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# Physical, Emotional, and Sexual Violence on the Risk of Depression in Young Adult Women

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#### **ABSTRACT**

**Background:** Depression due to dating violence is a serious problem that affects the mental health of many women, especially young adults. Dating violence, whether physical, emotional, or sexual, can interfere with psychological well-being and result in long-term consequences, one of which is depression. This study aims to analyze the relationship between experiences of dating violence and depression in victims, focusing on women aged 16 to 25 years.

**Subjects and Method:** This study was a cross-sectional study conducted in Surakarta from October to December 2024. The study sample consisted of 200 female young adults in Surakarta City, selected through random sampling. The dependent variable was depression., Independent variables were physical violence, emotional violence, and sexual violence. Data were collected using questionnaires and analyzed using path analysis on Stata 13.

**Results:** The risk of depression was directly influenced by emotional violence (b=0.49; 95%CI=0.39 to 0.60; p<0.001) and sexual violence (b=0.21; 95%CI=0.09 to 0.32; p<0.001). Meanwhile, the indirect influence was physical violence (b=0.28; 95%CI=0.15 to 0.41; p<0.001) and sexual violence (b=0.25; 95%CI=0.11 to 0.37; p<0.001).

**Conclusion:** Emotional violence and sexual violence directly affect the risk of depression. The indirect influence of the risk of depression is physical violence and sexual violence.

**Keywords:** depression, physical violence, emotional abuse, sexual violence

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# BACKGROUND

Non-communicable diseases (NCDs) are Depression is a mental health disorder that is generally characterized by feelings of sadness, emptiness, and hopelessness or loss of interest in various activities for two weeks or more (WHO, 2023a). Depression is a mental illness that is often experienced and is considered a serious problem because it can reduce social functioning, family relationships, and academic achievement. It can subsequently be at risk of increasing the use of illegal drugs, alcohol consumption, deviant behavior, and can even lead to suicide

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(Axelta and Abidin, 2022). Depression is the leading cause of disorders and disabilities worldwide (Ribeiro et al., 2018) and is a major contributor to suicidal behavior (Simon, 2003).

In the global order, the estimated prevalence of major depression during adolescence reaches 14-20%, and increases every year. Kieling et al (2011) in their study reported that the prevalence of adolescent depression increased by 10-20% every year. Based on the results of a survey conducted by the Indonesian National Adolescent Mental Health Survey (I-NAMHS) in 2022, it show that one in three Indonesian adolescents has mental health problems. In these results, major depression occupies the second-highest prevalence at 1.0% of the total population. Riskesdas data in 2018 shows that the prevalence of mental emotional disorders, shown by symptoms of depression and anxiety among 15-24-yearolds, reached around 6.2% of the total Indonesian population, or equivalent to 11 million people (Senjaya et al., 2023).

Mental health is essential to our collective and individual ability as human beings to think, express emotions, interact with each other, make a living, and enjoy life. Therefore, proper mental health care is essential to ensure a person's well-being. WHO emphasizes the importance of preventing mental disorders through the promotion of mental health and efforts to reduce stigmatization of mental disorders (WHO, 2022).

Mental health is influenced by external and internal factors. External factors include social conditions and physical environment. Meanwhile, internal factors include genetics, psychological states, and life experiences. Traumatic experiences can lead to post-traumatic stress disorder, anxiety, and depression. One of them is traumatic due to the violence experienced within a romantic rela-

tionship with someone. Dating relationships during adolescence or early adulthood are considered the process of choosing a partner of the opposite sex as the first step toward the goal of fostering a family. Therefore, violence experienced during dating is crucial to be studied because cases of dating violence in Indonesia are increasing from year to year (Taquette et al., 2019). The consequences of failing to overcome mental health conditions in adolescence will have an impact on physical and mental health in adulthood (Astuti et al., 2024).

Violence experienced in the context of dating in the last few decades has become a serious health problem. Dating Violence (DV) in adolescents is defined as violence committed with intent, such as psychological or emotional violence, physical violence, and sexual violence, that occurs between people who are in romantic relationships (Offenhauer and Buchalter, 2011). DV is an occurrence that is often encountered in several parts of the world and can have a direct impact on health. Both women and men can be victims of violence in dating relationships. Women are the most serious victims and often experience DV (Taquette et al., 2019).

