Women’s lived experiences of emotional and psychological abuse in heterosexual relationships:

Behaviours, effects, awareness and support

This thesis is submitted in fulfilment of the requirements for the degree of Doctor of Philosophy

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February 2013
DECLARATION

I certify that except where due acknowledgement has been made, the work is that of the author alone; the work has not been submitted previously, in whole or in part, to qualify for any other academic award; the content of the thesis is the result of work which has been carried out since the official commencement date of the approved research program; any editorial work, paid or unpaid, carried out by a third party is acknowledged; and, ethics procedures and guidelines have been followed.

Signature:

Alissa Lykhina

Date:
ABSTRACT

Unlike physical and sexual violence, less is known about emotional and psychological abuse in intimate relationships. In relation to the latter, there is no consensus on the definition, the methods of measurement, and the behaviours that constitute emotional and psychological abuse. The goal of this study is to contribute to the understanding of intimate partner violence by considering emotional and psychological abuse within heterosexual intimate relationships from the perspective of self-identified, abused women. More specifically, I analyse the behaviours that women consider to be emotionally and psychologically abusive, and the negative effects of that abuse. I examine how women became aware of such abuse in their intimate relationships and what type of support they received from formal and informal sources in response to their experiences. Using a feminist, phenomenological qualitative approach, I gathered this information through 20 in-depth interviews and questionnaires.

I identified 35 emotionally and psychologically abusive behaviours and 22 negative effects, mostly consistent with previous research findings, but much more extensive than Australian domestic and family violence legislation. My findings indicate that emotional and psychological abuse needs more acknowledgment publicly. It needs to be identified in a more consistent manner in legislation and other related policy. My findings may help educate women and the general public on what constitutes emotional and psychological abuse in a more organised and clear manner. In relation to practice implications, my research suggests that there is a need for further training of formal and informal sources of support through professional and community education. This would include information with an emphasis on the harmful effects that emotional and psychological abuse can have on women’s mental, emotional and physical wellbeing, including social and financial impacts.
ACKNOWLEDGEMENTS

In memory of my loved ones who are not here with me today, I miss and love you very much.

I would like to thank my parents for their emotional and financial support. It would have been difficult to finish my studies without them.

I am thankful to my supervisors (Associate Professor Suellen Murray and Dr Susie Costello) for their support and guidance. They were always available and offered their extensive knowledge and skills to me. They led me through the research project from the beginning and they have created a memorable experience. Professor Chris Chamberlain also provided valuable assistance and I thank him for his contributions.

My thanks to the women who volunteered to participate in interviews and/or questionnaires. Without them, this research would not exist. I am grateful for the time they spent with me answering my questions, and for their honesty and detailed discussion of their experiences. They provided valuable input, which I hope other women and the general public will find useful. I would also like to thank the services that provided assistance and support during the recruitment process.

I would also like to thank Dr Diane Brown for copy editing my thesis according to the Australian Standards for Editing Practice (2001) (in particular, standards D and E).

I acknowledge my loving partner, who was encouraging and supportive in every way since the day I met him. He helped me to be at university early in the mornings and distracted me when I needed to be distracted. Thanks also to all my friends who believed in me and supported me throughout this journey. This was a difficult journey and I am very grateful to each and every person.
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ABBREVIATIONS

ABS     Australian Bureau of Statistics
CURF    Confidentialised Unit Record File
DHS     Department of Human Services
DV      Domestic Violence
EPA     Emotional and Psychological Abuse
IPV     Intimate Partner Violence
IVAWS   International Violence Against Women Survey
MIPV    Male Intimate Partner Violence
NVAWS   National Violence Against Women Survey
NCRVAWC National Council to Reduce Violence Against Women and their Children
PLS     Plain Language Statement
PTSD    Post-traumatic Stress Disorder
SCALD   Selected Culturally and Linguistically Diverse
TA      Thematic Analysis
VicHealth Victorian Health Promotion Foundation
WSS     Women’s Safety Survey

ACT     Australian Capital Territory
NT      Northern Territory
QLD     Queensland
SA      South Australia
VIC     Victoria
WA      Western Australia
TAS     Tasmania
Chapter 1

Introduction

I became interested in the topic of emotional and psychological abuse in 2008, although at that time I did not know the terms, definitions or how serious this abuse was. In the final year of my bachelor degree we were required to write a thesis proposal. I was very interested in the personal changes women undergo when they are in an intimate relationship, particularly in relation to emotional strength, self-esteem, decision making and independence. I wanted to know what it was in the relationship that made women change or adjust, and whether there was any change for some women. I was curious to learn more about women’s perceptions and their reasons for why personal changes occurred (if any) within the relationship. Furthermore I was interested in whether women experienced different types of intimate relationships and whether a partner played a role in women’s personal changes.

I became interested in women and relationships when I read Cesara’s (1982) anthropological encounters with the women of Lenda (Ethiopia). Her fieldwork observations uncovered women who were strong, independent and powerful. Their sense of power and strength varied and “Some of them were filled with it to the point of overflowing … Every gesture told she honoured herself, she had power over herself, that she revered her power, her tradition, and her domain ” (Cesara, 1982, p. 101). I was amazed by Cesara’s findings and the women she had met. She made me think of my lost self and its possible connection to my own intimate relationship: “Oh, woman of tender bloom, why can you not wait, nurture yourself, and augment your room? Fortify your heart and your brain, test your strength and only then turn to man” (Cesara, 1982, p. 106). At this point I started researching relationships and non-physical forms of violence. This led me to my postgraduate research project on ‘Women in emotionally abusive relationships: Caseworkers’ reflections on effects and support’.

Subsequently, I became more interested in personal relationships and decided to enrol in a PhD degree. The doctorate research offered an opportunity to speak to women, hear and understand their experiences. It allowed for more in-depth research into non-physical forms of intimate partner violence.

The main reason behind my interest was the end of my own intimate relationship in 2007 (for the second time). During the lead-up to the end of the relationship, I lost my sense of self and became socially isolated. I was emotional, upset, confused and depressed. I did not know what was going on, or what was causing it, nor did I know how to explain it. The university support services could not seem to pinpoint the effects I was experiencing. Consequently I became emotionally attached and dependent on my partner and I began to lose
my independence. This situation was exacerbated (the third time we got together) because I did not have any family or long-standing friends in Australia, as I am an international student and English is my second language. The relationship was deteriorating and I felt emotionally detached and exhausted. This situation continued on a rollercoaster into the first year of my PhD, leaving many emotional scars.

My own experience of moving away from intimate partner emotional and psychological abuse and its consequences inspired my research and this became a valuable asset in undertaking my research.

**Aim of the study**

In my study, I examined women’s experiences of emotional and psychological abuse (EPA) in intimate heterosexual relationships. This research focused on identifying abusive behaviours and women’s understandings of this form of abuse. I was interested in how their experience of emotional and psychological abuse might affect their health. I also wanted to investigate whether women were aware of non-physical abuse in their relationships and what type of support and responses they received. I wanted to know about the positive factors involved in rebuilding their lives after their relationships had ended.

Defining violence towards women is a contentious issue and radical feminists argue that “in order to be able to capture the extent of the impact of violence upon women, it is important not to pre-determine the meaning of the term” (Maynard, 1993, p. 105). Legal and other professional definitions may not always reflect the meaning of abusive behaviours in the same ways as women experience them. Therefore, it is important to research women’s experiences of violence (Maynard, 1993).

Part of my research was to gather women’s experiences and understandings of emotional and psychological abuse and compare them with existing knowledge drawn from a range of academic disciplines and other professional areas including psychology, sociology, medicine and social work. In particular, I was interested in analysing the ways in which these understandings of emotional and psychological abuse have been institutionalised. As an example of the way in which public policy understands EPA, I turned to legislation. Australian legislation (statewide) underpinning intervention, protection or restraining orders now typically includes references to emotional and psychological abuse (or descriptions that imply such abuse). I wanted to explore to what extent these definitions captured the extent of the experiences of the women I interviewed.

The aim of this research is to raise awareness of EPA, to help women identify their experiences as legitimate, and for others to recognise these experiences. I wished to make
visible the consequences for women of non-physical forms of violence in intimate relationships. I hope my research will promote community and professional understanding and support for women who have been affected by EPA in their intimate relationships. The intent is to produce better understandings of EPA and to inform future community education and public policy.

My study involved in-depth interviews with 20 women who identified themselves as being emotionally and/or psychologically abused by an intimate partner. Additional information was collected through questionnaires. In face-to-face interviews women were asked about their experiences. In particular, we discussed the behaviours they experienced, the negative effects that came as a result of these experiences, their awareness of EPA, and the support they received from formal and informal sources of support in relation to their particular experiences.

**Terms used in the thesis**

First, I outline some of the terms used and provide a short introduction on intimate partner violence (IPV). Other terms used in the literature include ‘domestic violence’ (DV), ‘family violence’ (FV) (ABS, 2009; Flood, 2006; Laing, 2000; MacDonald, 1998), ‘spouse abuse’ (Laing & Bobic, 2002), ‘interpersonal violence’ (MacDonald, 1998), ‘wife beating’, ‘domestic abuse’, ‘partner abuse’, ‘domestic assault’ and ‘intimate partner abuse’ (McCue, 2008). In Australia the most commonly used term has been ‘domestic violence’, which describes abuse and violence taking place between individuals who are or were in an intimate relationship (Laing, 2000). In more recent times, ‘family violence’ has commonly been used. However, ‘family violence’ disguises the gendered nature of abuse and the focus on violence against women is hence diminished (Murray & Powell, 2009). ABS (2009) states that the terms ‘family’ and ‘domestic’ violence include a broad spectrum of abusive behaviours committed by family members that include partners, ex-partners, relatives, children and/or caregivers. Across family and domestic violence legislation, the relationship between the offender and the victim can be split into family (type of interpersonal relationship) and domestic (type of living arrangement). The term ‘male violence against women’ on the other hand highlights the gender of both the victim and the perpetrator (MacDonald, 1998).

For the purpose of this study, I prefer to use the term ‘male intimate partner violence’ (MIPV). This term attempts to include all violence and abusive behaviours by a male against his female partner, regardless of marital status (current and former husbands, boyfriends, de facto and dating partners, who may be living apart or cohabiting). It excludes other forms of violence such as elder, child, sibling or parental abuse (McCue, 2008). As my research
concentrates on heterosexual relationships and on male partners as the perpetrators, MIPV will be used when speaking about my research. Terms IPV, FV and DV will also be used interchangeably when citing other sources.

Other terms that are relevant are perpetrator, victim and survivor. Perpetrator refers to a person who commits the abuse or carries out abusive behaviours. I acknowledge that IPV can be bi-directional (Bagshaw & Chung, 2000) and reciprocal between men and women, particularly in non-physical forms of violence or aggression (Murphy & Cascardi, 1993). However, the nature and outcomes of men’s violence differ greatly from women’s. One difference involves the severity of violence, that is, the infliction of more severe injuries by men and the greater likelihood of women being killed by their current or former male partners than strangers. Women are more likely to live in fear before, during and after separation from a violent partner, whereas male victims are far less likely to be intimidated or afraid and rarely experience post-separation violence (Bagshaw & Chung, 2000). There is also a difference in the motivations, nature and intentions of women’s and men’s DV (Flood, 2006). Hence, for the purposes of my research, the term perpetrator only refers to men.

The term ‘victim’ refers to the person on the receiving end of abuse or violence. For the purpose of this study, it refers to a female. Data collected from police, refuges and emergency departments suggests that women are the victims in most DV cases (Jasinski, 2001, p. 13). Research in Australia “has shown that violence generally, and particularly domestic violence, is mainly carried out by men” (Bagshaw & Chung, 2000, p. 1). In a 1998 South Australian study on the prevalence of DV, among 540 respondents who had experienced some form of DV (physical and/or emotional), nearly two-thirds was perpetrated by a male towards a female. This was double the percentage of female perpetrators towards their male partners (Taylor et al., 1998). An Australian survey conducted by Mouzos and Makkai (2004) found that over one-third of 6,677 women who had an intimate partner (former or current) reported experiencing some form of partner violence over their lifetime. The findings from the 2005 ABS Personal Safety Survey demonstrated that females were more likely than males to experience actual, threatened or attempted acts of sexual or physical violence from their current or former partners (ABS, 2006b, p. 11).

By using the term ‘victim’ I propose that a woman is a ‘target’, victimised by and subjected to a man’s abuse. I do not consider the term or concept of ‘victim’ to mean, or refer to, passivity or weakness (Jordan, 2002). Others use the term ‘survivor’ as this emphasises that battered women are courageous and strong individuals who have survived attacks (McGee, 2001), similar to the term used in the report published by the Salvation Army Crisis Service (2008). They referred to women who have experienced DV as ‘victims/survivors’ as
“[t]his term acknowledges the strength and resilience shown by women who have experienced or currently live with domestic violence” (Seeley & Plunkett, 2002, p. 3). Most women in my study did not refer to themselves in any of these terms, while only a couple said they are ‘survivors’ and one woman said “I am a woman of strength”. Hence, throughout the thesis, I will refer to women who have been subjected to MIPV as simply ‘women’. This implies that they have been targeted and victimised, they are indeed survivors—strong, resilient, resourceful women. When citing other sources, I will use their terms such as ‘victim’, ‘survivor’, ‘battered women’ or ‘recipient’.

The next term refers to the subject of the thesis, that is, ‘non-physical’ forms of violence. In a general sense non-physical forms of violence refer to all other violent behaviours and acts by an intimate partner that do not involve actual physical contact. Yet, currently there are several terms used in the literature that describe and label non-physical forms of violence and they tend to be used interchangeably by different authors. Some include non-physical abuse, verbal battering or abuse, emotional abuse or maltreatment, psychological abuse, aggression, violence or maltreatment or mental or psychological torture and emotional controlling (Bagshaw, Chung, Couch, Lilburn, & Wadham, 2000; Follingstad, 2007; Hegarty, Taft & Feder, 2008; MacKinnon, 2008; Marshall, 1996; Outlaw, 2009; Partnerships Against Domestic Violence, 2001; Patton, 2003; Ro & Lawrence, 2007; Tolman, 1992, 1999). Despite the inconsistencies in the use of these terms in the literature, I will use them as they are used by the authors. I prefer to use emotional and psychological abuse (EPA), which I define and describe in detail in the literature review section.

Finally, when I refer to Australian legislation, I talk about the statewide intervention, protection and restraining orders, which provide definitions of domestic and family violence.

**Approach to understanding the gendered concept of emotional and psychological abuse in heterosexual intimate relationships**

When I commenced this study I did not understand why EPA occurred, as it had in my own relationship. Based on the current literature’s emphasis on the problem of conceptualisation of EPA and disagreement as to what exact behaviours need to be included in a comprehensive definition, I was more interested in identifying what behaviours constitute EPA. I was sympathetic to a psychological perspective that focussed on identifying and measuring the behaviours of EPA, rather than the context in which they occurred. I tried to find out what women understood to be EPA and what behaviours they believed to constitute it, which I reported faithfully. Through the course of the study I began to understand that EPA can be gendered and its key components are control, domination, constraint, and manipulation of a
woman by her male partner within an intimate relationship. While the key focus of my research was to look at the behaviours and their effects, I took a particular position in relation to the topic that I am now only able to explain. This is most evident in the ways that particular behaviours centred around gendered understandings of femininity where clearly control within relationships was being exerted, such as through sexual disregard and coercion, and criticism of women’s appearance, and the effects these behaviours have on women. Behaviours of EPA have a wide range of control tactics and it appears that these abusive behaviours towards a partner are rooted in the context of control.

Over time, my approach to understanding women’s experiences of EPA became informed by a number of key feminist (or feminist-informed) writers. Johnson’s concept of intimate (patriarchal) terrorism and Stark’s concept of coercive control are similar to the concept of EPA. Johnson suggests that intimate terrorism includes the presence of control which has distinct abusive behaviours and different dynamics and outcomes compared to situational, occasional, or so-called common couple violence. Intimate terrorism is when a man systematically controls his partner by using physical violence and a patterned variety of multiple tactics such as isolation, threats, economic subordination and other control tactics (Johnson, 1995). He further suggests that intimate partner terrorism is perpetrated predominantly (although not exclusively) by men, in heterosexual relationships (Johnson, 2009). If men are able to achieve control over women successfully using psychological abuse, they may not need to escalate to physical violence (Johnson, 1995). According to Stark (2007) coercive control is ongoing and personalised, and perpetrators use diverse means to intimidate, dominate, humiliate, hurt, exploit, and isolate the victims. Frequently victims of coercive control are cut off from friends, family and other supports, and are deprived access to transportation, communication, or money. Stark (2007) indicated that coercive control is gendered and asymmetric. “Asymmetry in sexual power gives men (but rarely women) the social facility to use coercive control to entrap and subordinate partners” (Stark, 2007, p. 105). Furthermore “the asymmetry in coercive control reflects the asymmetric nature of sexual inequality, not the fact that women are less aggressive, controlling, or domineering than men. All assaults on women by their male partners have a sexual component, a fact reflected in the clustering of abuse related injuries to the face, breasts, abdomen, and other body parts identified with female sexuality” (Stark, 2007, p. 377). Use of violence that is more persistent, injurious and systematic (i.e. instrumental violence) in the maintenance of control is vastly more commonly perpetrated by men. In addition, men may use violence when they experience loss of control, that is, they become violent when they are not experiencing control over women (Kimmel, 2002).
Summary of chapters

There are eight chapters in this thesis. In this chapter I have introduced the thesis and explained my aims in conducting the study. Chapter 2 provides a review of the literature on emotional and psychological abuse. First, I briefly introduce EPA and demonstrate its prevalence in Australia. I then go on to discuss the marginality of research on EPA and the different terms that are used in the literature. I describe the different aspects: intent; frequency, duration or intensity; outcome and effects; women’s perceptions; and patterns of behaviour. All these terms are aspects of the definition of EPA. I provide examples of definitions developed by researchers and compare them with Australian legislation. I highlight how Australian legislation is inconsistent and narrow in its definition of DV and, in particular of EPA. I discuss the categories and behavioural attributes of EPA and then provide information and examples from the general literature and Australian government and other organisations’ publications. I conclude this chapter by discussing the literature on women’s journeying away from MIPV. In this section I talk about women’s awareness of EPA and their non-recognition. I then describe some of the turning points women mentioned in other research studies, experiences of support and responses from formal and informal networks, and some aspects of recovery and journey away from intimate partner violence.

In Chapter 3, I discuss the research methodology, methods and procedures. I discuss my phenomenological, feminist and narrative approach to research. I report my chosen method of gathering information (in-depth interviews), the recruitment process (through support services and advertisement), and interview and questionnaires procedures. I discuss my ethical approach and data analysis. I then outline the demographic of participants and conclude this chapter with the limitations of my study.

Chapter 4 presents the findings of my study and reports women’s experiences of EPA, particularly the behaviours perpetrated by their male partners. Based on what women described, I identified several categories of behaviours: threats; undermining, destabilising or invalidating; indifference, discounting or disregard; isolation, restriction or monitoring; criticism, denigration or humiliation; and domination, control, manipulation or coercion. I identified 35 different types of behaviours reported by the women in my study.

In Chapter 5, I describe the negative effects of EPA that women reported. These were arranged into four main categories with effects on their: emotional wellbeing; psychological wellbeing; physical wellbeing; and social and economic effects. Based on these narratives, I identified 22 types of negative effects.

Chapter 6 outlines women’s awareness of EPA and the process of their realisation of the abuse. In this chapter I discuss several themes. I first talk about women’s difficulties in
acknowledging abuse. I then describe the awareness and turning points that helped them realise and perceive their relationship as abusive and unhealthy. Next, I outline the aspects that contributed to women’s difficulty in leaving the relationship. In this chapter, I also highlight the post-relationship journey and provide women’s examples of definitions of EPA.

In Chapter 7 I analyse women’s experiences of formal and informal sources of support, organising my discussion in terms of helpful and unhelpful experiences. Finally, Chapter 8 concludes the thesis. In this chapter I briefly discuss the findings, and relate them to future research and make suggestions for change.
Chapter 2

Literature review on emotional and psychological abuse

In this chapter I introduce the topic of emotional and psychological abuse and outline why this form of abuse has been marginalised in the research. I discuss the terms and factors that contribute to the definitions. I then outline categories and behaviours that are considered to be emotionally and psychologically abusive. I review the negative effects reported in the literature and conclude the chapter by discussing the factors relating to journeys away from MIPV. In this last section I examine awareness of EPA, the support and responses from formal and informal sources of support and recovery, and the journey away from MIPV.

Introduction

Two of the first researchers to describe behaviours that would today be considered to constitute psychological abuse were Hilberman and Munson (1977–1978 as cited in Marshall, 1994). Their interviews with 60 battered women revealed experiences of non-physical forms of abuse (behaviours). Over the years, the use of non-physical violence in intimate relationships has become well established in the literature (Engel, 2002; Felson & Messner, 2000; Follingstad & DeHart, 2000; Follingstad, Helff, Binford, Runge, White, 2004; Hegarty & Bush; 2002; Marshall, 1999; Nancarrow, Burke, Locke, Viljoen & Choudhury, 2011; Outlaw 2009; Piispa, 2002; Strauchler et al., 2004). Mahoney, Williams and West (2001), Outlaw (2009) and Semple (2001) suggested that EPA is more common among intimate relationships, than sexual or physical abuse. It can be considered as a common denominator in violent intimate relationships (Anderson, Bouletter & Schwarts, 1991). However, according to some researchers, research in this area remains limited (Lawrence, Yoon, Langer, & Ro, 2009) and inconsistent (Kelly, 2004). It has received less attention than physical abuse, even though emotional abuse has serious consequences (Faver & Strand, 2007). This is mainly because psychological abuse is generally viewed as less detrimental, with less immediate concerns than physical violence. It has only recently been recognised and examined in more detail as an entity in its own right (Ali, 2007; Dal Grande et al., 2000; Nancarrow et al., 2011, Outlaw, 2009; Taylor et al., 1998).

Little detailed, self-reported research has been done in Australia on EPA, and even less is published and made publicly available. Most of the research is quantitative and studied along with physical and sexual abuse. For example, the studies conducted by the ABS, such as the Women’s Safety Survey (1996) and the Personal Safety Survey (2005), researched safety at home and in the community. In particular, they focused on measuring men’s and
women’s experiences of physical and sexual violence. Interestingly, they collected data on emotional abuse experienced by women from current partners only. This data is only accessible in the form of Confidentialised Unit Record Files and requires sophisticated research skills to analyse the data. Both studies reported that “Consideration was given as to whether … emotional abuse should be included in the definition of violence. It was decided to exclude [it] from the definition of violence because of the high degree of subjectivity associated with measuring these concepts …” (ABS, 1996, p. 3; ABS, 2006b, p. 5).

The Australian studies that have attempted to estimate the prevalence of EPA in intimate partner relationships found that a great number of women reported this experience. A South Australia study surveyed 2767 participants (men and women who were currently married, in de facto relationship, separated or divorced, widowed or had previous long-term relationships). Of these, 20% indicated that they had experienced DV. Of those who experienced DV, 76% reported experiencing an emotionally abusive relationship. A higher percentage of women (69%) experienced emotional abuse than men (see Table 1, Taylor et al., 1998). A second study was conducted in 1999 and gathered information from 5480 male and female respondents who were currently or previously in intimate, long-term relationships. Of these, 18% reported DV. Emotionally abusive relationships were reported by 79%. Once again, more women (71%) reported emotional abuse in the relationship (see Table 1, Dal Grande et al., 2000).

Table 1: Prevalence of emotional abuse by a current partner or an ex-partner (female experiences only)

<table>
<thead>
<tr>
<th>Variable</th>
<th>1998</th>
<th>1999</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social abuse such as restricting social freedom and isolation from family and friends</td>
<td>60%</td>
<td>57%</td>
</tr>
<tr>
<td>Economic abuse such as withholding money or deliberately giving inadequate funds for household needs</td>
<td>45%</td>
<td>46%</td>
</tr>
<tr>
<td>Spiritual abuse such as denying the practice of religion</td>
<td>13%</td>
<td>11%</td>
</tr>
<tr>
<td>Other abuse such as threats and intimidation, constantly being called names or being humiliated</td>
<td>78%</td>
<td>79%</td>
</tr>
<tr>
<td>Any of the four above</td>
<td>281 (100%)</td>
<td>548 (100%)</td>
</tr>
</tbody>
</table>

Source: (Dal Grande et al., 2000; Taylor et al., 1998)

In a later study, Hegarty and Bush (2002) approached several general practices in Brisbane in 1996 and gathered 1836 self-reported questionnaires on histories of partner abuse. Of the total number of participants, 37% had experienced abuse in an adult intimate relationship. One in three women (33.9%) had experienced emotional abuse. According to the Women’s Safety Survey (WSS) in 1996, during the previous 12 months, 179,100 women experienced emotional abuse by their current partner. Based on these findings, Access Economics (2004)
estimated the prevalence of DV against women from 2002 to 2003 and indicated that 196,200 women (allowing for the fact that some women experienced more than one form of abuse) experienced emotional abuse. The Australian component of the *International Violence Against Women Survey* (IVAWS) conducted across Australia between December 2002 and June 2003, found that of the 5074 women who were currently in a relationship, between 37 and 40% reported experiencing one type of controlling behaviour from their intimate partner. Within these behaviours, the highest percentage of women (28%) reported insults, name calling or put-downs (Mouzos & Makkai, 2004).

A phone-in interview with 102 women in South Australian study showed that 89% experienced verbal abuse, 84% experienced emotional abuse, 67% social abuse, while most women also experienced economic abuse (Bagshaw et al., 2000). In another Australian study all 134 female DV survivors reported experiencing emotional abuse. Of these, 94% discussed experiencing deliberate manipulation of the truth and/or situation from their partner. Their partners would make them question their normality and/or stability, which some women named ‘crazy making abuse’ (Evans, 2007). From the case files of 52 clients of the Domestic Violence and Mental Health service, Laing and Toivonen (2010) identified that: 94% of clients had experienced emotional and psychological abuse; 44% had experienced social isolation; and 36% had experienced financial abuse. In a Queensland-wide study (conducted in 2009 and published in 2011), a third (33%) of 1857 women had experienced some form of non-physical violence at some time in their current relationship. Out of the total sample, a quarter of these women experienced psychological abuse alone, 18.5% experienced social–psychological abuse, while 5.4% experienced economic abuse (Nancarrow et al., 2011, p. 5).

In a study by Laing (2010), concerned with family violence and family law, the following forms of abuse were reported most frequently by the women: physical abuse, financial abuse, emotional/psychological abuse, controlling behaviours, and using their children and the system to abuse.

Despite the significant incidence of emotional and/or psychological abuse as indicated in this range of studies, qualitative research in this area has been limited. Next I outline some of the reasons for its marginality as an entity, and present counter arguments for greater attention to be paid to EPA.

**Marginality of emotional and psychological abuse research and its counter arguments**

There are four key reasons why research in the area of EPA has been marginalised. First, there is a lack of research in this area because physical and sexual abuse is considered to be
more significant (Lammers, Ritchie, & Robertson, 2005), and have more dramatic or life-threatening effects on women than non-physical abuse (Tolman, 1999). Capezza and Arriaga (2008) suggest that people view both high and low levels of psychologically aggressive acts similarly and thus tolerate such instances of aggression, because they do not realise how damaging it can be. Consequently, concern for the extent of EPA may be concealed (Tolman, 1999). The growing body of research in this area has found that EPA can have devastating and negative effects (Bagshaw et al., 2000; Baldry, 2003; Murphy & Hoover, 1999), and be as or more devastating and damaging than physical abuse (Arias & Pape, 1999; Bagshaw et al., 2000; Coker, Smith, Bethea, King, & McKeown, 2000; Evans, 2007; Jones, Davidson, Bogat, Levendosky, & Eye, 2005; Kelly, 2004; Lawrence et al., 2009; Marshall, 1996; Murphy & Cascardi, 1993; O’Hearn & Davis, 1997; O’Leary, 1999; Sackett & Saunders, 1999; Seff, Beaulaurier, & Newman, 2008; Street & Arias; 2001). As well, it may be more detrimental to mental health (Lawrence et al., 2009).

A growing literature indicates that more abused women reject the concept that “sticks and stones may break my bones but words will never hurt me” (Bagshaw et al., 2000, p. 23; DeKeseredy & Schwartz, 2001, p. 7). In a study by Follingstad, Rutledge, Berg, Hause, & Polek (1990), emotional abuse was rated by two-thirds of 234 battered women as a factor that had more negative effects on them than physical aggression. In Fitzpatrick and Halliday’s (1992) study, women reported that they would rather be hit than suffer from constant mind games and put-downs inflicted on them by their abusive partner. These devastating elements in women’s lives and their experiences of EPA are “crucial to the development of a comprehensive knowledge base documenting violence against women” (Ali, 2007, p. 73).

A second reason for the marginality of EPA may involve the initial notion of this abuse being viewed within the context of or linked to physical abuse (Follingstad, Coyne & Gambone, 2005; Follingstad & DeHart, 2000; Jones et al., 2005; Lammers et al., 2005). Physical abuse can have two outcomes for women. It can include physical harm and psychological (emotional) impact such as embarrassment or humiliation when slapped or hit. Psychological abuse and physical abuse have similar functions of control and domination over another person (Tolman, 1999). Research indicates that non-physical abuse in adult intimate relationships often accompanies physical abuse (Anderson et al., 1991; Follingstad & DeHart, 2000; O’Hearn & Davis, 1997; Outlaw, 2009; Tolman, 1999), and they may be used as a base for the initiation and continuation of physical abuse (Jones et al., 2005). Some research studies have shown that the early presence of psychological abuse can be a risk factor and is likely to result in physical abuse in the future (Follingstad & DeHart, 2000; Henning & Klesges, 2003). Outlaw (2009) pointed out that there is strong evidence to
suggest that some categories of non-physical abuse operate as an apparent risk for physical abuse. Among those already abused, for example, it may increase the risk of more frequent violence. Tolman (1999) suggested that physical abuse can be perpetrated to reinforce the power of non-physically abusive tactics. In the study by Murphy and Cascardi (1993), participants were most likely to report physical aggression if they had the highest level of psychological aggression. Findings support the idea that attempts of coercive control over their partner over time often comes before the instigation of physical aggression.

Other researchers suggest that EPA is not always seen to signal or predict the occurrence of either sexual or physical abuse (Lammers et al., 2005) and, in some cases, psychological abuse may deviate from the dynamics of physical abuse (Follingstad & DeHart, 2000). Outlaw (2009) argued that experiencing one form of abuse does not necessarily indicate another. Perpetrators may use non-physical abuse to sustain the target person’s compliance and submission, even when physical violence has been discontinued (James & MacKinnon, 2010). Several researchers recognise that emotional and/or psychological abuse may exist in intimate relationships (Anderson et al., 1991; Follingstad & DeHart, 2000; Jones et al., 2005; Lawrence et al., 2009; Loring, 1994; Semple, 2001) and have distinctive negative effects (Loring, 1994; Street & Arias, 2001) independent of physical abuse. Lawrence and colleagues (2009, p. 22) pointed out that psychological abuse should be examined as a “destructive process in intimate relationships in its own right”, given that the occurrence of psychological abuse in non-physically abusive relationships is potentially high and that it may be more damaging to its victims than physical aggression.

The third reason for the marginality of EPA research is that it is confused with conflict (James & MacKinnon, 2010). It leaves no marks, making it harder to identify, recognise (Lammers et al., 2005) and comprehend (McCallum & Lauzon, 2005). There is still little recognition of non-physical forms of abuse between the perpetrator and the target person (MacKinnon, 2008). Furthermore EPA is not easy to prove (Burks, 2006) or detect (Queen, Brackley, & Williams, 2009). Symptoms of such abuse vary between individuals. They are not as obvious as physical abuse (Sable, 1998) and provide no visible evidence of abuse (Chang, 1996). For these reasons, women may be less likely to seek help (MacKinnon, 2008).

Finally, the main reason for marginality of research for EPA is due to the lack of consensus among researchers regarding the definition of this phenomenon (Follingstad, 2007; Katz, Arias & Beach, 2000; O’Leary, 1999; Schumacher, Slep, & Heyman, 2001; Semple, 2001; Wagner & Mongan, 1998), the methods of measurement (Follingstad & DeHart, 2000; Jones et al., 2005; Kelly, 2004; Murphy & Hoover, 1999; O’Hearn & Davis, 1997), labelling (use of different terms) (Katz et al., 2001; Lammers et al., 2005), and finally the behaviours or
patterns that constitute EPA (Follingstad & DeHart, 2000; Kelly, 2004). Consequently, it remains illusive. The individual experience of this form of abuse makes it difficult to create a universally accepted definition (Kelly, 2004). Nevertheless, despite this lack of consensus, definitions can be improved.

We need to examine EPA in intimate relationships as a factor in its own right, in order to understand its unique effects and nuances. Arguably, it is critical that intervention and prevention efforts concentrate on the effects of both physical and emotional abuse (Theran, Sullivan, Bogatm, & Stewart, 2006). Following Katz & Arias’ (1999) point of view, there may be diverse needs and services for the women experiencing only psychological abuse. A better understanding of EPA may help decrease the risk of escalation of physical abuse and raise awareness.

The next section outlines the EPA terminology in the literature and in the community such as information brochures and legislation in Australia. In doing so, I provide a rationale for using the term emotional and psychological abuse.

**Terminology**

There are many different terms used to describe non-physical forms of violence. Outlaw (2009) for example divided non-physical forms of abuse into three categories: emotional, social and economic. She argued that these categories should not be assumed to be alike, either in their prevalence or relationship to physical abuse. Instead, they should be divided and sorted into different categories, providing a better understanding of what they involve. I agree with MacKinnon (2008), who distinguished non-physical forms of abuse into emotional and psychological categories each with its own debilitating effects. Emotional and psychological abuse are often not differentiated either empirically or conceptually (Follingstad et al., 1990) and they are often used interchangeably or synonymously (O’Hagan, 1995). Although, terms such as ‘emotional’ and ‘psychological’ can hardly be regarded as synonymous, because they are not the same, but they are not entirely separate experiences either. Generally speaking, psychologically abusive behaviour can be emotionally abusive and vice versa. Emotional abuse impairs emotions and inflicts emotional pain. Psychological abuse on the other hand impairs mental health (O’Hagan, 1995).

In addition, these terms are sometimes used as an umbrella for other forms of non-physical abuse (Lammers et al., 2005). For example, the Salvation Army Crisis Service (2008) describes family violence in their brochure as: physical, sexual, verbal/emotional, psychological, financial, social, harassment/intimidation, stalking, damaging property, spiritual and cultural, pet abuse, and even IT-related abuse (texting, e-mailing or messaging to
intimidate, harass or abuse). Many are forms of emotional and/or psychological abuse. Using these terms separately or interchangeably makes it hard to define EPA. MacKinnon (2008, p. 1) suggests that the use of different terms makes it “unclear as to whether there is a difference in the phenomena to which they refer”. Using different terms also implies different negative impacts, which range from maltreatment to aggression to victimisation to abuse to battering to torture (Follingstad, 2007).

The term ‘abuse’ also needs some clarification. Abuse is used most often in collaboration with non-physical maltreatment in the literature. As well, abuse is currently used along with emotional, psychological, and economic in South Australian, Tasmanian, Queensland and Victorian domestic and family violence legislations. MacDonald (1998) differentiated violence from abuse by stating that violence is more clear-cut. According to Mouzos and Makkai (2004, p. 9), the term ‘violence’ in a narrow sense “is generally understood as an incident in which an individual intentionally injures another person”. This definition does not include emotional and psychological violence. Abuse on the other hand implies neglect, misuse or maltreatment (MacDonald, 1998). According to Pope and Ferraro (2006, p. 3) “Actions become abuse when done with the intention and for the purpose of establishing or reinforcing power-over”.

In contrast, other researchers state that abuse usually implies severe or potentially harmful effects from behaviours and implies an excessive or unequal expression of dominance or power (Follingstad, 2007; Murphy & Cascardi, 1993). However, there is no consensus as to the level of severity or kind of injury that must occur for this term to be used. Consequently, some professionals consider that ‘abuse’ should be saved for situations in which there is serious risk to limbs or life (MacKinnon, 2008). For example, Follingstad (2007) and Follingstad and colleagues (2005) opted for the use of psychological ‘maltreatment’ or ‘aggression’ instead, as these terms cover a variety of actions and behaviours, which vary from mild to moderate to severe. These terms do not entail a threshold on the level of severity, but they can indicate whether an individual was affected; but they do not necessarily imply harm (Follingstad, 2007) or that all psychological aggression is abusive (Follingstad, 2009). For this reason, Follingstad (2007, 2009) and Follingstad et al. (2005) suggested that the term ‘abuse’ should be used to signify those psychological behaviours and actions that are of a more offensive nature, which clearly have a negative effect on the recipient and produce psychological harm.

