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Resilience, Social Support, and Parenting Self-Efficacy: Insights from Young Mothers Married as Children

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Abstract

Child marriage represents a significant social concern with persistent consequences for the well-being of women and children. It adversely influences young mothers' quality of life and their parenting practices, particularly their confidence and readiness to fulfill parental responsibilities effectively. However, limited research has systematically examined how resilience and distinct types of social support influence parenting self-efficacy (PSE) among this vulnerable population. This study aims to examine the distinct and combined contributions of resilience and social support to PSE, systematically comparing the effects of each support type on PSE among young mothers who have experienced child marriage. Furthermore, it explores how demographic factors, including marital status and reasons for marriage, are associated with variations in PSE. A cross-sectional design with purposive sampling was employed, with a sample of 110 young mothers who experience child marriage. Structured questionnaires were administered, including demographic items, the Early Intervention Parenting Self-Efficacy Scale, the Connor-Davidson Resilience Scale, and the Social Provisions Scale. Multiple regression analysis, including Analysis of Variance (ANOVA) and Multidimensional Scaling (MDS), was conducted to assess the factors influencing PSE. The results indicate that resilience and social support significantly predict PSE (R^2 = .630, $p < .01$), with social support emerging as the strongest predictor. These findings suggest that enhancing resilience and social support for young mothers can substantially improve their parenting efficacy.

INTRODUCTION

Child marriage remains a significant global concern, with Indonesia standing out for its particularly high prevalence. Despite the enactment of the 2019 Indonesian Marriage Law, which raised the minimum legal age for marriage to 19 years, the incidence of child marriage and pregnancy remains high (Aparicio et al., 2015; Kuswanto et al., 2024). Indonesia consistently reports higher child marriage rates than its neighboring countries in the Association of Southeast Asian Nations (ASEAN), ranking among the highest in Southeast Asia and placing eighth globally (Ratnaningsih et al., 2022). The provinces of West, East, and Central Java are the primary contributors to these statistics, with Indramayu Regency in West Java experiencing a notable increase in reported cases from 274 in 2020 to 440 in 2022 (Badan Pusat Statistik Provinsi Jawa Barat, 2024). Nevertheless, within the realm of psychology, particularly

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cognitive, the high prevalence of child marriage in Indonesia is deeply concerning due to its profound impact on cognitive development and mental health.

From a psychological perspective, early marriage is associated with adverse outcomes in cognitive development and mental health. It correlates with higher rates of depression, anxiety, and reduced well-being (Alizamar et al., 2018; Putriani et al., 2021). Socially, child marriage perpetuates poverty cycles by limiting educational and employment opportunities, thereby reinforcing intergenerational disadvantage and restricting social mobility (Umumararungu & Bazubagira, 2023). Physically, early married adolescence faces a fivefold increased risk of mortality during childbirth and are more susceptible to complications such as miscarriage, obstetric fistula, preterm labor, low birth weight, and sexually transmitted infections exacerbated by underdeveloped reproductive systems and inadequate access to healthcare services (Chaudhary et al., 2022; Chill et al., 2021; Datta et al., 2022).

Adolescents as young mothers often lack the experience, knowledge, and social support necessary for effective parenting, and negatively impact both maternal well-being and child development (Hoseini et al., 2023; Zheng & Gao, 2023), further hindering their ability to nurture their children's healthy growth (Aggarwal et al., 2023; Flaherty & Sadler, 2022; Fontoura-Matias et al., 2024). Although they have grown up in a digital era and may have access to online resources (Situmorang et al., 2023), disparities in digital literacy and limited social support often prevent them from fully utilizing available information (Candrasari et al., 2022; Ifdil et al., 2023; Singh, 2017). Consequently, their parenting experiences and efficacy are shaped not only by the challenges of early marriage but also by restricted access to technology and supportive networks.

