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THE JOURNEY OF RECOVERY: PSYCHOLOGICAL AND SOCIAL FACTORS OF POST-TRAUMATIC GROWTH AMONG VICTIMS OF VIOLENCE

Yahya Mubarak Khatatbeh^{1*}, Rawan Abdul Mahdi Al-Saliti²

¹Imam Mohammad Ibn Saud Islamic University (IMSIU), Riyadh. ymkakatbh@imamu.edu.sa, ORCID: 0000-0002-0579-3949

²Ajloun National University, Ajloun, Jordan. R.Alsalieti@anu.edu.jo, ORCID: 0009-0008-2281-7851

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Corresponding Author: Yahya Mubarak Khatatbeh
(ymkakatbh@imamu.edu.sa)

ABSTRACT

Domestic violence is still a big problem around the world, and it has serious effects on women's mental, social, and physical health. Post-traumatic growth (PTG) is a term that describes positive psychological changes that happen after a traumatic event. It can help us understand how survivors are able to stay strong and recover. There have been studies on PTG before, but not many have looked at how common it is and what causes it in abused women in the Middle East. Objectives: The goal of this study was to find out how much PTG there is among women in Jordan who have survived domestic violence, look at how it varies by age, marital status, education, and employment, and find important factors that predict PTG. The Posttraumatic Growth Inventory (PTGI) was used in a descriptive-analytical cross-sectional design. Methods The sample included 175 women who had been victims of domestic violence and were getting help at social service centers in Irbid, Jordan. We used computers to collect the data, and we used ANOVA and multiple regression to look for links and predictors. Results: The results showed that the participants had a moderate level of PTG ($M = 2.84$, $SD = 0.47$). Personal Strength had the highest score ($M = 3.11$), and Appreciation of Life had the lowest score ($M = 2.64$). ANOVA showed that marital status had a big effect on PTG ($p = 0.029$), with divorced and widowed women saying they had more growth. There were no big differences in age, education, or employment. The only important predictor was marital status ($B = 0.155$, $p = 0.030$). conclusion, marital status is the main factor that affects PTG in women who have survived domestic violence in Jordan. These results show how important it is to have trauma-informed interventions that take into account cultural differences and help people heal.

KEYWORDS: Post-Traumatic Growth; Domestic Violence; Female Survivors; Psychosocial Factors; Jordan.

1. INTRODUCTION

Domestic violence is a global epidemic, with prevalence data indicating that 30% of women worldwide, or one in three women, have experienced physical and/or sexual violence in their lifetime by an intimate partner or other family member (Sardinha et al., 2022). After trauma, positive psychological change occurs. You can survive, grow closer to loved ones, and change your life philosophy. Trauma "the subjective experience of positive psychological change reported by an individual as result of the struggle with trauma", "Posttraumatic" growth means improved adaptation, psychological functioning, or life awareness after a traumatic event, not after minor stress or natural development. It improves life. Individual growth, benefits, new life priorities, meaning, and a deeper connection to others or a higher power may result. After trauma, life appreciation, connection, strength, new possibilities, and spiritual growth occur. (Sehgal & Kaur Sethi, 2016). Post-Traumatic Growth (PTG) is the positive psychological transformation that can follow trauma, including violence. PTG involves positive cognitive, emotional, and social changes that exceed pre-trauma adaptation and awareness (Ulloa et al., 2016).

Post-traumatic growth (PTG) is a positive psychological change that can occur in individuals who have experienced trauma, including victims of violence (Bryngersdottir & Halldorsdottir, 2022). Several factors contribute to PTG among survivors of violence, including social support, control over recovery, spirituality/religiosity, and coping strategies (Fayaz, 2024; Rahayu et al., 2019). The journey to PTG is described as a challenging process rather than a destination, involving both facilitating and hindering factors (Bryngersdottir & Halldorsdottir, 2022). For survivors of sexual violence, posttraumatic stress is also a significant factor in the development of PTG (Fayaz, 2024). Many people suffer psychological trauma during their lifetime. Suffering trauma can play a large role in the development of various psychological problems (Bryngersdottir & Halldorsdottir, 2022). Research on post-traumatic growth (PTG) among victims of interpersonal violence reveals positive psychological changes following trauma. Studies indicate a high prevalence of PTG, with survivors experiencing growth across multiple domains, particularly in "appreciation of life. The severity of post-traumatic stress disorder symptoms and hope positively predict growth, while depressive symptoms are negatively related to PTG (Cabral, 2010). However, the relationship between growth and distress