How can we measure the spectrum of mild to severe and who is going to define the spectrum? Kelly (2004) highlighted that the experience of non-physical abuse is individual. For example, one woman may find a particular behaviour offensive and consequently
damaging, while another may find the same behaviour tolerable and acceptable. Hence, it is hard to measure and determine the severity of behaviour so that it is applicable to everyone. The level of abuse would need to be perceived by women individually. I concur with MacKinnon (2008), who argued that the term ‘abuse’ should be used along with ‘psychological’ or ‘emotional’. Firstly, abuse implies the use of subtle and insidious behaviours that can be much more serious than ‘simply’ yelling. Secondly, abuse captures the serious, negative long-term effects, just as, if not more, than physical abuse. We have to consider EPA as serious, in any form, be it mild, moderate or severe.

The behaviours should be generally accepted as ‘abusive’ acts. Thus I use ‘abuse’ instead of the other terms mentioned above or in Chapter 1 (see terminology) in collaboration with ‘emotional’ or ‘psychological’. ‘Emotional’ abuse and ‘psychological’ abuse are used to define and refer to non-physical forms of abuse here. I perceive these as umbrella terms, which include other types of non-physical abusive behaviours and actions. They entail individual purpose and intent and have their own consequences. This is not to say that they are completely separate experiences. The next section of the literature review will outline the definitions of EPA in more detail, from the academic literature to Australian legislation and other publications.

Definition

Academic literature

As mentioned in the previous chapter, the definition of EPA in adult intimate relationships varies greatly. Schumacher and colleagues (2001, p. 256) argued that despite existing measures of this form of abuse “there is no consensus on what psychological abuse is and what [it] is not”. Others use one or a combination of the following factors and frameworks to identify and define EPA: intent; frequency, duration and intensity; outcome and effect; recipient’s perception of harm; and patterns and types of behaviours (described below). Often the ‘definition’ is merely an example of behaviour. Each of these factors reveals a different piece of a complex picture, which affects our approach to defining intimate partner violence (Mahoney et al., 2001). Having such a variety of definitions makes it harder to validate a woman’s experience, especially if her experience and perception of abuse does not fit the established definition. Thus, the factors I describe in more detail below are likely to affect our interpretation of EPA. The descriptions cannot be used on their own to create a definition.

Intent

Some researchers include the ‘intent’ of the perpetrator to hurt a woman when defining EPA.
It is seen as the extent to which the perpetrator deliberately or consciously intended to harm (James & MacKinnon, 2010). Similarly, Murphy and Cascardi (1993, p. 202) defined psychological abuse in terms of coercive “acts intended to produce emotional harm or threat of harm”. For example, those behaviours that are used intentionally to control and reduce a victim’s status (O’Hearn & Davis, 1997), lower self-esteem and/or cause a woman to be fearful (Henning & Klesges, 2003) comprise emotional abuse. However, Marshall (1999) considered that the intent of the abusive act may be irrelevant, as an act may happen in play or fun, or in a loving or dominating manner and can also occur in a calmer context. Regardless of the intent, the content of the message (Marshall, 1994), repetition or combination of messages or behaviours could still harm the recipient (Marshall, 1999). Marshall (1996, p. 382) suggested that it is “important to avoid implications of intent whenever possible” for the following reasons. First, a man may believe that his intention was to help, and not to hurt his partner. Second, the behaviour would be abusive if it had the potential or effect of destabilising or harming the partner, thus the intention may not be relevant or important.

Follingstad (2007) indicated that ‘intent’ is not likely to be the only criterion to define psychological abuse. It could be difficult to use intent in an assessment of psychological abuse, simply due to the different descriptions of the same event by each partner and their disagreement on intent (Tolman, 1999). Thus, according to Follingstad (2007), to determine true intent would require clarification and confidence in the woman’s account, the perpetrator’s or a third party’s account and judgment of the intent.

**Frequency, duration, intensity**

The second aspect of the definition of EPA is ‘frequency, duration or intensity’. Loring (1994, p. 1) described emotional abuse as an “ongoing process in which one individual systematically diminishes and destroys the inner self of another”. Tolman’s (1999) point of view was that frequency and intensity must be considered when defining psychological abuse. Similarly, in more recent years, Follingstad (2007) argued that there should be clarification as to whether certain actions and behaviours should be of a specific duration, or frequency, or have some sort of pattern before they produce harm and become classified as abusive. In Follingstad and DeHart’s (2000) study, compared with other variables, frequency and/or duration (which may have been perceived as less subjective) were considered by a sample of psychologists to be more likely to help identify behaviours (depending on the behaviour perpetrated) as psychological abuse. Baldry (2003) found similar results, indicating that the frequency of different forms of violence was more important than the length of time women experienced the abuse.
Follingstad (2007, p. 451) suggested that frequency and/or duration “could not necessarily be used to automatically assume that harm followed from more of the behaviours”. It is not always about the number of times some women perceive themselves as abused, but rather how they associate the degree or severity of the behaviours (e.g. humiliation) with abuse (Queen et al., 2009). For example, you may need to be told only once “I’m going to kill you if you leave me” for it to be abusive, and effective.

**Outcome or effects**
A third perspective of the EPA definition and labelling behaviours as abusive is the ‘outcome’. Several researchers have made outcome part of their definition of EPA. For example, Pipes and LeBov-Keeler (1997, p. 587) believed that definitions of psychological abuse were missing a factor of feeling ‘hurt’. They attempted to create a definition of psychological abuse for their research that would “capture individual’s subjective experience of distress”. Murphy and Hoover (1999, p. 40) included effects such as “production of fear, an increase in dependency, and damage to the self concept” in their description. However, the ‘outcome’ variable has drawbacks as a definitional term. The first drawback relates to awareness, that is, whether the ‘recipient’ links the experience with the specific outcome. A second issue is whether it can be considered to be abusive if the recipient is not experiencing any emotionally or psychologically damaging effects (Follingstad, 2007). As previously mentioned behaviour may still be considered abusive, even if it does not produce the desired outcome (Marshall 1994). James and MacKinnon (2010) added that effect is often related to the intent to harm, duration of the abuse and the woman’s vulnerability.

**Women’s perception**
Women’s perception of these behaviours is the fourth defining factor. Researchers in the field of interpersonal abuse emphasise the importance of the victim’s perception of abuse and perpetrator’s thought processes and intent (Follingstad & DeHart, 2000; Murphy & Cascardi, 1993; Pipes & LeBov-Keeler, 1997; Waller, Corstorphine, & Mountford, 2007) to determine whether abuse has occurred. Whether the behaviour or act is labelled abusive is influenced by the recipient’s interpretation of the event, reasoning or account of whether harm was caused (Follingstad & DeHart, 2000), or if the behaviour or event was experienced as problematic or harmful (Follingstad, 2009). On the other hand, in Follingstad and DeHart’s (2000) study, a woman’s perception of harm and the perpetrator’s intent to harm were perceived by a sample of psychologists as less important than the frequency and/or duration of behaviours. The perpetrator’s intent and women’s perception were considered to be more important when
labelling behaviours were initially low frequency. These researchers considered that their sample may have viewed the victim’s perception of harm as less important due to the possibility that victims may not accurately classify, or may distort and misinterpret the presence of abuse. Victims may be unable to identify psychologically abusive behaviours, or may be overly sensitive and label behaviours as abusive, while others perceive no such occurrence. There is a concern that women might over- or under-identify psychological abuse (Follingstad & DeHart, 2000).

In another study, the man’s intent and the woman’s perception were much more likely to be considered by laypersons than psychologists as factors that determine behaviours as psychologically abusive (Follingstad et al., 2004). Marshall (1996) indicated that damaging messages could be expressed through certain words, gestures, tone of voice or facial expression and, because of these factors, the recipient or observer may or may not be able to recognise them as abusive. Loring (1994) noted that women who experience both psychological and physical abuse may have less difficulty labelling the situations as abusive as women who only experience psychological abuse. Hence, rather than misinterpreting the behaviours, women may simply struggle to identify or label them (as I did). Marshall (1999, p. 70) pointed out that “there is no need to posit awareness in order to posit effect”, as people are not always aware that their behaviours, attitudes or beliefs are influenced by external factors. In other words, not being aware does not mean the behaviour or act did not occur. Yet, Follingstad (2007) raised a question as to whether individuals who are unaware of psychological abuse can be ‘trusted’ to label such abuse. She also discussed poorly coping and overly sensitive individuals, who may misinterpret, develop delusional beliefs or intentionally twist the meaning of the behaviour. Some of these claims may be problematic and may produce reluctance to label the partner ‘abusive’. Thus, using woman’s perception alone may create problems when creating a definition, or identifying whether a woman was abused.

**Patterns of behaviour**

Other researchers describe patterns of emotional abuse by characterising in terms of overt and covert (Loring, 1994), obvious and subtle behaviours (Marshall, 1999), or acts of commission and omission (MacKinnon, 2008). Overt abuse is openly demeaning and involves insults, threats of abandonment and violence (Loring, 1994). Marshall (1999) pointed out that obvious abuse includes: controlling or dominating statements or acts and verbal aggression. These acts are usually easily recognisable and understood as harmful and a woman would be able to describe and explain the outcome of her feelings with ease and/or an observer would be able
to see the potential for harm. Overt forms of abuse may be less harmful than subtle forms because people may be able to defend themselves against overt forms more readily. MacKinnon (2008) highlighted that acts of commission could be perpetrated through threats of harm, threats of or actual abandonment, volatile outbursts of anger and ongoing verbal abuse, and damaging a woman’s reputation.

Covert abuse on the other hand is more discreet. It may involve emotional withdrawal, negative labelling, and projection of blame and disregard of victim’s emotions (Loring, 1994). These acts of omission may include the perpetrator showing a lack of affection towards the woman, ignoring her, conducting ‘silent treatment’ or failing to respond to her needs or feelings (MacKinnon, 2008). Marshall (1999) described those acts as more difficult for an observer to perceive as potentially harmful and for a woman to be less likely to be able to identify them and her feelings in response to them. Subtle acts could be done in a caring and loving manner, which also makes them difficult to recognise. Marshall (1994, 1999) found that subtle forms of abuse had more negative effects on women’s wellbeing and sense of self; they were as harmful and, in some cases, more damaging than overt forms of abuse. She believed that when seemingly effortless and subtle tactics fail, a man may move on or escalate to coercive and dominating tactics, as well as to physical violence. She proposed that the current perspectives of this abuse misses too much that is abusive, since different acts can cause emotional and psychological harm. If measures of the phenomenon were limited to obviously controlling, dominating or verbally aggressive behaviours, the knowledge would be biased (Marshall, 1999). Moreover, women may have different ideas or perceptions of what is overt or covert to them.

Next, I provide examples of definitions that describe EPA in the literature. These definitions have some or all of the above factors.

**Definition examples**

### Academic literature

**Psychological abuse**

Psychological abuse was described by Katz and colleagues (2000, p. 351) as a form of abuse that “communicates powerful negative messages about the recipient’s worthiness, capability to make her own choices, or both”. Outlaw (2000, p. 264) thinks that its “purpose is to undermine the security of the victim’s own logic and reasoning” and make a women feel as if she is losing her mind. MacKinnon (2008, p. 9) defined it as “an ongoing process of hostile verbal and nonverbal behaviour which, over time, has the effect of eroding or destroying the target person’s psychological sense of self” and social competence. James and MacKinnon
(2010, p. 120) considered that psychological abuse cannot be reciprocated, because the “target person is not in a position to dominate in the relationship or destroy the other’s sense of self” unlike emotional abuse. It is more likely to involve men as perpetrators and women as targets.

Over time, repeated episodes of either emotional or psychological abuse can weaken women’s sense of self (MacKinnon, 2008). Overall, while some atrocious behaviours may almost always be labelled abusive, others may not be perceived as harmful, and in order to determine, define or label behaviours as emotional or psychological abuse, factors such as intent of the perpetrator, recipient’s perception of harm, and frequency and/or duration or outcome should be taken into account (Follingstad & DeHart, 2000).

**Emotional abuse**

MacKinnon (2008, p. 7) defined emotional abuse as an “ongoing process of hostile verbal and nonverbal behaviour that is likely to have an adverse effect on the target person’s emotional development and behaviour”. Another definition of emotional abuse was proposed by Lammers and colleagues (2005, p. 31) as:

… the patterned non-physical degradation of one person by their partner through the conscious or unconscious gaining, regaining or maintaining of power through the repetitive overt and subtle acts and messages that control or attempt to control, which negatively affects the abused partner’s emotions or self-value in the long term.

Non-physical abuse is often used by men to gain or reinforce power and control over their partners (Mezey, Post, & Maxwell, 2002; Pence & Paymar, 1993). Some researchers consider emotional abuse to be a patterned, systematic and lasting abuse. Perpetrators use it to reduce victim’s self-worth and sense of self (Loring, 1994; O’Hearn & Davis, 1997; Shepard & Campbell, 1992). Tually, Faulkner, Cutler and Slatter (2009, p. 5) described emotional abuse in terms of its behaviours:

…blaming the victim for all problems in the relationship, constantly comparing the victim with others to undermine self-esteem and self-worth.

**Australian legislation**

Murray and Powell (2011), Wilcox (2010) and the National Council to Reduce Violence Against Women and their Children (NCRVAWC) (2009) have done detailed analyses of Australian legislation and policy. Here, I briefly examine specific legislation (intervention, protection or restraining orders, statewide) as an example of the way EPA has been understood and defined in Australian public policy. The legislation in several jurisdictions
(Victoria, Queensland, South Australia and Tasmania) expressly includes emotional and psychological abuse as a form of domestic or family violence. The definition of EPA is described in terms of effects or harm or duration and intent, but predominantly they provide the definition in terms of behaviours, which I will discuss later in this chapter.

I commence by referring to the *Victorian Family Violence Protection Act 2008* because it has new provisions and significant changes in terminology and definitions of different forms of family violence in comparison with the older Victorian *Crimes (Family Violence) Act 1987*. The revised Act acknowledges multiple forms of abuse that occur in family violence and these changes are significant in understanding DV in its broadest sense.

The Act defines emotional or psychological abuse as “behaviours by a person towards another person that torments, intimidates, harasses or is offensive to the other person” (Victorian Act, 2012, p. 15).

Similarly, Queensland reviewed its *Domestic and Family Violence Protection Act 1989* and released an updated version in September 2012, including emotional and psychological abuse. Its definition is exactly the same as the Victorian Act, since it was noted to be a good example for the definition of domestic and family violence (Queensland Government, 2012). In the South Australian *Intervention Orders (Prevention of Abuse) Act 2009*, emotional or psychological harm is described in terms of ‘effect or harm’. It is described as “an act of abuse against a person resulting in emotional or psychological harm” which includes: “mental illness; nervous shock; distress, anxiety, or fear that is more than trivial” (South Australian Act, 2012, p. 6). The Act provides extensive examples of behaviours, which are more detailed than other Australian jurisdictions, but has a narrow definition, which might not be applicable to some women. In Chapter 5, I will show that women who experience EPA live with other effects as well.

In the *Tasmanian Family Violence ACT 2004*, emotional abuse or intimidation is defined as the pursuit of “a course of conduct that he or she knows, or ought to know, is likely to have the effect of unreasonably controlling or intimidating, or causing mental harm, apprehension or fear, in his or her spouse or partner” (Tasmanian Act, 2005, p. 13). This definition includes intent and outcome factors and does not provide examples of behaviours to describe EPA. In contrast, the Western Australian *Restraining Orders Act 1997* includes emotionally abusive conduct, but neither provides definition nor gives examples of such conduct. Other Australian jurisdictions (Northern Territory; New South Wales and the Australian Capital Territory) do not refer to, separately describe or define EPA.

Wilcox (2010, p. 7) highlighted that having EPA included in the “definitions of domestic violence reflects recognition by legislators of the non-physical means by which
abusers establish power and control”. The examples from current Australian legislation illustrate that the definitions of EPA are too narrow and do not fully cover the spectrum of non-physical forms of violence.

I now turn to the behaviours that fall under the category of EPA. I provide information from academic literature and Australian official government and organisations’ publications.

**Clustered behavioural attributes of emotional and psychological abuse**

**Academic literature**

Outlaw (2009, p. 264) pointed out that there is “lack of empirical work specifically examining the prevalence of the different types of non-physical abuse”. There is also no clear knowledge of which forms of non-physical abuse are most common. Any one of the behaviours may not necessarily be considered abusive in isolation, but a person who demonstrates or carries out several or all of the behaviours may be considered or labelled abusive. Compared with Walker’s (1979) cycle of violence (common in physically violent relationships), which features the tension building phase, gradually leading to an explosion of violence, followed by a honeymoon phase and expressions of remorse and willingness to change, emotional abuse differs in its timing. EPA can occur on a frequent or infrequent basis, with snide remarks, isolation, humiliation, denigration and monitoring, and insidious violence and covert communication including contradiction, denial, discounts, projection, abandonment and negative labelling (Loring & Myers, 1994). EPA can differ from the ‘cycle of violence’, due to its unpredictability, subtle manner, men’s lack of apology, and their feelings of entitlement or belief that the behaviour is justified. According to Loring & Myers (1994, p. 23), all of their emotionally abused participants described a “linear and virtually continuous pattern of overt and covert behaviour”.

Over time researchers have identified categories and clusters of behaviours to describe and measure EPA. Mostly these clusters and categories are similar but they have expanded over the past two decades. For example, Follingstad et al. (1990) described six categories of psychological abuse: isolation; verbal harassment and criticism; jealousy and possessiveness; threats of self-harm; threat of harm to property; and threats about the relationship. Marshall (1999) grouped psychologically abusive behaviours into seven categories: dominance; indifference; monitoring; discrediting; undermining; discounting; and isolation. Tolman (1999) classified the behaviours into: monopolisation; isolation; economic abuse; creation of fear; degradation; rigid sex role expectation; psychological destabilisation; emotional or interpersonal withholding and dependent expression of love. Follingstad and colleagues
(2005) developed 17 categories and in 2011 Follingstad presented reviewed 14 categories of psychological abuse.

Below are some of the main clusters and categories of behaviours I have identified in the literature. They are a combination of different reports, scales and findings by various researchers in the field (see Table 4) who labelled these clusters and categories. The categories that I describe below are: domination and control; intimidation, threats of violence or creation of fear; other types of threats or creation of fear; isolation and restriction; criticism, denigration, degradation and humiliation; indifference, discount and disregard; emotional and interpersonal withholding; monopolisation; psychological destabilisation; rigid sex role expectations; and economic abuse. These clusters are usually interlinked with each other and category labels may vary among researchers. I then provide examples of the behaviours described by the legislation in Australia.

**Domination and control**

Burks (2006) and Faver and Strand (2007) considered that the ultimate goal for using EPA in the context of IPV is power and control over the victim by the perpetrator. At the same time, perpetrators may use emotional attacks on their victims to feel better about their situation and themselves. Their standards and demands are usually unrealistically high and practically hard to attain (Burks, 2006). Men’s use of psychological abuse is frequently a sign of dominance and a need to gain power and control (Pence & Paymar, 1993).

Murphy and Hoover (1999) highlighted that behaviours constituting domination or control are assumed to produce fear or submission. A man may try to order his partner around to keep her at a power disadvantage (Burks, 2006). In some research, factors like control and intimidation were reported by victims of DV as most psychologically damaging (Strauchler et al., 2004) and were most frequently experienced (Bell, Cattaneo, Goodman & Dutton, 2008).

Other examples of such behaviours may involve interfering, making decisions for women (Follingstad & DeHart, 2000) or not allowing women to work, pursue education or participate in other activities (Burks, 2006; Follingstad & DeHart, 2000). Dowda (2009) found that the perpetrator feels entitled to tell their partner how to look, dress, talk, behave or feel. Control may be shown in reorganising things around the house, questioning or amending their partner’s decisions or choices or insisting on their knowledge of any given subject. Dowda (2009, p. 14) argued that “invasion of another person’s boundaries is the common element”. A man may try to use their children or punish, deprive or abuse them when he is angry with his partner or in order to control her (Laing, 2010; Murphy, 2010).

Possessiveness and jealousy are sub-themes of emotional abuse and may become...
aspects of control (Follingstad et al., 1990; Hays & Emelianchik, 2009). It could be considered abusive when a perpetrator starts controlling his partner’s behaviours and choices or interrogate contacts she makes (Follingstad et al., 1990).

**Intimidation, threats of violence or creation of fear**

Some of the behaviours in this theme may partially fall under domination and control, due to their similar outcome or intent. The perpetrator may perform any or all of the following behaviours: break objects; display radical mood changes; assume a frightening stance (Follingstad & DeHart, 2000); slam doors; yell and insult (Burks, 2006); and drive fast or recklessly to intimidate or frighten (Sable, 1998).

Fear can also be created through destruction of property (Porterfield, 1989) and throwing objects (not necessarily at the victim) (Burks, 2006). The most obvious form of creating fear is through the threat of physical harm. A man may threaten to harm children (Ali & Toner, 2001), pets, family members, friends or himself (for which she is identified as being responsible) (Bell et al., 2008; Burks, 2006; Follingstad et al., 2004; Henning & Klesges, 2003; Semple, 2001; Tolman, 1992). The male partner may keep a weapon on-site or within reach to instil fear in his partner (Murphy, 2010).

The use of emotional blackmail makes a woman conform and submit to protect herself and those she cares for (Burks, 2006). Threats can be unspoken or may include graphic descriptions of how a man is going to torment his partner (Follingstad et al., 1990). This type of threat has more effect on women who have been beaten previously by their partner. Even if the physical abuse happened a long time ago and has not recurred, a woman can still carry the emotional and mental scars. She knows from experience that her partner is capable of hurting her physically (Porterfield, 1989). Over a period of time, a woman may fail to respond in the expected manner, as she may build tolerance, which can result in escalates terrorising behaviours (Anderson et al., 1991).

**Other types of threats or creating fear**

A partner may use threats for other purposes than instilling fear of physical violence. These threats may create fear in a woman. This fear could take the form of: poverty; humiliation; lack of privacy (Tolman, 1992); losing her children (Laing, 2010; Tolman, 1992); abandonment (Anderson et al., 1991; Burks, 2006; MacKinnon, 2008; Murphy, 2010). Other behaviours may include where a man is threatening to end the relationship or divorce (O’Leary, 1999), or threatening to have an affair if the woman does not comply with his wishes (Follingstad et al., 1990; Follingstad & DeHart, 2000). These threats can fall under the
domination and control category, as this category could constitute the purpose of these threats.

Isolation and restriction
Follingstad and colleagues (1990) reported that isolation was created most frequently in their sample of physically battered women. By isolating the woman in the partnership, the intent is to restrict her social contacts and activities, consequently increasing her availability and dependency (Murphy & Hoover, 1999), while making her more subject to his influence (Anderson et al., 1991). General isolation involves monitoring (Burks, 2006; Murphy & Hoover, 1999) or controlling her activities and who she sees or speaks to (Murphy & Cascardi, 1993; Semple, 2001), thus weakening her support system (Anderson et al., 1991). There are many tactics men can use to isolate women. The behaviours may include: prohibiting visitors or being rude or hostile towards them; making fun of or putting down friends and family (Tolman, 1999); discouraging a woman from any sort of communication with friends or family (Marshall, 1999); and isolating her emotionally and geographically (Anderson et al., 1991). The partner may also refuse to let the woman work, make her late for appointments, or demand she account for her time (Murphy, 2010).

He may refuse to participate in social events or gatherings. Over time the perpetrator’s tactics may involve convincing friends, family members or professionals to assume negative views of the woman (James & MacKinnon, 2010). Other behaviours may involve controlling the flow of information and resources, or he may even leave a small amount of petrol in the car, so she is unable to travel far (Tolman, 1992). A woman may be denied her private time through excessive attention, affection or energy from her partner. He may prevent her from her potential intellectual pursuits and spiritual, emotional and creative interests (Murphy, 2010), discourage her from personal interests, or interrupt or intrude upon her activities (Murphy, 2011). By doing so, he stops his partner from fulfilling her own aspirations (Lammers et al., 2005). Such behaviours may sometimes not be considered abusive or may be associated with self-deception. Murphy and Hoover (1999, p. 50) stated that the self-enhancing rationalisation of such behaviours “may lead to the belief that these behaviours were in the best interest of the partner or the relationship”.

Criticism, denigration, degradation and humiliation
The more common forms of degradation and humiliation are behaviours that involve insults, criticisms of a woman’s intelligence, appearance and/or quality of her home-making and parenting abilities (Ali & Toner, 2001), which include finding faults with her or what she does (Burks, 2006). Other behaviours that may fall under this category include making fun of or
embarrassing her, calling her degrading names (Strauchler et al., 2004), telling her she is less than she is, or attacking her perception of herself (Burks, 2006). Verbal abuse often degrades, ridicules, humiliates or diminishes in some way the dignity of a person (MacKinnon, 2008). As with domination and controlling forms of abuse, criticism, denigration and humiliation are considered to be the most frequently experienced and they are predominantly toxic for victims (Bell et al., 2008). They are also considered to be severe forms of psychological aggression (Capezza & Arriaga, 2008). According to Murphy & Cascardi (1993) attacks on self-esteem appear to be more damaging and hurtful than efforts to trigger intimidation and fear. In another study (Follingstad et al., 1990) ridicule was reported by half of the 234 women as being the most destructive of emotional wellbeing. Ridicule also had the highest report (86% of women) of negative effects. The researchers explained these results in terms of the potential to damage women’s ability to feel positive about themselves, because ridicule attacks their sense of self.

Other behaviour may involve a man expressing disgust toward the victim, which may include convincing a woman of her worthlessness, consequently implying that she needs her partner (Burks, 2006). The more extreme behaviours may involve him forcing her to beg for some essentials, such as going to the bathroom or food, or forcing or asking her to perform unwanted sexual acts or to do them in front of other people (Tolman, 1999). The intended effect is assumed to reduce the woman’s self-esteem (Murphy & Hoover, 1999).

**Indifference, discounting and disregard**

Examples of indifference, discounting and disregard include behaviours or acts where a man does not consider a woman’s needs (Lammers et al., 2005), including her emotional and sexual needs (Tolman, 1992), or suggests that her feelings, wishes and needs are not worthy of consideration (Kasian & Painter, 1992). A man may refuse to discuss an issue or a topic of woman’s interest, which may imply that her viewpoints do not matter or have no validity (Katz et al., 2000). Other behaviours are ignoring or avoiding her, or acting as if she does not matter (Marshall, 1999). Discounting refers to minimising an individual’s accomplishments. This prevents development of self-esteem and creates a sense of inability to survive without the perpetrator (Burks, 2006). The partner may ignore a woman’s needs for assistance, or may dismiss or complain if she asks for emotional support or is upset. He may exploit her intimate disclosures and use them against her (Murphy, 2010). Another behaviour that may fall under this category is emotional invalidation, because this includes ignoring or responding inappropriately, or negatively, towards woman’s emotional experiences. Waller et al., (2007) considered emotional invalidation as a core factor in emotional abuse.
Emotional and interpersonal withholding
During the relationship, both partners experience or expect to experience supportive and positive behaviours and emotions. In an abusive relationship such behaviours and emotions may be withheld or withdrawn (Tolman, 1992). A man can deny companionship and lack of appreciation (Tolman, 1992), act like a woman does not matter (Murphy, 2011), withhold affection and physical, psychological or verbal affirmation from a woman (Burks, 2006) including care, respect, support and approval (Murphy, 2010). Withholding is assumed to punish the partner and increase her insecurity or anxiety about the relationship (Murphy & Hoover, 1999). It may also imply that a person does not deserve affection (Katz et al., 2000). Other behaviours may include ignoring or giving silent treatment or leaving for short or long periods of time, without explanation or letting his partner know he is leaving (Loring, 1994; Tolman, 1992). The perpetrator also may use a technique of sulking or withdrawing when they do not get their own way (Burks, 2006).

Monopolisation
According to Tolman (1992, p. 296) monopolisation “refers to behaviours that make the abuser the psychological centre of the victim’s perceptions”. For example, a perpetrator may be possessive (Sable, 1998) or intrusive by means of constant phone calls, interruptions, harassment, and interference with friendships. He may demand that she is involved in his interests only, and/or deny or deprive her of private time (Tolman, 1992). He may also perpetrate behaviours that emotionally and physically exhaust the partner, for example, depriving her of food or sleep (Tolman, 1992). This partially may be related to the isolation and restriction category.

Psychological destabilisation
Deception is another word that could be used to describe psychological destabilisation, which can leave a woman feeling unsure of herself. It may include behaviours such as: distortion of individual options; misrepresentation; lying (Anderson et al., 1991); manipulation; deliberately confusing her (Tolman, 1992); and causing her to doubt her memories (Burks, 2006). It is about questioning a woman’s feelings, perceptions and sanity (Murphy & Cascardi, 1993). For example, a perpetrator may hide his partner’s belongings and deny any knowledge of their whereabouts (Tolman, 1992). Some participants in Evan’s (2007) study experienced ‘crazy making’ abuse, which related to their partner’s purposeful manipulation of the situation and/or the truth, to make them question their own normality and/or stability.
Crazy making was perceived “as a circle of psychological abuse, where the ongoing manipulation caused unstable behaviour, which in turn was used as a basis for further abuse”. For many women this behaviour continued after separation (Evan, 2007, p. 13).

‘Mind games’ may also fall under this category and include behaviours such as guilt tripping, blocking a woman from clarifying mixed messages, manipulating with lies, and questioning her judgment. The partner may tell her that their relationship is the best she can hope for, conduct actions that do not match his words (Murphy, 2010), question her love towards him or question her judgment (Murphy, 2011). Other behaviours may include targeting traits that a woman feels least secure about, or give her backhanded comments or compliments (Porterfield, 1989).

The perpetrator may minimise, deny or justify his behaviour, causing a woman to be confused, hesitant, or distressed (James & MacKinnon, 2010). Moreover, in order to shift the blame or create an illusion, a man could accuse his partner of engaging in repetitive or intentionally hurtful behaviours, which will further wear down her self-esteem (Burks, 2006). The perpetrator may deny his actions or blame the partner for his angry mood or behaviour or accuse the woman of overacting (Burks, 2006; Tolman, 1999). He may be charming and show concern for her in the company of others, while consequently depriving her of external validation. Eventually she may experience self-blame and doubt her own sanity, and internalise the accusations of ‘mad’, ‘bad’ or ‘inadequate’ (James & MacKinnon, 2010). Anderson et al. (1991) pointed out that contingent expressions of love by the perpetrator may provide some women with some hope that the mistreatment will end.

**Rigid sex role expectations**

According to Tolman (1992) a psychologically abusive man often insists on obedience. This may occur through sexual demands, such as expecting women to perform sexual acts or have sex when she does not want to. Rigid sex roles also refer to expectations of compliance with gendered stereotypes. This can be executed through his expectation of a flawlessly clean house, or having his demands attended to first. Other behaviours may include refusing to take responsibility for his household duties or caring for children, or treating her like a servant by overloading her with domestic responsibilities (Murphy, 2010).

**Economic abuse**

Economic abuse is sometimes seen to be a separate form of abuse from EPA (Outlaw, 2009). It implies control of finances, which attempts to increase the woman’s financial dependency (Murphy & Cescardi, 1993). Behaviours include the perpetrator’s misuse of funds, excluding
a woman from financial decisions and denying her access to any form of finances (Tolman, 1992; Branigan, 2004). It can include: denying money for basic needs such as clothing, food and sanitary products; coercing a woman into covering her partner’s debt (relationship transmitted debt); subsidising his entertainment (Branigan, 2004); or putting her on a strict financial allowance (Ali & Toner, 2001). A woman may also be expected to ask permission to have or spend money, her money might be taken away from her and her expenses might be monitored by her partner (Murphy, 2010). Yet, at the same time, a man may use his income as unrestricted expenditure for his own pleasure and desires (Branigan, 2004).

Economic abuse may also occur when a woman is put in charge of the money or forced to take full responsibility for paying household costs and utilities, and other expenses, including food, even if she does not have a steady income (Branigan, 2004). A man can make his partner responsible for running the accounts, while demanding money for his wants and excessive spending, and abusing her when the debt increases. He may refuse to work, consequently creating extreme financial hardship, or forcing her to bail him out of self-inflicted financial difficulties. He may also steal money from her or sell her possessions (Murphy, 2010).

Financial abuse can continue after separation. This can be done through limited options for affordable housing, minimisation of child support and “men’s misuse of bureaucratic procedures designed to mediate the relationships between families and money” (Branigan, 2004, p. ii).

**Australian legislation and other publications**

This section provides examples of emotionally and/or psychologically abusive behaviours as defined in Australian official government publications, organisations’ publications and surveys. This overview will reveal the limitations of these examples compared with that evident in the academic literature, as discussed above.

All states refer to a range of non-physically abusive behaviour to describe domestic violence, without referring to it specifically as EPA. Their description of non-physically abusive behaviours somewhat differs and is inconsistent with each other. A combination of these behaviours consist of (including threat to conduct some of these behaviours and acts): damage to property; threat, injury or death of an animal; economic abuse; stalking; verbal abuse; intimidation; coercion or behaviours that control or dominate the other person; harassing or being offensive; unauthorised surveillance; threatening to self-harm or commit suicide; depriving a person of their liberty; threatening a person or someone else with injury or death (Australian Capital Territory Act, 2012; New South Wales Act, 2012; Northern
Territory Act, 2012; Tasmanian Act, 2005; Queensland Act, 2012; Victorian Act, 2012; Western Australian Act, 2012). As mentioned previously, the only Australian legislation that expressly includes EPA as a form of domestic or family violence are SA, QLD, VIC and TAS.

For instance, the Victorian Family Violence Protection Act (2008) provides examples of EPA as behaviours that are conducted against another person, which include:

1. repeated derogatory taunts including racial taunts;
2. threatening to disclose a person's sexual orientation to the person's friends or family against the person's wishes;
3. threatening to withhold a person's medication;
4. preventing a person from making or keeping connections with the person's family, friends or culture, including cultural or spiritual ceremonies or practices, or preventing the person from expressing the person's cultural identity;
5. threatening to commit suicide or self-harm with the intention of tormenting or intimidating a family member, or threatening the death or injury of another person (Victorian Act, 2012, p. 15).

The lists of these behaviours are covered by categories such as: isolation, restriction or monitoring; domination, control or manipulation; intimidation, threats of violence or creation of fear; other types of threats; and criticism, denigration or humiliation.

The South Australian Intervention Orders (Prevention of Abuse) Act 2009 provides extensive examples of emotionally and psychologically abusive behaviours, which include:

1. sexually assaulting the person or engaging in behaviour designed to coerce the person to engage in sexual activity;
2. unlawfully depriving the person of his or her liberty;
3. driving a vehicle in a reckless or dangerous manner while the person is a passenger in the vehicle;
4. following the person;
5. causing the death of, or injury to, an animal;
6. loitering outside the place of residence of the person or some other place frequented by the person;
7. entering or interfering with property in the possession of the person;
8. giving or sending offensive material to the person, or leaving offensive material where it will be found by, given to or brought to the attention of the person;
9. publishing or transmitting offensive material by means of the Internet or some other form of electronic communication in such a way that the offensive material will be found by, or brought to the attention of, the person;
10. communicating with the person, or to others about the person, by way of mail, telephone (including associated technology), fax or the Internet or some other form of electronic communication in a manner that could reasonably be expected to cause emotional or psychological harm to the person;
11. keeping the person under surveillance;
12. directing racial or other derogatory taunts at the person;
13. threatening to withhold the person's medication or prevent the person accessing necessary medical equipment or treatment;
14. threatening to institutionalise the person;
15. threatening to withdraw care on which the person is dependent;
16. otherwise threatening to cause the person physical injury, emotional or psychological harm or an unreasonable and non-consensual denial of financial, social or domestic autonomy or to cause damage to property in the ownership or possession of the person or used or otherwise enjoyed by the person (South Australian Act, 2012, pp. 6-7).

These behaviours fall under several categories mentioned in the literature. The categories that are not covered are: indifference, discounting and disregard; emotional and interpersonal withholding; and psychological destabilisation.

