

Correlation between Perceived Social Support and Self-Esteem of Late Adolescent Intimate Partner Violence Victim

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Abstract

Intimate Partner Violence (IPV), or violence in romantic relationships, often occurs and is experienced not only by married women but also by female adolescents. The impact of IPV is not light, starting from physical injury, psychological trauma, and reducing the victim's self-esteem. To overcome these impacts and end the abusive relationship, IPV victims need to have social support. This study examines the correlation between perceived social support and self-esteem of female late adolescent victims of IPV. The convenience sampling technique was used in this study. As many as 304 late adolescents female aged 18–22 years old who are in romantic relationships and experience violence in those relationships participated in this study. The quantitative non-experimental research method was conducted using an online survey containing the Multidimensional Scale of Perceived Social Support and the Rosenberg Self-Esteem Scale. Data analysis using Spearman Rho correlation revealed a significant positive correlation between perceived social support and self-esteem ($r = .277, p = .000$). Furthermore, the result of this study found that three dimensions of perceived social support, which are perceived social support from family, friends, and significant others, also showed a significant positive correlation with self-esteem. Based on this research, support from family, friends, and significant others is critical for IPV victims to improve their self-esteem.

Keywords: Intimate partner violence victims, late adolescent, perceived social support, self-esteem.

Introduction

Intimate Partner Violence (IPV), especially experienced by women in romantic relationships, is a significant problem for Indonesia and the world. Although men can also experience it, most IPV victims are women (Niolon et al., 2017). Intimate Partner Violence (IPV) can be defined as intentional behavior perpetrated by a partner, or former partner, in a marriage or dating relationship, involving physical, sexual, psychological, and emotional (Carranza et al., 2020; Niolon et al., 2017; WHO, 2021a), and economic violence (Komnas Perempuan, 2021). These violence cases, primarily physical and non-physical sexual violence, frequently occur in Indonesia, so it becomes urgent to be precisely regulated and discussed in Indonesian Law No. 12 of 2022 concerning the Criminal Acts of Sexual

Violence (Garnis, 2022).

KOMNAS Perempuan reported that there was a total of 299,911 cases of violence against women in Indonesia that occurred throughout 2020 (Komnas Perempuan, 2021). Not only in Indonesia, but similar cases also occur in the world. In 2021, WHO stated that IPV is the most common type of violence experienced by women worldwide (WHO, 2021b). IPV, whether physical or sexual violence, is experienced by 245 million women aged 15 years and over in a 12-month prevalence. In more detail, WHO found that this violence was experienced by 16% of the female population aged 15–24 years in a 12-month prevalence (WHO, 2021a) or around 39 million people. Meanwhile, in the age range of 45–49 years, violence was experienced by 8% of the population (WHO, 2021a).

This means that married adult women not only experience IPV but also occur at an early age, namely in females in early to late adolescence, with an age range of 15-24 years, who are in the dating period (WHO, 2021b). Within this age range, adolescents are vulnerable to becoming victims of intimate partner violence due to the unique characteristics that emerge in this developmental stage. In more depth, this study will explore females in the late adolescent age category, individuals aged 18-22 years. The age of 18-22 years is the last age range in the adolescent stage before heading towards adulthood (Santrock, 2012). Females in late adolescence have the characteristics of being more able to think abstractly and critically. Still, they cannot always think maturely, so the decisions made are often rushed and not perfect (Papalia & Martorell, 2014).

Late adolescents' relationship with their parents or family usually declines. This is due to the desire to be independent and separate from parents. In this phase, individuals usually experience self-discovery, including the search for sexual identity and increased sexual behavior. Therefore, at this age, late adolescents often try to establish dating relationships with other individuals (Papalia & Martorell, 2014). Unfortunately, this is not supported by good decision-making, which can increase the risk of meeting inappropriate partners and experiencing intimate partner violence.

