

From Trauma to Strength: Psychological Resilience in Individuals Who Experienced Domestic Violence in Childhood

Anggi There Meyolla Manullang*, Arthur Huwae

Satya Wacana Christian University, Indonesia

anggimanullang47@gmail.com*

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INTRODUCTION

Individuals with childhood trauma resulting from domestic violence (DV) experience life dynamics that differ from those who grow up in safe and supportive families. These differences can begin even before birth, as domestic violence may affect children during the prenatal period. Pregnant women who experience violence face a higher risk of preterm birth, low birth weight infants, and various other complications (Brockstedt et al., 2025). From early infancy, domestic violence can disrupt children’s emotional and cognitive development through disturbances in maternal bonding and caregiving patterns (Ullman & Peter-Hagene, 2016). Exposure to domestic violence can influence how children process experiences, resulting in differences in cognitive and language development compared to peers from non-violent households (Permata, 2023). During adolescence, difficulties such as learning problems, concentration disorders, aggressive behavior, and tendencies toward social withdrawal or antisocial behavior may emerge, which can hinder overall social and emotional development (Suri et al., 2023).

Such trauma can affect children’s attachment patterns with their parents, which subsequently play a role in shaping attachment in adulthood, particularly in intimate relationships (Damayanti & Margaretha, 2021). Boys who witness their mothers being abused by their fathers are up to ten times more likely to perpetrate violence against their partners later in life. Meanwhile, girls who

grow up in environments where their fathers abuse their mothers face a sixfold higher risk of experiencing sexual violence compared to girls who are not exposed to domestic violence (Sari, 2024). Traumatic experiences of domestic violence during childhood may increase the risk of psychological disorders such as depression, anxiety disorders, and bipolar disorder characterized by emotional fluctuations (Chauhan, 2023). Beyond its direct impact on mental health, childhood trauma can also disrupt the quality of social relationships and reduce overall life well-being (Hartoyo & Wulandari, 2023).

Domestic violence is a global social issue, including in Indonesia, with particularly harmful impacts on children. According to the latest UNICEF estimates in 2024, nearly 400 million children under the age of five around six out of ten frequently experience emotional or physical violence at home. In Indonesia, data from SIMFONI-PPA in 2024 show that children constitute the largest group of domestic violence victims, accounting for approximately 63.3% of all reported cases. Based on age, violence is most frequently experienced by adolescents aged 13–17 years (35.7%), followed by children aged 6–12 years (20.4%) and 0–5 years (7.2%). Experiences of violence during childhood can result in childhood trauma that persistently affects thoughts and has serious consequences for mental health. This may lead individuals to become withdrawn, have difficulty concentrating, struggle with emotional regulation, feel inferior, avoid social interactions, and isolate themselves from their environment (Martínez-Ferrer et al., 2020). Individuals with childhood trauma due to domestic violence are also more likely to experience emotional disturbances that can trigger suicidal ideation (Paskah & Huwae, 2024).

Individuals who experience childhood trauma from domestic violence often struggle with self-acceptance, leading to feelings of insecurity, worthlessness, and a tendency to blame their own existence within the family (Kehi & Huwae, 2024). This condition affects their ability to build social relationships, as they feel uncomfortable interacting with others. The inability to cope effectively with such pressure reflects low levels of resilience, making individuals more vulnerable to life challenges, easily distressed, quick to anger, low in self-esteem, and prone to losing hope for the future (Rachmawati et al., 2020). Nishimi et al. (2020) argue that violence experienced since childhood especially emotional and physical violence can significantly weaken an individual's capacity to recover from adversity in adulthood. The impact becomes even more severe when victims experience multiple forms of violence (Irfani & Mulyana, 2025). Other studies also show that survivors of domestic violence often suffer from deep emotional trauma and difficulties in social relationships, which ultimately hinder the development of resilience (Batubara et al., 2021). These findings suggest that low resilience plays a major role in reducing quality of life, particularly among individuals who experienced childhood trauma due to domestic violence, such as emotional neglect, which is often associated with the later emergence of depression (Dhungana et al., 2022). The ability to endure and recover from such pressures is known as resilience.

Resilience is not merely an innate ability to be “strong” in the face of problems, but rather a dynamic process shaped by life experiences and environmental support. Resilience is evident when individuals are able to cope with, confront, learn from, or endure life difficulties or major adversities that may otherwise lead to helplessness, transforming themselves into stronger individuals and fostering positive change (Grotberg, 2003). In everyday life, the process of becoming resilient typically involves three key components. First, there are reliable people such as family members, friends, teachers, or others who provide support and help individuals feel that they are not alone (I Have). Second, resilience is influenced by how individuals perceive themselves. When individuals believe that they are valuable and capable of facing problems, this internal strength motivates them to persist (I Am). Third, resilience involves the ability to act, such as communicating effectively, solving problems, or knowing when to seek help when overwhelmed (I Can). These three components are interconnected and form an essential foundation for individuals to recover from adverse experiences and build healthier lives (Grotberg, 2003).

To support the phenomenon examined in this study, preliminary data collection was conducted through initial interviews with three informants in April 2025. The interviews revealed that all informants experienced intense inner turmoil. This turmoil emerged when they encountered situations that reminded them of traumatic childhood experiences of domestic violence, such as watching films with domestic violence themes, hearing shouting, or most commonly, when someone asked about their family or father. These situations triggered feelings of anger, sadness, and fear among participants. The traumatic experiences occurred between the ages of 6 and 13 years, lasting approximately four to five years. In two cases, the violence ended when the parents decided to separate. A major factor contributing to the informants' difficulty in recovering from trauma was deep-seated hatred toward the perpetrator.

Previous studies have similarly shown that child victims of domestic violence are vulnerable to emotional trauma, cognitive developmental barriers, and psychological problems such as stress, depression, anxiety, and low self-esteem. They are also more easily triggered by loud noises or situations that resemble past traumatic events, as experienced by participants in this study (Yosep et al., 2022). Unresolved hatred further contributes to low resilience. Victims often struggle to forgive, continue to harbor anger, and avoid interaction with perpetrators, which ultimately worsens their psychological condition and hinders trauma recovery (Chandra, 2019). This unresolved hatred reinforces emotional wounds and complicates reconciliation with the past, thereby impairing emotional regulation and the development of resilience (Syamil & Susilarini, 2025).

Throughout the life course of individuals who experience childhood trauma from domestic violence, rebuilding personal strength is not an easy process. Resilience development is often obstructed by the lack of inclusive support systems, such as weak child protection policies and limited access to adequate recovery services (Ji & Lü, 2021). In addition, insufficient social support, low family warmth, and minimal involvement of supportive parents or adult figures constitute major barriers to recovery and resilience development (Fares-Otero et al., 2023; Latham et al., 2023). Furthermore, individuals with childhood trauma from domestic violence often experience disrupted self-efficacy development and an increased risk of PTSD symptoms in adulthood, further complicating their ability to cope with trauma and build resilience (Haj-Yahia et al., 2021).

Resilience enables individuals to rise again and recover from the various challenges they face. Individuals with high resilience tend to demonstrate better psychological adaptation and faster recovery after experiencing childhood trauma from domestic violence (Ingelina et al., 2024). Resilience also helps them maintain psychological and social functioning despite severe stress resulting from traumatic experiences (Maslahah & Khoirunnisa, 2020). Thus, resilience is a crucial aspect of the recovery process and the development of psychological well-being among individuals who experienced domestic violence in childhood. Conversely, when resilience is low, the effects of childhood trauma from domestic violence may become more severe and prolonged. Individuals with poor resilience often struggle to manage stress and emotions, increasing the risk of mental health disorders such as PTSD, depression, and anxiety (Sari, 2024).

The high prevalence of domestic violence cases in Indonesia has direct consequences for children, as experiences of violence during childhood often leave deep and long-lasting psychological scars. Such trauma can disrupt children's emotional well-being and continue to affect their ability to function in daily life into adulthood. According to Law Number 39 of 1999 on Human Rights, every child has the right to protection from parents, family, society, and the state to ensure optimal growth and development in a safe and secure environment. This is reinforced by Law Number 23 of 2002 on Child Protection and its amendments (Law Number 35 of 2014), which emphasize the importance of special protection for children from physical and psychological violence, particularly within the family environment an environment that should be the safest place for children (Wahyudi & Kushartono, 2020).

