

The Influence of Gender and Hope on the Resilience of Bullied Adolescents

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Abstract

Bullying is currently a national concern in Indonesia. Many of the country's children and adolescents have taken their lives due to a lack of resilience in the face of bullying. However, some studies have revealed that victims can survive the adverse effects of bullying. This study aimed to analyze the roles of hope and sociodemographic characteristics in the resilience of bullied adolescents in Indonesia. The study used a cross-sectional design and selected 305 bullied high school students in Semarang as participants through purposive sampling. The Adolescent Resilience Scale and the Children's Hope Scale were used to measure the participants' resilience and hope. A multiple linear regression test was applied to analyze the influence of hope and sociodemographic characteristics on resilience. The results showed that gender ($\beta = -0.149$, $p = 0.001$) and hope ($\beta = 0.571$, $p = 0.001$) significantly influenced the resilience of the bullied adolescents. Working through schools' health units, nurses should establish partnerships with stakeholders, such as school personnel and parents, to develop hope-based intervention programs aimed at enhancing the resilience of bullied adolescents.

Keywords: adolescents, bullying, hope, resilience

Abstrak

Pengaruh Gender dan Harapan terhadap Resiliensi Remaja Korban Perundungan. Fenomena perundungan di Indonesia saat ini telah menjadi perhatian nasional. Banyak anak dan remaja yang bunuh diri karena tidak kuat menghadapi perundungan. Namun, penelitian mengungkapkan bahwa beberapa korban dapat bertahan dari dampak buruk perundungan. Penelitian ini bertujuan untuk menganalisis peran harapan dan karakteristik sosiodemografi terhadap resiliensi remaja korban perundungan di Indonesia. Penelitian ini merupakan penelitian cross-sectional dengan 305 siswa SMA korban perundungan di Kota Semarang terlibat sebagai responden yang dipilih melalui teknik purposive sampling. Kuesioner Adolescent Resilience Scale (ARS) dan Children's Hope Scale (CHS) digunakan untuk mengukur resiliensi dan harapan remaja korban perundungan. Uji regresi linier berganda digunakan untuk menganalisis pengaruh harapan dan karakteristik sosiodemografi terhadap resiliensi atau ketahanan. Hasil penelitian menunjukkan jenis kelamin ($\beta = -0.149$, $p = 0.001$) dan harapan ($\beta = 0.571$, $p = 0.001$) secara signifikan mempengaruhi resiliensi remaja korban perundungan. Perawat, melalui Unit Kesehatan Sekolah (UKS), perlu menjalin kemitraan dengan pemangku kepentingan seperti guru di sekolah dan para orang tua, guna mengembangkan program intervensi berbasis harapan yang bertujuan untuk meningkatkan resiliensi remaja korban perundungan.

Kata Kunci: harapan, perundungan, remaja, resiliensi

Introduction

In Indonesia, bullying is a serious social problem that has gained considerable attention in recent decades. According to the Indonesian Child Protection Commission, there were 26,000 reported cases of bullying between 2011 and 2017 (Abdillah et al., 2020), with an increasing trend that reached 75 cases per year

(Chandra, 2019; Maradewa, 2019). In the city of Semarang, 45% of adolescents have experienced bullying (physical, verbal, relational, or online), and 47% of those who have been bullied suffered from multiple bullying incidents in high school (Zulfa & Dewi, 2019).

Bullying can have significant impacts on psychological and physical well-being. Adolescents

who are bullied tend to experience repeated trauma, which can increase the risk of aggression toward themselves or others, attention deficits, and somatic symptoms such as sleeping difficulty, bed-wetting, headaches, and fatigue (Delara, 2016; van Geel et al., 2016). Furthermore, bullying can lead to school-related problems, difficulties with self-concept, and issues with interpersonal relationships (Delara, 2016; Hana & Suwarti, 2020; Povedano et al., 2015). Victims of bullying may also experience decreased appetite, low self-esteem, anxiety, and depression (Bakar & Syafruddin, 2017).