The Queensland reviewed its Domestic and Family Violence Protection Act 1989 in 2012. It now includes emotional or psychological abuse and provides several examples of EPA behaviours, which include:

1. following a person when the person is out in public, including by vehicle or on foot;
2. remaining outside a person’s residence or place of work;
3. repeatedly contacting a person by telephone, SMS message, e-mail or social networking site without the person’s consent;
4. repeated derogatory taunts, including racial taunts;
5. threatening to disclose a person’s sexual orientation to the person’s friends or family without the person’s consent;
6. threatening to withhold a person’s medication;
7. preventing a person from making or keeping connections with the person’s family, friends or culture, including cultural or spiritual ceremonies or practices, or preventing the person from expressing the person’s cultural identity (Queensland Act, 2012, p. 20).

These behaviours fall under the following categories: monopolisation; isolation, restriction or monitoring; criticism, denigration or humiliation; and other types of threats.

In the Tasmanian legislation, the behaviours are very limited and described as the ones that limit the freedom of a partner or spouse by means of intimidation or threats (Tasmanian Act, 2005).

A number of Australian studies have attempted to measure EPA among the general public but, like the legislation just discussed, they do not cover the full range of behaviours. Typically, they are clustered around a small number of themes. Consequently, they identify and measure only one or a limited number of EPA categories, and may miss other behaviours that can cause emotional and psychological harm. If the measures are limited to certain types of behaviours or categories, our knowledge will be limited and we will not be able to identify the full extent of EPA.

Hegarty and Bush (2002, p. 439) questioned women to determine the extent of their experienced of emotional abuse. They asked women if their partners told them they were: not good enough; stupid; crazy; ugly; and that no one else would ever want them. They gathered
information on whether their partners tried to: turn family, friends and children against them; or tried to convince these people that she was crazy; and whether he tried to keep them from seeing or talking to family. They enquired as to whether their partner became upset if dinner or housework was not done when they thought it should be, blamed her for causing their violent behaviour, or did not want her to socialise with her female friends. This study only covered the following categories of EPA: isolation and restriction; criticism, denigration, degradation and humiliation; psychological destabilisation.

The South Australian community surveys, such as the South Australian Health Goals and Targets Violence and Abuse Health Priority Area (Taylor et al., 1998) and the Interpersonal Violence and Abuse Survey (Dal Grande et al., 2000), used the following behaviours to measure emotional abuse: social abuse such as isolation from family and friends and restricting social freedom; spiritual abuse such as denying the practice of religion; economic abuse such as deliberately giving inadequate funds for household needs or withholding money; or other abuse such as intimidation and threats, constantly being called names or humiliated. These behaviours covered limited number of categories: isolation and restriction; economic abuse; criticism, denigration, degradation and humiliation; and intimidation, threats of violence or creation of fear.

Both the 2006 and 2009 VicHealth community attitude surveys described non-physical behaviours in terms of: criticism; control of social life; financial control, yelling abuse; and stalking and harassment by repeated phone calls or e-mails. “Smashing objects to frighten or threaten a partner or threatening to hurt a family member to scare or control a partner” was categorised under ‘other’ physically threatening behaviours (VicHealth, 2009, p. 24). As a result, this study only identified EPA in terms of criticism and humiliation, isolation or monitoring, and economic abuse.

The nationwide Personal Safety Survey (ABS, 2006, p. 55) described several categories and provided a short explanation for each in their report. These are the following categories they used to identify and measure emotional and psychological abuse:

1. Manipulation, isolation or intimidation by a current partner (not in the questionnaire)
2. Tried to prevent contact with family or friends
3. Tried to prevent use of the telephone or family car
4. Tried to prevent knowledge about or access to family money
5. Insulted with the intent to shame, belittle or humiliate
6. Damaged or destroyed property.

An additional four questions were asked in the questionnaire itself:

1. Threatened to harm children
2. Threatened to harm other family/friends
3. Threatened to harm or harmed pets

Some of these behaviours fall under the same category, in particular, isolation and monitoring. The Personal Safety Survey covered the following categories of EPA: domination, control or manipulation; isolation and restriction; criticism, humiliation and denigration; intimidation, threats of violence or creation of fear; and economic abuse. The Australian IVAWS study was also limited, and had only five items that measured experiences of emotionally abusive and controlling behaviours. Three of them fall under the isolation, restriction or monitoring category, while the other two items would be considered as criticism, humiliation and denigration, and domination, control and manipulation (Mouzos & Makkai, 2004).

The above mentioned studies use different behaviours to measure or identify EPA, but they tend to use similar categories. They do not cover the full range of categories that could help identify EPA more completely. This was one of the reasons I thought it was important to allow women to provide the information and give a name to it. This concludes the section on behaviour and acts of EPA. In the next section of the literature review, I provide a description of the negative effects of this type of abuse.

The effects of emotional and psychological abuse on women

“Sticks and stones hurt my bones but his glance and words hurt more”
(Baldry, 2003, p. 47)

Non-physical forms of violence are frightening and intimidating and can have long-term effects on women (Hand, Chung, & Peters, 2009). Emotional and psychological abuse has many psychological, physical and socio-economic implications for a person who is currently in an abusive relationship. Its aftermath can contribute to long-term emotional, mental and physical illness, as well as produce relationship and behavioural problems. In this section I will review the literature on emotional, psychological and physical effects and other possible negative effects that have been associated with EPA.

Loring (1994) highlighted that the experience of the effects of emotional abuse is universal, regardless of the victim’s sex, age, ethnicity, religion, education, economic status or sexual orientation. Emotionally abused women in heterosexual relations describe similar effects in regards to their emotional and physical wellbeing, ranging from “loneliness, depression, somatic problems, proneness to accidents, eating disorders, diminished capacities and substance abuse to murder, suicide …” (Loring, 1994, p. 111). It is not as easily labelled as physical abuse, and hence individuals may find it more difficult to defend against and
recover from EPA (Follingstad & DeHart, 2000).

Psychological abuse is a distinct factor that can have negative effects on the victim, independently of physical abuse (Straight, Harper, & Arias, 2003). Emotional abuse inflicts deep scars which can be long lasting and they are often hard to heal. Wagner and Mongan (1998, p. 28) said that “emotionally abused women may appear to function well, but the effect on health status and health behaviours may be substantial and long lasting”. Due to its destructive properties on the victim’s belief system, some women may never reach their full potential for happiness and health. A distorted sense of identity may make it difficult for a woman to find her place in society (Burks, 2006). She loses her sense of self, from the perpetrator’s use of control and intimidation (MacKinnon, 2008).

Psychological abuse can affect men and women differently, and certain behaviours or acts may be more damaging to female victims than others (Lawrence et al., 2009). There are gender differences when it comes to the degree of aggression and degree of experience of distress and fear by the victim. MacKinnon (2008) argued that women experience non-physical abuse with greater emotional distress and susceptibility to long-term negative consequences than men. When emotional abuse comes from a significant other, women may be especially affected (Sackett & Saunders, 1999). When a partner shows a combination of positive traits, such as support and love, and negative and hurtful behaviours, the victim may experience increased negative effects. The woman may feel betrayed and confused due to mixed messages (Tolman, 1992).

At first, a woman may try to change herself, attribute the abuse to her partner’s drinking or other factors, or decide on couple counselling as a response to behaviours. Over time, some women may realise that their many efforts make no difference (Sackett & Saunders, 1999). Women may also not perceive or consider themselves to be emotionally or psychologically abused. MacKinnon (2008, p. 12) stated that “the victim may not view her partner’s behaviour as problematic or, if she does, she may blame herself and agree with his negative view of her”. The injury acquired by the victim may be denied or justified, which may lead to distress and confusion about one’s own feelings and perceptions (Sable, 1998). A woman may complain of a troubled relationship and will be quick to blame herself and not comprehend the source of suffering. Emotionally abused people rarely perceive themselves as maltreated and usually seek therapy for other symptoms such as misery, anxiety, intrusive thoughts and suicidal ideation. Acknowledgment of such symptoms may occur only if each one is specifically addressed by the professional. In numerous cases, victims do not volunteer the information, and they are prevented from doing so because of the fear of being perceived as mentally unwell (Loring, 1994).
According to Katz et al. (2000) the negative effects of psychological abuse on a woman’s emotional wellbeing may hinder her judgment of the abusive relationship and thus her motivation to end it. A woman may be less likely to seek help if non-physical abuse is not accompanied by physical abuse (Lammers et al., 2005). Consequently, assessment of EPA may be difficult and sometimes may be misdiagnosed as illness, rather than something that is caused by the relationship (MacKinnon, 2008). Health professionals may fail to diagnose the cause, and may provide women with a diagnosis and medication, but no referrals to social services (Murphy & Cascardi, 1993).

There are several reports indicating a variety of negative effects experienced by women in emotionally and/or psychologically abusive relationships, which I will discuss shortly. The effects vary among women and they may not experience them to the same extent or timeframe. This is not to assume that psychological maltreatment clearly causes an individual to have higher levels of depression, anxiety, trauma or anger, but rather there is a relationship between these variables (Chirichella-Besemer & Motta, 2008). Moreover, the effects of emotional abuse do not end when the relationship is terminated. Persistent flashbacks may keep women re-living experiences of emotional abuse, sometimes years after the relationship has ended. It affects physical health, relationships and quality of life beyond the immediate experience (Queen et al., 2009).

The effects for individuals depend on the frequency, intensity, intent and level of fear (Kelly, 2004). MacKinnon (2008) indicated that the longer the duration of abuse, the more defenseless and dependent the victim becomes. The effects of psychological aggression have been explored in terms of personality traits, mental health symptoms and disorders, including physical symptoms and timing of the termination of the relationship. By learning about the impacts of psychological abuse on the victims, we may gather information on treatment or intervention (Follingstad, 2009).

When women display any of the symptoms (discussed below) or various somatic problems while searching for help, they should be sensitively questioned to determine whether there was (or is) a history of emotional abuse in their family of origin or in personal relationships (Burks, 2006). According to Kelly (2004, p. 387) “focusing on the specific components of psychological abuse would certainly increase our understanding of the victim’s experience”. Thus by extending the research to include the effects of EPA we will be able to have a more accurate understanding of women’s experiences, and what we can do to prevent this abuse. It can also help to shape the definition of EPA.
**Emotional effects**

Emotional abuse is the repeated and patterned aspects that are considered to result in negative emotional impacts and consequences (Lammers et al., 2005; Loring, 1994; Marshall, 1994, 1996). Several researchers in the area of DV have reported finding different effects on women’s emotional wellbeing. For example, Loring (1994) reported that emotionally abusive behaviours can cause women to experience destruction and diminution of self. Women’s judgement and thinking can become affected, causing them to have uncontrollable mental images and intrusive thoughts that strengthen the abuser’s hostile and demeaning labelling. Women may develop feelings of incompetence (Burks, 2006), problems with self-image (Seff et al., 2008), self-criticism, and self-doubt, including feeling unworthy, inadequate and self-destructive (Loring, 1994). Lowered or affected self-esteem was also reported in other studies (Aguilar & Nightingale, 1994; Baldry, 2003; Laing, 2010; Lammers et al., 2005; Marshall, 1999; Seff et al., 2008).

Several researchers found that emotionally abused women reported depression symptoms (even after controlling for the effects of physical and sexual aggression in some studies) (Ali, Oatley & Toner, 1999; Katz & Arias, 1999; Kelly, Warner, Trahan & Miscavage, 2009; Lammers et al., 2005; Loring, 1994; Marshall, 1999) including guilt or shame, sadness, loneliness, despair, hopelessness and feelings of inadequacy and worthlessness (Lammers et al., 2005). Persistent sadness was experienced by 99% of participants in the study by Evans (2007). Lammers and colleagues (2005) found their participants experienced confusion, fear, diminished identity and feelings of being unloved. This consequently caused them to behave submissively and cling to their only perceived source of support and love. This was due to the belief that no one else could love them but their partner. The researchers reported that women may reach a point where they willingly sacrificed everything (including their own values, beliefs and needs) that conflict with the expectations and needs of their partner, in the hope they would be accepted by them. This sacrifice adds to their diminished sense of identity. Loring (1994) reported that some women may live in constant fear of abandonment. According to James and MacKinnon (2010), EPA is most damaging within intimate relationships because a woman is unwilling or unable to terminate the relationship. The irony is that women often seek closeness and comfort in the perpetrators.

Lammers et al. (2005) found that all of their participants experienced feeling anger at some stage of their relationship, especially about the way their partner treated them. Although, it was found that the expression of anger was dependent on how much emotional pain they experienced, their awareness of the abuse and whether they felt safe or not to
express it. Chirichella-Besemer and Motta (2008) stated that psychologically maltreated individuals displayed significantly higher levels of anger than those who were never maltreated.

Loring (1994) pointed out that emotional abuse can inflict suffering on a victim that is as insidious and intense as that experienced by other trauma victims. Psychological abuse wears down woman’s sense of self and identity, consequently resulting in severe under functioning. Taft, Murphy, King, Dedeyn, and Musser (2005, p. 259) argued that “partner abuse victimization is an important form of traumatic stress”. A victim may experience a sense of shock and disbelief after an abusive incident, as the relationship is supposed to be one of care, love and nurturing.

Women may experience a deep sense of shame and responsibility for the abuse (MacKinnon, 2008). Shame is considered to be the most powerful tool of the perpetrator, because it is the feeling or perception of oneself being bad. From Burks’ (2006) point of view, it is a major result of emotional abuse. Women may experience fear of failure or harm, experience difficulty in taking risks of any scale, as well as perceiving themselves to be unable to do tasks. They may face self-image problems, such as inaccurate body image, due to messages of ugliness or deformity they may have heard from their partner. Women may internalise these messages, and begin to feel and believe that the perpetrator is the only one who does and would love them (Burks, 2006).

**Psychological effects**

Some researchers and professionals have suggested that there is a considerable negative impact on mental health from EPA (Aguilar & Nightigale, 1994, Coker et al., 2002; Faver & Strand, 2007; Kelly, 2004; Testa, 2007; Wagner & Mongan, 1998). Arias and Pape (1999, p. 63) noted that “psychological abuse is psychological in nature” and its targets are cognition and affect. An Australian study found that psychological abuse and its effects have led a significant number of interviewees to have long-term depression. At the time of the study over half (57%) of the women were experiencing a degree of depression (Evans, 2007). In a Queensland study, Nancarrow and colleagues (2011, p. 4) found a strong association between the experience of abuse and indication of negative mental health outcomes. In particular, women who reported psychological abuse were 5.3 times more likely to show evidence of severe psychological symptomatology and 2.8 times more likely to show evidence of depression. Similarly, those women who had experienced social-psychological abuse and economic abuse were respectively 5.0 and 6.9 times more likely to show evidence of severe psychological symptomatology and 2.1 and 3.0 times more likely to show evidence of
Several other studies described a relationship between emotional and/or psychological abuse and depression (Baldry, 2003; Chirichella-Besemer & Motta, 2008; Dutton, Goodman, & Bennett, 1999; Kelly et al., 2009; Mechanic, Weaver, & Resick, 2008; Theran et al., 2006). Porcerelli, West, Binienda and Cogan (2006) found that psychological symptoms (mostly depressive) were statistically significant among emotionally abused women. For their study, psychological symptoms included six depression items: feeling blue; loneliness; frequent crying spells; more irritability than usual, and fatigue or frequent exhaustion. It measured anxiety items, which were: difficulty relaxing or calming down, and worrying a lot or being overly anxious. Experience of anxiety by emotionally and/or psychologically abused women was reported by others as well (Baldry, 2003; Chirichella-Besemer & Motta, 2008; Testa, 2007).

Self-injury or mutilation, or suicidal fantasies or ideations were found to be associated with experience of EPA (Burks, 2006; Porcerelli et. al., 2006; Testa, 2007). Victims can begin to suffer from mood disorders, panic attacks and compulsive behaviours (Testa, 2007). A woman who experiences psychological abuse may become confused or distressed. This may further cause her to blame herself and personalise the abuser’s accusations. Any emotional reaction to the perpetrator’s actions may be labelled as further evidence of a woman’s illness, weakness or pathology (MacKinnon, 2008). Women may experience a level of uncertainty about their self-confidence, which may cause them to question their sanity (Lammers et al., 2005).

Both emotional and psychological abuse have been found to be connected to or correlated with post-traumatic stress disorder (PTSD) (Arias & Pape, 1999; Evans, 2007; Kemp, Green, Hovanitz, & Rawlings, 1995; Loring, 1994; Marshall, 1996; Street & Arias, 2001; Straight et al., 2003). Individuals suffering from PTSD exhibit a “numbing of general responsiveness” and frequently re-experience the traumatic event, flashbacks, nightmares, intrusive thoughts and psychogenic amnesia (Loring, 1994, p. 36). Arias and Pape (1999) and MacKinnon (2008) reported similar symptoms of emotional abuse which included persistent, painful and depressing memories, while Taft and colleagues (2005) included intrusive memories. Intrusive thinking and flashbacks were the most common PTSD symptoms described by women in the study by Evans (2007).

Arias and Pape (1999) and Dutton et al. (1999) reported that even after controlling for physical violence, it was the psychological abuse that continued to be associated with symptoms of PTSD. In later studies, Street and Arias (2001) found that PTSD symptoms were predicted by psychological abuse, and in particular by behaviours such as degradation, verbal
attacks and emotional withholding, while Taft et al. (2005) reported behaviours such as restrictive engulfment, denigration and dominance or intimidation. Loring (1994) pointed out that victims consequently make an effort to avoid situations or activities linked with such trauma.

**Physical effects**

Follingstad (2009, p. 281) argued that the reported linkage between EPA and negative physical effects is problematic for three reasons: self-reports of illness need to have support documentation to strengthen validity; measurement has typically been vague, broad and highly subjective, affecting interpretations; and there has not been enough concentration on “potential theoretical mechanisms by which psychological aversive” events affect physical functioning. Nevertheless, here I outline some of the negative physical health effects of EPA reported in the literature.

Women who experience emotional abuse frequently suffer from various somatic symptoms, which are easily misdiagnosed. According to Loring (1994), upper respiratory illnesses and headaches are widespread metaphors for despair, pressure and inner crying. Many victims of EPA suffer from bladder discomfort and infections (Loring, 1994), sexually transmitted infections (Coker et al., 2000), pain resembling arthritis or tendonitis, arm or leg aches or pains, muscle tension, chronic neck or back pain; chronic pelvic pain; and disabilities preventing work (Coker et al., 2000; Loring, 1994; Wagner & Mongan, 1998).

Coker et al. (2000), Porcerelli et al. (2006), and Wagner and Mongan (1998) found that emotionally and psychologically abused women were significantly more likely to report poor physical health symptoms, compared with women who had never experienced IPV. Wagner and Mongan (1998) compared emotionally abused women with non-abused women in three areas: health status, symptoms and medical services utilisation. Compared with the non-abused group, emotionally abused women had greater symptom experience including: more difficulty losing weight and sleeping; feeling more tired; experiencing excessive perspiration; swelling of the arms, legs, hands or feet; shakiness and feeling more hot or cold, regardless of weather. Coker and colleagues (2000) also found a number of negative physical health impacts experienced by their participants who encountered psychological abuse. These women had a considerable increased risk of developing the following health conditions: migraines and other frequent headaches; visual problems; beginning to stutter or stammer; stomach ulcers; constipation or diarrhoea; spastic colon and frequent indigestion. Coker et al., (2000) concluded that that clinicians should also be screening for psychological forms of IPV. Other negative physical symptoms reported by emotionally abused women related to: cardiac
ill-health associated with chest tightness and palpitations; changes in menstruation; head, ears, eyes, nose and throat disorders which related to seizures and dizziness; gastrointestinal effects such as difficulty swallowing and abdominal pain (Porcerelli et al., 2006).

Burks (2006) found that eating disorders such as bulimia, anorexia or binge eating can be symptoms of emotional abuse, which may occur as a result of a need for women to take control of at least one aspect of their lives. Evans (2007) found that 10% of her 134 participants suffered from an eating disorder such as appetite loss, anorexia and/or food addiction. Marshall (1996) and Wagner and Mongan (1998) found that women who experienced EPA reported more frequent medical visits, including to physicians.

**Effects on relationship(s)**

Emotional and psychological abuse can impact current and future relationships. A woman may begin to view the partner as problematic and consequently devalue him or the relationship, change her own investment in the relationship, detach from the relationship or revise her expectations of the relationship (Follingstad, 2009; Marshall, 1996). Gortner, Jacobson, Berns and Gottman (1997) found that emotional abuse perpetrated by the husband was a stronger predictor than physical violence for ending the marriage. The results of Katz et al.’s (2000) study indicated that psychological aggression negatively correlated with intimacy of dating couples and their relationship stability.

Burks (2006) suggested that affected women may experience difficulty in choosing and sustaining healthy relationships, and detaching from other people. They may develop social phobias and shyness as a form of withdrawal mechanism, or develop a fear of self-expression. They may also experience difficulty trusting or engaging with others due to fear of inadequacy or lack of intellect. Other issues may arise in relation to sexual activity, where women may experience sexual dysfunction, or decreased desire or turn to risky, promiscuous behaviours in an attempt to prove their self-worth (Burks, 2006). According to Engel (2002), other effects include: distrust towards people and future relationships; sensitivity towards control by others; unexpected anger; and an inclination to be fearful. In a study with 10 women who were out of abusive relationships for more than two years, all indicated concerns about entering and maintaining healthy and non-violent intimate relationships. Many expressed feelings of uncertainty, fear and anxiety when speaking about new relationships (Horrill & Berman, 2004).

**Other effects**

There is some evidence that EPA results in an increased use of substance abuse, legal and
illegal drugs (psychotropic medications or prescriptions) and alcohol (Burks, 2006; Coker, et al., 2002; Marshall, 1996; Wagner & Mongan, 1998). The data collected by Straight et al. (2003) showed that psychological abuse (after controlling for physical victimisation) was positively related to physical and role limitations, illegal drug use (unknown whether drug use preceded the experience of psychological abuse), cognitive impairment and negative health perceptions in college women.

**Journey away from MIPV**

This section of the literature review will focus on women’s awareness of EPA, including non-recognition and turning points. Support and responses from formal and informal networks, and factors involved in moving forward from MIPV will then be discussed.

Figure 1 is adapted from the Victorian Government Department of Human Services (DHS) (2004) diagram that helps to understand women’s lived experiences in the journey away from family violence. It attempts to display how women spiral in and out of various experiences, moving upward through the spiral (DHS, 2004).

**Awareness of emotional and psychological abuse**

The first spiral in the diagram is termed ‘In the violence - safety and survival of self and children’. During this time women go through the complexity of being with a partner who
threatens or perpetrates violence against them. The complexity is created by a feeling of confusion, as women may still have positive feelings for their partner and responsibility for their children. At the same time, women are continuously vigilant and alert to their partner’s changing behaviours and moods. A woman’s behaviour often changes and adjusts accordingly, in order to keep her partner happy and to reduce the risks of future violence. In order to lessen the threats, abuse and her partner’s jealousy, women may withdraw from their family and friends. There is a time in the violent situation where many women are unaware of the problem in their relationship (DHS, 2004).

**Non-recognition**

It can be quite difficult for people to understand and women themselves to recognise their partner as emotionally or psychologically abusive. Women who experience emotionally controlling behaviours may not recognise or perceive themselves as victims of abuse, as it is more difficult to define and name emotional abuse (Aguilar & Nightingale, 1994). Loring (1994) alleged that emotionally abused women differ from physically abused women due to their lack of awareness. In her study, only eight of the 28 emotionally abused women considered themselves to be abused.

Burke, Gielen, McDonnell, O’Campo, and Maman (2001) identified a non-recognition (pre-contemplation) stage, where a woman did not recognise or accept the abuse as abuse or as a problem, and was not interested in change. Some women perceived abuse as love and believed that the abuser loved them. In Horrill and Berman’s (2004) study, women had an inaccurate interpretation of abuse, which formed their belief about what ‘real’ woman abuse was. Typically, abuse was defined as only physical in nature. Some of their participants said that they believed the ex-partner’s behaviour was a common, normal and accepted characteristic of interaction. Consequently their participants did not know where to seek help because they did not perceive themselves as ‘battered’ women. They did not identify or label their situation as abusive until others indicated this to them. Realising that the situations were abusive and that behaviours were controlling helped some of the participants to frame their understanding of violence (Horrill & Berman, 2004).

A woman may still have feelings toward a perpetrator (partner) and care for him, despite the abuse (Murray, 2008). Women place high values on their relationship and may make a commitment to work through the problems. They consequently may want to protect or defend their partner. In these circumstances, many women stand by an abusive partner and may even try to save the relationship (Mahoney et al., 2001). Emotional attachment is often described by abused women as a factor causing them to return to their abusive relationship.
High levels of positive experiences could cause women to excuse, ignore or integrate negative experiences or the partner’s abusive behaviour (Kasian & Painter, 1992). For some women, the barrier to leaving the relationship is their sense of belonging, to their family and the home they built together (Murray, 2008). A woman might be dependent on her partner financially, which consequently makes it harder for her to leave him or support herself (Mahoney et al., 2001; Murray, 2008), and this could lead to poverty, unstable housing and homelessness (Murray, 2008). A couple may share the same circle of friends, which a woman might lose if she leaves (Mahoney et al., 2001). Leaving her partner may become even more difficult if they have had children together (Keys Young, 1998; Mahoney et al., 2001; Patton, 2003).

Social attitudes towards EPA also influence women’s non-recognition of EPA. Mulroney (2003) pointed out that whether other forms of abuse considered as IPV depends on how it is defined and understood by the community. If EPA is normalised, it is difficult for women to recognise it as abuse and it would remain as an acceptable model of behaviour within couples. Beliefs and attitudes have a critical role in the context in which violence against women occurs, because men with firm and traditional gender role attitudes are more likely to carry out partner violence. It shapes women’s responses to victimisation and influences the way professionals (such as judges, police, priests, doctors and social workers) and community respond to violence against women. Rates of violence against women are higher in communities where there is a general acceptance of violence-supportive norms. Individuals (family members, friends, bystanders or professionals) with more violence-supporting attitudes respond to victims with less support and empathy. They are less likely to report the incident, more likely to credit blame on a victim and lenient towards perpetrators (VicHealth, 2009).

In relation to the Victorian (2006) and national community attitudes surveys (1995, 2009), non-physical behaviours, such as psychological, emotional, economic and verbal abuse, were less likely to be considered DV when compared with physical forms of abuse by the general public (see Table 2 below) (VicHealth, 2006, 2009). According to these surveys, behaviours five to eight were considered to be non-physical. The behaviours found in the literature indicate that behaviours three and four in the table could be considered as EPA. Non-physical forms of violence were the least likely to be perceived as ‘always’ DV. However, women in both the general community and the selected culturally and linguistically diverse (SCALD) (Italian, Greek, Chinese, Vietnamese and Indian communities) sample were more likely compared with men in both samples to agree that non-physical violence such as repeated criticism, stalking, and harassment by repeated phone calls, controlling the social life of a partner, were always forms of DV. Even though community attitudes remain higher for
physical types of DV, there seems to have been a positive shift, since 1995, in the proportion of people who recognise non-physical forms of violence as DV. There have also been some positive shifts since 1995 in relation to the perception of seriousness of the range of behaviours. The shift between behaviours that were considered very serious were: repeated

criticism, throwing or smashing objects near a partner to threaten or frighten them (Taylor & Mouzos, 2006; VicHealth, 2009), and social control (VicHealth, 2009). Non-physical behaviours, such as yelling abuse, criticising and financial control, were more likely to be considered as ‘quite serious’ in the 2009 survey, which shows some positive changes since 1995 (VicHealth, 2009).

If a partner’s negative or violent behaviour does not match what the general public, researchers, politicians, or criminal justice officials refer to as violence or abuse, the victim may be left in the dark. A woman may acknowledge that she has been abused or mistreated, but she may not be able define or label her experience in a way that could help her (DeKeseredy & Schwartz, 2001). One purpose of policy relating to violence against women is to effect change in community attitudes and beliefs, by challenging and forming new perceptions. Through naming domestic violence, including EPA, we can assert that the issue is of public significance (Murray & Powell, 2009).

### Table 2: Comparison of responses (%) to DV behaviours between 1995, 2006 and 2009 surveys

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>1. Slapping or pushing partner to cause harm or fear</td>
<td>97</td>
<td>2</td>
<td>98</td>
</tr>
<tr>
<td>2. Forcing partner to have sex</td>
<td>94</td>
<td>4</td>
<td>98</td>
</tr>
<tr>
<td>3. Throwing or smashing objects near the partner to frighten or threaten them</td>
<td>91</td>
<td>8</td>
<td>98</td>
</tr>
<tr>
<td>4. Threatening to hurt family members to scare or control partner</td>
<td>na</td>
<td>na</td>
<td>99a</td>
</tr>
<tr>
<td>5. Yelling abuse at partner</td>
<td>77</td>
<td>20</td>
<td>87</td>
</tr>
<tr>
<td>6. Controlling the social life of partner by preventing them from seeing friends or family</td>
<td>74</td>
<td>23</td>
<td>82</td>
</tr>
<tr>
<td>7. Criticising partner to make them feel bad or useless</td>
<td>71</td>
<td>26</td>
<td>83</td>
</tr>
<tr>
<td>8. Controlling partner by denying them money</td>
<td>62</td>
<td>33</td>
<td>69</td>
</tr>
<tr>
<td>Are these behaviours violence against women?</td>
<td>Stalking</td>
<td>na</td>
<td>93</td>
</tr>
<tr>
<td></td>
<td>Harassment by repeated phone calls</td>
<td>na</td>
<td>90</td>
</tr>
<tr>
<td></td>
<td>Harassment by repeated e-mail</td>
<td>na</td>
<td>86b</td>
</tr>
</tbody>
</table>

Source: VicHealth (2006, 2009)

a. The question in the Victorian survey was worded differently: “Tries to scare or control partner by threatening to hurt family members”.
b. The question also included text messages.
Turning points

The second half of the first spiral in Figure 1 (DHS 2004) above refers to ‘movement’ where women recognise and make sense of their situation, or experience a trigger event. The shift and understanding may occur gradually over time in different ways for women. Responding to or thinking differently about violence perpetrated against them is the first step towards the journey away from violence. Here women take steps toward reclaiming a sense of control over their lives and, rather than self-blaming, they disengage from the violence. Women described this movement as ‘growth in awareness’ and during this time, typically connection with informal networks occurred (DHS, 2004, p. 12). While some women may leave soon after reaching a turning point or after reaching a range of turning points, other will see turning points as a base upon which they will develop their plans to leave (Patton, 2003).

Chang et al. (2010) described turning points as specific factors, incidents or circumstances that shift women’s perception and self-belief, their relationship, their violent situation and, importantly, how they wish to respond. Turning points modify women’s readiness to put up with the situation and encourage them to consider change. Small progressive changes can be considered as turning points, which if taken together can result in a shift of judgment and a move towards leaving (Campbell, Rose, Kub, & Nedd, 1998). Eisikovits, Buchbinder, and Mor (1998) pointed out that most researchers assume that a turning point for battered women is the decision to leave, but it may also refer to the decision to stop accepting abuse but continue living with the partner. Similarly, another studies indicated that women made attempts to find or deal with the cause of the abuse, in order to decrease the abuse or save the relationship, before leaving for good (Campbell et al., 1998; Keys Young, 1998). For example, Campbell et al. (1998) described that their participants used an active problem solving strategy to achieve non-violence. These strategies included: seeking advice or help from others; calling the police; fighting back; financial actions; avoiding or hiding; self talk; and subordinating self.

The literature on MIPV reports several turning points women experience during an abusive relationship. One of the turning points relate to women’s change in beliefs about intimate relationships (Horrill & Berman, 2004; Patton, 2003). Eisikovits et al. (1998, p. 419) reported that women described their turning points as “an outcome of the collapse of a system of meaning that had kept them in the violent relationships”. This process was seen as a series of interpersonal and personal losses: loss of love; positive traits in the other; one’s authentic self; security; meaning in coping; and faith in the possibility of change. This series of losses caused them to conclude that their relationship could no longer continue. Similarly Chang et
al. (2010) reported a theme described as fatigue or recognition that the abuse was not going to change. Fatigue referred to an accumulation of disappointments in numerous attempts to change the behaviour of the abuser and as a loss of hope for further relationship benefits. They recognised that remaining in the relationship had great costs that they could no longer bear. Burke et al. (2001) found that it often took a specific event or an accumulation of events over time to cause women to finally acknowledge their partner as abusive and move from non-recognition to the acknowledgment stage.

Other turning points identified by research related to: partner’s infidelity (Campbell et al., 1998; Chang et al., 2010; Patton 2003); increased knowledge and reaching physical or emotional breaking point (Petersen, Moracco, Goldstein, & Clark, 2004); inability to endure the abuse much longer (Smith, 2003); contemplating murder or becoming violent themselves (Campbell et al., 1998; Smith, 2003). Other key turning points reported by women as a motivator to either seek support or leave the relationship was abuse of, or concern for, children and family members, their safety and the impact of violence on them (Keys Young, 1998; Petersen et al., 2004; Smith, 2003) and man’s physical abuse including incidents of severe violence, increased severity of abuse or being at risk of being killed (Chang, 1996; Chang et al., 2010; Enander & Holmberg, 2008; Patton, 2003). Chang (1996) indicated that physical abuse was viewed by her participants as a clear communication that their partner did not love them. Having a new explanation of their situation comprised a key turning point. Some other turning points described in the literature refer to: financial independence (Campbell et al., 1998); increased awareness of options or access to support and resources (Chang et al., 2010); a partner’s death; a new partner; commencing university or work; children grew older; and involvement of child protection services (Patton, 2003).

In the next section I will reflect on support and responses from formal and informal networks found in the Australian and international literature. I discuss who women approach and what type of support they describe as helpful or unhelpful.

**Support and responses**

Women are likely to reach out for assistance when they are able to accept that violence is wrong and identify that abuse is not their fault or responsibility (DHS, 2004). Spiral two in Figure 1 above (DHS 2004) is themed as ‘transition - sense of order, self-directed action or change’. During this stage, women may spend time away from their partner. They establish their safety and that of their children. This includes securing an income and safe accommodation, and seeking information on their legal rights and responsibilities. There is often ongoing seeking of formal and informal support and legal proceedings involved. As a
result of the support networks, a woman’s viewpoint of violence may be challenged and informed by new understandings. Ongoing support is important during this time to assist women in recognising the effects of abuse and their strengths (DHS, 2004).

Many abused women reach out to formal and/or informal sources of support as a way of dealing with the effects of abuse, including health effects (Liang, Goodman, Tummala-Narra, & Weintraub, 2005; Shannon, Logan, Cole, & Medley, 2006; Hamilton & Coates, 1993). They also seek help and assistance for support and information for themselves regarding DV (Keys Young, 1998). These support networks can secure their safety and protect them from ongoing violence (Liang et al., 2005; Shannon et al., 2006), help gain access to formal protective resources and extended informal networks (Bosch & Bergen, 2006) and increase women’s willingness and ability to seek help (Liang et al., 2005).

Informal support mainly includes family members and friends (Fanslow & Robinson, 2010). The formal sources of support include, but are not limited to, medical practitioners and other healthcare providers, mental health services, police, women’s refuges, non-governmental organisations (Fanslow & Robinson, 2010), clergy, community groups, legal services (Bosch & Bergen, 2006), support groups, advocacy centres, hotlines, shelters, welfare systems and child support enforcement (Moe, 2007). Both support networks can provide women with emotional support and practical help (Keys Young, 1998).

**Informal sources of support**

Research findings indicate that abused women are more likely to approach and reveal their experience of abuse to family and friends first and more often, compared with formal professional services (Bagshaw et al., 2000; Bosch & Bergen, 2006; Dunham & Senn, 2000; Fanslow & Robinson, 2010; Fry & Barker, 2002; Goodman, Dutton, Weinfurt, & Cook, 2003; Moe, 2007; Mouzus & Makkai, 2004; Patton, 2003; Shannon et al., 2006; Spangaro, Zwi, Poulos, & Man, 2010). However, some women may be hesitant about involving family members or close friends for several reasons. They may fear exposing them to unnecessary anxiety, risk or jeopardise their safety if they became involved in the situation. Women may fear judgment, disbelief, shock or improper responses or assistance from these networks. Silence or inaction from these sources may be interpreted by women as a sign of disinterest or indifference. Some women may simply not have any informal support to turn to or those they can trust (Keys Young, 1998).

