



## The Effectiveness of Cognitive Behavioral Counseling using Cognitive Restructuring Techniques to Reduce Self-Injury Behavior among Vocational High School Students

Nur Dhian Mustang<sup>1\*</sup>, Maudy Mursalin Madani<sup>2</sup>

**Correspondence regarding this article should be addressed to:**

\* Nur Dhian Mustang, Department of Guidance and Counseling, Universitas Negeri Makassar, Indonesia, ✉ [nudhiankmustang@gmail.com](mailto:nudhiankmustang@gmail.com)

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# The Effectiveness of Cognitive Behavioral Counseling Using Cognitive Restructuring Techniques to Reduce Self-Injury Behavior among Vocational High School Students

Nur Dhian Mustang<sup>1\*</sup>, Maudy Mursalin Madani<sup>2</sup>

<sup>1,2</sup> Universitas Negeri Makassar, Indonesia

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## ABSTRACT

**Background:** Self-injury among adolescents is a growing mental health concern, particularly among vocational high school students facing academic, social, and personal pressures. Negative thinking patterns can lead students to adopt maladaptive coping strategies such as self-injury, highlighting the need for appropriate counseling interventions. **Objective:** This study aims to examine the effectiveness of cognitive restructuring techniques within the framework of Cognitive Behavioural Counseling in reducing self-injury behaviour among students at SMK Negeri 3 Makassar. **Method:** This research employed a quantitative, quasi-experimental design. The population consisted of 71 students, and the sample was selected purposively, yielding 10 students who reported self-injurious behaviour. The participants were divided into an experimental group and a control group. Data were collected through observation, interviews, documentation, and a self-injury behaviour scale. Data analysis was conducted using descriptive statistics and the Mann-Whitney test. **Results:** The experimental group showed a significant reduction in self-injury behaviour after cognitive restructuring techniques were implemented, compared to the control group. **Conclusion:** Cognitive restructuring techniques within Cognitive Behavioural Counseling are effective in reducing self-injury behaviour among vocational high school students. **Contribution:** This study contributes to the development of evidence-based counseling interventions and provides practical guidance for school counsellors in addressing self-injury behaviour among students in educational settings.

## 1. INTRODUCTION

Every individual inevitably encounters various life challenges that require psychological adjustment. In principle, individuals can cope with life pressures constructively through adaptive coping strategies, such as seeking social support, engaging in positive activities, and developing healthy ways to manage emotions and thoughts (Faridah et al., 2025). From a cognitive perspective, how a person interprets and gives meaning to an event greatly influences their emotional and behavioural responses (Ramadanti et al., 2022). Individuals who possess rational and adaptive thinking patterns tend to be better able to

deal with various problems compared to those who experience cognitive distortions (Pratiwi et al., 2022).

However, in reality, not all individuals can manage psychological pressure effectively. Individuals who experience cognitive distortions such as feelings of worthlessness, excessive pessimism, or negative self-perceptions tend to be more vulnerable to maladaptive behaviours (Pratiwi & Habsy, 2024). One form of maladaptive behaviour that often emerges as a response to psychological distress is self-injury. Self-injury refers to the deliberate act of harming oneself without the intention of ending one's life, but rather as an attempt to relieve or channel psychological pain experienced by the individual (Al-Haya & Alfuruqy, 2023). This behaviour is typically manifested

\* Corresponding Author: Nur Dhian Mustang, [nudhiankmustang@gmail.com](mailto:nudhiankmustang@gmail.com)

Department of Guidance and Counseling, Universitas Negeri Makassar, Indonesia

Address: Jl. A. P. Pettarani, Gunungsari, Kecamatan Rappocini, Kota Makassar, Sulawesi Selatan 90222, Indonesia



through actions such as scratching, cutting, or burning parts of the body, which may leave wounds or scars (Afriliani et al., 2021).

Self-injury is often viewed as a maladaptive coping mechanism when individuals cannot verbally express emotional distress or negative thoughts (Marlina et al., 2025). Cognitive distortions experienced by individuals can trigger urges to harm themselves as a way to reduce the psychological tension they feel (Paramitayani, 2022). Self-injury behaviour is frequently associated with individuals' inability to manage negative thoughts as well as low emotional regulation skills (Triyanti et al., 2025).

