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Adolescent Women with Experience of Dating Violence: Self-compassion and Posttraumatic Growth

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Abstract

The most frequently reported cases of violence in Indonesia are against women, and the second highest is dating violence. Similar to other traumatic events, violence leads to negative impacts. Conversely, previous research suggests that trauma survivors might experience positive changes, that is, posttraumatic growth (PTG). In fact, this study aims to determine the contribution of self-compassion to PTG among Indonesian adolescent women who have experienced dating violence; to ensure that all participants had experienced dating violence, we used the trauma and life events (TALE) checklist for screening. Self-compassion helps trauma survivors increase positive thoughts and seek meaning. Therefore, in this study, we argue that self-compassion augments PTG. The study is quantitative, with three questionnaires used: Self-compassion Scale-Short Form to measure self-compassion ($\alpha = .759$), Posttraumatic Growth Inventory-Short Form to measure posttraumatic growth ($\alpha = .643$) and Trauma and Life Events Checklist as the screening tool to ensure participants had experienced a traumatic event. A simple regression test revealed that among participants (n = 306), self-compassion significantly contributed to PTG by 12% (p = .000, R2 = .120). These findings can be used as a reference in establishing preventive programs or interventions to improve self-compassion and increase awareness about healthy relationships, especially among adolescents.

Keywords

adolescent women, dating violence, posttraumatic growth, self-compassion, trauma

akarta is the capital of Indonesia, which is the world's fourth most populous country (Iswara, 2021), with rapidly growing development. However, with cities' rapid development, problems often arise, one being violence. A dense city, such as Jakarta, must handle population growth and urbanization well, especially to protect its environment, but population density does not rule out unaddressed problems, including Indonesia's annually increasing cases of violence (Ilham, 2019). Relative to the objective of this study, the literature confirms that women are one of the most vulnerable groups (KemenPPPA, 2018).

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In 2016, Indonesia's Ministry of Women Empowerment and Child Protection or MoWECP (Kementerian Pemberdayaan Perempuan dan Perlindungan Anak KemenPPPA) and the nation's Central Statistics Agency (Badan Pusat Statistik) conducted a survey on occurrences of violence: 33.4% of women aged 15-64 had experienced physical violence, sexual violence, or both, and 2,090 of dating violence had occurred cases (KemenPPPA, 2018). Moreover, the reports of these agencies revealed that most violence happens in big metropolitan cities, such as Jakarta (KemenPPPA, 2016). MoWECP stated that women are more vulnerable to violence than other groups, and in Indonesia, the high incidence of violence against women is alarming. Furthermore, MoWECP explained that violence against women in Indonesia occurs

due to several socio-cultural factors, male and female partners hold traditional values and gender roles and place men superior to women (KemenPPPA, 2018).

In addition, women in their adolescence are common victims of violence. Adolescence is a transitional phase in human development during which individuals experience puberty, which leads to sexual attraction and maturity. Attraction manifests in several ways, mostly by establishing a relationship (Papalia & Feldman, 2015; Sembiring et al., 2014). In adolescence, then, dating is an essential aspect of social life. Most teens consider dating to be a process of getting to know a partner and fulfilling developmental tasks related to identity. Among others, one way adolescents achieve identity is through romantic relationships, from which they gain sexual awareness, which is vital to their identity, self-image, and interpersonal relationships (Papalia & Feldman, 2015).

Thus, dating or romantic relationships can be considered necessary for adolescents' growth and general socialization. Today, adolescents date more easily, mainly because of communication technology and online dating applications. During the last decade, the Internet, dating applications or "apps" (e.g., Tinder), and smartphones have transformed traditional pathways of socialization. In fact, by the end of 2019, more than 200 million people worldwide became active users of dating apps (Castro & Barrada, 2020). However, despite the popularity and ease, dating can negatively affect adolescents (Sembiring et al., 2014), sometimes through harassing or violent behavior-verbal, physical, and/or sexual (Anderson et al., 2012; Savitri et al., 2015; Teten et al., 2009). Similar to other traumatic events, dating violence can lead to short and long-term harmful consequences (Cobb et al., 2006), including psychological impacts – stress, excessive fear, and/or trauma – and physical impacts – injury, disability, and even death (Ariestina, 2009).

