

## Experience of Domestic Violence Survivor Women in Searching Their Life Purpose and Self-Resilience

Laura Khatrine Noviyanti<sup>1</sup>, Achir Yani S. Hamid<sup>2\*</sup>, Novy H.C. Daulima<sup>2</sup>

1. Institute of Health Science Telogorejo Semarang, Semarang 50144, Indonesia.

2. Department of Mental Nursing, Faculty of Nursing, Universitas Indonesia, Depok 16424, Indonesia.

### Abstract

Victims of intimate partner violence (IPV) often experience several psychological disorders, such as anxiety, low self-esteem, and depression, driving them to a point where they lose their life purpose. Resilience implies the ability of victimized women to adapt to their stressful situations or recover by regaining the balance among their physiological, psychological, and social aspects of life. Those who attain self-resilience are called survivors—a phenomenon that has been scarcely investigated regarding the discovery of life purpose and self-resilience of women who are survivors of IPV in Central Java. Thus, this study aims to gain insight into the experience of IPV survivors in discovering their life purpose and self-resilience. We conducted qualitative research on six IPV survivors and determined four themes—self-reliance and bravery marking the beginning of life recovery, support from the closest person who provides strength, coping strategies used for the survival, and learning from experience to reinforce future goals. This study recommends mental health nurses to act as counselors for IPV survivors to support them in their recovery phase to enhance the mental health of patients.

Clinical article (J Int Dent Med Res 2019; 12(1): 299-304)

**Keywords:** IPV, women.

**Received date:** 25 August 2018

**Accept date:** 30 September 2018

### Introduction

To date, gender issues remain an extensively discussed topic, especially concerning the equality of both genders, regarding either their social standings or the status of women. Conceptually, although the Indonesian society has accepted the idea of emancipation, the implementation has not been as ideal as speculated. The follow-up agenda of the Sustainable Development Goals (SDGs) emphasizes on the existence of women, resulting in the establishment of global goals along with its indicators, which are projected to be implemented and supervised during 2015-2030. Furthermore, one of the goals of SDGs is gender equality and women's and girls' rights in pursuit of eliminating human rights violations.<sup>1</sup> Accordingly, the 2004

Constitutions Act number 23 states that violence against women is an act which causes physical, sexual, and psychological harm, including threatening, coercive, or deprivation of liberty, and applies not only to public domains but also their private lives.

Regrettably, only some women attempt to free themselves from the adversity that occurs because of intimate partner violence (IPV) by seeking meaning of their life. A study reported that those who found their meaning of life choose to pursue their purpose of life, positively affecting other individuals, society, and surrounding environment.<sup>2</sup> Broadly, the purpose of life signifies the meaning of life comprising both pleasant and unpleasant experiences and happy or sad circumstances.<sup>3</sup> Another study reported that the process of discovering the meaning of life commences with self-acceptance, changing attitude, and eventually determining the purpose of life to recover from unpleasant events.<sup>4</sup>

Resilience is defined as the ability of IPV survivors to determine their purpose in life and harness the ability to recover from the stress they experienced. A study reported that resilience is a situation of enduring the

#### \*Corresponding author:

Achir Yani S Hamid  
Department of Mental Health Nursing  
Faculty of Nursing, Universitas Indonesia  
Depok 16424, Indonesia  
E-mail: achir@ui.ac.id

adaptation of stress or events with the person exhibiting the capability to recover.<sup>5</sup> Resilience is characterized by the ability to regain a balance among physiological, psychological, and social aspects and display the tendency never to quit striving on in their quest to face difficulties. Those who are resilient and display the capability of survival are called the survivors.

Previously, a research was conducted on the life experience and self-resilience of women who were victims of IPV.<sup>6</sup> Using the descriptive phenomenology research method to depict the resilience experience, the study identified the following three themes: change toward resilience; change in experience to overcome stress; and change in a positive direction. Likewise, another study investigated IPV survivors displaying resilience and enrolled participants who had already overcome difficulties posed by IPV and had a new life;<sup>7</sup> the study identified the following four themes: trust, insight, limited, and independence.

The novelty of this research lies in the fact that it aims to determine the process of discovering the purpose of life and resilience among IPV survivors, which, to the best of our knowledge, has never been investigated earlier. In addition, this study aims to observe factors contributing to the resilience of IPV survivors comprehensively.

