

The relationship between self-esteem and intimate partner violence (IPV): The mediating role of resilience

1Samina Ashraf Chaddher* and Dr. Roselisa Binti Ahmad

Abstract---Intimate partner violence (IPV) is an emerging issue in social science literature. Most of the studies on IPV has focused on the its after effects. However, there is lack of research that explore the factors for reducing the adverse psychological effects of such violence. Therefore, the present study aims to assess the impact of self-esteem on IPV through resilience. In order to meet the objective of the study, the data was collected from 309 battered working women in Pakistani colleges through self-administered questionnaires. The data was analyzed by applying PLS-SEM approach using SmartPLS 3.2.8. The findings of the study explained a positive association between both dimensions of self-esteem (i.e. self-competence and self-liking) with resilience and negative association between resilience and IPV. The study also inferred full mediation of resilience between the relationship of self-competence and self-liking with IPV. The study also explains the research implications, limitation and future directions in the last section.

Keywords---Intimate partner violence, Domestic violence, Self-esteem, Resilience

I. Introduction

Intimate partner violence (IPV) is a widespread between people in every society affecting more than one crore and 20 lacs people yearly. However, victims of IPV are predominately female. The statistics on IPV from Muslim communities including Pakistan are rare. IPV is a form of domestic violence that is initiated by the present or ex-partner in a close affiliation (Connie, Mitchell, 2011; Larsen, 2009,2016). IPV can be of many categories, including physical, verbal, psychological emotional economic and sexual abuse. As stated by the WHO (2016) IPV is defined as “any behavior that causes physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner.” Such violence can be called “battering”, “intimate terrorism”, “forced-control violence”, which is usually committed by men against women, and involves the use of healthcare and the use of women's shelters (Homeier & Diana,2014).

In Pakistan there is much evidence regarding the violation of the role-identity of married battered working woman through intimate partner violence (Rurangirwa, Mogren, Ntaganira, and Krantz, 2017). The aim of this study is to examine whether or not a battered woman’s self-esteem and resilience condense IPV. The idea is to test by first integrating different psychological theories into one model and then testing the model using statistical techniques. Domestic abuse especially psychological exploitation is part of the pattern of behaviors used by batterers to uphold authority and control over their mates. Yet no solution of this abuse exists in Pakistan. Psychological abuse entails behaviors like insulting, humiliating or belittling publicly, actions to scare or threaten her to make her unhappy (Ali, Asad, Mogren, Krantz, 2011).

1Universiti Utara Malaysia

*Corresponding Author Email: saminagreat@yahoo.com

It is the fact that the strength of individual's emotions has greater impact on their self-confidence and enable them to counter the forces that causes sadness or emotional disturbances. In this regard, several prior studies have explored the self-esteem as an antecedent of psychological and emotional strength. High self-esteem mitigates the effects of stress whereas, low self-esteem leads to depression under some circumstances (Hague, Mullender & Aris, 2003). However, prior literature possesses limited studies that have explored the relationship with IPV. Therefore, the present study aims to fill the gaps identified in the literature and to assess the impact of self-esteem on IPV through resilience.

II. Literature Review

Intimate-Partner Violence (IPV)

A mental, physical or sexual abuse exercised by the current or ex-partner is referred as Intimate partner violence (IPV) (Black et al., 2011). The IPV has developed as a global issue in recent years that has negative effects on the abused partner's not only physical health but also the mental health. The tolerance of IPV depends upon the past experiences in life (specially in childhood) of the affected person. For instance, the individuals who have seen other persons (specifically in one's family) exposed to IPV has less resistance to IPV faced by themselves. This is why, they take it as normal based on their previous experiences. IPV has several negative effects on abused persons mental health but the depression is the most commonly faced by the abused persons that leads to several other health issues or diseases including blood-pressure issues, thyroid or diabetes etc. Both male and female can be the target of IPV however, there is a large evidence available in literature that found more women are facing IPV and exposed to its negative outcomes including depression (Rurangirwa et al., 2017; Ali et al., 2011; Hague et al., 2003)

