

Role of Self-Efficacy as a Mediator between Negative Emotionality and Resilience in Navy Wives

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Abstract

Military spouses, particularly wives, require resilience given the various stressors they face, such as the absence of their husbands for support, the dual role of being both a mother and a father, and handling household tasks and childcare alone. Self-efficacy and negative emotionality or neuroticism are often associated with an individual's level of resilience, making them characteristics that can predict a person's resilience effectively. This study aims to test a model of the relationship between self-efficacy, negative emotionality, and resilience in Navy wives, utilizing a quantitative cross-sectional research design. Measurement tools include a modified Resilience Scale of Adult (RSA), the Indonesian version of the Self-Efficacy Scale, and a personality scale translated based on the BFI-2 Indonesian version. The data analysis method employed is Path Analysis using Amos-24. The research results indicate that there is an influence, both directly and indirectly, of the variable negative emotionality ($p < 0.05$) on resilience. There is a positive influence of self-efficacy ($p < 0.05$) on resilience, and self-efficacy plays a mediating role in the relationship between negative emotionality and resilience ($p < 0.05$). The findings suggest that the role of self-efficacy as a protective factor is highly dominant in determining an individual's resilience compared to the role of negative emotionality (a risk factor). Based on the research results, training for the development or enhancement of self-efficacy is recommended for Navy wives to improve their resilience and mental health. Future research is encouraged to explore other variables that enhance self-efficacy, as self-efficacy is a significant factor influencing resilience.

Keywords: Resilience, self-efficacy, negative emotionality, military wives, navy, protective factor, risk factor.

Received 10 September 2023/Accepted 25 November 2023 ©Author all rights reserved

Introduction

The life of a military spouse, particularly the wife of a soldier, is challenging, marked by numerous stressors. This challenge intensifies when the spouse is deployed to a location far from the family, unable to return on short notice when needed. Military wives bear the responsibility of being single

parents, managing all household tasks and childcare alone (Wijayana, 2019). Even during pregnancy and childbirth, wives must fulfill all their needs independently (Sari & Wulandari, 2015). When a woman marries a soldier, she must fully dedicate herself to her husband and embrace the military doctrine, which tends to be rigid, uniform, and systematic (Wylie et al., 2018). This aligns with Hall (2011) assertion that military wives are family members directly interacting and influenced by the military lifestyle. They must adapt to separations, relocations, role ambiguity, role overload, and live under the doctrine of the "primary military mission." Numbers et al., (2011) state that military wives act as a defense fortress, playing a role in the success of military missions. In essence, while husbands undertake the primary defense duties of the nation, wives handle all household and social affairs, allowing their husbands to fully concentrate on their missions.

Triwidiyanti et al., (2022) revealed in their research that the three most stressful situations for military wives are when their husbands are deployed far from the family, when a child or themselves are ill, and issues related to childcare. They identified four primary stressors causing stress for military wives: frequent family relocations, stress before, during, and after deployments, the possibility of injury or death of the husband during duty, and the prioritization of military missions above all aspects of a soldier's life (Schumm et al., 1994). The multitude of stressors and role demands faced by military wives is often associated with negative mental health outcomes (Sinclair et al., 2019).

Considering these challenges, military wives must possess resilience to survive, lead normal lives, and maintain good mental health. Resilience, as indicated by numerous studies, correlates positively with good psychological conditions, subjective and psychological well-being (Grossman et al., 2014; Sagone & Indiana, 2017), positive affect (Anderson et al., 2020), self-confidence, self-coherence, character strength, and life satisfaction (Martinez-Marti & Ruch, 2017), positivity (Bingöl et al., 2019), low psychological pressure, good relationship function, quality sleep, and overall good health (Sinclair et al., 2019). Conversely, Grossman (2014) found that resilience is negatively correlated with anxiety, depression, and PTSD, and overall, resilience is positively correlated with physical health, mental health, and well-being.

Sinclair et al., (2019) define resilience as a trait or general disposition that enables individuals to respond effectively when faced with demanding situations. Grossman (2014) lists characteristics of individuals with high resilience as persistent, warm, comfortable with change, possessing a strong personality, goal-oriented, having high self-esteem, patience, the ability to face stressors, high spirituality, optimism, positive affect, positive emotions, and effective coping.