Based on a study by Kearn (2020) on cases of dating violence, it is recorded that 28% of adolescent boys often check their partner's cell phones more than 10 times per day as a form of jealousy. One in three female adolescents is a victim of physical and emotional abuse from a partner. One in four teenagers admitted that they had been abused by profanity and using animal names directed at them.

The WHO estimates that about 29% of female adolescents worldwide who had had partners have experienced physical or sexual violence, or both, from their partner in their lifetime (WHO, 2023b). Based on the 2023 Annual Records of the National Commission

on Anti-Violence Against Women, there are around 422 cases of DV, which is the second highest after violence against wives, which is recorded at 622 cases. Then the data show that sexual violence is the dominant form of violence against women (2,228 cases; 38.21%), followed by psychological violence (2,083 cases; 35.72%). Meanwhile, data from service institutions are dominated by physical violence (6,001 cases; 38.8%), followed by sexual violence (4,102 cases; 26.52%).

According to data from the Women's Solidarity Foundation for Humanity and Human Rights (SPEK-HAM), in Surakarta, cases of dating violence are also not new, because every year the data obtained are always increasing. In 2021, there were 72 types of cases of violence against women. These types of cases consisted of 40 cases of violence against the wives (55.5%), 10 cases of dating violence (13.8%), and 17 cases (23.6%) of sexual violence.

Based on this data, it can be seen that DV cases have still occurred significantly in recent years. DV refers to a variety of problematic and dangerous behaviors directed by the perpetrator to his or her partner, both physically, emotionally, and sexually. Forms of physical violence in KDP include clawing, slapping, pushing, slamming, or holding someone against a wall, biting, strangling, burning, beating someone, and attacking with a weapon. Meanwhile, forms of emotional violence can be in the form of threats, criticism, insults in front of friends, or scolding their spouses, as well as manipulative actions that indirectly damage the partner's psychology (Putu dan I, 2023).

Forms of sexual violence in the DV can be in the form of rape, attempted rape, and other forms of sexual coercion, including sabotage of contraceptives. Sexual violence is also defined as "any act that leads to sexual intercourse can be classified as sexual harassment if it is done without consent, is painful, unprotected, or is done in a degrading manner" (Kearns et al., 2020). The occurrence of DV has a bad impact on the victims who experience it, both on their physical and mental health. Therefore, this research is significant to be carried out so that these risk factors can be effectively controlled. This study aims to analyze the effect of dating violence on the risk of depression in young adult women.

## SUBJECTS AND METHOD

# 1. Study Design

This was a cross-sectional study carried out in Surakarta from October to December 2024.

# 2. Population and Sample

The study population was young adult female aged 16-24 years old. A total of 200 samples was selected using simple random sampling.

# 3. Study Variables

The dependent variable was depression. The independent variables were physical, emotional, and sexual violences.

# 4. Operational Definition of Variables

**Depression:** a mental disorder characterized by a depressed mood, loss of interest or pleasure, feeling worthless, that affects a person's thoughts, feelings, and behaviors as well as quality of life.

**Physical violence:** actions that can injure the body of another person.

**Emotional abuse:** any action that negatively impacts a person's sense of self-worth or puts a person at risk of severe behavioral, emotional, cognitive, or mental impairment.

**Sexual violence:** any form of sexual behavior that is carried out without consent or coercion, which can cause the victim fear, distress, or humiliation.

# 5. Study Instrument

Data on age, education, occupation, dating length, and dating status were obtained

through questionnaires. Depression data were obtained through the PHQ-9 (Patient Health Questionnaire).

### 6. Data Analysis

Univariate analysis was carried out with the aim of determining the distribution of frequency and percentage of each of the variables studied. Bivariate analysis was carried out on each of the variables studied, namely depression, physical violence, emotional violence, and sexual violence, using logistic regression. Multivariate analysis used a path analysis model with the variables studied.