The inner turmoil experienced by individuals who endured childhood trauma due to domestic violence highlights the need for a deeper understanding of their psychological adaptation processes. Therefore, this study is necessary to explore the portrait of resilience among individuals who are survivors of domestic violence since childhood, both in terms of their internal dynamics and external influencing factors, in order to understand how they endure and navigate life positively despite their traumatic experiences.

Research Objectives

Based on the previously formulated research problem, the objective of this study is to describe the portrait of resilience in individuals with childhood trauma resulting from domestic violence.

METHOD

Research Design

This study employs a qualitative approach with a descriptive phenomenological design. The qualitative approach was chosen to obtain an in-depth understanding of the phenomenon under investigation through in-depth interviews. A phenomenological design aims to understand the lived experiences of individuals who have directly experienced a particular event (phenomenon) (La Kahija, 2018). The uniqueness of an event as part of the participants' lived experiences constitutes both the appeal and the strength of this qualitative research design. The purpose of using a qualitative approach with a descriptive phenomenological design is to explore in detail and depth the portrait of resilience among individuals who experienced childhood trauma due to domestic violence.

The interviews were developed based on Grotberg's (2003) theory regarding the aspects and factors of resilience and were organized into an interview guide used as a reference during the interviews (see appendix). These aspects include I Have, I Can, and I Am. The factors considered in this study include temperament, intelligence, culture, age, and gender. In this research, the interview questions were designed using an *epoché* approach to allow participants the freedom to express their experiences openly and authentically.

Research Participants

The participants required for this study were individuals aged 18–30 years who had experienced childhood trauma resulting from domestic violence. A total of five participants were involved in this study, all of whom used Indonesian as their primary language (see Table 1).

Table 1. Demographic Characteristics of Research Participants

Characteristics	N
Ethnicity	
Balinese & Javanese	2
Batak & Javanese	1
Javanese	2
Age at the Time of Domestic Violence	
Elementary school age	5

Note: N = Number of participants.

Research Procedure

This study obtained ethical clearance from the Research Ethics Committee of the Faculty of Psychology, Universitas Muhammadiyah Malang, under approval number E.6.m/329/KE-FPsi-UMM/VI/2025, to ensure the protection of participants from violations of ethical and moral principles. Participants were selected using a purposive sampling technique. Information about the

study was provided to prospective participants, who then indicated their willingness to participate by completing an informed consent form.

Data were collected through semi-structured face-to-face interviews lasting approximately 38–110 minutes. The interview-based data collection was exploratory in nature, meaning that the originality and depth of the data depended on the interview process itself. Participants were informed that they had the right to withdraw from the study at any time without providing any reason if they felt uncomfortable during the research process. At the end of the interview, participants were given a small token of appreciation as an acknowledgment of their willingness to take part in this study.

Data Analysis Technique

At the initial stage, the research transcripts were read repeatedly to ensure that the researcher thoroughly understood and immersed themselves in the content of the data. Data analysis using Interpretative Phenomenological Analysis (IPA) was conducted based on three main foundations: a phenomenological approach grounded in the concept of *epoché*, interpretation focusing on participants' understanding as reflected in the transcripts, and ideography emphasizing the uniqueness of each participant's lived experience (La Kahija, 2018). Subsequently, the researcher produced initial notes in the form of exploratory comments containing interpretations of participants' statements. These notes were then condensed into emergent themes. Next, several emergent themes were clustered into broader superordinate themes. In the final stage, the researcher carefully reviewed all themes across participants to identify interconnected patterns of experience (La Kahija, 2018).

To ensure credibility and internal validity, several strategies were applied in accordance with Creswell (2024). The researcher conducted careful and prolonged observation to identify new and meaningful themes. Data triangulation was performed by comparing information obtained from different sources, methods, and time points. In addition, negative case analysis was carried out by examining data that differed from or contradicted earlier findings. To further strengthen the results, the researcher used supporting reference materials and conducted member checking with participants to ensure that the data accurately reflected the information they intended to convey.

RESULTS AND DISCUSSION

Results

Background of Individuals with Childhood Trauma Resulting from Domestic Violence

All participants shared similar underlying factors that contributed to their experiences of childhood trauma due to domestic violence. A strained relationship between participants R, S, K, G, and N and their fathers emerged as a primary factor, leading the participants to avoid communication and maintain distance out of fear of their fathers' abusive behavior. The root causes of domestic violence within the household also revealed common patterns, particularly the presence of a father figure who behaved harshly and failed to fulfill his role as the head of the family. Participants R, G, and K experienced verbal and physical abuse from their fathers, which left deep psychological scars that persisted into adulthood. In addition, all participants witnessed frequent conflicts between their parents at home, causing them to never feel safe or comfortable within the household environment.

The Process of Resilience Formation in Individuals with Childhood Trauma Resulting from Domestic Violence

Each individual has their own unique way of developing resilience. Experiences of domestic violence during childhood not only lead to emotional trauma but also increase the likelihood of psychological difficulties that can affect individuals later in life (Sari, 2024). Therefore, individuals

with childhood trauma resulting from domestic violence need to develop resilience to help them cope with the challenges they face, enabling them to recover and live their lives as they aspire to (Savitri, 2025). The following sections describe each participant's experiences in relation to the aspects of resilience based on Grotberg (2003).

I Have Aspect

The I Have aspect refers to external supports that help individuals survive adversity, such as having trusted friends or family members, the presence of behavioral boundaries that provide stability, encouragement toward independence, and positive role models who serve as sources of inspiration (Grotberg, 2003). As survivors of childhood trauma resulting from domestic violence, each participant interpreted the presence of such support as a source of strength in facing difficult life experiences. With consistent support, they were able to feel safer, find direction, and continue the process of building a better life.

Sources of Social Support

Each participant had different sources of support when dealing with the impacts of domestic violence related trauma. Participant S identified "siblings and mother" as sources of support, R cited "friends," K mentioned "mother," and N relied on "friends." In contrast, participant G reported not having social support for many years while coping with the effects of domestic violence.

"...Looking back, actually because I didn't tell anyone, it felt like there was no support. So at that moment, when I really experienced violence as a child, I was like, 'Okay, I experienced violence, I'll just keep it to myself.' That went on for years. I only started telling my story in high school, when I began to realize that this wasn't right..." (G, p. 131–135).

The Role of Family or Friends in Getting Through Difficult Times

In navigating difficult periods, each participant relied on the support of friends or family. Participant R felt that their relationship with their family, including communication with siblings, had deteriorated, making friends the primary source of support during hard times.

"...Especially my dorm friends during junior high and high school they really built me up. They made me feel different, not alone. Sometimes I even get emotional, because my friends could bring me closer to their parents. I would think, 'How can I get this from other people's parents but not from my own?' The most influential were my friends from junior high and high school, and even until now..." (R p.279-285)

Participant S received support from friends as well as close family members.

"...Mostly they just... listened to my stories..." (S p.92)

"...Yes, my mother honestly always says things like forgive your father. At home she often asks whether I've talked to him, always trying to keep our relationship with him good..." (S p. 108-111)

Maintaining the relationship between child and father was an effort made by participant S's mother in dealing with the impact of domestic violence. The participant's grandmother also played a similar role as a calming presence and emotional refuge.

"...First, of course, calming the child down. The child is soothed first, then we try to repair the relationship between the child and the father by encouraging mutual apologies for mistakes that were made..." (K p.113-115)

"...More or less the same as my mother acting as a mediator and trying not only to be a bridge but also to help calm me down..." (K p.126-128)

Despite the absence of a supportive figure during childhood, participant G had a place of refuge in their aunt's (Bude's) house, which became the safest place for them. The aunt's role was highly meaningful in helping G get through difficult times.

