

## PSYCHOMETRIC VALIDITY OF THE BRIEF IMSA VERSION IN ADULTS WITH A HISTORY OF SUICIDE ATTEMPTS

Validade psicométrica da versão breve do IMSA em adultos que tentaram suicídio

Validez psicométrica de la versión breve del IMSA en adultos que intentado suicidio

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## ABSTRACT

**Background:** assessing attributed motivations is essential to identify the reasons underlying suicide attempts. In Brazil, the factorial structure of the Inventory of Motivations for Suicide Attempts remains underexplored. **Objectives:** to evaluate the factorial structure of the Inventory of Motivations for Suicide Attempts, compare competing psychometric models, and examine evidence of nomological validity for the brief version in adults with a history of suicide attempts.

**Methodology:** this psychometric study included 296 adults receiving care in specialized mental health services. Participants completed the full version of the instrument, from which a brief version was subsequently derived based on theoretical and empirical criteria. Participants also completed the full versions of the Columbia Suicide Severity Rating Scale and the Barratt Impulsiveness Scale. Confirmatory factor analyses, reliability estimates, and structural equation modeling were conducted, resulting in the brief version. **Results:** the nine-item unifactorial solution demonstrated the best overall fit, greater parsimony, and consistent parameters. Within the nomological network, motivation was positively correlated with impulsivity and reasons for suicidal ideation, and negatively correlated with reasons for not committing suicide, with small effects on ideation and suicide attempts. **Conclusion:** the brief version demonstrated evidence of validity and consistency, representing a useful alternative for clinical assessment and research on suicidal behavior.

**Keywords:** suicide; motivation; impulsivity; psychometrics

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## RESUMO

**Enquadramento:** a avaliação das motivações atribuídas é essencial para identificar os motivos das tentativas de suicídio. No Brasil, a estrutura fatorial do *Inventory of Motivations for Suicide Attempts* ainda é pouco investigada. **Objetivos:** avaliar a estrutura fatorial do *Inventory of Motivations for Suicide Attempts*, comparar modelos psicométricos concorrentes e examinar evidências de validade nomológica da versão breve em adultos com histórico de tentativa de suicídio. **Metodologia:** estudo psicométrico com 296 adultos atendidos em serviços especializados em saúde mental. Os participantes responderam à versão completa do instrumento, sendo posteriormente derivada uma versão breve com base em critérios teóricos e empíricos; os participantes responderam também às versões completas da *Columbia Suicide Severity Rating Scale* e da *Barratt Impulsiveness Scale*. Foram conduzidas análises fatoriais confirmatórias, estimativas de confiabilidade e modelação por equações estruturais, originando a versão breve. **Resultados:** a solução unifatorial de nove itens apresentou melhor ajuste global, maior parcimônia e parâmetros consistentes. Na rede nomológica, a motivação correlacionou-se positivamente com impulsividade e razões para ideação, e negativamente com razões para não cometer suicídio, com efeitos pequenos sobre ideação e tentativas. **Conclusão:** a versão breve demonstrou evidências de validade e consistência, configurando-se como alternativa útil para avaliação clínica e pesquisa sobre comportamento suicida.

**Palavras-chave:** suicídio; motivação; impulsividade; psicometria

## RESUMEN

**Marco contextual:** la evaluación de las motivaciones atribuidas es esencial para identificar las razones de los intentos de suicidio. En Brasil, la estructura factorial del *Inventory of Motivations for Suicide Attempts* aún ha sido poco investigada. **Objetivos:** evaluar la estructura factorial del *Inventory of Motivations for Suicide Attempts*, comparar modelos psicométricos concurrentes y examinar evidencias de validez nomológica de la versión breve en adultos con antecedentes de intento de suicidio. **Metodología:** estudio psicométrico realizado con 296 adultos atendidos en servicios especializados de salud mental. Los participantes respondieron la versión completa del instrumento, a partir de la cual posteriormente se derivó una versión breve basada en criterios teóricos y empíricos. Los participantes también respondieron las versiones completas de la *Columbia Suicide Severity Rating Scale* y de la *Barratt Impulsiveness Scale*. Se realizaron análisis factoriales confirmatorios, estimaciones de confiabilidad y modelado de ecuaciones estructurales, dando origen a la versión breve. **Resultados:** la solución unifactorial de nueve ítems presentó el mejor ajuste global, mayor parsimonia y parámetros consistentes. En la red nomológica, la motivación se correlacionó positivamente con la impulsividad y las razones para la ideaación, y negativamente con las razones para no suicidarse, con efectos pequeños sobre la ideaación y los intentos de suicidio. **Conclusión:** la versión breve mostró evidencias de validez y consistencia, configurándose como una alternativa útil para la evaluación clínica y la investigación sobre el comportamiento suicida.