### 7. Research Ethics

Research ethics that include anonymity, confidentiality, and consent given consciously have been carefully addressed throughout the study process. An ethical

clearance has been obtained from the Research Ethics Committee of Dr. Moewardi Hospital Surakarta on November 19, 2024 with number 2.661/XI/HREC/2024.

## RESULTS

# 1. Sample Characteristics

Table 1 presents the mean value, standard deviation, minimum value, and maximum value of each study variable, including age and length of time dating of the study subject. In the continuous data of 200 study subjects, the average age of 22 years was obtained with a minimum score of 21.78 and a maximum score of 22.32. In the variable length of dating, it obtained the average time of 21.47 months with a minimum value of 18.93 and a maximum value of 24.

Table 1. Univariate analysis of characteristics distribution numerical data of age and length of dating of young adult women in Surakarta

Variable	Mean	SD	Minimum	Maximum
Age	22	0.13	21.78	22.32
Length of dating	21.47	1.28	18.93	24

Based on Table 2, it is identified that the majority of the education of study subjects had higher education, as many as 109 study subjects (54.5%), and lower education, with a total of 91 study subjects (45.5%). In the variable employment, the distribution was 22 (11%) unemployed study subjects, 132

students/college students, 5 teaching staff (2.5%), and 41 (20.5%) self-employed individuals. Furthermore, the majority of the dating status of the study subjects was dating with a total of 113 people (56.5%), and no longer dating, as many as 87 people (43.5%).

Table 2. Univariate analysis of categorical data on the distribution of education, occupation, and dating status characteristics in a sample of young adult women

Variable	Category	Frequency (n)	Percentage (%)
Education	Low	91	45.5
	High	109	54.5
Employment	Unemployed	22	11
	Student/College Student	132	66
	Teaching staff	5	2.5
	Self-employed	41	20.5
Dating Status	Dating	113	56.5
	No longer dating	87	43.5

## 2. Bivariate Analysis

Bivariate analysis was conducted to determine the influence of one independent variable on the dependent variable. Table 3 shows that emotional violence with the risk of depression obtained a value of (b=1.00; CI95%= 0.80 to 1.21; p<0.001). These results showed that the emotional violence variable increased the risk of depression in young adult women by 1.00 times higher than those who did not experience emotional violence; this relationship was statistically significant. Furthermore, in the physical violence variable, it obtained a value of

(b=0.64; CI 95%= 0.38 to 0.90; p<0.001). These results showed that physical violence increased the risk of depression in young adult women by 0.64 times higher than those who did not experience physical violence; this relationship was statistically significant. Then in the variable of sexual violence, it obtained a value of (b=0.76; 95% CI= 0.50 to 1.02; p<0.001). These results showed that physical violence increased the risk of depression in young adult women by 0.76 times higher than those who did not experience physical violence; this relationnship was statistically significant.

Table 3. Bivariate analysis of the effect of dating violence on the risk of depression

Variable	L.	CI9			
variable	D	<b>Lower Limit</b>	<b>Upper Limit</b>	p	
Emotional Violence	1.00	0.80	1.21	<0.001	
Physical Violence	0.64	0.38	0.90	< 0.001	
Sexual Violence	0.76	0.50	1.02	< 0.001	

## 3. Multivariate Analysis

Figure 1 shows the results of the path analysis on the effect of dating violence on the risk of depression in young adult women. The image shows that depression in young adult women was directly influenced by emotional and sexual violence. Young adult women who experienced emotional violence were more likely to experience depression than those who did not experience emotional violence. Furthermore, young adult women who experienced sexual violence were more likely to experience depression than those who did not experience sexual violence. The risk of depression was indirectly influenced by physical violence and sexual violence through emotional violence. Young adult women who experienced physical violence had a higher risk of depression than those who did not experience physical violence.

Table 4 presents the results of a path analysis examining both the direct and indirect effects of dating violence on the risk of depression. Table 4 shows that emotional violence with the risk of depression obtained a value of (b = 0.49; CI 95% = 0.39 to 0.60; p<0.001). These results indicate that emotional violence increased the risk of depresssion in young adult women by 0.49 times higher than those who did not experience emotional violence; this relationship was statistically significant. Furthermore, in the sexual violence variable, it obtained a value of (b= 0.21; CI 95% = 0.95 to 0.32; p < 0.001). These results showed that sexual violence increased the risk of depression in young adult women by 0.21 times higher than those who did not experience sexual violence; this relationship was also statistically significant.