A limited understanding of effective parenting can undermine parents' self-efficacy. Parenting self-efficacy (PSE), defined as a parent's confidence in their ability to positively influence their child's behavior and development (Vance & Brandon, 2017), is a crucial determinant of parenting quality. Higher levels of PSE are associated with improved emotional well-being, stronger parent-child relationships, and more effective parenting practices (Fang et al., 2021). In contrast, low PSE correlates with elevated parental stress, depression, and negative child outcomes, including behavioral issues and developmental delays (Albanese et al., 2019; Jiang et al., 2022; Li et al., 2024; Weaver et al., 2008). PSE is influenced by both internal factors, such as parental psychological well-being, stress, depressive symptoms, and resilience; and external factors, including social support from partners, family, and friends, the quality of marital relationships, and child characteristics (Fang et al., 2021; Ifdil et al., 2023; Scannell, 2021; Slomian et al., 2019). Despite extensive research on PSE's associations with negative outcomes, the role of resilience in promoting and sustaining PSE, particularly among young mothers who married early, remains underexplored. Moreover, the underlying mechanisms that promote or sustain high levels of PSE in high-risk populations have received limited attention (Gavidia-payne et al., 2015; Nour, 2006; Reiss, 2021). A deeper understanding of these processes is crucial for effectively supporting vulnerable groups facing psychosocial stress and limited parenting resources. Therefore, further research is needed to comprehensively examine the complex interactions between internal and external factors that shape PSE within this population.

Resilience, known as internal factor, that conceptualized as a dynamic process which enables individuals to adapt, manage, and recover from adversity, reflects emotional strength and effective coping mechanisms and maintain well-being under stress (Shastri, 2013; Sisto et al., 2019; Suranata et al., 2017), has gained recognition as a crucial psychological resource supporting parental confidence and effective caregiving (Masten & Barnes, 2018; Ungar, 2021). Recent research highlights resilience as a key factor in sustaining maternal self-efficacy through enhanced coping and emotional regulation (Leerkes et al., 2016). Resilience interacts synergistically with social support to buffer stress and promote parenting competence in

vulnerable populations (Shang et al., 2022). However, despite the recognized importance of resilience in overcoming parenting challenges, research specifically measuring resilience in young mothers affected by child marriage, and elucidating its mechanisms in conjunction with social support, remains limited. Consequently, future research is essential to specifically measuring as well as systematically examine both the individual and combined contributions of resilience and social support to PSE within the specific context of child marriage.

Social support is consistently identified as a protective factor for young mothers who marry early, facilitating their navigation of parenting demands (Angley et al., 2015; Jolly et al., 2020; Leahy-Warren et al., 2011). Social support includes emotional support (reassurance and empathy), instrumental support (tangible assistance), and informational support (guidance and knowledge). However, most studies assess social support as a unidimensional composite measure that combined score aggregating multiple support types into a single index in which obscures the distinct contributions of each support type (Bäckström et al., 2017; Chen et al., 2015; Leahy-Warren et al., 2011; Letourneau et al., 2004; SmithBattle, 2013). This limit understanding of which specific forms of support most strongly influence PSE. Several scholars have emphasized the need for research that disaggregates these support types to clarify each individual effect (Bäckström et al., 2017; Leahy-Warren et al., 2011; Letourneau et al., 2004).

Rationale of the Study

While considerable research has documented the effects of early marriage on young mothers' well-being, gaps remain in understanding how psychological resilience and distinct types of social support uniquely contribute to parenting self-efficacy. Specifically, there is limited insight into the mechanisms through which resilience operates and the differential impacts of emotional, instrumental, and informational support on PSE among this population.

The present study employs a cross-sectional survey design to examine the distinct contributions of resilience and social support, as well as their combined effects, on PSE. It systematically analyzes the individual and joint impacts of resilience and various types of social support on PSE, including a comparative assessment of the effects of each support type. Furthermore, the study aims to provide comprehensive insights into the psychosocial factors shaping PSE among young mothers who have experienced child marriage, considering demographic characteristics such as marital status and reasons for marriage.

METHOD

Study Design and Setting

This study employed a cross-sectional, descriptive-analytical design to explore the relationships of resilience, social support, and PSE among young mother married as children in Indramayu Regency, West Java, Indonesia, a region recognized for its high child marriage prevalence (Badan Pusat Statistik Provinsi Jawa Barat, 2024). The design was chosen to provide a comprehensive, time-specific assessment of psychological and social factors affecting young mothers who experienced child marriage, without requiring longitudinal data collection. This approach aligns with recommendations for assessing psychosocial variables in vulnerable populations at a single point in time (Levin, 2006).