Lee et al. (2013) propose that two factors influence an individual's resilience level: risk factors and protective factors. Risk factors are attributes or individual dispositions that increase the likelihood of maladaptation and negatively correlate with resilience, while protective or promotive factors are characteristics that enhance adaptive abilities or positively correlate with resilience. Rutter (1985); also Masten and Wright (2010) agree that an attribute is considered a protective factor if it functions to reduce risk, diminish the negative influence of stress, build self-esteem and self-efficacy, and open opportunities for problem-solving. In essence, protective factors shield individuals from the negative influence of stressors. Individuals with many protective factors are more likely to cope with or adapt to disruptive life events, while those with fewer protective factors are less successful in adapting (Oshio et al., 2018).

A meta-analysis by Lee et al., (2013) categorizes attributes classified as protective factors, including life satisfaction, optimism, positive affect, self-efficacy, self-esteem, social support, with self-efficacy having the highest correlation with resilience compared to other protective factors. On the other hand, attributes categorized as risk factors include anxiety, depression, negative affect, perceived stress, fatigue, and PTSD. Lee et al., (2013) meta-analysis concludes that self-efficacy is both a strong predictor and a protective factor for resilience. This finding is supported by subsequent research that also found a strong influence of self-efficacy on resilience.

Bandura (1999) reveals that self-efficacy plays a significant role when individuals must determine actions in challenging situations, motivating individuals and assisting in self-management to control their lives. Individuals with high self-efficacy believe they can independently master stressful situations or other challenging situations effectively (Schwarzer & Jerusalem, 1995; Luszczynska et al., 2005). They are better able to control their thoughts and endure difficulties (Tan-Kristanto & Kiropoulos,

2015), easily dismiss negative thoughts about themselves or their abilities (Ozer & Bandura, 1990), perceive stressors or obstacles in their lives as challenges, approach problems with high optimism, do not easily give up, and make a strong effort to solve problems (Wang et al., 2018; Ayatollah & Ayoobiyan, 2019).

The characteristics of resilient individuals, as stated by previous researchers, include stable emotions, optimism, independence, perceiving changes or issues as challenges to be faced and resolved, rather than individuals experiencing personality disorders (Skodol, 2010). These characteristics are contrary to those displayed by individuals with negative emotionality (one of the personality types from the Big Five personality model), who exhibit characteristics of being easily anxious, prone to depression, and emotionally volatile.

In the realm of resilience studies, a negative correlation is frequently found between resilience and negative emotionality (Sahi & Raghavi, 2016; Froutan et al., 2018; Ercan, 2017; Bazrafshan et al., 2019; Brown et al., 2021). Hsieh et al. (2017) state that individuals with negative emotionality tendencies are prone to anxiety, obsessive thoughts, impulsive behavior, sensitivity, or anger towards others. Gamez et al. (2007) describe individuals with negative emotionality as having low abilities to control impulses and manage stress, perceiving changes or life challenges as threats, displaying a passive depressive tendency in problem-solving, being inclined to cling to feelings of sadness, and adopting a pessimistic attitude when facing challenges or obstacles in life. Individuals with high neuroticism tend to have negative emotions, especially anxiety and depression when confronted with change, and are less flexible in coping with situations (Lee-Bagglely et al., 2005).

The abundance of previous research has consistently found a negative correlation between resilience and negative emotionality (Sahi & Raghavi, 2016; Froutan et al., 2018; Ercan, 2017; Bazrafshan et al., 2019; Brown et al., 2021). Furthermore, the results of a meta-analysis by Lee et al. (2013), which analyzed 33 studies investigating resilience and its influencing psychological factors, found that self-efficacy is a strong predictor and protective factor with a stable positive correlation with resilience. Individuals with strong self-efficacy are described as having characteristics opposite to those with a

strong tendency toward negative emotionality. For example, they can independently master stressful situations or challenges effectively (Schwarzer & Jerusalem, 1995; Luszczynska et al., 2005), control their thoughts and endure difficulties (Tan-Kristanto & Kiropoulos, 2015), not focus on negative thoughts about themselves (Ozer & Bandura, 1990), perceive stressors or obstacles in their lives as challenges (Wang et al., 2018; Ayatollah & Ayoobiyan, 2019).

