



JURNAL PENDIDIKAN KEPERAWATAN INDONESIA

Journal Homepage: <http://ejournal.upi.edu/index.php/JPKI>



Parental Verbal Abuse and Its Association with Emotional Development and Anxiety in Adolescents

Ilya Krisnana^{1*}, Praba Diyan Rachmawati¹, Anita Firmanti Kartika Anggari¹, Domingos Soares²

¹Faculty of Nursing Universitas Airlangga, Surabaya, Indonesia

² Instituto Superior Cristal and Instituto Nacional de Saude Publica de Timor-Leste

*Corresponding email: ilya-k@fkip.unair.ac.id

ABSTRACT

Introduction: Continuous verbal abuse from parents towards children can cause emotional disorders and hinder children development, both physical and psychological development. **Objective:** This study aims to explain the relationship between verbal abuse by parent with the emotional development and level of anxiety among adolescents. **Methods:** The research sampling technique used a simple random sampling, and 282 respondents were obtained as research sample. The independent variable in this study was verbal abuse by parents on adolescents' perspective, while the dependent variable were emotional development and anxiety level among adolescents. The instruments used the verbal abuse questionnaire, Strength and Difficulties Questionnaire (SDQ), and the Depression, Anxiety, and Stress Scale-42 questionnaire (DASS-42). The data was analyzed by using the Spearman rank correlation test with a significance value of $p < 0.05$. **Results:** The result showed that there is a relationship between verbal abuse by parent with emotional development ($p = < .001$) and anxiety levels ($p = < .001$) among adolescents. **Conclusions:** This study reveals a significant link between parental verbal abuse and maladaptive emotional development and increased anxiety in adolescents. The findings highlight the need for early interventions and educational programs promoting positive parenting to prevent verbal abuse and support healthy emotional growth. Positive parenting and healthy parent-child interactions can help ensure that children develop normal emotional regulation and anxiety levels.

ARTICLE INFO

Article History:

Received: April 10st, 2024

Revised: June 19th, 2025

Accepted: June 27th, 2025

First Available Online:

June 29th, 2025

Published: June 30th, 2025

Keywords:

verbal abuse, parents, adolescent, emotional development, anxiety

1. INTRODUCTION

Verbal abuse by parents towards their children is a form of emotional abuse that has a serious impact on the emotional development and anxiety levels of adolescents. Although some studies have examined the relationship between verbal abuse and anxiety in school-aged children (Cahyani et al., 2022), to date, there has been no research specifically investigating the association between parental verbal abuse and emotional development and anxiety in adolescents, especially using validated measurement instruments. Addressing this research gap is essential to gain a more comprehensive and credible understanding of the effects of verbal abuse on adolescents' emotional development.

Cases of verbal abuse by parents towards children occurred at the end of 2023 which resulted in the victims to feel fear and anxiety (Ansa, 2023). Verbal abuse towards children is classified as emotional abuse, characterized by the degrading treatment of children. Such action can continue with neglecting the child's needs, isolating the child from social interactions, or constantly blaming the child (Mahmud, 2020). Children who frequently experience verbal abuse by their parents develop emotional disturbances, such as a negative self-concept (Cahyani et al., 2022). Children will feel unloved, always guilty, and struggle to accept their shortcomings, leading them to become anxious, depressed, and even attempt suicide (Mahmud, 2020). Verbal abuse can also hinder a child's development, both physically and psychologically (Asmah et al., 2023). Children who grow up with parental love have good emotional intelligence, such as being able to recognize and control their own emotions (Aulia, 2023). They manage their feelings appropriately, allowing these emotions to be expressed in a healthy manner. Additionally, they can understand other people's feelings and establish harmonious relationships with others (Nabila, 2020).

