

Identifying Women's Strengths for Promoting Resilience After Experiencing Intimate Partner Violence

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Guided by the Resilience Portfolio Model, this study examined strengths associated with well-being and post-traumatic growth (PTG) among women who had experienced intimate partner violence (IPV). Participants were 109 Spanish women who were receiving specialized psychological services for IPV. They completed a survey on multiple indicators of strengths, subjective well-being, and PTG. The results indicated that PTG was positively correlated with well-being and all strengths. Univariate analysis comparing levels of PTG showed significant differences in all factors, except emotional regulation and optimism. Post hoc analyses revealed two patterns, with some strengths distinguishing across all levels of PTG, and others only discriminating the most resilient women (as indicated by PTG) from the rest. Multivariate analyses accounted for 42% of the variance in posttraumatic growth and 52% in well-being. The results suggest ways to promote well-being and resilience among victimized women.

Keywords: intimate partner violence; resilience; post-traumatic growth; well-being; violence against women

Research has provided substantial evidence of the negative consequences of intimate partner violence (IPV) on women (Campbell, 2002; Ellsberg et al., 2008; Kwako et al., 2011). The extent of adverse sequelae from physical, psychological, or sexual violence by intimate partners is known to vary based on characteristics of the violence itself, as well as victim's prior burden of trauma and other characteristics. For example, the intensity of health problems and traumatic symptoms can depend on age at the onset of the abusive relationship (Jouriles et al., 2017), severity, duration, and type of abuse (Dutton et al., 2005), and the victim's prior history of poly-victimization (Hamby & Grych, 2013). In addition, women who have experienced IPV may display varying capacities to survive and thrive (Ulloa et al., 2015). Using the Resilience Portfolio Model (Grych et al., 2015) as a theoretical framework, the purpose of this study is to examine strengths associated with post-traumatic growth and subjective well-being in a sample of Spanish women

who have experienced IPV. Although it is imperative to continue making efforts to create safe conditions for women and their children, developing a better understanding of what helps some women after victimization has clear implications for intervention. Identifying their strengths can be useful to improve postvictimization functioning to a greater number of women and support a change in the field from the still predominant deficit-focused paradigm to a strengths-focused one (Hamby, 2014).

Interest in studying resilience has increased rapidly over recent decades, giving rise to different definitions. However, most of them refer to two core concepts of *adversity* and *positive adaptation* (Fletcher & Sarkar, 2013; Masten, 2011). Initially considered a trait or outcome, most researchers now identify resilience as a process through life (Luthar et al., 2000). Some of them even consider that delay or prolonged recovery may be a different pattern of resilience (Masten, 2011). In the case of survivors of IPV, qualitative research has indicated that resilience involves multiple cognitive, emotional, and behavioral shifts, which go from resistance toward positivity (Crann & Barata, 2016). In the Resilience Portfolio Model (Grych et al., 2015), resilience is seen as the process of using strengths (individual, family, or community) after adversity to achieve positive outcomes such as post-traumatic growth and subjective well-being.

Resilient people are capable of adapting or thriving in the face of successive adversities by deploying different skills and resources, and social scientists are interested in knowing the keys to this process in order to promote it. In the cases in which thriving occurs, resilience and post-traumatic growth are empirically related. However, they are different psychological constructs (Vloet et al., 2017). In the Resilience Portfolio Model, post-traumatic growth is considered an indicator or element of resilient outcomes. Post-traumatic growth refers to positive trauma-specific changes that take place after a highly stressful experience (Tedeschi & Calhoun, 2004), such as reordering one's priorities after a traumatic event. Resilience is a broader concept that is not necessarily linked to extreme events (Feeney & Collins, 2015) nor to positive change (versus maintenance or return to positive functioning). Evidence also indicates that resilience and well-being measure different but related concepts (Mguni et al., 2012). Although well-being is often used to assess positive functioning, resilience requires a prior adversity and an indicator of current functioning, which can be well-being, the absence of symptoms, or another measure (Luthar et al., 2000; Mancini & Bonanno, 2006). Focusing on either as adaptation or post-traumatic growth as outcomes, resilience has already been documented for many different traumas and populations, but it has only recently been studied among women who have survived IPV (e.g., Ulloa et al., 2015).