Distinguishing the current study from Norton (2020) research, firstly, Norton examined the influence of personality and self-efficacy on resilience. Secondly, Norton correlated all personality types with self-efficacy and resilience, while the present study tests a resilience model through the roles of negative emotionality and self-efficacy. Thirdly, Norton used adult female respondents who had experienced trauma in Minneapolis, USA, whereas the respondents in the current study are wives of the navy in Indonesia. Norton's research found that when personality is analyzed together with self-efficacy, its influence is not significant. The results of this study are expected to show that negative emotionality influences the resilience model of navy wives both directly and indirectly through the mediation of self-efficacy.

As of September 9, 2023, a search on the Garuda platform with the keywords "self-efficacy, negative emotionality, and resilience" did not yield any studies that investigated all three variables simultaneously. Subsequently, on September 14, 2023, a search with the keywords "military wives, military" found seven studies with respondents being military wives, but only one study used navy wives as respondents, focusing on marital adjustment (Karunia et al., 2019). The current study aims to identify better predictors of resilience in an effort to enhance the resilience and mental health of navy wives. The research goal is to test the model of the roles of negative emotionality and self-efficacy in the resilience of navy wives.

Method

Respondents

The population in this study consists of navy wives residing in Jakarta and Surabaya. The multistage random sampling technique is employed in the sampling process. Multistage sampling involves several stages and generally combines two or more different sampling methods. In the first stage, the selection of cities and units is done using cluster sampling. Subsequently, respondent selection is determined using purposive sampling. A total of 907 respondents were obtained through this process.

Technically, the sampling process involves the following steps: first, the population is divided into sub-populations in Jakarta and Surabaya. Considering that many navy wives live in the Jakarta and surrounding areas, as well as Surabaya and its vicinity. The next step is to further divide the sub-populations in Jakarta and Surabaya into sub-populations of Navy ships (KRI) and Marine battalions. The defined characteristics for research respondents are navy wives who have experienced or are currently experiencing their husbands being on assignment for 3 to 12 months.

Design and Procedure

This research adopts a quantitative cross-sectional design, which involves measuring all the variables simultaneously, both dependent and independent, without subsequent data collection. Data collection or the distribution of measurement tools in this study is conducted online using Google Forms. The research has received ethical approval from the Ethics Review Board of the University of Surabaya and obtained permission from the relevant units within the Navy.

After obtaining approvals from all relevant authorities in a hierarchical and tiered manner, the researcher then contacts the designated contact person of the target unit, providing detailed explanations on how to fill out the instruments. The designated contact person, who has direct communication with the respondents, is responsible for distributing the research instruments. During the distribution of the research instruments, a Consent Form and Information Content are also provided for the respondents to fill out.

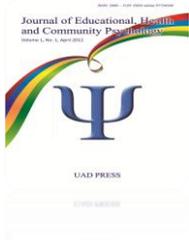
Instruments

The Resilience Scale used in this study is an adaptation of the Resilience Scale for Adults/RSA (Hjemdal, Fribourg, Martinussen, & Rosenvinge, 2001). The resilience scale consists of five dimensions: 1) Personal competence with a loading factor value of 0.939, 2) Social Competence with a loading factor value of 0.748, 3) Family Cohesiveness with a loading factor value of 0.772, 4) Social support with a loading factor value of 0.852, and 5) structure style with a loading factor value of 0.629. The loading factor values > 0.6 indicate that these indicators are valid as measures for the variable. The measurement tool is in the form of an attitude scale. The Construct Reliability value for the RSA Scale is 0.894, with a variance extracted value of 0.632 (cut-off value > 0.50). The resilience scale consists of 27 items for all dimensions. Each item is rated on a 5-point Likert scale ranging from "strongly disagree" (one) to "strongly agree" (five). The resilience score ranges from 27 to 135.

