Autoestima en las mujeres víctimas de violencia por la pareja íntima

Self-esteem in women victims of domestic violence

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RESUMEN

Antecedentes: La violencia contra la mujer por su pareja íntima (VPI) puede provocar un malestar psicológico intenso y afectar su autoestima. Método: estudio con enfoque cuantitativo de tipo comparativo entre mujeres víctimas de violencia por sus parejas y las no víctimas. El grupo de mujeres maltratadas (n=170), grupo mujeres víctimas, buscaron ayuda en un centro de asistencia psicológica a mujeres maltratadas; y las no maltratadas (n=170), grupo no víctimas, fueron contactadas mediante la red de apoyo del Patronato de Ayuda a Casos de Mujeres Maltratadas (PACAM). Se identificó el tipo de violencia con un formulario estructurado y autoadministrado y se evaluó la autoestima con el Inventario de Autoestima de Rosenberg. Resultados: Los resultados mostraron diferencias estadísticamente significativas en la autoestima (p<0.001*) entre ambos grupos. La edad media de las mujeres víctimas fue de 38.55 años (DE = 9.72, rango = 20 – 67). En el grupo de las no víctimas, la edad media fue de 37.25 años (DE = 11.43, rango = 18 – 65). Los resultados evidencian que la baja autoestima se asocia de manera estadísticamente significativa con la violencia de pareja.

Palabras clave: autoestima, autovaloración, violencia por la pareja, violencia física, violencia psicológica y violencia sexual.

ABSTRACT

Background: Violence against women by their domestic partner (IPV) can cause intense psychological distress and affect their self-esteem. Method: quantitative comparative research in women victims and non-victims of violence by their partners. The group of battered women (n = 170), female victims group, sought help by way of a psychological assistance center for battered and non-battered women (n = 170), the non-victims group, contacted through the support network of the *Patronato de Ayuda a Casos de Mujeres Maltratadas* (PACAM). The type of violence was identified using a structured and self-administered form, and their self-esteem was evaluated using the Rosenberg Self-Esteem Scale (SES). Results: The results showed statistically significant differences in self-

esteem (p <0.001 *) between both groups. The average age of the female victims was 38.55 years (SD = 9.72, range = 20 - 67). In the group of non-victims, the average age was 37.25 years (SD = 11.43, range = 18-65). The results show that low self-esteem is associated in a statistically significant way with domestic partner violence.

Keywords: self-esteem, self-assessment, violence by the couple, physical violence, phycological violence and sexual violence.

Introduction

The mental health of women whom are or have been victims of intimate partner violence (IPV) by their intimate partner, has been a subject of study, pursuant to learning its psychological condition, its manifestation on the negative frame of mind, its deteriorating aftermath on bodily and emotional integrity (Delgadillo, Vargas, Nievar, Argüello and González, 2013; PAHO, 2014; Echeburúa, 2015; Navarro, 2015).

Self-esteem is a concept that has been closely related to the well-being of the person, their positive outlook and satisfaction with oneself, and with assuming a positive attitude towards life (Echeburúa, 2004; Labrador et al. 2011), which has been considered an important aspect of general well-being.

Rosenberg considers that self-esteem is a feeling towards oneself that can be either positive or negative (Rojas-Barahona, Zagers, Foster, 2009). In turn, Satir

(1991) considers that self-esteem is the ability to value the self, and treating oneself with dignity, love and reality.

Insults, disqualifications, humiliations, ridicule in public, mockery, criticism, control, threats of aggression, pushing and shaking, attempt to damage the identity and self-esteem of women victims of IPV (Walker, 2012). In contrast, the author refers to the possibility that battered women develop a high sense of self-esteem because they have survived a violent relationship. On the other hand, Labrador, Fernández y Rincón (2010)emphasize psychological effect on the woman when she lives with a person who tries to convince her that she is useless, that she knows nothing or that nullifies her ability to make decisions. One of the consequences of abuse deterioration of self-esteem in women who experience it (Echeburúa et al., 1997; Amor et al., 2002; Matud, 2004). The experience of abuse seriously damages self-esteem, generates internal

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feelings of inadequacy, guilt and self-responsibility (Arcas, 2014). In addition, it weakens oneself psychologically and decreases self-esteem (Kumar, Nizamie and Srivasta, 2013). In fact, Montañez (2013) considers that, if a woman's self-esteem resides in her perception of herself and her relationship with the world, she will feel overwhelmed by the constant humiliations and downgrades caused by the situation of ill-treatment.