**Palabras clave:** suicidio; motivación; impulsividad; psicometría



## INTRODUCTION

Suicidal behavior remains one of the most complex and challenging clinical phenomena in contemporary mental health, requiring theoretical models capable of integrating multiple cognitive, emotional, relational, and contextual dimensions across the continuum encompassing suicidal ideation, preparatory behaviors, and suicide attempts. Although recent conceptual advances have improved the understanding of the emergence of suicidal ideation (May et al., 2020), important gaps remain regarding the mechanisms that lead certain individuals to transition from ideation to actual suicidal behavior.

This distinction has become central to several ideation-to-action models (Klonsky & May, 2015), which suggest that factors related to psychological pain, hopelessness, perceived interpersonal disconnection, acquired capability, and impulsivity contribute to increasing the likelihood of suicidal acts. Nevertheless, these models still do not provide a comprehensive explanation for the diversity of psychological functions attributed to suicidal behavior by individuals who attempt suicide themselves (Klonsky et al., 2021).

The motivations underlying suicide attempts should not be confused with suicidal ideation. Whereas ideation refers to the frequency, intensity, cognitive content, and persistence of suicidal thoughts, motivation concerns the psychological meaning attributed to the act itself, including both intrapersonal functions—such as emotional relief, escape from intolerable suffering, or the desire to end states of psychological pain—and interpersonal functions, such as communicating distress, creating relational impact, or indirectly seeking help (May & Klonsky, 2013; May et al., 2016). Recent studies conducted in Iran (Bagiyan

Koulemarz et al., 2019) and western Iran (Darabi et al., 2024) have suggested that these motivational dimensions constitute a relatively stable theoretical domain associated with both clinical trajectories and prevention and intervention strategies.

The Inventory of Motivations for Suicide Attempts, developed by May and Klonsky (2013), represents one of the few internationally available measures designed to assess such motivations. Although the original version proposed two broad factors (intrapersonal and interpersonal), subsequent studies have identified structural variations, suggesting that the instrument may demonstrate different psychometric patterns across distinct cultural contexts (May et al., 2016; Polskaya et al., 2025).

In Brazil, the instrument has already undergone linguistic adaptation (Machado, 2023); however, its structural functioning, nomological validity, and the feasibility of brief versions have not yet been systematically investigated. Despite the widespread use of measures focused on suicidal ideation, such as the Columbia Suicide Severity Rating Scale (Posner et al., 2011), studies dedicated to understanding why individuals attribute specific functions to suicide attempts and how these functions relate to impulsivity and distinct dimensions of suicidal ideation remain scarce.

Another aspect that requires further investigation concerns the internal structure of the instrument. Although early studies supported multifactorial and second-order models (May & Klonsky, 2013), growing interest has emerged in examining the possibility of unidimensional structures capable of representing the common functional core of suicidal motivations, particularly within proposals for brief versions. The use

of competing models, including bifactorial, second-order, unifactorial, and reduced versions constitutes a relevant methodological strategy for evaluating the internal coherence and parsimony of the instrument, especially when clinical applicability and screening feasibility are sought. Likewise, investigating the nomological network associated with the instrument, including impulsivity and indicators of suicidal ideation and attempts, is essential for estimating convergent and discriminant validity evidence (Reise et al., 2013). Despite the theoretical and clinical relevance of the motivational construct, no Brazilian studies to date have evaluated its internal structure, compared alternative psychometric models, or examined validity evidence based on relationships with related variables, particularly in samples composed of adults with a history of suicide attempts. This gap limits the understanding of motivational trajectories within the national context and restricts the availability of valid and concise instruments for clinical use and research purposes. Given this scenario, the present study aimed to evaluate the internal structure of the instrument, compare competing psychometric models, and examine nomological validity evidence for the brief version among adults with a history of suicide attempts receiving care in specialized mental health services. The proposed brief version presents potential applicability in clinical screening and rapid assessment contexts, contributing to the identification of motivational functions associated with suicidal behavior and supporting more targeted interventions while reducing administration time.