Late adolescent females who are victims of IPV often find it difficult to leave their relationship with the perpetrator. Some factors that can contribute to this are attachment dysfunction and cognitive distortions (Resnick, 2021), lack of social support received by the victim, exposure to violence in childhood, fear of loneliness or no longer having a partner, and threats by the perpetrator (Pereira et al., 2020; WHO, 2012). The longer the unhealthy relationship lasts, the more severe the negative impact may occur on the victim.

The negative impacts that may occur on late adolescent female victims of IPV are not light. This

can be exacerbated by the characteristics of late adolescents who are unable to think maturely, do not yet have a strong self-identity, and tend to distance themselves from their families. The negative impacts include physical injuries, such as bruises and fractures, physical health problems; such as acute ulcers due to stress, psychological and mental health problems; such as depression and posttraumatic disorder, self-harm, and suicide attempts (Cho et al., 2017; Garcia-Moreno et al., 2012; Niolon et al., 2017). In addition, late adolescent females who are victims of IPV tend to have high self-criticism and often blame themselves for being victims. Negative thoughts and judgments about oneself can be detrimental to mental health and worsen the stress caused by experiencing adverse events. Persistent negative thinking can lead to feelings of worthlessness, resulting in low self-esteem (Pereira et al., 2020).

This is supported by previous studies, which also suggest that IPV victims tend to have low self-esteem (Costa & Gomes, 2018; Garcia-Moreno et al., 2012; Pereira et al., 2020), which affects the quality of individual psychological well-being. IPV victims with low self-esteem will find it challenging to overcome existing problems and leave abusive relationships. Individuals with low self-esteem tend to trust themselves less, always consider themselves incapable, often doubt and compare themselves, and always perceive things negatively (Baumeister et al., 2003, 2005; Cherry, 2021; M. Rosenberg & Owens, 2009). Individuals with low self-esteem also often perceive other people's suggestions or comments negatively. They perceive the suggestion as criticism of themselves, so they are often defensive in response to a suggestion, even if the suggestion given is positive and constructive (Rosenberg & Owens, 2009).

Individuals with low self-esteem are at greater risk for exposure to depression (Baumeister et al., 2003) and tend to have suicidal thoughts when experiencing adverse events in life (Wan et al., 2019). This is also related to the characteristics of

individuals with low self-esteem who tend to only see and focus on the negatives of an event and perceive that it will happen again in the future (Rosenberg & Owens, 2009). These characteristics that arise in individuals with low self-esteem can make it difficult and hurt them.

Self-esteem is an evaluative belief, behavior, or attitude that can be positive or negative toward oneself (F. R. Rosenberg & Rosenberg, 1978). Self-esteem can predict individual psychological well-being and help in coping (M. Rosenberg et al., 1995). This occurs because individuals with high self-esteem possess self-confidence, a willingness to continue to develop, think more positively, and have optimism in life (Cherry, 2021; Vanbuskirk, 2021). Previous studies have successfully proven that perceived social support has a significant positive relationship with self-esteem (Cao & Liang, 2020; Gorbani et al., 2020; Ikiz & Cakar, 2010; Li et al., 2018) and can predict self-esteem (Baytemir et al., 2018). This suggests that perceptions of social support are essential for IPV victims to overcome existing problems and improve self-esteem that has decreased due to negative experiences of IPV.

Perceived social support is an individual's subjective perception and judgment of the availability and adequacy of social support when needed (Cao & Liang, 2020; Haber et al., 2007; Lakey & Cohen, 2000). Perceived social support can be sourced from family, friends, and others who are significant to the individual (Cao & Liang, 2020). These three sources were chosen because they are considered essential sources for an individual. Social support from family in unmarried individuals is from the family of origin, such as the father, mother, and siblings (Zimet, 1998). Social support from friends is derived from friendship relationships in social circles, such as peers. Meanwhile, social support from significant others can be sourced from a romantic partner, family member, or friend who has a close relationship with the individual (Prezza & Pacilli, 2002).