remains inconsistent across studies (Elderton et al., 2017). These findings highlight the potential for positive psychological outcomes following interpersonal violence, emphasizing the importance of understanding and fostering PTG in trauma survivors.

Forms of gender-based violence vary and are caused by multidimensional factors, including social, cultural and economic (Flecha et al., 2024). Spousal violence is the most prevalent form of violence against women, and includes physical and psychological abuse (Huda et al., 2023). Violence between partners negatively affects the social well-being of the victim and also the well-being of her children. Women who have experienced violence between partners bear a burden greater than diseases, and have a high chance of developing comorbidities (Tenkorang, 2023). Many people experience trauma at some point in their lives, and the main aspects of this trauma lie in a sense of life threat, loss of control, and unpredictability. (Hogg et al., 2023). Exposure to trauma early in life is likely to have serious long-term effects on the victim, leading to fragile and vulnerable limits. However, some women seem to adapt to their traumatic situation and experience trauma early in life, feeling as if they are wearing a certain shield to protect them. (Machinga-Asaolu, 2024). Which makes her character fragile. Even if previous experiences of traumatic events are able to motivate and increase the inner strength of survivors, they are more likely to face difficulties coping with trauma and violence later in life, and are therefore at high risk of being violated in many ways as an adult, including partner violence. (Rahayu et al., 2019). Survivors who demonstrate positive personal competence, along with the interpersonal skills they have developed through their life experiences, appear to be better equipped to address their experience with domestic violence and move forward on their path to home treatment. (Machinga-Asaolu, 2024). As survivors of partner violence can see themselves, their lives, and their futures in a more positive light. Most of the explanatory concepts used to describe women's experience with intimate partner violence after exposure to it are subjective, meaning they exist or occur within themselves or in their minds (Haythornthwaite et al., 2024; Machinga-Asaolu, 2024).

Spiritual maturity, new opportunities, life values, personal strength, and better relationships follow trauma. People find new life opportunities and improve psychologically, brightness Ravi (Rafiee et al., 2024). Post-traumatic growth depends on shock-

coping (Negri-Schwartz et al., 2024) Leaving abusive relationships changes survivors drastically, Survival allows some to start over and lead. Study found (Bryngesdottir & Halldorsdottir, 2022) Violence survivors' PTSD in 22 women. Survivors of intimate partner violence flourished, their positive outlook and strengths helped them recover from trauma, the study found (Dyjakon & Rajba, 2022) Cognitive behavioral therapy improves survivors' mental health, well-being, and quality of life, as well as their children, loved ones, and communities, reducing intimate partner violence's negative effects, Feet post-traumatic development in women after partner violence decreased self-awareness and communication, increased life appreciation, and did not change spirituality, After partner violence, women rebuild, overcome, and learn new coping skills, Coping skills help women recover and continue after violence, according to the theory (Green et al., 2021).