Previous studies examined negative effects of traumatic events, including those of violence. However, barring adverse effects, traumatic events can positively impact survivors although few studies have discussed positive effects as a consequence of traumatic or violent events. One positive change in individuals who have experienced violent incidents is posttraumatic

growth (PTG) (Helgeson et al., 2006), which is defined as a person's positive change after an extremely challenging experience. PTG takes for various forms, instance, greater understanding and appreciation of events, better interpersonal relationships, openness to life increased experiences, and spirituality (Tedeschi, 1999; Tedeschi & Calhoun, 2004). In addition, individuals who experience PTG report changes that actually improve their lives: greater appreciation of life, personal strength, and developments in spirituality (Tedeschi & Calhoun, 2004).

Cognitive processes are essential for PTG to occur. When individuals face a traumatic event, their cognitive schema (e.g., individual beliefs and assumptions about themselves, the future, safety, and good in the world) is likely to change to the negative (Wong & Yeung, 2017). During PTG, however, individuals exposed to trauma pay attention to growth by involving cognitive processes (Tedeschi, 1999; Tedeschi & Calhoun, 2004). Cognitive processing that facilitates PTG occurs by repeatedly interpreting an experience more positively, deliberately making new meanings, rebuilding a view of life, guiding the survivor to move forward again, and attempting to pinpoint the meaning of the adverse event. Some factors that influence PTG include emotional regulation, social support, disclosure, rumination (Tedeschi & Calhoun, 2004), personality (Tedeschi & Calhoun, 2004; Ulloa et al., 2015), and spirituality (Ulloa et al., 2015). Factors specific to violence that affect PTG include relationship status (Cobb et al., 2006), severity of violence (Ulloa et al., 2015), and duration of the relationship with the perpetrator (Giordano et al., 2010).

As a contributor to PTG, rumination, as related to cognitive processes, helps individuals in determining how they think and grow in better direction and achieve new life goals (Odou & Brinker, 2014; Tedeschi & Calhoun, 2004). Rumination functions better when individuals have high self-compassion (Odou & Brinker, 2014), which plays a role in cognitive processes, including those of trauma survivors. Self-compassion means kindness and concern toward oneself when faced with adverse events (Terry & Leary, 2011). Self-compassionate individuals pay attention to thoughts and feelings in a balanced state of consciousness; 31

they do not over-identify their thoughts and feelings or contemplate them excessively. Therefore, self-compassion is one variable that, through the cognitive process, can help individuals achieve PTG (K. Neff, 2003; Wong & Yeung, 2017).

Self-compassion helps individuals pay attention to and understand themselves; they can admit their failures, weaknesses, or mistakes and perceive themselves as typically human (Wong & Yeung, 2017). When trauma survivors feel self-compassion, they foster positive emotions in recalling adverse events and rearrange perceptions that changed due to traumatic events. Briefly, self-compassion can help survivors correct negative thoughts about themselves caused by traumatic events and help them find traumatic events' meaning as related to their psychological well-being (Marsh et al., 2018; Scoglio et al., 2015; Wong & Yeung, 2017). In turn, the search for meaning facilitates PTG (Basharpoor et al., 2020; Schulenberg et al., 2008).

When individuals are able to find meaning in an event, that meaning can affect mood, psychological pressure, and options of beneficial attitudes about life (Melton & Schulenberg, 2008). When an individual faces adverse events, such as violence, self-compassion can reinforce and help develop positive characteristics for recovery and future growth (Hidayati, 2018). PTG requires positive thinking for facing and recovering from adverse events (Tedeschi & Calhoun, 2004).

Self-compassion functions to protect individuals from negative impact after a traumatic event (Zeller et al., 2015) because individuals with self-compassion tend to use adaptive strategies to address negative experiences and overcome trauma (Allen & Leary, 2010). Self-compassion helps individuals increase their tolerance of negative experiences and not deal with them passively or evasively (Valdez & Lilly, 2014). In other words, selfcompassion is related to trauma survivors' resilience and recovery.