Perceived social support has a positive impact

on individual psychological well-being. Previous research found that perceived social support has a positive relationship with life satisfaction and a negative relationship with loneliness (Cao & Liang, 2020). Perceived social support is essential for individuals facing an adverse event. According to Lakey & Cohen (2000), by having perceived social support, individuals can reduce negative thoughts and impacts arising from adverse events in life, thus having a good impact on mental health.

Perceived social support can help individuals to overcome existing problems by influencing appraisal or cognitive processes. An appraisal is how an individual judges and interprets situations concerning personal values (Lakey & Cohen, 2000; Lazarus & Folkman, 2013). How an individual interprets an event is essential and affects the stress level experienced by the individual. Stress can arise when an individual feels they do not have enough capacity to solve their problems. Perceived social support helps individuals to feel that they have help and support, thus feeling safer, more confident, and more protected from negative thoughts (Lakey & Cohen, 2000; Lazarus & Folkman, 2013). This, in turn, leads to better self-esteem.

Although, in general, perceived social support has a positive relationship with self-esteem, previous studies have reported different results on the dimensions of perceived social support related to self-esteem (Gorbani et al., 2020; Ioannou et al., 2019; Shahali et al., 2019). Research by Gorbani (2020) conducted on burn patients in Tabriz revealed that the perception of social support from family, friends, and significant others has a significant positive relationship with self-esteem. However, in another study conducted on adolescents and young adults aged 17-26 years, it was found that only perceived social support from the family had a significant positive relationship with self-esteem, while perceived social support from friends and significant others did not have a similar relationship (Ioannou et al., 2019). This can be due to relationships with parents that tend to

change in the age phase of participants, which is 17-26 years old, where at that age, usually the relationship between individuals and families tends to be more distant, so that support from family parents is perceived as more meaningful, compared to support from friends (Ioannou et al., 2019). Meanwhile, another study conducted on a population of sexual violence victims aged 15-25 years showed different results, where perceived social support from friends had a significant positive relationship with self-esteem, while perceived social support from family and significant others had no significant relationship (Shahali et al., 2019).

The inconsistency of the results of previous studies on the relationship between perceived social support and self-esteem makes researchers interested and intend to examine the relationship between perceived social support and self-esteem in late adolescent female victims of IPV. This study hypothesizes a positive and significant relationship between perceived social support and self-esteem.

Method

The method used in this study was a non-experimental quantitative research method. The participants in this study were 304 late adolescent females aged 18-22 years old, currently in a dating relationship, and experiencing violence in the relationship. The forms of violence in a romantic relationship can include physical violence (hitting, grabbing, kicking, slapping, etc.), sexual violence (forced sexual intercourse or other sexual harassment), psychological or emotional violence (intimidation, humiliation, threatening, excessive control, stalking, etc.), and economic violence (forcing to give money, forcing to provide, etc.) that is done both verbally and nonverbally.

The sampling technique used was convenience sampling. Convenience sampling is a sampling technique by selecting anyone available who is considered suitable to be a participant in the study (Neuman, 2013). The participants in this study are late adolescents female aged 18-22 years, currently

in a dating relationship, and have experienced violence in the current relationship.

Participants in this study ranged in age from 18 to 22 years old ($M= 20.850$, $SD= 1.234$). The highest number of participants was at the age of 22 years ($n= 122$, 40.1%). The second highest number of participants was 21 years ($n= 81$, 26.6%). The third highest number of participants was 20 years old ($n= 56$, 18.4%), followed by 19 years old ($n= 23$, 7.6%), and the least was 18 years old ($n= 22$, 7.2%). The most common types of intimate partner violence (IPV) experienced by participants were psychological/emotional violence ($n= 280$), sexual violence ($n= 95$), physical violence ($n= 81$), and the least was economic violence ($n= 49$).

The measurement scales used in this study were the perceived social support scale and the self-esteem scale. The perceived social support scale (12 items, $\alpha= .858$) used the Multidimensional Scale of Perceived Social Support (Zimet, 1998), which has been translated into Indonesian by Laksmita et al. (2020). This scale has three dimensions of perceived social support based on its source: the perception of social support from family, friends, and significant others. Meanwhile, the self-esteem scale (10 items, $\alpha= .803$) used the Rosenberg Self-esteem Scale, translated into Indonesian and used in Dewi & Hartini's (2021) research.