Quality's 2022 "I'm a Winner, Not a Victim" study examined post-traumatic growth facilitators in 22 Icelandic women domestic violence survivors (23–56 years), Participants transformed the "victim" identity into a "winner" by self-building, border control, knowledge-seeking, and social support network activation to hide the aggressor's influence. In Lithuania, (Bakaitytė et al., 2022) studied post-traumatic growth (PTG) in 217 survivors of intimate partner violence (IPV). Results showed significant PTG rise. Women are new to violence, but survivors have seen it for years. PTG levels The event's centrality and identity exploration emphasize the first two years after the violence for growth. Slade et al. (2019) developed a post-traumatic development framework for psychosis and severe mental health patients from 77 English interviews. Self-discovery, identity, life esteem, self-management, relationships, and spirituality improved in 83% of participants, The study found that trauma-informed care must include post-traumatic development for psychological recovery Anderson et al. (2012) examined multi-style recovery in 37 abusive intimacy victims, Psychosocial functioning tests showed that participants were mostly PTSD-free and resilient, Qualitative analysis showed social and spiritual support helped participants heal, grow, and endure, This knowledge may aid women's intelligence and strength interventions, Women survivors of partner violence suffer psychological, social, and health issues, according to most studies, Focusing on this angle misses an important aspect of women's resilience and recovery, Women are resilient and can recover with social support, self-identity reconstruction, and

coping strategies, Research issues persist. In particular, recovery pathways, determinants, and long-term sustainability are ignored. In this study, variables affect battered women's post-traumatic development.

1.1. Questions

1. What is the level of post-traumatic development of abused women?
2. What are the differences in post-traumatic stress level due to demographic variables (age, marital status, educational level)?
3. What are the predictors of post-traumatic development in abused women?

2. METHODOLOGY

2.1. Study Design

The goal of this study was to find out how much posttraumatic growth women who survived domestic violence had and to look at differences based on important demographic factors like age, marital status, level of education, and employment status. This method was chosen because it fits the study's goals. It focuses on describing and analysing natural patterns and relationships without changing any variables. The Posttraumatic Growth Inventory (PTGI) was used to collect data. This is a scientifically proven and reliable tool that measures positive psychological changes that happen after traumatic events. A group of experts in mental health and psychology looked over a full list of the instrument's items to make sure they were appropriate for different cultures and languages. This expert review made sure that the measurement tool was clear, culturally sensitive, and free of any possible bias. These methodological steps made the study more rigorous and made sure that the instrument was used correctly and reliably on the target population.

2.2. Participants

In the study, 175 Irbid women survivors of domestic violence attended social service centres and associations. Convenience sampling was used due to the sensitive target population and the difficulty of reaching the entire research community. This study defined women survivors of violence as those who had experienced a single source (husband or family member) at least three times in the past month, regardless of the type of violence (physical, psychological, verbal, or economic). Participants had to be married, independent, living in the study area, informed about the study's goals, and willing to participate after a clear explanation and confidentiality assurance. During data collection,

women taking psychotropic medications or with pre-existing psychiatric or medical conditions were excluded to maintain sample homogeneity and reduce confounding variables.

The data collection instrument was distributed electronically via Google Forms, ensuring ethical and efficient participant access. Demographic variables were used **to categorize participants for a detailed sample description**. The majority of participants 100 women (57.1%) were married. The remaining 75 women (42.9%) were "other," including divorced, widowed, and single. Age Group Participants were divided into two age groups: 30 or younger ($n = 77$; 44.0%) and 31 or older ($n = 98$; 56.0%). Educational Level 59 women (33.7%) had a high school diploma or less, 77 women (44.0%) had a bachelor's degree, and 39 women (22.3%) had postgraduate degrees. During the study, 94 (53.7%) participants were employed and 81 (46.3%) were unemployed. This demographic profile reflects the sample's diversity and provides a solid foundation for investigating potential associations between these variables and the phenomena under study.

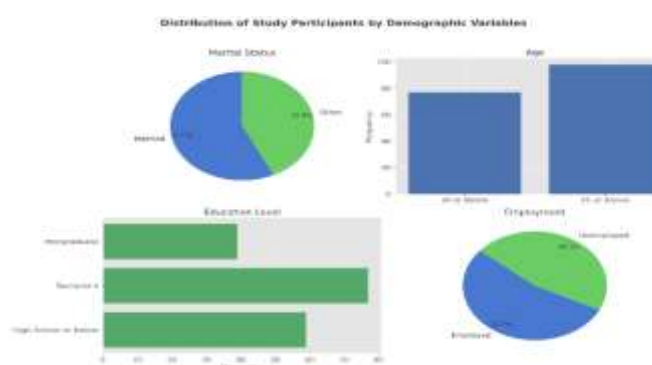


Figure 1: Distribution of Study Participants by Demographic Variables.