The Self-Efficacy Scale used is the General Self-Efficacy Scale (GSE) Indonesian version developed by Schwarzer & Jerusalem (1995). The higher the GSE score, the higher the self-efficacy of the respondent and vice versa. The Self-Efficacy Scale consists of 10 items with the lowest factor loading value of 0.756 and the highest of 0.860. The GSE Scale has a construct reliability value of 0.947 with a variance extracted value of 0.642 (cut-off value > 0.50).

GSE is a unidimensional self-efficacy measurement tool. In this study, each item is rated on a 5-point Likert scale ranging from "strongly disagree" (one) to "strongly agree" (five). The possible score range for the self-efficacy scale that respondents may achieve is a minimum of 10 and a maximum of 50.

The negative emotionality scale used in this study is derived from the personality scale, a modification of the Indonesian translation of the Big Five Inventory-2 (BFI-2) scale, adapted by Ahya & Siaputra (2021). The negative emotionality scale comprises 4 items with the lowest factor loading coefficient being 0.620 and the highest 0.787. The used negative emotionality scale has a construct reliability value of 0.801 with a variance extracted value of 0.505 (cut-off value > 0.50). The possible score range for the negative emotionality scale that respondents may achieve is a minimum of 4 and a maximum of 20.



Data Analysis

The data analysis technique used is path analysis using the Amos-24 program to test the model of the relationship between self-efficacy, negative emotionality, and resilience, as well as to identify whether self-efficacy mediates the relationship between negative emotionality and resilience. Path analysis is a direct extension of multiple regression when the independent variable not only influences the dependent variable directly but also indirectly (Streiner, 2005).

Results

Respondent Demographics: The study includes 907 navy wives as respondents. Among the 907 respondents, the majority are aged between 34 – 40 years (39.03%), have an educational background of D3/D4/S1 (55.98%), work as housewives (71.77%), and the husbands hold the rank of Tamtama (47.85%). Most respondents have been married for more than 12 years (40.13%), and 59.65% of respondents live in their own homes. [Table I](#) provides a detailed overview of respondent demographics, including age, highest education, occupation, husband's rank, number of children, living arrangement, and marriage duration.

Table I
Data Demografi Responden

Usia Responden		
48-54	21	2.31%
41-47	120	13.23%
34-40	354	39.03%
27-33	327	35.72%
20-26	85	9.37%
Pendidikan terakhir Responden		
S2	22	2.42%
D3/D4/S1	530	55.98%
D1/D2	7	0.77%
SMA/SMK	344	37.93%
SMP	3	0.33%
SD	1	0.11%
Pekerjaan Responden		
Ibu Rumah Tangga	651	71.77%
Wiraswasta	62	6.83%
Guru	61	6.72%
Karyawan	39	4.30%
PNS	38	4.19%
Perawat	30	3.31%
Bidan	13	1.43%
TNI	13	1.43%
Pangkat Suami		
Perwira	192	21.17%
Bintara	281	30.98%
Tamtama	434	47.85%
Jumlah Anak		
Anak 0	88	9.70%
Anak 1	225	24.81%
Anak 2	390	42.99%
Anak 3	170	18.74%
Anak 4	31	3.42%
Anak ≥ 5	3	0.33%

Status Tempat Tinggal

Rumah pribadi	541	59.65%
Rumah dinas	184	20.19%
Rumah orang tua	163	17.97%
Kontrakan	19	2.09%

Lama Pernikahan

Diatas 12 Tahun	364	40.13%
10-12 Tahun	147	16.21%
7-9 Tahun	131	14.44%
4-6 Tahun	117	12.89%
1-3 Tahun	148	16.37%

Catatan N = 907

Results of Path Analysis Model Testing

Table 2 presents the results of the fit test for the current study model from both absolute fit measures and incremental fit measures. A low chi-square (χ^2) value would yield a significance level greater than 0.05, indicating no significant difference between the covariance matrix of the data and the estimated covariance matrix. The obtained chi-square value for the test is 1017.035, which is still high, indicating that the model does not fit well. The χ^2/DF value, which is less than 2.00 or even less than 3.00, indicates an acceptable fit between the model and the data. In this study, the CMIN/DF coefficient is 6.826, which is more than 3, categorizing the model as unfit. The calculated RMSEA value for the research model is 0.080, meaning that the model is reasonably accepted or fits well. The RMSEA is more robust with the sample size and is not influenced by the sample size used, making it a suitable measure for testing the SEM model's feasibility. The Goodness of Fit Index (GFI) is a non-statistical measure ranging from 0 to 1, where a GFI > 0.9 indicates a good model fit. The GFI value for the current research model is 0.881, indicating a moderately good fit.