"...My aunt is the closest family member, and she's my dad's older sister. So once I was at her house, my parents wouldn't dare do anything. Every time I thought the punishment was too harsh, I would think, 'Okay, I'm just going to my aunt's house..." (G p. 181-184)

Friends also played a crucial role for participant N in overcoming difficult periods. They became the safest place after enduring hardship at home.

"...They always listen when I tell my story without judging. When they know I'm tired of the situation at home, they'll invite me out anywhere until I forget about it. Sometimes they even offer for me to stay over at their house if I don't want to go home..." (N p.39-42)

Having a Safe and Supportive Environment or Values

Participant R did not feel the presence of a home environment or values that made them feel safe or supported during difficult times.

"...Honestly, in my home environment, I didn't really feel that..." (R p.339-340)

Being a legitimate child both legally and religiously made participant S feel more respected within the family, despite the father having a new family and children born outside of marriage. Participant S felt supported by family rules, particularly regarding inheritance.

"...Maybe because my sibling and I are legitimate children, from a legitimate marriage, so it feels more... respected compared to the others. They're outside, outside of what religion, maybe a religious marriage only so inheritance would actually fall to us as part of the family..." (S p.126-130)

In participant K's family, there were no specific rules or values that strongly guided family life, so they did not experience rules as something sacred or obligatory within the household.

"...Oh, there weren't any fixed rules at home, like rules that had to be obeyed or couldn't be violated..." (K p.138-139)

Participant G experienced family rules that made them feel unsafe, such as the father's prohibition against asking others for help and an unspoken rule from the mother that children should not display negative emotions. This led G to suppress feelings and remain silent in their room. However, G also received positive values from the mother, particularly strong support for education and personal interests, as well as good habits such as politeness and early exploration through various extracurricular lessons.

"...So the positive values were that my mom was very supportive. If she agreed with what I chose, she would help talk it through with my dad. So the positive side leaned more toward my mom..." (G p.259-262)

Participant N also experienced values and habits that made them feel safe and supported, especially when spending time in friends' homes.

"...In my environment, I often go to my friends' houses. Their parents always welcome me warmly. If I don't come, they ask why. Their house feels warm, and every morning or evening they make time to talk. That's what makes me feel comfortable and safe being there..." (N p.46-49)

I Am Aspect

The I Am aspect relates to individuals' internal strengths, including being someone who is liked by others, maintaining calmness and kindness, respecting oneself and others, taking responsibility for one's actions, possessing empathy, self-confidence, optimism, and hope (Grotberg, 2003). As survivors of childhood trauma resulting from domestic violence, each participant interpreted these personal qualities as sources of strength in confronting past wounds. By recognizing the positive potential within themselves, they strive to maintain self-worth, build self-belief, and cultivate an optimistic outlook toward achieving a better life.

Personal Traits and Internal Strengths

Participant R explained that the strength that enabled them to survive was their effort to remain mentally stable and not give in to suicidal thoughts. They restrained themselves by thinking about their younger siblings and family, and by holding firmly to their faith in God as an important anchor during difficult times.

"...Perhaps it is more about my effort to stay sane... I mean, if I were that depressed, I could have ended my life a long time ago... but what I think about is not myself, I think about other people... what would happen to my younger siblings... I do not curse my God... my faith in God is there... honestly, faith is very important for surviving up to this point. If I have been able to endure until now, it is clearly because God's love continues to accompany me, and also because of my concern for others..." (R p.383-41)

Strength in the form of prayer habits and an attitude of accepting circumstances as they are helped participant S to get through difficult times. Participant S chose not to overthink her family situation and continued to live her life as it was.

"...What kind of trait... I think I pray a lot.... If my family is no longer intact, well, what can I do, it is already like that..." (S p.181-184)

Participant K possessed strength in the form of courage to not be afraid and to confront the fears she faced.

"...I just don't want to fail to try. For me, it's not about failing, it's more about not wanting to be afraid to try something. I think things like this really need to be fought against, so it doesn't turn into prolonged trauma..."

(K p.164-167)

"...Well, it's like... just never be afraid. And keep fighting fear..." (K p.174)

Participant G found strength through her sense of responsibility toward her younger siblings, her dreams, and her ability to let go of hatred and forgive. She learned from past experiences, modeled her mother's attitude, and became more accepting of herself, which enabled her to build self-confidence.

"...I don't keep or nurture hatred. I slowly chipped away at the hatred and negative feelings toward my parents. What makes me strong are my younger siblings and my dreams, because it feels too painful to give up. From my experiences, I learned that if it happens again, I already know how to

organize and refill myself. I also learned from my mother to be brave in trying and to feel comfortable with myself..." (G p.577-662)

Participant N demonstrated inner strength through her efforts to remain strong, believe in herself, and have the courage to say no to unhealthy situations. She also chose to stay in environments that made her feel comfortable and safe as support to remain resilient.

"...I can stay strong because I try to be strong, believe in myself, and dare to say no when something is unhealthy. I also choose to be in environments that make me feel comfortable and safe..." (N p.72-74)

Current Self-Perception After Going Through Difficult Times

Participant R currently describes herself as someone who tends to suppress feelings and problems, choosing to remain silent even when feeling betrayed or pressured. She often gives in to maintain a sense of safety, but this results in mental burdens that affect her physical condition, such as becoming easily ill and stressed.

"...I feel that I've become someone who tends to hold everything in. If there's a problem and I can still handle it on my own, I just keep it to myself.... I prefer to stay silent. Sometimes this becomes a weakness, because I end up suppressing everything and can't express it.... I've also become someone who seeks safety. Often I say, 'it's fine, just let it be,' even though something is bothering me.... I get sick easily, stressed easily, and all of that happens because my mental state is continuously burdened..." (R p.349-360)

The word "failure" represents participant S's self-image. She felt that her childhood experiences made her more withdrawn, less adaptable, and reluctant to initiate interactions. This affected her social life in college, where she felt she did not have close friends within her faculty circle.

"...If I had to describe myself in one word, I'd say failure.... since that incident, I've become quieter and don't want to initiate things.... it's hard to adapt to new environments... and it's affected me until now, I have very few friends, maybe none in the same circle..." (S p.142-148)

Fear was chosen by participant K to describe her current self. Residual trauma made her more sensitive to loud noises and caused difficulty in trusting others.

"...Now, what I've become... it's not really that I'm a coward, but maybe because of the leftover trauma, I feel more afraid of sounds and have some trust issues..." (K p.144-1460)

Participant G viewed herself as being in a phase of recovery and growth. She consciously chose to make peace with the past and let go of hatred. By trying to understand her parents' perspectives and accepting her emotions as they were, she became stronger and realized that forgiveness is something she can give herself to achieve inner peace.

"...So I learned to know myself, and I learned to understand my father and mother better. And that's true about forgiving. Then I realized something in my second year: forgiving someone doesn't require that person to apologize to us first. We can learn to ensure our own peace first..." (G p.451-456)

Becoming a stronger and more resilient person describes participant N's current self. Her focus is on building more positive and mutually respectful relationships.

"...After going through those challenges, I feel stronger. I learned to understand my boundaries and know when to distance myself from unhealthy situations. Now I'm more focused on building relationships that are respectful and supportive..." (N p.67-69)

Ways of Building Self-Confidence

Self-confidence emerged in participant R when she saw people whose lives were far more difficult, such as those without homes, which became a source of motivation. She also found strength and happiness by sharing what she had with others, which made her feel more meaningful and grateful for her own life.

"...When I see people who are in a much lower position than me, it can be very motivating. Sometimes I think, there are so many people who have it worse, and they can still survive why can't I ?..." (R p.430-432)

Participant S felt that she had not yet developed strong self-confidence. This was because she still felt inferior when comparing herself to others, especially those from harmonious families. She often felt jealous and imagined that her life might have been better if her parents had not divorced. She also admitted that she had not fully recovered from past trauma.

"...Actually, I don't really have self-confidence, because whenever I compare myself to others... even if I feel superior at first, once I know that their family is harmonious, I immediately feel inferior..." (S p.194-197)

Trying gradually was the best way for participant K to build her self-confidence. She did this step by step.