**Formal sources of support**

Women seek assistance from a wide range of formal sources such as: hospitals and GPs;
personal counsellors and self-help groups; mental health services, psychiatrists and psychologists; family support services and relationship or marriage counsellors; legal aid; clergy; disability services and child-related services. Depending on the type of support available, how women define the abuse and what they believe is causing it, will influence who they seek help from (Keys Young, 1998). As mentioned earlier, formal sources of support appear to be approached less often and on a secondary basis compared with informal support (Goodman et al., 2003; Shannon et al., 2006).

Researchers, such as Hamilton and Coates (1993) and Shannon et al. (2006), demonstrate that the most frequently contacted professionals are not necessarily the most helpful ones. For example, Hamilton and Coates (1993) found that crisis intervention workers were not approached most frequently, but were perceived to be most helpful by their emotionally abused female participants. Similarly, psychologists and psychiatrists were in the top five of perceived helpful professionals, even though they were not in the top five of approached professionals. One of the more recent examples (see Table 3) was demonstrated by Shannon et al. (2006), where the highest approached services were not necessarily perceived to be the most helpful. On the scale of zero (not at all helpful) to four (extremely helpful), criminal justice resources were perceived to be the most helpful, followed by informal resources and formal resources. The top three specific sources of support that were perceived most helpful in criminal justice were: lawyers (3.20), domestic violence orders (3.13) and judges (3.03). For informal sources of support it was friends (2.91) and family

Table 3: Help-seeking behaviour and overall helpfulness of resources

<table>
<thead>
<tr>
<th>Type of resource</th>
<th>% of 379 women who sought support</th>
<th>Scale of helpfulness</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Criminal justice resources</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>lawyer</td>
<td>24</td>
<td>3.20</td>
</tr>
<tr>
<td>victim advocate</td>
<td>69.7</td>
<td>2.93</td>
</tr>
<tr>
<td>police</td>
<td>87.3</td>
<td>2.59</td>
</tr>
<tr>
<td><strong>Informal resources</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>friends</td>
<td>78.1</td>
<td>2.91</td>
</tr>
<tr>
<td>family</td>
<td>73.9</td>
<td>2.67</td>
</tr>
<tr>
<td><strong>Formal resources</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>drug/alcohol treatment</td>
<td>4.2</td>
<td>3.19</td>
</tr>
<tr>
<td>AA/NA</td>
<td>6.9</td>
<td>2.77</td>
</tr>
<tr>
<td>homeless shelter</td>
<td>2.8</td>
<td>2.75</td>
</tr>
<tr>
<td>medical personnel</td>
<td>22.2</td>
<td>2.70</td>
</tr>
<tr>
<td>support group</td>
<td>8.4</td>
<td>2.66</td>
</tr>
<tr>
<td>crisis line</td>
<td>9.2</td>
<td>2.60</td>
</tr>
<tr>
<td>clergy/church</td>
<td>21.4</td>
<td>2.52</td>
</tr>
<tr>
<td>women’s shelter</td>
<td>12.9</td>
<td>2.52</td>
</tr>
<tr>
<td>marriage counsellor</td>
<td>10.6</td>
<td>1.03</td>
</tr>
</tbody>
</table>

The top three formal resources that women found helpful were drug/alcohol treatment (3.19), Alcoholic Anonymous/Narcotics Anonymous (2.77) and homeless shelters (2.75). The bottom three resources were clergy/church (2.52), women’s shelters (2.52) and marriage counsellors (1.03), even though they were approached more often, compared with other services (Shannon et al., 2006). Nevertheless, Hamilton and Coates (1993) indicated that any service providers and professionals, even those without a primary role in dealing with MIPV should anticipate being contacted by abused women. They further suggested that other service providers, educators and policy makers should use frontline crisis workers’ understanding and knowledge of DV to better assist the needs to the abused women.

Helpful responses
In this section I will discuss some of the helpful responses reported by women in other studies. These responses can be categorised into two main themes: emotional support and practical support. Emotional support is describe by women as being listened to, given advice, believed (Hamilton & Coates, 1993; Keys Young, 1998; Patton, 2003), validated (Keys Young, 1998; Laing, 2010), encouraged, guided or affirmed (Liang et al., 2005). Bosch and Bergen (2006) reported that the most emotionally supportive behaviours described by women were love and acceptance, and showing availability and support if needed. Being aware of unconditional support can empower women to continue resisting their partners and their behaviours and pursuing productive, safe and independent lives (Moe, 2007).

Other helpful aspects related to both formal and informal networks: having a non-judgemental and respectful attitude towards women (Dienemann, Glass, & Hyman, 2005; Feder, Hutson, Ramsay, & Taket, 2006; Keys Young, 1998; Moe, 2007; Patton, 2003); responding to them in a sensitive, appropriate and helpful manner; providing options (Keys Young, 1998); and information (Keys Young, 1998; Laing, 2010). Additional responses described by Patton (2003) related to: providing timely responses; using an empowering approach; showing respect for the woman’s choices, feelings and decisions; recognising the man’s responsibility for the violence; and not being overly directive. This type of support can help women to cope and manage the abuse, gain emotional strength and a sense that they are not alone (Keys Young, 1998), help them to see own strengths, how self-confidence is eroded or how children become affected by abuse (Hamilton & Coates, 1993).

Similarly, practical support is valued by women and found to be beneficial (Keys Young, 1998; Laing, 2010; Patton, 2003). Practical assistance includes providing women with: time and place to have a break; financial support (Keys Young, 1998; Liang et al., 2005); childcare (Liang et al., 2005); finding accommodation; obtaining information about
options or services (Keys Young, 1998); providing referrals to someone who did help (Feder et al., 2006; Hamilton & Coates, 1993; Hegarty & O’Doherty, 2011; Keys Young, 1998); visiting without their partner being present (Bosch & Bergen, 2006); and focusing on women’s and children’s safety (Patton, 2003). Women reported in Smith’s (2003) study that knowing about the availability of these services, should they need it in the future, was reassuring and comforting. In contrast, there are also unhelpful responses.

**Unhelpful responses**

According to Hamilton and Coates (1993) there can be lack of sensitivity and attentiveness to women’s experiences from professionals. Some research findings indicated that women experience sympathetic but unhelpful or inappropriate responses or advice, which they do not wish to follow (Bacchus, Mezay, & Bewley, 2003; Hamilton & Coates, 1993; Keys Young, 1998). Both formal and informal support networks can have rejecting attitudes or a lack of empathy, poor listening skills or be unresponsive (Hamilton & Coates, 1993; Keys Young, 1998) and not provide continuous support or care (Bacchus et al., 2003; Dienemann et al., 2005; Feder et al., 2006) to women experiencing IMPV. Some of them may not offer help (Bacchus et al., 2003), avoid the abuse issue, tell her to leave, criticise her for staying or returning to the relationship (Keys Young, 1998) or facilitate keeping her in an abusive relationship (Bosch & Bergen, 2006). They may question a woman’s decision or be overly directive or not respect her choices (Bosch & Bergen, 2006; Patton, 2003). Hamilton and Coates (1993) suggested that lack of or inappropriate responses or failure to help women in DV situations may contribute to the continuation of victimisation. It may result in a woman losing her ability to take action. Bacchus et al. (2003) suggested that there is a need for training in order to assist professionals to be attentive to indicators of abuse. This would help them be prepared to enquire about DV directly in an appropriate manner to facilitate disclosure of abuse.

Tower (2007) argued that lack of time, personal values and attitudes, and lack of IPV knowledge and associated issues by health professionals are key obstacles that obstruct an effective healthcare response. Women reported formal networks that showed a lack of attention to the signs of abuse or ability to understand their circumstances, and having limited understanding of other forms of abuse other than physical violence (Bacchus et al., 2003; Keys Young, 1998; Laing, 2010). Poor referrals, or lack of awareness or information about appropriate formal support services that could help were areas of concern identified by women in several studies (Bacchus et al., 2003; Bosch & Bergen, 2006; Hamilton & Coates, 1993; Keys Young, 1998; Seeley & Plunkett, 2002). The importance of whether women can
afford referral service is also an important consideration (Dienemann et al., 2005). Since some services do not provide information or display brochures on DV, women in one of the studies reported being afraid or embarrassed to bring up the topic of DV (Bacchus et al., 2003). Feder et al. (2006) suggested that healthcare professionals place brochures or posters in the clinical setting.

Moe (2007) found that women reported abandonment as being more common than assistance from informal sources of support. Sometimes help came with an ultimatum. Women reported that these networks failed to intervene when an assault occurred (Bosch & Bergen, 2006; Patton, 2003) or provide information and focus on their safety (Patton, 2003). Sometimes family and friends lack awareness of the issue of DV; show disbelief and condemnation (Keys Young, 1998). As well, they can be: practically and emotionally unsupportive; uphold traditional values that are oppressive of women; do not actively support women to access formal supports; do not enhance their insight into their situation or do not recognise their need for support (Patton, 2003).

**Post-relationship journey for MIPV survivors**

It can be difficult to recover from MIPV because a woman has to heal from trauma caused by someone she loved and was committed to (Smith, 2003) and because experiences of DV continue to affect women’s lives, especially if there is ongoing contact with the perpetrator (Evans & Lindsay, 2008). It takes a great deal of energy for a woman to change internalised negative beliefs of herself that were created by a partner (Landenburger, 1998). Smith (2003) identified that women go through emotionally and sometimes physically painful stages of freeing themselves from their abusive past. The six main themes she described in this phase were: leaving; asking or accepting help; freedom; grieving the losses (youth, dreams, finances, relatives); confronting regrets; and experiencing painful feelings like anger, resentment, inability to trust, guilt, failure and revenge. Women may experience negative symptoms such as PSTD, flashbacks (DHS, 2004; Smith, 2003), reoccurring distressing dreams, distress at external cues (Smith, 2003), ongoing chronic health issues, doubts about leaving, and other difficulties like managing as a single parent, accommodation or safety (DHS, 2004).

The third spiral in Figure 1 above (DHS 2004) describes the ‘moving forward’ process, where women rebuild their sense of self and increase control over their lives, which usually comes after leaving violent partners. According to some researchers, following the separation comes a time of adjustment and reaffirmation, including confidence, self-esteem, interests and life (DHS, 2004; Landenburger, 1998; Smith, 2003), and (re)discovering self and
reflecting on oneself (Horrill & Berman, 2004; Smith, 2003). At this stage, women express a sense of energy, set goals and make decisions about their future, become stronger in making decisions, and reintegrating into community. They develop confidence to connect with the world and face their fears, and become more ready, or have courage, to continue forward (DHS, 2004).

According to the following researchers, the process of ‘moving on’ occurs when a woman discards her identity as victim, creates a new self-image, begins a new relationship (Horrill & Berman, 2004), while healing and growth comes about as a woman releases herself from anger and the bitterness of the past (Smith, 2003). Other key themes Smith (2003) identified that relate to women were: letting go of the past; finding their voice and asserting themselves where required; becoming self-resilient; forgiving oneself and others; and finding purpose in life.

In the final spiral in Figure 1 of moving away from family violence (‘continuing the journey - realisation of self knowledge: who I am and what I want’), women begin determining their directions and needs, expressing themselves, having a strong sense of identity and personal power, feeling free to be open, trusting, reclaiming freedom and letting go of fear. They may be in a better position to respond to external life stresses and demands of parenting, and they experience an increased sense of safety, which can be connected with their enhanced control over numerous factors in their lives. Through freedom of choice and existing connections, women can utilise coping strategies to manage negative effects and access support (DHS, 2004).

According to Evans and Lindsay (2008, p. 360) “there is no such thing as recovery in absolute terms”, because the experienced abuse and caused effects are aspects that women cannot simply move on from, get over or erase. Evans (2007) suggests the term ‘incorporation’ better depicts the process by which the survivor’s experiences integrate within her sense of self and other identities she may have. Incorporation offers a rationale for the existence of both positive and negative long-term effects of DV, whereas the concept of recovery does not. Incorporation validates the manner in which women’s past experiences may have influenced their current choices. It also considers potential damage from ongoing contact with the perpetrator (Evans, 2007). Moreover, it offers women a truthful and practical assessment of the post-relationship journey (Evans & Lindsay, 2008). Smith (2003, p. 566) pointed out that “the past is very much in the present”.

Having reviewed the literature concerned with my topic, in the next chapter I will discuss how I conducted the research.
Chapter 3

Research methodology, methods and procedures

The purpose of this study was to explore and understand the lived experiences of self-identified emotionally and psychologically abused women in heterosexual relationships. I wanted to explore the ways EPA is experienced as reported by women. The aim of my study was to identify various forms of EPA, and to categorise and describe the abusive behaviours. I also looked at different forms of negative effects experienced by these women as a result of EPA and explored women’s awareness and responses when dealing with EPA. In-depth interviews conducted with these women provided information which demonstrates a number of different patterns of EPA and its negative effects. In summary, I was interested in five aspects of women’s experiences:

- emotionally and psychologically abusive behaviours women have experienced from their intimate partners
- emotional, psychological, physical and any other possible effects on women
- women’s definitions of EPA
- turning points and/or process of developing awareness of EPA
- responses and support from formal and informal sources of support regarding women’s experience of EPA.

In this chapter I outline my theoretic approach to the study and the methodology of the research study, followed by a description of the two participant recruitment methods I have used. I then describe the interview and questionnaire procedures, data analysis methods and ethical research aspects. I conclude this chapter by discussing the limitations of this research.

Methodology

While my primary methodology was qualitative, I attempted to use both quantitative and qualitative methods. The quantitative data collection was thwarted and so the basis of my research is largely the 20 in-depth interviews undertaken with women who had experienced EPA. Here, I explain both approaches—what I attempted to do and what actually happened.

Qualitative approaches

I used phenomenological and feminist approaches in my qualitative research. I also draw on some elements of narrative research. Phenomenological approaches contextualise the phenomenon that is being studied through how it is perceived by individuals in that particular
situation (Lester, 1999). Phenomenology is a form of qualitative research that investigates the lived experiences of individuals and attempts to understand the “truth” of lived experience (Byrne, 2001). In other words, “Phenomenology takes accounts at face value in that it treats them as an expression of experience itself” (Willig, 2007, p. 210). This approach is beneficial for making marginalised voices heard and allowing deeper issues to emerge. Phenomenology is based in a paradigm of individual subjectivity and knowledge, emphasising the significance of personal interpretation and point of view (Lester, 1999). According to Kumar (2012) descriptive phenomenology is suited to researchers who look for patterns and seek similarities in human experiences. The research process involves the descriptions provided by the participants being analysed and divided into meaningful statements, and collecting those meanings that are important to the construct of the studied phenomenon (Penner & McClement, 2008). This approach was appropriate for my study, as I described in my introduction chapter, I was interested to understand and describe EPA, including what behaviours constitute it and what negative effects it causes, from the perspective of women who have experienced EPA in intimate relationships (Penner & McClement, 2008). My approach to the research is based on the understanding that the analysis of the meanings that each woman places on her experiences of EPA will expand the knowledge of the phenomenon, and allow others to better comprehend and respond.

Narrative inquiry is another “way of understanding experience” (Clandinin & Connelly, 2000, p. 20). Narratives were predominantly useful when I enquired about turning points and/or processes of developing awareness of EPA, and the post-relationship journey among my participants. Women’s narratives helped me to understand how they made sense of their lives and their actions relating to these events and notable episodes (Cousin, 2008). Narrative methodology sees interviewees as “narrators with stories to tell and voices of their own”, who tell their story the way it is understood by them (Chase, 2005, p. 660). Such an approach is based in the idea that “there is an inherent motivation for people to seek meaning for their own lives through ‘storying’” (Shaw & Gould, 2001, p. 151).

Feminist research emphasises the importance of listening to women, in order to reveal their lives and experiences from their standpoint, terms and language (Kitzinger, 2004; Lynne, 2003), while exploring and empowering their experiences (Hesse-Biber, 2010). Feminist qualitative researchers examine women’s lives “by listening to their voices, exploring and thus empowering their experiences …” (Hesse-Biber, 2010, p. 129). According to Kitzinger (2004), validating and reclaiming of women’s experiences through listening to their accounts continues to be central to feminist qualitative research. Both qualitative feminist research and narrative approaches emphasise transformation of the relationship between the interviewer
and interviewee into one of a listener and narrator (Chase, 2005). It promotes a non-
hierarchical relationship between researcher and participant and allows women’s voices to be
heard, while promoting reciprocity from the researcher in the process of research (Bryman,
2008). According to Oke (2008, p. 10) “Firsthand experience is an important way of
knowing” and it helped me to have an in-depth understanding of women’s accounts.

Ultimately, an objective of feminist research is to create change for women and social
transformation (Hesse-Biber, 2010), which is what I hope to achieve with my research. This
will allow women’s voices to be heard, which will increase awareness of EPA and its
negative effects among women and the general public, and consequently reinforce that it
should be taken as seriously as the physical forms of MIPV.

Qualitative methods: in-depth interviews
In this thesis I present women’s lived experiences of EPA perpetrated by their intimate
partners. Smith (1994) argued that it is only through in-depth interviewing that the real
characteristics of violence come out. As I have explained in relation to qualitative research
generally, interviewing allows women to use their own words (Kitzinger, 2004; Smith, 1994).
It is about viewing social worlds and events through the eyes, perceptions and understandings
of the people under study (Bryman, 2001). According to Kitzinger (2004, p. 126):

women’s voices do not always tell ‘truths’: memories can be fallible, stories can be
embroidered, participants may be more interested in creating a good impression than
in literal accuracy, speakers contradict themselves and sometimes deliberately lie.

Nevertheless, in-depth interviews remain the chosen method for feminist researchers. It is a
self-reporting method which allows participants to narrate their own experiences. Kitzinger
(2004) stated that the collected data (women’s voices) are treated by feminist researchers
more or less as truthful reports of the experiences. Human subjectivity is valued by qualitative
researchers (Hesse-Biber, 2010). The women I interviewed were the source of information as
they had firsthand experience. I perceived them as the experts in their own lives and took their
accounts at face value. I undertook critical analysis to better understand the phenomenon of
emotional and psychological abuse and reported their experiences as accurately as I could.

One of the most common approaches in qualitative research is semi-structured
interviews (Bryman & Burgess, 1999). I used in-depth, face-to-face, semi-structured
interviews with set themes, which directed the interview conversation, while allowing the
questions to be modified and added as the interview progressed. Consistent with a narrative
approach, it enabled women to shape the flow of their story, allowing them to stay within
their personal boundaries of comfort and safety. It also allowed the meanings to unfold for each individual, which could not be done through a questionnaire. The transcribed interviews produced rich and engaging empirical data about the perspectives and lives of these women.

**The addition of a quantitative approach**

While I had initially intended to only use qualitative research methodology, during the literature review phase, I decided to add a questionnaire component to my data collection process. There were several reasons for this. First, I found that quantitative data was used frequently in the literature I came across. Second, a questionnaire had the potential to trigger women’s memories and provide additional data. Third, the use of more than one data collection method is frequently used in a phenomenological approach, in order to achieve a more accurate illustration of the phenomenon under study (Penner & McClement, 2008). I also hoped to gather a greater number of participants with a questionnaire. It was also my first attempt to design an effective method of identifying EPA and I was keen to take this opportunity. My personal interest in quantitative methods and analysis, including my disciplinary background, played a small part as well. Finally, I was influenced by Hesse-Biber (2010) who states that the research question can direct the use of the mixed methods model, which was the case in my topic.

There are several practical benefits of mixed qualitative and quantitative design. It can provide stronger validity evidence and more thorough information, while providing different perspectives of the information gathered. By combining a survey and an interview, research can gather responses of greater depth (Desai & Saltzma, 2001). Mixed methods may offer the opportunity to uncover silenced voices and knowledge not possible otherwise (Hesse-Biber, 2010). I believe this combination of methods could have been a powerful tool for gathering similar and possibly different data. Each method could have facilitated the collection of unique data, which also complemented and added meaning. Consequently, this approach helped to understand the research problem better (Hesse-Biber, 2010).

Reinharz (1992), a feminist researcher, pointed out that if researchers respect individual differences, they need to use multiple methods. She argued that it is about researchers providing opportunities for those being studied to provide information in ways they deem to be most suitable and that will help them recall their experiences. Therefore, I decided to provide women three options to participate: a questionnaire, an interview or both. In-depth interviews were more suitable for collecting information on women’s lived experiences, while the questionnaire collected additional data on the behaviours experienced, as I explain next.
Quantitative methods

Questionnaires, in contrast to in-depth, semi-structured interviewing, can be narrow in focus and limited by the number of question and answer options they provide. Importantly, research participants may have different interpretations of these options and not have the capacity to explain their particular perspective. In my study, the women may have been confused by their experiences of EPA and may not have been able to translate via an inflexible questionnaire form. A questionnaire in and of itself may build a one-sided depiction of what violence against women is, without providing sufficient detail. Feminist researchers criticise surveys on violence against women, due to lack of sensitivity toward the nature of MIPV, and the process and escalation of violence. As well, in surveys women tend to minimise or forget violence (Piispa, 2002). However, I considered that a questionnaire could provide an opportunity to trigger women’s memories and gather additional information along with in-depth interviews on the subject of EPA. Contrary to this belief, Marshall (1994) found in her study that interviews revealed experiences of some behaviours that participants had not reported in questionnaires.

I was interested to find out what type of EPA behaviours male partners perpetrated, as reported by the women I interviewed. I was interested in gathering data from a large sample of women and felt that a questionnaire would be most suitable for this purpose. As Dawson (2009) pointed out, questionnaires can reach many more people and they are generally quicker than qualitative research. Analysing such data is also easier and quicker. I proceeded to analyse a range of surveys in existence and developed my own research tool, as will be discussed shortly.

I hoped that that my questionnaire would appeal to many women and my target was 50 participants. To my disappointment, and despite an extensive recruitment process, as discussed in the next section, only five women filled in the questionnaire, in addition to the 20 women who were interviewed. Based on such a low number of participants, I decided to integrate the findings from the questionnaires with the interviews, because statistical analysis was deemed inappropriate. Consequently, in my analysis, I only used the 20 questionnaires of the women who participated in interviews.

Recruitment of participants

I used two strategies to recruit participants and both involved formal support services. The first method involved direct recruitment from and within services and the second method involved putting an advertisement through online newsletters and e-mail lists distributed by referral and support services. Creswell (2007) recommends that a phenomenological study
requires at least 10 participants in order to make assertions regarding the phenomenon of interest. I hoped to find a minimum of 20 participants for my qualitative study, but as I will explain, due to the recruitment difficulty, I present the experiences of only 20 women in this thesis.

The criteria used to identify women for the study were: aged between 18 to 65 years; had previously been in a self-identified, serious heterosexual relationship; identified themselves as emotionally and/or psychologically abused by their partner(s); had little or no experience of physical abuse or, if they did, would be able to reflect only on non-physical forms of violence; and finally, were supported by a professional. Due to the risks to women’s emotional wellbeing, I only interviewed women who were previously or currently linked in with a support service or counsellor. This is discussed further in my discussion of the ethical aspects of the research that will follow.

**Engagement with support services**

Because my research topic is of a sensitive matter, I had to ensure the safety and support for participants. I decided that the safest and most ethical way to find participants would be through support services, women’s support groups, counsellors or outreach services. These networks have a clientele of women who have experienced MIPV either in the past or currently, and were, or had, received support in some form. Thus, the initial process of recruitment began with either face-to-face contact or sending them the information pack comprising the plain language statements (PLS), consent form, interview questions and questionnaire (see Appendix B, C, D, E) via e-mail or post. The services were asked to pass on information about the study to the clients they considered suitable. This allowed the support services to make an informed decision about their involvement and those women who were invited to participate.

Besides ethical concerns there were three other reasons for contacting formal sources of support. The workers in these services are key informants who work on a daily basis with women who have experienced DV. They have in-depth knowledge and skills, and different training and experience from me. When I contacted them about their participation in the recruitment process, I also spoke to some of them about other matters, if they were willing. I wanted to hear their suggestions on: the best ways of interviewing women; how to keep levels of discomfort to a minimum during interviews; women’s safety planning (if it was necessary); responding to disclosures of personal information, or harm to themselves or to others; contingency plans such as providing women with alternative contacts for support or counsellors; and what would be a good way to reimburse women for participation in the
research. These were the factors that were important for me to consider before organising interviews, and I found these consultations very useful. The second reason for contacting formal support services was to ensure that women were currently or previously in contact or linked to support networks. There was also a possibility that the interviews would be conducted in the premises of these services and this ensured that immediate support was available if needed. The third and final reason was that it confirmed that women had already identified and learned about different forms of abuse experienced. This aspect partially ensured that women had some knowledge and understanding of EPA and would be able to reflect on their experience.

Overall, I contacted 35 formal support services from the inner city, and inner and outer suburbs of Melbourne. These services included community health centres, women’s health centres, counselling services, women’s support groups, outreach services and women’s information services. I met workers face to face with several services, while e-mail or phone contact was made with the majority. I found this recruitment process unexpectedly very difficult. Several services were re-contacted over time to remind them about the project, or to find out if any women were approached and/or had expressed interest in my research project. Usually the services were interested in my research topic, but because this process involved recruiting participants through second parties, I regularly received responses indicating that: the service was generally busy; they did not have time to be involved; required management approval; required their ethics approval; had other research in progress; or currently did not run any support groups for women and hence did not have women who met the criteria for my research. A minority of services showed no interest and did not respond to my initial contact.

While clearly there are benefits in working in collaboration with formal services, there are also challenges. The first one is the ‘time commitment’ required by all involved (particularly by the services themselves). Support services and practitioners usually have less time to devote to the research project than the researchers. Spending time on someone else’s research means time away from their important work which is, after all, their ‘core business’. As well, practitioners may become concerned that they will end up performing the researcher’s work. ‘Trust’ is another issue, where staff may have concerns over the motives of the researcher. They may worry that interview questions will trigger and reactivate emotional trauma or compromise women’s safety. There may also be a worry that research procedures will considerably modify the service to the detriment of clients (Edleson & Bible, 2001). Through this recruitment method and with the help of one support service, I was able to find one participant. After nearly a year of no other participants and several re-contacts,
and considerable disappointment, I decided to recruit via advertisements (see Appendix F) in online newsletters and e-mail lists distributed by referral and support network services.

**Advertisement as a recruitment strategy**

In order to place advertisements I had to make a small amendment to my ethics application to ensure that the same care was taken during the recruitment process and after. I approached organisations such as the Domestic Violence Resource Centre Victoria, Women’s Information and Referral Exchange, the Women’s Department at the University of Melbourne, and the Council of Single Mothers and their Children, because they had access to a wide group of women and services through their e-newsletters and e-mail lists, sent to subscribers only. By using this method of recruitment, the same care, criteria and all other aspects of the research remained the same as in the initial method. DisAbility Connections (Victoria) placed my advertisement on their website. This advertisement was placed through another source during the recruitment process, rather than by me directly.

Women began contacting me soon after the advertisements were placed. I believe this method provided women with a personal choice and capacity to make an informed decision as to whether they wanted to participate, rather than relying on formal support networks to make that choice for them. A total of 29 women expressed their interest, but not all proceeded with the research. Some felt that they could not commit to the research, were not suitable, or were currently going through a difficult time with their partner, while others did not respond after the information pack was sent to them.

The women who contacted me, showing their interest in the research, were sent an information pack similar to the one sent to formal support sources, including PLS, consent form and interview questions. Women were invited to participate in the research by participating in the interview, completing the questionnaire or both. If they were still interested in participating, we arranged a meeting date and location.

**Procedures**

**Interview procedures**

All interviews, transcriptions and analysis of the data were done by me. All women were interviewed face to face and were given an option of the location. Of the 20 interviews, one was conducted at a support service, another was conducted at my house, two interviews were held at their homes and the others were held in a meeting room at RMIT University. Interviews lasted 92 minutes on average. The shortest interview was 57 minutes and the longest one was 155 minutes. Some were inclusive of questionnaires. The majority of the
interviews went well, without women showing obvious signs of distress. We laughed and made jokes. These women were ready and keen to share their experiences with others through me. Whenever I observed that women became upset I offered time out or discussed other things with them. Those women who became upset were mainly mothers. They found it hard to talk about their children, since the experience of EPA and divorce affected children as well. I cut short one of the interviews because the woman became upset while talking about her partner, which related to her recent break-up with him. Two of the women found it hard to look at me at the start of the interviews and consequently partially described their experience with closed eyes. Each participant was given a movie voucher as a thank you for their help, their time and courage to share their experience.

Before commencing interviews, I usually briefly described the reasons and motivation behind my research topic, which was my personal experience. I believe my experience and understanding of this form of abuse assisted me to have a closer rapport with each woman. The establishment of a good level of rapport and compassion is important to attaining depth of information (Lester, 1999). I also acknowledge that my personal experience influenced the research process, my participants and information they provided (McCabe & Holmes, 2009). As Dowling (2006, pp. 13-14) points out: “Reflexivity is vital in feminist research as the researcher identifies with the women she is researching and must therefore constantly be aware of how her values, beliefs and perceptions are influencing the research process”.

We then discussed the consent form (see Appendix C) and the interview structure and questions. During this time I answered any questions women had. A signed copy of the consent form was given to the women, and I kept one too. If women asked, I provided them with another copy of the plain language statement. The interview questions were sent to the women prior to scheduling our meeting. I made sure that it was safe for the women to have this material in their home, by enquiring about it. It gave women an opportunity to find out what would be discussed during the interviews and could help trigger memories. I emphasised to participants that if they were uncomfortable in answering any of the questions, we were able to speak about something else and that it was up to them how much information they wanted to provide.

I began interviews by asking women to tell the story of their experience of emotional and/or psychological abuse. When they finished speaking or had nothing else to add, we covered the rest of the interview questions in more detail (see Appendix D). The questions were centred around: behaviours perpetrated; negative effects; women’s perception on why the abuse occurred; responses and support from formal and informal support networks; women’s awareness and understanding of EPA; what helped them during and after their
experiences, and what changes occurred. I had several verbal prompts to make sure that I had information from all participants on these specific aspects. The last question I asked my participants related to their suggestions to other women and what it was like to participate in this research project. I considered the last questions to be debrief time. Usually during the interviews we had a short break to talk about a subject other than EPA, but some women saw it as an opportunity to ask me questions about my experience, the study, and what other participants talked about.

At the end of the interviews women were asked whether they wanted to fill in the questionnaire. If they agreed, I asked whether they wanted to do it straight away or take it home with them and return it at a later stage. Most women did it straight away, while others took it home. I made sure it was safe for them to take it home by enquiring about this.

All interviews were recorded with the women’s permission. I explained that the use of the tape recorder allowed for the conversation to be recorded without interruptions (compared with note-taking) and the recording could be replayed for the purposes of transcription. Being able to work with interview transcripts enhanced the accuracy of the data collected. All women’s identities were disguised through the use of pseudonyms, mostly chosen by the women. These pseudonyms were used in all documents related to the research. The names of their partners and children were not reported in the written research.

Process of creating the questionnaire
There are many questionnaires and scales available in the literature. These have been developed to identify and measure the extent or severity of EPA. They are usually used to identify the level of abuse and, from this, the seriousness of the abuse is assumed. This is problematic, though, because the impact of this abuse is not necessarily related to the severity or extent. For example, infrequent behaviours carried out by a partner can be very harmful to women. The type of scales, the questions asked and the behaviours identified will also affect whether it covers all aspects of EPA. If the scale only concentrates on one or a small number of categories, then the measurement of EPA is too narrow and inaccurate. Consequently, I did not want to measure the extent of the abuse, but rather what behaviours women experienced, impact and their perception of how each behaviour made them feel.

During the literature review stage I found the ‘Measuring Intimate Partner Violence Victimization and Perpetration: A Compendium of Assessment Tools’. I drew ideas from the section on Psychological and Emotional Perpetration Scales (Thompson, Basile, Herts, & Sitterle, 2006). With the help of these examples and others found in the literature, I created a questionnaire using a combination of 11 different scales and assessments measuring
emotional and/or psychological abuse. The scale type, developers and characteristics of the scale are described in Table 4 below. This chart demonstrates that EPA can have a range of factors, as evidenced by the sub-scales (Kelly, 2004).

The process of developing my questionnaire included combining the scale items and identifying common forms and behaviours. I identified 54 common questions, which I later cut down or combined to 48 questions. This was done in order to keep it short, while attempting to cover major behaviours. My headings were slightly different from the ones found in the literature. Those I identified are:

- Domination, control, manipulation or coercion – 8 items
- Criticism, denigration, or humiliation – 9 items
- Isolation, restriction or monitoring – 9 items
- Threats – 6 items
- Indifference, discounting or disregarding – 8 items
- Undermining, destabilising or invalidating – 8 items

The questionnaires administered to participants had different headings from the list that I identified, because I felt they were easier to understand and did not imply a more negative experience to women. The behaviours and headings were designed in a manner starting from (in my opinion) more general and less upsetting to more serious. These headings were:

- Everyday things, behaviours or acts – 8 scales
- Relationship with him (interpersonal relationship) – 22 items
- Things about or related to you – 12 items
- Relationship with others (social relationships) – 6 items

As noted, the results from these questionnaires were combined with the information provided by women in the interviews.

My questionnaire also asked women to rate the frequency of the experienced behaviours and to what extent they were upset by them. Frequency is measured in most surveys but few measure both frequency and severity of violent behaviours experienced (Desai & Saltzma, 2001). After careful examination of the scales used by other researchers, I decided to use a Likert scale. Frequency was measured on the scale of one to five, where one was ‘never’ and five was ‘very frequently’. For the level of distress I have used the same method and used a scale from ‘Measure of Wife Abuse’ (Rodenberg & Fantuzzo, 1993). It asked participants to indicate how hurt or upset they were by each action: ‘this never hurt or upset me’ to ‘this often hurt or upset me’. While this analysis is not presented in the thesis (I plan to write it up later), women indicated that even infrequent behaviours made them feel
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<tbody>
<tr>
<td>1. Psychological Maltreatment of Women Inventory</td>
<td>Tolman, 1989; 1999</td>
<td>58-item scale measures psychological maltreatment of women by their male intimate partners. Including behaviours of dominance, isolation, emotional and verbal abuse.</td>
</tr>
<tr>
<td>2. Abusive Behavior Inventory</td>
<td>Shepard &amp; Campbell, 1992</td>
<td>30-item scale - 2 sub-scales measure the frequency of physical and psychological abusive behaviours. The psychological abuse sub-scale includes 17 items. Including behaviours of isolation; emotional abuse; use of male privilege; threats and economic abuse</td>
</tr>
<tr>
<td>3. Index of Psychological Abuse</td>
<td>Sullivan &amp; Bybee, 1999; Sullivan, Parisian, &amp; Davidson, 1991; O’Leary, 1999</td>
<td>33-item scale measures the degree to which assailants used ridicule; criticism; harassment and emotional withdrawal.</td>
</tr>
<tr>
<td>4. Measure of Wife Abuse</td>
<td>Rodenburg &amp; Fantuzzo, 1993</td>
<td>60-item scale - 4 sub-scales measure the frequency of physical, sexual, psychological and verbal abusive behaviours. The psychological abuse sub-scale includes 15 items and the verbal abuse sub-scale includes 14 items.</td>
</tr>
<tr>
<td>5. Profile of Psychological Abuse</td>
<td>Sackett &amp; Saunders, 1999</td>
<td>21-item scale that measures a wide variety of psychologically abusive behaviour like criticism, ridiculing of traits, jealous control and ignoring.</td>
</tr>
<tr>
<td>6. Multidimensional Measure of Emotional Abuse</td>
<td>Murphy &amp; Hoover, 1999; Murphy, Hoover, &amp; Taft, 1999</td>
<td>28-item scale (reduced from 54 items) that measures dominance/intimidation; hostile withdrawal; denigration; restrictive engulfment; and dominance/intimidation</td>
</tr>
<tr>
<td>7. Subtle and Overt Psychological Abuse of Women Inventory</td>
<td>Marshall, 1999</td>
<td>39-item scale that measures overt behaviours: indifference; dominance; discrediting and monitoring; and subtle behaviours: isolating, discounting and undermining.</td>
</tr>
<tr>
<td>8. Follingstad Psychological</td>
<td>Follingstad, Coyne &amp; Gambone, 2005</td>
<td>52-item scale measures: destabilising perception of reality; isolation/monopolisation; threats/intimidations; establishment of power through refusal; treatment as inferior; jealousy/suspicion; verbal abuse/criticism; emotional wounding behaviour around fidelity; lying/deception; withholding emotionally/physically; guilt-induction/blaming; attacking attractiveness/sexuality; monitoring/checking; rigid gender roles; control over personal behaviour; public embarrassment/humiliation and manipulation.</td>
</tr>
<tr>
<td>9. Aggression Scale (FPAS)</td>
<td>Follingstad, Coyne &amp; Gambone, 2005</td>
<td></td>
</tr>
<tr>
<td>10. Composite Abuse Scale (CAS)</td>
<td>Hegarty, Sheehan and Schonfeld, 1999; Hegarty, Bush &amp; Sheehan, 2005</td>
<td>30-item scale - 4 sub-scales that measure severe physical abuse items, all sexual abuse items, and emotional abuse which included 11 items (e.g. verbal, psychological, dominance and social isolation abuse items).</td>
</tr>
</tbody>
</table>
During my recruitment process, support services and counsellors raised a possible issue that women might prefer to complete the questionnaire on their own and in their own time. Hence I attempted to design the questionnaire in a manner and language which could be easily understood. Those women who filled in questionnaires on their own had an option to contact me with any questions they had before returning the questionnaire. I hoped this would reduce any misunderstanding or incompletion of questionnaires. However, I preferred to administer the questionnaires in person because it provided an option for clarification. In addition, it provided the possibility of speaking about each of the behaviours or the situation in which each occurred. Those women who did the questionnaires with me were inclined to speak up and share more of their stories.