As explained previously, self-compassion helps trauma survivors by correcting their negative thoughts about themselves (Scoglio et al., 2015). This relates to a domain of PTG, perception of oneself that changes owing to traumatic events; that is, self-compassion can motivate individuals toward positive growth (Neff, 2011). One factor influencing PTG is how trauma survivors manage negative thoughts. Individuals with high self-compassion can often control their negative emotions, and self-compassion is indeed the opposite of negative thinking (Scoglio et al., 2015).

Given this background, we aimed to define contribution of self-compassion to PTG among adolescent women with dating violence experience. In Indonesia, violence continues to increase with passing year, especially among adolescents, prompting our research. In Indonesia, hitherto, few studies have examined PTG and self-compassion, especially among adolescent women who experience dating violence.

Methods

Participants and Procedure

This study had two criteria for participants: 1) adolescent women (aged 15–20) and 2) experience of dating violence, either currently or previously. After participants signed informed consent, they completed the questionnaires distributed through various social media platforms (e.g., Instagram, Twitter, WhatsApp), and their data was collected online via Google Forms.

The study used purposive sampling, that is, we sought eligible participants who had the necessary information and were willing to share it (Kumar, 2011) through social media, relevant communities, or people we know. After participants met the two criteria, we requested their informed consent and subsequently provided research questionnaires. To ensure that all participants had experienced dating violence, we used the trauma and life events (TALE) checklist for screening. After screening, we further analyzed the data of 306 participants using JASP version 0.11.1.

On average, participants' age was 17.5 years (SD = 1.87). Most lived in the Jakarta Greater Area (Jabodetabek) and had completed high school (90.35%). The most frequent type of violence reported was psychological, and more than 90% of participants were exposed to more than one incident. Most participants' relationships had lasted less than 12 months, and the majority of participants had ended their rela-

tionship with the perpetrator (ex-boyfriend). Some, however, had not.

Measurement Instruments

The TALE Checklist. We used the TALE Checklist, developed by Carr, Hardy, and Fornells-Ambrojo (2018), as the screening tool to ensure participants had experienced a traumatic event, particularly, dating violence. The TALE Checklist's 20 items ask details about the traumatic event, for example, the participant's age at the time, number of occurrences, and whether the event occurred repeatedly (Carr et al., 2018).

Self-compassion. We employed the selfcompassion scale-short form (SCS-SF) by Raes, Pommier, Neff, and Gucht (2011), comprising 12 items rated on a 5-point Likert scale from Never (1) to Always (5). According to Raes et al. (2011), the SCS-SF has adequate internal consistency (a = 0.86) and correlation similar to SCS ($r \ge 0.97$). The SCS-SF has three dimensions: self-kindness, common humanity, and mindfulness (Raes et al., 2011). Examples of SCS-SF items are, "Saya mencoba memahami dan bersabar atas aspek kepribadian saya yang tidak saya sukai" ("I try to understand and be patient with parts of my personality I don't like"); "Saya mencoba melihat kegagalan saya sebagai hal yang manusiawi" ("I try to see failure as part of something human"); and "Ketika gagal dalam suatu hal yang penting, saya cenderung merasa sendirian dalam menghadapi kegagalan" ("When I fail at something important, I feel very unworthy").

We adopted the SCS-SF by first translating it into Indonesian, that is, forward translation. Subsequently, a translator back-translated it (Indonesian into English). Then, we conducted expert judgment to ensure its validity, and after that, we conducted a trial and a readability test with four readers who met the participant criteria. The readability test found one item somewhat difficult to understand, compared to others. The item was initially worded, "Saya tidak tidak menoleransi dan menerima aspek kepribadian saya yang tidak saya sukai," but after extended discussion, we changed the wording to "Saya tidak bisa menerima beberapa aspek kepribadian saya yang tidak saya sukai." The next step was a trial with 60 participants who met the study criteria. According to Guilford, a high reliability coefficient indicates the value of α^{3} 0,6 (Nasrah et al., 2015) and the reliability of SCS-SF confirmed with Cronbach's alpha (α = .758), and corrected inter-item correlation produced scores from 0.224 to 0.538.