Women victims of IPV tend to be isolated as a control strategy. In this sense, loneliness can lead to deficiencies in social skills, feelings of rejection, shame, despair and low self-esteem (Boon, Steele and Van der Hart, 2014). Levels of self-esteem may vary among battered women, so they tend to relate consistently to depressive symptomatology and stress-coping strategies (Matud, 2004).

In this sense, psychological abuse is an attempt to control another, to undermine confidence and self-esteem and, in addition, to increase women's vulnerability so that they become more dependent on the dominant (Quinteros and Carbajosa, 2008). The object of this type of abuse is to destabilize her, seek dependence, induce her to subordination

and impede her autonomy. Similarly, psychological abuse seeks the destruction of women in that aspect in order for them to end up subordinated, ridiculed, threatened, coerced, intimidated, insulted, devalued and isolated (Lorente, 2004; Sarasua and Zubizarreta, 2000; Jacobson and Gottman, 2001).

Low self-esteem is associated with severe depression symptoms. The study conducted by Cascardi and O'Leary (1992) indicates that 52% of a sample group of battered women in the United States, Caucasian, Catholic, married and employed, presented severe levels of depressive symptoms. The authors found correlation negative between depression and self-esteem. Low selfesteem correlated with a greater likelihood of developing depression. However, a high level of self-esteem acted as a protective factor against the onset of symptoms.

On the other hand, Morales-Reyes, Alonso-Castillo and López-García (2011) evaluated violence and the level of self-esteem during a study with a sample of 120 Mexican women. The results indicated that 60.2% had high self-esteem and 30.8% low self-esteem.

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They concluded that there is a statistically significant negative correlation between psychological violence and self-esteem, indicating that the more violence suffered, the lower the self-esteem of the female victim.

In a bibliographic review carried out by Calvo and Camacho (2014) of 68 articles published in the last 10 years, it was observed that women victims come to consultation banal for reasons. somatization and psychological disorders, decreased self-esteem, severe anxiety and depression, headaches, fatigue, back pain and chronic stress, a situation that affects their state of physical and psychological health.

The study conducted by Cascadi and O'Leary (1992) found that the frequency and severity of physical violence correlated significantly and negatively with the level of self-esteem of the abused woman. These authors point out that this condition is the main consequence of this type of violence. Similarly, the study carried out by Navarro-Mantas (2009) observed a correlation between physical abuse and low self-esteem. In addition, those with the highest level of self-esteem were those of the non-victim group. These

findings are corroborated by the comparative study by López et al (2006).

The findings of the study by Castillo, Bernardo and Medina (2018) on self-esteem with a sample group composed of 55 women battered by their partner, found that 52.8% had low-level self-esteem, 43.6% medium-level and 3.6% high, and that there was a negative correlation between violence and self-esteem. In this regard, Walker (2012) refers that the perception that women victims have of themselves is more affected by being exposed to contempt, rejection and humiliation.

In the Dominican Republic, 35% of women between the ages of 19 and 49 have suffered some form of physical, emotional or sexual violence and 2% have been raped by their partner (CESDEM, 2014). In the study conducted by Labrador et al. (2010), the age of female victims ranged from 30 to 40 years.

Another relevant finding is presented by the comparative type study with a sample of Dominican women victims of IPV and not victims, whose results indicated that suicidal ideas are strongly associated with exposure to violence and that social support is lower in women victims of IPV. This research also found that women victims had greater symptoms of depression and anxiety than those who were not exposed (Lara, Aranda, Zapata, Bretones and Alarcón, 2019b).

