

# The Role of Self-Awareness, Self-Control, and Spirituality in the Prevention of Social Harms Among Youth

Seyed Naser. Moshir Estekharez<sup>1\*</sup>

1. Ph.D. Candidate in Clinical Psychology, Department of Clinical Psychology, Bi.C., Islamic Azad University, Birjand, Iran

\* Corresponding author email address: nasermoshir@gmail.com

## Article Info

### Article type:

Original Research

### How to cite this article:

Moshir Estekharez, S. N. (2026). The Role of Self-Awareness, Self-Control, and Spirituality in the Prevention of Social Harms Among Youth . *Journal of Adolescent and Youth Psychological Studies*, 7(11), 1-14.

<http://dx.doi.org/10.61838/kman.jayps.5749>



© 2026 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

## ABSTRACT

**Objective:** This study aimed to examine the role of self-awareness, self-control, and spirituality in the prevention of social harms among youth.

**Methods and Materials:** A descriptive-correlational design with a predictive modeling approach was used. The sample consisted of 350 young people aged 18 to 29 years selected through multistage cluster sampling. Data were collected using the Self-Reflection and Insight Scale, Brief Self-Control Scale, Spiritual Well-Being Scale, Iranian Adolescents Risk-Taking Scale, and a demographic information form. Data were analyzed using Pearson correlation coefficients, hierarchical multiple regression, and structural equation modeling.

**Findings:** Self-awareness, self-control, and spirituality were negatively associated with vulnerability to social harms ( $r = -.43, -.58, \text{ and } -.49$ , respectively;  $p < .001$ ). The hierarchical regression model was significant,  $F(6, 343) = 42.78, p < .001$ , and explained 42.8% of the variance. Self-control was the strongest negative predictor ( $\beta = -.37, p < .001$ ), followed by spirituality ( $\beta = -.26, p < .001$ ) and self-awareness ( $\beta = -.18, p = .002$ ). The structural model showed acceptable fit,  $\chi^2/df = 2.22, CFI = .94, TLI = .92, RMSEA = .059, \text{ and } SRMR = .046$ .

**Conclusion:** Self-awareness, self-control, and spirituality appear to be important protective factors against vulnerability to social harms among youth. Prevention programs should strengthen reflective capacity, impulse regulation, meaning-making, and value-based decision-making.

**Keywords:** self-awareness; self-control; spirituality; social harms; youth; risk-taking behavior; prevention

## 1. Introduction

Youth represents a decisive developmental stage in which individuals move from dependence toward autonomy, from externally guided behavior toward self-directed decision-making, and from inherited social roles toward the construction of personal, social, moral, and spiritual identity. During this period, young people encounter expanding opportunities for education, employment, relationships, social participation, and identity exploration; however, they are also exposed to multiple forms of vulnerability that may threaten their psychological adjustment and social functioning. Social harms among youth can include substance use, violence, delinquency, unsafe relationships, high-risk peer involvement, cyber-deviance, self-harm, social alienation, academic disengagement, and other behaviors that disrupt individual development and community well-being. The study of such harms has become increasingly important because youth risk behaviors do not emerge only from lack of information or weak social control; rather, they are often rooted in complex interactions among neurodevelopmental immaturity, emotional reactivity, impulsivity, peer pressure, social inequality, family dynamics, online environments, and weak internal regulatory capacities (Cioban et al., 2021; Roberson et al., 2024; Solimannejad et al., 2021).

Contemporary developmental and clinical research indicates that adolescence and youth are periods of heightened vulnerability to impulsive and emotionally driven decisions. Neurodevelopmental perspectives show that the systems involved in reward sensitivity, emotional arousal, and risk perception do not mature at the same pace as the cognitive systems required for long-term planning and behavioral inhibition. As a result, young people may show increased attraction to novelty, immediate gratification, peer approval, and high-intensity experiences, particularly in emotionally charged situations. Recent evidence on neurodevelopmental trajectories of risk perception and impulsive decision-making suggests that adolescent risk behavior should be understood as a developmental phenomenon shaped by changing cognitive control and affective evaluation systems (Zhang et al., 2025). Similar evidence from adolescent bipolar disorder highlights the role of impulsivity, emotional reactivity, and decision-making deficits as neurocognitive risk mechanisms that can intensify maladaptive behaviors (Ahmed et al., 2026). Moreover, research on non-suicidal self-injury comorbidity patterns demonstrates that impulsivity, emotional dysregulation, and

negative core self-evaluations can predict maladaptive behavioral profiles among adolescents (Wang et al., 2026). These findings suggest that the prevention of social harms requires attention to internal psychological capacities that enable young people to understand themselves, regulate impulses, and make value-based decisions.

In addition to neurocognitive vulnerability, emotional dysregulation has been identified as a major mechanism in youth risk behavior. When young people cannot identify, tolerate, or regulate intense emotions, they may seek rapid relief through harmful behaviors, including aggression, substance use, risky relationships, digital deviance, or self-damaging actions. The role of behavioral activation and inhibition systems in impulsive behaviors among female vocational adolescents with borderline personality disorder shows that difficulty in emotion regulation can mediate the relationship between motivational sensitivity and impulsive action (Sam et al., 2025). This evidence is important because many social harms are not purely deliberate violations of rules; rather, they may function as maladaptive coping strategies in response to shame, loneliness, anger, anxiety, boredom, rejection, or perceived failure. Therefore, prevention models must move beyond warning-based approaches and focus on strengthening the internal resources that allow youth to recognize emotional states, pause before acting, and select behaviors that are compatible with long-term well-being.

Self-awareness is one of the most fundamental psychological capacities involved in such preventive functioning. In the context of youth development, self-awareness refers to the ability to observe, understand, and evaluate one's thoughts, emotions, motives, values, strengths, limitations, and behavioral patterns. It enables individuals to ask why they are attracted to a particular behavior, what emotional need is being expressed through a risky impulse, and whether a possible action is consistent with their personal goals and social responsibilities. Without self-awareness, young people may experience emotional states and social pressures as automatic triggers for behavior. With stronger self-awareness, however, they can create a reflective space between emotion and action. Research on positive youth development and self-awareness indicates that self-reflection, self-esteem, and emotional self-regulation develop in parallel and contribute to adaptive developmental outcomes (van der Aar et al., 2022). In educational contexts, self-reflective practices have also gained renewed attention, and classroom-based work using large language models to support self-reflection suggests

that reflective prompts may strengthen students' capacity to examine their own learning, reasoning, and behavioral choices at scale (Kumar et al., 2024). These findings support the view that self-awareness is not merely an abstract psychological construct, but a teachable and developmentally meaningful resource for youth.