Sampling and Participants

The population in this study consisted of young mothers married as children. Participants were 110 young mothers, purposively sampled based on criteria: married before age 19, having at least one child, and aged 24 years or younger at the time of participation. Exclusion criteria included psychological instability or inability to complete the instrument. Purposive sampling was deemed suitable for targeting hard-to-reach populations within defined research constraints (Etikan et al., 2016). Moreover, the maximum participant age of 24 was set to ensure inclusion

of mothers who had completed the first 1,000 days of parenting, a period critical for child development. However, age of 24 is also considered as early maternal experiences while still within the developmental stage of early adulthood (Sawyer et al., 2018; World Health Organization, 2014). Reporting from collected data, most respondents had junior high education and were unemployed, reflecting socioeconomic challenges. Detailed demographic data are presented in Table 2.

Instruments

Demographic Information Questionnaire

A structured demographic questionnaire was developed to collect data on maternal characteristics and socio-demographic background. Key variables included maternal age at the time of data collection, age at marriage, age of children, marital status, educational attainment, and employment status. The questionnaire also explored participants' reasons for marriage (e.g., long-term relationship, personal desire, parental encouragement, unplanned marriage, desire for leaving parental house, and economic reasons) and primary sources of parenting information (e.g., family, friends, social media). The use of a comprehensive demographic tool is consistent with best practices for contextualizing psychosocial research (Call et al., 2022).

Parenting Self-Efficacy

PSE was assessed using a modified version of the Early Intervention Parenting Self-Efficacy Scale (EIPSES; Guimond et al., 2008). Grounded in Bandura's self-efficacy theory (Bandura, 1997), the original EIPSES comprises 16 items measuring two primary dimensions: parent outcome expectation, which refers to the belief that one's parenting efforts positively influence the child's development; and parent competence, which denotes confidence in one's ability to effectively perform parenting tasks. Following item discrimination analysis, two items were removed, resulting in a 14-item scale with strong internal consistency (Cronbach's α = 0.92). Sample items include*: Jika anak saya memiliki masalah, saya dapat memikirkan beberapa cara untuk membantu anak saya* ("If my child has a problem, I can think of several ways to help my child") and *Setiap hari saya dapat mengatasi peran dan tantangan dalam menjadi orangtua* ("Every day, I am able to manage the roles and challenges of being a parent") representing parent competence; and *Ketika anak saya menunjukkan kemajuan, itu karena pengasuhan saya berhasil pada perkembangan anak saya* ("When my child shows progress, it is because my parenting efforts have successfully supported my child's development") representing parent outcome expectation. The EIPSES is a validated instrument widely used in early parenting research (Bloomfield & Kendall, 2012).

Resilience

Resilience was defined as the psychological capacity to effectively cope with and recover from adversity, trauma, or significant stress. The study assessed resilience using an adapted version of the Connor-Davidson Resilience Scale (CD-RISC), originally developed by Connor and Davidson (2003). The CD-RISC assesses five key dimensions: trust in one's instincts, tolerance of negative affect and stress-buffering effects, positive acceptance of change and secure relationships, control, and spiritual influences. Following item analysis, two items were removed, resulting in a 23-item scale with strong reliability (Cronbach's α = 0.88). Sample items include: *Saya mampu beradaptasi dengan perubahan* ("I am able to adapt to changes"), *Saya cenderung bangkit kembali setelah mengalami sakit atau kesulitan* ("I tend to bounce back after illness or hardship"), and *Saya mengetahui kapan harus meminta bantuan* ("I know when to ask for help"). These items capture core aspects of resilience, such as adaptability, emotional recovery, and the ability to seek support when necessary.

Social Supports

Social support was conceptualized as the perception of available assistance from others, fostering a sense of belonging and value. This construct was measured using an adapted version of the Social Provisions Scale (SPS) by Cutrona and Russell (1987)), grounded in Weiss's theory of social provisions (see Apriningsih, 2022). The SPS evaluates six fundamental aspects of social support: attachment (emotional closeness and security), social integration (a sense of belonging within a group), opportunity for nurture (feeling needed by others), reassurance of worth (recognition of one's competence), guidance (availability of reliable advice), and reliable alliance (assurance of tangible support in times of need). Following item analysis, 5 items were removed from 24-item the original scale to 19 items, achieving a reliability coefficient of 0.88. Sample items include: *Ada orang yang dapat saya andalkan untuk membantu saya saat saya membutuhkan* ("There is someone I can count on to help me when I need it") representing reliable alliance; *Saya merasa menjadi bagian dari sekelompok orang yang memiliki sikap dan keyakinan yang sama dengan saya* ("I feel like I am part of a group of people who share attitudes and beliefs similar to mine") representing social integration; and *Ada orang yang bisa saya andalkan dalam keadaan darurat* ("There is someone I can rely on in case of an emergency") also representing reliable alliance.