"...The way I build my self-confidence is by trying slowly. When I start to feel comfortable at this stage, it means I'm beginning to restore my confidence again..." (K p.191-193)

Accepting that not everything has to be perfect and that not everyone must meet others' standards or expectations was participant G's way of building self-confidence. She learned to appreciate the opportunities she had experienced and used positive outcomes as energy for herself.

"...Slowly, I learned that not everything has to be perfect and not everyone has to meet other people's standards or expectations. I became more confident, feeling that it's okay I got this opportunity and I went through it. From those good results, I collect them again as positive energy for myself..." (G p.666-676)

Similar to participant K, participant N built her self-confidence gradually and step by step, while learning to appreciate small achievements she attained.

"...I started building my self-confidence slowly by giving myself space to learn and grow without constant comparison to others. I learned to appreciate small achievements, even if they seem simple. I maintain hope by reminding myself that the past does not determine the future, and there are still many good things I can achieve..." (N p.77-81)

I Can Aspect

The I Can aspect refers to interpersonal skills and problem-solving abilities, such as generating new ideas, completing tasks thoroughly, using humor to reduce tension, expressing thoughts and feelings effectively, resolving problems, managing behavior, and seeking help when needed

(Grotberg, 2003). As survivors of childhood trauma due to domestic violence, each participant perceived these skills as essential resources for coping with life challenges. Through these abilities, they were able to build social relationships, find solutions to difficulties, and develop adaptive strategies that supported their survival and growth.

Coping with Emotional Challenges

Participant R coped with emotional challenges by restraining herself, choosing silence or distancing to avoid hurting others. She also sought personal ways to release her emotions, such as visiting her father's grave and talking in front of his headstone. At times, she expressed her emotions directly, for example by throwing her phone during a conflict at home.

"...When my emotions are really burning, I usually stay quiet first, hold everything in, and look for time to release it later..." (R p.465-467)

"...As time goes by, I feel that coming to my father's grave and talking in front of his headstone makes me calmer..." (R p.456-457)

"...There was even a time when I was so angry that I threw my phone..."
(R p.462-463)

Withdrawing to her room became participant S's way of coping with emotional challenges. She chose to cry and remain alone in her room.

"...I just cry at night. The lights in the room are turned off, and then I cry quietly..." (S p.248-249)

Participant K attempted to cope with emotional challenges by forgetting traumatic events. She tried to perceive the person who had once hurt her as a different and better individual, which helped her feel calmer. However, she realized that this strategy was less effective for severe trauma, as it took years to recover, whereas milder issues, such as conflicts with friends, required only a few months to heal.

"...At the time of the incident, I tried not to remember the event or the stories anymore. That's why until now I can feel calm, because I no longer remember it..." (K p.212-215)

"...Actually, it's less effective for relatively severe trauma. For something that heavy, it really takes a long time to forget..." (K p.221-223)

Similar to participant S, participant G coped by staying in her room and crying since childhood. This pattern continued into adulthood, where she preferred finding a "safe place" or spending time alone to calm herself before talking to others, in order to avoid worsening the situation. She also learned from family experiences, the internet, and books, which helped her manage emotions through self-reflection, expressing feelings after calming down, and not harboring resentment toward others.

"...When I was little, I would cry silently until I fell asleep. Sometimes I would just stay quiet..." (G p.695-697)

"...Surprisingly, my way is still the same. When I'm angry or upset with someone, I prefer to avoid them first... When I'm better, then we talk..."
(G p.705-711)

When feeling angry or sad, participant N usually chose to leave the house and ride her motorcycle without a specific destination, going around until she felt tired.

"...When I feel angry or sad, I usually go out riding my motorcycle alone, going around without a destination until I get tired..." (N p.53-54)

Problem Solving and Seeking Solutions

Participant R approached problem-solving and solution-seeking carefully and thoughtfully. She considered various possible outcomes of each choice to avoid worsening the situation, believing that taking longer was better than rushing and causing negative consequences. This mindset developed from past mistakes that had significant impacts, leading her to believe that she must avoid even the smallest errors.

"...Past mistakes made me think, 'I can't make mistakes again in the future.' ...So from then on, the mindset was formed that I always have to be right and cannot make mistakes..." (R p.507-511)

Participant S tended to seek solutions by avoiding or "running away" first. When she felt overwhelmed at home, she chose to attend university far from her hometown as a way out. In other issues, such as conflicts with friends, she used a similar approach distancing herself to calm down before addressing the problem once her emotions stabilized.

"...When it comes to solutions, I tend to run away. Because I was already very overwhelmed at home, I chose to study outside..." (S p.254-255)

Remaining silent and reflecting first was participant K's way of solving problems. She evaluated whether she had made a mistake; if so, she would apologize even if the other person was also at fault. If the problem originated from the other person, she chose acceptance as a form of resolution, believing that acceptance was the most appropriate solution.

"...The process for me is to stay quiet first and reflect. Did I make a mistake? If I did, then I should apologize, even if the other person was also wrong. But if the other person was at fault, then I just accept it. For me, the solution is acceptance..." (S p.241-246)

Similar to participants S and K, participant G addressed problems by calming herself first, such as sleeping or being alone, and then thinking about the consequences before determining a solution to avoid worsening the situation. In interactions with others, she preferred resolving issues through open conversation after emotions had subsided, allowing space for the other person to express their feelings.

"...I usually sleep first, be alone first, and once I feel better, if I have a problem with someone, then we talk. Talking properly is actually a good way to resolve problems..." (G p.754-757)

Participant N explained that she initially tended to keep problems to herself, but later learned to be more open after receiving advice from her older sibling. Now, when facing difficulties, she chose to share her experiences with friends or her sibling to gain new perspectives, which helped her find solutions more easily.

"...In the past, when I had problems, I often stayed silent and kept them to myself. But my sibling told me that if there's a problem, I should talk about it. Since then, whenever I have a problem, I always share it with friends or my sibling to see it from another perspective so I can find a solution..." (N p.57-60)

Ensuring Emotional Needs and Support Are Met

Participant S maintained emotional balance through two main strategies: seeking entertainment (sleeping or watching humorous videos) to create positive feelings, and channeling sadness through crying with the help of emotional videos or stories.

"...There are two ways for me: either I sleep or watch funny videos so I can laugh and feel happy. Or, when I'm really sad and want to cry but can't, I look for sad videos or read stories that make me cry so I can release it..."
(S p.267-272)

Participant K ensured her emotional needs were met through distraction, such as playing games or watching shows. This helped her temporarily forget the problem and remain calm, and when she later recalled it, only the most impactful parts remained.

"...I look for distractions that can help me forget for a while, like playing or watching something. That way, I don't think about it too much. After some time passes and I remember it again, I don't remember the whole problem, only the parts that left the deepest impression..." (K p.263-268)

Participant G ensured her emotional needs and support by calming herself first before dealing with problems. She managed negative emotions by giving herself time alone, then organizing rational steps for resolution while considering consequences. Although she built interpersonal relationships relatively easily, she preferred turning to God rather than others as her primary source of emotional support.

"...I think it's more about calming myself first, removing negative feelings... I shouldn't be in negative emotions or panic, because if I panic, I can't think. I need to be calm and take time alone first..." (G p.751-767)

"...but when it comes to a place to confide, I'm quite religious. I choose to confide in God, because sometimes when I tell others, I end up having expectations. So rather than hurting myself, I prefer that..." (823-826)

Participant N sought support from people closest to her when facing difficult situations. She usually relied on friends or her sibling as confidants and directly expressed when she needed advice or input.

"...When I'm in a difficult situation, I usually tell my friends or my sibling right away. Sometimes I also say directly when I need advice..." (N p.63-64)

Factors Influencing the Formation of Resilience in Individuals with Childhood Trauma Due to Domestic Violence

According to Grotberg (2003), resilience is influenced by several factors, including temperament, intelligence, culture, age, and gender. The following sections describe the factors that influence individual resilience in this study:

Temperament

The temperament factor is reflected in participants' common reactions such as remaining silent, avoiding situations, or withdrawing when facing violence. These reactions function as short-term survival mechanisms. Based on longitudinal research by Kim and Cicchetti (2010), avoidance strategies are common and functional responses used by children to regulate emotions when experiencing domestic violence-related trauma.