Self-awareness is especially relevant to social harm prevention because many harmful behaviors are preceded by misrecognition of internal experience. For example, aggression may be preceded by shame or perceived disrespect, substance use by distress or social insecurity, cyber-deviance by boredom or anonymity-driven disinhibition, and risky relationships by unmet needs for belonging or validation. When young people lack the capacity to identify these internal states, they may respond behaviorally before they can reflectively evaluate consequences. By contrast, self-aware youth are more likely to recognize triggers, monitor their own intentions, interpret the social meaning of their behavior, and choose alternatives. Research on self-regulatory processes among adolescents exposed to chronic stress emphasizes that self-regulation develops through dynamic interactions among emotional, cognitive, and contextual processes (Halliburton et al., 2024). Accordingly, self-awareness may operate as an entry point into broader self-regulation by helping young people identify what must be regulated and why regulation is necessary.

Self-control is another central protective factor in the prevention of social harms. It refers to the ability to regulate impulses, delay gratification, resist temptations, inhibit harmful responses, and act according to long-term goals rather than immediate rewards. In the context of youth risk behavior, self-control can determine whether a young person is able to resist peer pressure, avoid aggressive retaliation, refrain from substance use, manage digital temptations, and remain committed to educational or social goals. Empirical evidence supports this protective role. Research among Chinese late adolescents found that self-control was linked to lower negative risk-taking behavior, indicating that young people with stronger self-control are less likely to engage in behaviors that provide short-term reward but produce long-term harm (Li et al., 2022). Longitudinal work on adolescent delinquency also shows that self-control can mediate associations between early risk and later delinquent behavior, while relational factors such as father-child closeness may moderate developmental pathways into delinquency (Roberson et al., 2024). Thus, self-control should be viewed not only as an individual trait, but also as

a developmental mechanism shaped by family, social, and environmental conditions.

The importance of self-control is amplified in modern youth contexts where temptations are frequent, immediate, and often digitally mediated. Online platforms, peer networks, risky social norms, and consumer environments constantly expose young people to opportunities for impulsive action. Cyber-deviance, for instance, can occur with speed, anonymity, and reduced perception of consequences, making impulse regulation particularly important. A systematic review of adolescent deviance and cyber-deviance identified multiple theoretical frameworks for understanding youth deviance, including self-control, social learning, strain, and social control perspectives (Cioban et al., 2021). These frameworks converge on the idea that harmful behavior emerges when youth are exposed to risk-promoting environments without adequate internal and external controls. In Iran, the development of culturally relevant tools such as the Iranian Adolescents Risk-Taking Scale further indicates the need to assess risk-taking in ways that reflect local behavioral patterns and sociocultural realities (Zadeh Mohammadi et al., 2011). Therefore, self-control is a key psychological capacity through which young people may reduce their vulnerability to social harms across both offline and online contexts.

Spirituality represents a third major protective resource. Unlike narrow definitions of formal religiosity, spirituality can include meaning in life, purposefulness, inner peace, moral orientation, hope, connection to self, connection to others, connection to nature, and connection to the transcendent. For youth, spirituality may provide a framework for interpreting life challenges, regulating desires, evaluating choices, and maintaining hope during adversity. Cross-national research on spirituality among more than 75,000 adolescents in 12 countries showed that domains of spirituality are important to adolescent health and that connection to self is a particularly central component of spiritual health (Michaelson et al., 2023). This finding is highly relevant because connection to self overlaps with reflective functioning, identity formation, and moral self-understanding. Spirituality may therefore strengthen social harm prevention by helping youth connect their behavior to deeper values, broader responsibility, and a more coherent sense of life direction.

Empirical evidence further supports the protective role of spirituality in relation to risk behavior and mental health. Research on adolescents in Saskatchewan found that stronger spiritual health was associated with lower

engagement in several risk-taking behaviors, including smoking, alcohol use, cannabis use, and sexual activity (Hatala et al., 2020). From the perspective of Iranian adolescents, spiritual health has been associated with mental health promotion, self-control, and purposefulness in life (Razeghi et al., 2023). This Iranian evidence is particularly important because it suggests that spirituality may not only provide emotional comfort, but may also strengthen behavioral regulation and goal-directed living. In clinical and developmental literature, religion and spirituality are increasingly recognized as relevant dimensions of pediatric mental health, although they should be addressed with sensitivity to individual differences, cultural context, and the diversity of young people's beliefs and experiences (Elzamzamy et al., 2024). Thus, spirituality can be considered a culturally meaningful and psychologically relevant protective factor in youth development.

The integration of self-awareness, self-control, and spirituality offers a comprehensive framework for understanding prevention of social harms. Self-awareness helps youth recognize internal triggers and understand the meaning of their impulses. Self-control provides the behavioral capacity to inhibit harmful responses and pursue long-term goals. Spirituality offers meaning, hope, moral direction, and value-based criteria for decision-making. These three constructs are conceptually distinct, yet they may reinforce one another. Self-awareness without self-control may lead to insight without behavioral change. Self-control without spirituality may produce inhibition without purpose or moral direction. Spirituality without self-awareness and self-control may remain abstract and fail to guide concrete behavior. Therefore, the simultaneous examination of these variables can provide a more complete understanding of how internal protective resources reduce vulnerability to social harms.

This integrated perspective is consistent with prevention science and positive youth development. School-based social and emotional learning interventions have shown that strengthening social and emotional competencies can improve youth attitudes, behavior, and academic outcomes (Durlak et al., 2011). Follow-up evidence further indicates that social and emotional learning programs can promote positive youth development and produce sustained benefits across developmental outcomes (Taylor et al., 2017). These findings imply that protective capacities such as self-awareness and self-control are not fixed attributes, but can be strengthened through structured educational and counseling interventions. When combined with culturally

sensitive attention to spirituality and meaning-making, such interventions may be particularly useful for reducing youth vulnerability to social harms.

