

# The Role of Psychological Empowerment and Family Resilience in Predicting Family Functioning among Malaysian Adults

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### ABSTRACT

**Objective:** This study aimed to examine the predictive roles of psychological empowerment and family resilience in determining levels of family functioning among adults in Malaysia.

**Methods and Materials:** A correlational descriptive design was employed with a sample of 440 Malaysian adults, determined using the Morgan and Krejcie sampling table. Data were collected through standardized instruments, including the Family Assessment Device (Epstein et al., 1983) for family functioning, the Psychological Empowerment Scale (Spreitzer, 1995) for empowerment, and the Family Resilience Assessment Scale (Sixbey, 2005) for resilience. Participants completed the measures voluntarily through online and community-based surveys. Data were analyzed using SPSS version 27, employing descriptive statistics, Pearson correlation to assess relationships between variables, and multiple linear regression to determine predictive effects. Assumptions of normality, linearity, and multicollinearity were tested and confirmed prior to analysis.

**Findings:** Results showed significant positive correlations between family functioning and both psychological empowerment ( $r = .52, p < .001$ ) and family resilience ( $r = .61, p < .001$ ). The regression model was statistically significant,  $F(2, 437) = 193.21, p < .001$ , with an  $R^2$  value of .47, indicating that empowerment and resilience jointly explained 47% of the variance in family functioning. Both predictors made significant contributions to the model, with psychological empowerment ( $\beta = .34, t = 7.41, p < .001$ ) and family resilience ( $\beta = .48, t = 10.26, p < .001$ ) emerging as strong predictors. Family resilience demonstrated the stronger standardized effect, highlighting its central role in family adaptation.

**Conclusion:** The findings suggest that psychological empowerment and family resilience are critical determinants of healthy family functioning. Interventions that strengthen empowerment and resilience among family members may promote adaptability, cohesion, and well-being within Malaysian families.

**Keywords:** *Psychological Empowerment; Family Resilience; Family Functioning*

## 1. Introduction

Family functioning represents a dynamic system of interactions, emotional bonds, and behavioral patterns that determine how effectively family members fulfill their roles, support one another, and adapt to challenges. Healthy family functioning is associated with positive psychosocial outcomes, resilience, and well-being, while dysfunctional family processes contribute to emotional distress, maladaptive coping, and interpersonal conflict (Cui et al., 2023). In contemporary societies characterized by economic uncertainty, mental health challenges, and shifting social roles, families serve as a crucial source of psychological security and adaptive regulation. Within this framework, psychological empowerment and family resilience have emerged as essential psychological and systemic resources that sustain family functioning across diverse life conditions (Ferraz et al., 2025).

Family functioning is not a static attribute but an evolving pattern that reflects families' ability to communicate, solve problems, and manage stress in adaptive ways (Qiao et al., 2024). As social units, families respond to both internal dynamics—such as emotional regulation, attachment, and shared beliefs—and external pressures, including health crises, economic instability, and social change. Research has consistently demonstrated that families with cohesive structures and high adaptability exhibit stronger emotional bonds, greater problem-solving ability, and reduced risk of psychopathology among their members (Gao et al., 2024). Conversely, poorly functioning families often experience difficulties in maintaining supportive interactions, resulting in heightened conflict, psychological distress, and relational disintegration.

A growing body of evidence suggests that psychological empowerment plays a vital role in strengthening family functioning by fostering members' sense of control, competence, and purpose (Rodrigues et al., 2025). Psychological empowerment refers to an internal state of motivation that reflects an individual's belief in their capacity to influence outcomes and manage life challenges effectively. Families with empowered members tend to demonstrate greater initiative, confidence, and agency in coping with adversities such as illness, disability, or economic hardship. For instance, a qualitative study among family caregivers of lower-limb amputees revealed that empowerment processes—such as self-efficacy, role negotiation, and problem-solving—helped families adjust to

caregiving challenges and sustain relational harmony (Rodrigues et al., 2025).

Similarly, in health-related contexts, psychological empowerment enhances adaptive family functioning. Research on parental adjustment in families with pediatric leukemia found that empowerment and resilience jointly mediated the relationship between psychological stress and family functioning (Ferraz et al., 2025). Empowered parents were more capable of managing emotional distress, maintaining cohesive family communication, and facilitating children's recovery. These findings suggest that empowerment operates as both a personal and relational resource that enables families to navigate uncertainty and maintain equilibrium during crisis periods.