According to the Resilience Portfolio Model (Grych et al., 2015), the strengths that help people overcome adversity, making resilience possible, are *assets* (characteristics of the person that promote healthy functioning) and *resources* (sources of support outside the person). Together, assets and resources contribute to each individual "portfolio" of strengths. From an additive point of view, the total amount of strengths are potentially more important for resilience than the presence of any particular strength. Reflecting this idea, the model adopts the concepts of *density* (more intensity of strengths) and *diversity* (more variety of strengths, or "*polystrengths*") as predictors of resilient outcomes. However, evidence also suggests that some strengths may be more advantageous in this process than others (Hamby et al., 2018). The model groups the strengths into three different domains. *Regulatory strengths* facilitate sustaining goal-driven behaviors or maintaining stability over time. *Interpersonal strengths* are individual characteristics that foster the development and maintenance of close relationships and include relational resources available to individuals.

Meaning-making strengths refer to the capacity to make sense of the events that occur in their lives and to maintain coherence between events and their broader beliefs and values.

Within the group of regulatory strengths, coping is among the factors that contributes to post-traumatic growth, one indicator of resilient outcomes, after adversity (Prati & Pietrantonio, 2009), and it is a widely studied strength regarding IPV (Mengo et al., 2017; Waldrop & Resick, 2004). Evidence indicates that women adopt a wide variety of coping strategies to manage abuse, even though their coping efforts are often constrained by factors such as a lack of social support, financial dependency, and severity and length of violence (Hamby, 2014). Coping strategies can be associated with women's causal attributions of blame and responsibility for abuse. For example, blaming one's partner for the abuse predicts both more active and more public coping efforts than excusing him (Meyer et al., 2010). However, the severity of the abuse usually also promotes more diverse and more active coping efforts (Hamby & Gray-Little, 1997).

The regulatory dimension also includes strengths such as the capacity to manage difficult emotions and persevere despite difficulties. Thus, emotional regulation, emotional awareness, and psychological endurance are among assets associated with resilience in both youth and adult populations (Hamby et al., 2018). Emotional regulation is associated with healthy functioning in numerous domains, whereas poor skills in this specific ability relate to psychological disorders in survivors of IPV (Katz & Gurtovenko, 2015; Zamir & Lavee, 2016). In a similar vein, poor emotional awareness may be a symptom resulting from traumatic exposure, as well as a predictor of poor psychological adaptation. In fact, there is evidence suggesting that emotional awareness may protect against revictimization (Zamir & Lavee, 2015). Psychological endurance has recently been identified as a potential source of resilience (Hamby et al., 2018), although it is still necessary to examine if it is common in different cultural contexts. A similar regulatory strength has been depicted in the positive psychology literature as perseverance or grit, which refer to persistence in the completion of specific tasks in the face of adversity (Duckworth et al., 2005).

A second domain of strengths related to resilience are those concerning interpersonal relationships, which refers to the search for, maintenance, and receipt of relational resources. In addition to contributing to post-traumatic growth, an indicator of resilient outcomes, in the face of different adversities (Prati & Pietrantonio, 2009), social support has also been shown to be important during and in the years following abusive relationships (Anderson et al., 2012). Most literature in this area has focused on its stress-buffering effects. Social support may moderate the association between coping and negative psychological consequences of abuse (Kocot & Goodman, 2003). However, promoting thriving needs to go beyond just buffering stress. According to Feeney and Collins (2015), social relationships may be not just a refuge from adversity but may also be a source of new opportunities of growth. This latter conceptualization is most consistent with the resilience portfolio model.

Meaning-making strengths are the third domain of the Resilience Portfolio Model. Traumatic events have greater potential to produce adverse outcomes when they challenge core beliefs regarding the world, other people, and the self (Cann et al., 2010). When this happens, people often engage in a meaning making process to reduce the discrepancy between their appraisal of their experiences and their global beliefs and goals (Park, 2010). Given that violence suffered in intimate relationships is often associated with feelings of betrayal, self-blame, powerlessness, and helplessness (Calvete et al., 2007; Kaufman et al., 2018), meaning-making strengths are expected to have an important role in resilience processes related to IPV. Positive changes in self-perceptions are, in fact, a prevalent theme among

survivors of IPV who experience psychological growth (Ulloa et al., 2015). The Resilience Portfolio Model includes optimism and purpose among strengths that help find meaning in negative experiences and build a broader and positive identity (Grych et al., 2015).