Data Analysis

Data were analyzed using multiple regression analysis with SPSS software. Preliminary analyses included item discrimination, reliability assessments, and normality tests to ensure the validity and reliability of the measurement instruments and to confirm that the data met the necessary statistical assumptions. An ANOVA was conducted to examine differences in PSE based on primary sources of support and reasons for marriage. Additionally, multidimensional scaling (MDS) was used to visualize the distribution of individuals by marital status and its relationship to resilience, social support, and PSE. These statistical approaches provided a comprehensive understanding of the factors influencing PSE.

Ethical Considerations

This study received ethical approval from the Ethics Committee of the Faculty of Medicine of Universitas Gunadarma (003.ex/EA/KEPK-UG/I/2023). All participants were fully informed about the study's purpose and were assured of their right to withdraw at any time without consequence. Confidentiality and the voluntary nature of participation were emphasized to protect participants' rights and well-being.

RESULTS AND DISCUSSION

Results

From a demographic perspective, Table 1 presents the characteristics of 110 respondents. Most participants were married (80%), and the majority of mothers were aged between 22–24 years (69.1%). The age at marriage was predominantly 17 years (48.2%), followed by 18 years (40%), and less than 17 years (11.8%). More than half of the children were under 3 years old (55.5%). In terms of education, most respondents had completed junior high school (60%), while a smaller proportion had reached senior high school (36%) or only primary school (4%). Regarding employment, 70% were unemployed. The most common reasons for marriage included a personal desire to get married (26.4%), sustained relationship (17.3%), and unplanned or unintended marriages (14.5%). Other notable reasons were wanting to leave their parents' house (14.5%) and economic pressures from parents (10.9%). Regarding sources of parenting information, the majority relied on family (71.8%), followed by social media (23.6%), with friends playing a minor role (4.5%).

Table 1. Demographic Characteristics of Participants (n = 110)

Variable	Frequency	Percentage (%)
Marital Status		
Married	88	80
Not married / Single Parent	22	20
Age of Mother		
19-21	32	29.1
22-24	78	69.1
Age of Marriage		
<17	13	11.8
17	53	48.2
18	44	40
Age of Child		
<3 years	61	55.5
>3 years	49	44.5
Education		
Primary School	4	4
Junior High School	66	60
Senior High School	40	36
Job		
Work	25	30
Unemployment	84	70
Reasons for Marriage		
Long-term relationships	19	17.3
Personal intention to marry	29	26.4
Having received a formal marriage proposal	5	4.5
Parental encouragement	13	11.8
Unplanned or unintended marriages	16	14.5
The desire to leave the parental home	15	14.5
Parents' economic factors	12	10.9
Information about Parenting		
Family	79	71.8
Friend	5	4.5
Social media	26	23.6

Table 2 presents the results of the regression analysis examining the effects of resilience and social support on PSE. The standardized beta coefficients show that both resilience ($\beta = 0.386$, $p < 0.001$) and social support ($\beta = 0.552$, $p < 0.001$) have a statistically significant positive effect on PSE. The F-test yields a value of 91.05 with a significance level of $p < 0.001$, indicating a significant joint contribution of these two predictors. The model's R value of 0.794 and R^2 of 0.630 demonstrate that resilience and social support together explain 63% of the variance PSE among young mothers who married early. This highlights the substantial role of these psychological and social resources in shaping PSE.

Table 2. Regression Results of Resilience and Social Support on PSE

Predictor	β	*F*	*p*	*R*	*R²*
Resilience	0.386	-	< .001	-	-
Social Support	0.552	-	< .001	-	-
Joint Effect (Resilience + Social Support)	-	91.05	< .001	.794	.630

The multidimensional scaling (MDS) plot (Figure 1) visually represents the relationships among marital status, social support, PSE, and resilience. In this figure, different symbols denote participant groups: circles represent married individuals, while crosses indicate single parents. Lines connecting points illustrate the relative proximity or similarity in psychosocial profiles based on measured variables. The axes reflect composite dimensions derived from

social support and resilience indicators, with closer points indicating greater similarity. This visualization complements statistical analyses by illustrating the complex interplay between social support, resilience, PSE across different marital contexts.