Ethics

There are several ethical challenges when conducting research in the area of violence against women and I had to address them carefully when undertaking my study. First, women who have in the past or are currently experiencing domestic violence perceived as a vulnerable population. Women may be at emotional risk and/or physical danger and sometimes the risk may increase by participating in such research, especially if a woman is still in a relationship. The safety of participants is paramount and this includes how they are approached, how they are contacted and re-contacted and where they are met (Campbell & Dienemann, 2001). I designed several criteria for participation, anticipating that any risk would be minimised or eliminated. One of the criterion was that women were separated from their partners; not that this eliminates all risks because, as for many women, ending the relationship does not necessarily end the violence, and sometimes it can escalate at this time (Evans, 2007; Fleury, Sullivan, & Bybee, 2000). All of the women in my study had been separated from their partner for at least six months to over 10 years. Some still had contact with their partner through their children and/or court proceedings.

Consistent with RMIT University ethical research requirements, I provided potential participants with a plain language statement. It outlined the research project and its purpose, potential benefits and implications, how the data would be managed, analysed and reported, and assurance of confidentiality and privacy, including contacts of my supervisors and RMIT Human Research Ethics Committee, if they had further questions or any concerns about the study or their participation. Potential participants had an option to contact me for further information on the research and participation. They usually provided their phone contact or e-mail details for me to re-contact them or send them information about the research and the
process of participation. To minimise any emotional or psychological distress caused by the interviews, women were informed beforehand of the emotional risks of participation. They then had time to decide whether they wanted to participate or not.

Conducting an interview outside the home in a safe environment (e.g. shelter, support services, counsellor) can decrease the risk to a participant’s safety (Desai & Saltzma, 2001). Hence, it was important to consider the settings and the venues for interviews. I made several suggestions of possible venues, but it was up to women to choose and make the final decision on the most convenient and/or safest environment for interviews.

The National Statement on Ethical Conduct in Human Research defines risk in research as “potential for harm, discomfort or inconvenience” and if there are potential risks involved in research, it is important to minimise and manage them (National Health and Medical Research Council (NHMRC), 2007, p. 15). The wellbeing of research participants has to be protected, and any possible risks have to be minimised, while possible benefits maximised (VanderStoep & Johnson, 2008). I anticipated that the sensitive nature of the research topic could create emotional distress to women and be considered intrusive. Provision of support was an important aspect and hence criteria for participation was to be currently, or in the past, linked with a support service, counsellor or professional or have that contact available for them, if need be. That is why participants were initially sought from support services. I assumed that if women contacted these services or organisations, or had an existing relationship with them, they would have already discussed their experience, or received some information about different forms of MIPV or received some sort of support or counselling.

I focused on the value of the research, in line with the NHMRC’s National Statement on Ethical Conduct in Research: “The likely benefit of the research must justify any risks of harm or discomfort to participants. The likely benefit may be to the participants, to the wider community, or to both” (NHMRC, 2007, p. 13). The benefits of my research are to enhance an understanding of EPA in intimate relationships, which could be beneficial for other women, the general public, future community education campaigns and support workers. Before I began the recruitment process, I contacted several formal sources of support, as these sources were key informants who worked on a daily basis with women who have experienced MIPV. It was useful and important to gather their views and knowledge on this type of research and the ethics of interviewing women who have experienced MIPV.

During our meeting I provided women with a consent form, outlining the aspects of the research study, highlighting voluntary participation, and the right to withdraw from the study (VanderStoep & Johnson, 2008) or cease participation at any time (Desai & Saltzma,
Campbell and Dienemann (2001) emphasised the importance of not pushing participants to reveal information they may later regret. One strategy is to remind participants that they have the freedom not to answer particular questions. I provided women with interview questions before the scheduled interview date so they knew in advance what would be discussed. Before and during the interviews I reminded women that they could disclose as little or as much information as they wanted to, and they had the option to disregard questions they were uncomfortable with. In order to avoid the interrogation style of questioning, my research methodology allowed women to tell their stories in their own way and at their own pace. I used a funnel questioning approach, where I started with a general open-ended question (e.g. tell me about your experience of EPA), followed by more specific questions. Before and after interviews, we discussed any concerns or questions they had including the reasons behind conducting my study.

There are some concerns and disagreement in the literature on whether interviews that talk about trauma (domestic violence, sexual abuse or assault) cause additional trauma. The emotional wellbeing of participants is a major concern for researchers, because participation in such studies may trigger traumatic and painful memories. Though, according to Campbell, Adams, Wasco, Ahrens and Sefl (2010), some degree of upset or distress is not unusual in research, because participants experience recall of past experiences and victimisation. Campbell and colleagues further pointed out that there have been studies on the ways in which trauma research affects participants. These studies found that enquiring about women’s histories of violence is seldom harmful, and has been characterised by many victims as a beneficial experience and not upsetting. Victims reported that participating in research offered the opportunity to talk about their traumatic experiences with a person who was interested and engaged. Pennebaker (1993) found that there were positive gains in mood and health, as well as reduced use of health services from talking or writing about stressful life events.

Since I was concerned that my research could traumatise my participants, I had to consider several practices in interviewing that could contribute to positive results for them. One practice was to make an effort to reduce the hierarchy between the interviewee and me to create a reciprocal relationship (Campbell et al., 2010. The National Statement on Ethical Conduct in Research (NHMRC 2007, p. 11) underlines that “respect for human beings, research merit and integrity, justice, and beneficence – help to shape that relationship as one of trust, mutual responsibility and ethical equality”. This is done through engagement in mutual conversation and disclosure. I answered any questions my participants had and shared my experience, which helped to equalise the power imbalance as feminist researchers suggest. I feel that by sharing my story with women, I created a rapport with them, and helped them
see that they were not alone and that other women had similar experiences. According to Campbell et al. (2010), this practice allows participants to engage with the researcher both professionally and personally.

Another practice relates to researchers being attuned to, and engaged with, the emotions of participants, by creating a compassionate and emotionally supportive setting (Campbell et al., 2010), which in turn could reduce the potential trauma from participation (Campbell & Dienemann, 2001). Campbell et al. (2010) further suggested that researchers should discuss feelings if women became upset, frustrated or angry and, where appropriate, provide tissues, affirmation or touch. I acknowledge the trust these women gave me to reveal their stories. I did my best to listen attentively, treat women with respect, create an equal relationship, and empower them where possible. In situations where women became upset, I offered to discontinue the interview, have a break or talk about something else. During most interviews, we had a tea break and talked about general, unrelated topics. At the end of the interviews, I usually asked women to tell me how they felt about relating their experiences. This was a good diversion from the subject of EPA, to end the interview and to debrief women. It was also important to consider the confidentiality of participants, hence I offered women to choose a pseudonym. Some of them let me do it for them. Pseudonyms were used during analysis and reporting.

Finally, to avoid any risk of distress to myself during and after interviews, I discussed any concerns I had and/or debriefed with my supervisors. Additional support could have been arranged with counsellors at RMIT University (which I never used, because I believed I was fine). I would like to point out that I believe I was overconfident and overlooked my own emotions in relation to the research. While I had the connection with my participants through interviews and transcripts, I felt fine. It was when I stopped and I was on my own that I began to reflect on my own experience and what women had disclosed during the interviews. I found this time to be the hardest. My experience conducting this research affected me. I would suggest other researchers be mindful of this and make sure they are well supported.

**Data analysis**

Women’s interviews were transcribed in full and coded thematically in MS Word. I had intended to use the software program NVivo, but with the small number of participants, it was not necessary. Most interviews were transcribed soon after, while others were done at a later stage as some interviews were scheduled close to each other. I worked on each transcription at least twice to ensure all stories were captured correctly. First, transcriptions were done roughly, capturing not only spoken words but also other features like long pauses, tone of
voice, crying and laughter. Second time, I made sure I filled any gaps I had missed and checked for accuracy.

The main function of a phenomenological approach is to report, rather than explain (Lester, 1999). Consistent with feminist research approaches, my aim was to be faithful to the participants and to be aware of prejudice “brought to the inevitable editing” and so I preferred to report participant’s direct quotes to illustrate a point or provide an example (Lester, 1999, p. 3). However, researchers have an influence over how the data is reported (Fontana & Frey, 2000). I acknowledge that even with the liberal use of quotes, inevitably, the way I analysed and interpreted the interview transcripts and used quotes to illustrate points in my argument reflected my understandings of the world. These understandings are shaped by a range of factors, including my values, experiences, interests, predilections (Banister et al., 2011), age, cultural background and class, even though I share other characteristics (such as gender and sexuality) with the women I interviewed (Olesen, 2000). According to Banister (2011) reflexivity is important in qualitative analysis, and it should involve both thinking about the research and oneself. I used my personal experience to inform the questions I asked the women and the way I analysed women’s accounts (Banister et al., 2011). By talking with women, hearing their stories and sharing mine, I was continuing to make sense of my experience and developing my awareness of EPA. This, in turn, further informed my analysis of the data collected through the interview process.

In order to analyse the phenomenon and women’s understanding of EPA (including behaviours and effects of EPA) I used thematic analysis (TA) (Braun & Clarke, 2006) which is the most common forms of qualitative data analysis.

1. The transcripts were read and re-read in order to get an overall sense of the whole interview. During this time, sections of transcripts were highlighted and coding ideas were noted down in the margins.

2. In the second stage, the initial codes were generated, based on the four main themes discussed during the interviews: emotionally and/or psychologically abusive behaviours women experienced; the negative effects they experienced; aspects relating to their awareness of EPA; and the type of support they received. The new and emerging information was coded differently for later examination.

3. Searching for themes was a third phase of TA. The data was sorted into potential themes such as: ‘recovery’, ‘the nature of the relationship’, ‘women’s views on why the abuse occurred or continued’ and ‘miscellaneous’. Since some of the key themes (above) and sub-themes were already identified during the interviews, it
was much easier to sort some of the codes. For example, during the interviews, women were asked about their experiences of the negative effects of EPA and whether any of these fell into 1) physical wellbeing; 2) psychological wellbeing; and 3) emotional wellbeing. Similarly, based on the literature of categories of emotionally and/or psychologically abusive behaviours, I had an idea of the sub-themes within the categories of perpetrated behaviours. So I matched and inserted the behaviours into sub-themes. Yet for other themes such as ‘the point of awareness of EPA’, several sub-themes emerged which I did not anticipate.

4. During the next stage I reviewed my themes, which showed that some of the themes did not have enough data in them in order to be a standalone chapter. These themes were women’s ‘views on why the abuse occurred or continued’ and ‘the nature of the relationship’, which consequently were not reported in the thesis, because other themes included a lot of data with several sub-themes. During this stage I was able to refine the miscellaneous theme, sorting some sections into other themes and sub-themes until they fitted into one of the main themes. Some themes and sub-themes were renamed or combined.

5. The next step included refining and generating clearer names and definition for each theme. By this stage I had a much clearer idea of what the themes and sub-themes were and what their names were. For example, under the theme of emotionally and psychologically abusive behaviours there were six sub-themes of behaviours which were refined and renamed throughout the process: 1) threatening behaviours; 2) undermining, destabilising or invalidating; 3) indifference, discount or disregard; 4) isolation, restriction or monitoring; 5) criticism, denigration or humiliation; and 6) domination, control, manipulation or coercion. Instead of having another sub-theme in the theme of negative effects of EPA, I identified a theme of social and economic effects on women. Other themes that were finalised as sub-themes were women’s personal resources and resilience, suggestions to other women and the post relationship journey, which was originally themed as ‘recovery’. Written detailed analyses were done to identify the stories under each theme.

6. After the final themes were reviews, I began the process of writing. Braun and Clarke (2006, p 23) suggested that “The task of the write-up of a thematic analysis … is to tell the complicated story of your data in a way which convinces the reader of the merit and validity of your analysis … Your write-up must provide sufficient
evidence of the themes within the data… Chose particularly vivid examples, or extract those which capture the essence of the point you are demonstrating”.

Key demographic characteristics of the participants

See Appendix A for brief summaries of the 20 women interviewed. Here, I provide an overview of some of the key demographic characteristics of this group of women including age, ethnicity, level of education, employment, and whether they had children.

I initially wanted to interview women aged 18 to 35 years, because young women are at greater risk of violence than older women (ABS, 2006). This was confirmed when I found another study reporting that psychological, social-psychological and non-physical abuse occurred substantially higher in women under 30. These women were at greater risk as well as physical IPV than women in older age groups (Nancarrow et al., 2011). I fall into this age category and wanted to see how other women in a similar age group experienced and made sense of EPA. I wanted to examine their awareness of EPA, as I think that women in this age group enter or develop serious intimate relationships, and they may not have had many relationships to compare. They may also have little awareness of all types of MIPV. Since I had problems finding participants, as indicated previously through my discussion of the recruitment process, I extended the age to 65 years to increase my chances. Older women were more likely to have had several relationships and might have been able to reflect on their experience with greater ease and knowledge. My research questions remained the same, but I was now reporting the findings from a broader range of age groups (See Table 5). The women’s ages ranged from 22 to 54 years but most were in their 30s.

Table 5: Participant’s age groups

<table>
<thead>
<tr>
<th>Age groups</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 to 29 years</td>
<td>6</td>
</tr>
<tr>
<td>30 to 39 years</td>
<td>10</td>
</tr>
<tr>
<td>40 to 54 years</td>
<td>4</td>
</tr>
</tbody>
</table>

At the time of these interviews all women lived in Melbourne. I did not provide pre-determined categories of ethnicity; instead women told me in their own words. Most women identified themselves as ‘Australian’. One woman did not identify her ethnic background. On the basis of the information provided, roughly two-thirds were Anglo-Australian and the remaining third were from a range of migrant backgrounds, mostly southern European. None of the participants identified as Indigenous Australians.

Most women (17) had a university degree, one had a TAFE diploma, and two women
had a Year 12 or below qualification—one of whom was enrolled at university to pursue a Bachelor degree. This was a well-educated group of Australian women as this extent of university education is much higher than women in the general population (ABS, 2012). The industries where participants worked were consistent with the wider population of Australian women (ABS, 2006). Five worked in education, three in healthcare and two in retail. Another six women worked in community services, hospitality, information technology, law and government. One woman was a full-time mother. Another young woman was studying at university. Three women did not specify their occupations.

At the time of the interviews all women had been separated from their partners for at least six months and up to or over 10 years. One woman’s ex-husband had passed away, while some women still had contact with their ex-partners due to contact with children. When I describe women’s experiences, I will refer to men as ex-husbands, partners or boyfriends, as this was how women referred to them during interviews. The length of these relationships ranged from six months to 30 years. Among the 20 women, there were 12 who had children, and the combined number of children was 20. Eleven women were in a new relationship and considered it to be an ‘equal, trusting and safe relationship’. Eight women were single and one was unsure about her current relationship status.

**Limitations**

The main limitation of this study is the small number of participants, hence it cannot be generalised to the wider population. However, this was not the intention. I was interested in depth, not breadth. My research was exploratory and phenomenological in nature, so it provides additional detailed information and complements the findings of other studies, which can further build our understanding of EPA.

Another limitation of the study is not uncommon. During the interviews women may have not reported everything they experienced, due to time constraints or because they simply forgot. Future research may benefit from providing opportunities for women to provide additional information through e-mail or a second face-to-face interview, if they choose, after the original interview. Moreover women were separated from 6 months to 10 years from their partners so recollection may be a concern, particularly when talking to women who have experienced EPA a very long time ago. Consequently, research should attempt to interview women who separated from their partners more recently or who might have kept a journal during their relationship which could increase the validity of women’s reports.

In regard to the negative effects of EPA, another limitation is that I only relied on women’s self-reporting. It would be very useful to discuss these negative effects with
professionals like doctors, counsellors and psychologists, and gather their perceptions on the connection between EPA and associated negative effects. From what women in my study said, courts and other legal services require health evaluation by a doctor, or an emotional and psychological evaluation from a counsellor or psychologist. Hence, having these professionals provide their knowledge could enhance the legitimacy of claims about the negative effects of EPA. This would further help to show that EPA is a serious form of abuse.

Finally, my participants were a well-educated group of Australian women (even educated women experience EPA) which is a limitation to my study. Other research should target women with wider educational backgrounds as well. Compared with my approach, different means of finding or recruiting participants may be used.
Chapter 4

The Nature of Emotional and Psychological Abuse

This chapter presents the nature of emotional and psychological abuse (EPA) as described by women who have experienced it in intimate relationships. The women in this study self-identified as having been in emotionally and/or psychologically abusive heterosexual relationships. I consider the similarities and differences of women’s experiences compared with the literature, and Australian official government and general publications. I will briefly touch on the categories and behaviours of EPA found in the literature (discussed earlier in Chapter 2) and understandings and motivations for EPA. I then draw on my analysis of the interviews with women, and discuss the nature of EPA under these categories. I conclude the chapter with a summary of my findings.

The literature provides a great variety of categories, clusters and examples that demonstrate the nature of EPA. In Chapter 2, I listed several most commonly reported emotionally and psychologically abusive behaviours grouped into 11 individual (yet interlinked) clusters including:

- Domination and control
- Indifference, discounting or disregard
- Economic abuse
- Emotional and interpersonal withholding
- Monopolisation
- Criticism, denigration, degradation or humiliation
- Isolation or restriction
- Psychological destabilisation
- Rigid sex role expectations
- Other types of threats or creation of fear
- Intimidation, threats of violence or creation of fear

I drew on the idea of these clusters and categories from other researchers including Follingstad et al. (2004, 2005), Marshall (1999) and Tolman, (1999) (see full list in Table 4).

EPA is an important strategy by which a perpetrator can gain control and power over the woman with whom they are in an intimate relationship. Olle (2006, p. 29) pointed out that behaviours such as social, verbal and economic abuse (as well as physical abuse) are designed to destroy or weaken woman’s self-esteem, sense of self and “her capacity to make informed and considered judgments about herself, her children, relationship and life”. Commentators agree that the main motivating aspect in male intimate partner violence is a man’s desire to
control and have power over his partner (Burks, 2006; Felson & Messner, 2000; Johnson, 1995; Seff et al., 2008), which can be accomplished through the multiple tactics I describe below. A man may use violence to shape his partner’s future behaviour, for example, to produce compliance or to discourage the victim from repeating certain behaviours (Felson & Messner, 2000). According to Kimmel (2002, p. 1352), “Some violence by men against women is motivated not by the desire to express anger, frustration, or some other immediate emotion during a family conflict but may be more instrumentally motivated by the desire to control”. Marshall (1999) reported that men who sub-consciously or consciously believe that they have an entitlement to control women, may engage in emotionally abusive behaviours such as isolating, undermining or discounting women, to consequently maintain the control. Conduct (that could be considered as vindictive) such as isolation (depriving women of social connectedness), intimidation (denying women autonomy and respect) and control (denying or seizing women’s access to the resources required for personhood), subordinates women, compromises their liberty, hinders their self-direction and cause a variety of effects that are not easily considered to be concerns for safety (Stark, 2007). Stark (2007, p. 15) further suggests that “Nothing men experience in the normal course of their everyday lives resembles this conspicuous form of subjugation”. According to MacKinnon (2008), compared with men, women experience non-physical abuse with greater emotional distress and susceptibility to long-term negative effects. The nature of the abuse, the use of certain behaviours and actions, motivation, intention, initiation, escalation of abuse, and the outcomes and consequences (including injury, psychological damage, and fear) differs greatly between women and men (Bagshaw & Chung, 2000; Flood, 2006; James, 2009; Johnson, 2009). Even when men and women perpetrate the same acts of violence or control, these “are more effective when perpetrated by men because they are more likely to be taken seriously and validated by the audience” (Anderson, 2009, p. 1449).

There are alternative understandings of EPA; for example, Harper, Austin, Cercone and Arias (2005) suggested that there is a correlation between men’s feelings of shame, anger and their perpetration of psychological abuse. They found that these feelings of shame related to levels of anger, which in turn related to psychological abuse of a partner. They explained that anger could be “a defensive manoeuvre to avoid confronting negative self-evaluation; and it is possible that the increased use of psychological abuse in individuals with high anger is a means to distance themselves from negative evaluation of the self” (Harper et al., 2005, p. 1656). Brown, James, and Taylor (2010) found there was a relationship between shame, alexithymia (inability to identify and describe emotions), anxious attachment and psychological abuse. Narcissism is another variable that is associated with psychological
agression (Blanchard, 2001).

**Women’s accounts of the nature of emotional and psychological abuse**

The abuse experienced in intimate relationships can take many forms, and may occur in combination with other forms of abuse and violence (Follingstad & DeHart, 2000; Laing, Toivonen, Irwin & Napier, 2010; O’Hearn & Davis, 1997; Outlaw, 2009; Tolman, 1999). Besides experiencing EPA, nine women reported (without me specifically inquiring) that they were physically hurt or abused by their partners, or there were other physically abusive aspects to their relationship. Three women described experiencing sexual abuse or assault. Some of these events were experienced as life-threatening, as one woman said: “there were, I think, three or four incidents where I honestly thought that I was going to die”. I acknowledge that my participants experienced other forms of abuse, but I asked them to reflect purely on their experience of EPA from their partner, particularly the negative effects experienced, and these will be discussed in Chapter 5.

After I coded the 20 interviews and analysed relevant questionnaires, the behaviours that women experienced were sorted into six main categories (see Table 6), similar to the ones found in the literature. However, to make it more relevant and highlight my findings, some of the clusters described in the summary above were renamed or combined. Women described 35 behaviours and they all experienced at least one behaviour from each category. Since the questionnaires were completed after the interviews, some of these behaviours do not have further explanation, or examples, and they are stated in Table 6 with other sub-categories. Most of the behaviours that I discuss are interlinked and could potentially fall under several categories. I discuss the most experienced behaviours first. Each category includes direct quotes from the women’s interviews.

Loring and Myers (1994) identified that their emotionally abused participants experienced almost continuous patterns of covert and overt behaviours, rather than a pattern or cycle of abuse, where there is a tension building phase, explosion of violence, followed by a honeymoon phase and expressions of remorse, as discussed in Chapter 2. Based on the information my participants provided it was evident that some women experienced continuous abuse (subtle and/or overt), others went through stages resembling cycles of violence, while other women experienced unexpected and random attacks or outbursts of anger from their partners.
### Table 6: Women’s experiences of EPA, behaviours perpetrated by their partners

<table>
<thead>
<tr>
<th>Behavioural themes</th>
<th>Number of women</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Threatening behaviours</strong></td>
<td>20</td>
</tr>
<tr>
<td>Threats of physical harm</td>
<td>16</td>
</tr>
<tr>
<td>Threats to hurt or kill himself</td>
<td>14</td>
</tr>
<tr>
<td>Threats to end the relationship or abandon</td>
<td>14</td>
</tr>
<tr>
<td>Threats to evict a woman or force her to leave</td>
<td>10</td>
</tr>
<tr>
<td>Threats to take children away</td>
<td>8</td>
</tr>
<tr>
<td><strong>Undermining, destabilising or invalidating</strong></td>
<td>20</td>
</tr>
<tr>
<td>Lie, deceive, contradict or mislead</td>
<td>20</td>
</tr>
<tr>
<td>Make a woman question herself or her sanity</td>
<td>19</td>
</tr>
<tr>
<td>Blame a woman for his violent behaviours and/or his problems</td>
<td>18</td>
</tr>
<tr>
<td>Make a woman feel bad and guilty</td>
<td>18</td>
</tr>
<tr>
<td>Encourage the view that there is no one else but him</td>
<td>14</td>
</tr>
<tr>
<td>Encourage uncertainty around the relationship</td>
<td>4</td>
</tr>
<tr>
<td><strong>Indifference, discount or disregard</strong></td>
<td>20</td>
</tr>
<tr>
<td>Emotional disregard</td>
<td>20</td>
</tr>
<tr>
<td>Use silent treatment, ignore or avoid</td>
<td>20</td>
</tr>
<tr>
<td>Sulk or refuse to have any discussion</td>
<td>19</td>
</tr>
<tr>
<td>Withhold affection, appreciation or support</td>
<td>19</td>
</tr>
<tr>
<td>Sexual disregard and coercion</td>
<td>5</td>
</tr>
<tr>
<td><strong>Isolation, restriction or monitoring</strong></td>
<td>20</td>
</tr>
<tr>
<td>Restricting contact</td>
<td>20</td>
</tr>
<tr>
<td>Isolation</td>
<td>18</td>
</tr>
<tr>
<td>Monitoring – eavesdropping</td>
<td>18</td>
</tr>
<tr>
<td><strong>Criticism, denigration or humiliation</strong></td>
<td>20</td>
</tr>
<tr>
<td>Put-downs, taunts or humiliation</td>
<td>19</td>
</tr>
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**Threatening behaviours**

Threatening behaviours can be categorised under ‘domination, control or manipulation’ as technically this is the purpose of a ‘threat’, but it is also a separate category, as it has sub-categories of its own. All women described experiencing threats from their partner. Five sub-categories of threats were identified. Threats are usually perceived as a control tactic, because it implies that harm will be inflicted unless the victim complies. However, it is not always
about control and compliance, but rather the perpetrator is motivated by a desire to inflict harm on the victim (Felson & Messner, 2000). According to Stark (2007), threats are effective in coercive control as women cannot laugh them off or walk away without suffering a consequence. Regardless of whether the threats are carried out or not, they have an effect on women’s autonomy.

**Threats of physical harm.** Just over three quarters of the women said that their partners threatened their safety or the safety of others. They threatened to hurt or harm them, including their children, parents and friends in some way. For example, Sue, a woman in her late 30s with three young children said that:

*When you’ve got any form of security in your life: financial, emotional, social ... [that is] undermined and reduced, any animal feels threatened and degraded and powerless ... when you’re trying to protect three babies and I had him threatening their safety.*

(Sue)

The Victorian Family Violence Protection Act 2008 describes threatening the death or injury of another person as emotionally or psychologically abusive behaviour. Violet, a young mother in her mid 20s, described one of the threats her ex-husband made as “probably the worst thing he ever did”. Her ex-husband threatened her with abortion. He told her that she could not have a child, if she could not manage to run the business and hold a job. Several months into her pregnancy he made her call around and see if she could get an abortion (which she did not want to get). He also threatened to disfigure her if he thought she was trying to get attention from other men. Threat of physical harm is the most obvious form of creating fear (Ali & Toner, 2001; Bell et al., 2008; Burks, 2006; Follingstad et al., 2004; Henning & Klesges, 2003; Semple, 2001; Tolman, 1992), hurting or controlling a woman (Stark, 2007).

Maria, who is in her late 30s with two children under the age of five, described how her ex-partner threatened to hurt her pets if she did not come back home, and she had to keep going back until she managed to move them out. Pet harm is used in several different scales describing or measuring EPA abuse (Follingstad & DeHart, 2000; Follingstad et al., 2004; Follingstad, 2011; MacKinnon, 2008) and is used as an example of EPA by the South Australian Intervention Orders (Prevention of Abuse) Act 2009. Other jurisdictions that describe animal abuse or harm as a form of domestic or family violence are ACT, VIC, QLD, NT and WA. According to Faver and Strand (2007), pet abuse is used to gain control, inflict fear, teach submission, prevent separation or punish the women for leaving. This has a direct, negative emotional impact on women, which can also affect their decision about staying or leaving an abusive relationship. Such threats can symbolise what the perpetrator can do to the woman.
Threats to hurt or kill himself. About three quarters of the women spoke about their partners threatening to hurt or kill themselves, either during or after the relationship. Dowda (2009) said that threat of self-harm is a powerful threat, because most people cannot bear the idea that they were the cause of their loved one’s suicide. Threats of suicide or self-harm were reported in the literature as one of the factors featured in emotionally and psychologically abusive relationships (Bell et al., 2008; Burks, 2006; Murphy, 2011; Follingstad et al., 2004; Semple, 2001; Tolman, 1999). Similarly, the Victorian Family Violence Protection Act describes threats of self-harm or to commit suicide with the intention to torment or intimidate a family member as a form of EPA (Victorian Act, 2012). The Queensland legislation describes threatening to self-harm or commit suicide as a form of domestic violence (Queensland Act, 2012). My participants reported that these threats were not carried out, but usually were used as guilt trip scenarios when men wanted to extract sympathy, when things were going bad, they wanted to keep their partners nearby or wanted to prevent them from leaving. The following quote provides a descriptive example of this behaviour, described by Simona, a mother in her early 40s with two children under the age of 15 years:

A couple of times I did challenge him. Ohh boy was the payback huge, HUGE, so huge that one night we came home and he threatened to commit suicide, to hang himself off the back tree whilst our two children were sleeping, and I was running around the neighbourhood like a mad woman trying to get help, and when I got back he taunted me with [it]... He used that in our family law case to say that he did that to show me he had enough of me and my antics. (Simona)

Some of these women mentioned that in the beginning they felt frightened, alarmed, upset, sympathetic and supportive. However, as the threats were never carried out, towards the end of the relationships the women did not respond with the same concern as in the beginning.

Tina, a 50-year-old woman with two older teenage boys said:

When I told him I was going to leave once, he had me on the floor, and I managed to get away and I got out of the house. He went to that door, stripped himself naked, got a knife and was threatening to kill himself, and I said to him, ‘you’re sick, there’s something wrong with you’. (Tina)

Threats to end the relationship or abandon. About three quarters of the women experienced their partner threatening to leave them. Men’s threat of abandonment, to end the relationship or have an affair has been described in the past (Anderson et al., 1991; Burks, 2006; MacKinnon, 2008; Murphy, 2010; O’Leary, 1999). Most women who experienced this behaviour were in cohabiting relationships or married.

Threats to take children away. Similar to Laing’s (2010) findings, just under half of my participants reported that their partners threatened to take their children away from them, or to put in place situations where they had less parental responsibility for them. Blackmail
and threats of kidnapping were described by Murphy (2011). Tamara, in her mid 30s with two young boys under the age of 10, explained that her ex-partner torments her by saying that he would not leave their children with her, that he would take them and she would never see them again.

**Undermining, destabilising or invalidating**

All women described experiencing some form of behaviour that undermined, destabilised or invalidated them. Six sub-categories are described below.

**Lie, deceive, contradict or mislead.** All women indicated that their partners contradicted themselves or lied, deceived or misled them. Violet’s ex-husband would argue with her about something that she had apparently said. These arguments annoyed and frustrated her because there was no winning in them. He then used to contradict himself by stating things like: “‘I don’t expect my wife to work’, but then he’d drill me about money and not doing my bit as far as the business was concerned”. Nina’s ex-partner was “very good at painting pictures” and making promises regarding their future together. He promised her things he knew she wanted and, during the relationship, she thought she had something that actually was not there. Only later she realised that there was no solid base for his promises and fantasies. Murphy (2010) described similar behaviour which fell under mind games, where a man questions a woman’s judgment and conducts actions that do not match his words.

**Make a woman question herself or her sanity.** Almost all women identified situations where their partners made them question themselves or their sanity. They caused women to be confused about themselves, by describing them as someone they were not, or messing with their mind. The behaviours I am about to describe are similar to the theme described by Tolman (1992) as ‘psychological destabilisation’. The literature indicates that men can deceive their partners by deliberately confusing them (Tolman, 1992), not clarifying mixed messages (Murphy, 2010), or minimising, denying or justifying behaviours, causing women to be distressed (James & MacKinnon, 2010). MacKinnon (2008) said that women who experience psychological abuse may become troubled or confused about their perceptions. The following examples were provided by my participants.

Nicky, who is in her late 20s and re-partnered, said that her ex-partner made her feel powerless and stupid, or as if she was going to do the wrong thing all the time, which had a negative effect on her. Some of my participants described how their ex-partners called them either “overly sensitive”, “emotional”, “dramatic”, “hysterical”, “unpredictable”, “needy”, “crazy” or “insecure”, consequently making them believe these things about themselves. In
some public occasions Nina’s ex-partner would tell her that she apparently made people feel uncomfortable, or she had said or done something wrong, even though she was just nervous or shy when interacting with others. This behaviour caused her to be confused:

*I was very, very confused for a long time about being told I was a whole variety of problems, which I couldn’t really see myself. But they were actually, I think, the things he was worried about in himself. But I believed it for a long time so that was quite subtle, he did it in a very believable kind of way and so therefore all problems in the relationship were sort of put on me, I guess offloading all the problems on to me ... even though it feels really obvious now, it was subtle at the time.* (Nina)

Thirty-year old Samantha described her ex-partner’s behaviour as “very twisted”. He discredited the psychologist she was seeing during their relationship, because this professional pointed out that the relationship was problematic. This form of discrediting led her back to the relationship and to the same frame of mind she had before, even though she felt that psychologist had a certain amount of credibility.

**Blame a woman for his violent behaviours and/or his problems.** Most women stated that their partner either blamed them for the issues and their behaviours, or transferred or offloaded the problems onto them. Burks (2006), Murphy (2011) and Tolman (1992) pointed out that the perpetrator may deny his actions, or blame the partner for his behaviour and angry mood or accuse her of overacting. This type of behaviour may cause women to self-blame and personalise the abuser’s accusations (MacKinnon, 2008). About 12% of 1836 women reported that their partners blamed them for causing their violent behaviour in Hegarty and Bush’s (2002) research. Stark (2007) points out that perpetrators lie to others about the abuse, transfer responsibility to their partner or acknowledge the abuse but minimise how serious it is.

Both Adele (a mother in her early 30s) and Simona (a mother of two children, in her early 40s) described how their ex-husbands blamed them for their marriage failure and breaking up the family. Rachel’s ex-husband made her “accountable for everything that went wrong in his life” by blaming her for his personal life and his gambling problems, which according to him she did not handle correctly, even though she sought support and suggestions from ‘Gamblers Anonymous’.

**Make a woman feel bad and guilty.** Most women stated that their partners made them feel bad or guilty about something. Elizabeth, a postgraduate student in her early 30s, experienced guilt trips from her ex-boyfriend, who would question her trust or respect towards him when she would enquire about his life. He would blame and make her feel guilty about offending other people when she gave suggestions or tried to be helpful. Guilt tripping or guilt-induction is one of the common behaviours used to describe EPA (Follingstad et al.,
For Emily, a postgraduate student in her late 20s, her ex-boyfriend made her feel guilty when she asked him not to use her as material for a stand-up comedy routine by questioning her wish for his success. She is still worried that he might talk about her in negative ways and angry that he might be getting income at her expense.

Sometimes men might use children to make women feel bad about themselves or as mothers. Simona said that her ex-husband did not keep the promise he made in the Family Court about paying for their children’s extra curriculum activities. Instead, he baited her with “that’s how much you love the children, and that’s how much you care for your children and you won’t even pay for school fees, you are a disgrace”.

**Encourage the view that there is no one else but him.** Almost three-quarters of the women described how their partners would try and destabilise them by stating that they were the only ones who would love and care for them. Men made comments stating that no one else would want the woman by consequently attacking her vulnerable areas, or that she would not manage or be able to take care of herself without him. According to Murphy (2010) this is a form of mind game, where a partner tells a woman that their relationship is the best she can hope for. Women may internalise these messages and come to feel and believe that the perpetrator is the only one who could ever love them (Burks, 2006).

In Maria’s instance, her ex-partner would taunt her about her disability and say that she would “never find anybody” because of it and her several pets. Tamara’s ex-partner used to point out that if it was not for him she would be a single mother, and after separation he told her that she would not have a new partner because she was now a single mother. In the same manner, Tina’s ex-husband would tell her “who would want to marry you?” if he had not come along. Due to these constant remarks, she felt that she could not say anything back and felt like nobody would want her. The ex-boyfriend of one of the youngest participants (Emily, early 20s) in my study used to subtly make her think that she “could never date anyone else: that he was it for [her]”. Hegarty and Bush (2002) found that 8% of their 1836 women stated that their partner told them that no one else would ever want them.