## BACKGROUND

Understanding the motivations underlying suicide attempts has gained increasing scientific relevance, particularly due to the limitations of traditional models focused exclusively on suicidal ideation. Recent research has reinforced that factors associated with the emergence of suicidal thoughts such as psychological pain, hopelessness, impulsivity, or affective disturbances do not necessarily explain why certain individuals progress from ideation to suicidal behavior, whereas many others remain exclusively at the cognitive level (Klonsky & May, 2015; Klonsky et al., 2021). Ideation-to-action models propose that the emergence of suicidal ideation and the transition to suicidal behavior are distinct processes influenced by motivational, interpersonal, and acquired capability mechanisms. In this sense, understanding the subjective reasons attributed to suicide attempts represents a fundamental step toward clarifying why small variations in clinical trajectories may result in dramatically different outcomes.

Motivations for suicide attempts constitute a specific construct, distinct from both suicidal ideation and suicidal intent. Seminal studies demonstrated that individuals attribute intrapersonal functions to suicidal acts, such as ending intense suffering, escaping intolerable emotional states, and seeking emotional relief, as well as interpersonal functions, including communicating pain, retaliating, eliciting help, or modifying significant relationships (May & Klonsky, 2013; May et al., 2016). These motives not only reveal aspects of subjective experience but also organize clinical understanding and guide interventions, given that each function mobilizes distinct needs and resources. Recent studies have suggested that

motivational dimensions are associated with the intensity of suicidal ideation, persistence of suicidal thoughts, presence of preparatory behaviors, and the likelihood of repeated suicide attempts (Bagiyan Koulemarz et al., 2019; Darabi et al., 2024). Such evidence consolidates the motivational construct as an independent domain within contemporary suicidology.

The Inventory of Motivations for Suicide Attempts was developed to assess these motivational functions in a structured manner, including intrapersonal and interpersonal dimensions (May & Klonsky, 2013). Although the original version presents a two-factor solution, subsequent investigations demonstrated that the internal structure may vary according to the population studied, sociocultural context, and type of suicide attempt (May et al., 2016; Polskaya et al., 2025). The possibility of alternative structures, such as unifactorial and second-order models, has motivated new psychometric investigations, particularly given the growing interest in brief versions designed for screening contexts or high-demand clinical settings. The relevance of reduced versions is justified not only by time efficiency but also because specific items may demonstrate semantic redundancy, unstable factor loadings, or differential functioning across culturally distinct samples.

In Brazil, despite the recent linguistic adaptation of the Inventory of Motivations for Suicide Attempts (Machado, 2023), there are still no studies examining its internal structure, evaluating the adequacy of competing models, or investigating validity evidence based on relationships between the instrument and clinically relevant variables, such as suicidal ideation and impulsivity. This gap limits both research and

clinical practice, considering that assessing motivations for suicide attempts may contribute to the formulation of clinical hypotheses and targeted interventions, in addition to enabling the identification of differentiated risk profiles.

Investigating the nomological relationships among motivations, ideation, impulsivity, and suicide attempts is particularly relevant. The literature indicates that impulsivity plays a modest yet significant role in the transition between suicidal ideation and suicidal behavior (Reise et al., 2013). Specific indicators of suicidal ideation, such as frequency and intensity, appear to be more directly related to intrapersonal motivations, whereas ambivalence and communicative functions tend to be associated with interpersonal motives. However, the magnitude of these associations varies across studies, suggesting that part of this variability may be explained by differences in motivational structure.

It is also important to emphasize that the Brazilian literature remains limited regarding empirical studies focused on the operationalization of psychosocial constructs in the field of mental health, highlighting the need for validated instruments adapted to local populations. In this context, increasing attention has been devoted to rigorous processes of instrument development and validation, particularly those applied to mental health assessment and intervention and to complex behaviors, as exemplified by Martins et al. (2024). Incorporating such frameworks strengthens the methodological and editorial alignment of the present study with practices recommended by national literature.

Given the existing limitations and the absence of Brazilian investigations dedicated to the internal

structure and validity of the Inventory of Motivations for Suicide Attempts, it becomes essential to evaluate the psychometric adequacy of the instrument in both its full and brief formats and to investigate its nomological network among individuals with a history of suicide attempts. Such an approach may contribute to advancing the understanding of the functions attributed to suicidal behavior and improving the availability of concise, valid, and culturally appropriate measures for clinical and scientific use.