Self-Esteem

The word self-esteem has become very important nowadays. This is why practitioners emphasize on enhancing self-esteem in order to lead a better life. Self-esteem, especially in educational circles, is considered to be the cause of positive outcomes (Jordan & Zeigler-Hill, 2018). Low level of self-esteem is the major cause of depression and anxiety (Masselink, Van Roekel & Oldehinkel, 2018). The evaluation of the outcomes of self-esteem is complex due to various elements. One of the main reasons is that individuals with high self-esteem overstate their accomplishments and good characters. "High self-esteem is also a heterogeneous category, encompassing people who frankly accept their good qualities along with narcissistic, self-justifying, and pride" (Arshad, Zaidi & Mehmood, 2015, p. 156). In contrast, several studies found a weak relationship between self-esteem and performance as it may resist people to show their utmost capabilities (McKown, 2017).

Self-Esteem and Intimate-Partner Violence (IPV)

Intimacy refers to close relation between two persons based on emotions and trust. Intimate relationships (IR) can be physical or emotional. Visual attraction is the main source of IR that furthers to sexual desire. Many scholars like Lennon, Stewart, and Ledermann (2013) explained the IR as the power of intimacy that is used to regulate the others behaviors, love and thoughts that leads to one's sexual and emotional satisfaction. According to Michalski (2004), IPV is due to aggression that increases gradually due to daily experiences the ends at partner's violent behavior. He further explained that violent behaviors exercised by one's partner are due to continuous stress, voracity of plunders, desire of physical relation and desire to take control of the other partner. Prior literature has also shown that nurturing individuals in violent environments view violence as a normal phenomenon and suffer from low self-esteem. An individual initiating "violence in a relationship may

reflect personality traits of extreme jealousy, fear of abandonment, projecting blame, or can suffer from a constellation of such behaviors such as borderline personality organization” (Michalski, 2004, p. 657).

In many cultures, violence against women has been shown as a feeling of domination and here women feel that and when women see their intimate partner abusing someone else, they consider it acceptable for themselves. Some men practice violence on their strong female partners to break their self-esteem in order to boost their own. In this regard, it can be very difficult for women to decide to leave the abusive relationship. In order to reach this decision, abusive women must remove the external restraining factors and the internal restraining factors. External restraining factors are “lack of support from the workplace”, “practitioners and community involvement”, whereas internal restraining factors are “socialization effects”, “psychological processes”, and “victim–perpetrator traits” (Barnett, 2001). One of the most important external restraining factors for women are the lack of sufficient resources i.e. adequate finances to fulfill their daily needs, lack of appropriate health and counselling services that are required to cope up with after effects of violence. It is likely that due to social importance among men, women can suffer violence for fear of isolation or rejection, which is believed much worse than physical abuse. The literature has explained the two dimensions of self-esteem i.e. self-competence and self-liking (Tafarodi & Swann, 1995).

Self-competence

“Self-competence stands out as the valuating experience of oneself being a causal representative, a deliberate actually being that are able to result in ideal results via working out its will. Being a generalized characteristic, it describes the complete constructive or maybe unfavorable orientation toward oneself as a source of efficacy and power. Self-competence is directly associated but not the same as Bandura's (1989, 1992) self-efficacy, defined as “people’s beliefs about their capabilities to exercise control over events that control their lives” (Bandura, 1989, p. 1175)”.

Therefore, it is hypothesized that:

H1: Self-competence has a negative association with IPV

Self-liking

The ethical substance of one 's actions and characteristics, stated above, mirrors the intrinsic aspect of value. It is presented in self-esteem as "self-linking". Essentially, "self-liking" stands out as the valuating practical experience of oneself as a cultural item, a bad or good individual. Being a generalized characteristic, it lowers to one 's continual, overall sense of benefit as a person with societal significance. By "social", we don't entail to recommend that "self-liking" is primarily our personal understanding of the value that others accredit us, though this is certainly one with origin of it. Rather mature "self-liking" rests largely on the interpersonal worth which we ascribe to ourselves. Even though sitting by yourself in a soundless and dark space, we show up as sociable items to ourselves, placed in physical, temporal, as well as moral place (Herre, 1991).