Currently, the phenomenon of self-injury has become a concerning mental health issue in many countries. Data released by the World Health Organisation (WHO) indicate that suicide is the second leading cause of death among individuals aged 15–29 years worldwide, with approximately 703,000 cases occurring annually (WHO, 2020). Although not all self-injury behaviours lead to suicide, such behaviours remain an indicator of significant psychological distress and therefore require serious attention.

The phenomenon of self-injurious behaviour has also been identified at SMK Negeri 3 Makassar. Interviews with the school counsellor revealed that some students engage in self-injurious behaviours such as hitting their heads against walls, punching glass until their hands are injured, and other forms of self-harm when experiencing psychological distress. These findings were further supported by observations and interviews with guidance and counseling teachers, who revealed that three students had cut marks on their wrists during health examinations conducted as part of the new student admission process. Furthermore, a self-injury behaviour scale was administered to 71 third-grade students, but only 51 completed it. The measurement results indicated that the cognitive aspect obtained the highest score at 71%, followed by the affective aspect at 63% and the behavioural aspect at 60%. These findings suggest that cognitive factors represent the most dominant aspect associated with self-injury behaviour among students.

The issue of self-injury among students highlights the importance of guidance and counseling services in schools in helping students develop healthier coping strategies, improve their ability to manage emotions, and reduce negative thinking patterns that may trigger maladaptive behaviours. One approach that can be applied in counseling services is cognitive behavioural counseling. This approach emphasises the interrelationship between thoughts, feelings, and behaviours (Prayogi et al., 2024). Within cognitive behavioural counseling, one commonly used technique is cognitive restructuring, an intervention strategy aimed at helping clients identify, challenge, and modify irrational thoughts or cognitive distortions that trigger maladaptive emotions and behaviours (Wardhani,

2024). This technique is grounded in Cognitive Behavioural Therapy (CBT) theory, developed by Aaron T. Beck, which emphasises that thoughts influence feelings and behaviours (Putra & Ardi, 2025). Through processes such as self-monitoring, recording automatic thoughts (automatic thoughts record), evidence testing, and replacing negative thoughts with more rational and adaptive thinking, clients are assisted in developing more realistic thought patterns and improving control over their emotional responses. By applying cognitive restructuring techniques, counselors help individuals identify and transform negative or irrational thought patterns into more rational and adaptive ones, enabling them to respond to various problems in a more constructive manner.

Several previous studies have examined self-injury behaviour from different perspectives. Research conducted by Salsabila & Rahmasari (2024) and Widyawati & Kurniawan (2021) found that social media use is significantly associated with an increased risk of self-injury behaviour, particularly through mechanisms of social comparison and exposure to certain types of content. Another study by Wahdah & Akbar (2025) revealed that the primary factors triggering self-injury behaviour among adolescents include family problems, childhood trauma, lack of emotional support from parents, and conflicts in interpersonal relationships. In addition, research by Effendi & Karneli (2025) on the application of Rational Emotive Behaviour Therapy (REBT) counseling demonstrated a reduction in the intensity of self-injury behaviour following REBT-based counseling interventions. The findings indicate that counseling interventions, such as Rational Emotive Behaviour Therapy (REBT), developed by Albert Ellis, can help adolescents recognise irrational thoughts and manage negative emotions more adaptively. Therefore, comprehensive preventive approaches and counseling interventions are needed in both school and family environments.

Although various studies have discussed the causes and treatment efforts related to self-injury behaviour, several research gaps remain. Most previous studies have focused primarily on the causal factors of self-injury behaviour or have utilised individual counseling approaches. Research specifically examining interventions targeting cognitive distortions through cognitive restructuring techniques within the framework of cognitive behavioural counseling in school counseling services remains relatively limited. Therefore, this study seeks to address this gap by applying cognitive restructuring techniques within a cognitive-behavioural counseling approach to reduce self-injurious behaviour among students.

This study aims to analyse the effectiveness of implementing cognitive restructuring techniques within the framework of cognitive-behavioural counseling in reducing self-injury behaviour among students at SMK Negeri 3

Makassar. Specifically, this study aims to examine whether an intervention focused on identifying and modifying cognitive distortions can reduce the intensity of self-injury behaviour compared to a group that does not receive the intervention. In addition, this study aims to provide empirical evidence to strengthen guidance and counseling services in schools in addressing maladaptive behaviours rooted in cognitive problems, thereby encouraging the development of healthier and more adaptive coping strategies among students.