In addition to direct effects, the analysis also revealed significant indirect influences. On the emotional violence variable, physical violence obtained a value of (b = 0.28; CI 95% = 0.15 to 0.41; p < 0.001).

These results showed that physical violence increased the risk of emotional violence by 0.28 times higher than in those who did not experience physical violence; this relationship was statistically significant. Similarly, sexual violence also influenced emotional

violence, with a value of (b = 0.25; CI 95% = 0.11 to 0.37; p < 0.001), indicating that sexual violence increased the risk of emotional violence by 0.25 times higher than those who did not experience it.

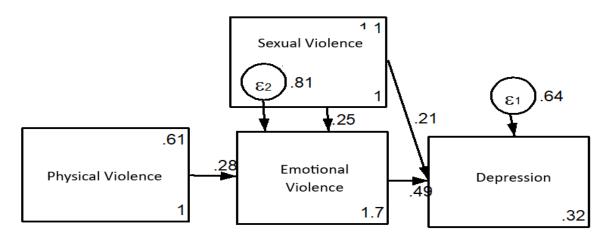


Figure 1. Path analysis on the effect of dating violence on the risk of depression in young adult women

Table 1. Analysis of the influence of dating violence on the risk of depression

Dependent Variable		Independent	b	CI 95%		
		variables	D	<b>Lower Limit</b>	<b>Upper Limit</b>	p
<b>Direct Influence</b>						
Depression	$\leftarrow$	<b>Emotional violence</b>	0.49	0.39	0.60	< 0.001
_	$\leftarrow$	Sexual Violence	0.21	0.95	0.32	< 0.001
<b>Indirect Influence</b>						
<b>Emotional Violence</b>	$\leftarrow$	Physical violence	0.28	0.15	0.41	< 0.001
	$\leftarrow$	Sexual violence	0.25	0.11	0.37	< 0.001
N observation= 200;						
Goodness of Fit: Chi se	quare	e p=0.155; CFI=0.99; T	LI=0.96	6; RMSEA=0.07		

### **DISCUSSION**

# a. The influence of physical violence on the risk of depression in young adult women

Physical violence can pose a risk of depresssion in young adult women. Based on Figure 1, the risk of depression caused by physical violence was influenced by the emotional violence experienced by the victim. The results showed that there was a positive relationship between physical violence and depression in young adult women, and the relationship was statistically significant. Young adult women who experienced physical violence had a higher risk of developing depression than those who did not experience physical violence (b= 0.28; 95%CI= 0.15 to 0.41; p<0.001).

The findings by Volpe et al (2012) state that dating violence, including physical, psychological, and sexual violence, has a significant direct effect on depression (b=0.30, p<0.001). Physical violence in dating can result in physical injuries to death; besides that, it also results in psychological impacts. Dating violence will have more severe conse-

quences for young women than young men. In addition, the victim will feel sad, confused, ashamed, anxious, guilty, lack confidence and distrust others, and loss of appetite (Hamby and Turner, 2013). Research by Callahan et al (2003) found that victims of dating violence, both women and men, will experience lower psychological well-being, including increased anxiety, depression, decreased confidence, and life satisfaction.

A study by Labella and Masten (2018) states that several factors can cause violence, including experiences of violence in the family of origin. It is strengthened by the finding that men who are raised in situations and conditions of the home often show physical violence; in the future, this will be a great influence on the perpetrators of violence (Clare et al., 2021). Gender ideology and patriarchal culture are also risk factors. Rigid gender stereotypes in society originate from patriarchal culture, where there is a belief that men tend to be stronger than women, who are often considered weaker (Cho and Jang, 2021). With this view, it is sometimes natural for men to try to dominate or act arbitrarily against women, which of course can then increase the risk of dating violence.