Reactions to Experiencing Violence in Childhood

All participants showed similar reactions when experiencing domestic violence during childhood, namely crying, remaining silent, and distancing themselves from home. Participant R expressed regret over her childhood reaction of only staying silent and doing nothing.

"...That experience actually makes me blame myself a lot. It feels full of guilt. Like, 'Why did I just stay silent back then? Why didn't I do something? Why could I only feel sad?' Even now, that guilt still comes up sometimes..."
(R p.522-526)

Participant S responded to domestic violence in childhood by crying and temporarily leaving home, staying at a friend's house to avoid the situation.

"...Crying, because as a kid I didn't know what to do, so I cried. And then I ran away from home not really running away, but with permission. Like suddenly wanting to stay over at a friend's house. As long as I wasn't at home..."
(S p.277-280)

Participant K responded by feeling sad, remaining silent, and accepting the violence without resistance. She believed she was a naughty child and perceived her father as a frightening and emotional figure.

"...I chose to stay silent..." (K p.280)
"...When I see my father, I see him as a scary and emotional person..."
(K p.289-290)

Participant G managed her emotions by crying silently or staying quiet so as not to worsen the situation. As a child, she preferred calming herself alone and even refused to be hugged because it made her cry more.

"...I cried, but without sound... just tears. If I cried out loud, the punishment would get worse..." (G p.682-685)

Similarly, participant N tended to become quiet and keep her feelings to herself. She chose obedience and avoidance to prevent triggering anger and worsening the situation.

Coping Responses That Helped Survival in Difficult Situations

These childhood coping responses continued into adulthood. Participant R still tends to avoid or escape difficulties and only confronts them when she feels ready. Although this strategy helps her survive, it also contributes to strong trust issues, especially in relationships.

"...I usually run away from difficulties and deal with them only when I feel ready..." (R p.351-533)
"...The trust issue especially in relationships is still very strong..."
(R p.533-535)

Participant S finds that temporarily escaping stressful situations, such as going out and being in crowded places, helps her cope by distracting her from problems.

"...When I feel really overwhelmed, I go out and hang out... being in a crowded place makes me less focused on the problem..." (S p.286-289)

Participant K stated that being indifferent helps her survive, as it prevents her from overthinking others' opinions, the past, or the future.

"...Being indifferent helps me survive because I don't think about what has happened or what will happen..." (K p. 299-302")

Participant G relies on finding a "safe place" through me time and hobbies rather than other people, whom she perceives as inconsistent.

"...I don't want to look for a safe place in other people... humans change. So I choose things I already know..." (G p.852-856)

Participant N felt that suppressing emotions made her feel safe in the past, though this habit still carries into the present. She is gradually learning to express her feelings.

"...That way used to make me feel safe. But the habit of keeping things inside still carries on, even though I'm slowly learning to speak up..." (N p.89-91)

Cautious Attitudes in Navigating Childhood Trauma

All participants demonstrated a tendency to be cautious in making decisions, which is closely linked to their childhood trauma. Participant R often delays or avoids actions due to fear of making mistakes.

"...It could be said that this comes from a fear of making mistakes. Because if we make a mistake, it can have a big impact, and sometimes things like that have happened before..." (R p.505-507)

Being cautious helps participant S feel more prepared when facing problems. She prefers to calm herself first before returning to confront difficult situations.

"...Like with friends or anyone else, I actually run away too. It's really bad, I know, but I just want to calm myself down first, and then come back to face it..." (S p.261-263)

The tendency to be cautious in participant K emerged from past experiences that made her afraid of being punished for making mistakes. Therefore, she chooses to be careful in order to avoid causing any problems.

"...It seems that in the past I thought that if I was careless, I would be punished. So now I tend to be more careful, so that I don't cause any problems..." (S p.310-312)

Participant G tends to be cautious and considers the consequences before making decisions. Although in certain situations she is willing to take risks, most of the time she chooses the safer option.

"...Actually, it depends on the situation. In some situations, I'm brave enough to take risks. But most of the time, I think first and consider things. Again, I think about the consequences whether I'm willing to accept the risk or not. So it really depends on the situation. But most of the time, I still think a lot about which option is safer..." (G p.873-878)

Participant N is also more inclined to be cautious because she has been accustomed to avoiding problems since childhood. This attitude helps her stay alert, but on the other hand, it limits her courage to try new things.

"...I tend to be cautious because since I was little, I've been used to avoiding problems. That attitude does make me more alert, but sometimes it also makes it hard for me to try new things..." (N p.94-96)

Intelligence

Intelligence is one of the factors that helps participants cope with childhood trauma resulting from domestic violence. Participants demonstrated cognitive abilities through creativity in finding solutions to difficult situations, the ability to analyze potentially harmful conditions, and decision-

making skills aimed at supporting self-recovery. These thinking processes provide direction for self-protection, help participants understand their experiences, and enable them to build adaptive strategies. In this way, intelligence contributes to strengthening participants' resilience and supports healthier life trajectories.

Using Creativity or Solutions to Cope with Difficult Family Situations

Participant R perceived the most difficult moment as her parents' divorce. She felt confused, pressured, and forced to express feelings that she had long suppressed. This process made her feel that home was no longer a safe place. At its peak, she became a witness in the divorce trial, which triggered mixed emotions relief because the conflict had ended, but sadness because her parents separated. The divorce occurred because her father had failed to provide financial support for many years, leading her mother and herself to feel exhausted and eventually bring the case to court.

"...It really happened, like when they were about to separate, about to divorce. ... That's when I told them how my condition actually was. ... I even said why I didn't want to go home. It felt chaotic. I even said, 'I don't have a home to go back to...'" (R p.556-559)

Participant S never truly sought solutions to deal with difficult family situations. The strategies she most often used were running away, staying silent, and suppressing her feelings. She usually chose to distance herself first and returned once the situation felt calmer.

"...Never. I never really looked for solutions. If there's a solution for me, it's just running away again..." (S p.296-297)

Similarly, participant K never sought solutions to address the difficult situations at home. Instead, she frequently experienced feelings of guilt and regret over her actions, questioning why she behaved in certain ways rather than trying to prevent the violence.

"...If I remember correctly, I never really thought about solutions. I just felt guilty..." (K p. 318-319)

Participant G found a way out of family difficulties through a turning point when she decided to return to school. From there, she began to channel herself into hobbies, such as reading *How to Win Friends and Influence People*, which helped her build a new life and new friendships. She felt that through this process, she could become a better person and start a new chapter.

"...o deal with it on my own, the turning point was when I decided to go back to school because I wasn't okay anymore. Then I started doing my hobbies, starting with reading books. I clearly remember reading How to Win Friends and Influence People. After everything I went through, like being bullied and having to start a new life and make new friends again, I realized I could be a new person a better one. Again, hobbies became my escape..." (G p.883-890)

Participant N coped with difficult family situations by finding ways to feel safe and not be overwhelmed by the atmosphere. She chose to distract herself with activities such as reading novels or fangirling. These activities helped calm her mind even when the home environment was uncomfortable.

"...Usually I look for ways to stay safe and not get carried away by the situation, like keeping myself busy reading novels or fangirling. That helps my mind feel calmer even when things at home aren't comfortable..."
(N p.102-104)

Analytical Ability in the Recovery Process

Participant R demonstrated strong analytical abilities when facing difficult or potentially harmful situations. She was able to assess circumstances, gather evidence, and decide to distance herself from risky people or conditions, allowing her to protect herself and avoid being overwhelmed by emotions.

"...When it comes to not getting distracted, it's really about staying safe. If I already know it will affect my condition, it's better to stay away..."
(R p.598-599)

By using observation and situational analysis, participant K was able to survive difficult conditions. She tended to observe her surroundings, assess the level of risk or discomfort, and then take steps to protect herself, such as seeking distraction or a "temporary escape" to calm herself before dealing with the problem further. This strategy helped her maintain emotional well-being.