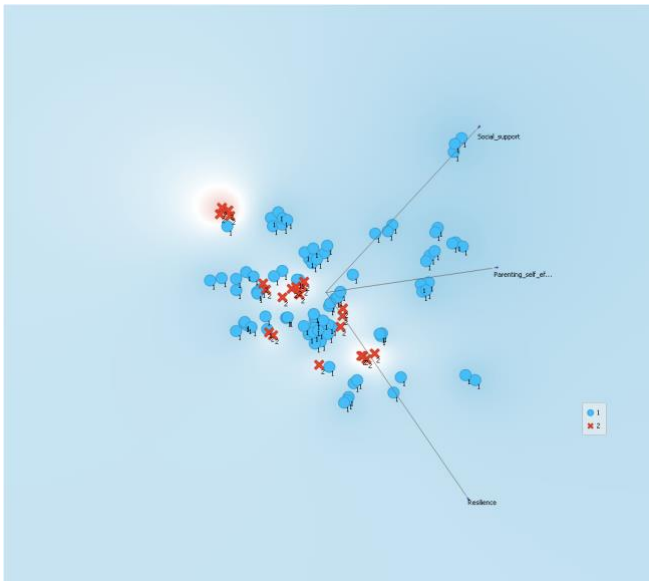
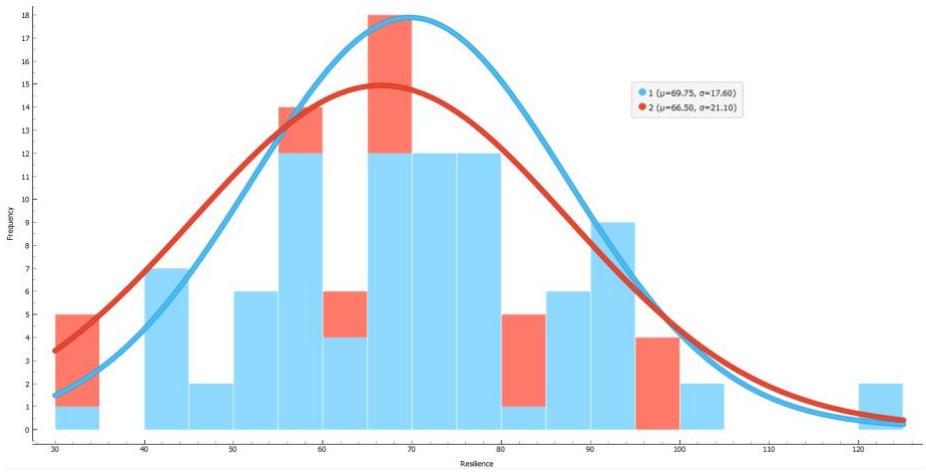


Figure 1. Mapping the Relationship between Marital Status, Social Support, PSE, and Resilience

Further analysis of social support dimensions, as shown in Table 3, revealed that reliable alliance (43.6%) and guidance (41.6%) were the most influential in enhancing PSE among young mothers married as children.

Table 3. Social Support Contribution

Aspect	**β**	**Sig.**
Attachment	.044	.670
Social Integration	-.091	.360
Opportunity for Nurture	-.112	.183
Reassurance of Worth	.200	.026
Guidance	.416	.000
Reliable Alliance	.436	.000



Note: 1 = Married; 2 = Single Parent

Figure 2. Women's Resilience Based on Marital Status

Descriptive analysis provided additional insight into resilience and PSE. Figure 2 illustrates the distribution of resilience by marital status: married women had a mean resilience score of 69.75 (SD = 17.60), while single parents had a mean of 66.50 (SD = 21.10). The wider distribution among single parents indicates greater variability in resilience levels within this group.

Figure 3 highlights reasons for marriage with the highest average PSE scores, notably "Parents' economic factors" (mean = 46.42, SD = 10.6), "Desire to leave the parental home" (mean = 35.81, SD = 4.2), and "Long-term relationship" (mean = 46.97, SD = 9.6). Figure 4 compares PSE based on the main source of support from family, friends, and social media. ANOVA results (F = 0.340, p = 0.713) indicated no significant differences among the groups, suggesting that the primary source of support did not substantially affect PSE. Although the highest mean PSE was observed among those relying on social media (mean = 42.73, SD = 7.6), followed by family (mean = 42.32, SD = 9.2), and the lowest among those relying on friends (mean = 39.20, SD = 3.9), these differences were not statistically significant.