**Encourage uncertainty around the relationship.** Under a quarter of the women explained that their partners did not reassure them about their relationship status. For example, Rachel did not know whether she was coming or going. Her ex-husband made out that he was trying to fix their relationship and would ask to get back together, yet she would find out about his lies including getting someone pregnant. The following example demonstrates how Emily had no affirmation of her relationship:

*In the first three and a half months we had a couple of mutual friends just because of the way we’ve met and ... they would automatically refer to me as his girlfriend and he would get really angry and he [would] almost yell at them and say – ‘she’s not my*
F---ing Girlfriend, don’t say that, we’re just dating’, and it was an over the top reaction really. When I look back now, I think that’s really so disrespectful and hurtful. But at the time I just felt very awkward in this situation and was just like, yeah, we’re just dating, whatever, shut up, don’t say stuff like that. Cause I was like, ‘ohh God, don’t ruin it for me, you’re going to make him freak out and he won’t want to stay in the relationship anymore’. (Emily)

A similar experience was reported by Elizabeth, who could not receive a concrete response from her ex-boyfriend about confirming their relationship. Towards the end of the relationship she said that he started using a search engine for singles, so when she suggested that they become friends, he accused her of being over-emotional and that there was a serious misunderstanding between them.

**Indifference, discounting or disregard**

All women experienced behaviours of indifference, discounting or disregard in their relationship, which I have categorised into six sub-categories.

**Emotional disregard.** All of the women experienced indifference or insensitivity from their ex-partners towards their feelings, wants, wishes, requests, opinions or health, which usually did not occur until later stages of the relationship or after it got more serious, such as in marriage. For example, Lisa, who was the oldest participant in my study, described her ex-husband as an authoritative person who showed a lack of engagement with her and the children, which was “the biggest thing that people noticed”. He did not want to know the “nitty gritty” of what went on in her day-to-day life, but she had to ask about his day. The behaviours experienced varied among women, but they all felt some sort of disregard or discouragement from their partner, be it verbal, unspoken, overt or subtle. Analogous reports were made by women in other studies (Kasian & Painter, 1992; Lammers et al., 2005).

Their partners made them feel insecure by diminishing them and never reassured them. Several women discussed how their partners compared them with other women, checked other women out or declared feelings toward other women. For example, Abby, now in her early 20s, described her experience of EPA when she was in her late teenage years and still at school. On different occasions her ex-boyfriend indicated interest or curiosity in her friends. He told her how he thought her friends were attractive, or he wondered what they looked like naked. When she expressed that such behaviour was unpleasant, he would accuse her of jealousy. During schoolies week (a week long holiday, inclusive of partying, for high-school graduates in Australia) he subtly asked Abby for a free pass through comments such as “it’s so boring for people who have girl friends at schoolies”. He also said that the trip could have been much better if he was single, which implied that it was her fault he had a boring
holiday. In other instances, he would wander off during a party and leave her alone, only to later return and accuse her of running away and hiding.

The men some of my participants described were dismissive of their ideas and disrespectful about their opinions, only to insist on having things their way or having a lot of demands. Analogous reports were made by women in other studies (Kasian & Painter, 1992; Lammers et al., 2005). Several of my participants spoke about having a lot of demands from their partner. Consistent with rigid sex role expectations (Tolman, 1992), Lisa said:

*He wanted me to be the whole package, he wanted me to work full time, be the housekeeper, be the mother, be the wife, be available to him, but that was just an expectation ... he would never give me support around the house, support with bringing up the kids, because he saw that as not as his role.* (Lisa)

At some point during Violet’s marriage, her ex-husband would come home from work late and watch loud DVDs without any regard for her and their young baby. Violet indicated that their child was her Achilles heel and he used their child sometime to show disregard towards her wishes. Adele described how her ex-partner would give her an ultimatum and support her only if she agreed with him, which caused a lot of resentment toward him on her part. In one incident when she was very ill, instead of taking her straight to the hospital, he drove around assuring her that he knew an all-night doctor’s clinic. Tina found herself in a similar situation, where her ex-husband did not wish to take her to a hospital when she had a bleeding incident during pregnancy. She consequently had to call her mother instead.

Three quarters of the women identified in the questionnaire that their ex-partners brought up something from the past to upset them including past relationships. Eighteen women indicated that their ex-partners denied them private time. In Violet’s circumstances, she was never able to read anything that was of personal interest, unless it related to their business. She was not allowed to or otherwise was told off for having a break, even when she was pregnant and still working. She was made to perform physical work soon after her caesarean. She said that “my stitches and my wounds could have ruptured at any moment and he just didn’t care”. In some instances when Emily’s ex-boyfriend was not happy with her, he would want to leave her alone or take her to a train station at night and let her ride back home alone.

Other behaviours women described related to their partners belittling and discouraging their participation in hobbies or activities, even though initially it was something that they supported or admired. For example, later in marriage, Tamara was belittled about the things she was passionate about, such as her studies, yoga and her women’s group. She felt that after marriage he focused on her insecurities. Two women described how their partner had no concept of privacy or secret keeping, because they told others about their habits or private
aspects. Exploiting women’s intimate disclosures and using them against them was described by Murphy (2010) as a tactic of power and control.

**Use silent treatment, ignore or avoid.** All women indicated that their ex-partners either ignored them, avoided them or gave them silent treatment. Both Emily and Elizabeth experienced difficulty in communicating with their then boyfriends for several days at a time, where they would disappear, make themselves unreachable, delay or avoid being in contact. Leaving for short or long periods of time, without explaining or letting woman know, was considered to be a form of emotional abuse by Loring (1994). When Elizabeth showed her concern and questioned her partner’s disappearance, his response was that he “should not have to explain that”. Silent treatment is one of the many tactics that men use to show their indifference or disregard for their partner (Loring, 1994; MacKinnon, 2008; Tolman, 1992). Silent treatment or ignoring can be used as a power tactic, even as punishment if the perpetrator sees the target as unworthy of attention. It can be conducted through the absence of verbal communication and avoidance of eye contact. Those who receive silent treatment may experience a deprived sense of a meaningful existence, self-esteem, belonging and control. In the long term, this may cause serious psychological impairment to the victim (Williams, Shore, & Grahe, 1998).

**Sulk or refuse to have any discussion.** Almost all women indicated that their ex-partners used to sulk, or become upset or hurt when they talked about them or the relationship, or refused to discuss a problem or topics of interest to the women. In Maria’s experience, her ex-partner would begin discussing his selected topics instead (e.g. cars), or shut down the conversation by having a tantrum or some other excuse. A slightly different experience was described by Sara, a mother in her late 30s, who said that:

> ... if I wanted to have a conversation with him about something relating to our relationship that was a serious matter, or where there was a discussion obviously in terms of getting some ground for my own expectation of the relationship or when I spoke assertively, he’d say ‘Ohh, don’t talk to me in your office voice’, which was actually my confident voice. (Sara)

Katz and colleagues (2000) stated that a man’s refusal to discuss his partner’s interests, communicates a message that her viewpoints neither matter nor has validity.

**Withhold affection, appreciation or support.** Almost all women described a lack of emotional affection or comfort on the part of their partners. Several researchers described similar behaviours by men toward their partners such as: withholding affection and physical, psychological or verbal affirmation (Burks, 2006); love, support, appreciation (Tolman, 1992); including care, respect and approval (Murphy, 2010). Murphy and Hoover (1999) said that the intention of withholding is to punish and increase women’s insecurity or anxiety.
about the relationship.

Adele said that having a relationship that was disconnected, unsupportive and not appreciative “was really just destructive”. Some women experienced rewarding or emotionally pulling behaviours. For example, Nina experienced two extremes, where her ex-partner would be loving and caring or “overwhelmingly close” and then “more sort of angry, frustrated, defensive, very short and sharp”, “emotionally shut off” and distant. This consequently tied up her sense of worth with whether or not she “was being loved and adored or ignored and pushed away”:

I would call it ignoring, it sort [of] felt like I was a toy and he would bring me out to play when he was in the right mood, but when he wasn’t, when he was bored with me or not in the right mood, he wanted to shut me away in the cupboard and not think about me. That was the most common sort of thing that would happen … probably like a fortnight [laughs], it was really quite consistent, and it seem to come about whenever he got sort of overwhelmed with emotional things. (Nina)

Lisa, who was married for about 30 years, described that lack of communication and affectation from her partner was the hardest for her. He did not “get involved on a personal level, because that would involve emotions”. Similarly, Annabel felt unsupported by her ex-husband and had to do things on her own. For example, she believed his behaviour was subtle, in particular, when they would be getting ready to go out and “he’d fall sick”. Another man lacked affection toward his partner when she needed it most:

There were some obvious things where it was more like instead of him doing something, it’s what he wasn’t doing. So if I was upset or distressed about my family or something, he would never come over and comfort me or hug me or anything like that, which he would normally do in any situation other then when I was distressed, so that was kind of obvious. It was odd that he didn’t do those things when he should have. (Grace)

Similar tactics of EPA were reported by Murphy (2010), who described that men could ignore their partner’s need for support, or dismiss or complain if they were upset or need emotional support. Katz et al. (2000) suggested that such tactics imply that the individual does not deserve the affection. Towards the end of Elizabeth’s relationship, her ex-partner would speak to her or provide affection if she gave him money. She felt like she was “being rewarded”, although sometimes she would be rewarded for doing nothing, which she believed was done in order to make sure that she “stayed around”.

**Sexual disregard and coercion.** A quarter of women described different forms of sexual disregard. One woman revealed that her ex-partner “had never had sex without pornography, marijuana, and/or alcohol involved, until I was there, and he couldn’t perform, he has only ever had sex watching pornography”. This behaviour eventually made her internalise it and think that she must have been unattractive. Another woman found herself in
a similar situation, where her ex-husband got addicted to telephone sex and later began questioning her as to why she did not talk like that. Visual pornography was also something that he watched and made use of in the relationship. She felt that it was just another way of objectifying her. In Samantha’s experience, her ex-partner suggested that it was her problem that she could not deal with his pornography collection and, as a man, ‘he had needs’.

Nicky said that sex was a “massive part of the abuse”, because her ex-boyfriend would demand sex, they would fight about it or they would have sex when she did not want to. One woman said that she felt controlled to do sexual things that she did not really want to do. Tolman (1992) described that a psychologically abusive man often insists on obedience through demands, which may occur through sexual demands like expecting a woman to perform sexual acts or have sex when she does not want to. According to Stark (2007, p. 273) “control over sex is often explicitly linked to other forms of gendered obedience”. The *South Australian Intervention Orders Act 2009* defines EPA in terms of “sexually assaulting the person or engaging in behaviour designed to coerce the person to engage in sexual activity” (South Australian Act, 2012, p. 6). In all jurisdictions, DV includes assault/personal injury, including acts such as sexual assault or coercion (NCRVAWC, 2009). Sexual assault is a crime in all Australian states (Fileborn, 2011).

**Isolation, restriction or monitoring**

All women described experiencing some form of isolating, restricting and monitoring behaviours. As Violet explained: “I was really never out of his sight”. Isolation can be conducted in various forms using different tactics, and in my research I identified three different aspects. Controlling woman’s social contacts and use of her time, can accomplish a power advantage over her (Anderson et al., 1991).

**Restricting contact.** All women reported a behaviour conducted by their ex-partner that restricted their contact with people. Consequently some of them were isolated to the point of feeling unsafe to speak to anyone about their experience, due to the fear of the repercussions. My participants experienced a similar variety of isolation tactics used by their intimate partners as reported in the literature (e.g. Marshall, 1999; Murphy & Cascardi, 1993; Semple, 2001; Tolman, 1992, 1999). For my participants, their ex-partners discouraged, alienated, controlled, monitored or restricted their contact with male or female friends, neighbours, family members or strangers. Some men acted rudely or aggressively if they saw their partners talking to or looking at other men, consequently discouraging or decreasing women’s interactions with others.

Other men isolated, discouraged or tried to decrease women’s contact through
comments of dislike, criticism or mocking of friends, family or strangers, which was done both subtly and overtly. Men had arguments with these people thus discouraging them from visiting their home or having contact with the woman. Such behaviour caused embarrassment and fear of not knowing how their partner would react next time, which caused women to limit their interactions with others, including not inviting people to their home. Some women said that their partners did not allow people to come over to their house, yet his friends were allowed to:

_He wouldn’t allow anybody to come over; he wouldn’t even allow my own mother to come over. Everyone I knew, he had arguments with, so he could cut me away from everybody and so the only person who could come to the house was my Dad and he came once a week for an hour and left. If I wanted to go and visit my Mum for example, there would be arguments all week, and would only let me an hour to stay with her, and he’d supervise the visits, he wouldn’t allow her to come here, but he would have to be there with me. He cut all contact with my friends, he couldn’t allow anybody here._ (Tina)

Tolman (1992) and Stark (2007) described similar behaviours where a man embarrasses a woman at family gatherings, limits visiting time, prohibits people to visit, is rude or hostile towards them, or makes fun of or puts them down. The Victorian family violence legislation described behaviour such as “preventing the person from making or keeping connections with her or his friends” (Victorian Act, 2012, p. 15) as a form of EPA. The South Australian legislation on the other hand described unreasonable and non-consensual denial of social autonomy as an act of abuse (South Australian Act, 2012).

Jealousy might be implied in this category of behaviours and five women pointed out that their partners clearly demonstrated jealousy:

_He was unrealistically jealous, like I couldn’t see any of my male friends, even my male friend that we met each other through. He developed this completely ... unrealistic jealousy about me seeing him ... We would catch up for dinner and he would make accusation about what’s going on._ (Emily)

_He was quite controlling. If I was talking to another friend of mine who was a male, he would actually come over and be like – ‘I don’t want you to speak to him, he is in love with you, you’re going cheat on me’, but then when I would say something back, like ‘he’s my friend’, then he’d turn around to being like, – ‘I’m only saying it because I care about you’ and make it out like he did all of these things because he cared about me, not because he was trying to be controlling. He was pretty open about what he was saying, like it was quite blunt._ (Grace)

Follingstad et al. (1990) argued that jealousy and possessiveness may become aspects of control. It would be considered abusive when a man starts interrogating or controlling his partner’s contacts with other men, or even strangers. Male jealousy is often the context for isolation, control and intimidation (Stark, 2007).
Isolation. A majority of the women indicated that their ex-partners isolated them by restricting or controlling their independence or social life; interfering with or not allowing them to participate in daily activities, such as going to work, school or activities; or discouraging them from participating in activities he was not part of. Violet had to quit her initial job and stay at her ex-husband’s work until late at night, as he did not trust her to stay at home alone. Murphy (2010) suggested that men may prevent their partners from pursuing emotional, intellectual, spiritual, and creative interests as my participants reported. Some of my participants indicated that their ex-partners wanted their full attention, energy and time, by way of keeping them close or frequently requesting to spend time together. These men did not want to be part of their partner’s social group and/or did not want them to go out with their friends. This was done either overtly or subtly. For example, when Sally (in her mid 20s) wanted to go and see her friends, her ex-boyfriend would subtly ask her to spend a quiet night together. Nina said that such behaviour slowly whittled down her “world to really just being about him”, because he wanted all her attention. He often discouraged her from doing or participating in things that took her away from him.

Eleven women marked in the questionnaire that their ex-partners did not allow them to leave the house. Unfortunately there was no further description of how this behaviour was perpetrated. Only Nicky described that she would be locked in the house by her ex-boyfriend and was physically not allowed to leave. By isolating a woman, there is an intention to increase her dependency and availability (Murphy & Hoover, 1999) and to weaken her support system (Anderson et al, 1991). These aspects highlight the gender asymmetry in the purpose of using tactics of isolation.

Monitoring – eavesdropping. Almost all women indicated that their ex-partner (for some both during and after their relationship) checked up on them and/or made them account for their whereabouts. They monitored or tracked the woman’s activities or made constant and excessive contact via phone, text message or e-mail. Some of these women referred to this behaviour as harassment or smothering. Factors such as monitoring woman’s activities or making her account for her time were discussed by Burks (2006), Murphy (2010), and Murphy and Hoover (1999) as behaviours of EPA. Misuse of digital information and communication technology promotes further possibility for violence against women, by providing extensive techniques for surveillance and control (Hand et al., 2009).

Sally, who is in her mid 20s, initially thought that constant calls from her boyfriend were demonstrations of love. Later, she felt smothered by his calls to her workplace and constant questions about her activities and male co-workers. Rachel, on the other hand, said that her ex-partner still checks up on her and tries to make sure of her whereabouts. His
constant contact by phone and text distracts her and disrupts her daily activities. This form of behaviour was described by Tolman (1992) as ‘monopolisation’ because men make themselves the psychological focus of victim’s perceptions. Intimidation or harassment, including unwanted and regular or repeated contact, such as telephoning without consent, or giving or sending offensive material to the person is considered to be a form of DV by NT, VIC, QLD and ACT legislations. Hegarty and Bush (2002) discussed that several of their 1836 women described similar behaviours from their male partners, in particular: harassment over the telephone (7%); following (7%); loitering outside their house (5%); and harassment at work (4%).

Some men monitored their partners by going through their personal belongings including phones, diaries, notes and bills. Adele felt under surveillance, since her partner hacked into her e-mail and put spyware in the computer, and read and photocopied her diary. At some point she feared that he was tapping her phone. Another two women indicated that they thought their ex-partners may have used recording devices. Simona said that her home was found bugged with recording equipment after her husband’s departure. She pointed out that such actions were not recognised by the family law court, and the judge laughed at the finding of this material. Landline and mobile phones provide means of checking women’s contacts, while portable recording devices can increase remote surveillance. Computer spyware may also be used by perpetrators to monitor activities on the internet or computer by their current or former partner (Hand et al., 2009).

Another act that falls into this category is stalking, described by four women. This is what a university student said about her experience of stalking by her ex-boyfriend during her school years:

I couldn’t get away from him. He was calling me constantly. He’d follow me down the street. If I walked down to my house, a car would just be behind me, and he’d follow me slowly. I honestly couldn’t get away and it only took two weeks and I just couldn’t take it anymore and agreed to take him back, because I couldn’t stand the pressure. (Abby)

Constant surveillance was measured in IVAWS as a form of controlling behaviour (Mouzos & Makkai, 2004). Legislation in every state and territory makes stalking an offence, but there is some difference between jurisdictions as to what constitutes stalking (NCRVAWC, 2009). Similar to what women said here, Stark (2007) indicated that in his caseload it was common for men to stalk their partners prior to and after separation, repeatedly call them at home or work, leave threatening messages on their mobile phones and harass them at work.
Criticism, denigration or humiliation

All women experienced behaviours where they felt criticised, denigrated or humiliated. Tina explained:

> He got to your core, he tried to sabotage who you are, if he could totally destroy your self-esteem and your self-worth, then he had control. He just constantly put you down. There was nothing that you could do that was right. (Tina)

Seven sub-categories of this type of abuse are discussed below. This category is a severe form of psychological aggression (Capezza & Arriaga, 2008) and the intended effect is to reduce women’s self-esteem (Murphy & Hoover, 1999). Pence and Paymar (1993) suggest that psychological abuse is frequently a sign of a need to gain power and control. According to Burks (2006), emotional attack is used by most abusers (‘emotional vampires’) in order to make themselves feel better about their situations and themselves and to induce shame and powerlessness. Through taking power from others, the abuser fills his personal need for control and power over his circumstance. According to Lammers et al. (2005, p. 39) “Part of the male gendered role is to assume a position of authority, which promotes the belief that they are entitled to criticise a partner if she is not conforming to his expectations”, which was evident in this study.

**Put-downs, taunts or humiliation.** Almost all women indicated that their ex-partners either insulted or humiliated them in public or said things to belittle, demean or put them down. Similarly, degradation, humiliation, making fun of a woman and embarrassing her, were found in other studies (Ali & Toner, 2001; Strauchler et al., 2004). My participants reported that men either carried out these behaviours in private or in public, which made them feel embarrassed, humiliated, self-conscious and controlled. Simona said that her ex-husband “got a real kick [out] of publicly humiliating” her and hence she felt very controlled in open spaces. Another woman’s partner had recorded her ‘snoring’ and made her listen to it afterwards, apparently because he had to listen to her all night, so she had to listen to it too.

Two women described how their partner used to make fun of their accent, pronunciation, grammar or mannerisms. For example, Annabel said that she would be asked by her ex-partner to pronounce those words that she could not, in front of others. Similarly Elizabeth felt as if she was performing in front of people rather than interacting with them, when her ex-boyfriend asked her to speak in another language.

There were two women who said that their ex-partners decided to insult, hurt and upset them after separation by making comments about their real intentions of marrying them. For example, Adele’s ex-husband accused her of being a gold digger and Tamara’s ex-partner told her that she married for money.
General criticism. The majority of women experienced general criticism. Sixteen women specified in the questionnaire that their ex-partners criticised them if they did not live up to his perception of traditional gender roles. The same number of women indicated that their ex-partners criticised or became upset with the way they took care of the house (e.g. cleaning, cooking, laundry). Tamara described that, on a number of occasions, her ex-partner threw food into the sink.

Six women described how their partners either told them or made them feel that they were or what they did was ‘never good enough or right’. This type of behaviour was used to put women down. Tina described how these comments made her feel:

_No matter how much I tried or what I did, he’d always found something to pick on, so by picking on things, he had control. They mess up your brain to a point that you don’t know what the truth is, and you don’t know what a lie is. (Tina)_

In the study by Hegarty and Bush (2002), about 14% of 1836 women reported that their partner told them they were not good enough.

For many of these women, trying harder or trying to improve something did not result in a better situation, because their partners would still find some sort of flaw in them. Another example was Elizabeth, who tried to adopt some of her ex-boyfriend’s culture. She tried to learn his language, cuisine and even watched other people in order to learn how to cook, _“but that wasn’t good enough”_ no matter how hard she tried. Burks (2006) pointed out that discounting referred to minimising a person’s accomplishments. After separation two other women said that their partners put them down by commenting on their ‘motherhood’ with comments such as being “a pathetic mother” and “a disgrace”. Ali and Toner (2001) and Burks (2006) described EPA in terms of behaviours, where men criticise their partner’s parenting abilities, attack their perception of self, convince them of their worthlessness and find faults with them and the things they do. According to Stark (2007, p. 5) argued that by applying ‘microregulation’ of day to day activities associated with conventional female roles such as how women cook, clean, dress, look after the children or perform sexually, men can establish control.

Men may also give their partners backhanded comments or compliments and target their insecurities (Porterfield, 1989). Tamara experienced subtle, backhanded comments where her ex-partner would make a derogatory comment, but compliment her at the same time:

_His little comments really started to take affect, just little things. It was just constant, he still does it now, because he still has access to the kids and he’ll say things like – ‘all those things that I used to get worked up about that you are no good at, you’re still not good at them, but the kids are wonderful’. So it’s like a backhanded compliment, and he used to do those a lot, and he thinks he’s giving a good_
compliment. I don’t think he does it out of malice, I don’t think he does it knowingly that he’s being critical. (Tamara)

She had not noticed the meaning of these behaviours in the past, because they were so subtle—critical, yet complimentary at the same time. This had more effect on her than the direct criticism and name-calling. Her ex-partner initially was charming and loving and said all the right things, but he became more critical of her when she felt like she was sucked into the relationship and became pregnant.

**Verbal abuse, derogatory language or comments.** Over three quarters of women reported experiencing verbal abuse, swearing and name-calling. The methods used by their partners differed greatly. Some of the men were generally verbally abusive and offensive, others used more blunt derogatory words, swearing and insults such as “slut”, “bitch” or “cunt”. For example, Violet said that her ex-partner used to call her a slut and she would:

*have to work really hard to sort of change his mind, and then if I was going to act like a slut, he’d treat me like one, and I was never unfaithful, I would have never dared in the first place. (Violet)*

Several women mentioned that they found name-calling very upsetting. Over time, women began to believe these terms. This was highlighted in the stories of two women in their 20s:

*He used a lot of derogatory terms for me... you kind of try and brush it off, but if someone says that to you on repeated basis, you kind of start believing it. You can’t help that kind of thing if someone says it to you constantly. (Abby)*

*The thing that affected me as well was the name-calling, because after a while it’s hard to convince yourself that you’re not the things that the person is calling you, especially if you are keeping it to your self. It’s hard to maintain your self-esteem and your feeling of self-worth when someone is belittling you like that. (Emily)*

Verbal abuse was carried out in different situations, both privately and publicly, and in front of their children. The following quote provides an example outlining one of these situations:

*The worse ones were in public where he would say derogatory things in public, and everyone would laugh and look at you and friends would come up to me later and go – ‘ohh, that was really mean of him to say that’ and that sort of stuff. ‘He does that a lot, doesn’t he?’ That was embarrassing to have my personal issue behind closed doors in public. That was really quite hard for me as well. (Tamara)*

Verbal abuse was considered by many women as a more obvious form of abuse. In some instances this behaviour was carried out subtly through snide remarks or through a conversation in a calm manner without shouting or raising their voice. Tina said that in the beginning her partner made up or made some sort of excuse for such behaviour but towards the end he provided no explanation for verbal abuse. Other women described that the verbal
abuse was an irrational reaction to something they had or had not done. This is outlined in Adele’s example, where she felt that “his reactions were disproportionate to what he perceived to be a terrible behaviour”, while she thought it was a minor thing. Verbal abuse, insults and calling a woman degrading names is well documented in the literature as a form of EPA (Ali & Toner, 2001; Burks, 2006; MacKinnon, 2008; Strauchler et al., 2004). Verbal abuse is also considered to be part of family violence conduct in Tasmanian legislation (Tasmania Act, 2005).

**Criticism of woman’s intelligence.** Just over three quarters of women indicated that their ex-partners criticised their intelligence or were unhappy with their intellectual achievements. For example, Tamara’s ex-husband was initially discouraging of her enrolling into a degree, even though he picked on her for not having one. He then made her feel bad about studying an arts degree, which according to him was useless and a waste of time. This was followed by him getting upset over her good achievements. Ali and Toner (2001) described criticisms of a woman’s intelligence as an example of EPA. Hegarty and Bush (2002) found out that 13% of 1836 women said that their partners told them they were stupid.

**Criticism of woman’s physical appearance.** Three quarters of women indicated that their ex-partners criticised their physical appearance or attractiveness, which is a similar finding to literature (Ali & Toner, 2001; Dowda, 2009). This behaviour mostly occurred in private, where no one would hear them being so critical. Of the 1836 participants in Hegarty and Bush’s (2002) study, about 7% of women reported that their partners told them they were ugly. Stark (2007) suggested that there is sexual component to the men’s assault against women, which is reflected in the clustering of abuse related injuries to the breasts, abdomen, face and other body parts identified with woman’s sexuality. Similarly, men may use EPA to attack her feminine features she is most proud of or concerned about, consequently making them feel insecure about themselves.

In my study, seven women stated that their ex-partners made comments about or criticised their weight, sometimes bluntly calling them “fat”, even when women did not have a weight issue. Rachel’s ex-partner pretended that he was ‘only mucking around’ when he said “I thought black was supposed to be slimming”. This type of comment about her looks would be continuous and would be done in a so-called ‘joking’ manner. Murphy (2011) described a behaviour that related to men acting rudely, and then telling women they are too sensitive and cannot take a joke. Violet’s partner made her feel bad about what she ate and considered double digits to be unacceptable and wanted her to be under size 10. Tina experienced this form of behaviour after pregnancy, as she described:

*I had one kid after another... and I didn’t lose the weight straight away... and he said*
— ‘ohh you were 68 kilos when I married you, you’re 76 kilos now. You’re fat, you’re ugly. Look at you, who’d want you? My brother told me not to marry you’. It’s constant bombardment, and if you get it too much, you actually start to believe a lie, and it is a lie. (Tina)

Two women described how their ex-partners suggested they dress up in a different way, like other women. Even though Violet experienced some restriction in what she was allowed to wear, at times her ex-husband would change his mind (this behaviour also relates to controlling women’s choices):

the last place that he was working at ... everyone dressed immaculately and groomed and ... he was saying – ‘I’m sick of looking like I’m dating a kid, you need to look a little bit more sophisticated, so I want you to start wearing make up again’ and he wanted me to start wearing high heels and wear pants with boots over the top. That was something that I was never allowed to do because that looks slutty apparently, but then when he saw girls at work doing it, he suddenly thought it was really classy, that I should start doing that too, so then it was OK. So he changed the rules all the time. (Violet)

Abby, on the other hand, experienced what she called “being helpful”. Her ex-boyfriend made comments on her physical features or asked her to have her hair or make-up in a certain way, especially if they were going out to a party. When she would question his behaviour, he would respond with “I think you look nicest like that” or “I’m just trying to be helpful”. Some other subtle comments that he would make were: “you should probably think about more make up, because you don’t have great skin”; or “you are showing a lot of forehead today”. During social gatherings, he would say “don’t think you’re going to be the prettiest girl there ... I just don’t want you to feel hurt, but there’s going to be a lot of pretty girls there”. At the time she did not realise what he was doing and did believe that he was being helpful. This behaviour created an impression for Abby that she could not date anyone else and that there would be no one who would want her, be interested or find her attractive except him. Similar behaviour was experienced by Elizabeth, where her ex-boyfriend picked up on her physical features that she did not really like about herself. She initially considered this behaviour to be ‘teasing’.

**Accusation of cheating or having an affair.** About three quarters of the women specified that during the relationships their partners accused them of having an affair. Murphy (2011) indicated that men can show over-protective and ‘caring’ behaviours by harassing his partner about imagined affairs and being very jealous when she is out. Some of my participants discussed how their partners had a jealous streak, and they would accuse them of flirting, cheating or having an affair, even though they did not give any reason for doubt. Women rationalised these behaviours by referring to men’s insecurities or even their own affairs. I have provided an abstract from Tina’s story as an example of this behaviour:
He’d give me 15 minutes to get home from work. If I took any longer than 15 minutes, he’d accuse me of being with my boyfriend. He was always accusing me of having an affair. There was one time that I worked a night shift, and in the morning the day shift didn’t come so we were running late … so instead of taking 15 minutes, I took half an hour to get home. He was asleep, he gets up, he accuses me of being with my boyfriend, so then I had an argument with him, and I ran to the bathroom. He came after me, I locked the door, and he put his fist through the door. I went into the shower. He completely destroyed the shower, because I took an extra 15 minutes to get home from work. (Tina)

In another example, during couples counselling, Tamara’s ex-husband accused their psychologist of being attracted to Tamara because he did not see or consider her to be the problem in the relationship. Follingstad et al. (2004, 2005) and Sackett and Saunders (1999) used factors like jealousy and suspicion to measure EPA in their scales and assessments. Hays and Emelianchik (2009) described jealousy as a sub-theme of emotional abuse.

**Discredit woman to others.** Under half of the women described how their ex-partners talked badly, or lied about them to others, or contacted their partner’s friends and family to shame them. This created a bad impression. For example, Tina said:

*Everyone believed I was this evil woman and he’d come to me and say the neighbours did this and [the] neighbours say that, and all the time he was saying things to neighbours, making them believe that I was the one with the problem.* (Tina)

Three men called services such as the police, child protective services, their lawyers, or the Department of Human Services to discredit their partners or imply that they needed to be investigated for serious reasons. None of these allegations were substantiated and were eventually turned against these men. One woman’s ex-husband tried to construct a case that she was mentally unfit, unstable and depressed, even though she did not have clinical depression. Similar behaviour was described by James and MacKinon (2010), who said that over time a perpetrator may use tactics to convince friends, family members or professionals to take on negative views of a woman.

**Domination, control or manipulation**

All women experienced some form of behaviour and actions that fall under the category of domination, control or manipulation. Seven sub-categories are described below. Murphy and Hoover (1999) said that those behaviours that constitute domination or control are assumed to produce an effect of fear or submission. Women in other studies reported that power, control and intimidation were most frequently experienced (Bell et al. 2008) and most psychologically damaging in their intimate relationships (Strauchler et al., 2004). Stark (2007) uses the term ‘intimidation’ to include a variety of strategies that are used to generate humiliation and fear, and supplement violence. According to Chang (1996), men may express
their sense of superiority over women by defining women’s and men’s roles, treating women as servants, acting like the master of the household, claiming entitlements such as making decisions, demanding an increasing amount of their attention, energy, time and/or affection, and being selfish in never considering women’s needs. Control is a use of structural forms of exploitation, deprivation, and authority that indirectly induce obedience by: limiting women’s options and depriving her of supports needed for independent judgment; imposing preferred choices; and monopolising fundamental recourses (Stark, 2007). Men can further exhibit control “by refusing to help or withholding whatever is desired by the partner, as a type of punishment for a woman who does not conform to her subordinate status or role that her gender dictates in a patriarchal society” (Lammers et al., 2005, p. 32).

**Erratic behaviour, radical mood changes.** All women indicated that their ex-partners either displayed radical mood changes, or demonstrated erratic behaviours, whether rationalised or not. They described them as: “flying off the handle”; “flaring up”; “going crazy”; “exploding into anger”; losing their temper; “lashing out” or being a “ticking bomb”. This description related to men being very unpredictable, and some women either did not know when the explosion would occur, or they were able to predict it and consequently control their behaviour in order to avoid any negative consequences. Maria knew about the signs of upcoming erratic behaviour and when it occurred she would shut down:

> You know the signs when there’s going to be [a] tantrum, so everyone just runs around placating and I did that with him all the time … that was one of the things, I couldn’t ever be on the phone to anybody else and that would often create a hoo-ha and he’d be having tantrums in the background, but the person on the phone wouldn’t hear, and I’d cut the phone calls off, because it was just not worth what I would cop after I got off the phone. I remember being on the phone, I think telling my friend, I was pregnant, like it was a very happy call and he kept coming in and like throwing his arms around and rolling his eyes and huffing and puffing, and carrying on like a child, because he cooked dinner and I wasn’t sitting at the table when he decided I should be sitting at the table. I got off the phone and it was just hell for the rest of that night, with what should have been a happy moment. **(Maria)**

The unpredictability created fear in women and for some of them it was a worry to be with their partners in public, as they could have exploded at any time and caused them embarrassment. During explosive behaviours, women felt controlled, because they would have to stop what they were saying, or doing, and become quiet. For example, Adele indicated that her ex-partner would get angry about minor things; for example, if she turned on a windscreen wiper, went through a particular set of lights or if she was late and he would get “disproportionately angry”. Similar reactions occurred when she spoke to her child in a language other than English.

Follingstad and DeHart (2000) observed that perpetrators of EPA display radical mood
changes, which is what women in my study experienced. They described two opposite forms of mood change. The first was, as Emily described, “*completely normal and then like a switch got flicked and he was a different person*”. This was also shown in Nicky’s story:

> There was always the fear of him going crazy verbally, and so I guess that was in a way a form of psychological abuse I think, because it was always, if when we were walking down the street or out at a party or whatever, he could go crazy, and he would do that regularly, like he was a very explosive person. He would just fly off the handle and start screaming and yelling, whether it made sense or not. Sometimes it was just complete craziness coming out of his mouth, but I think that created a lot of fear in me. I would kind of choose not to go out in public or whatever, because I was worried that he would go psycho. *(Nicky)*

The second form of mood change related to men initially acting horribly and then changing to being pleasant. This change usually occurred when women would react with negativity, dislike or state that they had had enough of such treatment. Afterwards, for some of them, for fear of losing their partners, men would respond with an apology, flowers and presents. This created confusion in some of the women and they would forgive them or give them another chance. For example, Violet used ‘throwing a bone’ to describe this behaviour, where he would be a “*complete asshole*” but then he would do nice and thoughtful things for her and her relatives. This made her think that if she made any changes or she acted in a certain way, he would consequently “*morph*” into a good partner. Partner’s mood swings were also a part of a cycle for Tamara. She observed:

> He’d have three weeks of good and it was a really nice relationship. He was mostly supportive, not financially, but mostly supportive in an emotional sense, and he was actually a good dad during that period, and then all of a sudden he’d explode and you’d get the criticisms and it would always start with the subtle backhanded compliments. *(Tamara)*

Even though mood swings and the above examples could be interpreted as Walker’s (1979) cycle of violence (common in physically violent relationships), not all women described experiencing apologies or remorse from their partner, and the tension building phase. Moreover, some women did not know when the explosion would occur, as it was hard to predict their partner’s behaviours, while others could predict the outburst. Similarly, Stark (2007) explained that the tension building before violence explosion is only partially accurate. The experience of tension by many victims is chronic rather than episodic. Furthermore, according to Stark (2007, p. 246) many men shift “from hurt to rage without passing through the intermediary emotions reflected in a build up”.