The figure 1 shows how the study participants were spread out across four important demographic variables: age, marital status, education level, and employment status. The pie chart shows how many people are "Married" and how many are "Other." The vertical bar chart breaks down age groups into those who are "30 or below" and those who are "31 or above." The horizontal bar chart shows levels of education broken down into "High School or below," "Bachelor's," and "Postgraduate." Finally, the second pie chart shows the employment status as "Employed" or "Unemployed." These charts give a full picture of the demographic traits of the sample.

3. ETHICAL CONSIDERATIONS

It was completely up to the people who took part

in this study. After being given enough information to make an informed choice, participants signed consent forms. They were also given a clear explanation of the study's goals, methods, and possible risks. They were told that they could leave at any time without any problems and that their personal information would be kept private and safe. The information was only used for research purposes, and reports and publications did not include any identifying information. The study was done in line with ethical standards that the institutional ethics committee approved, making sure that all ethical guidelines were followed.

3.1. Instrument

The study used the Posttraumatic Growth Inventory (PTGI), which was created by Tedeschi and Calhoun (1996) to measure positive psychological changes that happen after traumatic events. The inventory has twenty-one items that fall into five main categories: New Possibilities, Relating to Others, Personal Strength, Spiritual Change, and Appreciation of Life. Responses are rated on a six-point Likert scale from (zero), "I did not experience this change at all," to (five), "I experienced this change to a very great degree." Higher scores mean more posttraumatic growth. The original scale had good psychometric properties, with a Cronbach's alpha of (0.90) for the whole scale and subscale alphas ranging from (0.70) to (0.85). Over the course of two months, the test-retest reliability was (0.70), which shows that it was stable over time. The short form (PTGI-SF) also has very good internal consistency, with alphas between (0.90) and (0.94) and test-retest correlations between (0.71) and (0.78). This shows that the scale is strong and can be used with a wide range of people. We used Pearson's correlations between each item and its domain, as well as the total scale score, to check the construct validity of the scale. This was done with a pilot sample of 30 abused women. Item-total correlations were between 0.54 and 0.78, and item-domain correlations were between 0.61 and 0.89. All of these were statistically significant ($p < 0.01$). Domain-total correlations were also high (0.825–0.934), which means that the structure was very consistent.

Test-retest and internal consistency methods showed that the results were reliable. The test-retest reliability over two weeks gave coefficients of 0.80 to 0.87 for the domains and 0.89 for the whole scale. Cronbach's alpha values for domains were between 0.77 and 0.82, and for the overall scale, they were 0.85. This shows that the scales are very stable and consistent.

4. RESULTS

Table 1 presents the mean scores, standard deviations, and growth levels across the five domains of the Post-Traumatic Growth Inventory (PTGI) among abused women, arranged in descending order of the means.

Tables 2 and 3 provide a comprehensive overview of post-traumatic growth variations across demographic groups. Table 2 presents the mean

scores and standard deviations of post-traumatic growth based on marital status, age, education level, and employment status, highlighting observable differences among these groups. Building on this, Table 3 outlines the results of a four-way ANOVA, which assesses the statistical significance of these differences and determines which demographic factors have a meaningful impact on post-traumatic growth.

Table 1: Mean Scores, Standard Deviations, and Levels of Posttraumatic Growth Domains among Abused Women.

Rank	Code	Domain	Mean	SD	Level
1	3	Personal Strength	3.11	0.63	Moderate
2	1	Relating to Others	2.86	0.67	Moderate
3	2	New Possibilities	2.79	0.78	Moderate
4	4	Spiritual Change	2.66	0.80	Moderate
5	5	Appreciation of Life	2.64	0.78	Moderate
		Overall PTGI Score	2.84	0.47	Moderate

Table 2: Means and Standard Deviations of Post-Traumatic Growth by Demographic Variables.