Therefore, it is hypothesized that:

H2: Self-liking has a negative association with IPV

Resilience as a mediator

There are several definitions for resilience, but for the purpose of this thesis the definition is one reached by international consensus: “resilience is a dynamic process in which psychological, social, environmental and biological factors interact to enable an individual at any stage of life to develop, maintain or regain their mental health despite exposure to adversity” (Wathen et al., 2012; as cited in Shanthakumari et al., 2013, p. 704).

Part of the challenge in researching resilience is the lack of consistency in the way resilience is defined due to discrepancies in whether it is a trait, process, or outcome (Fletcher & Sarkar, 2013). When considered a trait, resilience represents personal characteristics that help individuals adapt to adversity (Fletcher & Sarkar, 2013). However, Khanlou and Wray (2014) note how fostering and maintaining a resilient attitude is a process as opposed to a constant entity. Rather, resilience transitions on a continuum, depending on many intrinsic and extrinsic factors. To this end, resilient women may continue to experience the manifestation of any symptoms associated to IPV. Resilience signifies the ability of these women to utilize their resources and strengths to minimize these associated symptoms and effectively meet traumatic challenges (Singh, 2009). Resilience is a term that recognizes the ability to pick up strategies and utilize protective factors.

However, the role of counsellors or mental health professionals is to support this process as defined by their clients, and not as defined by their individual outlook of what resiliency should look like. Therefore, resiliency to South Asian immigrant women, or anyone, may look different to what a health professional may consider. Resilience is not really for intervention or remediation. It includes a change from a problem based deficit design to some strengths-based model. This particular model of resilience is preventive, protective, and positive. Life experiences that are challenging could be opportunities for change and growth. The perseverance of ours through times that are tough are able to make us stronger. A lot of people survive even with exposure to extreme risk. Around seventy % of youth coming from high risk environments overcome adversity and attain great results (Leppin, et al., 2014). Thus, it is hypothesized that:

H3: Resilience mediates the relationship between self-competence and IPV.

H4: Resilience mediates the relationship between self-liking and IPV.

III. Methodology

This study finds empirical evidence on the research framework among the bettered working women in Pakistani colleges. The data were collected in three phases. First, the permission was taken from the competent authorities of the colleges. Second, the study was intended to get responses from the bettered women working in colleges of Lahore therefore, before distributing the actual questionnaire of the study; an initial screening was performed through Women’s Experiences with Battering (WEB) scale (Smith et al., 2002). The results of WEB scale enabled the researcher to judge the bettered women in colleges of Lahore. After getting the exact number of bettered women, the actual questionnaire of the study was distributed among the respondents. Before collecting the data, the respondents were briefed about the purpose of the study, and they were guaranteed secrecy about their personal information.

A total of 309 bettered working women participated in the study. The questionnaire of the study was comprised of four sections. The first section consisted of questions intended to require demographic information of the participants. The second

section contains all the scales of exogenous variable. The third section encompasses the mediator, and the last section covers the questions about the endogenous variable. The construct of self-esteem was measured by two dimensions, i.e. self-competence and self-liking (Tafarodi & Swann, 1995). Each scale of the self-esteem dimension consisted of 10 items. The construct of resilience was measured by 6 items adopted from Smith et al. (2008). Lastly, the construct of intimate partner violence (IPV) was measured by 10 items adopted from Smith et al. (2002). All the items were measured at 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The data were analyzed by partial least square structural equation modelling (PLS-SEM) approach by using SmartPLS 3.2.8. PLS-SEM approach is most suitable in assessing the causal relationship among constructs (Joe Hair, Hollingsworth, Randolph, & Chong, 2017).