In a study conducted by Sholikhah and Masykur (2020), it is identified that attitudes and beliefs towards violence are also factors in the occurrence of violence, and it states that women who are victims of dating violence have the idea that every act of abusive treatment committed by a partner is because they made a mistake. Alcohol use, substance abuse, and media exposure can affect a person's feelings and aggressive behavior (Han et al., 2020).

Injury, fear, and stress associated with partner violence can result in substance abuse, cardiovascular problems, asthma, sexually transmitted diseases, gynecological problems, chronic health problems such as chronic pain (e.g., headaches and back pain), recurrent central nervous system symptoms (e.g., fainting and seizures), and gastro-intestinal problems (e.g., loss of appetite and eating disorders) (Dinisman and Moroz, 2017).

Adolescents who are victims or perpetrators of physical violence need professsional help. Counseling programs for victims can help them cope with trauma and restore their self-esteem. For abusers, cognitive behavioral therapy can help them understand why they are violent and how to change their behavior. Support from family also plays a big role in shaping adolescents' views and attitudes towards relationships. Physical violence in dating among adolescents is a serious problem and needs to be studied with a holistic approach. With education, family support, professional involvement, and extensive awareness campaigns, we can help adolescents understand and avoid risky relationships and improve their quality of life (Nesset, 2019).

# b. The influence of emotional violence on the risk of depression in young adult women

Emotional violence is a direct factor that can pose a risk of depression. The results of this study showed that there was a positive influence of emotional violence on the risk of depression experienced by young adult women. Young adult women who experienced emotional abuse had a higher risk of developing depression than young adult women who did not experience emotional violence (b=0.49; CI 95%= 0.39 to 0.60; p<0.001).

These findings are in line with a study by McNeil et al (2020) which states that emotional abuse is a risk factor for causing depression in adolescents. The results of the study show that psychological aggression poses an increased risk of depressive symptoms through increased relationship problems with peers, especially in women. Another study conducted by Šincek et al (2017) reveals that the most common violence experienced is psychological violence, including cyber-bullying, surveillance, and control behaviors, as well as psychoemotional. Statistically, women score higher as victims of surveillance-control, cyberbullying, and sexual violence. A study by Nyaboke et al (2024) reports that emotional harassment by women is a trigger for the occurrence of mental illness.

Emotional abuse is any act, including confinement, isolation, verbal attacks, humiliation, intimidation, infantilization, or other treatment that can reduce a sense of identity, dignity, and self-esteem. Emotional violence in a dating relationship is usually perpetrated to show dominance. Signs and symptoms of emotional violence begin when the perpetrator wants to test his dominance. then develops into something threatening and frightening. For example, doing something that causes jealousy, bringing up past events, insulting and degrading one's selfesteem in front of many people, threatening to end the relationship, and others (Taquette et al., 2019).

The impact of emotional violence can affect mood. Victims of emotional violence tend to blame themselves and ignore the violence they experience, convincing themselves that the violence they get is a common thing. The short-term effects of emotional abuse are anxiety, feeling guilty, feeling helpless, becoming too passive and obedient, being easily manipulated, and feeling unwanted (Kumari, 2020).

Factors that can cause emotional violence are mind games where the perpetrator acts violently on the victim until the victim looks brave to leave him but then the perpetrator behaves kindly to the victim; this reason often makes the victim, especially a woman, maintain her relationship

because of her confusion about the relationship (Hamilton, 2017). At the same time, the victim is blinded by love, denying that what her partner does is an act of violence, a lack of insight so that the victim does not realize it, including the victim's hope to be able to change the perpetrator for the better (Lestari et al, 2022).

In situations of long-term emotional abuse, victims feel they have low selfesteem, so they often feel unable to leave the abuser and feel unworthy of a healthy relationship. Emotional abuse in adults causes the victim to believe the bad things the perpetrator says about the victim. The impact of long-term emotional violence includes depression, low self-esteem and self-worth, emotional instability, disturbances, physical pain without cause, self-harm, and suicidal thoughts (Dye, 2020). The findings of Gasperecz et al (2023) state that psychological violence has the potential to be an important predictor of suicidal ideation. This suicidal ideation occurs as a result of the burden felt by the victim. Psychological aggression can drive suicidal ideation characteristics by isolating the victim and increasing emotional dependence on the partner.