The Adjusted Goodness of Fit Index (AGFI) is 0.849, and the recommended AGFI is ≥ 0.90 , indicating a moderately good fit. The Tucker Lewis Index (TLI), an alternative incremental fit index, compares the tested model against the baseline model. The recommended TLI fit criterion is ≥ 0.95 . In this study, the TLI value is $0.919 > 0.90$, categorizing the model as moderately fit. The Comparative Fit

Index (CFI) is $0.929 > 0.90$, indicating a moderately good fit. The CFI cut-off value recommended is ≥ 0.95 . The Normed Fit Index (NFI) is 0.918 , meaning that the model is fit, with the NFI cut-off value for this index being ≥ 0.90 .

Table 2

Absolute Fit Measures

Goodness of Fit Index	Cut off value	Estimasi	Keterangan
<i>Absolute Fit Measures</i>			
χ^2 -Chi-square	-	1017.035	Tidak Fit
CMIN/DF	≤ 2.00	6.826	Tidak Fit
Probabilitas	≥ 0.05	0.000	Tidak Fit
RMSEA	≤ 0.08	0.080	Fit
GFI	≥ 0.90	0.881	Moderat Fit
<i>Incremental fit Measures</i>			
AGFI	≥ 0.90	0.849	Tidak Fit
TLI	≥ 0.95	0.919	Moderat Fit
CFI	≥ 0.95	0.929	Moderat Fit
NFI	≥ 0.90	0.918	Fit

Causality Test

The causality test is conducted to determine the significance of the estimated coefficient values of the exogenous latent variables on the endogenous latent variables. The complete output of the Structural Equation Modeling (SEM) model is presented in the table below.

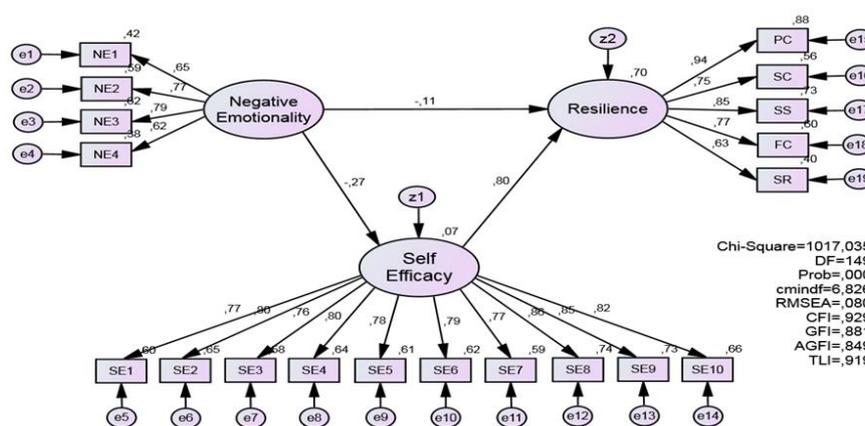


Figure 1. Path Analysis Result

The statistical hypothesis testing results for hypothesis 1 yield an estimated value of the influence of Negative Emotionality on Self-Efficacy of -0.190 , with a CR value of -6.929 and a p-value of 0.000 . Based on these results, since the p-value $0.000 < 0.05$, it can be concluded that Negative Emotionality significantly negatively influences Self-Efficacy, meaning that the higher the tendency of Negative Emotionality, the lower the self-efficacy of navy wives.