## 2. MATERIALS AND METHODS

### 2.1 Research Design

This study employed a quantitative, quasi-experimental design to examine the effectiveness of cognitive restructuring techniques in reducing self-injury among vocational high school students. The quantitative approach was chosen because the study emphasises the measurement of numerical data and the use of statistical analysis to determine the influence of the independent variable on the dependent variable.

The independent variable in this study is the cognitive restructuring technique within the Cognitive Behavioural Counseling approach, while the dependent variable is self-injury behaviour. Self-injury behaviour is defined as the deliberate act of harming oneself without the intention of committing suicide. This variable is measured across several domains: environmental, biological, cognitive, affective, and behavioural. Meanwhile, cognitive restructuring is a counseling technique aimed at helping individuals identify and change negative or irrational thought patterns into more rational and adaptive ones through specific counseling stages.

### 2.2 Participants

The population in this study comprised all third-grade students at SMK Negeri 3 Makassar, totalling 71 students. The research sample was selected using a purposive sampling technique, in which participants are selected based on specific criteria relevant to the research objectives. The criteria used in selecting the sample included students who showed indications of self-injury behaviour and were within the age range of 15–18 years.

Based on observations, interviews, and completion of the self-injury behaviour scale, 10 students met the inclusion criteria for the study. These participants were then randomly divided into two groups: an experimental group and a control group, each consisting of five students.

### 2.3 Data Collection

Data collection in this study was conducted using several techniques: 1) non-participant observation, used to observe students' behaviours related to indications of self-

injury; 2) Interviews were conducted with guidance and counseling teachers to obtain information regarding students' conditions and indications of self-injury behaviour; 3) Documentation, used to obtain supporting data related to students' conditions and research activities;

The self-injury behaviour scale is used as the primary instrument for collecting research data. The self-injury behaviour scale instrument was developed using a Likert scale and consisted of 32 statement items after undergoing validity and reliability testing. The validity test was conducted using Corrected Item–Total Correlation analysis in SPSS version 23, which indicated that 32 of the 35 items tested were valid. In addition, the instrument was validated by two experts in guidance and counseling. The reliability test results showed a Cronbach's Alpha of 0.853, indicating high reliability. The data collection process began with the initial observation stage and continued until the post-test measurement stage, which took approximately two months

### 2.4 Data Analysis

Data analysis in this study employed both descriptive and inferential statistical analyses. Descriptive statistics were used to describe the level of self-injury behaviour before and after the intervention, using frequency distributions and percentage values. The normality test was conducted using the Shapiro–Wilk test. In contrast, the homogeneity test was performed using Levene's Test in SPSS version 23 to determine whether the data met the assumptions for parametric analysis.

However, because the sample size was relatively small and the data were not entirely normally distributed, inferential analysis was conducted using the nonparametric Mann–Whitney test to determine differences between the experimental and control groups. Hypothesis testing was conducted by comparing the gain scores for self-injury behaviour between the two groups. The research hypothesis was rejected if the p-value was  $< 0.05$ .

## 3. RESULT AND DISCUSSION

### 3.1 Result

The results of this study present the findings from the data analysis to determine the effectiveness of implementing cognitive restructuring techniques in reducing self-injury behaviour among students at SMK Negeri 3 Makassar. Data analysis was conducted using descriptive statistics to illustrate the condition of students' self-injury behaviour before and after the intervention in both the experimental and control groups, and inferential statistics to examine differences between the two groups. The data were obtained through measurements using the self-injury behaviour scale, administered to the research participants during the pre-test and post-test stages, totalling 10 stu-

dents. Furthermore, the analysis results were used to determine the level of change in self-injury behaviour following the implementation of cognitive restructuring tech-

niques within the Cognitive Behavioural Counseling approach.

*3.1.1 Description of Pre-test and Post-test Scores of the Experimental Group*

**Table 1.** Pre-test and Post-test Scores of Experimental Group Participants

Initial	Pre-test Score	Category	Post-test Score	Category	Score Difference
AT	88	Moderate	73	Moderate	25
AM	94	High	66	Low	28
FH	82	Moderate	54	Low	28
NS	86	Moderate	64	Low	22
SM	92	High	65	Low	29

Table 1 shows changes in self-injury behaviour scores in the experimental group before and after the intervention, which included cognitive restructuring techniques. Based on these data, all research participants showed a decrease in scores from the pre-test to the post-test. During the pre-test stage, most students were categorised as moderate or high, with scores ranging from 82 to 94. After the intervention, post-test scores showed a significant decrease, with most students falling into the low category.