## Materials and methods

### Study design

In this study, we used the qualitative and descriptive phenomenology approach.<sup>8</sup> We selected qualitative method for the in-depth analysis of IPV survivors' experience. Hence, this study used the descriptive or transcendent phenomenology comprising four stages: bracketing, intuiting, analyzing, and describing.<sup>9</sup>

### Participants' enrollment

We used the purposive sampling technique based on the orientation of research objectives and in accordance with the inclusion criteria of pre-determined participants.<sup>10</sup> In addition, we obtained participants' data from Division Team of LRC-KJHAM. We enrolled six participants who had undergone a self-esteem component screening based on Coopersmith (1993), which has been revised and translated by Hari in 2008 and comprises 40 questions to

elucidate positive changes. The self-esteem screening revealed that >80% of these six participants displayed high self-esteem<sup>11</sup>. In addition, the criteria-based selection of participants tailored to the objectives of this study were as follows: (a) aged 20-40 years; (b) married women; (c) profiled as a victim of IPV  $\pm 2$  years ago; (d) willing to inform personal IPV-related experience; and (e) experienced positive changes in the emotional status and adjustments in their daily life.

### Data collection

We performed the data collection at the Legal Aid Institution of LRC-KJHAM (Semarang, Indonesia), at participants' house or a cafe. After completing the data collection for each participant, the interview results were converted to transcripts and proceeded for data analysis. The process of collecting data through in-depth interviews was conducted from December 28, 2016, to January 01, 2017. Furthermore, the report was compiled from early January till the end of March 2017. Please specify whether any approval from any authority, such as Institutional Review Board or Ethics Committee, was required before commencing this study.

### Data analysis

In this study, we used Colaizzi's approach<sup>11</sup> for the data analysis (1) to create the verbatim version of participants' interview results and re-read participants' descriptions based on the phenomenon to gain perceptions of their experience and elucidate the experience; (2) extract crucial statements directly associated with the phenomenon researched; (3) formulate the definition of remarkable results in pursuit of determining hidden meanings; (4) categorize the significance in theme groups and validate consistency between the findings and the story of participants without disregarding unfit data; (5) integrate findings with a comprehensive description of the phenomenon researched, describe keywords including text segments as a topic, comparing consistent theme topics, and relate themes of consistent significance that seemingly form themes; (6) validate findings by returning to participants to ask general descriptions, which are then compared with their personal experience; and (7)

incorporate the changes that participants stated in the final description of the phenomenon.

### Ethical considerations

In this study, participants comprised women who were IPV survivors and considered as the vulnerable group; hence, it was necessary to protect their rights. As the ethical considerations of the research were a matter of concern for researchers, participants were protected considering the aspects of *autonomy, anonymity, confidentiality, justice, beneficence, and non-maleficence*.<sup>9</sup> Of note, this study does not pose life-threatening dangers to participants. We used participants' code in each research report, except for the letter of consent that used participants' initial name. In addition, the *Anonymity Principle* was fulfilled by using code—P1 for the first participant, P2 for the second participant, and so on until the sixth participant—rather participants' names or initials. *The Principle of Confidentiality* was adhered by storing the data collected in a safe place and was only accessible to researchers. Besides, data were analyzed and stored in a safe place. All researchers held unique passwords only known to them. Moreover, the recording data were stored in the Gmail Dropbox program and will be erased after 5 years, in accordance with Permenkes number 269 / MENKES / PER / III / 2008 about Medical Record chapter IV article 8 paragraph 2. Next, *Justice* implies that all participants received equal treatment and rights to participate in the study.<sup>10</sup> In this study, we strived to fulfill the *principle of beneficence* by avoiding possible questions that could cause discomfort to participants and stimulate emotional outbreaks. Notably, researchers did not force participants to express details they did not wish to divulge.

### Results

#### Participants' characteristics

In this study, we enrolled six participants (all females; age range: 36-48 years). Regarding the marital status, three were widows, two were married and still living with their husband (perpetrators), and one had decided to remarry. The educational status of participants varied from elementary school to high school graduates. On average, participants had

experienced IPV for >10 years. The leading form of IPV reported was psychic violence, followed by economic violence.

### Themes

This study identified four themes associated with the experience of life-purpose discovery and self-resilience of women, from the moment they were victims till they became an IPV survivor. The themes identified in this study were self-reliance and bravery marking the beginning of life recovery, the support of the closest person who provides strength, coping strategies used for the survival, and learning from the experience to reinforce future goals.