Demographic data, the perceived social support scale, and the self-esteem scale were arranged into an online survey using a google form. In the initial part of the form, participants were given information about the criteria for participants needed in this study, along with types and examples of violence that occurred in relationships. After that, participants first filled out and agreed to the informed consent and stated that they were following the criteria for participants. Participants then completed the perceived social support measurement scale questionnaire and the self-esteem measurement scale questionnaire.

After the data was collected, a reliability test and assumption test, which are a linearity test and a

normality test, were conducted to determine the data analysis method used. The data analysis method used in this study is the Spearman Rho correlation analysis using the SPSS 24 application.

Results

The following will explain the description of research participants based on the research variables studied. The number of participants in this study was

304, and all met the criteria for research participants, namely female gender, aged between 18 - 22 years, currently in a dating relationship. They had experienced violence in their current relationship.

Of the total 304 participants, the perception of social support obtained was at a moderate level. This is based on the hypothetical mean value of 4 and the empirical mean value of 4.3 (M= 51.796, Mdn= 53, SD= 13.802).

Table 1. Description of Perceived Social Support

Category	n=304	Percentage (%)
Low	42	13.8
Moderate	173	56.9
High	89	29.3

Perceived social support can also be categorized into three dimensions based on its source: social support from family, friends, and significant others. Based on the mean scores, the source of social support perceived as most adequate

and available to participants was social support from significant others (M= 19.523). Social support from friends followed next (M= 17.608), and the social support from family was perceived to be the least adequate and available (M= 14.664).

Table 2. Description of the Mean Perceived Social Support

Dimension	Mean
Family	14.664
Friends	17.608
Significant Others	19.523

The 304 participants generally described a low level of self-esteem. This is based on the

hypothetical mean of 2.5 and the empirical mean of 2.23 (M= 22.365, Mdn= 22, SD = 5.278).

Table 3. Description of Self-Esteem

Category	n=304	Percentage (%)
Low	222	73
Medium	55	18.1
High	27	8.9

The correlation between perceived social support and self-esteem was analyzed using Spearman Rho. There was a significant positive relationship between perceived social support and self-esteem, $r = .277$, $n = 304$, $p = .000$. This positive relationship illustrates that the higher the perceived

social support, the higher the self-esteem. The coefficient of determination in this correlation test was $r^2 = .076$, which indicates a moderate effect. In addition, participants' level of self-esteem can explain 7.6% of the variance in perceived social support.

Table 4. Spearman Rho Correlation Test between Perceived Social Support and Self-Esteem

Scale	1	2
1. Perceived Social Support	-	.277**
2. Self-Esteem	.277**	-

**p<.005

In addition, correlation tests were also conducted between the dimensions of perceived social support and self-esteem. Perceived social support from family

($r = .246, p = .000$), friends ($r = .184, p = .001$), and significant others ($r = .124, p = .030$), was also found to have a significant positive relationship with self-esteem.

Table 5. Spearman Rho Correlation Test between Perceived Social Support's Dimensions and Self-Esteem

Scale	1	2	3	4
1. Self-Esteem	-			
2. Family Social Support	.246**	-		
3. Friends Social Support	.184**	.290**	-	
4. Significant Others Social Support	.124**	.185**	.354**	-

**p<.005

Discussion

This study aims to examine the relationship between perceived social support and self-esteem. According to the results of the data analysis, it was found that there was a significant positive relationship between the two variables. The results of this study are supported by previous studies that examined the relationship between perceived social support and self-esteem (Gorbani et al., 2020; Shahali et al., 2019). Another study that examined the mediating effect of self-esteem on the relationship between perceived social support and depressive symptoms also found a significant positive relationship between self-esteem and perceived social support (Ioannou et al., 2019).