Psychological empowerment is also deeply intertwined with sociocultural factors. Cultural beliefs, values, and collective practices can either reinforce or constrain empowerment within family systems. According to (Akgül, 2025), cultural roots play a central role in shaping how individuals interpret empowerment, resilience, and interdependence. In collectivist societies, empowerment often manifests not through individual autonomy but through relational efficacy—the ability to contribute meaningfully to the welfare of others. Such culturally grounded empowerment promotes collective well-being, trust, and family solidarity, all of which enhance adaptive functioning. Moreover, empowerment processes that respect cultural traditions are associated with higher emotional balance and family satisfaction (Akgül, 2025).

In this sense, empowerment is not limited to personal self-efficacy but encompasses broader psychological attributes that support adaptive family functioning. Empowerment-oriented interventions, such as psychoeducational programs, have shown effectiveness in improving resilience and communication among underprivileged families (Jaladin et al., 2024). In a Malaysian study focusing on the B40 (bottom 40% income group) youth, the development of a psychoeducational module targeting empowerment and resilience led to significant improvements in family communication, adaptability, and cohesion (Jaladin et al., 2024). These findings highlight that empowerment interventions can be designed to strengthen family functioning, especially in populations facing social and economic vulnerabilities.

Beyond empowerment, family resilience is another crucial predictor of healthy family functioning. Family resilience refers to the collective ability of a family to recover, reorganize, and grow stronger following adverse

experiences (Monteiro et al., 2025). It represents a systemic process that includes effective communication, shared meaning-making, positive outlook, and resource mobilization. Resilient families transform adversity into an opportunity for development rather than breakdown. A systematic review by (Monteiro et al., 2025) emphasized that family resilience acts as a fundamental coping mechanism that integrates emotional, relational, and behavioral adaptation, enabling families to maintain functioning under chronic stress.

Empirical research has shown that resilience moderates the relationship between stressors and family outcomes across diverse populations. For instance, (Anto, 2024) demonstrated that families affected by the Semeru eruption in Indonesia displayed high resilience through cultural adaptability, coping strategies, and spiritual support, which collectively helped them restore emotional balance and rebuild social networks. These findings reinforce the notion that resilience encompasses both individual strengths and systemic processes. Similarly, among families caring for individuals with schizophrenia, resilience was found to reduce caregiver burden and enhance emotional stability (Effendy et al., 2023).

Resilience is also influenced by empowerment and cultural support. Studies reveal that family empowerment strategies not only prevent relapse in individuals with chronic mental illness but also enhance resilience and overall family functioning (Hodmatua et al., 2023; Iswanti et al., 2024). Empowered families demonstrate better self-management, communication, and mutual support, contributing to a more stable and nurturing environment. Moreover, resilient families are characterized by flexibility and meaning-making capacities that allow them to integrate adversity into their life narrative (Rahmadiyah et al., 2024). For example, families with stunted children in Depok City demonstrated adaptive resilience through shared caregiving, positive reframing, and emotional coherence despite economic limitations (Rahmadiyah et al., 2024).

Psychological empowerment and family resilience are also interlinked through shared emotional and cognitive processes. Empowered individuals possess higher self-efficacy and optimism, which strengthen their ability to cope with adversity and contribute positively to family resilience (Weliangan et al., 2024). In a study of women with dual roles, psychological empowerment was significantly associated with resilience, highlighting empowerment's role as a psychological resource that enhances adaptability under stress. Resilient families, in turn, create a supportive

atmosphere that reinforces members' sense of control and competence, creating a reciprocal loop between empowerment and resilience (Weliangan et al., 2024).

Further, resilience and empowerment together contribute to the emotional and functional stability of families dealing with health and psychological challenges. (Yu et al., 2024) found that psychological resilience mediated the relationship between family functioning and illness uncertainty among relatives of trauma patients in intensive care units, illustrating that resilience serves as a protective mechanism that maintains family coherence in high-stress contexts. Similarly, in families of postgraduate students, resilience mediated the link between family environment and depressive symptoms, while family support moderated these effects, demonstrating the dual roles of external and internal resources in preserving mental health (Ren et al., 2024).