# c. The influence of sexual violence on the risk of depression in young adult women

Sexual violence is a direct factor that can pose a risk of depression. The results of this study showed that there was a positive relationship between sexual violence and depression in young adult women, and the relationship was statistically significant. Young adult women who experienced sexual violence had a higher risk of developing depression than those who did not experience sexual violence (b=0.21; CI 95%=0.09 to 0.32; p<0.001). It is also discovered that sexual violence has a strong positive indirect relationship with emotional violence

on the risk of depression in young adult women, and the association was statistically significant. Young adult women who experienced sexual violence had a higher risk of developing depression than those who did not experience sexual violence (b=0.25; 95%CI= 0.11 to 0.37; p<0.001).

A study by Choudhary et al (2012) reports that victims of sexual violence experience mental health disorders, as many as 18.82% experience depression, 8.37% experience anxiety disorders, and 28.28% experience depression and anxiety. Adolescents and young people are more vulnerable to the impact of sexual violence, especially when they lack the skills to manage emotions and trauma. Adolescents who have experienced violence in the past, whether at home or outside the home, are more at risk of depression after experiencing sexual dating violence (Silva et al., 2020). Sexual violence has a great impact on a person's well-being. Many victims continue to experience depression, anxiety disorders, or posttraumatic stress disorder throughout their lives. This disorder can be a long-term problem that affects their quality of life in various aspects.

Some victims of sexual violence may turn to alcohol or drug abuse to cope with their feelings. In addition, they may also experience eating disorders, such as anorexia or bulimia, as a way to cope with feelings of helplessness or bad feelings about their bodies. Victims of sexual violence can have difficulty building healthy relationships in the future. The victim may also feel afraid or distrustful of the new partner (Ullman et al., 2014).

Victim recovery requires loving support, proper education, and professional intervention. Communities must continue to work to prevent sexual violence, provide a safe place for victims, and ensure justice is served to perpetrators. Education and awareness campaigns about the dangers of dating violence need to be expanded, focusing on recognizing the signs of violence and how to get help. Additionally, the establishment of more responsive policies in schools, universities, and workplaces is essential to ensure victims get the protection they need (Piolanti and Foran, 2022).

Overall, efforts to address depression due to dating violence require collaboration between governments, community organizations, health professionals, and individuals to create sustainable, positive change. A more comprehensive and sensitive approach to the needs of the victim can help reduce the psychological impact of dating violence and promote better mental well-being for young women in society (McNaughton et al., 2021).

This study reveals that physical violence, emotional violence, and sexual violence have a significant effect on the risk of depression in young adult women. The limitation of this study is the use of the cross-sectional method, which is conducted in a certain period of time, so it is difficult to determine cause and effect because the data collection is conducted at the same time. Then the sample used in this study consisted only of a certain group, which may not be representative of the population as a whole).

#### **AUTHOR CONTRIBUTION**

Ayu Saidah was the main researcher who contributed to data collection, article preparation, and data processing. Argyo Demartoto contributed to the background of its preparation. Bhisma Murti assisted in data processing, article review, preparation of learning frameworks, and discussions.

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### CONFLICT OF INTEREST

There was no conflict of interest in this study.

## REFERENCE

- Astuti FD, Heriyanto MJ, Desvita WR, Rokhmayanti, Hastuti SKW, Utami BBK, Azka A (2024). Mental Health Screening for University Students in the Special Region of Yogyakarta. J Epidemiol Public Health. 09(03): 343-353. doi: 10.26911/jepublichealth.202-4.09.03.08.
- Axelta A, Abidin F (2022). Depresi Pada Remaja: Perbedaan Berdasarkan Faktor Biomedis Dan Psikososial. J Kesmas (Kes Masy) Khatulis. 9(1): 34– 48. doi: 10.29406/JKMK.v9il.3207.
- Callahan M, Tolman R, Saunders D (2003). Adolescent Dating Violence Victimization and Psychological Well-Being. J of Adolesc Research. 18(6): 664–681. doi: 10.1177/0743558403254784.
- Cho S, Jang S (2021). Do Gender Role Stereotypes and Patriarchal Culture Affect Nursing Students' Major Satisfaction?. Int J Environ Res Pub Health. 18(5): 1-9. doi: 10.3390/ijerph-18052607.
- Choudhary E, Smith M, Bossarte R (2012). Depression, Anxiety, and Symptom Profiles among Female and Male Victims of Sexual Violence. American J of Men's Health. 6(1): 28–36. doi: 10.1177/1557988311414045.
- Clare CA, Velasquez G, Mujica MGM, Fernandez D, Dinh J, Montague A (2021). Risk Factors for Male Perpetration of Intimate Partner Violence:

- A Review. Aggress Violent Behav. 56(1): 1-53. doi: 10.1016/j.avb.2020.-101532.
- Dinisman T, Moroz A (2017). Understanding Victims of Crime: The Impact of the Crime and Support Needs. Victim Support. 1(1): 1–40. doi: 10.13140/-RG.2.2.17335.73124.
- Dye H (2020). Is Emotional Abuse As Harmful as Physical and/or Sexual Abuse?. J of Child and Adolescent Trauma. 13(4): 399–407. doi: 10.100-7/s40653-019-00292-y.
- Gasperecz J, Baumler E, Wood L, Temple J (2023). Suicidal Ideation and Psychological Dating Violence Victimization: A Short Report. Frontiers in Psych. 14(1): 1–4. doi: 10.3389/fpsyt.2023.-1105654.
- Hamby S, Turner H (2013). Measuring Teen Dating Violence in Males and Females: Insights from the National Survey of Children's Exposure to Violence. Psycho of Viol. 3(4): 323–339. doi: 10.10-37/a0029706.
- Hamilton A (2017). Understanding The Experiences of Woman Who Stay In Abusive Relationships. Conf proceed. 1(1): 4-19. https://hdl.handle.net/102-94/8320.
- Han L, Xiao M, Jou M, Hu L, Sun R, Zhou Z (2020) The Long-term Effect of Media Violence Exposure on Aggression of Youngsters. Comput Human Behav. 106(1): 1-11. doi: 10.1016/j.chb.2020.-106257.
- Kearns MC, D'Inverno A, Reidy DE (2020). The Association Between Gender Inequality and Sexual Violence in the U.S.. Am J Prev Med. 58(1): 12-20. doi: 10.1016/j.amepre.2019.08.035
- Kieling C, Baker-Henningham H, Belfer M, conti G, Ertem I, Omigbodun O, Rohde L, et al. (2011). Child and Adolescent Mental Health Worldwide: Evidence

- for Action. The Lancet. 378(9801): 1515–1525. doi: 10.1016/S0140-6736-(11)60827-1.
- Kumari V (2020). Emotional Abuse and Neglect: Time to Focus on Prevention and Mental Health Consequences. British J of Psych. 217(5): 597–599. doi: 10.1192/bjp.2020.154.
- Labella M, Masten A. (2018). Family Influences on the Development of Aggression and violence. Curr O in Psych. 19: 11-16. doi: 10.1016/j.copsyc.2017-.03.028.
- Lestari PP, Abidin F, Abdin Z (2022).

  Bentuk Kekerasan dalam Berpacaran (KDP) dan Dampak Psikologisnya pada Wanita Dewasa Awal sebagai Korban Kekerasan. Martabat J Peremp dan Anak. 6(1): 65-84. doi: 10.21274/martabat.2022.6.01.65-84.
- McNaughton R, Graham L, Chen M, Baron D, Gibbs A, Groves A, Kajula L, et al. (2021). Adolescent Dating Violence Prevention Programmes: a Global Systematic Review of Evaluation Studies. The Lanc Child and Adoles H. 5(3): 223–232. doi: 10.1016/S2352-4642-(20)30276-5.
- McNeil S, Andrews A, Cohen J (2020). Emotional Maltreatment and Adolescent Depression: Mediating Mechanisms and Demographic Considerations in a Child Welfare Sample. Child Development. 91(5): 1681–1697. doi: 10.1111/cdev.13366.
- Nesset M, Lara-Cabrera M, Dalsbø T, Pedersen S, Bjørngaard J, Palmstierna T (2019). Cognitive Behavioural Group Therapy for Male Perpetrators of Intimate Partner Violence: a Systematic Review. BMC Psych. 19(1): 1-13. doi: 10.1186/s12888-019-2010-1.
- Nyaboke R, Wafula L, Korir A, Chonge D, Mumbua S, Olpengs D, Mayoka G (2024). Mental Illness Among Women