It is important to note that a woman victim of IPV may be concurrently exposed to various types of violence, as reflected in a study of Dominican women seeking psychological help conducted by Lara, Torres, Boluda, Callejas and Alarcón (2019a). 100% endured psychological violence, 66.5% violence, 53.5% physical sexual 69.4% violence, economic and patrimonial violence, and 44.7% religious violence. However, other results show that physical violence was greater than psychological violence (López, Fundora, Valladares, Ramos and Blanco, 2015).

This study

This study aims to assess whether women who are victims of intimate partner violence (IPV), have a higher risk of low self-esteem compared to women who did not experience an IPV scenario.

Method

A comparative type study was carried out with a group of women victims of IPV, and another group of women who were not victims, in order to establish whether women victims have a higher risk of low self-esteem than those who did not.

Participants

The sample consisted of two groups of women over the age of 18. The first group was composed of women who reported being victims of IPV (n = 170), who sought psychological help and the second group was made up of women who reported not having experienced IPV (n = 170).

The participants of the IPV victims group were selected from among the women who voluntarily attended the Emotional Recovery Program for Women Victims of Domestic Violence and Gender (*official name in Spanish: Programa de Recuperación Emocional para Mujeres Víctimas de Violencia Intrafamiliar y de Género -PRMV) of the Patronato de Ayuda a Casos de Mujeres Maltratadas (PACAM), a non-profit institution that has offered psychological care for 15 years.

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Participants from the non-victim IPV group were selected from among the women who participated in PACAM's continuing education program, through talks, conferences, workshops, and courses on non-violence-related content, and were contacted by telephone through the PACAM support network.

Toolkit

The first tool used was the sociodemographic form, which collects data such as age, nationality, religion, marital status, level of education, economic dependence of the partner and history of domestic violence. It contains items about the types of violence or abuse suffered in the couple's relationship, such as physical, psychological, sexual, economic and religious violence. The questions contained therein refer to specific acts that allow women to identify the type of violence experienced. Marking an item on the scales indicates that they experience a type of violence. This form was developed by the PACAM Clinical Team in 2009.

The Rosenberg Self-Esteem Scale (Vázquez, Jiménez, Vázquez, 2004) was the other tool used in this research. This scale, developed by Rosenberg (1965), is

one of the most widely used for the global measurement of self-esteem, and aims to evaluate the feeling of satisfaction that a person has with himself. The contents focus on feelings of respect and acceptance of oneself. It consists of 10 general items with 4 Likert-type response options: from very much in agreement (4) to very much in disagreement (1). It consists of 5 direct and 5 inverse items (inverse items: 6, 7, 8, 9 and 10). Half of the items are stated in positive and the other half in negative. The quantitative scores of the Rosenberg Self-Esteem Scale range from 10 to 40 The level of self-esteem is determined by the score. Scores between 0-25 would indicate a low self-esteem level and 26-29 medium and 30-40 high. The internal consistency of this instrument is 0.87. This inventory was chosen because it has been applied in several investigations within the field of violence against women in the relationship. It is easy to understand, respond to, correct and interpret; it is completed within a short timeframe and is used in the field of psychology and psychiatry. It is also used by forensic psychologists in the Dominican Republic in expert assessments of cases of gender-based violence in the

relationship. It has also been actively used in PACAM since 2012.

Process

Women victims of IPV who sought psychological care at PACAM came willingly. The group of non-victim women was part of the support network of the organization that attended talks, conferences, workshops and courses of non-violent content. Both groups were explained what the study would consist of, the characteristics and duration of the application of the inventories and the self-administered questionnaire. They were informed that their personal data would be kept strictly confidential and would only appear in the informed consent. The explanations were clear and precise in order to provide an atmosphere of trust. After completing the socio-demographic data form, inventories assessing depression and anxiety were applied. The study was approved by the Ethics Committee of the Human Sexuality Institute of the Autonomous University of Santo Domingo (UASD).

Data Analysis

The analysis of the study variables was carried out with the Statistical Package for the Social Sciences SPSS (version 22.0).

Frequencies were calculated withtheir corresponding percentages of the
qualitative variables and for the
quantitative variables, measures of
central tendency and measures of
dispersion (median, minimum,
maximum and standard deviation) were
executed.