"...I think I would definitely observe the situation first. If the atmosphere starts to feel uncomfortable, I'll look for a distraction..." (K p.330-332)
"...Yes, a temporary escape to calm myself down..." (K p.334)

Participant N developed the ability to carefully understand and assess situations. By paying attention to her surroundings and determining when to stay silent or withdraw, she was able to protect herself and remain strong in facing childhood wounds.

"...I learned to look at situations carefully so I know when to stay silent and when to step away. That way, I can stay strong in facing those childhood wounds..." (N p.107-108)

Decision-Making in Supporting Recovery

An important decision made by participant R was prioritizing her mental health and avoiding toxic situations. She chose to share her experiences only with close individuals after the issue had passed, ensuring that her decisions and recovery process remained self-directed and not influenced by others' judgments.

"...When it comes to decisions, I usually think first: is this right? Is this healthy for me? If it feels toxic, I try to avoid things that add to the burden..."
(R p.616-618)
"...I prefer to tell only the people closest to me, and even then only after the problem is over. Because for me, my life is my own responsibility..."
(R p.618-620)

Participant S tended to struggle with making independent decisions and more often followed others' advice or choices, especially in situations involving dominant figures or uncertainty. This was evident in academic choices, social interactions, and romantic relationships. Her main motivation was to avoid the risk of making mistakes and bearing responsibility, so if a decision failed, she would not feel blamed. Decisions in romantic relationships were also influenced by emotional and social needs rather than purely personal desire.

"...I prefer to follow others. You could say I find it hard to make decisions on my own. For example, even choosing a major I ended up following my friend..." (S p. 302-307)
"...If someone else is very dominant, I usually just go along with it. Mostly I just follow their suggestions..." (S p.309-311)

"...This might sound bad, but eventually I talked a lot with this person my current boyfriend. I did like him at first, but I didn't really intend to be in a relationship..." (S p.317-320)

Participant K demonstrated a self-protective strategy by relying on herself and choosing not to be involved in heavy decisions when she did not feel ready. In complex situations, such as her mother asking her to decide about her parents' divorce, she chose to remain indifferent and calm herself rather than making an immediate decision.

"...I was like, 'I don't want to know, this isn't my business.' So I chose to calm myself down and not care about what was happening just being indifferent..." (K p.426-429)

Several important decisions helped participant G recover from experiences of violence, including forgiving her past, strengthening her spiritual relationship with God, and prioritizing her own needs. She used hobbies as a way to calm herself and channel emotions and chose to share her experiences selectively with trusted individuals.

"...If I break it down, first I forgave everything. I realized I didn't deserve to be treated that way, so I chose to forgive and let my heart open..."

(G p.896-900)

"...Second, I repaired my relationship with God. I prayed, and after praying, I talked..." (G p.900-903)

"...Then I looked for hobbies and tried to share my feelings, even just a little, so at least someone knew what I was going through..." (G p.921-923)

Participant N made an important decision to love herself more and to be brave enough to say no to things she considered unhealthy. She also chose friends and environments that supported her recovery process, allowing her to grow emotionally. These decisions helped her build resilience and accelerate recovery from experiences of violence.

"...The important decision I made was learning to love myself more and being brave enough to say no to unhealthy things. I also started choosing friends and environments that support me so I can heal and grow better..."

(N p.111-113)

Culture

Cultural values within the family influence how participants respond to domestic violence. Hierarchical pressure, expectations of obedience, and patriarchal norms lead participants to tend to accept abusive treatment. However, some participants began to reject values they perceived as unjust. This process fostered critical awareness in interpreting cultural norms. Ultimately, culture plays a dual role, functioning both as a burden and as a catalyst for developing independence.

Influence of Cultural Values or Family Traditions in Facing Domestic Violence

Cultural values within participant R's family influenced how they experienced violence through hierarchical pressure, in which family members perceived as being in a "lower" position were often demeaned and compared unfavorably.

"...Yes, very much so. In that family, they tend to respect those who have more. So when you're below them, you're underestimated and looked down on, but when you're above, you're highly respected..." (R p.628-630)

Participant S perceived that family cultural values sometimes conflicted with their personal principles, particularly regarding the obligation to forgive parents regardless of their wrongdoing. They felt that no cultural value or tradition helped them cope with painful situations.

"...Family values always say things like you have to forgive your parents no matter what, because whatever their mistakes are, they're still your parents. But that kind of thinking implies that only children can be disobedient, while parents never can be. In my own view and values, parents can also be disobedient toward their children..." (340-346)

Cultural values in Participant K's family, which emphasize obedience and not opposing parents, influenced how they dealt with violence at home. They tended to accept punishment and not resist, in accordance with cultural norms taught since childhood.

"...In terms of culture, in Javanese culture... basically we have to obey, we're not allowed to resist. So if I was punished, I would just accept it and not fight back..." (K p.343-345)

The patriarchal values held by Participant G's family influenced how they coped with violence at home, where women were expected to be obedient and not challenge their parents. However, after entering junior high school, they began to understand the meaning of patriarchy and dared to resist and voice their disagreement. This marked the beginning of developing independence and courage in confronting injustice.

"...The cultures applied in Java are quite strong, especially patriarchy like you're not allowed to oppose your parents, and if you're a girl, you have to do this and that..." (G p.933-935)

"...After a long time, I became brave enough to refuse, because I knew I didn't like what my father was enforcing..." (G p.962-963)

Religious Values as Support or Barrier in the Recovery Process

Participant R felt that Christianity greatly supported their recovery process. Biblical stories, sermons, and experiences in Sunday school provided emotional reinforcement and a sense of being cared for. Religious songs also became a source of strength and hope, particularly the message that everything will be beautiful in its time.

"...Honestly, it helped a lot. Especially since I'm Christian... there are so many stories and teachings in this religion that are really touching... sermons from pastors, and what I remember most is actually Sunday school... There are so many worship songs that truly touch me... one of them says that everything will be beautiful in its time..." (R p.641-661)

Participant S's religious values also influenced how they viewed their relationship with their parents, particularly through the concept of karma. They believed that parents' actions toward their children would have future consequences, such as how children treat their parents in old age.

"...There's something called karma... I always think, well, it's okay if my father behaves like that, but we don't know the impact in the future... maybe later the child is considered disobedient and doesn't want to take care of the parent when they're old. But that's the consequence of what he did... it could be that we just put them in a nursing home. That's the karma..."
(S p.352-363)

The religious values held by Participant K helped their recovery process, particularly through teachings about forgiveness. They believed that forgiving, including forgiving their father, was the best way to let go of problems and sincerely accept what had happened.

"...In my religion, we're taught to forgive our enemies, so forgiveness is the best path, especially toward my own father. By forgiving, we can forget our problems. And when we forgive someone, it means we've sincerely accepted what happened. I believe that saying 'sorry' can bring peace to everything..." (K p.348-353)

Participant G had been exposed to religion from an early age because their mother enrolled them in religious-based schools. However, during junior high school, they felt their relationship with God was not close, as they feared school rules more than religious teachings. Upon entering senior high school, they realized the importance of rebuilding their relationship with God, becoming more consistent in worship and prayer, and turning to God as a source of comfort. Eventually, they felt that their prayers were answered and that God was always present in their life.

"...When I entered senior high school, I decided that I didn't want to stay in overly religious environments anymore... I tried to fix my relationship with God first, because in junior high I was more afraid of school rules than of God... then I started praying regularly, doing obligatory and sunnah prayers, reading the Qur'an again... and I felt that God always listens to my prayers, even though I know I'm not a perfect believer... I feel unworthy of leaving God... I feel very lucky that I've never been in a position where I didn't believe in God..." (G p. 980-1064)

Participant N had not yet felt a significant influence of religious values on their recovery process, as they felt they had not deeply engaged with their religion.

"...I'm not really sure, maybe there is or maybe not, because I don't really practice my religion deeply..." (N p.121-122)

Age

Awareness of domestic violence emerged from elementary school through adolescence. Initially, participants felt confused and perceived violence as a form of normal punishment. As they grew older, these experiences were recognized as traumatic. Adolescence also marked the beginning of independence. Age played an important role in shaping understanding and survival strategies.