Variable	Category	Mean	Standard Deviation	N
Marital Status	Married	2.78	0.452	100
	Non-Married (Divorced/Widowed)	2.94	0.469	75
Age	30 years or younger	2.80	0.431	77
	31 years or older	2.88	0.489	98
Education Level	Bachelor's degree	2.81	0.489	77
	High school or less	2.83	0.431	59
	Postgraduate studies	2.93	0.465	39
Employment	Employed	2.89	0.463	94
	Unemployed	2.80	0.465	81

Table 3: Four-Way ANOVA for the Effects of Marital Status, Age, Education Level, and Employment on Post-Traumatic Growth.

Source of Variation	Sum of Squares	df	Mean Square	F	Sig
Marital Status	1.015	1	1.015	4.841	0.029
Age	0.201	1	0.201	0.961	0.328
Education Level	0.623	2	0.311	1.486	0.229
Employment	0.396	1	0.396	1.890	0.171
Error	35.428	169	0.210		
Total	37.571	174			

4.1. Predictive Factors of Post-Traumatic Growth among Abused Women

Table 4 summarizes the regression model used to predict post-traumatic growth based on selected independent demographic and psychological variables. Table (5) shows that the average level of posttraumatic growth among the abused women in the study was moderate, with a mean score of (2.84) and a standard deviation of (0.47). The average scores for each area were between 2.64 and 3.11. The Personal Strength domain had the highest mean, with a mean of (3.11) and a standard deviation of (0.63), which means it was at a moderate level. The Appreciation of Life domain, on the other hand, came

in last with a mean score of 2.64 and a standard deviation of 0.78, which is also in the moderate range. This means that even though the participants showed moderate growth in all areas, the most noticeable growth was in their personal resilience and strength. On the other hand, their appreciation for life was lower.

Table 4: Regression Model Summary Predicting Post-Traumatic Growth among Abused Women.

Model	R	R ²	Adjusted R ²	RMSE	F	df1	df2	p
M ₁	0.239	0.057	0.029	0.458	2.044	5	169	0.075

The regression model only explains 5.7% of the difference in post-traumatic growth ($R^2 = 0.057$). The F value (2.044) is not statistically significant ($p = 0.075$), which means that the overall model is not a strong enough predictor. Because of these results, the ANOVA test had to be done to check the model's overall significance.

Table 5: ANOVA for the Regression Model Predicting Post-Traumatic Growth.

Model	Source	Sum of Squares	df	Mean Square	F	p
M ₁	Regression	2.143	5	0.429	2.044	0.075
	Residual	35.428	169	0.210		
	Total	37.571	174			

The ANOVA results show that the overall model is not statistically significant ($p = 0.075$), which means that the independent variables alone do not explain enough of the differences in post-traumatic growth. The table below shows the regression coefficients for each independent variable, which were looked at to see how much each one added to the model.

Figure (2) shows how the Posttraumatic Growth Inventory (PTGI) domains are spread out among abused women in a proportional way. The pie chart shows how much each domain contributed to the overall scores based on the average scores from the study sample. The Personal Strength domain has the highest percentage, with a mean score of (3.11) making up (22.1%) of the total distribution. This means that the people who took part felt more resilient and mentally strong after going through something traumatic. The Relating to Others domain comes next, with a mean score of (2.86) and making up (20.3%) of the distribution. This shows that social relationships and mutual support have gotten better. The New Possibilities domain came in third with a mean score of 2.79 and 19.8% of the total. This showed that the participants were able to find new interests and opportunities. Spiritual Change had a mean of 2.66, which was 18.9% of the total. This suggests that people were making moderate changes to their religious or philosophical beliefs. Lastly, Appreciation of Life had the lowest average score (2.64) and made up (18.8%), which means that people in this area had a lower level of increased appreciation for life than in other areas. Overall, the chart shows that there is a lot of variation between domains, with personal strength and social relationships showing the most posttraumatic growth.