RESEARCH ON RESILIENCE AFTER VICTIMIZATION IN SPAIN

Research on resilience is moving toward an integrated approach that allows analyzing resilience processes across disciplines and levels of analyses (Bowes & Jaffee, 2013; Brody et al., 2016; Luthar et al., 2000; Masten, 2011). This includes paying attention to the role of culture (Ungar, 2011). However, few studies in Spain have analyzed resilience and even fewer have focused on resilience in battered women. One exception is an exploratory study by Lopez-Fuentes and Calvete (2015). They found that Spanish women achieved greater resilience through both individual factors (physical activity, rediscovering oneself, altruism, control over one's life, creativity, spirituality, focus on the present, sense of humor, introspection, optimism, projects, and goals) and external resources (housing, informal social support, and formal social support).

The Spanish social systems for women who have suffered gender-based violence offer numerous community resources. The Organic Act 1/2004, December 28 on "Integrated Protection Measures against Gender-Based Violence" and other measures have established a national system of services for the protection of IPV victims and their children. In addition to restrictive measures for abusers, Spanish law recognizes the right of victims and their children to protection, economic and social resources, and psychological assistance. This guarantees minimum conditions for women to be able to initiate the recovery process. However, it is necessary to go further than the search for factors that ameliorate the harms of abuse and identify those that promote wellness and thriving. For example, some studies indicate that women who receive IPV services have greater perceptions of risk, which may act as a protective factor by reducing contact with the aggressor (Cala et al., 2016; Gonzalez-Mendez & Santana-Hernandez, 2014). However, a higher perception of risk may also lead to a greater sense of helplessness in some cases, making it necessary to reinforce other strengths in these women.

THE CURRENT STUDY

The current study uses the Resilience Portfolio Model as a framework for exploring the subjective well-being and post-traumatic growth in Spanish women who have experienced IPV. It is the first application of the model to IPV survivors and one of the first studies of resilience in this population. It is also the first application of the model to an adult Spanish sample, although it has demonstrated promise in a sample of Spanish adolescents (Gonzalez-Mendez et al., 2018). The specific aim of this study is to identify strengths from three different domains (regulatory, meaning making, and interpersonal) that can help female survivors achieve resilience, as indicated by two outcomes, subjective well-being and post-traumatic growth. In addition, the study will also examine the importance of the *density* and *diversity* (or polystrengths) of strengths, as suggested in the Resilience Portfolio Model.

According to the model, we expect that *density* and *diversity* will be more strongly associated with post-traumatic growth than any particular strength. However, we also expect that some strengths of the three domains may be more clearly related to well-being and post-traumatic growth than others are (Hamby et al., 2018). For example, previous work has identified a sense of purpose as a particularly promising factor. Regarding the characteristics of the IPV, we expect that women reporting more burdens (such as longer period of abuse) will show lower levels of well-being and post-traumatic growth, because higher burdens seem to hinder resilience (Graham-Bermann et al., 2011).

METHOD

Participants

Participants were 109 women who were receiving specialized psychological services for women who had experienced IPV in Spain. According to the records of these services, all had experienced one or more types of abuse, with psychological and physical victimization the most common. Most (85%) were of Spanish origin, and 15% were immigrants, mostly from South America. Their ages ranged from 18 to 64 ($M = 38$; $SD = 10.4$). Their relationships had lasted between 3 months and 40 years ($M = 11.4$; $SD = 9.7$). Most (80.7%) had children (mode = 2), whose ages ranged from 2 months to 41 years old. The average age of their youngest children was 9.8 years ($SD = 7.8$), whereas the oldest child had an average age of 14.4 ($SD = 9.4$).

Procedure

Prior to initiating the study, approval was obtained from the institutions responsible for the victim services and from the Institutional Review Board of the first author's university. Women were informed about the objectives of the study by the researchers. No compensation was offered for participating. After receiving specific training, the staff of each service was in charge of collecting the information. Given that they already knew the women, they were able to establish a suitable climate for the survey. The self-administered survey was completed before scheduled group sessions. All responses were confidential and the survey did not include any information that could identify participants.