In the bivariate analysis, the chisquare test ($\chi 2$) was applied to determine whether there is a statistically significant difference between the group of women victims of IPV and non-victims regarding depression and anxiety symptoms. For the analysis, the statistically significant value p < .001 corresponding to the 95% confidence interval level was considered.

Each continuous score was converted into a categorical score for the purpose of chi-square statistical analysis. The quantitative scores of the Rosenberg Self-Esteem Scale range from 0 to 40 points, which were converted into categorical variables as follows: Between 0-25 would indicate a Low self-sesteem level, Median from 26-29 and High from 30-40.

Findings

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In terms of self-esteem, 222 women show signs of high levels of self-esteem, of which 58 (26.1%) belong to the group of female victims and 164 (73.9%) to the group of non-victims. In terms of average self-esteem, of the 68 women in this range, 63 (92.6%) belong to the group of victims and 5 (7.4%) to the group of non-victims. With respect to low self-esteem, of the 50 women with low self-esteem, 49 (98.0%) belong to

the group of victims and 1 (2.0%) to the group of non-victims.

When comparing the self-esteem of both groups, statistically significant differences were found (p = .001).

Table 1. Descriptive statistics for the variables Depression and Anxiety in women victims of intimate partner violence (IPV) and non-victims.

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	Non-			
Chi-Square	victims	Victims	Total	
Independence Test	(N = 170)	(N = 170)	(N = 340)	
χ^2 gl P	(%)	(%)	(%)	Variables/Degree
146.16 2 .001				Self-esteem
	1(2)	49 (98)	50 (100)	Low
	5 (7.4)	63 (92.6)	68 (100)	Median
	164 (73.9)	58 (26.1)	222 (100)	High
λ δ'	1 (2) 5 (7.4)	49 (98) 63 (92.6)	50 (100) 68 (100) 222 (100)	Self-esteem Low Median

Note. df = Degrees of freedom. p = significance

Discussion

The aim of the present study was to assess whether women victims of IPV are at greater risk of low self-esteem compared to non-victims.

The women victims of IPV who participated in the study had an age similar to the average age of women who have participated in other studies (Labrador, Fernández-Velasco, & Rincón, 2010; CESDEM, 2014).

In turn, it can be noted that all women victims of **IPV** attended psychotherapy experienced psychological violence, results that coincide with other studies (Amor, Echeburúa, Corral, Sarasua, Zubizarreta, 2001). On the other hand, other results show that physical violence was greater than psychological violence (López, Fundora, Valladares, Ramos, & Blanco, 2015).

In accordance with the results obtained regarding self-esteem, it can be concluded that low self-esteem is

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associated in a statistically significant way with having experienced violence. It is important to note that the self-esteem of women victims of IPV tends to be low and medium. These statistics corroborate what was found by Amor et al (2001), López et al (2006) and Castillo et al (2018). However, the results of Morales-Reyes et al. (2011) differ from this study, showing that 60.2% of the victims had high levels of self-esteem. Likewise, 20.4% of women showed adequate levels of self-esteem (Montañez, 2013).

In other words, the data presented show that there is a significant association between being a victim of violence and having low self-esteem, in comparison with non-victims who had higher levels, although it should be noted that victims and non-victims had medium and high self-esteem levels, which could be a protective factor for some symptoms, as mentioned by Cascardi and O'Leary (1992) and, therefore, an essential aspect to take into account within therapeutic intervention.

In that sense, a point to consider in this study is the limitation of having been carried out in a single non-profit psychological care center, so that these results cannot be extended to the general population.

However, the data shows the importance of creating more specialized care programs for women victims of IPV with adequate help and follow-up for their emotional recovery.

In short, the results obtained from this study show the deterioration in the self-esteem of women victims of IPV, associated with having experienced different types of violence. To conclude, it is important to highlight the importance of including interventions aimed at raising the level of self-esteem in specialized care programmes for the emotional recovery of female victims. Finally, it is important to point out that this is the first study of this type in populations of Dominican women.

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