Despite the growing body of research on youth risk behavior, important gaps remain. First, many studies emphasize risk factors such as impulsivity, emotional dysregulation, family conflict, peer deviance, socioeconomic deprivation, and digital exposure, while fewer studies examine protective factors that can be cultivated through prevention programs. Second, psychological and spiritual variables are often studied separately, even though young people's behavior is shaped by the interaction of reflective, regulatory, and meaning-oriented capacities. Third, culturally grounded research is needed because social harms and protective resources may take different forms across societies. In Iranian youth, social class, marginalization, urban disadvantage, and unequal access to supportive resources may increase vulnerability to social harms, making it essential to identify internal and community-based protective factors that can be strengthened through education, counseling, and social policy (Solimannejad et al., 2021). Therefore, examining self-awareness, self-control, and spirituality together can contribute to a more culturally responsive and prevention-oriented model of youth development.

Given the theoretical and empirical evidence reviewed above, the present study was conducted to examine the role of self-awareness, self-control, and spirituality in the prevention of social harms among youth.

## 2. Methods and Materials

### 2.1. Study Design and Participants

The present study used a descriptive-correlational design with a predictive modeling approach. The study examined the role of self-awareness, self-control, and spirituality in the prevention of social harms among youth. Self-awareness, self-control, and spirituality were considered predictor variables, and vulnerability to social harms was considered the criterion variable. The study was conducted using a cross-sectional survey method because the aim was to investigate the pattern of relationships among psychological and spiritual protective factors and youth vulnerability to social harms at a specific point in time.

The statistical population consisted of young people aged 18 to 29 years living in Birjand, Iran, during the 2025–2026 year. The participants were selected using multistage cluster sampling. First, several educational, cultural, and

community-based centers were selected from different urban districts. Then, eligible participants were invited to participate in the study after receiving information about the research purpose, confidentiality of responses, and voluntary nature of participation.

The final sample included 350 young people. This sample size was considered appropriate for correlation, multiple regression, and structural equation modeling because it exceeded the minimum recommended number for testing models with several observed variables and provided sufficient statistical power for detecting small to medium effect sizes. Participants completed the questionnaires individually and anonymously.

The inclusion criteria were age between 18 and 29 years, willingness to participate in the study, ability to read and understand the questionnaire items, and residence in Birjand for at least one year. The exclusion criteria included incomplete questionnaire responses, careless responding patterns, unwillingness to continue participation, and reporting a severe psychological or cognitive condition that could interfere with accurate completion of the questionnaires.

Participants who agreed to take part provided informed consent and then completed the questionnaires in a quiet setting. The questionnaires were administered in the following order: demographic information form, Self-Reflection and Insight Scale, Brief Self-Control Scale, Spiritual Well-Being Scale, and Iranian Adolescents Risk-Taking Scale. To reduce response bias, participants were assured that their responses would remain confidential and would be analyzed only in aggregate form. No identifying information was recorded on the questionnaires.

## 2.2. Measures

A demographic information form was used to collect participants' age, gender, marital status, educational level, employment status, socioeconomic status, family structure, and history of participation in counseling or educational programs. These variables were used to describe the sample and, where necessary, to control for possible demographic differences in the main analyses.

Self-awareness was measured using the Self-Reflection and Insight Scale (SRIS) developed by Grant, Franklin, and Langford. The SRIS assesses private self-consciousness through two dimensions: self-reflection and insight. Self-reflection refers to the tendency to examine and evaluate one's thoughts, feelings, and behavior, whereas insight

refers to clarity of understanding regarding one's internal states and behavioral patterns. The scale has demonstrated acceptable psychometric properties and has been widely used in studies of self-regulation, reflective functioning, and purposeful behavior change. Items are rated on a Likert-type scale, and higher scores indicate greater self-awareness.

Self-control was assessed using the Brief Self-Control Scale (BSCS) developed by Tangney, Baumeister, and Boone. The BSCS is a widely used self-report instrument for measuring individual differences in self-control, including the ability to regulate impulses, resist temptation, delay gratification, and act in accordance with long-term goals. The original validation study reported good internal consistency and test-retest reliability, and higher self-control scores were associated with better adjustment, less psychopathology, better academic performance, and more adaptive interpersonal functioning. Items are scored on a Likert-type scale, with higher scores indicating stronger self-control.

Spirituality was measured using the Spiritual Well-Being Scale (SWBS), originally developed by Paloutzian and Ellison. The SWBS is a 20-item instrument designed to assess perceived spiritual well-being. It includes two dimensions: religious well-being and existential well-being. Religious well-being reflects one's perceived relationship with God or a transcendent source, whereas existential well-being reflects meaning, purpose, life satisfaction, and inner coherence. The scale has demonstrated good internal consistency, test-retest reliability, and evidence of construct validity in different populations. In the present study, the total score was used as an index of spirituality, with higher scores indicating stronger spiritual well-being.

Vulnerability to social harms was assessed using the Iranian Adolescents Risk-Taking Scale (IARS), developed by Zadeh Mohammadi, Ahmadabadi, and Heidari. The IARS is a culturally relevant self-report measure developed to assess risk-taking tendencies and social harm-related behaviors among Iranian adolescents and youth. The scale includes dimensions such as risky driving, substance use, alcohol use, smoking, violence, risky sexual behavior, and risky relationships or peer-related behaviors. The original study reported acceptable validity and reliability for the total scale and its subscales. In the present study, the total score was used as an index of vulnerability to social harms, with higher scores indicating greater vulnerability to socially harmful and high-risk behaviors.

For instruments with available validated Persian versions, the validated Persian forms were used. For any instrument

requiring linguistic or cultural adaptation, the translation and adaptation process followed standard guidelines for psychological scale adaptation. This process included forward translation, expert review, back-translation, comparison with the original version, and pilot testing with a small group of youth who were not included in the final sample. The pilot stage was conducted to ensure item clarity, cultural appropriateness, and comprehensibility.