## METHODOLOGY

### *Study design*

This methodological study employed a quantitative design aimed at the psychometric evaluation of the IMSA and the examination of validity evidence based on internal structure and relationships with external variables. The design included confirmatory factor analyses (CFA), reliability estimates, and structural equation modeling (SEM), following contemporary recommendations in psychometrics applied to mental health research (Kline, 2023). The study was conducted between 2023 and 2025 in specialized mental health services, with face-to-face administration of the instruments.

### *Participants*

A total of 296 adults with a history of at least one suicide attempt participated in this study. Participants were recruited by convenience sampling from specialized mental health services focused on crisis intervention and mental disorder treatment. Eligibility criteria included being 18 years of age or older, being able to understand and respond to the assessment instruments and voluntarily agreeing to participate.

The refusal rate was 56.2%. This pattern is understood as an inherent characteristic of studies conducted in clinical settings involving heightened emotional vulnerability, in which voluntary participation may be influenced by factors such as fatigue, discomfort regarding the topic, or the intensity of subjective suffering.

Additionally, the high refusal rate may indicate self-selection bias, given that participants experiencing greater psychological distress or lower emotional availability may have chosen not to participate.

Although the refusal rate limits the generalizability of findings to broader populations, it did not compromise the assumptions required for the psychometric analyses conducted, considering that model adequacy depends primarily on the properties of the correlation matrix rather than on sample representativeness (MacCallum et al., 1996).

### *Instruments*

- Inventory of Motivations for Suicide Attempts (IMSA)

The IMSA consists of 17 items designed to assess motivations attributed to suicide attempts, encompassing both intrapersonal and interpersonal dimensions (May & Klonsky, 2013). Items are answered on a five-point Likert scale ranging from 1 (“strongly disagree”) to 5 (“strongly agree”). The Brazilian version used in this study derived from previous translation and linguistic adaptation procedures (Machado, 2023), with conceptual equivalence preserved.

- Columbia Suicide Severity Rating Scale (C-SSRS)

The Columbia–Suicide Severity Rating Scale (Posner et al., 2011) was used to assess suicidal ideation severity, frequency, duration, and controllability of suicidal

thoughts, as well as the presence of preparatory behaviors and previous suicide attempts (Bjureberg et al., 2022). This instrument has been widely validated internationally and frequently employed in clinical research (Austria-Corrales et al., 2023), studies involving individuals with mental disorders (Xiao et al., 2025), and epidemiological investigations (Flores-Kanter et al., 2023).

- Barratt Impulsiveness Scale (BIS-11)

BIS-11 is a classic measure of trait impulsivity composed of items assessing motor, attentional, and non-planning impulsivity (Lau et al., 2022). It has been widely used in studies investigating vulnerabilities associated with suicidal behavior (Brokke et al., 2022).

#### **Data collection procedures**

Data collection was conducted face-to-face in a private setting by researchers trained in clinical management and in interviewing individuals presenting suicidal behavior. After receiving information regarding the objectives of the study and signing the informed consent form, participants completed a sociodemographic questionnaire followed by the psychometric instruments. The average administration time ranged from 30 to 40 minutes.

All data were reviewed and entered electronic spreadsheets anonymously, ensuring confidentiality and data integrity. Standardized procedures were adopted to minimize biases related to instrument administration and response recording.

#### **Data analysis strategy**

The internal structure of the Inventory of Motivations for Suicide Attempts was examined through confirmatory factor analyses (CFA) (Marôco, 2021) using polychoric correlations and the robust WLSMV estimator, which is recommended for ordinal items, as

illustrated by Park (2023). Four competing models were tested: a 17-item bifactorial model, a second-order model, a 17-item unifactorial model, and a nine-item unifactorial model (IMSA-Brief/BR).

Participants completed the full version of the instrument. The brief version was subsequently derived post hoc based on combined criteria: factor loadings ranging from 0.28 to 0.76 in the unifactorial model, uniqueness values  $\leq 0.70$ , theoretical coherence with intrapersonal and interpersonal domains, absence of unstable or negative loadings, and elimination of semantically redundant items. Although the initial criterion was  $\geq 0.40$ , one item was retained despite presenting a lower loading due to its theoretical relevance and contribution to construct coherence.

Fit indices included CFI, TLI, RMSEA (with 90% confidence interval), and SRMR, following international recommendations (Kline, 2023). Reliability was estimated using McDonald's omega coefficient (Hayes & Coutts, 2020).

Validity evidence based on relationships with other variables was examined through structural equation modeling (SEM), estimating direct, indirect, and total effects with bootstrap procedures using 2,000 resamples (Swami et al., 2023). Attempts to model suicidal ideation as a latent factor revealed instability in the loadings related to duration and controllability; therefore, ideation frequency was maintained as an observed indicator.