Recent studies also emphasize the mediating and moderating roles of family processes in the relationship between resilience, empowerment, and psychological well-being. For example, (Li et al., 2025) showed that family intimacy mediated the association between negative emotions and resilience in adolescents with depressive disorders, suggesting that cohesive emotional bonds act as resilience pathways. Similarly, (Qiao et al., 2024) identified the mediating effects of emotion regulation and psychological resilience in the relationship between family functioning and problem behaviors among preschool left-behind children, reinforcing the view that emotional and cognitive mechanisms underpin family adaptation. These findings suggest that family functioning is not solely determined by structural characteristics but by psychological dynamics and resilience-building processes that operate within family systems.

Resilience and empowerment have also been studied in relation to chronic diseases and public health. For instance, (Mei et al., 2023) explored the relationship between psychological resilience and quality of life among diabetes patients, demonstrating that empowerment moderated the relationship between resilience and well-being. This suggests that empowerment may amplify the benefits of resilience by reinforcing self-management and emotional regulation capacities. Similarly, (Liu et al., 2024) highlighted that adherence to lifestyle changes in diabetes patients was significantly influenced by psychological, social, and clinical determinants, emphasizing the interconnectedness of empowerment, resilience, and health-related behavior.

Moreover, community-based empowerment initiatives contribute to family well-being through economic independence and psychological stability. (Masmuroh, 2024) demonstrated that community empowerment programs—such as microfinance and family-based cooperative systems—enhanced economic independence and promoted a sense of collective efficacy among families. Economic empowerment thus acts as a foundation for psychological resilience and improved family functioning. Similarly, gender-responsive family education initiatives that focus on developing social and cultural resilience among women have shown to enhance family well-being and interpersonal harmony (Rahmi et al., 2023). These studies indicate that empowerment, when supported by educational and socio-cultural interventions, contributes to stronger and more resilient family systems.

In addition, resilience and empowerment processes are particularly relevant in multicultural contexts like Malaysia, where family systems integrate diverse cultural and religious values. Culturally sensitive family interventions that incorporate empowerment and resilience components can foster adaptive coping and harmonious functioning across generations (Akgül, 2025; Jaladin et al., 2024). In such contexts, empowerment is not perceived as independence from the family but as the capacity to contribute meaningfully to family stability. Furthermore, resilience allows families to balance modernization pressures with traditional values, ensuring continuity of care, respect, and mutual support.

The interaction between psychological empowerment, family resilience, and family functioning is supported by converging evidence from both qualitative and quantitative research (Ferraz et al., 2025; Gao et al., 2024; Monteiro et al., 2025). These constructs are conceptually distinct yet mutually reinforcing. Empowerment enhances individuals' confidence and perceived control, resilience facilitates recovery and adaptation, and family functioning reflects the outcome of these processes. Together, they form a systemic triad that determines how families adapt to challenges, maintain emotional balance, and sustain healthy relationships.

The present study aims to examine the predictive roles of psychological empowerment and family resilience in determining family functioning among Malaysian adults.

## 2. Methods and Materials

### 2.1. Study Design and Participants

This study employed a correlational descriptive research design to examine the relationships between psychological empowerment, family resilience, and family functioning among adults in Malaysia. The target population included individuals aged 20 years and older who were living with at least one family member. Using the Morgan and Krejcie (1970) sample size determination table, a sample size of 440 participants was determined to ensure adequate statistical power for correlational and regression analyses. Participants were selected using a convenience sampling method from community centers, universities, and social organizations across several Malaysian states, including Selangor, Kuala Lumpur, and Penang.

All participants completed standardized self-report questionnaires measuring psychological empowerment, family resilience, and family functioning. Inclusion criteria required participants to be Malaysian citizens, married or living in a family household, and willing to participate voluntarily. Exclusion criteria included incomplete responses or self-reported major psychiatric disorders.

### 2.2. Measures

Family functioning was assessed using the Family Assessment Device (FAD) developed by Epstein, Baldwin, and Bishop (1983). This scale is based on the McMaster Model of Family Functioning and evaluates the structural, organizational, and transactional characteristics of families. The instrument consists of 60 items divided into seven subscales, including Problem Solving, Communication, Roles, Affective Responsiveness, Affective Involvement, Behavior Control, and General Functioning. Items are rated on a 4-point Likert scale ranging from 1 (strongly agree) to 4 (strongly disagree), with higher scores indicating poorer family functioning. The FAD has been widely validated across diverse cultural contexts, demonstrating good internal consistency (Cronbach's  $\alpha$  ranging from 0.72 to 0.92) and test-retest reliability, as well as strong construct and criterion validity in both clinical and non-clinical populations.