Some women talked about how they blamed themselves and projected their partner’s erratic behaviour onto themselves. Some of them also described how they were hyper-aware of their partner’s moods, reactions and behaviours, and planned their day around it, which
consequently created a feeling of ‘walking on eggshells’. This is how Fiona described it:

\[ I\ just\ knew\ very\ quickly\ that\ if\ I\ didn't\ do\ that,\ he'd\ explode\ and\ it\ wasn't\ worth\ the\ explosion,\ so,\ I\ think\ I\ knew,\ and\ I\ went\ through\ that\ whole,\ you\ know,\ if\ I\ do\ this\ different\ or\ better\ or\ whatever,\ things\ will\ improve\ or\ if\ I\ say\ this,\ things\ will\ change \]  

(Fiona)

This form of planning was used to prevent men from exploding more or because women hoped it would help to make things better and create change.

**Manipulation.** All women experienced some form of manipulation, which is described in the literature as a form of EPA (ABS, 2006; Evans, 2007; Follingstad et al., 2005; MacKinnon, 2008; Tolman, 1999). In the questionnaire, almost all women indicated that their ex-partners tried to get them to apologise for something that was not their fault. Men perpetrated several different tactics and behaviours (including using children) to trick their partner into doing or saying something, behaving in certain ways or making them appear at fault. Abby said that she constantly apologised for things that she had or had not done, which she found exhausting. Both Maria and Rachel described behaviour where their partners tried to elicit empathy and sympathy from them. For example, in Rachel’s situation, her ex-husband used lies and manipulation, or created situations to make her feel sorry for him. Maria’s ex-partner used to complain to her through texting and phone calls about his life and difficulties, while she was pregnant, living in poverty and being a full-time parent (with a disability) to his son. She pointed out that he was incredibly manipulative and portrayed himself as a victim:

\[ Always\ a\ victim,\ I'm\ such\ a\ victim,\ this,\ that\ and\ the\ other,\ that\ anything\ I\ do\ is\ justified,\ and\ now\ he's\ a\ victim\ of\ me\ as\ well,\ you\ see,\ like\ I\ just\ added\ to\ his\ story\ -\ 'I'm\ such\ a\ victim\ of\ her\ because\ she's\ keeping\ my\ son\ from\ me'.\]  

(Maria)

Maria found out that he told her lies in order to get together with her in first place. When she asked him why he said and did those things, he responded with “I just decided to do anything so I could f**k you”. He further subtly manipulated her by asking her not to get an intervention order against him, since that could affect his employment possibilities, which consequently could affect his payment of child support, which he was not paying anyway.

Another example was provided by Abby, who said that her ex-boyfriend used to hold onto her wallet and phone while they went out:

\[ 'You\ can't\ leave\ until\ I\ say\ you\ can\ leave',\ because\ he\ had\ my\ wallet\ and\ phone,\ and\ he\ wouldn't\ give\ them\ back\ to\ me.\ I\ just\ had\ to\ stand\ there\ and\ listen\ to\ him\ screaming,\ like\ this\ close\ [indicated\ how\ close\ he\ was\ to\ her]\ ...\ he\ used\ to\ hold\ on\ to\ my\ phone\ and\ wallet\ when\ we\ were\ on\ a\ date\ ...\ sometimes\ a\ boyfriend\ might\ offer\ that,\ I\ guess\ in\ a\ very\ old\ fashion\ sense\ maybe\ ...\ but\ he\ would\ do\ it\ because\ it\ meant\ I\ couldn't\ leave,\ like\ I\ wasn't\ leaving\ until\ he\ said\ I\ was\ leaving.\]  

(Abby)
For Violet, her ex-husband made her appear to be the bad person while portraying himself in a good light:

*He started sort of using me like a puppet with my family. They do something that would annoy him and ... he’d say – ‘well you know my temper, so if I confront them about this, then I’m just going to blow up and you don’t want that’ and so he’d make me go and speak to them about it, as if it was something that pissed me off. He’s still the nice one and keeps his pretence sort of going that I’m the one that all of a sudden, for the first time in my life easily offended about everything* (Violet)

**Financial abuse.** The majority of women indicated that they experienced some type of financial abuse. Even though most of these women had personal incomes, they were still financially controlled, bullied or taken advantage of. Murphy and Cascardi (1993) said that through this form of abuse, men attempt to increase the financial dependency of their partners. Putting a woman on a strict financial allowance, excluding her input for financial decisions or denying her access to any form of finances has been reported previously by other researchers (Ali & Toner 2001; Branigan, 2004; Tolman, 1999). Economic abuse and withholding or denying financial support is described as a form of DV and FV by legislations across Australia (NT, TAS, VIC and SA). SA also describes “an unreasonable and non-consensual denial of financial … autonomy” as an example of emotional and psychological harm (South Australian Act, 2012, p. 8). Behaviours that produce economic deprivation, the establishment of dependence, the transfer of the unequal weight of finances, and the use and abuse of finances in intimate relationships all draw attention to and support the argument for the gendered asymmetry of EPA.

In my study, women who were in a cohabitating relationship were more likely to experience financial abuse, which continued beyond separation for those women who shared parental responsibility for children. First, I will provide examples of behaviour that occurred during relationships and then after separation. Women disclosed that during the relationship their ex-partners: did not allow them to use or spend their income; made decisions over how their income was allocated; made them put their income into a joint account; did not allow them to access family money; threatened to withdraw money; hid the cheque book; and gave women an unrealistic housekeeping budget, which usually was not enough to cover all of the basics. If women went beyond their housekeeping budget, they either had to account for it or had to ask for permission to receive more money to cover the rest. For example, this is what Lisa experienced:

*If I spent money, say I had to buy something for the girls or I had to buy a gift and it was beyond what he would have expected, I was invariably called to the study and made to account for myself – ‘where are the receipts? who was this for? why did you spend so much?’ and that was a regular interaction that we had. I had to account for myself, why I spent anything beyond the housekeeping, with the housekeeping. I was*
expected to buy all the food and groceries for the house, pay my petrol, clothe the girls and myself, and it wasn’t a huge amount. (Lisa)

Similarly, Stark (2007) provided examples of common scenarios of control where men interrogated their partners about expenses, required in-depth accounts or records of expenditure, or insisted on pre-approval of all expenses.

Tolman (1999) explained that economic abuse also included perpetrator’s misuse of funds. Women in my study said that their partner could spend money on themselves, or non-household or family related purchases, rather than on their partners or children. This form of spending would not be justified or explained by these men, but it was expected from women.

For Lisa:

*He could wear expensive suits, he could have the expensive car, he could and he did all this for himself, it didn’t flow onto his family. I was still on a very tight budget, occasionally, once every five years, he’ll take me to buy clothes, that was his gift to me, but, while he shopped at high level shops, with expensive Italian suits, he dressed himself very well, I was shopping at Target, picking out specials for myself and the girls. (Lisa)*

Some of the women had to sacrifice and prioritise what they could buy with their budget. For example Tina, a mother of two, explained:

*He was buying $100 shirts, trousers, $150 jackets and I was trying to buy one week [sic] medicine for the children, the next week shoes, the next week food, because of all the demands he was making on me. (Tina)*

Branigan (2004) pointed out that financial abuse can occur through men’s discretionary expenditure on their own pleasure and leisure, where their own spending is unrestrained and concentrates on satisfying personal desires and needs.

In contrast, similar to Branigan’s (2004) findings, some of my participants spoke about having the weight of finances, where men did not make any financial contribution. Women had the financial responsibility of paying bills and covering household expenses because their partner did not contribute. Annabel’s ex-partner expected her to pay him an allowance, while Tina’s ex-husband, even though employed, made constant demands for money. Other examples included women experiencing pressure to provide money to their ex-partners. Some of these men seemed to misuse or exploit the financial support women were willing to provide or were bullied into providing. During her relationship, Elizabeth helped her boyfriend financially several times, but the cost kept escalating over time. A similar situation was experienced by Tina, who received constant demands for money from her ex-husband. On occasion, when she did not give in, he would damage her personal items or house and consequently her bills escalated because of the repairs. She was pressured to sell
her own house because he wanted a bigger house and to pay half for his new car, even though she had already given him one car and sold her car.

Like some other women, Rachel, who is a mother of a young child, was also financially pressured by her ex-partner, through demands for money. She would give it to him because of all the stress it caused her—the incessant calling and verbal abuse—just to get him away from her. Even after he moved out of their house, which she ended up purchasing from him, he would break into the house and steal money. She had to sell the house because he would walk in there like “he owned the place” and she felt like she could not get a fresh start. Moreover, she helped him set up a property, so there was a place for their child to stay with him, but he eventually lost the accommodation due to not paying the rent. Murphy (2010) argued that economic abuse may be perpetrated by a man in different ways. These include: demanding money from a woman for his wants; spending excessively; stealing from her or selling her possessions, while possibly refusing to work.

Because of money control, two women said that they had to stash away some money without their partner’s knowledge. This is what Tamara said:

My husband and also my second partner were both very financially destructive. My husband ... got paid a lot, and I was a waitress [and] didn’t get paid a lot. He used to rub that in my face all the time and even though I was paying my share, I was paying half the mortgage, half the bills, he then wanted me to restrict my spending to $50 a week, $50 a week is for going out, catching up with mates, haircuts ... so I started telling him, I lied and said that, ‘ohh, no, no, I don’t earn as much as I was earning now’, and I got my boss to put my fund money away to a separate account, because, I didn’t want to let him know that I was not doing what he wanted me do, that I was being a good wife, having my $50. (Tamara)

Financial abuse was also experienced by women after separation. Sue experienced financial abuse during and after separation. After one of her major operations, her ex-husband cleared her bank account, took money through the sale of her car and coerced her into diverting all of the child support into the mortgage. She was consequently left with no car, no house, no support, three young children under four and Centrelink benefits to live on. It was hard for Sue to imagine that he had such capacity to behave like that at separation, demonstrating a lack of regard for her and their children. She added:

I was receiving eviction notices for the first time in my life, and that’s a very degrading thing for a 39-year-old woman, who’s always worked, and was financially independent, to finally be controlled financially and shackled to a perpetrator of domestic violence. He deliberately took my financial independence away from me and it has had huge repercussions. (Sue)

Some women who shared parental responsibility over children still experience financial abuse. One of the common behaviours that women described was the erratic or small amounts
of child support they have received. Maria explained that the amount she received was not enough to even cover nappies. A few women discussed the lies their ex-partners told them and child support services in order not to pay full child support. This form of financial deprivation not only affected women but their children as well. Maria said:

*He seems to think, he’s making me suffer, because I am a bitch, but it’s our son that’s suffering. It’s our son who is being affected.* (Maria)

Adele found herself in a similar situation:

*I think now the most tangible kind of form of abuse I am experiencing directly is financial abuse, like I’m getting these warning notices from the dentist telling me that they’re going to a debt collection agency, which will affect our credit rating if we don’t pay this thing now, and I’m not in the position to pay for it, because, he hasn’t paid me any money since March, so it’s manifested on so many levels.* (Adele)

Branigan (2004) noted that financial abuse usually continues through minimisation of child support, and limited options for affordable housing.

Other forms of financial abuse related to women going through the legal system, where they had to cover all or some of the legal costs of the separation. Sue pointed out that her ex-husband did not want her financially better off than him. She said that “any decent man, would have said yes, let’s avoid the lawyers, let’s just work this out calmly and nicely”, but instead some of these women had been to court several times. Sue had to borrow money to cover all these costs, which destroyed personal friendships in her life. The second issue women talked about was their partner’s attempt to prevent them from getting money from settlement. For example, Adele’s ex-husband with a high earning potential wanted to buy her out of their family home, while she lived on Centrelink:

*With me also the primary carer of our child, so if it was just me, I would walk away, I am not interested in these conflicts, but because of what it would do to our child long term, I’ve had to stick up for what’s right and unfortunately go through this horrible legal dispute.* (Adele)

Sue said that she was ruined financially:

*because the lawyers sucked all the money out of me. He didn’t pay any legal fees and we had a house in [suburb], on today’s market would be worth about 900 grand. I was given nothing and I worked pretty hard to contribute to that, and now I am left with no home, no career, no super, and I’ve got three young children that I am the primary carer of, while he’s living the high life, wining and dining and having overseas holidays. He’s got his career, his super. I’ve got none of that.* (Sue)

**Intimidation or creation of fear through non-verbal acts.** Most women identified that their ex-partners had an intimidating look or stance, which caused women to feel fearful. Follingstad and DeHart (2000) said that assuming a frightening stance represents intimidation. These types of behaviours support the gender asymmetry debate, because it is more likely to
be taken seriously when perpetrated by men and would have more negative effects on women. Below is an example of such behaviour from Tamara’s interview. She was:

about seven months pregnant ... he was a very much a standover man and he didn’t physically touch me, but he’d square his shoulders and sort of talk right to my face, and made me have to sink down on the ground, so I was actually sitting down on the ground, and he was yelling at me, talking over me and that was the first time I ever experienced anything like that and it was quite devastating for me and affected my confidence. (Tamara)

According to Taft (2002) intimate male partners or others close to pregnant women, abuse about four to nine per cent of women during pregnancy, both overseas and in Australia.

Several years earlier after separation, Abby’s boyfriend intimidated her by the means of spending time sitting in a car in her driveway and leaving posters on the front door where everyone could see and read about what kind of ‘horrible’ person she was. She found all the things she ever gave him destroyed and thrown around her front yard. She felt trapped and intimidated by this behaviour. Simona said that her ex-partner would chase her around the house and corner her to get his point across.

**Reckless driving.** Reckless driving is a form of behaviour which is done to intimidate or frighten the victim (Sable, 1998). Over three quarters of women described how their then partners created fear in them through dangerous operation of a motor vehicle, such as speeding, pretending to hit or drive into another car, acting angry and abusive while behind the wheel or blaming women for their driving. This sometimes was also done to stop women talking or continuing the discussion. This is what a mother of two children said:

*He put his foot down on the petrol, he was frightening me, and I feel that, I couldn’t say anything, because if I said anything he’d just verbally attack me in the car. He was in a powerful position, so I just shut up and just sat there, while he drove like a maniac. I felt, I couldn’t get out of there, even though—by the way the car is mine—it was just complete bullshit.* (Annabel)

The *South Australian Intervention Orders Act 2009* described reckless or dangerous driving with a passenger in the vehicle as a form of EPA (South Australian Act, 2012).

**Yelling and shouting.** Just over three quarters of women responded in the questionnaires that their partner either yelled or screamed at them. At the time of the interviews 10 women provided further details and stated that this behaviour would usually occur with no particular connotation. Men did it either in private or in public and could be set off by little things such as women asking questions or trying to have a conversation about something. Such behaviour caused them to feel upset, scared, humiliated, or created a sense of ‘walking on eggshells’ because some of them could not predict the outburst moment. Nicky said that the worst behaviour that affected her the most was when:
he would explode at me in public and I really hated that and I would do everything I could to avoid it, because it’s embarrassing; in a way I felt like I could put up with it because I knew what he was going to do. I knew the worst thing he could do behind closed doors, but in public it’s like everyone looks at you – ‘ohh my God, you one of those abused women’, it’s the worst. (Nicky)

She described it as living in a “constant state of anxiety” that something might flare up and she would be attacked.

**Controlling woman’s choices.** Just over three quarters of women pointed out that their ex-partners attempted to control or decide on what should be their personal choices, habits and looks. Women described that their ex-partner requested or insisted upon adjustments or restrictions to their clothing, or requested them to dress up in certain ways or to have no make-up on. They asked them to change their clothing style such as nothing tight fitting, short or too revealing. Some of them had to wear baggy, loose fitting clothing that covered them. Nicky said that she looked like a kid, in her mother’s clothes, whereas Violet, who is in her mid 20s, said that:

> He actually had a test for me, to see whether the clothing was appropriate. I would have to bend over and if he could see down my top, then it was forbidden. So even when I was wearing like a regular crew neck t-shirt, I’d have to wear another really fitted high neck one that sat above my collar bone, like two sizes too small, so if I happened to bend forward and someone happened to be looking at my chest at that point in time, they couldn’t see down. (Violet)

She went along with it because she believed that he was previously hurt in relationships and thought that once she earned his trust, things would go back to being normal. Follingstad and DeHart (2000) argued that domination and control may be shown by men through making decisions for women. Dowda (2009) said that perpetrators feel they have a right to tell their partner how to dress, look, talk, behave or feel. Tactics such as telling women what to wear, forbidding them to shop, or choosing clothes for them, share a coercive nature of material constraint, which relates to controlling money or other needs. These tactics of coercive control highlight the gendered dimension of the behaviours perpetrated (Stark, 2007).

My participants described, that their partners justified their behaviour by saying that women were “pretty enough” or did not need make up, because they were in a relationship and did not need unnecessary attention from other men. This manner, which was subtle, tactical and pseudo-caring, was harder for women to realise and see as controlling or even think of it as abusive. In a more overt manner, men actually did not allow them to wear any make-up or make any physical changes, unless it was something they wanted. Some men accused their partner of looking for attention if they did not comply with their requests or demands. The examples women provide related to modifying their looks, shaving and weight.
For example:

*I went through a stage, I wanted to colour my hair and he kept saying – ‘no, you got beautiful hair the way it is, don’t worry’ and I came home one day and I had it totally blond and he lost the plot absolutely and accused me of sleeping around and being a whore and all that sort of stuff, so I changed it back to its natural colour.* (Fiona)

*He would get really upset if I wore make-up, or plucked my eyebrows, or wore clothes that were revealing, so gradually I noticed myself complying with that in a way; and I guess he would say it in ways to me, initially that were very kind of like caring, like – ‘you don’t have to do that, you are beautiful the way that you are’, but it became very evident, that it was because he didn’t want other people to be looking at me.* (Nicky)

In Tina’s situation, her ex-husband decided on the ornaments and kitchenware she had in the house, because he did not like her choice of household goods. Similar behaviour was experienced by Sally, where she would be asked to make certain changes in her room. Similarly, Dowda (2009) pointed out that a man may show control by reorganising things around a woman’s house. After Tamara’s marriage it seemed that she had to make several changes in her life and it was like:

*Now that we’re married, you have to give up smoking, now that you’re married you have to be nice to my brother, who was a complete pig, now that we’re married, it was always – ‘now that we’re married’... I felt like he was treating me like he owned me, like I was possession and he started suggesting that I should change my clothing, my hairstyle, quit my job and not start university, all this other stuff, because now I was his wife, I needed to be a certain way.* (Tamara)

Initially she thought that her ex-husband was commitment phobic like her, and hence brushed off these requests and behaviors thinking that they will work through it together. One of the things he planned for her was to bear children, where she had to have two children in two years or he would trade her in “for a new model”. They also had fights about her surname change, which she did not wish to do, but eventually it was changed for official requirements.

One woman experienced a very serious form of control from her ex-husband. Because she had to keep herself private, she was not allowed to have a natural birth and instead had an elective caesarean. She had to come up with an alternative story for doctors as to why she did not want to have a natural birth. She also had to make sure that all professionals surrounding her during the birth were females:

*He actually said to me – ‘you better make sure they are female, otherwise on the day it’s not going to happen, I’ll deliver the baby’, and I’m just thinking, ‘ohh God’, and it sounds, it sounds so crazy when I’m saying it now, but I believed him when he said it. I was sort of genuinely fearful, that he’d force me into that... I’d rather just sort of try and accommodate what he wanted and so that I’m not putting my baby sort of in any further risk, but thankfully my obstetrician was amazing and managed to coordinate the whole female team.* (Violet)
Damage woman’s property, personal belongings or throw objects. Three quarters of women specified that their ex-partners had thrown or damaged their personal belongings in some way, which are similar form of behaviours reported in the literature (Burks, 2006; Follingstad & DeHart, 2000; Porterfield, 1989). The different tactics their partners used included, putting their fists through walls, slamming, kicking, and smashing household objects and women’s personal belongings. Sometimes the flying objects were thrown randomly into empty space or directed towards women such as “full bottles of water or alcohol” or “food”. For some women, this became a frequent occurrence, and was mostly irrational and they had no idea as to what triggered such behaviour. Causing damage to a property was used as an example to describe EPA by the South Australian Intervention Orders Act, while it is usually described as a form of DV by other states (ACT, WA, Vic, NT, QLD).

When Samantha tried to break-up with her ex-partner, he did not leave her house for several days. He sat quietly on her bed with her laptop and when he finally left she noticed that:

He wiped my entire computer, then I walked around the house and I found a gift that somebody [had] given me was broken in the bin, he [had] taken a wig that I [had] worn to party, he had taken my [personal belongings], packed them all up. (Samantha)

In a different scenario, men can ask, force or manipulate women to destroy their personal belongings which causes more grief. For example, Violet’s ex-husband made her get rid of some of the objects she was given, rather than doing it himself.

Women’s definition of emotional and psychological abuse

I asked women to describe their definition and understanding of EPA. Some had difficulty in providing a definition for EPA and, in comparison with physical forms of violence, described EPA as a ‘grey area’ and not as clear-cut.

Waller et al. (2007) observed that definitions are prone to depend on the victim’s perception of a perpetrator’s intent and thought processes. My participants were inclined to describe EPA in terms of their own experiences. Several women referred to the perpetrator using power and control over his partner. For example, Sally referred to EPA as behaviour that controls any part of another person’s life (e.g. telling a person what to do, what to wear and who to associate with). For Emily it was about being disrespectful towards your partner and projecting anger, emotions and extreme reactions that are unjustified, illogical, irrational and unprovoked.
Women used similar factors found in the literature to describe EPA, such as: intent, frequency and patterns of behaviour; outcomes and effects; and who is the instigator or perpetrator and who is the receiver of the abuse. Maria’s definition was based around intent and the purpose of abuse. She said that an abusive man perpetrates behaviour on purpose and if he does not get the outcome he wants, he will do something different to achieve the desired outcome. She said that EPA constitutes behaviours that are “designed to deliberately change, modify or affect someone else’s behaviour”. In general, women described EPA as: being insidious; constant; ongoing; and a form of abuse that carries on for the rest of a person’s life.

I present four different definitions described by women from different age groups. The first definition is from Abby, who is a university student in her early 20s. She used factors like duration, effects, behaviour and person’s perception to describe EPA:

Well it would have to be like a constant or a chronic, like an ongoing situation, when someone continuously, over a period of time puts you down, makes you feel worthless ... it’s like bullying ... a set of behaviours set out to control, manipulate, undermine you, that goes on for a period of time. ... It’s easier to intimidate someone, you can do it in so many ways, you can just stand over someone or have a threatening stance or your body language ... and I think intimidation is a big part of it, and because people stay in these situations for years ... they feel like they can’t leave or they feel like there’s no option for them to leave. (Abby)

The next definition was provided by Annabel. Her definition included: intent or purpose; frequency, duration, intensity; and the deliberate aspect of behaviour:

I think we are all capable of doing that to people, and we probably, emotionally abuse people daily ... but I think, maybe, the true meaning of it is that it’s not just one occurrence, it’s repetitive stuff; and it’s stuff that causes another person pain and making them feel not good about themselves, and sometimes we may not be aware of that, that we are doing that to someone. Sometimes we are aware of it and we do it deliberately, so that’s the worst of it I guess, when we do it deliberately. And it could be verbal, it could be doing something to someone behind someone’s back ... I think it’s the matter of identifying it, learning how to identify that type of abuse and also being able to say ‘Stop! you’re not doing that to me’ ... it’s a constant thing and causes you depression, and you feel low about yourself. (Annabel)

The next definition describes EPA in terms of behaviours and outcome, offered by Tina, a mother of two adult children:

They get to your feelings, they get to your emotions, and if they can get your emotions and your feelings you start thinking and believing the way you feel, that’s for emotional, and for the psychological. I think it’s more attacking your being, attacking your core, stripping you of your dignity and self-respect. If they can strip you of your dignity and self-respect, that’s who you are, and you’d like to think you are worth something, that you are something, then they’ve got you. The psychological and emotional is the core thing. They destroy who you are, and then they make you feel like the labels they give you, ‘you’re fat, you’re a pig, you can’t do this, you can’t do that, you’re good for nothing’. They’ve attacked your character, your person, and your feelings and your emotions gravitate towards that, because that’s what they’ve
told you you are, but once they do that, they can do whatever they want with you. They can tell you do this, do that, do the other, or nobody would want you, nobody will have you, and because they have destroyed what you think or what you believe for yourself, they've got control. (Tina)

For her definition, Fiona used factors like behaviours and continuation of effects. She felt emotional abuse was one of the worst forms of violence because it stays with a person for years, going “round and round in their head”. Her description of EPA was:

just putting someone down, telling [them] what they should and shouldn’t be doing, anything that’s demeaning basically ... it’s hard to define it [laughs], psychologically just telling them that they are fat or they are ugly or they are nothing without them [male perpetrators]... I think anything that just makes you feel not good. If you’re with someone and they’re making you feel horrible, then it is a form of abuse. But there are different levels too, because I mean a friend can make you feel horrible, but that’s on a different level to your partner ... Would you hang around with a friend that’s constantly puts you down? You probably wouldn’t, but we put up with partners that do [laughs]. (Fiona)

Conclusion
Based on what women reported in the interviews and questionnaires, I identified six key categories and 35 sub-categories of behaviours women’s partners perpetrated against them. My findings show that all women experienced at least one behaviour from each category. Even though women had unique and individual experiences, there were many commonalities in the types of behaviours they described.

Their definitions of EPA were similar to those in the literature. They used single or combination of factors like intent, frequency, patterns of behaviour, outcomes and effects, and who is the instigator or perpetrator and who is the receiver. Some women experienced difficulty providing a definition and were inclined to use examples relating to their personal experiences, rather than something standard or broader definitions. This finding shows that definitions may still vary among individuals (even those who have experienced EPA). As I mentioned in Chapter 2, there is lack of consensus and agreement among researchers on the definition of EPA.

My participants pointed out that identifying, describing and explaining these behaviours is very difficult, since they are not always obvious, or perpetrated and carried out using different tactics such as: loving or caring; confusing or passive; or through quiet, snide and backhanded remarks or comments. The variety of behaviours under each category and sub-category demonstrates that men perform them in different ways. For example, in financial abuse, a man can either refuse to provide financial support, control woman’s money, make her responsible for all the finances or bills, or steal her money. My findings suggests that men can
use many different non-physical tactics to either control, hurt, intimidate, frighten, isolate, put-down, undermine, humiliate or lower woman’s self-esteem. Men’s domination, manipulation, restrictions and gaining control over their partners and other aspects relating to their personal lives, were common themes that emerged from women’s reports of behaviours that their partners perpetrated.

My findings indicate that we cannot rely on one set of behaviours and examples to define the nature of EPA. The list of behaviours cannot be narrow or too specific, or describe the same category if we want an accurate understanding of EPA. Having grouped the experiences of behaviours into key categories and sub-categories is a more organised and effective way to explain and refer to the conduct of EPA, starting from a broader description of behaviours to narrower sub-categories, which then provide examples.

Women in my study experienced a great variety of emotionally and psychologically abusive behaviours, which are very similar to the academic literature and exceed the number of behaviours described in Australian legislation and studies identifying and measuring EPA. As I described in Chapter 2, only four states (VIC, QLD, SA and TAS) refer specifically to EPA as a form of domestic violence in their legislations. Each provides several examples of behaviours to describe EPA, except Tasmania. The SA legislation has the most extensive range of behaviours. However, these descriptions do not cover all categories of behaviours, compared with those my participants described. In addition, these examples differ between states and other states do not describe EPA, but instead include some behaviour that could be considered as EPA. Greater consensus on the terms and categories or examples of behaviours used in the legislation would reduce the discrepancies and increase awareness and understanding towards EPA.

In order to distinguish or identify the violence in intimate relationships we need to identify men’s motivations and rationale for using EPA against their intimate partners, including patterns of control, frequency and duration of behaviours, and interpersonal and psychological causes of incidents. Since I did not enquire about these aspects, I suggest that future research needs to gather insight into these factors, as this information could help strengthen existing methods of perpetrator assessment and intervention and support for women. This could also help us develop a better understanding of EPA and use of these behaviours. Future researchers could also identify similarities or differences in the cycle of violence, which is evident in physically abusive relationships.

In the next chapter I will discuss the effects of EPA, described by the women in my study, which is a useful and important part of the definition of EPA.
Chapter 5

Effects of emotional and psychological abuse

Research on EPA has demonstrated that it can have devastating and negative effects (Baldry, 2003; Murphy & Hoover, 1999), can be as or more damaging than physical abuse (Jones et al., 2005; Kelly, 2004; Lawrence et al., 2009; Marshall, 1996; Murphy & Cascardi, 1993; O’Hearn & Davis, 1997; O’Leary, 1999; Sackett & Saunders, 1999; Street & Arias, 2001) and may be detrimental to mental health (Lawrence, et al. 2009). Some of my participants indicated that they were living in the past, or still are emotionally and psychologically damaged and negatively affected by their experiences of EPA. In general, it had a very big impact on them. For example, Adele said “fortunately I was able to physically heal, and physically I’m in pretty good shape. I do look after my self, but psychologically I think, it had a really big impact on me”. Another woman described her perception of EPA and its effects:

You look at a lot of victims of physical abuse, and they end up quite defined ... but victims of psychological and emotional abuse, I reckon end up so crippled, so affected; it’s so hard to fix and it’s long term and you can’t see my scars, you can’t see my sadness and the frustration of feeling so trapped and controlled and degraded by that man. (Sue)

Emotional abuse is not always recognised by victims (Braaf & Sneddon, 2007) and when they look for a counsellor or therapist, attention is given to their symptoms, such as intrusive thoughts, persistent feelings of confusion, suicidal ideation or terrified clinging behaviour, rather than the underlying EPA. Even when victims recognise the occurrence of name-calling and undermining insults in their intimate relationships, the emotional pain, the depth of the inner bruises and worn down sense of self frequently remain hidden from conscious awareness (Loring, 1994). Non-physical forms of abuse occur more often than physical abuse and frequently cause negative somatic and psychological conditions (Gordon, 1998). According to Loring (1994), in numerous cases somatic symptoms, such as stomach problems or headaches, conceal acute loneliness and despair. Herman (1992) drew attention to misdiagnosis of victims of EPA. Abusive situations were frequently attributed to the victim’s presumed underlying pathology by mental health professionals. Thus, there is a need to demonstrate what consequences women can experience during and after emotionally and psychologically abusive relationships. Improving knowledge of the health impacts of EPA can provide a greater awareness of how this abuse affects women, and enhance understanding of the long-term effects. By documenting and exposing these effects, other women (in and out of abusive relationships) and the general public may gain a better understanding of EPA and
thus take it more seriously.

I will briefly touch on the effects reported in the literature, as previously discussed in Chapter 2, followed by the effects women in my study discussed, and conclude the chapter with a summary of the findings.

The effects experienced by emotionally and/or psychologically abused women have been categorised in the literature into three main categories. The first category refers to an association between experiences of EPA and physical effects and physiological symptoms (Burks, 2006; Loring, 1994; Marshall, 1996; Porcerelli et al., 2006; Wagner & Mongan, 1998). The second link researchers found was between EPA and the effects on the emotional wellbeing of the victim. These effects can cause women to feel doubt, inadequacy and unworthiness, self-criticism, destruction (Loring, 1994), confusion, depression, hopelessness, low self-esteem, unexpected anger and an inclination to be fearful (Engel, 2002). The third category reported by several studies indicate that there is a significant correlation with psychological symptoms (Baldry, 2003) and a considerable impact on mental health from EPA (Ali et al., 1999; Kelly, 2004; Kelly et al., 2009; Nancarrow et al., 2011; Porcerelli et al., 2006). Others that do not fall into the above categories describe negative socio-economic effects which relate to economic stability (Branigan, 2004), future relationships and trust issues (Burks, 2006). Other examples refer to drug and alcohol use (Coker, et al., 2002), use of psychotropic medications (Marshall, 1996) and self-destructive behaviours (Burks, 2006).

**Women’s accounts of the effects of emotional and psychological abuse**

Drawing from the literature, I asked each woman to describe the negative effects they believed to have been caused by EPA on their physical, emotional and psychological wellbeing. Some effects also fell into social and economic categories. Women’s perception of these categories varied. For example, while one woman described an effect on her emotional wellbeing, another woman described a similar effect that she believed fell under psychological wellbeing. Based on the definitions of EPA in Chapter 2, I perceived EPA as two separate forms of abuse. They can have similar and interconnected, yet separate effects on individuals. Based on the concept of intent, the perpetrator may also aim to hurt a woman with a specific outcome in mind, for example, emotionally upset a woman or psychologically destabilise her and make her question her beliefs and sanity.

In this section I report the categories of most similar and frequent negative effects reported by my participants. However, the women themselves were not always sure about the connection between EPA and the effects. There could be a range of causes other than EPA,
such as other stresses, daily responsibilities including their job, housework and care of children, illness, disability and/or lack of support. Similarly Evans (2007) found that her participants were not as confident connecting abuse with their physical long-term effects as they were with psychological effects. Without informed knowledge it is not likely that women will make these connections.

Table 7 demonstrates the negative effects experienced by the 20 women in my study. These effects were divided into four categories with 22 main sub-categories. I list the most discussed effects under each category first, which include direct quotes from interviews.

Table 7: Self-reported negative effects experienced by women

<table>
<thead>
<tr>
<th>Effects</th>
<th>Number of women</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical wellbeing</strong></td>
<td></td>
</tr>
<tr>
<td>Changes in eating habits, weight gain and loss</td>
<td>16</td>
</tr>
<tr>
<td>Body aches and pains</td>
<td>9</td>
</tr>
<tr>
<td>Skin-related issues</td>
<td>8</td>
</tr>
<tr>
<td>Difficulty sleeping</td>
<td>6</td>
</tr>
<tr>
<td><strong>Social and economic</strong></td>
<td></td>
</tr>
<tr>
<td>Isolation</td>
<td>18</td>
</tr>
<tr>
<td>Financial hardship</td>
<td>18</td>
</tr>
<tr>
<td>Trust in or fear of people and future relationships</td>
<td>18</td>
</tr>
<tr>
<td>Smoking, drinking</td>
<td>3</td>
</tr>
<tr>
<td><strong>Psychological wellbeing</strong></td>
<td></td>
</tr>
<tr>
<td>Feelings of depression</td>
<td>19</td>
</tr>
<tr>
<td>Psychological destabilisation</td>
<td>19</td>
</tr>
<tr>
<td>Traumatic symptoms</td>
<td>19</td>
</tr>
<tr>
<td>Anxiety, panic attacks</td>
<td>19</td>
</tr>
<tr>
<td><strong>Emotional wellbeing</strong></td>
<td></td>
</tr>
<tr>
<td>Self-esteem, confidence and respect</td>
<td>16</td>
</tr>
<tr>
<td>Fear</td>
<td>16</td>
</tr>
<tr>
<td>Crying, sobbing</td>
<td>16</td>
</tr>
<tr>
<td>Internalisation or self-blame</td>
<td>16</td>
</tr>
<tr>
<td>Anger</td>
<td>16</td>
</tr>
<tr>
<td>Stress</td>
<td>16</td>
</tr>
<tr>
<td>Making changes, modifying own behaviour</td>
<td>16</td>
</tr>
<tr>
<td>Pre-empting</td>
<td>16</td>
</tr>
<tr>
<td>Humiliation or embarrassment</td>
<td>16</td>
</tr>
<tr>
<td>Emotional attachment or dependency</td>
<td>16</td>
</tr>
</tbody>
</table>

**Effects on physical wellbeing**

This section describes the experiences of 16 women. Wagner and Mongan (1998) and Coker et al. (2000) reported that their emotionally and psychologically abused female participants experienced general poor health and feelings of tiredness. Several women in my study described their feeling of or being “physically unwell”, “physically exhausted”, “unhealthy and pale”, “tense” or “lethargic”. For example, Nina described the general negative effect on her physical wellbeing:
Another factor that came into the kind of recognising and the realisations was the physical kind of effects of it ... I started to lose hair, didn’t go bald or anything like that [laughs], but just, you wake up in the morning and you see hair on the pillow so I think my body generally was not very well ... and they were the things that kind of really alerted me that something was wrong, because you know when you’ve got bad skin and stuff, you look in the mirror and you kind of can’t ignore it anymore. (Nina)

My participants spoke about specific physical effects they thought were related to experience of EPA. All of the women realised that their physical effects had not been medically proven, but they were the things they experienced during and after the relationship or when they talk about their experiences. Since the separation, some of these effects had disappeared or were now less visible. For example, general wellbeing improved or their skin problems disappeared. Besides the effects outlined below, five women described experiencing more individual, negative effects such as: high blood pressure; more frequent seizures during the relationship; vision problems when talking about ex-partner; abnormal pap smear results and stuttering in the early days of the relationship. Access Economics (2004) reported an association between cervical cancer and DV, while Coker et al. (2000) reported a link between experiencing psychological abuse in IPV and developing a health condition such as stuttering.