IV. Data Analyses

Construct Reliability and Validity

In order to establish the validity and reliability of the variables under study the convergent and discriminant validity of the construct is established (Hair, Sarstedt, Hopkins, & Kuppelwieser, 2014). The validity and reliability of measurement model is assessed and presented in Table 1. All the values of outer model have passed the cut-off value of 0.5 that is necessary to establish reliability of indicators. According to Hair, Hult, Ringle, and Sarstedt (2014), to establish convergent validity the value of Cronbach's alpha, composite reliability (CR) and average variance extracted (AVE) must be greater than 0.70, 0.60 and 0.50 respectively. The measurement model of the present study meets the criteria of convergent validity laid by Hair et al. (2014). Likewise, the Fornell and Larcker and Heterotrait-Monotrait (HTMT) criterion is the best way to predict discriminant validity of the model. The AVE square in the diagonal value must be higher than the correlation of individual variable with others whereas, the values in HTMT table must be lower than 0.85. Table 2 and Table 3 have presented the acceptable values of Fornell and Larcker and HTMT criterion.

Table 1: Measurement Model

Construct	Items	Loadings	Cronbach's Alpha	CR	AVE
Intimate Partner Violence (IPV)	IPV1	0.706	0.907	0.918	0.53
	IPV2	0.767			
	IPV3	0.741			
	IPV4	0.701			
	IPV5	0.735			
	IPV6	0.696			
	IPV7	0.780			
	IPV8	0.713			
	IPV9	0.770			
	IPV10	0.662			
Resilience	R2	0.822	0.819	0.880	0.651
	R3	0.887			
	R4	0.838			
	R5	0.662			
Self-competence	SC1	0.799	0.897	0.910	0.508

	SC2	0.619			
	SC3	0.62			
	SC4	0.81			
	SC5	0.811			
	SC6	0.806			
	SC7	0.78			
	SC8	0.594			
	SC9	0.613			
	SC10	0.608			
Self-liking	SL1	0.711	0.838	0.874	0.537
	SL2	0.599			
	SL3	0.736			
	SL5	0.585			
	SL6	0.703			
	SL7	0.589			
	SL8	0.636			
	SL9	0.712			
	SL10	0.655			

Note: The items R1,R6 and SL4 as deleted due to lower loadings

Table 2: Fornell and Larcker Criterion for Discriminant Validity

	IPV	Resilience	Self-Competence	Self-Liking
IPV	0.728			
Resilience	-0.101	0.807		
Self-Competence	0.021	0.464	0.712	
Self-Liking	0.173	0.248	0.045	0.661

Table 3: Heterotrait-Monotrait Criterion for Discriminant Validity

	IPV	Resilience	Self-Competence	Self-Liking
IPV				
Resilience	0.123			
Self-Competence	0.106	0.465		
Self-Liking	0.174	0.124	0.119	

Hypotheses Testing

The hypotheses of the study were assessed using SmartPLS 3.2.8 by applying PLS-SEM. The bootstrap technique is used for structural analyses of the model. The goodness of fit in PLS-SEM is assessed through analyzing predictive relevance by

applying blindfolding procedure. The model of the study contains a mediator i.e. resilience and dependent variable i.e. IPV. The value of the coefficient of determination R^2 and predictive relevance Q^2 of the endogenous variable is 0.32, 0.16, and 0.27, 0.14, respectively, that passed the substantial criteria (Henseler, Ringle, & Sarstedt, 2012). Moreover, Table 4 presented the results of PLS bootstrap algorithms that confirms the significant direct relationship of resilience with IPV ($\beta = -0.22$, t value = 2.68, p value = 0.01), self-competence with resilience ($\beta = 0.46$, t value = 9.22, p value = 0.00), and self-liking with resilience ($\beta = 0.32$, t value = 6.33, p value = 0.00). However, the direct relationship of self-competence with IPV ($\beta = 0.01$, t value = 0.36) and self-liking with IPV ($\beta = 0.01$, t value = 0.11) found no empirical support of their significance. These results show that the resilience is directly affected by both components of self-esteem by explaining 32% variance in the latent variable. Similarly, IPV is directly affected by resilience by explaining 27% variance. Out of all the relationships, the self-competence and resilience have the highest beta. The findings also confirm the significant mediating effect of resilience between the relationship of self-competence with IPV ($\beta = -0.10$, t value = 2.53, p value = 0.01) and self-liking with IPV ($\beta = -0.07$, t value = 2.18, p value = 0.03). It means that resilience fully mediates the relationship of both the dimensions of self-esteem with IPV. Therefore, five out of seven hypotheses of the study are supported by the results of the PLS-SEM.