However, some victims are able to withstand these stressors and adapt to their environment (Akasyah, 2018; Mullin, 2019). Scholars often refer to this ability to adapt as resilience. Several studies have found that personal factors, such as hope, can have a positive impact on resilience in adolescents. Hope is defined as a dynamic motivational experience that is produced through two types of cognitive tools, known as pathways and agency thinking, which are used to achieve goals (Snyder et al., 1997). Researchers have shown that hope significantly contributes to resilience across a wide section of the population (Cathlin et al., 2019; Noroozi et al., 2020; Togo et al., 2018; Yıldırım & Arslan, 2020). However, hope has received less attention in bullying studies. Most of these studies have explored the influence of risk factors on resilience and bullying incidence (Demmrich & Akgül, 2020; Sarifa & Mahanani, 2020; Shams et al., 2017; Söderberg & Björkqvist, 2019; Suryani et al., 2019) as well as the consequences of bullying (Evans et al., 2019; Hana & Suwarti, 2020; Putra & Dendup, 2020).

Nursing is well positioned to make a significant contribution to the prevention of bullying by identifying protective factors that can promote resilience appropriately. Therefore, the aim of this study is to examine the roles of hope and sociodemographic characteristics in the resilience of bullied adolescents in Indonesia.

Methods

Design and setting. The study used a cross-sectional design and was conducted between April and July 2020. The aim was to analyze the effects of hope, age, and gender on the resilience of bullied adolescents. The research population consisted of students from three public high schools in Semarang.

Sample. The following inclusion criteria were used: (1) an experience of bullying in the previous year, (2) permission from one's parents or guardians, and (3) a willingness to participate in the study. The sample was recruited using purposive sampling. Of the 4,060 students assessed, 1,372 met the inclusion requirements. The Slovin formula was used to select 309 participants, but only 305 were ultimately included in the analysis as four of them returned incomplete questionnaires.

To determine whether the high school students met the inclusion criteria, they were asked to rate the frequency of self-reported bullying and victimization experiences in the past six months on a 5-point Likert scale (“never”: score of 0; “rarely”: score of 1; “sometimes”: score of 2; “often”: score of 3; “always”: score of 4). A Google Form was used for this process. If a student reported a bullying experience with a score of at least 1, they were included as a participant. If a student reported no experiences of bullying and victimization, they were given a score of 0, and the Google Form automatically discontinued the process.

Instruments

Hope. The Children's Hope Scale was developed by Snyder et al. (1997) and translated into Indonesian by Widiasmara (2019). The scale measures the level of hope in children aged 8–18 and consists of six questions with two subdomains: agency and pathways. The three odd-numbered items belong to the agency domain, while the three even-numbered items belong to

the pathway domain. Examples of the agency items include “I think I am doing pretty well” and “I think the things I have done in the past will help me in the future,” while examples of the pathway items comprise “I can think of many ways to get the things that are most important to me in life” and “When I have a problem, I can come up with many ways to solve it.” The 5-point Likert scale responses range from “never” to “always,” with each item scored from 1 to 5. Higher scores indicate greater hope, while lower scores suggest the opposite. The α coefficient of the scale was 0.735.

Resilience. The Adolescent Resilience Scale (ARS) was developed by Oshio and Nakaya (2013) to measure the psychological features of resilient adolescents; it was translated into Indonesian by Zulfa and Dewi (2019). The ARS comprises 21 question items divided into three domains: novelty seeking, emotional regulation, and positive future. The Likert scale ranges from 1 (“definitely no”) to 5 (“definitely yes”). According to Oshio and Nayaka (2013) a higher score indicates a more resilient person, while a lower score suggests greater vulnerability. The ARS has been shown to be reliable, with a reliability value of 0.749.

Sociodemographic questionnaire. The demographic data consisted of the age and gender of the adolescents, which were obtained during the data collection process. Age was represented numerically, while gender was described in terms of frequency and percentage.

Data Collection. Due to the COVID-19 pandemic, the researchers used Google Forms as a data collection method. After obtaining permission from the three public high schools, the vice principals of student affairs were contacted to explain the purpose of the study and the data collection mechanism. The researchers requested the assistance of the vice principals in selecting which classes would qualify; a total of 21 classes were selected. The researchers then met with the classroom teachers to discuss the data collection process and provided them with the

Google Forms link, which the teachers shared with the class chat group. During data collection, certain problems were encountered, such as limited internet access for some students and missing responses on the form, which resulted in the failure to attain the desired sample size. As a solution, the data collection period was extended by two weeks.