Age Which Participants Became Aware of Experiencing Violence and Their Understanding of Domestic Violence

Participant R first became aware of violence at home at the age of 9 or 10. They felt shocked and never expected their parents to have such severe conflicts. This early understanding made them feel that their home environment was different from what they had imagined, affecting their psychological condition and creating feelings of unreality and confusion.

"...Yes, I was still in elementary school, around 9 or 10 years old..." (R p.115)
"...Honestly, the first time was really shocking. I was extremely surprised. Like, wow, my parents are like this. It felt like a dream was this even real? I couldn't imagine witnessing it directly..." (R p.675-679)

Participant S experienced domestic violence from the age of 8. They described the experience as a long cycle lasting from elementary school through senior high school and continuing until now.

This understanding influenced how they viewed their parents and surroundings, making them more vigilant, especially toward unfamiliar people.

"...Yes, around 8–10, but it became more intense and clear during junior high..." (S p.392)

Participant K began experiencing domestic violence as early as 4 or 5 years old. At that age, they did not realize the impact of the violence. However, as they grew older, these childhood experiences resurfaced as trauma and affected their emotional state in adulthood.

"...Because I was still very young, I didn't think it would affect me. But as I grew older, I started to feel trauma. It turns out it came from my childhood experiences..." (K p.377-380)

Participant G experienced domestic violence starting at age 8. They understood the violence as punishment and believed they were at fault. Although they felt sad because the punishment seemed excessive, they also felt responsible for their younger siblings.

"...I understood it as, oh, I made a mistake, so it's okay to be punished. But at that moment, I felt sad, because it didn't seem like such a big issue to deserve that level of punishment. Then I felt like I had to be responsible for my younger siblings..." (G p.1075-1078)

Participant N also experienced domestic violence since elementary school. At that age, they did not realize that what happened at home was violence, only that they felt uncomfortable being at home.

"...At that time, I didn't understand that what was happening was violence. I just felt uncomfortable at home..." (N p.135-136)

Developing Independence to Survive

Participant R began relying on themselves when entering junior high school while living in a dormitory. They realized they could not depend on others to handle daily problems. This independence continued into senior high school, where they started earning money through selling goods and used their savings to meet basic needs.

"...When I entered junior high school and lived in a dorm, I felt that if I didn't take action myself, I wouldn't survive. I couldn't depend on others. In senior high school, I started selling things to earn my own money. I even paid school fees with my earnings and once used my savings to survive for a month when I didn't receive any financial support..." (R p.714-722)

Participant S became more self-reliant during college after moving away from home. Although they had friends or a partner, support was limited, so they handled daily needs independently.

"...When I went to college and moved away, I had to do everything myself. Even if I had friends or a partner, they couldn't really help directly. So I did everything on my own, even small things like ordering water gallons online..." (S p.445-451)

Participant K fully relied on themselves from junior high through senior high school, especially when facing intense family conflict involving shouting and aggressive behavior. In such situations, they chose to remain silent and calm themselves, prioritizing personal safety and emotional well-being.

"...What traumatized me most was the shouting. At that time, I was already a teenager and understood the situation, so I chose to stay quiet and calm myself. I prioritized myself, because I felt that the only protection I had came from myself..." (K p.394-415)

Since senior high school, Participant N has relied on themselves by learning how to self-soothe without depending on others. This strategy helped them survive difficult situations by focusing on their own emotional well-being.

"...I really started relying on myself in senior high school. I learned how to calm myself without seeking others..." (N p.143-144)

Gender

Gender roles influence how participants cope with trauma. Women tend to express their emotions more openly, while men are more constrained by social norms. Some participants experience discrimination within the family based on customary practices or patriarchal culture. However, others do not perceive significant differences. Ultimately, gender functions as a lens that shapes experiences and access to support.

Influence of Gender Roles on Coping with Trauma

Participant R felt that her role as a woman influenced how she expressed and coped with trauma. She prioritized emotions while balancing them with logic, which allowed her to continue engaging in positive activities and taking care of herself. She also believed that if she were male, the risk of engaging in negative behaviors such as alcohol consumption or smoking would be higher.

"...It does influence me. Because I'm a woman. We know that women tend to feel things more deeply than men. So I prioritize feelings while balancing them with logic. Based on what I've experienced, I still try to do positive things. Whereas men we don't really know might slowly turn to alcohol, cigarettes, and so on..." (R p.733-737)

Participant G was aware of differences in treatment based on gender, particularly due to patriarchal culture that restricts emotional expression for both women and men. She understood that both genders carry their own burdens and learned to accept that each can express emotions without comparison. This experience helped her understand the perspective of the opposite gender and taught her to promote gender equality to her younger sibling, emphasizing that emotional expression should not be limited by gender stereotypes.

"...There are definitely gender issues, especially in patriarchal culture, where it's quite difficult for women to complain or express themselves. ... I feel that both sides carry heavy burdens and each has its own path. ... Men are also restricted men are supposed to be strong and not cry. ... I teach my younger sibling that this is how you should treat women, about endless gender equality..." (G p.1102-1140)

Participant N did not experience gender differences when expressing trauma. She emphasized that how she coped with trauma was more influenced by the situations she faced and the support of people around her, rather than by gender stereotypes.

"...No, I feel that the way I cope with trauma is influenced more by the situation and the people around me, not by gender..." (N p.147-148)

Differential Treatment Based on Gender When Seeking Help

Participant R experienced different treatment based on her gender, particularly within the context of Batak customs. Daughters in her family were considered to have less significance than sons, including in matters of inheritance and responsibility.

"...Yes, I have. It's quite common the difference between men and women, especially in Batak customs... We're all daughters, but we're considered to have no successor. So we're seen as incapable and as if we don't understand anything..." (R p.751-759)

Participant S recognized gender differences in seeking help and sharing experiences. She felt that men, particularly her older brother, faced greater difficulty because he was more reserved and had fewer options for sharing his feelings. In contrast, as a woman, she had more opportunities to share and receive support from those close to her.

"...My older brother is a man, and his options are basically either talking to my mother or not talking at all, or maybe just to friends. But my options are more varied, because I have a younger sibling..." (Sp.488-493)
"...Yes, because my brother is a quiet person and not very open..." (S p.498)

Participant K did not feel she experienced different treatment based on gender when seeking help or validation. She tended to share her experiences with people she felt close to and supported by, and the gender of the listener did not influence her experience of receiving support. Relationships were perceived more as friendships rather than gender-based distinctions.

"...I've never experienced gender differences. I usually talk to people I'm really close to and who support me. Whether they're male or female, they see me as a friend not as a man or a woman..." (K p.476-480)

Participant N felt that she was never treated differently based on gender when seeking help related to trauma. She stated that she had not noticed any such differences.

"...No, I don't think so or maybe I just didn't realize it but I feel like there wasn't any..." (N p.154)

Discussion

Based on the results of the data analysis, both similarities and differences were found in the resilience of individuals who experienced childhood trauma due to domestic violence (DV). The findings indicate that participants experienced varying forms of childhood trauma resulting from domestic violence, including physical and verbal abuse. This trauma emerged from experiences such as witnessing intense parental conflict, receiving abusive treatment from parents, and the loss of a responsible father figure. These experiences were not easy for individuals who endured domestic violence from an early age, as they produced profound psychological impacts, including fear of loud noises and difficulties in forming social relationships due to traumatic experiences. In addition, differences in family background influenced how participants navigated and processed their trauma. Consequently, resilience was developed by individuals who experienced childhood trauma due to domestic violence. Resilience functions as an adaptive response to childhood trauma which, although it does not always immediately eliminate negative effects, shapes psychological survival strategies (Sambada & Wibhowo, 2024). This condition became the basis for participants to further reflect on and make meaning of their lives and behaviors as individuals with childhood trauma resulting from domestic violence.