PTG Measurement. To measure PTG, we employed the posttraumatic growth inventoryshort form (PTGI-SF) by Cann, Calhoun, Tedeschi, Taku, Vishnevsky, Triplett, and Danhauer (2010). The PTGI-SF comprises 10 items rated on a 6-point Likert scale (0-5), representing response to adversity, from (0) Not Experiencing Changes to (5) Experiencing Change to a Great Degree. The PTGI-SF has five dimensions: appreciation of life, relationship with others, personal strength, new possibilities, and spiritual development (Cann et al., 2010). Examples of items on the PTGI-SF measurement tool are "Saya lebih menghargai nilai-nilai-nilai yang saya anut dalam hidup saya" ("I have more respect for the values that I embrace in my life"); "Saya merasa lebih dekat dengan orang lain" ("I feel closer to other people"); and "Saya belajar banyak tentang betapa mengagumkannya orang -orang" ("I have learned a lot about how wonderful people are"). According to Cann et al. (2010), the PTGI-SF is reliable ($\alpha = 0.90$).

We adopted the PTGI-SF by first translating it into Indonesian, that is, forward translation. Subsequently, a translator back-translated it (Indonesian into English). Then, to ensure its validity, we conducted expert judgment and a readability test (n = 4), which found that one item needs revision. The original Indonesian translation was "Saya mengubah prioritas saya mengenai hal-hal penting dalam hidup saya," which was revised to "Saya mengubah urutan hal-hal penting dalam hidup saya." Next, we conducted a pilot test with 60 participants who met the study criteria. According to Guilford, a high reliability coefficient indicates the value of a ³ 0,6 (Nasrah et al., 2015) and the reliability of PTGI-SF confirmed with Cronbach's alpha (a = .643), and corrected inter-item correlation produced scores from 0.205 to 0.492.

Data Analysis

First, we performed the classical assumption test using the normality test with the Kolmogorov-Smirnov test and the linearity test with ANOVA. To test the hypothesis, we conducted simple regression to predict a variable's values, resulting from responses of other variables (Levine & Stephan, 2015). Additionally, we conducted an independent t-test to determine the factors influencing demographic variables (e.g., relationship status to PTG).

Results

Before testing the hypothesis with a simple regression test, we conducted an assumption test using a normality and linearity test. The normality test was the Kolmogorov-Smirnov test, as summarized in Table 1. A normality test with a significance value of p > 0.05 shows that data is normally distributed (Levine & Stephan, 2015), and this results of this study demonstrated normal distribution (p = 0.064). Next, we tested data linearity, confirming that self-compassion and PTG have a linear relationship (p = <.001). Subsequently, the multicollinearity test showed no symptoms in the second variable. Finally, we conducted a trial using Pearson's product moment (Table 1), which revealed a significant positive relationship between the self-compassion and the PTG variable (r = .319 **, p <.001).

After the assumption test requirements

Table	1 . Ass	umption	Test
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Variable	PTG Self-Compassion		
K-SZ	.05		
Asymp. Sig. (2-tailed)	.064		
F Linearity	34.751		
Sig. Linearity	<.001		
VIF Multicollinearity	1.000		
Tolerance	1.000		
Pearson's r	.319**		
Sig. Correlation	<.001		

were fulfilled, we tested the hypothesis using simple regression analysis. Table 2 shows the significant role of 12.0% in self-compassion (p < .000, R2 = .120).

Based on previous studies, we conducted t-

Table 2. Main Analysis (Regression)

tests on factors that influence demographic variables to determine factors affecting the research variables. Independent t-test scores (Table 3) showed significant differences according to relationship status (p < .001), and PTG scores were significantly higher among participants who had ended their relationships with their violent partners (M = 40,787, SD = 5,909) than those participants who continued the relationship with their violent partners (M = 36,912, SD = 6,569).

Table 3. Additional Analysis (t-Test)

Demographic Data	p of PTG	<i>p</i> of Self- compassion
Relationship status	<.001*	0.061
Still dating/Already		
ended relationship		
Frequency of expo-	0.188	
sure to dating vio-		
lence		
Once/Repeated		
Duration of Relation-	0.013	
ship		
0–12 Months		
12-24 Months		
>24 Months		

Discussion

The research findings of this study indicate a significant relationship between self-compassion and PTG. Furthermore, regression test results confirmed self-compassion's significant role of 12.0% (p = .000, R2 = .120) toward PTG. In other words, the variance of self-compassion as a predictor explained 12.0% of PTG's variance, with 88% influenced by factors other than self-compassion.