According to the Indonesian Child Protection Commission (KPAI), the percentages of parental verbal abuse experienced by children are as follows: 56% scolded, 34% compared to other children, 23% shouted at, 5% insulted, 4% threatened, 4% humiliated, and 3% bullied (KPAI, 2020). Verbal abuse impacts children's social and emotional development, causing delays in 43.2% of cases (Nova & Sari, 2021). Additionally, verbal abuse leads to normal anxiety in 80% of children and clinical anxiety in 20% of children. Data from the Online Information System for the Protection of Women and Children (SIMFONI PPA) for 2023 shows that 4,511 children in Indonesia experienced verbal abuse. The province with the highest number of victims of verbal abuse is East Java with 483 children. Surabaya is the district/city with the highest cases of verbal abuse, at 160 cases. Based on data from the Ministry of Women's Empowerment and Child Protection (KPPPA), it was found that verbal abuse in Indonesia is most often experienced by junior high school students (Kementerian Pemberdayaan Perempuan dan Perlindungan Anak (KPPPA), 2023). A preliminary study conducted at SMPN 45 Surabaya on March 18, 2024 showed that 7 out of 10 students experienced verbal abuse from their parents. Forms of verbal abuse experienced by students include being ignored, shouted at, compared to siblings, threatened and insulted.

Several factors contribute to parents engaging in verbal abuse towards their children, including inappropriate parenting methods, lack of knowledge about child development, experiences of verbal abuse during their own childhood, family dynamics that blame the child, the belief that their parenting approach is the best, and economic difficulties (Mahmud, 2020). All

negative treatment experienced by the child tends to be remembered into adulthood, potentially shaping the child's character and hindering their growth and development (Erniwati & Fitriani, 2020).

The results of previous research show that there is a relationship between parental verbal abuse and anxiety in school-aged children (Averina & Cahyono, 2023). Parental verbal abuse is also related to children's emotional development. Children who experience verbal abuse from their parents will feel worthless and tend to behave aggressively (Fuadah et al., 2023). The more parents do not use verbal abuse against their children, the more adaptive their children's emotional development will be. However, the questionnaire used in this research has not been tested for validity and reliability, so it is not known whether the questionnaire is valid, reliable and suitable for research (Amalia et al., 2023). Therefore, this study aims to fill the knowledge gap regarding the impact of parental verbal abuse on emotional development and anxiety levels in adolescents, using validated instruments and referring to the Parent-Child Interaction theory framework by Kathryn E. Barnard. Healthy child development depends on parents or caregivers responding to signals from children in a loving and reliable manner. This is a preventive health care method that can help avoid behavioral problems as the child grows (Chesnay & Anderson, 2020).

2. METHODS

Research Design

A correlational analysis research design with a cross-sectional approach. Sampling technique was simple random sampling.

Population and Sample

The study was conducted in a Junior High School in Surabaya, Indonesia, primarily in 7th - 9th grade students. The study population comprised 960 students. The inclusion criteria in this study were adolescents who lived in the same house with their parents and interacted with each other. While the exclusion criteria in this study were adolescents who were not present at school at the time of the study and adolescents with special needs. Using Slovin's formula with a 5% margin of error, a sample size of 282 adolescents was obtained. The selection of a 5% margin of error and a 95% confidence level is based on common standards in research, allowing the results to be generalized with an acceptable level of error (Nursalam, 2020). Based on the calculation of sample size formulas, the sample obtained was 282 adolescents. Independent variables in this study was verbal abuse. Dependent variables were emotional development and anxiety level among adolescents.

Instrument

Verbal Abuse Questionnaire

The verbal abuse by parents was measured by using questionnaire created by (Siregar, 2020). This questionnaire has 30 statement items consisting of favorable and unfavourable statements. The criteria for assessing a favorable statement are score 4: Strongly Agree (SS), score 3: Agree (S), score 2: Disagree (TS), and score 1: Strongly Disagree (STS). Meanwhile, the criteria for assessing unfavorable statements are score 1: Strongly Agree (SS), score 2: Agree (S), score 3:

Disagree (TS), and score 4: Strongly Disagree (STS). The final value of the verbal verbal scale, namely that adolescents are declared to have experienced low verbal abuse was: score 24 - 47, moderate verbal abuse was score 48 - 71, high verbal abuse was score 72 – 96.

The researcher chose to use this questionnaire because it corresponds to the parameters that will be measured. In addition, each statement is easy to understand. The validity test results also show that the calculated r value is greater than the table r value (0.361), with a range of 0.643–0.875, indicating that the questionnaire is valid. This means that the instrument is able to measure the intended variables accurately and appropriately. The reliability test results show a Cronbach's Alpha value of 0.970, indicating that the questionnaire is highly reliable. This means that the instrument produces consistent and trustworthy data when used repeatedly under the same conditions (Purwanza et al., 2022).