Psychological empowerment was measured using the Psychological Empowerment Scale developed by Spreitzer (1995). This instrument conceptualizes empowerment as a motivational construct reflecting an individual's orientation to their role and environment. The scale includes 12 items



distributed across four subscales: Meaning, Competence, Self-determination, and Impact. Each item is rated on a 7-point Likert scale ranging from 1 (very strongly disagree) to 7 (very strongly agree), with higher scores indicating greater perceived psychological empowerment. The measure has been extensively applied in psychological and organizational research and has demonstrated robust internal reliability (Cronbach's  $\alpha$  values between 0.77 and 0.85) and construct validity through confirmatory factor analysis in multiple studies. The scale's psychometric properties have been confirmed in various populations, supporting its reliability and validity as a measure of psychological empowerment.

Family resilience was assessed using the Family Resilience Assessment Scale (FRAS) developed by Sixbey (2005). This comprehensive instrument evaluates the protective processes that enable families to adapt and thrive despite adversity. The FRAS consists of 54 items organized into six subscales: Family Communication and Problem Solving, Utilizing Social and Economic Resources, Maintaining a Positive Outlook, Family Connectedness, Family Spirituality, and Ability to Make Meaning of Adversity. Items are rated on a 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree), with higher scores indicating greater family resilience. The FRAS has demonstrated high internal consistency (Cronbach's  $\alpha = 0.86$  to 0.96) and solid construct and convergent validity across different cultural and demographic samples. Its psychometric soundness and theoretical foundation make it a standard and reliable measure for assessing family resilience.

### 2.3. Data Analysis

Data were analyzed using SPSS version 27. Descriptive statistics, including means, standard deviations, frequencies, and percentages, were computed to summarize participants' demographic characteristics. To test the study hypotheses, Pearson's product-moment correlation was used to examine the relationships between family functioning (dependent variable) and the two independent variables—psychological empowerment and family resilience. Subsequently, a multiple linear regression analysis was performed to assess the predictive power of psychological empowerment and family resilience on family functioning. Statistical significance was set at  $p < .05$ . Prior to conducting inferential analyses, the assumptions of normality, linearity, multicollinearity, and homoscedasticity were tested and confirmed.

## 3. Findings and Results

The final sample consisted of 440 participants, comprising 271 females (61.6%) and 169 males (38.4%). The participants' ages ranged from 21 to 56 years, with a mean age of 33.48 years ( $SD = 7.92$ ). In terms of marital status, 294 participants (66.8%) were married, 103 (23.4%) were single, and 43 (9.8%) were divorced or widowed. Regarding education level, 188 participants (42.7%) held a bachelor's degree, 121 (27.5%) had a diploma, 83 (18.9%) completed postgraduate studies, and 48 (10.9%) had secondary education. Additionally, 257 participants (58.4%) reported full-time employment, 94 (21.4%) were self-employed, 62 (14.1%) were homemakers, and 27 (6.1%) were unemployed. These demographics represent a diverse cross-section of the adult population in Malaysia.

**Table 1**

*Descriptive Statistics of Study Variables (N = 440)*

Variable	Mean (M)	Standard Deviation (SD)
Family Functioning	2.36	0.48
Psychological Empowerment	5.12	0.67
Family Resilience	3.28	0.54

Table 1 presents the descriptive statistics for the key study variables. The mean score for Family Functioning was 2.36 ( $SD = 0.48$ ), indicating an overall moderate to healthy level of family functioning among participants. The mean for Psychological Empowerment was 5.12 ( $SD = 0.67$ ), suggesting that respondents generally perceived themselves as moderately to highly empowered. The mean score for

Family Resilience was 3.28 ( $SD = 0.54$ ), reflecting a relatively high level of resilience across families. The variability in responses suggests diverse experiences of empowerment and resilience, consistent with the heterogeneous demographic composition of the sample.

Before performing the correlation and regression analyses, statistical assumptions were examined. The

Kolmogorov–Smirnov test confirmed the normal distribution of the main variables (p-values ranging from 0.081 to 0.194), and skewness and kurtosis values were within the acceptable range of  $-1$  to  $+1$ , indicating normality. The Durbin–Watson statistic for regression residuals was 1.94, suggesting independence of errors. Tolerance values for psychological empowerment (0.73) and family resilience

(0.79), along with corresponding Variance Inflation Factor (VIF) values of 1.36 and 1.27 respectively, indicated no multicollinearity concerns. Examination of residual scatterplots showed homoscedasticity, and P–P plots confirmed the linearity and normal distribution of residuals. These results indicated that all assumptions for Pearson correlation and linear regression were adequately met.