The Google Form was composed of an informed consent form, an agreement form, and questionnaires. The parent’s informed consent form was placed on the first page of the form, followed by the parent’s agreement form, the student’s informed consent form, and the student’s agreement form. If both the parent and the student agreed, the student could access the questionnaire. However, if either the parent or the student disagreed, the questionnaire would not be accessible. Only the researchers could access the questionnaires.

Data Analysis. The adolescents’ characteristics (age and gender), hope, and resilience were analyzed and presented through the use of frequency, percentage, and mean \pm standard deviation. Bivariate analysis was used to test the independent variables (hope, age, and gender) and the outcome variable (resilience). The Pearson product-moment correlation coefficient was used for age and hope, while a t-test was conducted to evaluate gender. In the multivariate analysis, only the independent variables that had significant correlations with the result being modeled were considered. Subsequently, multivariate linear regression models were utilized to predict the resilience of bullied adolescents.

Ethical Considerations. This study was approved by the Health Research Ethics Committee of the Department of Nursing, Faculty of Medicine Universitas Diponegoro (reference number 02/EC/ KEPK/D.Kep/IV/2020). As the study involved children under the age of 21, written consent was obtained from parents or guardians. However, the researchers also sought consent from the adolescents; if a student dec-

lined to participate, they were not included. Thus, the study required approval from both parents and adolescents. The informed consent form explained that participation was voluntary, withdrawal was allowed without consequences, and confidentiality would be strictly maintained.

Results

The study had a total of 305 respondents, with an average age of 16.53 ± 0.68 years old, and a majority of girls. The results revealed that emotional regulation had a higher score than novelty and positive future as a domain of resilience. Moreover, agency/willpower had a higher grade than pathway/way power as a domain of hope.

The Pearson product-moment correlation coefficient indicated a positive relationship between hope and resilience. A gender-based difference was observed in the resilience of girls and boys. These results are presented in Table 1.

Before conducting the multiple linear regression, the researchers tested the assumptions of linearity, independence, homoscedasticity, and normality and confirmed that all of these assumptions were met. The regression model revealed that gender ($\beta = -0.149$, $p = 0.001$) and hope ($\beta = 0.571$, $p = 0.001$) had significant effects on the resilience of bullied adolescents. The model explained 35.5% of the variance in bullied adolescent's resilience, as shown in Table 2.

Table 1. Distribution of Personal Characteristics and Hope in Relation to Bullied Adolescents' Resilience

Variables	f	%	Mean \pm SD	p	Multivariate
Resilience			78.75 \pm 7.87		
Novelty			26.72 \pm 2.89		
Emotional regulation			29.63 \pm 5.41		
Positive future			22.38 \pm 2.91		
Hope			22.92 \pm 3.35	0.000 ^a	0.000
Agency/willpower			11.49 \pm 1.72		
Pathway/way power			11.43 \pm 2.12		
Age (years)			16.53 \pm 0.68	0.853 ^a	
Gender				0.003 ^b	0.001
Boys	116	38.0			
Girls	189	62.0			

Notes: ^a Pearson product-moment; ^b t-test

Table 2. Multiple Linear Regression Model of Bullied Adolescents' Resilience

Model	Unstandardized coefficients				R	R square	F (p)
	B	Std. error	β	t (p)			
(Constant)	1.95	2.833		18.334 (0.000)	0.596	0.355	83.026 (0.000)
Gender	-2.416	0.749	-0.149	-3.225 (0.001)			
Hope	1.340	0.109	0.571	12.343 (0.001)			

Discussion

This study found that the agency domain had a higher percentage than the pathway domain. Adolescents often devise many ways through which they hope to fulfill important desires in

their lives. Internal hopes are the more dominant form of hope among respondents who are victims of bullying; this includes being able to start a conversation and wanting to be appreciated by others (Chasanah et al., 2015). Adolescents imagine these things and desire to achieve

them. They want to experience, reach, and create hope as well as make it achievable (Chasanah et al., 2015). Synder et al. (1997) developed the concept of hope with two dimensions: (1) agency, which refers to the determination and commitment that helps an individual to act toward the achievement of goals and serves as a driving force of hope; and (2) pathway, which refers to the individual's perceived ability to find out one or more effective ways to achieve his or her goals. Several studies have reported that hope negatively correlates with depression. Individuals with high hopes tend to have lower depression levels than those with low hopes. Research in lower-middle-income countries showed that high school students who reported violence in the past month were more likely to feel sadness and hopelessness and have pessimistic attitudes toward the future (Låftman et al., 2018) than students who did not experience bullying. Furthermore, being a victim of bullying in childhood can lead to hopelessness and depression in adulthood due to humiliation and violent experiences (Bryson et al., 2021; Farrell, 2019). Hope can be used to predict the onset of depression and to intervene in depressive symptoms (Kwok & Gu, 2019).