Figure X-b. Proportions of PTGI Domains (Pie Chart)

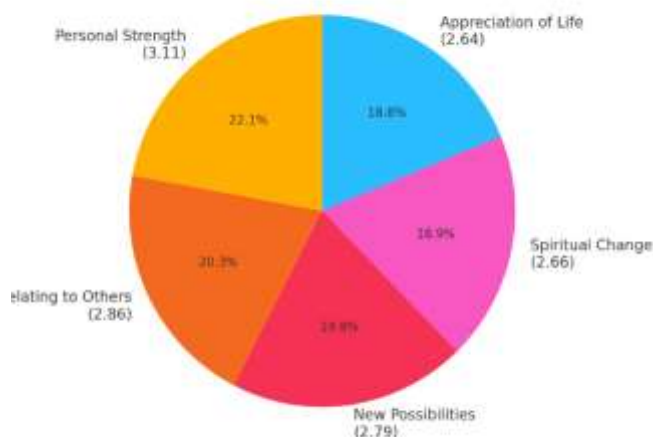


Figure 2: Mean Scores and Standard Deviations for Posttraumatic Growth Domains among Abused Women.

4.2. Means and Standard Deviations of Post-Traumatic Growth by Demographic Variables

Table (6) shows the average and standard deviation of post-traumatic growth for different demographic factors, such as age, marital status, level of education, and job status. There are clear differences between groups. For example, non-married women (divorced or widowed) had a higher mean (2.94) than married women (2.78). Women with postgraduate degrees had the highest average (2.93) among all education groups. Employed women had a slightly higher average (2.89) than unemployed women (2.80).

Table (7) shows the results of a four-way ANOVA that looked at whether these differences are statistically significant. There was a big difference in marital status at the ($\alpha = 0.05$) level ($F = 4.841$, $p = 0.029$), with non-married women coming out on top. On the other hand, there were no statistically significant differences in age, education level, or employment, with p-values of 0.328, 0.229, and 0.171, respectively. The results show that marital status is a big factor in how much women grow after a traumatic event, but age, education, and job status don't seem to matter much.

Table 5: Regression Coefficients Predicting Post-Traumatic Growth among Abused Women.

Predictor	B	Std. Error	t	p
(Intercept)	2.799	0.089	31.399	<.001
STAT	0.155	0.071	2.200	0.029
AGE	0.069	0.070	0.980	0.328
EDUCAT	-0.131	0.095	-1.373	0.171
EDUCAT	-0.153	0.091	-1.679	0.095
JOB	0.097	0.070	1.375	0.171

The table shows that the only statistically significant predictor is marital status (divorced or widowed), which has a positive effect on post-traumatic growth ($B = 0.155$, $p = 0.029$). Age, education, and employment were not statistically significant ($p > 0.05$). The next table shows a Bootstrap analysis that was done to make sure these results were stable and accurate.

Table 7: Bootstrap Coefficients for the Regression Model Predicting Post-Traumatic Growth.

Predictor	B	Bias	Std. Error	p*
(Intercept)	2.796	-0.001	0.083	<.001
STAT	0.155	-0.0001	0.070	0.030
AGE	0.069	0.0003	0.070	0.322
EDUCAT	-0.131	0.0001	0.091	0.145
EDUCAT	-0.152	0.0004	0.090	0.079
JOB	0.097	0.0004	0.068	0.161

The Bootstrap analysis backs up the finding that marital status (divorced or widowed) is still the only important predictor ($p = 0.030$), making it more reliable. After looking at the results in a table, it was important to add visual representations to show how big the effect of each predictor was.