Measures

In addition to questions on general sociodemographic and family characteristics, several scales from the Resilience Portfolio Measurement Packet (Hamby et al., 2015) were included to assess psychological strengths, psychological wellbeing, and post-traumatic growth. We selected those strengths most clearly associated with thriving in prior work (Hamby et al., 2018) and represented the three dimensions proposed by the Resilience Portfolio Model, that is, regulatory, meaning making, and interpersonal domains. These scales have been previously translated into Spanish, with prior evidence of reliability and validity for the Spanish versions and the original versions (Hamby et al., 2018).

Regulatory Strengths. Four scales were selected to assess regulatory strengths.

Coping. Cognitive, emotional, and behavioral strategies of coping were measured with 13 items whose response options ranged from 4 (*mostly true*) to 1 (*not true*). Most strategies focused on problem solving (e.g., “When dealing with a problem, I spend time trying to understand what happened”; “When dealing with a problem, I try to see the positive side of the situation”), but the scale also includes some emotion-focused strategies (e.g., “I take steps to take better care of myself, and my family for the future”). Internal consistency measured through Cronbach’s alpha was .75.

Emotional awareness. To assess the ability to monitor and identify emotions’ own, two items were used (“I am aware of my feelings” and “I pay attention to how I feel”). The response options ranged from 4 (*mostly true*) to 1 (*not true*). Internal consistency was .72.

Emotional regulation. To assess emotional stability and ability to manage distressing feelings, four reverse-scored items were used (e.g., “When I’m upset, it takes me a long time to feel better”; “When I’m upset, I have difficulty focusing on other things”). Response options ranged from 1 (*not true*) to 4 (*mostly true*). Cronbach’s alpha reached a value of .72.

Psychological endurance. This regulatory strength was assessed through six items. They refer to an individual’s tendencies to be a source of strength to others in times of need (e.g., “People rely on me through good times and bad”) and to persist diligently when presented with difficulty (e.g., “I am quick to pick myself back up again when I am ‘knocked down’”). Response options ranged from 4 (*mostly true*) to 1 (*not true*). Cronbach’s alpha was .82.

Meaning-Making Strengths. Two scales were used to assess this group of strengths:

Purpose. Three items were used to assess the degree to which women had a sense of meaning in life and a reason for living (e.g., “My life has a clear sense of purpose”). Response options ranged from 4 (*mostly true*) to 1 (*not true*), and internal consistency was .86.

Optimism. This strength is defined as having generalized positive expectancies. It contributes to meaning as the ability to pursue goals and have a valued future (Scheier, Carver, & Bridges, 1994). Two reverse-scored items (“If something can go wrong for me, it will”; “I hardly ever expect things to go my way”) were used to assess this strength. Response options ranged from 4 (*mostly true*) to 1 (*not true*). Internal consistency was .73.

Interpersonal Strengths. Within the interpersonal domain, a nine-item scale was used to measure social support from different people (“There are people that really try to help me”; “I can count on my friends when things go wrong”). Response options ranged from 4 (*mostly true*) to 1 (*not true*). The internal consistency reached a score of .90.

Moreover, two additional measures from the Resilience Portfolio Measurement Packet were used to assess subjective well-being and post-traumatic growth, which were used as outcome variables.

Subjective Well-Being. Psychological well-being was measured through 13 items (e.g., “I am satisfied with my life”; “I have a lot to be proud of”). Response options ranges from 4 (*mostly true*) to 1 (*not true*). Internal consistency reached a score of .91.

Post-Traumatic Growth. Post-traumatic growth is depicted as positive results gained after having experienced adverse or stressful events. This scale includes nine items adapted from the Posttraumatic Growth Inventory (Tedeschi & Calhoun, 1996), which assess increased strengths, spiritual change, new life possibilities, and appreciation of life

(e.g., “I changed my priorities about what is important in life”; “Now I know that I can handle hard times”). Response options ranges from 4 (*mostly true*) to 1 (*not true*). Internal consistency reached a score of .70 after removing the item 3 (I established a new path for my life).