Adolescents need encouragement and ways to overcome stressful conditions after bullying. Those with high agency are confident, can control themselves when facing difficult situations, are optimistic about their ability to solve problems without doing something negative, and can convince themselves that the tough circumstances they experience are a stepping stone in their lives (Hayat et al., 2022; Yıldırım & Arslan, 2020). Adolescents who have high pathway will not easily quit when they encounter obstacles on their chosen path; instead, they will look for alternative ways to overcome these problems (Yıldırım & Arslan, 2020). This is related to the task of adolescent development, in which they can accept themselves and have confidence in their abilities and strengthened self-control (Wong et al., 2021; Yıldırım & Arslan, 2020).

The data on participants' personal characteristics revealed that girls and boys differed in their levels of resilience. The girls demonstrated higher levels of empathy compared to the boys (Yuliani et al., 2018). Existing research suggests that girls tend to be more perceptive of others' emotions and thoughts; they also value more their friendships (Garandeanu et al., 2022). Previous studies have found that victims of bullying exhibit higher levels of empathy than non-victims (Estévez et al., 2019; van Noorden et al., 2017; Zych et al., 2019). This may be due to victims' desire for assistance from their peers (Salavera et al., 2021). Another study found that boys tend to communicate less during times of adversity, such as bullying, which results in receiving less empathy and support than girls, who tend to communicate more and elicit greater support (Moral & Ovejero, 2021). In comparison to girls, boys are less likely to discuss topics such as peer aggression, gratuitous violence, self-defense, and violence in general, which may be connected to their higher tolerance of violence (Zeladita-Huaman et al., 2021).

The multiple linear regression analysis indicated that both hope and gender significantly influenced the resilience of bullied adolescents. Specifically, there was a positive correlation between hope and resilience. Hope involves setting goals, having the confidence and ability to work toward these goals, and deriving motivation from overcoming obstacles. Moreover, hope enables individuals to respond positively to adversity and generates positive emotions by making them perceive success in achieving goals (Ho & Chan, 2022). Adolescents who possess high levels of hope tend to have multiple goals and perceive these as challenges. They are more likely to achieve their goals, experience less distress and greater happiness, and recover faster from problems (Mullin, 2019). Previous research has emphasized the significant role of hope as a potential mechanism for coping with stressful experiences, such as bullying. Hope enables individuals to effectively manage stress and feel motivated to find soluti-

ons to a problem (Mullin, 2019). Higher levels of hope are associated with improved psychological adjustment in response to chronic stressors, including bullying (Cleveland & Sink, 2017). Researchers have also emphasized the role of hope in the recovery process, suggesting that this attitude helps individuals manage their negative emotions by strategizing ways to adapt to painful and stressful situations (Carney et al., 2019). Additionally, hope enables adolescents to respond constructively to adversity and is commonly defined as resilience.

In the context of resilience, hope plays a protective role by reducing negative emotions and aiding in stress recovery (Cathlin et al., 2019; Mullin, 2019; Noroozi et al., 2020; Togo et al., 2018; Yıldırım & Arslan, 2020). Resilience is defined as the ability to quickly recover from stress (Akasyah, 2018). In terms of gender differences, girls may find it challenging to avoid long-lasting experiences of bullying, which can cause significant pain (Sapouna & Wolke, 2013).

In the current study, hope and gender accounted for 35.5% of the effect on resilience, while the other factors accounted for 65.5%. Several studies have demonstrated that there are other protective influences (both internal and external) that contribute to resilience. Internal influences refer to personal characteristics such as self-control and an internal locus of control, whereas social support from sources including family, peers, and important people can be considered an external factor that encourages resistance to bullying (Bushati, 2020; Yule et al., 2019).