Living with childhood trauma caused by domestic violence inevitably results in complex and diverse impacts. Family, environment, and childhood experiences shape each individual's response

to trauma differently. Based on Eastern cultural values that emphasize hierarchy and family norms, domestic violence in Indonesia is closely associated with patriarchal structures that create unequal power relations, where violence is perceived as part of masculinity and a disciplinary method that positions men as superior (Faisyah & Sa'dah, 2022). This study found that each participant demonstrated different responses to the trauma they experienced, including fear, difficulties in building trust, and prolonged feelings of guilt. These responses did not necessarily lead participants to surrender; instead, they became efforts to continue living despite being overshadowed by childhood trauma. The findings also revealed participants' determination to rise from traumatic experiences, whether through efforts to overcome fear, repair social relationships, or focus on self-development and education. This motivation reflects resilience as something that emerges from "ordinary magic," resulting from multiple adaptive systems including biological, psychological, and environmental processes working together to support development (Masten, 2018).

Individuals who experienced childhood trauma due to domestic violence also demonstrated resilience in facing internal struggles as well as challenges related to family and social life. In confronting the reality of trauma, the presence of significant others and trust in God became important values that strengthened them in difficult situations. These elements served as resources for individuals who believe that responding effectively to challenges increases the likelihood of recovery and adaptation (Grotberg, 1995). Based on the findings, the process of resilience formation among survivors of childhood domestic violence trauma is multidimensional and involves dynamic interactions between internal factors (*I Am*) and external factors (*I Have*), which subsequently generate the capacity to act (*I Can*).

External support plays a foundational role in this process. Social support particularly from extended family members (such as aunts), close friends, and safe environments was identified as a crucial factor in providing security, refuge, and validation for survivors. Ungar (2013) emphasizes that access to meaningful social support resources is one of the seven pillars of resilience, whereby the surrounding environment provides the necessary scaffolding for recovery. Participants who lacked such support experienced greater difficulties. The forms of support varied, ranging from serving as a safe place, acting as conflict mediators, to offering nonjudgmental emotional support.

Internal factors represent the core of resilience and are developed in response to trauma. In line with Masten (2018), who highlights adaptive capacity as the foundation of resilience, key internal strengths identified among participants included a sense of responsibility to protect younger siblings, dreams and hopes for a better future, faith or spirituality, and the ability to forgive and release resentment. This process resulted in the formation of new self-perceptions: some participants viewed themselves as stronger and more resilient individuals, while others continued to struggle with trauma-related impacts such as low self-confidence, difficulty trusting others, and a tendency to suppress problems.

The combination of external support and internal strengths ultimately gave rise to a set of coping skills. Strategies for managing emotional challenges were generally introspective, such as calming oneself through solitude, crying, or engaging in distraction. Lavi et al. (2019) reported that survivors of childhood trauma often develop internalized emotion regulation strategies as a response to traumatic experiences. In problem-solving situations, participants learned to avoid reactive responses, choosing instead to temporarily withdraw in order to calm themselves before seeking solutions through communication or acceptance. To ensure their emotional needs were met, participants sought entertainment, confided in trusted individuals, or strengthened their relationship with God. Overall, the resilience process was non-linear, and everyone experienced it in a unique way. A common pattern observed was a transition from reliance on external support toward the development of internal strengths and coping strategies that enabled participants not only to survive, but also to grow and cultivate hope for the future.

Several factors were found to influence resilience among individuals who experienced childhood trauma due to domestic violence. Temperamental factors were reflected in participants' common responses such as remaining silent, avoiding confrontation, or withdrawing when facing violence, functioning as short-term survival mechanisms. These findings are consistent with the longitudinal study by Kim and Cicchetti (2010), which demonstrated that avoidance strategies are common and functional emotional regulation responses among children exposed to domestic violence. However, such responses may develop into long-term barriers to resilience, including communication difficulties, trust issues, and avoidance of new experiences due to excessive caution rooted in fear of making mistakes. The long-term impact of avoidant coping strategies is further supported by the meta-analysis of Lavi et al. (2019), which showed that high avoidance tendencies among individuals with childhood domestic violence trauma significantly predict difficulties in future social and interpersonal functioning.

In addition, intelligence plays a critical role through analytical ability and decision-making skills. Individuals who are able to analyze risky situations, make proactive decisions to distance themselves from toxic environments, and utilize creativity to find solutions demonstrate better recovery outcomes. Conversely, passive response patterns and a lack of problem-solving efforts hinder the resilience process. Cultural factors particularly patriarchal and hierarchical values that emphasize obedience initially shaped acceptance-based responses to violence. However, awareness of injustice may later become a catalyst for resistance and independence. Religious values, on the other hand, largely functioned as significant sources of psychological strength by providing a framework of meaning, teachings on forgiveness, and spiritual support. Yusmi, Shofiah, and Rajab (2025) found that spiritual guidance and religious coping have a significant influence on healing emotional wounds and past trauma, particularly in enhancing motivation and fostering a spirit of change. Age also determined the timing of trauma awareness and independence, with late adolescence often emerging as a critical period for personal development and self-responsibility. Lastly, gender was not consistently influential; although some individuals recognized the impact of gender stereotypes, the majority did not perceive gender as a determining factor in coping strategies or help-seeking behaviors. Thus, this study concludes that resilience is shaped by a complex interaction in which cognitive capacity, independence, and cultural or religious support serve as facilitators, while avoidant temperament patterns and adherence to repressive cultural norms may become significant barriers.

Beyond the aspects and factors described above, this study identified additional forms of diversity. Although domestic violence was perpetrated by parents, children who both witnessed and experienced it often blamed themselves for the incidents (Dayanti & Mesra, 2025). This sense of self-blame became an internal struggle that continued to overshadow participants, leading them to feel that they should have behaved better, been more attentive to family situations, or even prevented the violence by not provoking parental anger. Nevertheless, despite these struggles, participants demonstrated unique adaptive strategies when faced with limited support. Some built new support systems through friends or surrogate figures outside the family, while others consciously created safer living environments.

For participants, traumatic experiences became turning points for discovering meaning in life, fostering a sense of responsibility toward others, or encouraging engagement in hobbies and positive activities as personal "safe spaces." The most notable change was observed in the process of self and identity transformation. Individuals who were previously withdrawn, isolated, or even engaged in self-destructive behaviors were able to demonstrate independence, unconditional forgiveness, and greater self-acceptance. Participants learned to be less influenced by others' opinions, focus more on personal happiness, and even become sources of emotional support for their families. These findings affirm that resilience is not merely the ability to survive, but also the

capacity to adapt creatively, derive meaning from adversity, and construct a stronger, more empowered identity amid life's challenges.

From this study, all five participants applied different dimensions and factors in shaping and developing their resilience. The participants have demonstrated resilience in their lives and continue to strive to move forward in their daily lives. Thus, this study provides a comprehensive portrayal of resilience among individuals who have experienced childhood trauma due to domestic violence.

CONCLUSION

Based on the analysis conducted in this study, it can be concluded that individuals who have experienced childhood trauma due to domestic violence exhibit diverse forms of resilience. Given their family backgrounds and childhood experiences marked by violence, surviving, and continuing daily life is not an easy process. A key contribution of this study is the finding that although trauma results in severe psychological impacts, participants are able to develop resilience through processes of creative adaptation and the formation of a new, more empowered identity. They learn to accept themselves, build support systems beyond the nuclear family, and transform their traumatic experiences into motivation to live more independently and focus on personal well-being. Based on the findings of this study, the researchers acknowledge that several limitations remain. Therefore, for further development, future research is recommended to expand the scope of participants within the same topic, apply theoretical frameworks that capture the dynamics of individuals who have experienced childhood trauma within specific relational contexts, and quantitatively measure levels of resilience among individuals in Indonesia. In addition, future studies may adopt quantitative approaches to assess resilience levels more objectively and further explore the roles of culture, religion, and social support in the development of resilience among survivors of childhood trauma due to domestic violence.

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AUTHOR CONTRIBUTIONS

All authors were directly involved in this study, from the development of the research design and implementation of the study to the preparation of the full manuscript. All authors have read and approved the final version of the manuscript.

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