Density and Diversity Indexes. As in previous studies of the proponents of the model (Hamby et al., 2018), two indexes were computed for further analyses. While *density* (more intensity of strengths) was calculated using the average of strengths, *diversity* (more variety of strengths) was calculated by counting every strength for which a person had a score that is at least .5 *SD* above the mean.

Facets of Life That Favor Well-Being. Finally, the instrument also included an additional question (“is there any facet of your life that helps you feel good?”) designed to assess different “facets of life” that make women feel better. This question included six specific areas to be assessed (work, being with their family, being with their friends, faith or spirituality, hobbies, and helping others) and a general category of others. Response options for each area ranged from 4 (*mostly true*) to 1 (*not true*). Internal consistency reached a value of .70.

Data Analysis Plan

Data analysis proceeded in three stages. In the first set of analyses, we conducted zero-order Pearson correlations among all variables. In the second set of analyses, we were interested in better understanding thriving versus lower levels of functioning. It is possible that the factors that distinguish thriving may be different than those that distinguish poor functioning from adequate functioning, and one goal of the Resilience Portfolio Model is to identify variables that are associated with thriving, not merely absence of dysfunction. For this purpose, participants were classified according to their scores on post-traumatic growth for subsequent analyses. Specifically, the 33rd and 66th percentile scores on post-traumatic growth were initially determined. Then, participants were ranked as “low” if they scored below the 33rd percentile (30.3%), as “medium” when they scored between both percentiles (40.4%), and as “high” when they scored above the 66th percentile (29.3%). After computing Levene’s test, univariate analysis of variance (ANOVA) and post hoc comparisons were conducted to examine the existence of significant differences. Welch’s test was used when the variances of the groups were not homogeneous. Welch’s test was used when the variances of the groups were not homogeneous. The final set of analyses addressed one key area of interest in the Resilience Portfolio Model, which is identifying the strengths that are the best predictors of outcomes such as post-traumatic growth and subjective well-being. To test the relative influence of the strengths and the indexes of density and diversity for predicting two indicators of psychological functioning, post-traumatic growth and subjective well-being, stepwise multiple linear regression analyses were computed. We also explored whether each indicator of psychological functioning improved the ability of the model to predict the other indicator (either post-traumatic growth or subjective well-being).

TABLE 1. Zero Order Correlations Between the Outcomes and the Different Strengths and Indexes

	1	2	3	4	5	6	7	8	9	10	11
1 Well-being											
2 Post-traumatic growth	.527**										
3 Density	.646**	.634**									
4 Diversity	.567**	.572**	.825**								
5 Coping	.604**	.449**	.847**	.613**							
6 Emotional awareness	.458**	.289**	.518**	.583**	.431**						
7 Emotional regulation	.116	.208*	.335**	.288**	.068	.101					
8 Endurance	.583**	.589**	.754**	.684**	.535**	.378**	.099				
9 Purpose	.697**	.537**	.696**	.672**	.531**	.460**	.111	.753**			
10 Optimism	.182	.262**	.382**	.404**	.121	.118	.421**	.205*	.283**		
11 Social Support	.280**	.475**	.667**	.546**	.383**	.202*	.146	.387**	.372**	.193*	
12 Facets of life	.600**	.562**	.576**	.532**	.418**	.375**	-.028	.627**	.558**	.100	.468**

* $p < .05$. ** $p < .01$.

RESULTS

Bivariate Associations Among Variables

As shown in Table 1, all strengths were positively correlated with each other, except emotional regulation and optimism, which only correlated with thriving and the indexes of density and diversity. In addition to strengths, post-traumatic growth was correlated with well-being. No correlations were found between post-traumatic growth or well-being with other variables such as women's and children's ages, and length of abusive relationship, except a negative correlation between the former outcome and the number of children ($r = -.211, p < .05$). Regarding the facets of life, family stood out for its highest average and lowest dispersion ($M = 3.0, SD = 0.9$), followed by work ($M = 2.9, SD = 1.0$), and friends ($M = 2.8, SD = 0.9$). Among hobbies ($M = 2.3, SD = 1.3$), the most common were outdoor activities, reading or drawing. Helping others ($M = 2.4, SD = 1.1$) and faith and spirituality ($M = 2.1, SD = 1.1$) reached a lower importance.