Table 4: Hypotheses Results

Hypothesis	Beta	S.E	T Value	P Value	CI ^{BCa}		Decision
					Low	High	
Resilience -> IPV	-0.22	0.08	2.68	0.01	-0.288	-0.08	Supported
Self-Competence -> IPV	0.01	0.07	0.91	0.36	0.178	0.086	Not Supported
Self-Competence -> Resilience	0.46	0.05	9.22	0.00	0.354	0.557	Supported
Self-Liking -> IPV	0.01	0.08	0.11	0.91	0.215	0.047	Not Supported
Self-Liking -> Resilience	0.32	0.05	6.33	0.00	0.240	0.440	Supported
Self-Competence -> Resilience -> IPV	-0.10	0.04	2.53	0.01	0.191	-0.04	Supported
Self-Liking -> Resilience -> IPV	-0.07	0.03	2.18	0.03	-0.19	-0.01	Supported

* Significance level < 0.05

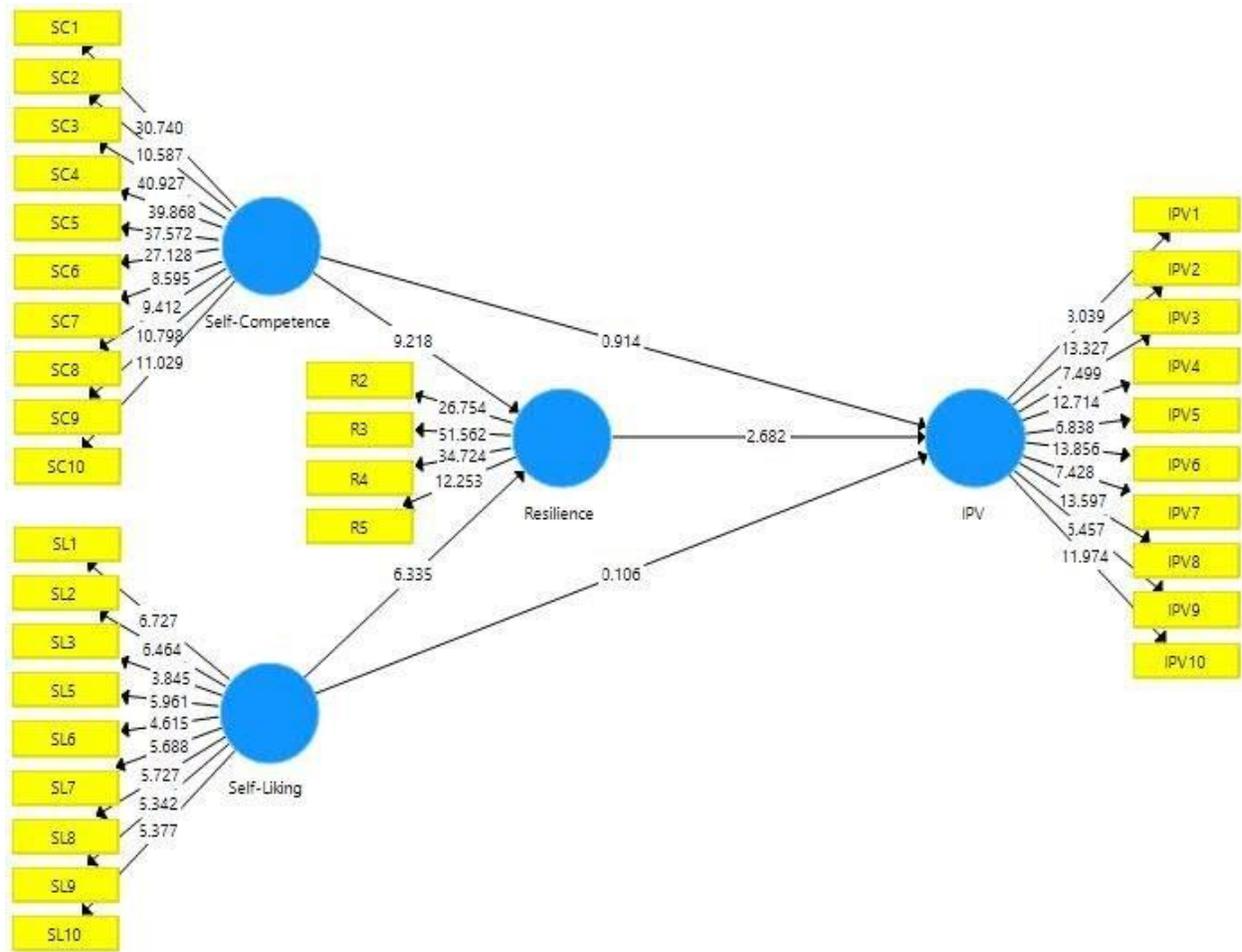


Figure 2:
Estimations of Structural Model

V. Discussions and Conclusion

The present research has three-fold contributions to the existing literature of IPV. First, the findings explain that self-esteem is essential to reduce intimate partner violence through resilience. Second, the results show that resilience is an important component to reduce intimate partner violence. Finally, it provides the empirical evidence of the full mediation of resilience between the relationship of both facets of self-esteem (i.e. self-competence and self-liking) with intimate partner violence.

The study's main contribution lies in the mediating effect of resilience. It can be inferred from the findings of the study that resilience serves as a mechanism in reducing IPV. Our findings explain that the bettered women may overcome psychological effects of IPV through resilience which can be enhanced with high self-esteem. In this study, the self-esteem is measured by two facets of self-esteem i.e. self-competence and self-liking. A woman with high level of self-competence and self-liking is likely to be more resilient resultantly she can reduce the psychological level of IPV.

The results of the present research are consistent with the prior studies. For instance, Jin, Jones, and Lee (2019) and Lee et al. (2018) explained that a person's high level of self-esteem may reduce the level of depression due to violence through the increased level of resilience. Similarly, the study of Mętel et al. (2019) found that resilience is an important mediating factor in the relationship between early life experience of violence and depression. Hence our study extends the past scholarship in the supply chain by explaining the mechanism to reduce psychological effects of IPV through resilience and self-esteem.