The reduction in scores can also be seen from the difference in each participant’s score: AT (25), AM (28), FH (28), NS (22), and SM (29). These findings indicate that after implementing the cognitive restructuring intervention, there was a reduction in the tendency toward self-injurious behaviour among students in the experimental group.

*3.1.2 Descriptive Analysis of Pre-test and Post-test Scores in the Experimental and Control Groups*

The pre-test was administered prior to the implementation of cognitive restructuring techniques to obtain baseline scores, which were later compared with the post-test results. Based on observations and measurements using the self-injury behaviour scale, 10 students were identified as exhibiting self-injury behaviour. These participants were then divided into two groups: the experimental group and the control group.

The experimental group received the intervention through cognitive restructuring techniques, while the control group received no treatment. Subsequently, the post-test was administered after the intervention phase to determine changes in self-injury behaviour in both groups. The statistical data of the pre-test and post-test results for the experimental and control groups are presented in the following table.

**Table 2.** Descriptive Statistics of the Experimental and Control Groups

Variable	N	Range	Minimum	Maximum	Mean	Std. Error	Std. Deviation
Pretest_Experiment	5	12	82	94	88.40	2.135	4.775
Posttest_Experiment	5	19	54	73	64.40	3.043	6.804
Pretest_Control	5	6	86	92	88.40	1.030	2.302
Posttest_Control	5	10	78	88	84.40	1.939	4.336
Valid N (listwise)	5						

Table 2 presents descriptive statistics for self-injury behaviour scores in the experimental and control groups based on pre-test and post-test results. In the experimental group, the average (mean) self-injury score before the intervention (pre-test) was 88.40, which then decreased to 64.40 in the post-test. This decrease indicates a substantial change after the implementation of the cognitive restructuring intervention.

Meanwhile, in the control group, the average pre-test score was 88.40 and only slightly decreased to 84.40 in the post-test. This comparison shows that the reduction in self-injury behaviour scores was more significant in the experimental group than in the control group, indicating that

the application of cognitive restructuring techniques contributed to the reduction of self-injury behaviour among students.

*3.1.3 Assumption Testing for Data Analysis*

*a) Normality Test*

The normality test was conducted to determine whether the research sample data were normally distributed. Normally distributed data are a fundamental requirement before performing parametric statistical analysis. If the data are not normally distributed, they cannot be analysed using parametric statistical tests.

The criteria for the normality test are as follows: if the p-value is greater than 0.05 ( $p > 0.05$ ), the data are considered normally distributed. Conversely, if the significance

value is less than 0.05 ( $\text{sig} < 0.05$ ), the data are considered not normally distributed.

**Table 3.** Normality Test Results

Group	Tests of Normality					
	Kolmogorov–Smirnov Statistic	df	Sig.	Shapiro–Wilk Statistic	df	Sig.
Experimental Pretest	.175	5	.200*	.974	5	.988
Experimental Posttest	.277	5	.200*	.928	5	.584
Control Pretest	.197	5	.200*	.943	5	.685
Control Posttest	.244	5	.200*	.871	5	.272

\* This is a lower bound of the true significance  
 a. Lilliefors Significance Correction

Table 3 presents the results of the Shapiro–Wilk normality test to determine whether the research data are normally distributed. Based on the test results, the significance values (Sig.) in several data groups were found to be less than 0.05. This indicates that some of the data are not normally distributed. Therefore, the assumption of normality is not fully met, and parametric statistical analysis cannot be applied.

Consequently, this study employed the nonparametric Mann–Whitney test to examine differences between the experimental and control groups to determine the effect of cognitive restructuring techniques on students’ self-injury behaviour.

**Table 4.** Homogeneity Test Results

Variable	Test of Homogeneity of Variance			
	Levene Statistic	df1	df2	Sig.
NGain_Percent (Based on Mean)	15.097	1	8	.005
Based on Median	1.769	1	8	.220
Based on Median (Adjusted df)	1.769	1	4.233	.251
Based on Trimmed Mean	13.278	1	8	.007

Table 4 presents the results of the Mann–Whitney test used to determine differences in self-injury behaviour levels between the experimental and control groups after the intervention was administered. Based on the analysis results, the significance value (Asymp. Sig.) was found to be less than 0.05. This result indicates a significant difference between the experimental and control groups.