People who have high perceived social support also have high self-esteem. This can be due to the perception of social support that affects how a person perceives a problem. Someone who has a good perception of social support will feel that they have support and help in dealing with existing problems, resulting in feelings of security, confidence, avoidance of negative thoughts, and ultimately can have higher self-esteem (Lakey & Cohen, 2000; Lazarus & Folkman, 2013).

In addition, this study also found that all three

dimensions of perceived social support, namely social support from family, friends, and significant others, also had a significant positive relationship with self-esteem. This finding is in line with previous research that showed similar results (Gorbani et al., 2020). Other studies have shown that IPV victims get emotional, instrumental, and informational support from family, friends, and special people in their lives (Harris & Orth, 2020; Howard Sharp et al., 2017; Park & Ko, 2020). Such support is provided through assistance in listening genuinely, assisting in emotional release, providing advice, and assistance in decision-making. Social support from family is considered to increase resilience so that victims can recover from their sadness (Howard Sharp et al., 2017).

Meanwhile, support from friends and significant others is associated with better mental health through emotional support, advice, and new perspectives (Howard Sharp et al., 2017). These supports provide a sense of security, increasing the victim's self-esteem. This suggests that it is essential for IPV victims to have a good perception of social support from family, friends, and significant others so that victims can have higher self-esteem.

The dimension that had the most substantial

relationship with self-esteem was perceived social support from family. At the same time, the weakest relationship is the perceived social support from significant others. Previous research also found that social support from family was perceived as support that correlated with self-esteem. This can be due to relationships with parents that tend to change, where at the age of 17-26 years, usually the relationship between individuals and families tends to be more distant, so support from parents and family is perceived as more meaningful compared to support from friends and significant others (Ioannou et al., 2019).

This study is inseparable from limitations. The limitations include that this research is a correlation test, so it cannot describe the cause and effect between social support and self-esteem. To describe the causal relationship, future researchers can conduct regression tests to see the influence between the two variables. In addition, this study is cross-sectional, which means that research data is only taken at one time, so the results of this study are limited in describing research participants at one time only. Future researchers may consider a longitudinal research approach to describe the study's results over time. This study only examined female IPV victims, so the study's results cannot be used to see the relationship between male victims. Future researchers can also consider exploring this research on male participants and include online violence as one of the types of violence studied, considering that adolescents in the current era are very familiar with technology and the internet. To avoid the adverse effects of IPV, primarily decreased self-esteem, victims need to have good perceptions of social support. Perceptions of social support can be improved by getting closer, opening, and telling stories to the closest people, such as family, friends, and significant others. By having good social support, victims can be given advice and emotional or psychological support to get out of abusive relationships. In addition, adolescent victims of IPV can also focus on themselves by improving their

achievements, education, and work. This can be done by continuing to develop themselves and improving their soft and hard skills to have better self-esteem. In addition, to improve self-esteem, victims need to increase a positive view of themselves, which can be done by giving positive affirmations and respecting themselves more.

For the public, especially parents, researchers suggest increasing the closeness and support given to children, especially children in the late adolescent age range who experience IPV. Parents can be more active in listening, helping provide advice or new views for children. Having closeness and providing sufficient social support with parents or family, late adolescent victims of IPV, can further improve their self-esteem.

Conclusions

Based on the results of data analysis, it can be concluded that there is a significant positive relationship between perceived social support and self-esteem in late adolescent female victims of IPV, which means that the higher the perception of social support, the higher the self-esteem. This can be due to the perceived social support that affects how a person perceives a problem. Someone who has a good perceived social support will feel they have support and help in dealing with existing problems, resulting in feelings of security, confidence, avoidance of negative thinking, and ultimately can have higher self-esteem.

Furthermore, the results also found that the three dimensions of perceived social support, which are perceived social support from family, friends, and significant others, also had a significant positive relationship with self-esteem. This shows the importance of social support from family, friends, and significant others for IPV victims to increase their self-esteem.

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