The statistical hypothesis testing results for hypothesis 2 yield an estimated value of the influence of Negative Emotionality on Resilience of -0.393 , with a CR value of -4.326 and a p-value of 0.000 . Based on these results, since the p-value $0.000 < 0.05$, it can be concluded that Negative Emotionality significantly negatively influences Resilience. This implies that the higher the tendency of Negative Emotionality, the lower the resilience of navy wives.

The statistical hypothesis testing results for hypothesis 3 yield an estimated value of the influence of Self-Efficacy on Resilience of 4.146 , with a CR value of 24.871 and a p-value of 0.000 . Based on these results, since the p-value $0.000 < 0.05$, it can be concluded that Self-Efficacy significantly positively influences Resilience. This means that the higher the self-efficacy, the higher the resilience of navy wives.

Indirect Influence Test

The indirect influence test is conducted using the bootstrapping method due to the non-fulfillment of normality assumptions for both univariate and multivariate data. The comprehensive results of the indirect influence testing are presented in [Table 4](#) below.

[Table 3](#) provides a detailed overview of the empirical model testing results by examining the hypotheses developed from the model. If the critical ratio (CR) value > 1.96 or p-value < 0.05 , reject H_0 , and accept H_0 if the critical ratio value < 1.96 or p-value > 0.05 . The comprehensive hypothesis testing results are presented as follows:

Table 3
Regression weight Pengujian Hipotesis Full Model

No	Pengaruh langsung		Estimate	S.E.	C.R.	P	Keterangan
1	Negative Emotionality	---> Efikasi diri	-0,190	0,027	-6,929	0,000	Signifikan
2	Negative Emotionality	---> Resiliensi	-0,393	0,091	-4,326	0,000	Signifikan
3	Efikasi diri	---> Resiliensi	4,146	0,167	24,871	0,000	Signifikan

[Table 4](#) shows that the indirect influence of Negative Emotionality on Resilience is -0.281 with a standard error of 0.033 and a p-value of 0.002. Since the p-value $0.002 < 0.05$, it is evident that Negative Emotionality significantly influences Resilience through Self-Efficacy.

Table 4
Uji pengaruh langsung dengan Bootstrapping

No	Pengaruh tidak langsung		Estimate	S.E.	P	Keterangan
1	Negative Emotionality	---> Resiliensi	-0,281	0,033	0,002	Signifikan

Discussion

The research findings indicate that the proposed model is sufficiently fit, demonstrating alignment between the conceptual aspects and the data. Negative emotionality correlates negatively with resilience, and self-efficacy positively influences the resilience of navy wives. The direct influence of self-efficacy on resilience is greater compared to the direct influence of negative emotionality. The current study's results reveal the mediating role of self-efficacy in the relationship between negative emotionality and resilience, although it is of a partial nature. The present study strengthens the argument that resilience in its process is influenced by both protective and risk factors. Resilient individuals are those capable of coping with stressors using the resources or protective factors they possess, whether internal or external (Friborg et al., 2003).

White et al. (2010) state that the more individuals have protective factors, the more likely they are to adapt to disruptive life events, whereas individuals with fewer protective factors tend to struggle with adaptation. Maximizing protective factors will enhance individuals' chances of optimal development. In the current research context, it was found that the contribution of self-efficacy to the resilience of wives is greater compared to negative emotionality. This indicates that the influence of self-efficacy as a protective factor is more dominant than the influence of negative emotionality (risk factor) on resilience. Lee et al. (2013) found that protective factors have a stronger correlation with resilience than risk factors (negative emotionality). Essentially, negative emotionality does influence the level of resilience in navy wives. Still, if the wives have strong self-efficacy within them, the negative influence of negative emotionality will be neutralized by self-efficacy. Navy wives with high self-efficacy feel competent and confident in their actions, perceive stressors or obstacles as challenges, approach problems optimistically, do not easily give up, and strive hard to solve problems. On the other hand, individuals with low self-efficacy feel less capable, are pessimistic, tend to perceive life challenges as threats, and are less flexible in handling situations (Lee-Baggeley et al., 2005; Gamez et al., 2007; Hsieh et al., 2017). Consequently, when husbands are assigned a mission, wives with low self-efficacy experience prolonged sadness, emotionally tend to be less stable, and struggle to adapt to new situations.