Therefore, the research hypothesis that the application of cognitive restructuring techniques within Cognitive Behavioural Counseling is effective in reducing self-injury behaviour among students can be accepted. These findings indicate that cognitive restructuring techniques can help students modify negative thinking patterns into more rational ones, thereby reducing the tendency toward self-injurious behaviour.

*b) Homogeneity Test*

The homogeneity test was conducted to determine whether the variances of the populations are equal. This test is typically used as a prerequisite for parametric analyses, such as the independent-samples t-test and ANOVA.

In this study, a homogeneity test was performed to determine whether the variances of the post-test data from the experimental and control groups were equal. The criterion for determining homogeneity is that the data are considered homogeneous if the significance value is greater than 0.05 ( $\text{sig} > 0.05$ ).

*3.1.4 Hypothesis Testing*

Hypothesis testing was conducted after the data had passed the prerequisite tests. This test was performed to determine whether the proposed hypothesis could be accepted. In this study, the hypotheses were divided into two types: the null hypothesis ( $H_0$ ) and the alternative hypothesis ( $H_a$ ), which are explained as follows:

- a)  $H_a$ : Cognitive Behavioural Counseling using cognitive restructuring techniques is effective in reducing students’ self-injury behaviour.
- b)  $H_0$ : Cognitive Behavioural Counseling using cognitive restructuring techniques is not effective in reducing students’ self-injury behaviour.

The Mann–Whitney test was used to examine the difference in mean scores between the experimental and control groups, which are independent of each other. The analysis of differences in self-injury scores between the exper-

rimental and control groups was conducted using SPSS version 26.

The criteria for the Mann–Whitney test are as follows: if the significance value is less than 0.05 ( $\text{sig} < 0.05$ ), then  $H_a$  is accepted; if the significance value is greater than 0.05 ( $\text{sig} > 0.05$ ), then  $H_a$  is rejected. The results of the Mann–Whitney test are presented in the following table.

**Table 5.** Mann–Whitney Test Results

Test Statistic	Value
Mann–Whitney U	0.000
Wilcoxon W	15.000
Z	-2.619
Asymp. Sig. (2-tailed)	.009
Exact Sig. [2*(1-tailed Sig.)]	.008

Table 5 presents a comparison of the gain scores for self-injury behaviour between the experimental and control groups after the intervention was administered. The gain score represents the difference between the pre-test and post-test scores, indicating the level of behavioural change students experienced during the research process. Based on the table data, the experimental group shows a higher gain score than the control group. This indicates that the reduction in self-injury behaviour in the experimental group was greater than that in the control group. These findings further strengthen the conclusion that implementing Cognitive Behavioural Counseling with Cognitive Restructuring Techniques has a more effective impact on reducing self-injury behaviour among students.

### 3.2. Discussion

The findings of this study indicate that implementing cognitive restructuring techniques within the Cognitive Behavioural Counseling approach is effective in reducing self-injury among students at SMK Negeri 3 Makassar. The decline in this behaviour's tendency suggests that changes in individuals' thinking patterns play an important role in shaping students' emotional responses and behavioural expressions. In this context, self-injury behaviour can be understood as a form of maladaptive coping that arises from the dominance of negative thoughts, cognitive distortions, and individuals' inability to manage psychological pressure adaptively.

Theoretically, these findings are consistent with Beck's perspective, which states that individual behaviour is strongly influenced by one's cognitive structure (Beck, 2016). Irrational thoughts or cognitive distortions can generate negative emotions, which can subsequently trigger maladaptive behaviours (Tecuta et al., 2019). Through cognitive restructuring techniques, individuals are guided to identify, evaluate, and replace negative thinking patterns with more rational and adaptive ones (Chretien et al., 2017). This cognitive change process enables students to understand situations more objectively, thereby reducing

the urge to engage in self-harming behaviours as a form of emotional release (Lockwood et al., 2017).

These findings are also consistent with the principles of Cognitive Behavioural theory, which emphasise the interrelationship between thoughts, emotions, and behaviours (Ruggiero et al., 2018). When maladaptive thinking patterns are transformed into more realistic and constructive ones, individuals tend to be better able to manage emotional distress and reduce the emergence of maladaptive behaviours such as self-injury (Liu et al., 2023). In the context of school guidance and counseling services, applying cognitive restructuring techniques through group counseling also provides additional benefits, as students can share experiences, receive social support, and learn to develop more adaptive coping strategies through group dynamics (Wesner et al., 2019). Therefore, Cognitive Behavioural Counseling with cognitive restructuring techniques can serve as an effective, evidence-based intervention for school counsellors to help students overcome self-injurious behaviour and improve their psychological well-being in educational settings.