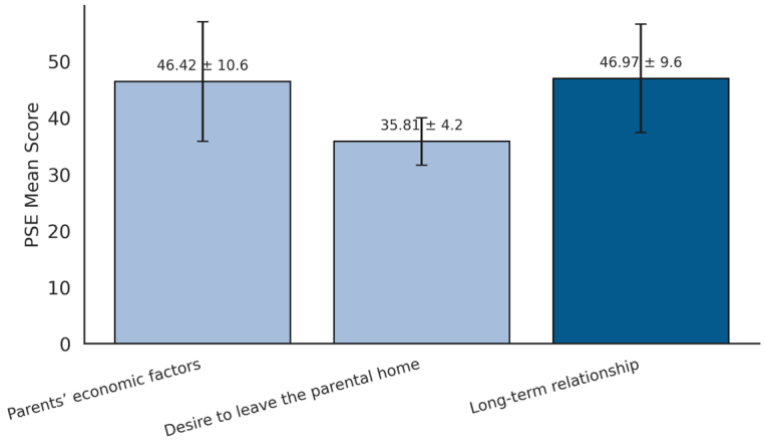


Figure 3. The Differences in PSE Based on Reasons for Marriage

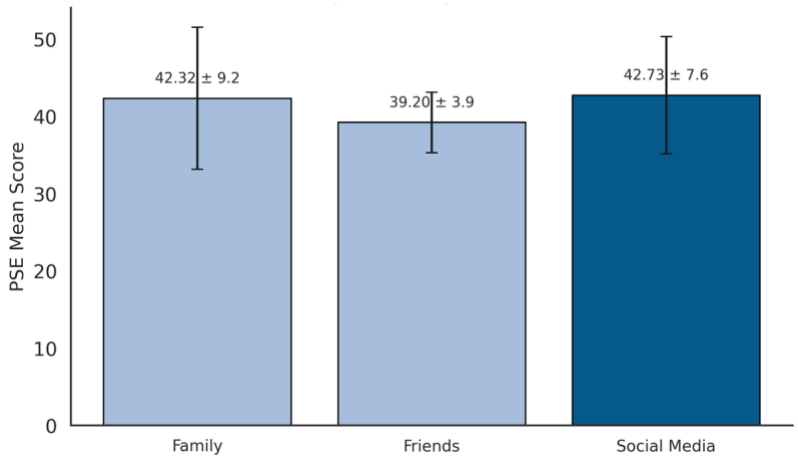


Figure 4. The Comparisons of PSE Based on Primary Source of Support

Discussion

This study provides important insights into the complex interplay between resilience, social support, and PSE among young mothers who were married as children thus this study sought to elucidate the role of resilience in helping young mothers overcome parenting challenges and to identify which forms of social support most effectively enhance PSE. The

findings not only supported the research framework but also make a significant contribution by contextualizing these relationships within the unique socio-cultural and economic landscape of Indonesia. The results robustly demonstrate that both resilience and social support are critical predictors of PSE, with social support emerging as the most influential factor. The regression analysis revealed that social support explained more variance in PSE than resilience, accounting together for 63% of the variance. This finding is consistent with a growing body of research indicating that external resources, particularly social support, are essential for fostering parenting confidence and competence, especially among young or vulnerable mothers (Hong & Liu, 2019; Leahy-Warren et al., 2011; Park & Lee, 2022). Social support not only provides practical help and emotional reassurance but also serves as a buffer against the psychological stressors associated with early motherhood and economic insecurity (Deepak & Annalakshmi, 2022; Rees et al., 2023).