### Discussion

#### Self-reliance and bravery marking the beginning of life recovery

IPV is considered a life event that triggers stress, trauma, depression, and low self-esteem among victims.<sup>12</sup> A study explained that individuals with low self-esteem often assume that life is meaningless and possess no control over their life and often experience no life satisfaction.<sup>13</sup> Women begin gaining independence as they experience behavioral changes. Another study applied the *transtheoretical model*, in which victims deliberately change their behavior in pursuit of "freedom".<sup>14</sup> Behavioral changes comprise the following five stages: (1) *precontemplation* where victims have no intention to change; (2) *contemplation*, thinking about change without taking any action to actually attain the situation; (3) *preparation*, seriously considering the change that is going to happen; (4) *action*, active involvement by victims in a change, for instance, having the intention and courage; and (5) *maintenance*, when one maintains the change for, at least, 6 months. In the final phase, a victim leaves her husband (the perpetrator) with no intention to return to her once significant other half.

In this study, P1-P4 left their spouses to ensure their physical safety and protect their children because they wanted to gain their freedom and recover from the violence that they endured in their lives. The proclamation of gaining freedom is supported by a previous study,<sup>15</sup> in which authors stated that victims

would proceed to a period of self-recovery to improve their self-awareness, life goals, and identity as a survivor.

The self-recovery process is essential in finding the purpose of life. Prior research stated that the process of recovery, by restarting their life from scratch, rebuilding, and reconstructing life after a violent relationship cannot disregard the power of bravery within them.<sup>16</sup> Reportedly, the self-recovery process of IPV undergoes the following four phases: *binding*, *enduring*, *disengaging*, and *recovering*.<sup>12</sup> *Binding* is the very first moment when violence occurs. *Enduring* is building a tolerance toward violence to maintain a cordial household relationship. *Disengaging* is the moment a victim begins to experience an emotional shift between loyalty toward her partner, herself, and her survival; in addition, the victim begins to identify herself as a woman who is harassed and hurt. Finally, *recovering* is the initial recovery period after a woman separates from her partner until she regains balance in her life. Furthermore, good adaptability is one of the primary characteristics of self-resilience. Reportedly, resilience is a term often used to describe one's ability to maintain a balanced state while facing challenges and is used to describe the ability to revitalize from adversity after a trauma.<sup>17</sup>

#### **Support of the closest person who provides strength**

Support from the closest person constitutes part of an effective support system that provides strength and protection when one is experiencing stress. The process of support selection comprises an assessment in which participants believe the support provider will provide them with the support that fulfills their expectations. Other factors desired include privacy, stigmatization, the severity of violence, and prerequisites to ending the relationship with their husbands to receive assistance.<sup>18</sup>

The source of support is further classified into formal support and informal support. The formal support is gained from community organizations (e.g., Integrated Service Center/PPT and police) and private organizations (e.g., medical professionals, nurses, and psychologists). Conversely, the informal support can be obtained from family, close friends, and spiritual leaders.<sup>19</sup> The

closest person's support relies on family and close friends as the primary source of the informal support, whereas community supports are, for example, PPT LRC-KJHAM or Sekartaji Community, the Rosary Prayer Program (KDR), and Family Welfare Development (PKK).

Reportedly, the family constitutes the primary support system in the recovery process.<sup>20</sup> In this study, P1–P5 stated that their family provided them with the support and comfort that they needed at the time. A study reported that should there be any community member who experienced a similar event, they will provide each other with the strength to recover from their prior experience;<sup>21</sup> this behavior is demonstrated by IPV survivors who joined the Sekartaji community where they shared and supported each other.

#### **Coping strategies used for the survival**

Coping strategies are behaviors that help an individual to handle the situation with the intention of solving the problem. A study reported that coping is more dynamic rather than static.<sup>22</sup> Lazarus and Folkman<sup>23</sup> categorized the coping strategy into two types: emotion-focused coping and problem-focused coping. While the emotion-focused coping is the ability to handle stressful situations to overcome the suffering and manage emotions, the problem-focused coping attempts to solve problems by reducing stress factors.<sup>24</sup>

When determining the coping strategies for women, it also reflects the prevailing cultural norms and the status of women in the community, given their weak position, especially in regions that hold the patriarchal culture. In the patriarchal culture, women tend to use emotion-focused coping strategies compared with the other.<sup>23</sup> The examples of emotion-focused coping strategies include using religion, avoiding husbands, and seeking emotional support from families. In this study, participants P3, P5, and P6 used emotion-focused coping strategies in pursuit of spiritual support by performing religious rituals such as prayer, invocation, thanking the God, participating in religious activities such as the Rosary Prayer Activities (KDR), or recitation. A study explained that positive spiritual coping offers the strength that helps individuals to survive in dire problematic situations and helps them to find a meaning of life as a form of solace so

that victims can manage their accumulated emotions.<sup>25</sup> In addition, a defensive ego-oriented coping occurs unconsciously that is often used in repressive manners. The use of defensive ego-oriented coping strategy is supported in a previous study,<sup>26</sup> which reported that victims used the defensive-ego mechanism to repress unpleasant experiences from the past by participating in positive activities.