With its vital role in the recovery process, self-compassion can be a valuable resource in dealing with adverse life events (Allen & Leary, 2010). Kaurin et al. (2018) made a similar point after examining how self-compassion helps in curbing feelings of suffering in traumatic events, for instance, a depressive episode. The study

Variable	R	R-Square	Std. Error	F	Sig.
PTG-Self-compassion	.346	.120	1.634	41.304	,000

involved firefighters perceived to have highintensity exposure to traumatic events, and results suggest that self-compassion can act as a buffer against depressive symptoms caused by exposure to traumatic events. Self-compassion can transform negative feelings into behaviors that support such adaptation as calming and caring for oneself (Kaurin et al., 2018).

Among adults abused as children, Basharpoor et al. (2020) studied tolerance for distress and self-compassion along with PTG. The researchers found that self-compassionate individuals tended to be optimistic about every experience that occurred in their lives. While facing a crisis, such individuals prioritized finding the meaning of the event, thus aiding PTG. Therefore, self-compassion was found to have a positive relationship with PTG (Basharpoor et al., 2020). Briefly, self-compassion of trauma survivors helps them face critical situations, endure traumatic events, and further their PTG.

Wong and Yeung (2017) further explained the role of self-compassion in PTG with a sample of students (average age: 22) who experienced various crises or adverse life events, such as illness, abuse, natural disasters, economic hardship, accident, or loss of loved ones. Their study used cognitive processing media in finding that highly self-compassionate individuals tended to have relatively higher ability to accept situations and to consider adverse events more positively, thus embarking on a search for meaning in life (Wong & Yeung, 2017). Moreover, in line with previous research, our study aimed to discover self-compassion's contribution to PTG. Contrary to previous studies involving participants who had suffered various traumatic events, we targeted a specific group: adolescent women who had experienced dating violence, based on Indonesian data showing that adolescents are the most frequent victims of violence against women.

Apart from these negative impacts, traumatic events, such as dating violence, yield an opportunity to positively impact survivors via PTG. Indeed, self-compassion can help control negative thoughts after a traumatic event (Odou & Brinker, 2014). Furthermore, Guerette and Caron (2007) interviewed survivors of sexual violence, most of whom, despite profound (negative) impact on their lives, reported positive changes as well, such as stronger feelings, increased empathy, and better interpersonal relationships. In addition, various factors influence PTG, for example, cognitive factors—how individuals manage pressure and rumination related to the event. Self-compassion can help individuals think positively, and cognitive processes help individuals rebuild and newly construct a picture of life that guides them toward new insights after an adverse event (Tedeschi & Calhoun, 2004). Newly created positive thoughts aid PTG; thus, self-compassion mitigates negative thinking (Scoglio et al., 2015).

After a traumatic event, women experience negative changes; therefore, self-compassion is essential to help them recover from and interpret the event (Smith, 2003). Smith's (2003) study revealed that after a traumatic event, selfcompassionate women became more independent and assertive; they were able to "find themselves," to know what they wanted, and to focus better on their life's purpose. Ultimately, while recovering from violence, individuals tend to isolate themselves; therefore, it is important for them to increase self-compassion.

While facing traumatic events, individuals with self-compassion are kind and attentive to their feelings and do not overly identify themselves with those feelings (Karakasidou & Stalikas, 2017). Meanwhile, PTG affects individuals' well-being and can be influenced by how they manage their thinking. Increased selfcompassion mitigates individuals' negative thinking while enhancing their self-attention and self-acceptance (Scoglio et al., 2015; Wong & Yeung, 2017). In addition, self-compassion helps individuals interpret life events and in turn, better direct efforts toward life goals (Smith, 2003).