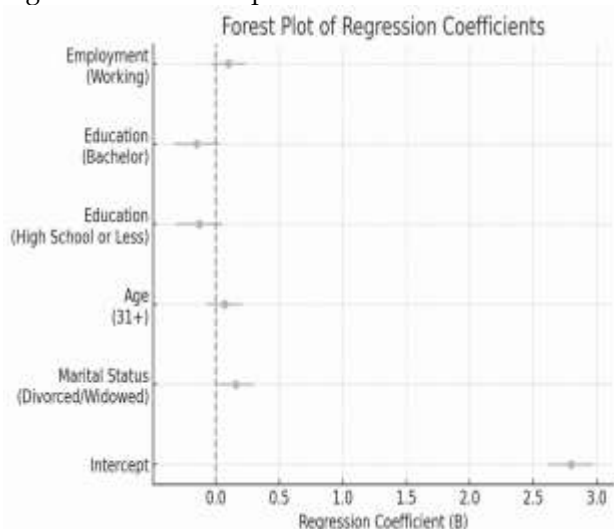


Figure 3: Forest Plot of Regression Coefficients with 95% Confidence Intervals for Predicting Post-Traumatic Growth.

As shown in figure 3 The forest plot shows the regression coefficients (B) for all predictors, along with their 95% confidence intervals. The dots show the estimated coefficients, and the horizontal lines show the confidence intervals. The dashed line going up and down at zero shows the point of no effect. Only Marital Status (Divorced/Widowed) has a coefficient whose confidence interval does not cross zero, which means it is a statistically significant predictor of post-traumatic growth ($B = 0.155$, $p = 0.030$). Age, education, and employment are all other

predictors that have confidence intervals that overlap with zero. This means that they are not important parts of the model. This graph backs up the idea that marital status is the most important and only significant predictor in the regression model.

5. DISCUSSION

The results showed that women who had been victims of domestic violence had an average level of post-traumatic growth (PTG), which means that their mental health had gotten better in this group, but to different degrees. This is in line with a study by (Bryngersdottir & Halldorsdottir, 2022) that found that women in Iceland who had been victims of violence had average levels of PTG. The level of growth depended on how much social support they had and how free they were from the violent environment. The results of (Tedeschi & Calhoun, 1996) also support this idea. They showed that PTG is a slow process that needs enough time after a person has been through trauma. Fayaz (2024) study, on the other hand, found higher levels of PTG in women in Asian communities, especially in the areas of spiritual changes and self-esteem. This difference is due to cultural and religious frameworks that may help speed up the process of reinterpreting trauma in a good way. Tedeschi and Calhoun (1996) model of post-traumatic growth says that psychological growth needs big changes in how we think and how we understand things. This process may be affected by the social environment and the help that is available. In Jordan, women's ability to reach high levels of PTG may be limited by their ability to stay in violent situations or lack of support. The researchers say that the mid-level is partly due to how hard it is to get mental health care and good social support, as well as cultural pressures that make it harder for women to use traumatic events to make positive changes in their lives.

The answer to the second question showed that the field of personal strength has the highest average of all the PTG areas. This finding is in line with Ulloa et al. (2016) study, which showed that women who survive often develop internal coping strategies that make them stronger so they can face future challenges. Rahayu et al. (2019) talked about this trend, saying that therapy and social support help people build their own abilities. On the other hand, the study by Huda et al. (2023) found that spiritual changes were the most important area for survivors in conservative societies. This shows how religious values can help people see traumatic events in a new light. The Cognitive Adaptation Theory says that trauma makes people rethink their own abilities and

build new psychological strength as a way to survive. This is what makes this group better. Some people might say that the women in the sample developed inner strength as a way to protect themselves psychologically, especially since they didn't have much outside support. The results showed that the only statistically significant predictor of PTG levels was whether or not the person was married (divorced or widowed). This result backs up the work of (Bakaitytė et al., 2022) which found that ending a violent relationship is a big step toward healing and rebuilding one's mental health. Huda et al. (2023) found that education, not social status, is the best predictor of PTG because it gives women access to resources and support. "Shattered Assumptions" theory backs this up. It says that trauma breaks down basic beliefs about yourself and the world, and that growth means rebuilding these beliefs. Divorce or being a widow removes long-lasting problems, which gives survivors more room to change their lives. Because of this, divorced and widowed women in Jordan are more independent than married women, who may feel pressure from society to grow.