### 2.3. Data Analysis

Data were analyzed using IBM SPSS Statistics version 29 and AMOS version 24. Before the main analyses, data were screened for missing values, outliers, normality, and careless responding. Descriptive statistics, including mean, standard deviation, frequency, and percentage, were used to describe demographic characteristics and study variables. Multiple regression analysis was conducted to determine the predictive role of self-awareness, self-control, and spirituality in vulnerability to social harms. In the regression model, vulnerability to social harms was entered as the criterion variable, and self-awareness, self-control, and spirituality were entered as predictor variables. Demographic variables such as age, gender, and educational level were entered as control variables when they showed significant associations with the criterion variable. Structural equation modeling was also used to test the overall theoretical model. Model fit was evaluated using several fit indices, including chi-square divided by degrees of freedom, comparative fit index, Tucker–Lewis index, root mean

square error of approximation, and standardized root mean square residual. Values of CFI and TLI greater than .90, RMSEA lower than .08, and SRMR lower than .08 were considered indicators of acceptable model fit. The significance level was set at  $p < .05$ .

### 3. Findings and Results

The final sample consisted of 350 young people aged 18 to 29 years. The mean age of the participants was 23.41 years ( $SD = 3.18$ ). Of the participants, 184 individuals (52.6%) were female and 166 individuals (47.4%) were male. Regarding marital status, 279 participants (79.7%) were single and 71 participants (20.3%) were married. In terms of educational level, 64 participants (18.3%) had a high school diploma or associate degree, 213 participants (60.9%) had a bachelor’s degree or were undergraduate students, and 73 participants (20.8%) had a master’s degree or higher. With regard to employment status, 142 participants (40.6%) were students, 109 participants (31.1%) were employed, 58 participants (16.6%) were both students and employed, and 41 participants (11.7%) were unemployed. The distribution of socioeconomic status showed that 78 participants (22.3%) reported low socioeconomic status, 218 participants (62.3%) reported middle socioeconomic status, and 54 participants (15.4%) reported high socioeconomic status. Overall, the demographic findings indicated that the sample included young people from different educational, occupational, and socioeconomic backgrounds.

**Table 1**

*Demographic Characteristics of Participants*

Variable	Category	n	%
Gender	Female	184	52.6
	Male	166	47.4
Marital status	Single	279	79.7
	Married	71	20.3
Educational level	Diploma / Associate degree	64	18.3
	Bachelor’s degree / Undergraduate student	213	60.9
	Master’s degree or higher	73	20.8
Employment status	Student	142	40.6
	Employed	109	31.1
	Student and employed	58	16.6
	Unemployed	41	11.7
Socioeconomic status	Low	78	22.3
	Middle	218	62.3
	High	54	15.4

Before conducting the main analyses, the dataset was screened for missing values, outliers, and statistical assumptions. No missing data were observed in the final dataset. Standardized scores were inspected to identify univariate outliers, and no score exceeded the acceptable range of  $\pm 3.29$ . The normality of the main variables was examined using skewness and kurtosis indices. The values of skewness ranged from -0.42 to 0.51, and the values of kurtosis ranged from -0.67 to 0.58, indicating that the variables were normally distributed. The assumptions of linearity, homoscedasticity, and absence of multicollinearity were also examined. Scatterplots supported the linear relationships among the study variables. Tolerance values ranged from 0.61 to 0.74, and variance inflation factor values

ranged from 1.35 to 1.64, indicating that multicollinearity was not a concern. Therefore, the data were suitable for Pearson correlation, multiple regression, and structural equation modeling.

Descriptive statistics and reliability coefficients for the main study variables are presented in Table 2. The mean score of vulnerability to social harms was 76.32 (SD = 18.45). The mean scores of self-awareness, self-control, and spirituality were 63.84 (SD = 10.21), 45.27 (SD = 8.36), and 82.19 (SD = 13.74), respectively. The internal consistency coefficients of all measures were acceptable. Cronbach's alpha coefficients ranged from 0.82 to 0.91, and McDonald's omega coefficients ranged from 0.83 to 0.92.

**Table 2**

*Descriptive Statistics and Reliability Coefficients of Study Variables*

Variable	M	SD	Min	Max	Skewness	Kurtosis	$\alpha$	$\omega$
Self-awareness	63.84	10.21	34	88	-0.31	-0.42	0.84	0.85
Self-control	45.27	8.36	21	65	-0.28	-0.37	0.82	0.83
Spirituality	82.19	13.74	43	114	-0.42	-0.58	0.89	0.90
Vulnerability to social harms	76.32	18.45	32	129	0.51	0.58	0.91	0.92

Pearson correlation coefficients were calculated to examine the relationships among self-awareness, self-control, spirituality, and vulnerability to social harms. As shown in Table 3, self-awareness was positively and significantly correlated with self-control and spirituality. Self-control was also positively and significantly correlated with spirituality. Vulnerability to social harms was negatively and significantly correlated with self-awareness,

self-control, and spirituality. The strongest negative correlation was observed between self-control and vulnerability to social harms ( $r = -0.58, p < 0.001$ ), followed by spirituality ( $r = -0.49, p < 0.001$ ) and self-awareness ( $r = -0.43, p < 0.001$ ). These findings indicate that young people with higher levels of self-awareness, self-control, and spirituality reported lower vulnerability to social harms.

**Table 3**

*Correlation Matrix Among Study Variables*

Variable	1	2	3	4
1. Self-awareness	—			
2. Self-control	0.46***	—		
3. Spirituality	0.39***	0.51***	—	
4. Vulnerability to social harms	-0.43***	-0.58***	-0.49***	—

Note. \*\*\* $p < 0.001$ .

Multiple regression analysis was conducted to determine the predictive role of self-awareness, self-control, and spirituality in vulnerability to social harms. Before conducting the regression analysis, demographic variables were examined. Age, gender, and educational level were entered as control variables in the first step because of their

theoretical relevance to youth risk behavior. Self-awareness, self-control, and spirituality were entered in the second step.

As shown in Table 4, the first model including demographic variables was statistically significant,  $F(3, 346) = 5.42, p = 0.001$ , and explained 4.5% of the variance in vulnerability to social harms. In the second model, self-awareness, self-control, and spirituality were added to the

regression equation. The final model was statistically significant,  $F(6, 343) = 42.78, p < 0.001$ , and explained 42.8% of the variance in vulnerability to social harms. The addition of the psychological and spiritual variables increased the explained variance by 38.3%, indicating a substantial improvement in model prediction. Among the predictor variables, self-control was the strongest negative

predictor of vulnerability to social harms ( $\beta = -0.37, p < 0.001$ ). Spirituality was also a significant negative predictor ( $\beta = -0.26, p < 0.001$ ), followed by self-awareness ( $\beta = -0.18, p = 0.002$ ). These findings indicate that higher self-awareness, self-control, and spirituality significantly predicted lower vulnerability to social harms among youth.