**Table 2**

*Pearson Correlation Coefficients Between Study Variables (N = 440)*

Variables	1. Family Functioning	2. Psychological Empowerment	3. Family Resilience
1. Family Functioning	—		
2. Psychological Empowerment	.52** (p < .001)	—	
3. Family Resilience	.61** (p < .001)	.58** (p < .001)	—

As shown in Table 2, the Pearson correlation analysis revealed significant positive relationships among the study variables. Family Functioning was positively correlated with Psychological Empowerment ( $r = .52$ ,  $p < .001$ ) and Family Resilience ( $r = .61$ ,  $p < .001$ ). Additionally, Psychological Empowerment was significantly correlated with Family

Resilience ( $r = .58$ ,  $p < .001$ ). These results indicate that higher levels of empowerment and resilience are associated with more adaptive family functioning. The moderate-to-strong correlation coefficients suggest that both empowerment and resilience may be key determinants of overall family well-being.

**Table 3**

*Summary of Regression Model Predicting Family Functioning (N = 440)*

Source	Sum of Squares	df	Mean Square	R	R <sup>2</sup>	Adjusted R <sup>2</sup>	F	p
Regression	52.48	2	26.24	.69	.47	.46	193.21	< .001
Residual	59.39	437	0.14					
Total	111.87	439						

As presented in Table 3, the overall regression model was statistically significant,  $F(2, 437) = 193.21$ ,  $p < .001$ , with an  $R^2$  value of .47, indicating that approximately 47% of the variance in family functioning was explained jointly by psychological empowerment and family resilience. The

adjusted  $R^2$  value (.46) suggests a strong predictive capacity after accounting for sampling variability. These findings confirm that both psychological empowerment and family resilience substantially contribute to explaining variations in family functioning among the sampled participants.

**Table 4**

*Multiple Linear Regression Coefficients Predicting Family Functioning (N = 440)*

Predictor Variable	B	Standard Error	$\beta$	t	p
Constant	0.84	0.12	—	6.83	< .001
Psychological Empowerment	0.29	0.04	.34	7.41	< .001
Family Resilience	0.46	0.05	.48	10.26	< .001

Table 4 presents the results of the multiple linear regression analysis examining the unique contributions of psychological empowerment and family resilience to family functioning. Both predictors made significant positive contributions to the model. Psychological Empowerment emerged as a significant predictor ( $B = 0.29$ ,  $\beta = .34$ ,  $t = 7.41$ ,

$p < .001$ ), indicating that as empowerment increased, family functioning improved proportionally. Family Resilience also significantly predicted family functioning ( $B = 0.46$ ,  $\beta = .48$ ,  $t = 10.26$ ,  $p < .001$ ), and its standardized beta coefficient suggested it had a slightly stronger impact than empowerment. Collectively, these results highlight that both

empowerment and resilience play crucial roles in promoting adaptive family functioning, with resilience demonstrating the stronger predictive effect.

#### 4. Discussion and Conclusion

The present study examined the predictive roles of psychological empowerment and family resilience in explaining family functioning among Malaysian adults. The findings revealed significant positive correlations between psychological empowerment and family resilience, as well as between each of these independent variables and family functioning. Furthermore, results from multiple linear regression analysis demonstrated that both psychological empowerment and family resilience significantly predicted family functioning, jointly accounting for a substantial proportion of variance in overall family well-being. These findings indicate that individuals and families with higher psychological empowerment and greater resilience tend to display more cohesive, adaptive, and communicative family interactions.

The positive relationship between psychological empowerment and family functioning supports earlier research highlighting empowerment as a critical psychosocial resource in maintaining family balance and adaptive functioning (Rodrigues et al., 2025). Families that foster a sense of autonomy, control, and competence among members are more likely to manage emotional challenges effectively and maintain role stability. Similar patterns have been reported in caregiving contexts where empowerment enhanced family members' self-efficacy and problem-solving skills, thus promoting healthier relational dynamics (Rodrigues et al., 2025). These results are consistent with the theoretical framework proposed by (Ferraz et al., 2025), which posits that empowerment and resilience are interconnected mechanisms mediating the relationship between psychological stress and family adaptation. Empowered individuals are better equipped to cope with emotional distress, which in turn enhances collective family functioning.