Factors Associated With Thriving

ANOVA indicated significant group differences among those classified as low, medium, or high on post-traumatic growth on most variables, except emotional regulation and optimism.

Follow-up tests revealed the pattern of differences among groups on strengths and other variables. Overall, women classified as high in post-traumatic growth showed higher scores on most variables than the other participants did. However, although several factors (endurance, purpose, density, subjective well-being, and facets of life) discriminated between all three levels of post-traumatic growth, only those classified as high in post-traumatic growth differed from the other participants in coping, emotional awareness, social support, and diversity (see Table 2).

Predictors of Post-Traumatic Growth and Subjective Well-Being

As a first step, we included all strengths and the two indexes as predictors of post-traumatic growth, in a stepwise multiple linear regression analysis. This first model accounted for 42% of the variance in post-traumatic growth ($F(2, 108) = 14.11, p < .001$), with more density of strengths ($\beta = .42, p < .001$) and more psychological endurance ($\beta = .28, p < .05$) significantly predicting higher post-traumatic growth (Table 3). The subsequent addition of well-being did not significantly improve the results of the model for predicting post-traumatic growth.

Stepwise multiple linear regression analyses were again computed to predict subjective well-being, with all strengths and the two indexes as predictors. In this case, the model accounted for 52% of the variance in subjective well-being ($F(2, 108) = 40.70, p < .001$), with purpose ($\beta = .58, p < .001$) and coping ($\beta = .23, p < .01$) as significant predictors (Table 4). Just as in the previous model, adding post-traumatic growth as a new independent variable did not improve the ability of the model to predict well-being.

TABLE 2. Descriptives, ANOVA, and Post-hoc Analyses for Contrasting Women’s Scores With Different Levels of Post-Traumatic Growth

	Low(L) <i>M (SD)</i>	Medium(M) <i>M (SD)</i>	High(H) <i>M (SD)</i>	<i>F</i> (2,108)	ηp^2	Post-hoc		
						L-M	L-H	M-H
Coping	−0.4 (0.8) _a	−0.2 (0.8) _a	0.8 (0.9) _b	18.72***	.26	−0.2	−1.2***	−1.0***
Emotional awareness	−0.3 (1.0) _a	−0.1 (0.8) _a	0.5 (1.1) _b	5.90**	.10	−0.2	−0.8**	−0.6*
Emotional regulation	−0.3 (0.9)	0.0 (0.9)	0.3 (1.2)	2.65 <i>ns</i>	.05	−0.3	−0.5	−0.2
Psychological endurance	−0.7 (0.8) _a	−0.1 (0.6) _b	0.8 (1.0) _c	23.35w***	.36	−0.6**	−1.5***	−0.9***
Purpose	−0.6 (0.9) _a	−0.1 (0.8) _b	0.8 (0.8) _c	26.68***	.33	−0.5*	−1.5***	−0.9***
Optimism	−0.3 (0.9)	0.1 (0.9)	0.1 (1.1)	2.35 <i>ns</i>	.04	−0.4	−0.4	0.0
Social Support	−0.5 (0.8) _a	0.0 (0.8) _a	0.6 (1.0) _b	14.11***	.21	−0.5	−1.2***	−0.7**
Subjective well-being	−0.6 (0.7) _a	0.0 (0.7) _b	0.7 (1.1) _c	16.59w***	.27	−0.6*	−1.3***	−0.7**
Density	−0.7 (0.7) _a	−0.1 (0.6) _b	0.9 (1.0) _c	29.73w***	.42	−0.5**	−1.6***	−1.1***
Diversity	−0.5 (0.5) _a	−0.3 (0.6) _a	0.9 (1.1) _b	20.63w***	.37	−0.2	−1.4***	−1.2***
Facets of life	−0.8 (0.7) _a	0.0 (0.8) _b	0.8 (0.8) _c	31.97***	.37	−0.8***	−1.6***	0.8***

Note. ANOVA = analysis of variance; ns = nonsignificant; w = Welch’s test.