**Table 4**

*Hierarchical Multiple Regression Predicting Vulnerability to Social Harms*

Predictor	B	SE B	$\beta$	t	p
<b>Step 1</b>					
Age	-0.42	0.28	-0.07	-1.50	0.134
Gender	3.84	1.87	0.10	2.05	0.041
Educational level	-2.76	1.21	-0.11	-2.28	0.023
<b>Step 2</b>					
Age	-0.19	0.22	-0.03	-0.86	0.391
Gender	2.11	1.46	0.05	1.45	0.148
Educational level	-1.64	0.96	-0.07	-1.71	0.088
Self-awareness	-0.32	0.10	-0.18	-3.13	0.002
Self-control	-0.82	0.12	-0.37	-6.83	< 0.001
Spirituality	-0.35	0.07	-0.26	-5.09	< 0.001

Note. Gender was coded as 0 = female and 1 = male. Model 1:  $R^2 = 0.045$ , adjusted  $R^2 = 0.037$ . Model 2:  $R^2 = 0.428$ , adjusted  $R^2 = 0.418$ .  $\Delta R^2 = 0.383, p < 0.001$ .

Structural equation modeling was used to test the overall theoretical model in which self-awareness, self-control, and spirituality predicted vulnerability to social harms. The results indicated that the proposed model had an acceptable fit to the data. The chi-square divided by degrees of freedom was lower than 3, and the values of CFI and TLI were higher than 0.90. The RMSEA and SRMR values were also within acceptable ranges. The model fit indices were as follows:  $\chi^2 = 184.36, df = 83, \chi^2/df = 2.22, CFI = 0.94, TLI = 0.92, RMSEA = 0.059$ , and  $SRMR = 0.046$ . These indices supported the adequacy of the proposed model.

The standardized path coefficients showed that self-awareness had a significant negative direct effect on vulnerability to social harms ( $\beta = -0.17, p = 0.004$ ). Self-control had the strongest negative direct effect on vulnerability to social harms ( $\beta = -0.41, p < 0.001$ ). Spirituality also had a significant negative direct effect on vulnerability to social harms ( $\beta = -0.24, p < 0.001$ ). Together, self-awareness, self-control, and spirituality explained 44% of the variance in vulnerability to social harms.

**Table 5**

*Model Fit Indices for the Structural Equation Model*

Fit Index	Obtained Value	Recommended Criterion	Interpretation
$\chi^2$	184.36	—	—
df	83	—	—
$\chi^2/df$	2.22	< 3.00	Acceptable
CFI	0.94	> 0.90	Acceptable
TLI	0.92	> 0.90	Acceptable
RMSEA	0.059	< 0.08	Acceptable
SRMR	0.046	< 0.08	Acceptable

**Table 6**

*Standardized Direct Effects in the Structural Equation Model*

Path	$\beta$	SE	CR	p
Self-awareness → Vulnerability to social harms	-0.17	0.06	-2.87	0.004
Self-control → Vulnerability to social harms	-0.41	0.05	-7.42	< 0.001
Spirituality → Vulnerability to social harms	-0.24	0.05	-4.88	< 0.001

Independent-samples t tests and one-way analysis of variance were conducted to examine whether vulnerability to social harms differed across selected demographic groups. The results showed that male participants reported significantly higher vulnerability to social harms than female participants,  $t(348) = 2.34, p = 0.020$ . Participants with lower

educational levels reported higher vulnerability to social harms than those with higher educational levels,  $F(2, 347) = 4.91, p = 0.008$ . However, vulnerability to social harms did not differ significantly according to marital status,  $F(1, 348) = 1.72, p = 0.191$ .

**Table 7**

*Group Differences in Vulnerability to Social Harms*

Variable	Group	M	SD	Test Statistic	p
Gender	Female	73.91	17.62	$t = 2.34$	0.020
	Male	79.00	18.98		
Educational level	Diploma / Associate degree	82.44	19.36	$F = 4.91$	0.008
	Bachelor's degree / Undergraduate student	75.83	17.91		
	Master's degree or higher	71.92	17.48		
Marital status	Single	77.01	18.62	$t = 1.31$	0.191
	Married	73.61	17.64		

Overall, the findings showed that self-awareness, self-control, and spirituality were significantly and negatively associated with vulnerability to social harms among youth. Self-control emerged as the strongest protective factor, followed by spirituality and self-awareness. The regression model showed that these three variables explained a substantial proportion of the variance in vulnerability to social harms, even after controlling for demographic variables. The structural equation model also demonstrated acceptable fit and confirmed the direct protective effects of self-awareness, self-control, and spirituality. These findings suggest that strengthening young people's capacity for self-reflection, impulse regulation, and meaning-oriented living may play an important role in reducing their vulnerability to social harms.

**4. Discussion**

The present study examined the role of self-awareness, self-control, and spirituality in the prevention of social harms among youth. The findings showed that all three variables were significantly and negatively associated with vulnerability to social harms. Specifically, self-awareness, self-control, and spirituality were each related to lower

levels of risk-taking and socially harmful behaviors among young people. The correlation results indicated that self-control had the strongest negative relationship with vulnerability to social harms, followed by spirituality and self-awareness. The hierarchical regression model also confirmed that these three protective factors explained a substantial proportion of the variance in vulnerability to social harms after controlling for demographic variables. In the final model, self-control was the strongest negative predictor, followed by spirituality and self-awareness. The structural equation model further supported the theoretical model, showing acceptable fit indices and confirming the direct negative effects of self-awareness, self-control, and spirituality on vulnerability to social harms. These findings suggest that youth who are more reflective, better able to regulate impulses, and more connected to meaning, values, and spiritual orientation are less vulnerable to behaviors that may threaten their individual and social well-being.

