR IN ADOLESCENT GIRLS: A PROGRAM MODEL AND PSYCHOLOGICAL FRAMEWORK

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Abstract. *This article provides a theoretical and empirical substantiation of a social-psychological prevention program and psychological model for self-destructive behavior in adolescent girls. A three-level model of preventive intervention – intrapersonal, interpersonal, and institutional – is presented, with goals, methods, and expected outcomes systematized for each level. A comprehensive set of measures targeting school psychological service, the family component, and the social-psychological climate of the classroom is discussed. Criteria for evaluating program effectiveness and a monitoring system are also proposed.*

Keywords: *self-destructive behavior, adolescent girls, prevention program, psychological model, three-level intervention, school psychological service, emotional regulation, social-psychological prevention.*

INTRODUCTION

The development of evidence-based prevention programs for self-destructive behavior in adolescent girls has become one of the most pressing challenges facing school psychology and educational policy in Uzbekistan. Despite growing awareness of the problem's scope, preventive practice in Uzbek schools remains largely reactive – responding to self-destructive incidents after they occur rather than systematically addressing the social-psychological conditions that generate them (Resolution No. PQ-5430, 2022; Hawton, Saunders, & O'Connor, 2012). This reactive orientation reflects a broader gap in the applied literature: while studies have identified the risk factors

associated with self-destructive behavior in adolescent girls, theoretically grounded and culturally adapted prevention program models remain underdeveloped.

International evidence strongly supports the superiority of multi-level preventive approaches over single-component interventions. Programs that simultaneously target individual-level emotional regulatory skills, interpersonal-level relationship quality, and institutional-level environmental conditions consistently outperform programs focused on any single domain (Greenberg, 2010). Yet translating this evidence base into a culturally coherent program model applicable to Uzbekistan's school context – with its specific family structure norms, gender-role expectations, and educational system characteristics – requires dedicated theoretical and methodological work.

The purpose of this article is to propose a theoretically grounded three-level social-psychological prevention model for self-destructive behavior in adolescent girls; to specify its goals, methods, and indicators at each level; and to outline a framework for evaluating program effectiveness. The model draws on an integration of international evidence-based approaches and the sociocultural specifics of the Uzbek educational context, aiming to provide school psychologists and educational administrators with a practically applicable framework.

LITERATURE REVIEW AND METHODOLOGY

The theoretical foundations of the prevention model proposed in this article rest on three converging research traditions. First, Dialectical Behavior Therapy (DBT), developed by M. Linehan (1993), provides the most extensively validated individual-level intervention framework for self-destructive behavior, centering on the development of four skill sets: mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness (Linehan, 1993). Adapted school-based DBT programs have demonstrated significant reductions in self-injurious behavior and suicidal ideation among adolescent girls in multiple randomized controlled trials.

Second, U. Bronfenbrenner's ecological systems theory (1979) provides the conceptual architecture for multi-level intervention design, establishing that behavioral outcomes are determined by the nested interaction of microsystem (family, peer group, school), mesosystem (family-school connection), exosystem (community resources), and macrosystem (cultural norms) factors (Bronfenbrenner, 1979). An effective prevention program must therefore operate at multiple systemic levels simultaneously rather than targeting only the individual adolescent.

Third, the positive youth development (PYD) framework (Lerner, 2004) offers a strength-based complement to risk-focused approaches, emphasizing the cultivation of competence, confidence, connection, character, and caring as protective factors that buffer against self-destructive behavioral risk (Lerner, 2004). Integrating PYD principles into the prevention model ensures that the program builds on adolescent girls' existing strengths rather than positioning them exclusively as recipients of deficit-reduction interventions.

The methodology of the present study combines: systematic review of international prevention program evaluations; theoretical analysis and synthesis; comparative analysis of program models across cultural contexts; and consultation of Uzbekistan's normative-legal framework for school psychological services, including the Presidential Decree PQ-5430 of June 28, 2022. The study object is the social-psychological prevention of self-destructive behavior in adolescent girls within the school context. The study subject is the structure, content, and effectiveness criteria of a three-level prevention program model.

RESULTS AND ANALYSIS

The Three-Level Prevention Model: Conceptual Framework

The proposed social-psychological prevention model is organized across three levels of intervention, corresponding to Bronfenbrenner's nested systemic levels. Each level targets a distinct set of actors and mechanisms, and the levels are designed to operate synergistically – reinforcing and amplifying each other's effects – rather than independently.

Table 1. Three-Level Social-Psychological Prevention Model for Self-Destructive Behavior in Adolescent Girls

Level	Target Actors	Core Goals	Primary Methods
Level 1: Intrapersonal	Individual adolescent girls	Build emotional regulation skills; develop distress tolerance; strengthen self-concept	Emotion regulation training; mindfulness-based exercises; individual counseling; journaling

Level 2: Interpersonal	Family members; peer group; teachers	Improve relational quality; build support networks; develop communication skills	Family psychoeducation; peer support groups; teacher training workshops; mediation training
Level 3: Institutional	School administration; psychological service; community	Create psychologically safe school climate; strengthen early detection systems; develop referral pathways	School climate assessment; psychologist capacity-building; policy development; community partnership

The three levels are not hierarchically ranked in terms of importance – each is necessary, and the absence of any level undermines the effectiveness of the others. Specifically, individual-level skill-building is rapidly extinguished if the interpersonal environment remains invalidating; and interpersonal improvements are constrained if the institutional environment lacks the structural conditions – adequate psychologist staffing, confidential help-seeking pathways, and administrative support – needed to sustain them (Nock, 2010; Klonsky, 2007).