Different subscripts indicate significant group differences.

p* < .05. *p* < .01. ****p* < .001.

TABLE 3. Stepwise Linear Regression Model Examining Strengths Associated With Post-Traumatic Growth

Models		B (SE)	β	95% CI	<i>t</i>	<i>p</i>
Model 1 ($R^2 = .40$)	Density	.49 (.06)	.63	[0.38–0.61]	8.47	.000
Model 2 ($R^2 = .42$)	Density	.33 (.07)	.42	[0.16–0.50]	3.81	.000
	Endurance	.21 (.07)	.28	[0.04–0.39]	2.50	.014

Note. CI = confidence interval; SE= standard error.

TABLE 4. Stepwise Linear Regression Model Examining Strengths Associated With Well-Being

Models		B (SE)	β	95% CI	<i>t</i>	<i>p</i>
Model 1 ($R^2 = .49$)	Purpose	.57 (.05)	.70	[0.46–0.68]	10.17	.000
Model 2 ($R^2 = .52$)	Purpose	.47 (.06)	.58	[0.35–0.60]	7.37	.000
	Coping	.21 (.06)	.23	[0.06–0.31]	2.90	.005

DISCUSSION

Guided by the Resilience Portfolio Model (Grych et al., 2015), this study examined different strengths associated with subjective well-being and post-traumatic growth in women who have experienced IPV. Despite their traumatic experiences, some participants showed high scores in post-traumatic growth, which highlights the idea that resilient outcomes are possible after very difficult circumstances (Mancini & Bonanno, 2006; Ulloa et al., 2015). When comparing women with different levels of post-traumatic growth, two patterns emerged. A first group of variables (emotional awareness, social support, coping, and diversity of strengths) only discriminated those women highly resilient (as indicated by high scores on post-traumatic growth) from the rest of participants. By contrast, endurance, purpose, density of strengths, well-being, and facets of life were able to discriminate between all three groups of women (low, medium, and high levels of post-traumatic growth).

These patterns could be due to multiple influences, including the degree of difficulty in developing some specific strengths, as well as differences in the impact of some strengths on thriving after IPV. For example, emotional awareness requires the ability to integrate traumatic events while dealing with negative emotions, which is usually a difficult task (Crespo & Fernandez-Lansac, 2016). Prior research has also indicated that social support is essential both during and after having left an abusive relationship due to its stress-buffering effect (Anderson et al., 2012). However, its relevance for reaching the highest levels of thriving could depend on social support promoting new opportunities to grow (Feeney & Collins, 2015). In fact, the findings about “facets of life” indicate that having opportunities for positive experiences is also an important pathway to growth, as they significantly related to both post-traumatic growth and well-being. In a similar vein, survivors of interpersonal

violence tend to report growth associated with different domains such as appreciation of life, new possibilities, experience of relationships with others, and so on (Elderton et al., 2017). The finding that indicated a negative association of post-traumatic growth with the number of children also points to the complexity of social factors.

An initial model for predicting post-traumatic growth, which included all strengths and the indicators for density and diversity of strengths, indicated that psychological endurance and density of strengths are significant predictors of resilience. The role of both predictors is consistent with the results of previous studies that demonstrated their relevance in other populations (Gonzalez-Mendez et al., 2018; Hamby et al., 2018). Psychological endurance is a regulatory strength that focuses on the ability to resist adversity, which accounts for its importance throughout the resilience process. As for the significance of density of strengths, it is consistent with the additive mechanism proposed by the Resilience Portfolio Model, and it supports the advantage of promoting different strengths to facilitate the recovery process.

Post-traumatic growth and well-being were positively related to each other. However, they were predicted by different strengths, and none of them modified the prediction of the other in the models carried out. This supports a relative independence of both measures (Mguni et al., 2012), suggesting, for example, that women may initiate a recovery process despite not feeling satisfied with their life. For instance, although psychological endurance seems essential for post-traumatic growth, it does not necessarily entail life satisfaction. As suggested by Anderson et al. (2012), impairment caused by violence and resilience are not necessarily opposites, but different aspects of the overall experience of coping and adjustment for survivors.