The variables "reasons for ideation" and "reasons for not committing suicide" were operationalized based on C-SSRS items related to frequency, intensity, and ambivalence of suicidal ideation.

**Ethical considerations**

The study was approved by a Research Ethics Committee under protocol n. 4.025.872/2020, in accordance with national and international ethical guidelines for research involving human subjects. All participants were informed about the objectives, risks, and benefits of the study and were free to refuse participation or withdraw at any time without any impact on their clinical care.

Given the sensitive nature of the topic, referral and psychological support procedures were ensured for participants who experienced increased distress during or after the assessment process.

**RESULTS**

Participants presented a mean age of 25.3 years (SD = 7.4; range: 17–63), with a predominance of cisgender women (79.7%) and a high educational level (71.3% with higher education). The annual distribution of suicide attempts revealed a marked increase between 2018 and 2021. Additional sociodemographic and clinical characteristics are described in the supplementary material.

**Confirmatory factor analyses**

The 17-item bifactorial model demonstrated acceptable global fit indices (CFI = 0.95; TLI = 0.94; RMSEA = 0.04), although inconsistent factor loadings were identified, including negative values and instability across dimensions. The second-order model demonstrated inferior performance (CFI = 0.81; TLI = 0.78; RMSEA = 0.08), indicating structural inadequacy. The nine-item unifactorial model (IMSA-Brief/BR) demonstrated the best overall fit among the models tested (CFI = 0.97; TLI = 0.96; RMSEA = 0.04 [90% CI: 0.02–0.05]). Although the SRMR value was at the

upper limit of acceptability (0.10), the remaining indices supported good overall model performance. Standardized factor loadings ranged from 0.28 to 0.76 (see supplementary material), with residual variances within the expected range for ordinal items. Elimination of items from the original version was based on negative loadings, high uniqueness values, or semantic redundancy.

The scores demonstrated moderate skewness and item-total correlations ranging from 0.14 to 0.60. McDonald's omega coefficients ranged from 0.778 to 0.818, indicating adequate internal consistency for the brief version. The items included in the IMSA-Brief/BR, as well as their factor loadings and descriptive statistics, are presented in the supplementary material.

**Reliability**

The internal consistency ( $\omega$ ) of the brief version was 0.74 (95% CI: 0.70–0.79), which is considered adequate for brief screening instruments intended for clinical settings. The 17-item models presented lower and less consistent values across factors (0.74–0.76), reinforcing the psychometric superiority of the concise version.

**Validity based on relationships with other variables**

Nomological relationships were examined through structural equation modeling. Motivation for suicide attempts demonstrated a positive correlation with impulsivity (cov = 0.21;  $p = 0.001$ ), suggesting that higher impulsivity levels are associated with greater motivational intensity.

The model revealed a significant direct effect of motivation on reasons for suicidal ideation ( $\beta = 0.25$ ;  $p = 0.004$ ) and on reasons for not committing suicide ( $\beta = -0.20$ ;  $p = 0.012$ ). Consistent with ideation-to-action

models, the effects on suicidal ideation and suicide attempts were small and non-significant ( $\beta = 0.31$ ;  $p = 0.425$ ;  $\beta = -0.38$ ;  $p = 0.297$ ), as were the effects of impulsivity on ideation ( $p = 0.179$ ) and suicide attempts ( $p = 0.297$ ).

These results suggest that the motivation for suicide attempts is related to relevant clinical variables, although it is not a direct predictor of recent attempts, reflecting primarily the psychological significance attributed to the act.

## DISCUSSION

The results demonstrate the psychometric superiority of the short version of the Inventory of Motivations for Suicide Attempts in the Brazilian context, suggesting that the motivational construct associated with suicide attempts can be represented more succinctly without compromising theoretical coherence. The inadequacy of the full 17-item models, characterized by unstable factor loadings, high unidimensionality, and structural heterogeneity, is consistent with international evidence pointing to limitations of extended versions of the instrument in distinct clinical and cultural contexts (May et al., 2016; Polskaya et al., 2025). This pattern suggests that greater structural complexity may introduce psychometric noise, especially in heterogeneous clinical samples.