Despite their youth and unique characteristics, adolescents have developed some knowledge of how they deal with life events. Even so, they are often still conflicted, leading to possibly unpleasant experiences (Sarwono, 2018). Overall, nevertheless, self-compassion is crucial for adolescents (Cunha et al., 2016) because if they love themselves, they can view mistakes and failures in a balanced way, avoid self-criticism, and increase feelings of support for themselves. These effects can help them face various challenges resiliently and achieve positive well-being in various life contexts (e.g., family, school, friendships, interest groups) (Cunha et al., 2016; K. D. Neff & McGehee, 2010). Moreover, self-compassion is associated with increased appreciation and acceptance of life, higher happiness levels, and greater life satisfaction (Barnard & Curry, 2011; Marsh et al., 2018). In short, self-compassion is related to an individual's well-being.

After a traumatic event, individuals tend to display various negative responses that include painful internal experiences and ineffective problem-solving strategies (Valdez & Lilly, 2014). Conversely, self-compassion motivates individuals to grow and change adaptively and aids cognitive processes, especially in search of meaning (Neff, 2011; Smith, 2003; Wong & Yeung, 2017), which significantly influences PTG (Basharpoor et al., 2020). Traumatic events can destroy individuals' assumptions about their world or themselves; furthermore, they can affect trauma survivors' cognitive processing, especially when they seek new meaning in life. When the meaning is found in an event, however, a new view of themselves and the world emerges, in turn, enabling positive change (Linley & Joseph, 2004).

This research focused on positive changes experienced by dating violence survivors. In PTG, many aspects can act as supporting factors, one of which is the cognitive or reflective process (Tedeschi & Calhoun, 2004). Cognitive processes relate, in turn, to how individuals determine their type of thinking. In the cognitive process, individuals may develop a thought that makes them reflect too profoundly, resulting in negative thought (Odou & Brinker, 2014). Therefore, the cognitive process can be assisted by increasing self-compassion to achieve mindfulness or a state in which individuals realize, pay attention to, and balance thoughts regarding an event or situation without excessive contemplation (Neff, 2003). As already discussed, the results of this study align with previous research, which states that self-compassion has a contributing role in PTG (Wong & Yeung, 2017). Moreover, this study found that adolescent women who faced violence in dating could experience PTG. Furthermore, participants who were still in a relationship with the perpetrator could show moderate to high levels of PTG. Thus, PTG can develop in various aspects and ways, including increased sense of personal power, changes in priorities, and spiritual and existential life (Tedeschi & Calhoun, 2004).

Regarding violence in an intimate setting, Cobb et al. (2006) stated that PTG would arise significantly after the toxic relationship had ended. However, some individuals who have not left the relationship and still receive significant pressure from the partner also experience PTG (Grubaugh & Resick, 2007). Our study found that participants still in a relationship with boyfriend-perpetrators reported moderate to high PTG scores. Possibly, they recognize threats (partner violence), attempt to obtain support from others, then interpret these events, and try to leave the relationship (Smith, 2003). We suggest further studies to examine this phenomenon more closely.

This research has several strengths. First, it revealed another factor among the target population: Participants still in a violent relationship can show positive change at moderate to high levels. With our relatively large sample (n > 300), we used the TALE Checklist to ensure all participants had indeed experienced dating violence. Related to the latter, and unlike previous studies that used non-specific samples, the narrowly focused sample of this study is it's another strength. Last, the research topic is rarely discussed in Indonesia; thus, the study adds crucial information to the literature on violence against women.

In addition to its strengths, this study has some weaknesses. The study did not measure variables that influence both PTG and selfcompassion as a whole; for instance, attachment style, environment, and parenting style (Neff & McGehee, 2010). These factors were not included in our questionnaires, so we could not test them further.

Conclusions

Traumatic events, including dating violence, can have both negative and positive impact. Unlike previous studies, however, this study particularly examined PTG as a probable positive impact among dating violence survivors. The main finding of the study indicates self-compassion's significant PTG role of 12.0% (p = .000, R2 = .120). The higher participants' reports of selfcompassion, the higher the PTG scores. Additionally, the study found that participants have the opportunity to experience positive changes in themselves even while being in a relationship with a perpetrator boyfriend. Further research is needed on PTG among dating violence survivors, especially among those who have not severed their ties with perpetrator partners.

Declaration of Conflicting Interest. The authors declare no conflicting interest.

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