- Attending A National Mental Health Referral Center in Kenya: Unpacking Predisposing Factors and Interventions. J Epidemiol Public Health. 09(02): 243-253. doi: 10.26911/jepublichealth.2024.-09.02.10.
- Offenhauer P, Buchalter A (2011). Teen Dating Violence: A Literature Review And Annotated Bibliography. The Livrary of Congres. 1(1): 1–92. doi: 10.1037/e726412011-001.
- Piolanti A, Foran H (2022). Efficacy of Interventions to Prevent Physical and Sexual Dating Violence among Adolescents: A Systematic Review and Metanalysis. JAMA Pediatrics. 176(2): 142–149. doi:10.1001/jamapediatrics.-2021.4829
- Putu D, I Gusti Ayu Putu WB (2023) Faktor-Faktor yang Memengaruhi Resiliensi Remaja Pasca Dating Violence: Sebuah Studi Literatur. Humanit (J Psikologi). 7(1): 113-124. doi: 10.28932/humanitas.v7i1.6086.
- Ribeiro J (2018). Depression and Hopelessness As Risk Factors for Suicide Ideation, Attempts and Death: Metanalysis of Longitudinal Studies. The British J Psych. 212(1): 279–286. doi: 10.1192/bjp.2018.27.
- Senjaya A (2023). Increasing Awareness of Depression in Adolescents And Children Through Online Campaign Activities. J Layanan Masy. 7(3): 326– 331. doi: 10.20473/jlm.v7i3.2023.326-331.
- Sholikhah R, Masykur A (2020). Atas Nama Cinta, Ku Rela Terluka (Studi Fenomenologi pada Perempuan Korban Kekerasan Dalam Pacaran). J Empati. 8(4): 706-716. doi: 10.14710/empati.-2019.26513.
- Silva F (2020). The Effects of Sexual Violence Experienced in Childhood and Adolescence on Undergraduate

- Students. Revista de Saude Publica. 54(1): 1–11. doi: 10.11606/s1518-8787-.2020054002576.
- Simon G (2003). Social and Economic Burden of Mood Disorders. doi: 10.1016/S0006-3223(03)00420-7.
- Šincek D, Duvnjak I, Milić M (2017). Psychological Outcomes of Cyber-Violence on Victims, Perpetrators and Perpetrators/Victims. Hrvatska Revija Za Rehabilitacijska Istrazivanja. 53(2): 98–110. doi: 10.31299/hrri.53.2.8.
- Taquette S, Leite D, Monteiro M (2019). Causes and Consequences of Adolescent Dating Violence: A Systematic Review. J Injury and Viol. 11(2): 137–147. doi: 10.5249/jivr.v11i2.1061.
- Ullman S (2014). Trauma Histories, Substances Use Coping, PTSD, and Problem Substance Use among Sexual Assault Victims. Biochim Biophys

- Acta. 8(1842): 1219–1231. doi: 10.10-16/j.addbeh.2013.01.027.Trauma.
- Volpe E, Hardie T, Cerulli C (2012). Associations among Depressive Symptoms, Dating Violence, and Relationship Power in Urban, Adolescent Girls. JOGNN-J of Obstetric, Gynecologic, and Neonatal Nurs. 41(4): 506–518. doi: 10.1111/j.1552-6909.2012.01384.x.
- WHO (2022). Mental Health II. World Health Organization.
- WHO (2023a). Depressive Disorder (Depression). World Health Organization.
- WHO.(2023b). Kerangka Kerja RESPECT, Pendekatan baru untuk Mengakhiri Kekerasan terhadap Perempuan di Indonesia. World Health Organization.