Implications of the Study

This study provides new understanding about the importance of psychological capital of battered employed women enhancing because of an important psychological trait i.e. self-esteem through resilience. This study may assist the psychological counsellors, fellow battered employed females & policy making ministry to assist increase level of self-esteem through appropriate awareness program that includes workshops, interactive talks and focus group discussions to manage IPV. The discoveries of this study can be utilized by the battered women to overcome employment stress issues and improving marital life by opting & practicing intimate partner violence management programs.

This study provides an opportunity for policy makers in Pakistan to set up free consultation on pre-marriage stage which has an ardent role in mate selection and maintenance of relationships. Besides the battered employed population, it is hoped that this self-oriented psychological approach can be adapted for awareness of to be married girls and women sharing the same age group or demography, with some modification in session plans. This psychotherapeutic self-treatment plan can also be added with the medical treatment of women who are in need. The findings contribute by providing guidelines to marriage counselors, mental health workers, delivering family and marriage counseling services. There is evidence that advocacy and empowerment counselling interventions, as well as home visitation that are promising in preventing or reducing intimate partner violence against women.

Limitations and Future Research Direction

The present research is subject to various limitations. First, it is a cross-sectional study, because of finance and time constraint the study was conducted once only. However, the longitudinal and timeseries research is recommended in future for causal implications.

Second, the construct of self-esteem was measured as a first-order construct to meet the objective of the study. However, it will be quite interesting to assess the self-esteem by second-order in order to have overall understanding of the concept. It will explain the overall indirect effect of self-esteem on IPV through resilience. Finally, it is recommended for prospective researchers to control the demographics to evaluate the impact of diversity in respondents.

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