Emotional Development Questionnaire

The instrument for adolescent emotional development uses the Strength and Difficulties Questionnaire (SDQ questionnaire) (Nazeer et al., 2025). SDQ is a measuring tool used for brief screening related to the behavior and emotions of children and adolescents aged 13-17 years. The researcher chose the SDQ questionnaire because it has been proven that the SDQ is a highly appropriate instrument for screening behavioral and emotional disorders in children. The SDQ can also identify mental health disorders, particularly those related to emotions and behavior in children (Dzulfadhilah et al., 2024).

This questionnaire contains a brief description of the behavior and emotions that constitute the child's strengths and difficulties. The SDQ questionnaire consists of 25 items which are categorized into positive and negative statements. The SDQ has 5 subscales. The four subscales belong to the difficulty subscale group, namely emotional, conduct problems, hyperactivity-inattention, and peer problems. Meanwhile, the fifth subscale belongs to the strength subscale group, namely prosocial. Each subscale consists of 5 items. The SDQ questionnaire's difficulty subscale is divided into favorable and unfavorable statements. The criteria for evaluating a favorable statement are a score of 0: not true, 1: somewhat true, and 2: very true. The criteria for assessing an unfavorable statement are a score of 2: not true, 1: somewhat true, and 0: very true. Meanwhile, the strength subscale assessment criteria are, 0: not true, 1: somewhat true, and 2: very true. The final value of the SDQ scale is that a teenager is said to have normal emotional development: score 0 - 15, borderline: score 16 - 19, abnormal: score 20 – 40 (Kurniawan et al., 2022). This questionnaire has been declared valid and reliable with a Cronbach alpha value of 0.976.

Anxiety Level Questionnaire

The instrument for adolescent anxiety levels used the DASS-42 questionnaire which was developed by Lovibond (1995). The researcher chose to use the DASS-42 questionnaire because it is an internationally recognized standard test that can assess an individual's level of anxiety (Wirawan et al., 2021). The DASS-42 questionnaire consists of 42 statements designed to measure 3 scales, namely depression, anxiety and stress. Each scale consists of 14 statements. The assessment criteria for this questionnaire are a score of 0: never, 1: sometimes, 2: often, and 3: very often. The final DASS scale score for anxiety is normal: 0 – 7, mild anxiety: 8 – 9, moderate

anxiety: 10 – 14, severe anxiety: 15 – 19, and very severe anxiety: > 20. Researchers have tested the validity and reliability of the DASS-42 questionnaire on 30 junior high school students. The validity test results show that the calculated r value > r table (0.361), namely in the range 0.621-0.811 so the questionnaire is said to be valid. The reliability test results show a Cronbach's Alpha value of 0.941 so the questionnaire is said to be very reliable.

Research Procedure

Respondents selected by using lottery from 960 become 282 adolescents. There were 94 respondents of each class (7th, 8th and 9th class). Selected adolescents are given an explanation about the research and are given an informed consent format which must be taken home to be signed by their parents as a sign of approval. Adolescents who have received consent from their parents are asked to fill out a questionnaire according to their individual experiences.

Data Analysis

The data analyzed by using Spearman Rank Correlation with significance level $\alpha=0.05$.

Ethical Clearance

The researcher has conducted a feasibility test and submitted an ethical test to the ethics committee of the Faculty of Nursing, Universitas Airlangga. The researcher received evidence in the form of a certificate with the number 3277-KEPK on 10 June 2024.

3. RESULT

Table 1 shows that the majority of respondents were male, with 145 respondents. Additionally, most respondents were early adolescence. The distribution of respondents across each class range was consistent, with 94 respondents. Most of the respondents' parents, both fathers and mothers, had a history of middle education. Most of the respondents' fathers, 103 worked as private employees. Almost all of the respondents' mothers were housewives. Furthermore, 243 respondents had siblings.