The respondents in this study are predominantly late adolescents, with an average age of 20 years, characterized by low educational attainment and a high degree of economic dependence. This demographic profile situates them within a vulnerable group facing considerable parenting challenges, as they simultaneously manage the responsibilities of early motherhood and the ongoing process of personal identity formation (Maree, 2021; Syed & McLean, 2017). Most participants have completed only junior high school, indicating limited formal education, which likely restricts their understanding of child development and effective parenting strategies. Empirical evidence robustly associates low maternal education and economic hardship with adverse child developmental outcomes and diminished PSE (Arbelia & Riany, 2022; Huynh et al., 2021). Moreover, the average age of respondents' children that are between two and three years old, represents a critical developmental window marked by rapid social, emotional, and motor skill acquisition. Supporting children through these milestones requires adequate knowledge and resources, which young mothers with limited education may struggle to access or apply effectively, underscoring the importance of targeted support and education during this formative period.

In addition to educational limitations, most respondents reported unemployment and financial reliance on partners or family members, conditions that exacerbate psychological stress and anxiety. Economic dependence not only constrains access to vital resources such as healthcare, nutrition, and educational opportunities but also potentially undermines maternal self-confidence and, by extension, the quality of caregiving provided. The study's digital context reveals that all participants had access to the Internet and social media platforms, presenting valuable avenues for acquiring parenting information and social support. However, the benefits of digital access hinge critically on digital literacy, which enables users to evaluate the credibility of information and engage constructively within online support networks. Prior research highlights that social media can facilitate rapid dissemination of parenting knowledge and foster supportive communities (Farsi, 2021; Rolls et al., 2016), complementing the direct emotional and instrumental support traditionally provided by family and friends. This dual access to digital and interpersonal support may explain the observed similarity in parenting self-efficacy levels across different primary sources of support among the participants. Therefore, digital interventions, designed with cultural sensitivity and scalability in mind, hold significant promise for enhancing parenting knowledge and PSE among young mothers facing similar socioeconomic and educational constraints.

The stress and social support theory suggests that an individual's ability to cope with stress and maintain psychological resilience is largely influenced by the presence and quality of social support, which acts as a protective buffer against adverse effects (Bekiros et al., 2022). This theory emphasizes that stable emotional and economic support can mitigate stress, thereby enhancing resilience, whereas insufficient support increases vulnerability and variability in coping capacity. Consistent with this framework, the analysis of resilience by marital status

(Figure 2) reveals that married women, who generally have more reliable emotional and financial support, demonstrate greater resilience's stability. In contrast, single parents face elevated stress levels and exhibit more fluctuation in resilience, reflecting the challenges associated with limited social and economic resources. However, the observation that some single parents maintain high resilience indicates that resilience is shaped by a dynamic interplay of individual characteristics and environmental factors (Taylor & Conger, 2017). These findings underscore the importance of considering both social support systems and personal coping mechanisms in efforts to promote resilience among vulnerable groups.

Consistent with previous research, this study confirms that PSE is shaped by both internal (resilience) and external (social support) factors (Fang et al., 2021). Although resilience in this study, while a somewhat less powerful predictor than social support, remains a crucial internal resource. Resilient mothers are better able to adapt to adversity, maintain a positive outlook, and persevere through the challenges of parenting under difficult circumstances (Aivalioti & Pezirkianidis, 2020; Ergin et al., 2023; Whiting et al., 2019). Resilience acts as a buffer, enabling young mothers to perceive challenges as opportunities for growth rather than obstacles (Mohan & Kulkarni, 2018; Shrotriya, 2023; Wijayanti et al., 2024). This adaptability fosters confidence in navigating the complexities of parenting, especially in the context of early marriage, limited education, and economic hardship (Aivalioti & Pezirkianidis, 2020).

A particularly compelling aspect of this study is the nuanced understanding of social support. Thus, the study highlights that resilience is not solely determined by individual traits, but is also shaped by environmental factors, including the availability and quality of social support (Taylor & Conger, 2017; Wijayanti et al., 2024). Social support emerged as the strongest predictor of PSE, exceeding the effect of resilience. This finding aligns with prior studies demonstrating that perceived social support from family and friends is closely linked to parenting confidence and effectiveness (Hong & Liu, 2019; Leahy-Warren et al., 2011; Park & Lee, 2022). Social support serves as both a psychological and practical resource, reducing feelings of isolation and stress, and enhancing young mothers' confidence in their parenting roles.