Another emotional control method used by participants is using catharsis techniques. A study reported that catharsis is the purification or cleansing of emotions associated with sadness, fear, or tension if it is to be associated with the psychological world.<sup>27</sup> In addition, catharsis is defined as a technique used to relieve tension and anxiety by consciously suppressing one's feelings. In this study, most participants consciously suppressed their feeling to ease the tension they experienced by praying as a form of emotional "cleansing," counseling, and engaging in hobbies as desired by participants. This finding is in accordance with previous research,<sup>28</sup> which described that the situation of fear and tension could be changed by distraction, expressing emotions to others, and expressing emotions creatively like engaging in art or hobbies. In this study, P3, P5, and P6 were more likely to depend on their religious practices to control their emotions, whereas P2 and P6 used hobbies such as reading books and painting.

Based on a prior study,<sup>29</sup> the characteristics of participants with resilience are (1) individuals who hold positive aspects such as demonstrable skills, high social life, and positive self-concept; (2) family support that remains tightly tied up to date; and (3) external support systems besides the family. Apparently, all participants were tough individuals who displayed optimistic characteristic, were emotionally stable, and had a more meaningful view of life. Besides, the family is a good source of support, both materialistic and emotional wise. Furthermore, supports can be drawn not only from the family but also from social life as shown in each community.

#### **Learning from experience to reinforce future goals**

A study reported victims as survivors who held hope for the future.<sup>30</sup> Such motivation helps survivors to attain what they desire in a

quest to achieve their life goals. In addition, these ideals provide confidence to move forward and prudently plan strategies to attain their goals. Moreover, these survivors can find other alternatives in attaining the purpose of their life when faced with an obstacle in attaining a goal.<sup>30</sup> The purpose in life can be attained in several ways as follows: (1) possess positive energy (from within oneself) and (2) having a way or other alternatives to attain life goals that help them to become a survivor for a long time. In this study, most participants stated that they wanted to be an independent woman and not depends on others (husband or ex-husband).

Reportedly, the strength attribute of survivors and virtues positively affect individuals to develop and feel happy.<sup>14</sup> The characteristics of virtue are as follows: (1) cognitive strength that requires learning and use of one's knowledge; (2) emotional strength that comprises the use of motivation to attain the purpose of life; (3) interpersonal forces that encourage relationships and cooperation with others; (4) support of others that contributes one's ability to positively affect others; (5) the ability to provide protection against extreme behavior; and (6) the spiritual connections that encourage survivors to facilitate a meaning within themselves. Perhaps, when an IPV victim receives support from other IPV survivors, she will more likely express a healthy coping behavior, facilitating the improvement in their current understanding; in addition, it reflects the assimilation between survivors' significance and the victim and appreciates it as life experience.<sup>14</sup>

#### **Conclusions**

This study identifies four themes to support women who are survivors of IPV. The first theme is self-reliance and bravery that marks the beginning of life recovery and describes freedom as the initial response to gain independence from domestic violence. The second theme is the support of the closest person who gives strength. The third theme is the coping strategy used for the survival. Finally, the fourth theme is learning from the experience to reinforce future goals, helping survivors to regain their sense of control and self-defense in their personal lives through women empowerment activities. Overall,

participants display virtues by helping others who share the same fate to strengthen and transform their understanding as a survivor.

### Acknowledgments

Researchers would like to express sincere gratitude and acknowledge PITTA Research Grants 2017 of Directorate of Research and Community Service (DRPM) team of Universitas Indonesia who support the International Publications Grants in the quest to increase the number of international publications as proof of institution's research quality.

### Declaration of Interest

The authors report no conflict of interest.