Table 1. Distribution of Respondent Demographic Data (n = 282)

Characteristics	f	%
Gender		
Male	145	51.4
Female	137	48.6
Age Category		
Early adolescence	167	59.2
Middle adolescence	115	40.8
Late adolescence	0	0
Respondent Class		
VII	94	33.3
VIII	94	33.3
IX	94	33.3
Father's Education		
Basic education	76	27
Middle education	170	60.3
Higher education	36	12.8

Table 1. Distribution of Respondent Demographic Data (n = 282) (Continued)

Characteristics	f	%
Mother's Education		
Basic education	106	37.6
Middle education	145	51.4
Higher education	31	11
Father's Job		
Doesn't work	5	1.8
Factory workers	4	1.4
Trader	18	6.4
Driver	17	6
Construction laborers	15	5.3
Self-employed	40	14.2
Private sector employee	103	36.5
PNS/TNI/POLRI	22	7.9
Other	58	20.5
Mother's Job		
Housewife	233	82.6
Factory workers	5	1.8
Trader	22	7.8
Private sector employee	16	5.7
Teacher	2	0.7
Salon employees	2	0.7
Sales	2	0.7
Having Siblings		
Yes	243	86.8
No	39	13.8

Table 2. Frequency Distribution of Parental Verbal Abuse and Emotional Development (n = 282)

Variable	Category	f	%
Parental Verbal Abuse	Low	157	55
	Moderate	114	40.4
	High	11	5.9
	Total	282	100
Emotional Development	Normal	167	59.9
	Borderline	94	33.3
	Abnormal	21	7.4
	Total	282	100

Table 2 shows that the majority of respondents experienced low levels of parental verbal abuse, with 157 reporting this. This is, followed by moderate levels of parental verbal abuse, experienced by 114 respondents, and the least, high levels of parental verbal abuse, experienced by 11 respondents. These results indicate that respondents received different treatment of verbal abuse from their parents. However, not all respondents experienced high levels of verbal abuse from their parents. The majority of respondents were often blamed by their parents even though it was not their fault. Additionally, many respondents experienced inappropriate treatment from their parents, such as having their abilities underestimated, being threatened over unsatisfactory grades, and being scolded without apparent reason.

Based on table 2, it is also known that the majority of respondents have normal emotional development, with 167 respondents in this category. There were 94 respondents who experienced emotional development at the borderline level, and 21 respondents experienced abnormal emotional development.

Table 3. Distribution of Adolescents Emotional Development Parameters and Anxiety Levels (n = 282)

Variable	Parameter	Category	f	%
Emotional Development	Emotional Problems	Normal	137	48.6
		<i>Borderline</i>	43	15.2
		Abnormal	102	36.2
		Total	282	100
	Behavior Problems	Normal	163	57.8
		<i>Borderline</i>	60	21.3
		Abnormal	59	20.9
		Total	282	100
	Hyperactivity	Normal	198	70.2
		<i>Borderline</i>	45	16
		Abnormal	39	13.8
		Total	282	100
	Peer Problems	Normal	171	60.6
		<i>Borderline</i>	81	28.7
		Abnormal	30	10.6
		Total	282	100
	Prosocial Behavior	Normal	248	88
		<i>Borderlines</i>	17	6
		Abnormal	17	6
		Total	282	100
Anxiety Level		Normal	47	16.7
		Mild	22	7.8
		Moderate	60	21.3
		Severe	50	17.7
		Very Severe	103	36.5
		Total	282	100

Based on table 3, it is known that in terms of emotional problem parameters, the majority of respondents experienced normal emotions, with 137 respondents. However, there were also 120 respondents who experienced abnormal emotional problems. Regarding behavioral problem parameters, the majority of respondents had normal behavior, with 163 respondents. For hyperactivity parameters, the majority of respondents, totaling 198 individuals, experienced normal hyperactivity. In terms of peer problem parameters, most respondents also had normal peer-related issues, with 171 respondents. Additionally, almost all respondents, totaling 248 individuals, showed normal prosocial behavior.

Based on table 3, it is also known that the majority of respondents experienced very severe levels of anxiety, with 103 respondents. Many respondents experienced psychological symptoms, such as excessive anxiety. However, only a few respondents showed physical symptoms, including dry mouth, rapid breathing, sweating, fatigue despite not engaging in strenuous activities, difficulty swallowing, trembling, and increased heart rate without exercise or other heavy physical activity. Then 60 respondents experienced moderate anxiety, 50 respondents experienced severe

anxiety, 47 respondents experienced normal anxiety, and 22 respondents experienced mild anxiety. The anxiety level variable includes 2 parameters: physical and psychological symptoms. In this study, the majority of respondents experienced psychological symptoms, specifically excessive anxiety. However, many respondents also experienced physical symptoms, such as sweating, even though it was not related to exercise or other strenuous activities.