The significant negative relationship between self-awareness and vulnerability to social harms indicates that young people who have greater capacity for self-reflection and insight are less likely to engage in socially harmful or high-risk behaviors. This finding can be explained by the

role of self-awareness in helping individuals recognize their emotions, motives, needs, and behavioral tendencies before acting. Many social harms among youth, such as aggression, substance use, risky relationships, delinquency, and cyber-deviance, are not merely the result of lack of knowledge; rather, they often emerge when young people are unable to identify the psychological states that push them toward maladaptive choices. When youth can recognize feelings such as anger, shame, anxiety, loneliness, boredom, or the need for peer acceptance, they may be more capable of evaluating the consequences of their actions and selecting more adaptive responses. This result is consistent with developmental evidence showing that self-awareness develops in parallel with positive youth development, emotional self-regulation, self-esteem, and self-reflection (van der Aar et al., 2022). It is also aligned with recent educational evidence suggesting that structured self-reflection can be supported in classroom contexts and may strengthen young people's ability to examine their thoughts, decisions, and learning processes (Kumar et al., 2024). Therefore, self-awareness appears to function as a reflective protective mechanism that allows youth to pause, understand themselves, and avoid automatic engagement in harmful behavior.

The protective role of self-awareness may also be interpreted in relation to contemporary models of adolescent risk-taking and neurodevelopment. During adolescence and youth, decision-making is often influenced by heightened reward sensitivity, emotional intensity, and immature risk evaluation. Research on neurodevelopmental trajectories of risk perception and impulsive decision-making shows that adolescents may be especially vulnerable to risky decisions when emotional and motivational systems become activated before full maturation of cognitive control systems (Zhang et al., 2025). In this context, self-awareness may reduce risk by increasing metacognitive monitoring and helping youth become more aware of the internal and external conditions that influence their choices. Similarly, evidence on neurocognitive risk mechanisms in adolescent bipolar disorder emphasizes that impulsivity, emotional reactivity, and decision-making deficits may increase behavioral vulnerability (Ahmed et al., 2026). Although the present study was not limited to clinical youth, these findings help explain why self-awareness is important: young people who can better observe their own emotional and cognitive states may be less likely to act under the pressure of immediate impulses or affective reactivity.

The strongest finding of the present study was the predictive role of self-control. Self-control had the largest negative correlation with vulnerability to social harms and emerged as the strongest predictor in both the regression and structural models. This means that young people with higher self-control were substantially less vulnerable to social harms. This result is theoretically expected because many socially harmful behaviors involve the pursuit of immediate reward despite long-term negative consequences. Substance use, violence, unsafe driving, risky sexual behavior, cyber-deviance, and delinquent peer involvement often require the failure to inhibit immediate impulses, resist peer pressure, or delay gratification. The present finding is consistent with research showing that self-control is negatively associated with negative risk-taking behavior among late adolescents (Li et al., 2022). It is also supported by longitudinal evidence indicating that self-control mediates the relationship between early risk and adolescent delinquency, suggesting that low self-control can serve as a pathway through which early vulnerabilities become later behavioral problems (Roberson et al., 2024). Accordingly, self-control may be one of the most central psychological capacities in youth harm prevention because it directly regulates the behavioral expression of risky impulses.

The importance of self-control is also consistent with research on adolescent deviance and cyber-deviance. A systematic review of adolescent deviance and cyber-deviance showed that self-control theory is one of the major frameworks used to explain both offline and online deviant behaviors (Cioban et al., 2021). This is particularly relevant in contemporary youth contexts because social harms increasingly occur in both physical and digital spaces. Online environments may intensify impulsive behavior by providing anonymity, rapid feedback, peer visibility, and immediate access to risky interactions. Therefore, young people with lower self-control may be more vulnerable not only to traditional forms of social harm but also to technology-mediated forms of deviance. The use of culturally relevant measures such as the Iranian Adolescents Risk-Taking Scale also highlights the need to assess risk-taking in relation to local patterns of youth behavior and social norms (Zadeh Mohammadi et al., 2011). The present findings extend this literature by showing that self-control remains a strong protective factor in an Iranian youth sample and that it predicts vulnerability to a broader construct of social harms.

The significant negative effect of spirituality on vulnerability to social harms indicates that spirituality may

serve as an important meaning-based and value-based protective factor among youth. Spirituality can provide young people with purpose, hope, moral orientation, inner coherence, connection with others, and a sense of responsibility beyond immediate desires. The finding is consistent with research showing that spiritual health is associated with lower risk-taking behaviors among adolescents. For example, higher spiritual health has been linked to lower likelihood of cigarette smoking, alcohol use, cannabis use, and sexual intercourse among adolescents (Hatala et al., 2020). The finding is also aligned with cross-national evidence indicating that spirituality is an important domain of adolescent health and that connection to self is a central component of spiritual well-being across countries (Michaelson et al., 2023). These studies suggest that spirituality may reduce vulnerability to social harms not simply through prohibition or fear of consequences, but through strengthening meaning, connectedness, moral identity, and value-guided decision-making.

The protective role of spirituality is particularly meaningful in the Iranian cultural context. Research from Iranian adolescents' perspectives has shown that spiritual health may have consequences for mental health promotion, self-control, and purposefulness in life (Razeghi et al., 2023). This evidence directly supports the present finding because it suggests that spirituality may strengthen both emotional well-being and behavioral regulation. In societies where spiritual and moral values are closely linked with family life, social identity, and cultural expectations, spirituality may help youth evaluate their choices in relation to broader responsibilities and life goals. At the same time, contemporary research on religion, spirituality, and pediatric mental health emphasizes that spirituality should be understood as a complex and multidimensional construct that may influence youth adjustment, coping, identity, and mental health in different ways (Elzamzamy et al., 2024). Therefore, spirituality in the present study can be interpreted as a developmental resource that supports social harm prevention by strengthening purpose, ethical reflection, and resilience in the face of risk.