The analysis identified reliable alliance (practical, dependable help) and guidance (informational and mentoring support) as the most significant subdimensions influencing PSE. This finding aligns with the literature emphasizing the importance of practical and emotional support networks for young parents (Cutrona et al., 1986). Moreover, reliable alliance as a practical support from dependable individuals directly bolsters confidence in parenting, while guidance, and informational support from experts or mentors will help young mothers navigate complex parenting challenges (Fierloos et al., 2023; Jolly et al., 2020). This supports the assertion that not all forms of social support are equally impactful, rather, targeted, high-quality support such as advice from experienced caregivers or tangible assistance with childcare, yields the most substantial benefits for young mothers (Fierloos et al., 2023; Jolly et al., 2020).

The clustering patterns of multidimensional scaling (MDS) and principal component analysis (PCA) reveal that married participants tend to group tightly, reflecting more consistent and higher levels of social support and PSE. In contrast, single parents exhibit more scattered patterns, indicating greater variability in resilience and social support experiences. Notably, some single parents cluster near married participants, suggesting that individual differences and environmental factors contribute to resilience beyond marital status alone. Further illustrated those married mothers, who generally have greater access to social and emotional resources, tend to report higher PSE and social support. Single parents, conversely, showed more variability in resilience and social support, reinforcing the importance of social support for psychological resilience, particularly among those facing greater economic and emotional challenges (Deepak & Annalakshmi, 2022; Girisken, 2021; Rees et al., 2023). The presence of such support networks is especially vital for single mothers, who generally report lower levels

of support and resilience compared to their married counterparts.

Furthermore, the study's exploration of the reasons for early marriage such as economic pressure, desire for independence, leaving parents' home, and relationship commitment adds depth to profound understanding of the socio-psychological dynamics influencing both marriage and parenting decisions. These findings resonate with socio-economic pressure theory (e.g., Arbelia & Riany, 2022; Huynh et al., 2021) and Erikson's theory of psychosocial development (e.g., Maree, 2021; Syed & McLean, 2017), emphasizing the need for interventions that address not only individual and familial factors, but also broader structural determinants of early marriage and parenting challenges (Arbelia & Riany, 2022; Huynh et al., 2021; Syed & McLean, 2017). However, commitment from long-term relationships also influenced marriage decisions, as suggested by relationship commitment theory.

Limitations and Future Directions

Through these findings, future interventions should adopt an integrated approach that focuses on building psychological resilience through problem-solving-based parenting skills training and community empowerment initiatives. Concurrently, optimizing social support through both traditional networks and digital resources is essential to reinforce PSE. To the extent, community-based support groups that offer emotional and practical guidance can serve as effective channels for delivering such support. Tailored, culturally relevant, and evidence-based programs are essential to empower young mothers, fostering greater confidence and creating stable, nurturing environments for child development that holistically address the unique vulnerabilities of this population. By addressing these domains, stakeholders can more effectively support young mothers in navigating the challenges of early parenting.

Further research is warranted to deepen understanding of how resilience operates within culturally specific contexts, particularly in settings like Indonesia where early marriage is prevalent. Investigations should explore the influence of cultural norms, traditional community support structures, and healthcare accessibility on the development of resilience and social support. Moreover, examining the dynamic interaction between conventional support systems and emerging digital platforms will provide valuable insights for tailoring interventions that are culturally sensitive and contextually relevant.

CONCLUSION

This study highlights the importance of resilience and social support in improving PSE in young mothers who marry early. The results show that resilience plays a significant role in helping young mothers face parenting challenges, while social support from family, friends, and social media have different contributions in strengthening their beliefs in parenting. By integrating psychological and social dimensions, this research fills a critical gap in understanding how these factors collectively influence parenting quality in the context of marriage particularly within early marriage cases in Indonesia.

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AUTHOR CONTRIBUTION STATEMENT

MH played a central role in the practical aspects of the research, leading the conceptualization of the research framework, meticulously designing the study methodology, and conducting in-depth data analysis that integrated theoretical insights with practical interpretation in both the introduction and discussion sections. MH also contributed significantly to refining the manuscript's clarity, coherence, and alignment with the journal's editorial standards. AR was responsible for managing data collection, developing research instruments, and contributing to the literature review, while ensuring robust data visualization and statistical analysis. RJ enriched the manuscript by providing a comprehensive review of related literature, enhancing the results through data visualization, and ensuring the manuscript adhered to academic standards and met the journal's submission requirements. All authors engaged in collaborative discussions throughout the research process, contributed to shaping the final structure and argumentation of the paper, and approved the final version of the manuscript for submission.

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