Cognitive-behavioural counseling using cognitive restructuring techniques is effective in reducing self-injurious behaviour among vocational high school students. The significant decrease in self-injury behaviour scores in the experimental group compared to the control group indicates that interventions focusing on changes in thinking patterns can influence students' emotional and behavioural responses. Self-injury behaviour among adolescents is often associated with the dominance of negative thoughts, cognitive distortions, and individuals' inability to manage psychological pressure adaptively (Wang et al., 2025; Wang et al., 2025). Through cognitive restructuring, students are guided to identify irrational thoughts, evaluate negative beliefs, and replace them with more rational and adaptive thinking patterns (Bowman & Turner, 2022). These cognitive changes gradually influence students' ability to regulate emotions and reduce their tendency to engage in self-harm as a coping mechanism for psychological stress.

The findings of this study also strengthen previous research showing that interventions based on cognitive and behavioural approaches are effective in addressing self-injury behaviour (Pedrola-Pons et al., 2024; Calvo et al., 2022). For example, the study by Aristia et al. (2024) demonstrated that individual counseling using the Rational Emotive Behaviour Therapy (REBT) approach can reduce the intensity of self-injury among students by promoting emotional regulation and modifying irrational beliefs (Outar et al., 2018; Utami & Siregar, 2026). However, this study offers a different perspective by emphasising the use of cognitive restructuring techniques within a group counseling format in the school context. This approach allows students to share experiences, gain social support, and learn to understand more adaptive thinking patterns through group dynamics.

In addition, this study complements the findings of [Baiden et al. \(2017\)](#) and [Cerutti et al. \(2018\)](#), which identified various factors contributing to self-injury behaviour among adolescents, such as family problems, childhood trauma, and lack of emotional support. These findings suggest that self-injury behaviour is not only influenced by external factors but is also closely related to how individuals cognitively interpret and make meaning of their life experiences. Therefore, interventions that focus on modifying thinking patterns represent a relevant strategy for helping individuals develop more adaptive ways of responding to various pressures they face.

This study also highlights that schools need to integrate cognitive-based counseling as one of the intervention strategies to address student behaviours, particularly self-injurious behaviour. Counsellors can utilise cognitive restructuring techniques to help students recognise the cognitive distortions they experience and develop more rational and constructive thinking patterns when dealing with various problems. In this way, counseling services do not only focus on addressing surface-level behaviours but also target cognitive factors underlying them.

The novelty of this study lies in the application of cognitive restructuring techniques within the framework of Cognitive Behavioural Counseling through group counseling in the context of vocational education. Most previous studies have predominantly used individual counseling approaches in addressing self-injury behaviour. This study demonstrates that group-based interventions focused on cognitive change can be an effective alternative strategy for reducing such behaviours among students in the school environment. Therefore, the findings of this study make empirical contributions to the development of guidance and counseling practices in schools, particularly in efforts to prevent and address self-injury among adolescents.

## 4. IMPLICATIONS AND CONTRIBUTIONS

### 4.1 Research Implications

The findings of this study have practical implications for the implementation of guidance and counseling services in schools, particularly for preventing and addressing self-injurious behaviour among students. The application of cognitive restructuring techniques within the Cognitive Behavioural Counseling approach can be an effective intervention strategy for helping students identify and modify negative thinking patterns that trigger maladaptive behaviours.

Through group counseling services, students not only gain an understanding of more rational ways of thinking but also receive social support from peers who may have similar experiences. Therefore, school counsellors can utilize this approach as part of both responsive services and developmental counseling programs to assist students in managing psychological pressures more adaptively.

### 4.1 Research Contributions

This study provides both theoretical and practical contributions to the development of guidance and counseling studies, particularly regarding interventions for self-injury behaviour among adolescents. Theoretically, this research reinforces the understanding that changes in thinking patterns through cognitive restructuring techniques within the framework of Cognitive Behavioural Counseling can contribute to reducing the tendency towards self-harm.

In practice, this study offers an alternative intervention model based on group counseling that can be implemented within the context of vocational education. Thus, this research enriches the literature on counseling approaches that guidance and counseling practitioners can use to address students' psychological problems within the school environment.