The simultaneous contribution of self-awareness, self-control, and spirituality is one of the most important findings of the present study. These variables did not operate as isolated protective factors; rather, they appear to represent complementary dimensions of internal protection. Self-awareness helps youth understand what they feel and why they may be drawn toward risky behavior. Self-control enables them to inhibit harmful impulses and resist

immediate temptations. Spirituality provides a broader framework of meaning, values, hope, and moral responsibility. Together, these capacities may form an integrated protective system against social harms. This interpretation is consistent with research on self-regulatory processes over time, which shows that adolescent adjustment is shaped by interactions among regulation, stress, cognition, and context (Halliburton et al., 2024). It is also consistent with evidence that impulsivity, emotional dysregulation, and negative core self-evaluations can predict maladaptive behavioral patterns such as non-suicidal self-injury among adolescents (Wang et al., 2026). The present findings suggest that reducing social harms requires not only controlling external risk factors but also strengthening the internal capacities that allow youth to understand, regulate, and direct their behavior.

The results may also be explained through the broader literature on emotional dysregulation and impulsive behavior. Research on behavioral activation and inhibition systems among female vocational adolescents with borderline personality disorder showed that difficulty in emotion regulation can mediate the relationship between motivational systems and impulsive behaviors (Sam et al., 2025). This finding supports the present results because it shows that impulsive and socially harmful behaviors may emerge when emotional arousal is not effectively regulated. Self-awareness may help youth identify emotional arousal, self-control may help them inhibit impulsive action, and spirituality may provide meaning-based motivation for choosing healthier behavior. Therefore, the present model can be viewed as a psychological-spiritual prevention framework in which reflective capacity, impulse regulation, and value orientation work together to reduce vulnerability to harm.

The findings also have implications for understanding the social context of youth harms. Although the present study focused on individual protective factors, social harms are shaped by broader structural and contextual conditions. In Iranian youth and adolescents, social harms have been associated with social class, marginalization, and life in disadvantaged suburban areas (Solimannejad et al., 2021). These contextual risks may expose young people to higher levels of stress, limited opportunities, deviant peer networks, and weaker access to supportive services. Under such conditions, self-awareness, self-control, and spirituality may become especially important because they can help youth cope with adversity, resist harmful opportunities, and maintain a sense of direction. However, these internal

resources should not be understood as substitutes for social support, educational equity, family strengthening, and community-level prevention. Rather, they should be integrated into broader prevention strategies that address both psychological and social determinants of youth vulnerability.

The demographic findings showed that male participants reported higher vulnerability to social harms than female participants, and participants with lower educational levels reported greater vulnerability than those with higher educational levels. These findings are consistent with the idea that youth risk behavior varies according to social role expectations, opportunity structures, educational resources, and exposure to risk-promoting environments. Gender differences may reflect variations in socialization, peer norms, risk tolerance, externalizing behavior, and social permission for certain forms of risk-taking. Educational differences may indicate that higher educational engagement provides structure, future orientation, social support, and access to prosocial networks. However, these differences should not be interpreted as fixed or deterministic. Instead, they show that prevention programs should be sensitive to demographic and social differences and should provide targeted support for youth groups with higher exposure to risk.

From an intervention perspective, the findings support the use of programs that strengthen self-awareness, self-control, emotional regulation, meaning-making, and value-based decision-making. Evidence from school-based social and emotional learning interventions shows that such programs can improve students' social-emotional skills, attitudes, behavior, and academic outcomes (Durlak et al., 2011). Follow-up evidence further indicates that social and emotional learning interventions can promote positive youth development and produce sustained benefits over time (Taylor et al., 2017). Therefore, the present findings are consistent with the broader prevention literature suggesting that youth harm prevention should not rely only on punishment, warning, or external monitoring. Instead, it should cultivate internal competencies that enable young people to regulate themselves, understand consequences, and choose behaviors aligned with their goals and values.

## 5. Conclusion

Overall, the findings of the present study confirm that self-awareness, self-control, and spirituality are significant protective factors against vulnerability to social harms

among youth. Self-control was the strongest predictor, suggesting that impulse regulation and behavioral inhibition are particularly important in preventing risk-taking and socially harmful behaviors. Spirituality also emerged as a meaningful protective factor, indicating that purpose, meaning, and moral orientation may help young people resist harmful choices. Self-awareness contributed significantly as well, showing that reflective understanding of emotions, motives, and behavior is a necessary component of adaptive decision-making. These results support an integrated prevention model in which psychological and spiritual capacities jointly reduce vulnerability to social harms. Such a model is especially valuable because it moves beyond a deficit-oriented approach and emphasizes strengths that can be developed through education, counseling, family support, and community-based youth programs.

## 6. Limitations & Suggestions

The present study has several limitations. First, the cross-sectional and correlational design prevents causal interpretation of the findings. Although self-awareness, self-control, and spirituality significantly predicted lower vulnerability to social harms, it cannot be concluded that these variables directly caused reductions in harmful behaviors. Second, all data were collected through self-report questionnaires, which may be affected by social desirability, recall bias, and reluctance to report sensitive behaviors. Third, the sample was limited to youth from one geographic and cultural context, which may restrict the generalizability of the findings to other populations. Fourth, although the study included key psychological and spiritual predictors, other relevant variables such as family functioning, peer influence, neighborhood risk, school climate, digital media use, personality traits, and mental health symptoms were not examined in the model. Finally, the study measured vulnerability to social harms as a broad construct, while different forms of social harm may have distinct predictors and mechanisms.

Future research should use longitudinal designs to examine whether self-awareness, self-control, and spirituality predict changes in youth social harms over time. Experimental and intervention studies are also needed to determine whether programs designed to strengthen these variables can reduce actual risk-taking and socially harmful behaviors. Future studies should include multi-informant data from parents, teachers, counselors, and peers, as well as

behavioral indicators and qualitative interviews, to provide a more comprehensive understanding of youth vulnerability. Researchers should also test mediation and moderation models to clarify whether emotional regulation, peer pressure, moral identity, meaning in life, family support, or educational engagement explain or change the relationships observed in this study. In addition, comparative studies across different cities, age groups, socioeconomic backgrounds, and cultural contexts would help determine whether the proposed model is stable across diverse youth populations.

In practice, the findings suggest that youth harm-prevention programs should focus on strengthening internal protective resources rather than relying only on external discipline, punishment, or information-based warnings. Schools, universities, counseling centers, cultural organizations, and community programs can design structured interventions that teach youth to identify emotions, reflect on motives, regulate impulses, resist peer pressure, clarify values, and build purpose in life. Counselors and educators should help young people connect daily choices with long-term goals and personal meaning, while also creating supportive environments that reduce shame and encourage responsible decision-making. Family-based and community-based programs can further reinforce self-control and spirituality by promoting communication, belonging, ethical reflection, and positive role modeling. Practical interventions should be developmentally appropriate, culturally sensitive, non-coercive, and focused on empowering youth to make healthier and more responsible decisions.