Self-efficacy, as a protective factor stemming from within the individual, is a strong predictor of an individual's resilience level. Self-efficacy can develop and be cultivated. Bandura (1999) outlines four processes in the formation or development of self-efficacy. Firstly, self-efficacy can form because individuals have successful experiences in overcoming a problem. Successful experiences build or reinforce self-efficacy and serve as modalities for successfully addressing subsequent problems, persevering in the face of difficulties, and quickly recovering from setbacks. Secondly, social modeling is a way to strengthen self-efficacy by observing others with characteristics similar to oneself succeeding with persistent effort, instilling confidence that they also have the ability to succeed.

Formation or development of self-efficacy through social modeling is highly influenced by perceived similarity between individuals and their social models. The more similarity there is, the more persuasively it enhances an individual's self-efficacy. Thirdly, social persuasion involves verbal encouragement that boosts an individual's self-efficacy, encouraging them to strive harder for success and skill development. The fourth factor is enhancing physical health, reducing stress and negative emotional tendencies, and correcting body misinterpretations. The more positively someone perceives their physical condition or health, the higher their self-efficacy will be in facing challenges or obstacles that may arise in their life.

How is the self-efficacy of navy wives formed in facing stressors? Essentially, every prospective navy wife who is about to get married has received pre-marital preparation by providing an understanding that, as a soldier's wife, they must be ready to assume dual roles as a wife and as a husband, especially when their husband is on duty. In general, prospective wives do not object and are ready to accept this risk, especially since this preparation is given simultaneously with the marriage permission application. However, when experiencing actual marriage, issues related to self-adjustment still arise (Karunia et al., 2019). Pre-marital preparation provided is essentially more verbal invitation and still at the knowledge level, so it does not thoroughly prepare the psychological and mental conditions of prospective wives. Palmer (2008) research results state that soldier's wives are generally not prepared to face unsettling as the most severe risk they have to face, whereas when husbands are on duty, soldier's wives feel higher stress levels than when husbands are at home (Karunia et al., 2019).

After marriage, the self-efficacy of wives in facing stressors is mainly shaped by successful experiences through vicarious experiences when they are first left on duty by their husbands. In addition, navy wives learn a lot and take examples from social models in their environment, such as neighbors, friends among navy wives, and wives of their husbands' superiors. The figures most likely to be emulated are those perceived by the wives to have modalities not much different from theirs, such as similarity in the rank of their husbands, both living in official residences, both working, and so on. Furthermore, regarding physical health, for navy wives, physical health is crucial because if they are sick, they cannot perform their daily tasks, especially taking care of their children. Triwidiyanti et al. (2020) found in their research that when wives are sick or when children are sick, it is the second most severe stressor for wives, after husbands being far away from home/family.

Conclusion

In the context of the current research, it is found that the resilience of navy wives is influenced by negative emotionality and self-efficacy, where the influence of self-efficacy is greater compared to negative emotionality. Self-efficacy mediates the relationship between negative emotionality and resilience. Negative emotionality affects the level of resilience in navy wives, but if the wives have strong self-efficacy, the negative influence of negative emotionality will be neutralized by self-efficacy. Self-efficacy is a protective factor and a strong predictor of an individual's resilience.

Considering the above conclusion, the navy should develop pre-marital preparation materials, emphasizing training or activities that can increase the self-efficacy of navy wives. Such preparation and training are preventive measures, as well as efforts to enhance resilience and develop the mental health of navy wives. Future research is recommended to investigate other variables that enhance efficacy because self-efficacy is a variable that significantly influences resilience.

Acknowledgment

The author expresses gratitude to the Indonesian Navy institution for granting permission for the current research to take place. Second, to the navy wives for their willingness and collaboration in participating as research respondents. Third, to the doctoral psychology program, Faculty of

Psychology, Universitas Surabaya, for providing support and extensive opportunities for researchers to develop and deepen their expertise in the field of psychology.

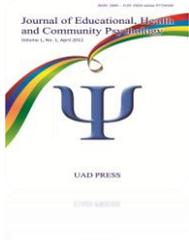
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