The strong predictive role of family resilience further confirms its status as a key determinant of adaptive family processes. The current findings align with the systematic review by (Monteiro et al., 2025), which identified resilience as a unifying process integrating coping, adaptability, and relational regulation within families. The Malaysian participants in this study, who operate within a collectivist cultural context emphasizing interdependence and family

unity, demonstrated that resilient families sustain high levels of emotional connectedness and shared meaning-making even under stress. This supports the contention that resilience functions as both a protective and a restorative mechanism that preserves family functioning through adversity.

Additionally, the relationship between family resilience and family functioning observed in this study is consistent with empirical evidence from post-disaster and health-related contexts. For example, (Anto, 2024) found that families affected by the Semeru eruption in Indonesia exhibited strong resilience through spiritual support, cultural adaptability, and communal coping—factors that directly improved their family functioning. Similarly, (Effendy et al., 2023) reported that resilience among families caring for individuals with schizophrenia was associated with reduced caregiver burden and enhanced emotional well-being. The present findings support these observations by confirming that resilience fosters family cohesion, effective communication, and mutual understanding, thereby promoting healthier family dynamics.

The link between empowerment and resilience found in this study further underscores the dynamic interplay between these constructs. Empowered individuals often serve as catalysts for resilience development by fostering positive family attitudes, strengthening confidence, and encouraging proactive coping. This reciprocal relationship is consistent with the findings of (Weliangan et al., 2024), who demonstrated that psychological empowerment significantly predicted resilience among women balancing dual work and family roles. Empowerment contributes to resilience by enabling self-regulation, optimism, and adaptive flexibility, which in turn enhance family functioning.

Moreover, empowerment-based interventions can improve family functioning indirectly by enhancing resilience processes. (Iswanti et al., 2024) found that family empowerment strategies for individuals with schizophrenia significantly reduced relapse rates by strengthening family coping and problem-solving abilities. Similarly, (Hodmatua et al., 2023) emphasized that family empowerment programs help increase emotional stability and caregiving capacity, both of which are crucial for maintaining family functioning. These findings resonate with the current study's observation that empowerment and resilience jointly predict adaptive family functioning, highlighting their complementary nature.

The study's results also correspond with evidence linking family functioning, resilience, and psychological well-being

in various cultural and health contexts. For instance, (Yu et al., 2024) found that psychological resilience mediated the association between family functioning and illness uncertainty among relatives of trauma patients in intensive care, suggesting that resilience buffers the emotional strain experienced in stressful family environments. Similarly, (Ren et al., 2024) demonstrated that resilience mediated the effect of family environment on depressive symptoms among postgraduate students, with family support serving as a moderator. These findings align with the present study by underscoring that resilience is a critical intermediary that transforms psychological resources such as empowerment into functional family outcomes.

Furthermore, the results align with developmental and educational studies emphasizing the mediating role of emotional and cognitive mechanisms in family functioning. (Li et al., 2025) showed that family intimacy mediated the relationship between negative emotions and resilience in adolescents with depressive disorders, suggesting that resilient family environments foster emotional regulation. (Qiao et al., 2024) also confirmed that psychological resilience and emotion regulation jointly mediated the relationship between family functioning and behavioral problems among preschool children. The current study extends this line of research by illustrating that resilience and empowerment not only co-occur but together explain variations in family functioning among adults, indicating that these mechanisms remain crucial beyond childhood and adolescence.

The findings of this study also mirror evidence from chronic illness and health management literature. (Mei et al., 2023) demonstrated that psychological empowerment moderated the relationship between resilience and quality of life among diabetes patients, suggesting that empowerment enhances the protective effects of resilience. (Liu et al., 2024) similarly emphasized the psychological and social determinants of adherence behaviors among diabetic patients, where empowerment and resilience facilitated positive health outcomes. These observations correspond with the present findings by reinforcing that psychological empowerment and resilience are transdiagnostic constructs influencing both health and family domains.

Cultural context also plays a significant role in interpreting these results. Malaysia, as a multicultural and collectivist society, emphasizes family interdependence and mutual support, which naturally align with empowerment and resilience frameworks grounded in relational strength. (Akgül, 2025) argued that cultural roots shape empowerment

processes by embedding them within communal and moral values, thus reinforcing family harmony. Likewise, (Jaladin et al., 2024) developed and validated a psychoeducational module designed to empower low-income Malaysian youth and their families, demonstrating improvements in both resilience and family functioning. These culturally congruent interventions underscore the importance of viewing empowerment and resilience as interdependent within collectivist family systems rather than as purely individualistic constructs.