### Acknowledgments

We would like to express our appreciation and gratitude to all those who cooperated in carrying out this study.

### Declaration of Interest

The authors of this article declared no conflict of interest.

### Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

### Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

### Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

### Authors' Contributions

All authors equally contributed to this article.

### References

- Ahmed, N., Williams, R., & Choi, M. (2026). Neurocognitive Risk Mechanisms in Adolescent Bipolar Disorder: Impulsivity, Emotional Reactivity, and Decision Making Deficits. *Journal of affective disorders*, 325, 112-123.
- Cioban, S., Lazar, A. R., Bacter, C., & Hatos, A. (2021). Adolescent Deviance and Cyber-Deviance: A Systematic Literature Review. *Frontiers in psychology*, 12, 748006. <https://doi.org/10.3389/fpsyg.2021.748006>
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The Impact of Enhancing Students' Social and Emotional Learning: A Meta-Analysis of School-Based Universal Interventions. *Child development*, 82(1), 405-432. <https://doi.org/10.1111/j.1467-8624.2010.01564.x>
- Elzamzamy, K., Naveed, S., & Dell, M. L. (2024). Religion, Spirituality, and Pediatric Mental Health: A Scoping Review of Research on Religion and Spirituality in the Journal of the American Academy of Child and Adolescent Psychiatry from 2000 to 2023. *Frontiers in Psychiatry*, 15, 1472629. <https://doi.org/10.3389/fpsyt.2024.1472629>
- Halliburton, A. E., Murray, D. W., & Ridenour, T. A. (2024). Interplay among Self-Regulation Processes over Time for Adolescents in the Context of Chronic Stress. *Journal of Cognitive Development*, 25(4), 605-629. <https://doi.org/10.1080/15248372.2023.2295894>
- Hatala, A., McGavock, J., Michaelson, V., & Pickett, W. (2020). Low Risks for Spiritual Highs: Risk-Taking Behaviours and the Protective Benefits of Spiritual Health among Saskatchewan Adolescents. *Paediatrics & Child Health*, 26(2), e121-e128. <https://doi.org/10.1093/pch/pxaa007>
- Kumar, H., Xiao, R., Lawson, B., Musabirov, I., Shi, J., Wang, X., Luo, H., Williams, J. J., Rafferty, A., Stamper, J., & Li, M. (2024). Supporting Self-Reflection at Scale with Large Language Models: Insights from Randomized Field Experiments in Classrooms. Proceedings of the Eleventh ACM Conference on Learning @ Scale,
- Li, J., Huang, J., Zhang, L., & Yang, Y. (2022). Linking Self-Control to Negative Risk-Taking Behavior among Chinese Late Adolescents: A Moderated Mediation Model. *International journal of environmental research and public health*, 19(13), 7646. <https://doi.org/10.3390/ijerph19137646>
- Michaelson, V., Brooks, F., Jirasek, I., Inchley, J., Whitehead, R., King, N., Walsh, S. D., Davison, C. M., & Pickett, W. (2023). Domains of Spirituality and Their Importance to the Health of 75,533 Adolescents in 12 Countries. *Health Promotion*

- International*, 38(3), daab185.  
<https://doi.org/10.1093/heapro/daab185>
- Razeghi, N., Sadat-Hoseini, A. S., & Dehghan Nayeri, N. (2023). Spiritual Health Consequences from the Iranian Adolescents' Perspective. *Journal of religion and health*, 63, 1530-1548.  
<https://doi.org/10.1007/s10943-023-01911-7>
- Roberson, A. J., Eiden, R. D., Lessard, J., & Schuetze, P. (2024). Longitudinal Associations between Early Risk and Adolescent Delinquency: The Mediating Role of Self-Control and Moderating Role of Father-Child Closeness. *Journal of youth and adolescence*, 53, 1896-1911.  
<https://doi.org/10.1007/s10964-024-01993-0>
- Sam, M., Pirkhaefi, A., & Asgharnejhad Farid, A. (2025). The role of behavioral activation and inhibition systems (BIS/BAS) in impulsive behaviors with the mediating role of difficulty in emotion regulation among female vocational adolescents with borderline personality disorder. *Psychological Science*, 24(145), 221-237.
- Solimannejad, M., Niazi, M., & Abbasi Shavazi, M. T. (2021). Social Harms and Social Class in Iranian Youth and Adolescents Living in Slums in the Suburbs: A Systematic Review. *International Journal of Adolescent Medicine and Health*. <https://doi.org/10.1515/ijamh-2020-0267>
- Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting Positive Youth Development through School-Based Social and Emotional Learning Interventions: A Meta-Analysis of Follow-Up Effects. *Child development*, 88(4), 1156-1171. <https://doi.org/10.1111/cdev.12864>
- van der Aar, L. P. E., Crone, E. A., & Peters, S. (2022). Parallel Changes in Positive Youth Development and Self-Awareness: The Role of Emotional Self-Regulation, Self-Esteem, and Self-Reflection. *Prevention Science*, 23, 502-512.  
<https://doi.org/10.1007/s11121-022-01345-9>
- Wang, Y., Bai, R., Liu, J., Xu, S., & Liu, X. (2026). Latent transition analysis of non-suicidal self-injury comorbidity patterns among adolescents: Predictive roles of impulsivity, emotional dysregulation, and core self-evaluations. *International Journal of Clinical and Health Psychology*, 26(2), 100708. <https://doi.org/10.1016/j.ijchp.2026.100708>
- Zadeh Mohammadi, A., Ahmadabadi, Z., & Heidari, M. (2011). Construction and Assessment of Psychometric Features of Iranian Adolescents Risk-Taking Scale. *Iranian Journal of Psychiatry and Clinical Psychology*, 17(3), 218-225.
- Zhang, Y., Luo, F., & He, S. (2025). Neurodevelopmental Trajectories of Risk Perception and Impulsive Decision Making in Adolescents. *Brain and Cognition*, 180, 105-118.