### References

1. Unstats. The World's Women 2015. Available at: <http://unstats.un.org/unsd/gender/worldswomen.html>. Accessed July 21, 2016.
2. Poettcker J. Defending the purpose theory of Meaning in Life. *J Philos Life*. 2015;5(3):180-207.
3. Froese. On purpose how we create the meaning of life. New York: Oxford University press;2016.
4. Bastaman. Logoterapi: psikologi untuk menemukan makna hidup dan meraih hidup bermakna. Jakarta: PT. Raja Grafindo;2007.
5. Reich JW, Zautra AJ, Hall JS. Handbook of adult resilience. *Zhurnal Eksperimental'noi i Teoreticheskoi Fiziki*. Available at: <http://scholar.google.com/scholar>. 2010.
6. Crann SE, Barata PC. The experience of resilience for adult female survivors of intimate partner violence: A phenomenological inquiry. *Violence Against Women*. 2016;22(7):853-75.
7. Hyland DL. Constructing safer lives: Women who display resilience in responding to intimate-partner violence (IPV). State University of New York: The College at Brockport;2014.
8. Creswell. Research design: pendekatan kualitatif, kuantitatif dan mixed. Yogyakarta: Putaka Pelajar; 2013
9. Polit DF, Beck CT. Nursing research: Generating and assessing evidence for nursing practice. Philadelphia: Wolter Kluwer Health;2012.
10. Afiyanti, Rachmawati. Metodologi penelitian kualitatif dalam riset keperawatan. edisi 1. Jakarta: Rajawali Pers;2014.
11. Chesnay MD. Nursing research using phenomenology: qualitative designs and methods in nursing. New York: Springer Publishing Company, LLC;2015.
12. Roy M. The impact of resilience and recovery among the survivors of domestic violence: A perspective study of women in the Indian context. *Indian J Heal Wellbeing*. 2014;5(12):1487.
13. Błażek M, Besta T. Self-Concept Clarity and Religious Orientations: Prediction of Purpose in Life and Self-Esteem. *J Relig Health*. 2012;51(3):947-60.
14. Young MD. Finding meaning in the aftermath of trauma: Resilience and posttraumatic growth in female survivors of intimate partner violence. *Diss Abstr Int Sect B Sci Eng*. 2007;68(3-B):1951.
15. Evans I. Battle-scars: Long term effects of prior domestic violence. *Cebtre for Women's Studies and Gender Research: Monash University*; 2007:1-60.
16. Scott DC. Flying forward while looking back an autoethnography on the journey of recovery from intimate partner violence. *Drexel University*;2011.
17. Cordero A. Understanding experiences of female survivors of domestic violence: Stories of strength, resilience, and mechanisms that assist in leaving violent relationships. *Utah State University* 2014;1-220.
18. Cendejas JY. The role of emotional social support on depression and self-esteem among latinass who have experienced domestic violence. *ProQuest LLC*; 2012.
19. Liang B, Goodman L, Tummala-Narra P, Weintraub S. A theoretical framework for understanding help-seeking processes among survivors of intimate partner violence. *Am J Community Psychol*. 2005;36(1-2):71-84.
20. Stuart. Principles and practice of psychiatric nursing (10th ed). St. Louis Missouri: Elsevier Mosby;2013.
21. Collette AK. Reclaiming "victim" through untold stories : an analysis of the personal stories of women who have survived violence by Ashley K. Collette A Thesis submitted to the Faculty of the Graduate School, in Partial Fulfillment of the Requirements for the Deg. 2012
22. Warner H. Intimate partner violence: wha ethnicity, coping strategies, ant makes a difference? A study of the impact of disability with intimate partner violence survivors. California; 2010
23. Zakar R, Zakar MZ, Krämer A. Voices of Strength and Struggle. *J Interpers Violence*. 2012;27(16):3268-98.
24. Sullivan TP, Schroeder JA, Dudley DN, Dixon JM. Do differing types of victimization and coping strategies influence the type of social reactions experienced by current victims of intimate partner violence? *Violence Against Women*. 2010;16(6):638-57.
25. Blakey JM. The role of spirituality in helping African American women with histories of trauma and substance abuse heal and recover. *Soc Work Christ*. 2016;43(1):40-59.
26. Hill J. Victimization, Resilience and Meaning-Making: Moving Forward in Strength. *South Med J*. 2009;86(2):717.
27. Jemmer P. Abreaction - Catharsis: Stirring Dull Roots with Spring Rain. *Eur J Clin Hypn*. 2006;7(1).
28. Chue AE, Gunthert KC, Ahrens AH, Skalina LM. How Does Social Anger Expression Predict Later Depression Symptoms? It Depends on How Often One Is Angry. *Emotion*. 2016;17(1):6-10.
29. Hjemdal O, Friborg O, Braun S, Kempnaers C, Linkowski P, Fossion P. The Resilience Scale for Adults: Construct Validity and Measurement in a Belgian Sample. *Int J Test* 2011;11(1):53-70.
30. Arian G. Domestic violence survivors' experiences of hope: A phenomenological study. Chicago;2013.