Table 4. Parental Verbal Abuse with Emotional Development in Adolescents and Parental Verbal Abuse with Anxiety Levels in Adolescents

		Adolescents Emotional Development						Total	
		Normal		Borderline		Abnormal			
		f	%	f	%	f	%	f	%
Parental Verbal Abuse	Low	133	47.2	24	8.5	0	0	157	55.7
	Moderate	34	12.1	70	24.8	10	3.5	114	40.4
	High	0	0	0	0	11	3.9	11	3.9
Total		167	59.2	94	33.3	21	7.4	282	100
		p value = <.001				r = .627			
		Parental Verbal Abuse						Total	
		Low		Moderate		High			
		f	%	f	%	f	%	f	%
Adolescents Anxiety Levels	Normal	32	11.3	14	5	1	0.4	47	16.7
	Mild	19	6.7	3	1.1	0	0	22	7.8
	Moderate	44	15.6	16	5.7	0	0	60	21.3
	Severe	22	7.8	27	9.6	1	0.4	50	17.7
	Very severe	40	14.2	54	19.1	9	3.2	103	36.5
Total		157	55.7	114	40.4	11	3.9	282	100
		p value =<.001				r = .341			

Table 4 shows that the majority of respondents experienced low levels of parental verbal abuse and normal emotional development, with 133 respondents. Meanwhile, 70 respondents experienced moderate parental verbal abuse and borderline emotional development. Additionally, 11 respondents experienced high levels of parental verbal abuse and abnormal emotional development.

The results of the Spearman rho test indicate a significance value of <.001, which means there is a significant relationship between parental verbal abuse and emotional development. The correlation coefficient (r) is .627, indicating a strong relationship between the two variables. The direction of the relationship is positive, meaning that the lower parental verbal abuse, the more normal the emotional development in adolescents.

Table 4 also shows that the majority of respondents experienced moderate verbal abuse with very severe levels of anxiety, with 54 respondents. Meanwhile, none of the respondents experienced high levels of parental verbal abuse with mild levels of anxiety, and there were no respondents who experienced high levels of parental verbal abuse with moderate levels of anxiety. The results of the Spearman rho test show a significance value of 0.000 ($p < 0.05$), which means that there is a significant relationship between parental verbal abuse and anxiety levels. This correlation coefficient (r) is 0.341, indicating a fairly strong relationship. The direction of the relationship is positive, meaning that the milder parental verbal abuse, the lower the level of anxiety in adolescents.

4. DISCUSSION

Correlation between Parental Verbal Abuse and Emotional Development in Adolescents

The results of this study show that there is a significant and strong relationship between parental verbal abuse and emotional development in adolescents. Based on the positive direction of the correlation, this research shows that the milder the verbal abuse received from parents, the more normal the emotional development of adolescents will be. In this study it was found that the majority of respondents experienced low levels of parental verbal abuse with normal emotional development. However, there were also several respondents who experienced low and moderate parental verbal abuse with borderline emotional development. There were also respondents who received moderate and high levels of verbal abuse with abnormal emotional development.

Based on the research results found, researchers are of the opinion that the emotional development of adolescent in this study is not only influenced by parental verbal abuse. Such as the results of respondents who experienced moderate levels of parental verbal abuse had abnormal emotional development. Researchers are of the opinion that abnormal emotional development in adolescents occurs not only because of parental verbal abuse. However, it can also be influenced by other factors, such as unstable emotions, physical changes, changes in interactions with peers, or changes in interactions with school and the environment. Early adolescents also still find it difficult to control their emotions, so they become more easily angry and anxious (Siregar, 2020). Apart from that, poor interactions with peers can also affect adolescents' emotional development, such as bullying (Devi Juniawati & Zaly, 2021).