Previous research has found that coping and purpose predict resilience (Prati & Pietrantonio, 2009; Ulloa et al., 2015). Our results show a clearer association of these two strengths with subjective well-being than post-traumatic growth, indicating that this association may depend on the outcome indicator. Given that all women in this study had left their abusive relationships, it seems reasonable that a higher score on coping would be associated with greater well-being. Regarding purpose, Lopez-Fuentes and Calvete (2015) identified the importance of projects and goals for resilience in Spanish women. Going further, our results indicate that many facets of life where women find satisfaction are associated with thriving. The importance of the facets of life may be because they may concentrate efforts associated with different strengths. Thus, activities mentioned by the participants can be ways to deal with stressful situations, strengthen positive social relationships, and reflect on purpose, all of which are important for their well-being. In other words, they may offer opportunities to improve regulatory, interpersonal, and meaning-making strengths.

Limitations and Future Directions

Research has shown that women exposed to IPV and additional adversities tend to report more trauma symptomatology, which makes the resilience process more difficult (Graham-Bermann et al., 2011). This points to a limitation of the current study, because possible additional difficulties of the sample were not assessed. In this regard, future research with this population should analyze adversities and other forms of victimization, other than IPV. Given that this population is difficult to access, with especially little research in Spain, this study used a cross-sectional design to begin to identify key elements of resilience processes in IPV-victimized women. The results suggest new ways to promote well-being and resilience that can be evaluated over time.

Implications for Intervention

The lingering stigma of victimization may have an effect on the perception of others and even on victims' self-perceptions (Papendick & Bohner, 2017). Hence, the need for changing from deficit-focused intervention paradigms to strengths-focused ones (Hamby, 2014). The results of this study point to different ways to promote resilience and well-being. Density (more intensity of strengths) was a significant predictor of post-traumatic growth and can be reinforced through broad-spectrum interventions (Roepke, 2015). Increasing social support, for example, is certainly a priority due to its stress-buffering effect, but it has also the potential to offer new growth paths. Emotional awareness is also needed to facilitate positive adaptation and reduce vulnerability to revictimization (Zamir & Lavee, 2015). In a similar vein, practitioners should pay especial attention to the "facets of life," as they may help promote strengths linked to different domains. Overall, making women aware that resilience is a process in which they can use different assets and resources could help reduce feelings of helplessness and increase their ability to thrive despite adversity. Warning of the risks that threaten women has proven useful in preventing revictimization (Cala et al., 2016; Gonzalez-Mendez & Santana-Hernandez, 2014). However, this should be complemented by the promotion of resilience.

Additionally, these results suggest the benefits of facilitating a personal meaning-making process through different therapeutic strategies. Expressive writing, for example, has proven to be effective to help process thoughts and emotions after adverse events (Taylor et al., 2016). There is evidence of self-reported growth after expressive writing (Lancaster et al., 2015). By reducing dysfunctional interpretations and emotional reactions, this strategy may also promote positive thoughts about the self and broader ways of thinking. These strategies can be useful, for example, to help women to find a purpose, thus increasing resilience. In addition, they can promote an "appreciation of life," which has been consistently associated with the highest level of growth after experiencing different forms of interpersonal violence in adults (Elderton et al., 2017).

Although it is necessary to shift the focus to promoting resilience, it should not be a way to place responsibility on women for overcoming the consequences of violence (Shaw et al., 2016). Conditions that contribute to exacerbating adversity need to be addressed to make possible the processes of resilience. Having access to resources and social support are some of the basic elements that help women overcome adversity (Waldrop & Resick, 2004). Above all, women who have experienced IPV need to feel safe and supported. In Spain, the law guarantees access to different resources that are necessary for the recovery process. However, not all women seek help and resilience requires more than just formal resources and assistance. They need to build new opportunities for growth.

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Disclosure. The authors have no relevant financial interest or affiliations with any commercial interests related to the subjects discussed within this article.

Acknowledgments. This research has been completed thanks to the collaboration of Nieves Pérez-Trujillo, psychologist in charge of the Servicio Especializado de Atención a Víctimas de Violencia de Género, Cabildo de Fuerteventura, The Canary Islands, Spain

Funding. The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: Ministerio de Educación, Cultura y Deportes (Spain) under grant PRX17/00059.

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