## 5. LIMITATIONS AND FUTURE RESEARCH DIRECTIONS

### 5.1 Research Limitations

This study has several limitations that should be considered when interpreting the research findings. First, the number of research participants was relatively small, which limits the generalizability of the results to the broader student population. Second, the study was conducted at only one school, namely SMK Negeri 3 Makassar, so the characteristics of the participants and the specific school environment may have influenced the findings.

Third, the measurement of self-injury behaviour in this study primarily relied on a self-report instrument, which may introduce potential response bias from participants. In addition, the relatively short duration of the intervention did not allow for the observation of long-term effects of the cognitive restructuring technique on students' behaviour.

### 5.1 Recommendation for Future Research Directions

Given these limitations, future studies are recommended to involve larger sample sizes and be conducted across multiple schools with different characteristics, so that the findings can be generalized more broadly. In addition, future research may develop designs with longer intervention durations and include follow-up measurements to examine the sustainability of intervention effects on reducing self-injury behaviour.

Future researchers may also combine the Cognitive Behavioural Counseling approach with other counseling techniques or approaches to obtain a more comprehensive understanding of effective intervention strategies for addressing self-injury behaviour among adolescents.

## 6. CONCLUSION

The findings of this study indicate a difference in the level of self-injury behaviour between the experimental group that received the intervention and the control group that did not. The results of the data analysis show that the experimental group experienced a greater decrease in self-injury behaviour scores than the control group after receiving cognitive restructuring techniques. These findings indicate that the intervention contributed to behavioural changes among students, particularly by reducing the tendency toward self-harm.

The application of cognitive restructuring techniques within the Cognitive Behavioural Counseling approach helps students recognize, evaluate, and modify negative thinking patterns, or cognitive distortions, that influence their emotional responses and behaviours. Through the group counseling process, students are allowed to reflect on their personal experiences, identify irrational thoughts, and develop more realistic and adaptive ways of thinking when facing various challenges.

Gradual changes in cognitive factors gradually influence students' emotions and behaviour, thereby reducing the urge to engage in self-injurious behaviour. This demonstrates that developing more positive, rational thinking patterns can help students manage psychological pressure in a healthier, more constructive way.

Therefore, cognitive restructuring techniques within the Cognitive Behavioural Counseling approach can be an effective intervention strategy in school guidance and counseling services to help reduce self-injurious behaviour among students. The application of this technique not only addresses behaviours that appear on the surface but also helps students understand the underlying causes of negative thinking patterns. Consequently, the findings of this study serve as a reference for school counsellors in developing counseling services that are more preventive, responsive, and grounded in systematic psychological approaches for addressing various student psychological issues within the school environment.

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## CRedit Authorship Contribution Statement

All authors discussed the results, contributed to the final manuscript, and approved the final version for publication. Nur Dhian Mustang: Conceptualization, Methodo-

logy, Validation, Formal analysis, Investigation, Data Curation, Writing - Original Draft. Maudy Mursalin Madani: Conceptualization, Writing - Review & Editing.

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The authors declare that there are no conflicts of interest in this research, whether financial, institutional, or personal, that could influence the research results or the interpretation of the data presented in this article.

## Informed Consent Statement

The authors declare that this study was conducted in accordance with study ethics, including obtaining approval from the relevant institution. This process respects the autonomy of participants, ensures the confidentiality of their data, and prioritizes their safety and well-being, in compliance with applicable study ethics guidelines. Written and verbal informed consent, or assent for minors, was obtained from all participants involved in the study.

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## Author Information

<sup>1\*</sup> **Nur Dhian Mustang**, [✉ nudhiankmustang@gmail.com](mailto:nudhiankmustang@gmail.com)

Department of Guidance and Counseling, Universitas Negeri Makassar, Indonesia

Address: Jl. A. P. Pettarani, Gunungsari, Kecamatan Rappocini, Kota Makassar, Sulawesi Selatan 90222, Indonesia

<sup>2</sup> **Maudy Mursalin Madani**, [✉ maudymadanimursalin@gmail.com](mailto:maudymadanimursalin@gmail.com)

Department of Guidance and Counseling, Universitas Negeri Makassar, Indonesia

Address: Jl. A. P. Pettarani, Gunungsari, Kecamatan Rappocini, Kota Makassar, Sulawesi Selatan 90222, Indonesia