Correlation between Parental Verbal Abuse and Anxiety Levels in Adolescents

This research shows that parental verbal abuse has a significant and quite strong correlation with anxiety levels in adolescents. Based on the positive direction of the correlation, the lower the verbal abuse that children receive from their parents, the more normal the anxiety experienced by adolescent. In this study it was also found that there were respondents with low and moderate levels of parental verbal abuse who experienced very severe levels of anxiety.

The results of this study are in line with previous research which explains that there is a relationship between parental verbal abuse and anxiety in school-aged children (Averina & Cahyono, 2023). If a child experiences continuous verbal abuse, the child will feel unneeded, unloved, always feel guilty, and find it difficult to accept his shortcomings, so the child will feel anxious, depressed, and even try to commit suicide (Mahmud, 2020). The results of this research are in line with the Parent-Child Interaction Theory by Kathryn E. Barnard (1994) which explains that anxiety, which is a form of child temperament, depends on the parenting style factors applied by parents. Temperament is a form of typical behavior or a person's mood in responding to certain situations or stimuli. A loving parenting style is one way to ensure that a child's temperament is always in good condition. Good parent-child interaction will form a strong relationship and can reduce temperament problems in children (Rachmawati et al., 2021).

Several research results show that there are respondents who experience high levels of parental verbal abuse, but experience low levels of anxiety. Researchers are of the opinion that this can happen because a person's mental resilience and coping are different. Adolescent with positive coping can overcome this anxiety by participating in extracurricular activities at school as

a means of recreation and channeling their interests and talents. Researchers also believe that this low level of anxiety can occur because respondents do not know that they have experienced verbal abuse by their parents, so they forget the incident more quickly. This is in line with research by (Awal et al., 2022) which explains that children are often unaware that they have received verbal abuse from their parents, so they assume everything their parents say is true.

The results of this research also show that there are quite a lot of respondents who experience very severe anxiety. Researchers assume that the anxiety that occurs in respondents may not only be due to verbal abuse from parents, but also due to school assignments, exams, demands for grades, and bullying from peers. The research was conducted on junior high school students, so it does not rule out the possibility that respondents also experienced bullying from school friends. Class VII students are still adapting to changes in the environment from elementary school to junior high school. Activities and tasks are also increasing. Then, class IX students are preparing for the graduation exam. Educational background can also cause anxiety (Hidaayah et al., 2024).

Limitations of the Study

Limitations refer to the shortcomings or obstacles encountered during the research process. This study could not distinguish between the effects of parental verbal abuse and bullying by others, so some respondents experiencing abnormal emotional development and anxiety may not have been affected solely by parental verbal abuse. Additionally, some respondents with low levels of verbal abuse still experienced severe anxiety, making the exact causes unclear. However, the researcher has provided explanations of several background factors that might contribute to these outcomes. The questionnaire data collection was subjective and allowed respondents to potentially view others' answers or discuss with friends, which might have affected the accuracy of responses. To minimize this, supervision was conducted during questionnaire completion, and respondents were reminded that there are no right or wrong answers and encouraged to answer honestly. Furthermore, data collection occurred over several days due to limited space, allowing prospective respondents to ask those who had already completed the questionnaire, possibly leading to prepared answers that do not reflect their true conditions. To reduce this risk, respondents were instructed not to share information with others.

5. CONCLUSION

This study demonstrates a significant relationship between parental verbal abuse and maladaptive emotional development as well as increased anxiety levels in adolescents. The findings indicate that parental verbal abuse can negatively affect emotional development and anxiety levels in adolescents. This confirms that verbal abuse not only has short-term effects but can also disrupt adolescents' overall mental health. The practical implication of these findings is the importance of implementing early interventions focused on preventing verbal abuse within families, as well as developing educational programs for parents about positive parenting practices and the negative impact of verbal abuse on children's emotional development. Positive parenting and healthy parent-child interactions can help ensure that children develop normal emotional regulation and anxiety levels. Such programs can raise parental awareness and reduce verbal abuse practices, thereby supporting healthy emotional growth in adolescents. This research is highly

relevant to public health services as it highlights the need to integrate verbal abuse prevention approaches into child and adolescent mental health policies. Therefore, the study's results can serve as a foundation for developing more comprehensive public health strategies to promote adolescents' psychosocial well-being and prevent ongoing mental health disorders.

6. ACKNOWLEDGEMENT

Thank you for all respondent

7. CONFLICT OF INTEREST

None

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