The nine-item unifactorial model demonstrated excellent overall fit and adequate levels of internal consistency, reinforcing the psychometric validity of the measure. The concentration of the most robust items in the intrapersonal dimension is consistent with studies highlighting the centrality of functions related to emotional regulation—namely, the relief of psychological pain and the reduction of intolerable

affective states—as the primary motivators of suicide attempts (Bryan et al., 2020; May & Klonsky, 2013). This finding reinforces the clinical relevance of the intrapersonal dimension as a priority target for intervention, particularly in strategies focused on emotional regulation and distress tolerance.

Evidence regarding construct validity based on relationships with other variables was also consistent with ideation-to-action models. The positive association between motivation and impulsivity suggests that individuals with higher impulsivity tend to attribute greater functional intensity to suicidal behavior, corroborating the literature that positions this variable as a facilitator of the transition between ideation and action, though not as a determining factor (Reise et al., 2013). This pattern reinforces the multifactorial nature of suicidal behavior, in which different dimensions contribute differently along the clinical continuum.

The small magnitude of the observed effects on ideation and attempts is consistent with contemporary models that clearly distinguish between the processes that give rise to suicidal thoughts and those that sustain their actualization (Klonsky & May, 2015; Klonsky et al., 2021). In this sense, the motivations captured by the instrument seem to predominantly reflect the psychological meaning attributed to the act, rather than the direct probability of suicidal behaviors occurring. This distinction has relevant clinical implications, insofar as it reinforces the need for assessment approaches that consider ideation, motivation, and capacity for action in a differentiated manner.

Another relevant finding concerns the association between motivation and reasons for dying and for not

committing suicide. This pattern may reflect the ambivalence characteristic of suicidal behavior, in which forces of approach and avoidance toward the act coexist simultaneously. Individuals who attribute intense emotional functions to the attempt also tend to show greater consistency between subjective distress and the content of ideation, a phenomenon widely described in the clinical literature (Bryan et al., 2020). Although the observed effects are of small magnitude, these results underscore the complexity and dynamic nature of the processes underlying suicidal ideation.

The internal consistency of the brief version, although moderate, is compatible with concise instruments intended for clinical screening.  $\omega$  values between 0.70 and 0.80 are considered adequate for brief measures with ordinal items, particularly in populations with high symptomatic variability. These results suggest that, despite the reduction in the number of items, the measure retains sufficient precision for use in clinical contexts, favoring its applicability in high-demand care settings.

Finally, the consistent internal structure and the coherence of the results obtained support the utility of the IMSA-Brief/BR as an instrument for clinical assessment and research. The subjective nature of the motivational construct, combined with its relevance to the functional understanding of suicidal behavior, positions this measure as potentially strategic for rapid assessment in clinical contexts. In this sense, its use can contribute to the formulation of more precise clinical hypotheses and to the development of interventions more aligned with the psychological functions attributed to the suicidal act. Recent studies in the Brazilian context (Paiva et al., 2025) reinforce the

importance of culturally adapted psychometric instruments, expanding the possibilities for assessment in the field of Brazilian suicidology.

## CONCLUSION

The sample, consisting of users of specialized mental health services and characterized by a high refusal rate, a phenomenon expected in research involving acute psychological distress, limits the generalizability of the findings to broader populations. Furthermore, the brief version was derived post hoc, and future studies may evaluate its performance independently of the excluded items, as well as investigate the structural invariance across different clinical and demographic groups.

Despite these limitations, the results demonstrate that the IMSA-Brief/BR represents a valid, concise, and useful alternative for assessing the motivations for suicide attempts in adults. Its application may contribute to the improvement of screening practices, the formulation of clinical hypotheses, and the development of intervention strategies more aligned with the functions that the suicidal act assumes for everyone. Future research may deepen the understanding of its predictive validity, explore relationships with other clinical indicators, and expand its use in different care settings.

The present study provided evidence of psychometric validity for the Brazilian short version of the IMSA, demonstrating that the nine-item unifactorial solution outperforms the full 17-item models. The internal structure proved to be more parsimonious and theoretically coherent, with more stable factor loadings and robust overall fit parameters. The reliability indices were adequate for a brief instrument

applied in clinical settings, confirming the measure's internal consistency.

Findings regarding nomological relationships reinforce the understanding that the motivation attributed to suicide attempts constitutes a construct distinct from ideation and behavior, consistent with the propositions of ideation-to-action models. Motivational intensity correlated modestly with impulsivity and with indicators associated with the content and ambivalence of ideation but did not prove to be a direct predictor of recent attempts, which is consistent with the contemporary literature on the subject.

#### CONFLICTS OF INTEREST

The authors report no conflict of interest.

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