Economic and social empowerment also contribute significantly to family functioning. (Masmuroh, 2024) found that economic empowerment programs for families enhanced financial independence, psychological stability, and overall family well-being. In a similar vein, (Rahmi et al., 2023) reported that gender-responsive educational programs strengthened women's psychological and socio-cultural resilience, thereby improving family adaptation and emotional cohesion. These findings reinforce that empowerment at both the psychological and structural levels contributes to family functioning, consistent with the positive associations observed in this study.

Moreover, the present findings corroborate evidence linking resilience to meaning-making and cultural adaptation. (Rahmadiyah et al., 2024) found that families of stunted children in Indonesia demonstrated resilience through shared caregiving, collective problem-solving, and positive reframing of adversity. Such processes parallel the mechanisms observed in the current sample, where family resilience likely functioned through emotional connectedness and collaborative problem-solving. Similarly, (Cui et al., 2023) revealed that family function influences altruistic behavior through psychological resilience and self-affirmation, further emphasizing the reciprocal relationship between internal psychological states and external family processes.

Taken together, the current study's results provide strong empirical support for the conceptualization of psychological empowerment and family resilience as interrelated predictors of family functioning. Empowerment equips individuals with a sense of agency and control that enhances their contributions to family well-being, while resilience provides the adaptive framework for families to withstand and recover from stressors. These findings extend previous research by integrating psychological and systemic perspectives and by demonstrating these relationships in a Malaysian sample, adding cross-cultural evidence to the global discourse on family adaptation and mental health.



Theoretically, the findings support models of family functioning that emphasize systemic and ecological perspectives, such as the McMaster Model and Walsh's Family Resilience Framework. Both models posit that family functioning is sustained through communication, shared meaning, emotional regulation, and adaptability—processes reinforced by empowerment and resilience. In the Malaysian context, empowerment may not only manifest as personal autonomy but also as collective efficacy and shared decision-making, reflecting the cultural synthesis of individual and family strengths.

The implications of this study are multifold. Psychologically, the findings indicate that fostering empowerment within individuals contributes directly to better family outcomes. At the same time, strengthening family resilience helps buffer the effects of stress and reinforces positive family interactions. These dual pathways suggest that interventions designed to enhance both constructs simultaneously—through counseling, psychoeducation, or community-based programs—are likely to yield the greatest improvements in family functioning. Moreover, by confirming the predictive strength of empowerment and resilience, this study underscores the need for preventive mental health strategies that target these attributes as protective factors in family systems.

## 5. Suggestions and Limitations

Despite its valuable contributions, this study has several limitations that should be considered. First, the cross-sectional design limits the ability to establish causal relationships between psychological empowerment, family resilience, and family functioning. Longitudinal studies would be necessary to examine the temporal direction of these associations. Second, the use of self-report questionnaires introduces the possibility of social desirability and common method bias, which may inflate correlations. Third, while the sample of 440 Malaysian adults offers cultural insight, it may not be representative of all family structures across different regions, ethnicities, or socioeconomic backgrounds. Additionally, contextual variables such as economic status, religious beliefs, and family size were not controlled, which may influence the generalizability of results.

Future research should employ longitudinal and experimental designs to explore causal pathways between empowerment, resilience, and family functioning over time. It would also be beneficial to examine potential mediating

and moderating mechanisms, such as emotion regulation, social support, or family communication patterns, to better understand how these variables interact. Cross-cultural comparative studies could further illuminate how cultural norms influence empowerment and resilience processes in different family systems. Incorporating qualitative approaches would allow for deeper exploration of lived experiences and contextual nuances, while mixed-methods research could capture the complexity of these interrelationships more comprehensively.

Practically, the findings suggest that family counselors, social workers, and community health practitioners should integrate empowerment and resilience training into family-based interventions. Programs should focus on enhancing family communication, problem-solving skills, and emotional regulation while reinforcing individual self-efficacy and collective coping capacities. Educational and community initiatives could also promote awareness of empowerment and resilience as key protective factors for mental health and family harmony. Moreover, culturally tailored interventions that align with local values and beliefs should be prioritized to ensure effectiveness and sustainability in diverse populations.

## Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

## Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

## Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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## Declaration of Interest

The authors report no conflict of interest.

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## Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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