Level 1: Intrapersonal Intervention – Emotional Regulation Skills Program

The intrapersonal component consists of a structured 12-session group-based emotional regulation skills program delivered to adolescent girls aged 12–16 within the school setting. Sessions are conducted weekly by the school psychologist and cover: identification and labeling of emotional states; understanding the emotion-behavior link; diaphragmatic breathing and body-based regulation techniques; cognitive reappraisal; distress tolerance strategies (TIPP: Temperature, Intense exercise, Paced breathing, Progressive relaxation); and interpersonal effectiveness skills.

The program incorporates cultural adaptation measures specific to the Uzbek context: materials acknowledge the social value of family harmony and relational loyalty, and reframe emotion regulation not as individual self-interest but as a contribution to one's relationships and family well-being. This framing is designed to reduce the cultural dissonance that purely individualistic Western program formats may generate in collectivist contexts (Karimova, 2018).

Level 2: Interpersonal Intervention – Family and Peer Environment Components

The interpersonal component operates through two parallel streams. The family stream comprises a four-session psychoeducation workshop for parents and caregivers, covering: understanding adolescent emotional development; recognizing early signs of emotional distress and self-destructive risk; communication strategies that validate rather than dismiss adolescent emotional experience; and guidance on help-seeking and referral. Research indicates that parental participation in psychoeducation programs produces significant reductions in adolescent internalizing and externalizing behavioral problems, with effect sizes comparable to individual-focused interventions (Gratz & Roemer, 2004).

The peer stream involves the training of student peer supporters – identified through sociometric assessment as socially central, prosocially oriented students – who receive four sessions of preparation in active listening, empathic responding, and appropriate help-referral. Peer support programs are particularly effective for adolescent populations because of the primacy of peer relationships in this developmental stage and because peers often detect distress signals before adults do.

Level 3: Institutional Intervention – School Climate and Psychological Service Strengthening

The institutional component targets the structural conditions of the school environment. Three priority areas are identified. First, school psychological service capacity: given the documented staffing challenges in Uzbekistan's school psychological service, the institutional component includes advocacy for maintaining the 1:500 psychologist-to-student ratio mandated by state standards, alongside the introduction of supervision structures and professional development opportunities for school psychologists specializing in self-destructive behavior risk assessment (Umarov, 2021).

Second, early detection systems: the institutional component involves training all teaching staff in a brief screening protocol – the five-item Teacher Observation Checklist for Adolescent Distress (TOCAD) – enabling systematic, low-burden identification of at-risk students for referral to the school psychologist. Third, referral pathway development: the institutional component maps and formalizes the referral pathway from teacher identification through psychological assessment to family contact and, where indicated, specialist mental health referral, ensuring that no at-risk student falls through institutional gaps.

Program Effectiveness Evaluation Framework

A rigorous evaluation framework is essential for assessing program impact and guiding continuous improvement. The proposed evaluation model employs a pre-post design with a three-month follow-up assessment, measuring outcomes across all three intervention levels.

Table 2. Program Effectiveness Evaluation Framework

Level	Indicator	Measurement Tool	Assessment Point
Intrapersonal	Emotional regulation capacity	DERS (Difficulties in Emotion Regulation Scale)	Pre, post, 3-month follow-up
Intrapersonal	Self-destructive behavioral frequency	SBQ-R (Self-Harm Questionnaire Revised)	Pre, post, 3-month follow-up
Interpersonal	Perceived social support quality	MSPSS (Multidimensional Scale of Perceived Social Support)	Pre, post
Interpersonal	Family communication quality	FES (Family Environment Scale)	Pre, post
Institutional	School psychological climate	Psychological Safety Index (school version)	Pre, post
Institutional	Early detection rate	Proportion of at-risk students identified via TOCAD	O n g o i n g monitoring

Process evaluation – assessing program fidelity, participant engagement, and psychologist competence – is conducted alongside outcome evaluation through session observation protocols and participant satisfaction surveys. Pilot implementation of the program in two Tashkent schools yielded encouraging preliminary results: DERS scores decreased by an average of 18.4 points ($p < 0.05$) in the intervention group compared to the waitlist control group, and no new self-destructive behavioral incidents were recorded among program participants during the intervention period (Toshmatova, 2022).

CONCLUSIONS

The three-level social-psychological prevention model proposed in this article offers a theoretically grounded, culturally adapted, and practically applicable framework for addressing self-destructive behavior in adolescent girls within Uzbekistan's school context. Five conclusions warrant emphasis.

First, effective prevention of self-destructive behavior in adolescent girls requires simultaneous intervention at intrapersonal, interpersonal, and institutional levels. Single-component programs targeting only individual skills or only the family environment are insufficient to address the multi-determined nature of the problem.

Second, the intrapersonal component – specifically, structured emotional regulation skills training adapted to collectivist cultural values – constitutes the core of the program and should be delivered with high fidelity by adequately trained school psychologists. Third, the family psychoeducation stream represents a high-leverage, relatively low-resource intervention that significantly amplifies the effects of individual-level work by improving the quality of the adolescent's most proximal relational environment.

Fourth, institutional-level interventions – strengthening psychologist capacity, implementing early detection systems, and formalizing referral pathways – are necessary structural conditions for program sustainability and population-level impact. Fifth, the evaluation framework proposed here provides a rigorous basis for assessing program effectiveness and should be implemented in future controlled trials to establish the program's evidence base within the Uzbek educational context. Scale-up, adaptation for different age groups, and integration into national school psychological service standards represent priority directions for subsequent research and policy development.

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