This makes it easier for them to get over trauma and grow as people. Also, a woman's marital status affects her financial stability, which is an important factor in her ability to get psychological help and start over. (Claeson et al., 2024) Also, women of different ages may have to deal with the same problems and situations, like not having enough resources or not having strong support networks. This makes age less of a factor in post-traumatic growth. This finding is in line with the findings of a study (Flores-Ortega et al., 2024) In this case, psychosocial support from family, friends, or professionals seems to be a bigger factor in helping someone get better than formal education. Education can help people see and understand tough situations, but it is often not enough on its own to deal with the deep effects of violence or speed up the healing process. The psychosocial effects of violence are too broad and deep to be explained or dealt with only by educational level. This is why there are no clear differences in post-traumatic development among women with different levels of education. (Unutkan et al., 2024) In a study, whether or not women worked did not make a difference in the growth of battered women. It assumes Social Learning Theory (Akers & Jennings, 2015) Violence is a behavior acquired through observation and imitation, especially when individuals see violence as rewarded or not punished. Children growing up in violent family environments may adopt violence

as a natural form of dealing with conflict in their future lives.. You see Feminist theory (Ferguson, 2017) Violence against women is a reflection of gender inequality and patriarchal systems (Patriarchy) that gives men power and control over women. Violence here is interpreted as a way to maintain male power. and agree with the results of study Hooks & Ahmed (2021) Communities with a larger gender gap have higher rates of violence against women, especially spousal violence.

Many theories have examined violence against women's causes and perpetrators. Psychological, social, and cultural theories explain intimate partner violence. The Social Learning Theory by Bandura and Walters (1977) suggests that violent behavior is learned through observation and reinforcement. Witnessing domestic violence may make children internalize aggression to resolve conflicts as adults. (Seefeld et al., 2022) found normalized violence families transmit IPV. Feminists blame patriarchy and gender inequality for IPV. It claims patriarchal societies control women through violence. In cultures with higher gender disparities, Gottzén et al. (2021) say structural imbalances make women more vulnerable to physical and emotional abuse. Ecological Theory explains violence using personality, family, community, and social structures. Hapazari (2024) used this framework to demonstrate how cultural acceptance of male authority and weak legal protections increase IPV. The "Power and Control Wheel" model is related, this model views IPV as a deliberate attempt to control and manipulate victims through physical, psychological, and economic abuse. In coercive control research, (Stark, 2023) called IPV "intimate terrorism" that instills fear and dependency.

5.1. Strengths and Limitations

This study gives us important information about post-traumatic growth (PTG) in women who have survived domestic violence in Jordan, a place where there isn't much empirical research. The results are more reliable and can be applied to a wider range of situations because they used a validated tool (PTGI) and a sample size that was big enough. Also, the study's focus on demographic predictors gives us a more detailed picture of the psychosocial factors that affect PTG. But there are some problems that should be noted. First, the cross-sectional design makes it impossible to draw causal conclusions about how variables are related to each other. Second, using self-reported data may lead to biased responses, such as social desirability effects. Third, the study only looked at one area, which may mean that the results

don't apply to people in other areas. Finally, the current model didn't look at things like the severity of trauma, social support networks, and cultural views on violence, which could also have a big impact on PTG.

5.2. Recommendations

Longitudinal designs should be used in future research to look at how PTG changes over time and how it is caused among survivors of domestic violence. Using qualitative methods could help us better understand what survivors went through and show how culture affects PTG. Policymakers and practitioners should make trauma-informed interventions for married women who are still living in abusive situations, focusing on strategies for social support and empowerment. Adding studies to different areas of Jordan and other Middle Eastern

countries will also make them more culturally sensitive and valid outside of Jordan.

6. CONCLUSION

This study shows how important post-traumatic growth can be for women who have been victims of domestic violence, especially when it comes to marital status as a key predictor. The results show that PTG levels are generally low, but they stress the need for environments that support people and trauma-informed care to help people change their minds in a positive way. By looking at how individual resilience and sociocultural factors work together, stakeholders can make better interventions that give survivors more power and help them heal. These ideas add a lot to the conversation around the world about healing and resilience after intimate partner violence.

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