This study contributes fundamental knowledge of the impact of hope and gender on bullied adolescents' resilience. Comprehensive school-based programs should be considered a significant option to enhance resilience in adolescents experiencing repeated violence or bullying. To maintain the program's effectiveness, multiple components, including school support, parental involvement, peer relationships, and the bullied individuals, need to be engaged. This option must be considered because peer

victimization significantly impacts resilience, as evidenced by research. Increasing resilience can have a positive effect on adolescents' ability to cope with negative events, such as bullying.

As hope is a significant factor in promoting emotional regulation in the context of bullying, the authors recommend incorporating hope into school programs to enhance students' resilience. Specifically, we suggest including hope-based interventions for bullying prevention based on the positive correlation between hope and resilience observed in this study. It is believed that implementing school programs that foster goal-oriented beliefs and cognitive pathways in adolescents can mitigate the vulnerability of victims and reduce bullying triggers. These programs should integrate the two dimensions of hope, namely agency, which allows students to cultivate "intentions to act" (particularly in preventing repeated bullying), and pathway, which helps to create ways to achieve their goals. According to Snyder (1997), pathway is associated with "the ability to act." In this context, bullying victims should be able to demonstrate the ability to resist or prevent recurring bullying episodes. It is believed that combining intent and intervention programs that support goal-oriented beliefs and teenage cognitive pathway will protect victims of bullying and reduce bullying triggers. In turn, this approach will strengthen adolescents' resilience.

Comprehensive school-based interventions should also include parent education programs, which are a crucial element of any complete anti-bullying scheme. These programs aim to provide parents with the necessary tools and resources to help their children cope with bullying. Generally, parent education programs consist of workshops, training sessions, and instructional materials covering a range of topics related to making adolescents resilient in bullying situations. These initiatives are designed to encourage parents to take an active role in preventing and responding to bullying. Parents who are educated about suitable ways to deal

with this problem can better support their children and create a safer and more supportive internal and external environment for them.

Building a supportive peer network is crucial to the success of any anti-bullying program, and nurses can play an important role in this effort. Providing assistance to victims of bullying, holding bullies accountable for their actions, and fostering a healthy and inclusive school environment for all students are important steps to take for nurses. It is also crucial for students to clearly express hope by creating a positive school culture, reporting instances of bullying, and setting a good example for their peers.

Hope should be incorporated not only in the school system but also in individual counseling for bullying victims. As counselors, nurses can actively help students increase their confidence by seeking hope. The goal of the therapeutic nurse-client relationship is to develop a more positive outlook on life by increasing current hope, developing actions that bring hope to students, and reminding them of the need for concrete actions related to their hopes.

In this context, the use of structural equation modeling (SEM) for data analysis can be considered. Several new variables from psychological, spiritual, and social dimensions can be included in SEM to provide estimates of the relationship between latent constructs and their manifest indicators (through measurement models) and of the relationships among constructs (through structural models). SEM also allows for the comparison of models by selecting a suitable one from numerous alternatives. A qualitative approach is also necessary to enrich data by considering the perspectives of teachers, parents, and students. By doing so, a more comprehensive picture can be obtained regarding bullying and resilience. Furthermore, applying this study's research design to a larger population at all levels of formal education is recommended in order to strengthen the theory of resilience and bullying.

Future scholars could attempt to conduct qualitative and longitudinal studies. Combining these two methodologies will enable a more thorough analysis of the factors that impact the resilience of adolescents.

The authors minimized bias by adhering to the chosen inclusion criteria during sampling. Four individuals were excluded due to missing questionnaire data. The use of previously tested, highly valid, and reliable scales also reduced bias in this study.

However, several limitations need to be considered. First, the cross-sectional design of this study does not allow for a conclusion about whether hope caused high resilience. A longitudinal design could be utilized to analyze the role of hope in bullying victims.

Second, all the variables were measured through self-assessment based on the perspective of students who were victims of bullying. The participants' responses may have suffered from social-desirability bias. To increase the validity of the survey, multiple approaches and variables should be incorporated.

Third, the authors did not consider differences between students living with their parents and those living separately from them. Parental characteristics (e.g., occupation, age, marital status, and income) were also not evaluated and should be addressed in future studies.

Conclusions

This study shows that hope and gender have a significant influence on the resilience of bullied adolescents. This result provides an opportunity to implement hope-based interventions that focus on internal strength rather than simply treating the problem. The aim should be to increase resilience and reduce the frequency of repeated bullying episodes.

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