Changes in eating habits, weight gain and weight loss. Burks (2006) and Loring (1994) pointed out that women may experience eating disorders as a consequence of emotional abuse. This may relate to anorexia, bulimia or binge eating (Burks, 2006). However, women in my study did not indicate any of the above disorders. Instead, a little over half of the 16 women spoke about changes in their eating habits. Difficulty in losing weight was experienced by emotionally abused women in Wagner and Mongan’s study (1998), while Access Economics (2004) also associated eating disorders with DV. Women in my study indicated that their weight loss or gain during the relationship occurred due to stress levels or being upset, which caused them to eat more or not eat at all. For example, Annabel revealed that she got larger because she did not want to make herself attractive to her partner. While Nicky became very skinny:

I was very skinny, I find it hard to put weight on anyway but I was way too skinny; not that I was anorexic, but I think I didn’t eat, because I was upset a lot. You know when you are upset, more for me, I don’t eat when I’m upset, so if you are upset all the time [laughs], then you don’t eat ... I got very thin ... I was unhappy, so I was skinny, not eating. (Nicky)

Body aches and pains. Half of the women talked about experiencing some body related aches and pains, such as: stomach problems; migraines and headaches; or tension in the neck and shoulders. Three women described experiencing digestive problems. For example, Lisa said:
I was having a lot of gastrointestinal problems, irritable bowel, stuff that people couldn’t put their fingers on, just feeling achy, unwell. (Lisa)

Similar effects relating to EPA were reported in the literature, where women experienced leg or arm aches and muscle tension (Wagner & Mongan, 1998), headaches, painful feelings in different parts of the body similar to tendonitis or arthritis (Loring, 1994). In a later study Coker et al. (2000) reported finding a link between experiencing psychological IPV and a significant increase in the risk of developing several physical conditions such as chronic back or neck pain, chronic pelvic pain, migraines or other frequent headaches, stomach ulcers, constipation or diarrhoea.

**Skin-related issues.** Around a third of the women experienced skin issues, such as: rashes; warts; acne; eczema; rosacea; and generally problematic skin. This is what Rachel described as her physical negative effect:

*I got eczema all over my legs … and I’ve never had eczema before, so I had that [month] of last year, just before I went and got an intervention order. Starting to peak again and I just got eczema all over my legs [laughs]. I named it ‘skanky leg’, because both legs were just itchy constantly and it took me a while to put it together, but I can basically pick when he’s now in my life, it [eczema] comes out straight away, so, when I had to go back to court for custody stuff, it comes straight out and starts itching, so I never had that before. (Rachel)*

Some women also spoke about disappearance of these issues after separation. For example, Tamara said:

*I also had plantar warts on my foot, and the whole sole was covered. It was disgusting, nothing worked to get rid of them. The moment I separated from my husband, all my plantar warts cleared up … My doctor tells me it’s because I was happy, they all just went away. (Tamara)*

**Difficulty sleeping.** Difficulty sleeping was categorised under the physical effects section in the literature review (Loring, 1994; Wagner & Mongan, 1998). Three women experienced some sort of sleeping problems like insomnia or hypersomnia (wanted to sleep all the time) or had difficulty sleeping. For example, while together with her ex-partner, Samantha wanted to sleep all the time, and at other times she would stay up all night and talk to her friends or watch television because she could not sleep. Evans (2007) found that 75% of her 134 participants experienced difficulty sleeping. Fiona said that her sleeping improved once her ex-partner left.

**Social and economic effects**

The following four sub-categories of socio-economic effects were described by 18 women.

**Isolation.** Just over half of the women spoke about feeling socially isolated or lonely
because of their partners or the situation they were in. Some of them lost contact with friends, or their family relationships broke down. For instance, Emily said that she had to disappear out of her friends’ lives and make excuses or white lies to why she could not see them. Tamara’s ex-partner used to tell her how her friends were idiots; he was really trying to isolate her from the “rest of the world” and her networks. Similarly, Tina said: “I didn’t have any friends, because he made sure that we had fights and arguments, nobody was coming to see me, so I felt alone. I felt isolated”. The following quote describes Sue’s opinion:

To be socially isolated is really destructive and damaging and I think that social isolation is very underestimated and so much needs to be done to facilitate victims of DV being involved and included socially. (Sue)

Bengtsson-Tops and Tops (2007) pointed out that the experience of abuse has negative effects at interpersonal and social levels. It may cause falling out in close relationships and lead women to feeling socially isolated. Marshall (1999) highlighted that isolation and alienation could cause a woman to feel as if she was alone or different from others. Lammers et al. (2005) and Porcerelli et al. (2006) found that their participants experienced a feeling of loneliness as a consequence of emotional abuse.

**Financial hardship.** In Chapter 4 I described the different forms of economic abuse. Just over half of the women in my study disclosed the consequence of financial abuse during and after the relationship. This related to financial constraints and other burdens men created. The consequences of financial abuse continued for those women who had shared parental responsibility for children and those who had to go through court procedures. Some of these women were still experiencing financial hardship and uncertainty. They experienced financial debt, lived in poverty with their children, had to borrow money from friends and did not receive child support from their ex-partners. These circumstances made women feel degraded and financially vulnerable.

**Trust in or fear of people and future relationships.** A little over half of the women said that they have in the past experienced or still have difficulty trusting people, opening up to them, forming new relationships or breaking old habits. Women became wary and suspicious of new relationships. They became fearful that they would get involved in the same situation and would not be able to get out. They realised that their past experiences had stuck with them and at times were harmful to their new relationships. For instance, Tamara experienced two similar unhealthy relationships and they devastated her. During interview she said that she did not feel ready to move into another relationship.

Several women pointed out how suspicious they were towards new relationships and how they compared them with their past relationships, in terms of their similarities, which
for some worked as a possible indicator as to whether they had to be careful. They assumed that their current partner would start behaving similarly to the past partner. They felt tense and could not enjoy the relationship. For example Abby pointed out that she reacted suspiciously if her new partner echoed her ex-partner in any way. At times when he made her really angry, or she thought he was being unreasonable in certain situations or there was an argument, she called him by her ex-partner’s name. She considered her reactions to be disturbing, but her rationale related to the bad situation she had been in previously. Likewise, sometimes Nicky responded to her new partner in ways that she would react to her ex-boyfriend. This caused her new partner to be confused, hurt or offended that she might think he would treat her in a similar way. She said: “I was so used to this terrible relationship that I’m bringing little bits of that into my relationship now, even though it’s not happening to me”. She initially experienced difficulty having a relationship after her ex-partner:

I think looking all the way back now, I found it very difficult to have a relationship after him, that’s another effect I guess. I found it really difficult to trust men or myself in a sense that I wouldn’t get back into that kind of situation, but now, it’s like, I will not fucking put up with anything ... I won’t put up with anything, it’s like I’m hardened to it, or I’m trying to be so careful that I don’t. I think I mistrust my own judgement of men now or something that I am going to get into another situation like that (Nicky)

Similarly, Fiona, in her mid 30s, described experiencing difficulty breaking old habits:

It’s taken me forever to get out of those little habits, like my partner now couldn’t care less if the house was turned upside down [laughs], he’ll help me clean it, but still I find myself, say that I’d be straightening up or that cup shouldn’t be there and then I have to stop myself and think, no, it’s ok, it’s just a cup [laughs]. (Fiona)

A different point was made by Emily. She said that she was still scared and worried about whether she would be able to walk away any sooner if she ended up with a similar man again, since she found it really difficult to walk away from her first relationship. Because of her experience she became worried about whether she was going to treat someone appropriately or was going to be left with bad habits:

I’m a lot cut off and cold now in a relationship. I just don’t let the person in and ... when I’m not with them or when I’m not seeing them, I’m not seeing them, I’m not with them, I don’t let my mind think about that person, I’m a lot more detached, definitely, I think it will take a lot, me being with someone for a long time to be able to feel really into it. (Emily)

Similarly, Rachel, who is older than Emily, spoke about initial difficulty starting new relationships and her ability to be open to them:

That [feeling] sabotages your ability to expose yourself to new relationships, I know that, I found out, although I dated a lot of people, I never went any further than maybe three or four dates with them, or because I could never give myself to someone and
open up, because he [ex] was always there ... I had to turn my phone on silent because I know, he would call through it and I’m not good at lying or anything like that, so I just put it on silent and I found that very hard as well ... I just felt like I could never move on to someone else; I felt very unavailable, even though I was dating, I was not there for them. (Rachel)

Likewise, some women in the study by Queen et al. (2009) experienced difficulty forming new relationships, while others were learning to rebuild trust and avoid similar situations through the cautious selection of future partners. Burks (2006) pointed out that emotionally abused women may experience difficulty in trusting others, choosing and sustaining healthy relationships and detaching from other people. They may develop social phobias and shyness. Another effect that women may experience in relation to future relationships is sensitivity towards control from others (Engel, 2002).

**Smoking and drinking.** Only three women indicated that their smoking or drinking habits increased during their relationship. Emily began smoking again in her relationship when they started to grow apart. She felt like all she needed was a cigarette when he would start yelling at her. Tamara used to drink during the relationship as well, because of the dynamic. She still falls back on cigarettes when she has to discuss something emotional about their relationship, because it makes her feel uncomfortable. During our interview she said she bought a pack of cigarettes just in case she wanted to have one afterwards. Coker et al. (2002) found that IPV, independent of type (physical, sexual, psychological battering or past emotional abuse) was associated with cigarette smoking. The literature mainly reports association of EPA with therapeutic drug use and heavy alcohol use (Coker, et al., 2002), psychotropic medications (Marshall, 1996) and illegal drug use (Straight et al., 2003). These results are different from the ones reported by my participants.

**Effects on psychological wellbeing**

Emotional abuse has a considerable impact on a person’s mental health (Aguilar & Nightigale, 1994; Faver & Strand, 2007). Nearly all of my participants spoke about effects on their psychological wellbeing. Four main sub-categories are described below.

**Feelings of depression.** About three quarters of the women in my study said they experienced depression or feelings of depression. Both emotional and psychological abuse were reported to cause symptoms of and actual depression (Ali et al., 1999; Baldry, 2003; Chirichella-Besemer & Motta, 2008; Engel, 2002; Kelly et al., 2009; Lammers et al., 2005; McKinnon, 2008; Nancarrow et al., 2011; Porcerelli et al., 2006; Testa, 2007, Theran et al., 2006). In Australia, between 2002 and 2003 almost 18% of all female depression was associated with domestic violence (Access Economics, 2004).
These women felt emotionally disconnected, withdrawn, were not themselves anymore and were not interested in looking after themselves or meeting people. They shut down, stayed at home and avoided letting people know that they were unhappy or not coping. For example, Grace disclosed that she felt like being “on autopilot”, where she got up every morning and did what she had to do, because she had to. Samantha considered her experience of having to tell herself to get dressed and to get into the shower as a depressive state. Annabel said that she felt depressed and could only concentrate on tasks like housework and attending her job, while also making herself invisible in the relationship so her husband would not attack her. Tina got to a stage where she thought she was depressed because:

in the end, I just didn’t have the strength to even look after my house. I was pushing myself, pushing myself to do anything, I didn’t have the strength, I was depressed, and then afterwards I just settled in to what he told me ... I just didn’t care about myself. I wasn’t interested in clothes. I wasn’t interested in make-up. I wasn’t interested in jewellery. I wasn’t interested in going out. I was just like a recluse I withdrew within myself, because I felt there was nothing more that I could do. (Tina)

Another example was provided by Fiona, a mother of a teenage daughter, who said:

I went through, I don’t know if you called it depression or not, I never was actually diagnosed and didn’t have to go on any medication, but I went through stages where I wouldn’t get out of bed, just so tired, couldn’t think of what to get up for, apart from my daughter, of course, but there were times where I just, I couldn’t do that either so I had to get help in to look after her for a while, till I realised that I was worth something again and to get up and it takes a long time and still now I can go through stages where I get quite down. (Fiona)

She also said that the things that used to make her happy and excited were not there anymore, and she is not sure whether that could be brought back. The same thing was said by Emily, a postgraduate student, who does not think she has ever got back to who she was before being with her ex-boyfriend:

I ended up quite depressed by the end of it, but in the lead-up to that, I think I started becoming socially isolated. I started losing interest in life. I still had motivation, but I just didn’t enjoy things in life as much anymore. I became really resentful towards other people and their relationships, the fact that they weren’t going through this or they got to have the good stuff without this bad side as well. (Emily)

Five of these women indicated that they were diagnosed with depression or were put on antidepressants medication by professionals.

Psychological destabilisation. Over half of the women described states of confusion, episodes of questioning and self-doubt, “feeling crazy or brainwashed”, “going mad” or being made to believe by their partners that there was something wrong with them, they were worthless or were doing things incorrectly. This is how Violet (mid 20s) and Tina (50 years old) described their experiences:
I genuinely did believe that I was stupid and that I was worthless and that I couldn’t do anything. (Violet)

I didn’t have a good self-image; I thought I was hopeless, I thought I was worthless. He actually had me believing I was hopeless, worthless and good for nothing. I thought who would ever want me. What’s good about me? It just tears at your being, it just tears at who you are. It makes you lose all respect for yourself. (Tina)

MacKinnon (2008) argued that experiences of psychological abuse can cause a person to become distressed or confused. Confusion as an effect of EPA was also reported by Engel (2002) and Lammers et al. (2005). Feeling of confusion and betrayal may be caused by mixed messages or treatment (Tolman, 1992). Nina felt like she was in a constant state of confusion because her ex-partner gave her contradictory messages. She focused on him and was not listening to herself, or to other people, and consequently was not putting things into a sensible context. Some women described how they experienced self-doubt because of what their partners told them, or they were uncertain and suspicious about what their partners might do, for example, use recording devices.

**Traumatic symptoms.** Just over half of the women in my study reported similar effects in the form of traumatic symptoms as women reported in Mertin and Mohr’s (2000) study. My participants described difficulty concentrating and being distracted, which caused poor performance at work and university. They had diminished interest in their usual activities and did not want to interact with others. As well, they had psychological disturbances such as recurrent distressing thoughts and dreams about their ex-partner. Three women experienced nightmares. According to Loring (1994) nightmares are considered to be one of the symptoms of emotional abuse. Grace, who is in her early 20s, has recurring dreams, where she is still with her ex-boyfriend and it is impossible for her to leave him.

Women wanted to avoid certain activities and places, so as not to remind them of their prior relationships. Sometimes they had trouble recalling these troubling events. For example:

* I have a lot of associations with certain things. There are certain bands that I never, ever want to listen to, feel uncomfortable listening to, because they were his favourite bands, and he was always playing them, and they were always playing when I was being manipulated, so it’s like all these negative associations. TV shows as well. I just don’t like things that he liked, I just don’t like them. I just want nothing to do with them, because I just go out of my way, kind of in a daily life situation, I go out of my way to avoid thinking about it, reminiscing about it. (Abby)

* It’s hard … a part of me has blocked so much of it, because I try, sometimes now even, I feel like, did that really happen, or not, because I feel like so much of it is so suppressed … There’s a lot of blanks in my memory, and that worries me … It’s like that, and even only just through talking to you now, has some of it come back up for the first time, and I’m like, yeah that’s right, there was that, and there was that. (Emily)
Abby (late 20s) and Sue (early 30s, with children) were diagnosed with post-traumatic stress disorder:

*It took me a long time to accept that I had post traumatic stress, so it took me a long time to be able to say, yes, got that, been suffering from that, that’s why I go to therapy, that’s why I go to counselling, that’s why I’m on antidepressants, that’s why I have panic attacks, that’s why I do this and that took me a really long time to really accept it, so I’m [age] now, and I’ve been able to say that I’ve had post traumatic stress for about a year.* (Abby)

*I’ve got a psychological injury. It’s not an illness, it’s an injury. If you look at complex post-traumatic stress, it’s what victims of domestic violence end up with. The letter that my psychologist submitted to court, states that I have complex post-traumatic stress disorder as a result of ongoing psychological or persistent psychological abuse and manipulation. I didn’t have this injury three years ago. I didn’t have this injury two years ago, I don’t think. Now I’ve got it, because the system, didn’t stop this perpetrator of domestic violence ...* (Sue)

Symptoms of PTSD were found to be associated with EPA and have been reported extensively in the literature (Arias & Pape, 1999; Dutton et al., 1999; Kemp et al., 1995; Loring, 1994; Marshall, 1996; Straight et al., 2003; Streets & Aries, 2001; Taft et al., 2005).

**Anxiety and panic attacks.** Experiencing feelings of or severe anxiety, or panic attacks was described by nearly half of the women in my study. EPA increases the vulnerability to several clinical problems (Kelly, 2004), such as panic attacks and anxiety (Baldry, 2003; Chirichella-Besemer & Motta, 2008; Loring, 1994; Testa, 2007). For example, Simona said that she felt constantly rattled when the door would click or when she heard her partner arrive by car. Whereas, Nicky described experiencing fear of her ex-partner screaming:

*It’s horrible being screamed at and called names. I think that affected me the most, because you are always living in this constant state of anxiety that something is going to blow up and you’re going to be attacked.* (Nicky)

Abby experienced panic attacks that were triggered, more or less, by seeing her ex-boyfriend. Her heart would start beating faster if she thought she saw him on the street, and she would feel on edge until she was sure it was not him. She described this experience as irrational and unreasonable. During the relationship Samantha started getting panic attacks:

*There was a time where I nearly crashed my car because I had a panic attack after one of our arguments and started acting pretty erratically.* (Samantha)

Two of the women reported that the professionals they were seeing prescribed them medication to help deal with anxiety, while a psychologist offered another woman support and other means of dealing with anxiety, because her scores on anxiety were quite high. Access Economics (2004) estimated that between 2002 and 2003 in Australia, 17% of all female
anxiety, including disorders such as phobias, general anxiety and panic disorders, were associated with DV.

**Effects on emotional wellbeing**

Besides feeling “miserable”, “overwhelmed” or “emotionally devastated” all women indicated that they experienced some form of negative effects on their emotional wellbeing. In general, women experienced: sadness, rejection and frustration; having their boundaries pushed; and being worn down. Some of these women were disturbed by loud voices and other noises, and experienced physical discomfort when talking about their ex-partner or their abusive experiences. The 10 most common sub-categories were identified.

**Self-esteem, confidence and respect.** Just over a quarter of the women described how their self-esteem was damaged by their partners and they came to feel negatively about themselves. This was caused by their partner’s behaviours, such as humiliation, criticism, degradation, disregard and undermining. These actions caused them to doubt themselves and for some it has had long-term effects. Similar negative effects, such as diminished self-esteem and self-doubt, feelings of unworthiness and inadequacy (Loring, 1994) and self-image problems, have been identified in other research (Burks, 2006; Laing, 2010; Lammers, et al., 2005; Marshall, 1999; MacKinnon, 2008). Annabel used to put herself down by dressing down to make her ex-partner feel better and to become “invisible” so he would not notice her.

Samantha said herself-esteem was disappearing, she was losing herself completely and could not figure out the reason for it, while Nina felt rejected and negative about herself. Emily said “it’s hard to maintain your self-esteem and your feeling of self-worth when someone’s belittling you”. To further illustrate this effect, Lisa explained:

> I started to feel helpless, because I couldn’t help the situation, I couldn’t help him see what he was doing, and because of the way he was treating me I felt diminished as a person, your self-esteem goes down ... you spend a lot of time questioning yourself, not coping with the things that you’d normally cope with ... you’re just diminished as a person, as an individual, low self-esteem, something that you would normally do, I couldn’t possibly do that, but you know life had to go on. (Lisa)

A similar example was provided by Rachel who is a mother of a young child:

> They drive you down to such a low point that you don’t actually value yourself, so you don’t think you’ll get anything better, there’s nothing better for you to have, so you can’t be happier then what you have with them. I think that’s a huge part of it, because they drive you down. (Rachel)

**Fear.** Just over half of the women spoke about their fear of their partner during and after the relationship. They felt fear during torments and were afraid of explosions or setting their partner off. For Nicky, going out with her ex-boyfriend in public created a lot of fear in
her, because she was worried that “he would go psycho”. Some women described being hyper-aware of their partner’s mood. Other women said that not knowing when an explosion would occur created a feeling of “walking on eggshells”. Violet said:

\[ I \text{ mean look it worked. I was afraid of him. I did just about everything that he wanted me to do, because I was afraid of him. I wonder whether some of the things that he made me do were actually things that he wanted or needed me to do, or whether it was just to see if he could get me to do it, and it made him feel good, made him feel sort of powerful from that. } (\text{Violet}) \]

A similar experience was described by 50-year-old Tina:

\[ He \text{ had me living in fear of today and constantly dreading tomorrow. Every time I’d come home, I’d dread him walking in the door … everyday I’d be thinking what am I in for today? That’s the only question I asked myself. I knew he was coming and I was thinking what am I in for? and when he did come in I was in fear, and fear paralyses you. You just can’t do anything. You don’t have the nerve or the courage because you are constantly living in fear. } (\text{Tina}) \]

When Tina moved in with her parents and told her ex-husband to leave her house, she could not return for three years because she was afraid to stay there on her own. Maria described her state of fear, post the relationship:

\[ I \text{ live in fear. I still live in fear now ... I have flashbacks all the time, I constantly think I’m seeing him. I’m terrified in crowds. I’m terrified of going into the city because I might run into him. } (\text{Maria}) \]

During the interview, Abby indicated that she became obsessed with her personal safety. She now carries a personal alarm and is afraid to listen to music when outside, in case she would not hear being approached. She said that she is very easily startled now. Her ex-boyfriend stalked her after their break-up and, as a consequence, she is still terrified of him and experiences fear of getting too close to people on the street that resemble him. In general, women are likely to live in fear before, during and after a break-up from a violent partner (Bagshaw & Chung, 2000).

\textbf{Crying or sobbing.} Porcerelli et al. (2006) reported that frequent crying spells were one of the symptoms relating to depression experienced by their emotionally abused participants. Just over half of the women in my research said they used to cry frequently during their relationship. For example, Elizabeth said that she was in tears at least once a week, while Nina felt as if she was in a constant premenstrual state and feeling very teary all the time. Violet also had teary breaks after the relationship ended. It was more like a relief for her, because she was able to release everything she had held in for so long.

\textbf{Internalisation and self-blame.} Nearly half of the women spoke about blaming themselves for their partner’s behaviours or for being in the situation they were in. Loring
(1994) said that emotional abuse is rarely recognised by victims, and many do not perceive themselves as abused because of self-blame for relationship problems. MacKinnon (2008) pointed out that some of those women who recognise their partner’s behaviour as problematic may self-blame and agree with their partner’s negative view of them. Women may experience self-blame when they have been deprived by their partners of external validation of their experiences (James & MacKinnon, 2010).

In my study, Annabel said that she took the emotional abuse on board and thought that there was something wrong with her that was triggering her ex-husband’s behaviour. She felt emotionally weak and had a feeling that she deserved the abuse. Likewise, Nina could not work out what it was that she had done that had driven him to act that way. Tina pointed out that “it’s the tags that he places upon you and after a while I think you start seeing the tags as opposed to who you really are”. Another example demonstrating this feeling was provided by Emily, a postgraduate university student:

*I had times where I would blame myself for things and I think that it’s my fault that he is this way. I’ve brought up the worst in him. This is all my fault, and I’ve got to try and fix it and help him get better ... I suppose the thing that affected me as well was the name-calling, because after a while it’s hard to convince yourself that you are not the things that the person is calling you, especially if you are keeping it to yourself.*

*(Emily)*

Some women also spoke about being led to believe that it was their fault or there was something wrong with them. Nicky’s quote summarises what other women said:

*You get brainwashed ... I think I must have thought all those things about myself on a certain level. I must have thought I wasn’t worth anything. I must have thought I was ugly, I must have thought ... if I went out anywhere I was a slut ... even though in the front of your mind, you think, whatever, he’s crazy, it’s bullshit. When somebody says something repetitively to you over so many years then you take it on, in a certain way, don’t you? In the back of your mind somewhere there is this niggling thing of whatever they’ve been saying to you.*

*(Nicky)*

Nicky judged herself for being in that situation, for being weak and feeling like she could not get out.

Abby, on the other hand, said that she felt guilty and blamed herself for not speaking to the police in order to stop her ex-boyfriend from behaving the way he was, which potentially could prevent him from behaving similarly with other women in future.

**Anger.** Under half of the women experienced anger during and after the relationship, because of the weight of responsibilities they had and the way their partners behaved and treated them. Annabel, a mother of two, reported:

*As he left, my anger started building because during the time we were together, I was never allowed to show my anger ... So sometimes when he was there, it would explode and it would scare the kids. So I had to learn how to talk to him, so that my*
anger would be not there. It was not ever safe, not even now, for me to display my disgust, my anger, my fury, my pain of what he did to me, betrayal. (Annabel)

Sue, a mother of three young children, had a similar experience, made more complex because her psychologist suggested that she not express her anger:

*I was talking to the psychologist ... he goes –'you don’t want to present as being angry and vindictive' and I said, ‘well that is really annoying ... I’m angry, I wasn’t a year ago, but I am so full of anger now’, because he has absolutely devastated my life in multiple ways and to suddenly now have to accept that this is the way it is now, and this is what I’ve been left with. This is what he’s done to me and my kids. I just have to accept that my whole future now is disadvantaged because of this. I can’t accept that, it makes me angry. I am angry that I’m having to constantly deal with, ongoing weekly, daily issues, to do with what this man does and does not do. (Sue)*

Samantha, on the other hand, described the experience of mixed feelings toward her ex-partner:

*The thing is, I hate his guts, I’m so angry at him even at night, even now, I can lie in bed at night and revisit whatever had happened in the past and I just get overwhelmed with anger and hate, and there is still another side of me that is totally in love with him and would sleep with him tomorrow and there’s still something attractive about him. (Samantha)*

Similarly, emotionally and psychologically abused women in other research reported feeling anger (Chirichella-Besemer & Motta, 2008; Lammers et al., 2005). Lammers et al. (2005) reported that this was dependent on women’s awareness of abuse, emotional pain and whether they felt safe to express themselves.

**Stress.** Over a quarter of the women in my study spoke about experiencing stress. For example, Nina said that she “ended up in state of kind of chronic stress”, where she was on edge all the time. Marshall (1999) found that behaviours, such as indifference, discrediting, monitoring and undermining, were significant predictors of women’s stress. In the study by Theran et al. (2006) emotional abuse by a current partner contributed considerably to levels of stress, yet compared with physical abuse, emotional abuse by an ex-partner did not contribute significantly to stress in their sample of abused women. They reasoned it by saying that the controlling characteristic of emotional abuse ceased to have as much effect on women after separation from the partner (Theran et al., 2006). Nonetheless, some of my participants described experiencing stress after separation as well. For example, Rachel still feels disrupted and distracted by her ex-husband’s constant contact. Similarly, Maria described experiencing stress, which is contributed by his torments, lack of or no child financial support, and moving because of him. Abby described how she does not respond well to stress now. She experiences stress if she thinks of her ex-boyfriend, or if she becomes stressed she remembers the emotions relating to him.
Making changes or modifying their behaviour. Over a quarter of the women spoke about having to make changes around themselves or modify their behaviour to keep their partners happy. Women found these changes very exhausting. DHS (2004) report that women are watchful of their partner’s changing behaviours and moods. In order to reduce the risks of future violence or to keep their partners happy, women often change and adjust their own behaviour. Fiona, who is a full-time mother and carer for her child, said:

*I just knew very quickly that if I didn't do that, he’d explode and it wasn’t worth it, so, I think I knew, and I went through that whole [situation], if I do this different or better or whatever, things will improve, or if I say this, things will change, but I think I was in denial for a very long time, for seven years [laughs], that’s a long time to put up with it.* (Fiona)

Similarly, Adele, a mother and full-time postgraduate university student, said:

*There were lots of things that I was doing that irritated him, and I tried to modify my behaviour, but he wouldn’t do the same thing, he wouldn’t reciprocate, and he acknowledged I made some changes, but he couldn’t see how damaging he sort of was... it’s all about me, shifting and adapting and assimilating to him, and he just sits there and doesn’t have to do any of that, so it’s not a real relationship at all ... I wasn’t prepared to do that long term, it wasn’t healthy.* (Adele)

Queen et al. (2009, p. 241) identified disassociation as an effect of EPA, where women in their study shifted from their natural personality into “being someone outside of myself”. Lammers et al. (2005) described that women who hope to become accepted by their partners may give up everything that conflicts with their expectations and needs. Consequently, women may sacrifice their beliefs, values and needs, which only add to their diminished identity. ‘Subordinating the self’ was a theme identified by Campbell et al. (1998), which was defined as a defensive strategy, the purpose of which was to avoid extreme verbal attacks and physical harm. The different types of subordination related to women performing things that their partner wanted (including making personal changes), actively silencing them and becoming passive.

Pre-empting. Six women spoke about “pre-empting”, “second guessing”, being “two steps ahead” of their ex-partners, in order to figure out what they are thinking or what their next step would be. For instance, Maria said that she was always thinking about where he would be or where he might be:

*I don’t go out where I want to go out for my birthday, because I think he’d figure that’s where I’d go for my birthday, as I said, constantly trying to get inside his head and second guess him with our son, because it’s about protecting his life.* (Maria)

Tina gave an example where she just wanted to have a day off work, and stay at home and have a rest, but she knew that if she did, her ex-husband would make her work. If she went to her mother’s house, he could check on her at work and if he did not find her there, he would
start asking questions and there would be consequences. She anticipated his behaviour and would simply go to work. She frequently thought about “what’s he going to be like and what’s he going to do and what’s he going to find fault in?”

Violet summarised her experience by saying “all these little things that you do, have to do, so that you didn’t get caught out with this, that and the other”. One of the examples she described related to deleting everything from the internet browser history when she checked the Facebook pages of her old friends, in fear that her husband would think she was having an affair. To further describe this effect, I provide a quote from Nina’s story:

I was always kind of coming up with a plan A, plan B and plan C for, if I say this and he reacts like that then this is what I’m going to have to do, and if he reacts like that then I’m going to have to do that and so, I was always having to think sort of two or three steps ahead because, otherwise, well, I don’t know if that’s just the strategy that I sort of [chuckle] started coming up with and so it was exhausting. (Nina)

At the time of our interview, Abby still experienced a feeling of pre-empting:

I feel like even now, I want to know where he is, and I want to know what he’s doing ... I want to be on top of it, kind of pre-empt if he’s going to come after me again, well come and try and harass me or what ever, so it’s almost like living in constant paranoia, because he goes to my university now … I’m always thinking I’m going to see him and thinking he’s going to be around or thinking he’s going to see me. (Abby)

Humiliation or embarrassment. Just over a quarter of the women revealed that their partners made them feel humiliated and embarrassed. Nicky recalled that:

Every time I would go out I would just be harassed, and I would be scared not to answer his calls because then he might show up and embarrass me or freak out or something ... It made me feel shit about myself, so if anyone in the public saw me being screamed at or pulled around or anything like that, I would be so hurt, like, embarrassed, embarrassed, embarrassed, that I was allowing that to happen. (Nicky)

Emotional attachment or dependency. Three women described emotional attachment or dependency towards their ex-partners. Two women in their 20s described similar experiences:

I think I became quite emotionally dependent on him to the point where no one else’s opinion about me really mattered and so when he said hurtful things to me, like that cut pretty deep, because I’d always been a relatively carefree, resilient, sort of person, but because I became so emotionally dependent on him for approval and things like that, when he would say things it would hurt more (Violet)

I was too scared to leave, he wasn’t physically abusive but I was just worried about what he would say or where I would be without him, because he made me dependent on him. (Grace)

Lammers et al. (2005) described how their participants behaved submissively and clung to
their partners as their only perceived source of love and support. Women began to believe that their partner was the only one who would love them. Similarly, Burks (2006) said that a partner may give a woman messages which caused them to believe that he is the only one who would love her. Loring (1994) also pointed out that women can become fearful of abandonment and/or their partner leaving them, either emotionally or physically.

**Conclusion**

This chapter demonstrated the four main categories and 22 sub-categories of negative effects women believed were linked with their experience of EPA from their ex-partner. The majority of these effects were previously reported in other studies. I was not able to find information or reports in the literature on negative physiological effects of EPA, such as skin-related issues, reported by six of my participants. I think women may not report such effects, because they may not relate to it or make the connection with EPA. This could be further investigated with a larger number of emotionally and psychologically abused women or medical records. Future findings could strengthen our knowledge about various effects. The most frequent physiological effects women reported were eating habits, weight gain and weight loss. There is little information on these, but there is documentation linking the experience of EPA and eating disturbances, and eating disorders such as bulimia, anorexia or binge eating (Burks, 2006; Kent, Waller, & Dagnan, 1999). The second most common effect described by eight women related to experiences of aches and pains, which was similar to reports in the literature.

In the category of social and economic effects, the two most common ones women discussed related to their feeling of isolation and financial hardship, which was caused by their partners. I found that isolation is usually described in the literature as behaviour rather than effect, but there is also the negative consequences of such behaviour. Loring (1994), Lammers et al. (2005) and Porcerelli et al. (2006) reported feelings of loneliness among emotionally abused women, which could possibly be an attribute of isolation.

Almost all the participants discussed experiencing effects on their psychological wellbeing. Three quarters of the women described experiencing depression or its symptoms, while 12 women experienced psychological destabilisation, brought on by their ex-partners’ deceptive and confusing behaviours. Women believed their partner’s description of them and any other negative aspects they were told about themselves. Just over half of the women described some negative effects that fell under traumatic symptoms (Mertin & Mohr, 2000), even though they did not describe it as such. These types of effects would definitely need to be researched in more detail with the help of professionals, since they could provide a valid
indication that EPA is a serious form of MIPV, causing side effects to women’s psychological wellbeing.

All women experienced negative effects on their emotional wellbeing, which also had the most sub-categories. The two most common effects that were reported by more than half of the women related to poor or low self-esteem, and fear of the partner and his actions during and after the relationship. Six of my participants disclosed how they tried to predict their partner’s next move in order to avoid getting into trouble with them, or seeing them again. This is something that needs further investigation, because I believe it could be a sign of and/or effect of EPA.

Since I relied solely on women’s reports and literature, it would be useful to verify such findings with professionals. Because some of these women were not completely sure about the relationship between EPA and how this affected them, professionals could help women understand these effects and validate their suspicions. This validation can also help other women and the general public to see that EPA is real and it can cause an array of problems, affecting different aspects of women’s lives.

As mentioned earlier, the definition of EPA is usually described in terms of behaviours rather than outcomes or effects. EPA is not always recognised by victims who seek help to deal with symptoms without knowing exactly what causes it. Several of my participants reflected that they were not sure what was happening to them, or they could not figure out why these effects were occurring. Hence, when describing EPA to women, it is important to include the possible effects a woman may experience because of EPA. Loring (1994) pointed out that acknowledgment of symptoms may occur only if a professional specifically asks about them. Sometimes victims do not volunteer the information, and they avoid doing so because of the fear of being labelled ‘crazy’. Therefore, having a list of potential negative effects for information and identification may be very useful to formal sources of support and the women themselves. It is important to ask women about any negative experiences or side effects they may have experienced, and attempt to identify, with them, what they think might be the cause.
Chapter 6

Women’s awareness of emotional and psychological abuse and their post-relationship journey

I realised that it was not right. Whether or not I said in my head, ’I am in abusive relationship’, I don’t think so, but I realised it wasn’t right. (Nicky)

As can be seen in the preceding chapters, the definition of EPA varies greatly. EPA is sometimes confused with relationship conflict (James & MacKinnon, 2010), as it has no physical marks, which makes it harder to identify (Lammers et al., 2005) and/or comprehend (McCallum & Lauzon, 2005). It is thus not surprising that there are varied understandings among women and in the wider community.

With the help of women’s narratives of certain events, and their reflection and interpretations (Oke, 2008), I discovered four key aspects relating to their awareness of EPA and their post-relationship journey. The first section in this chapter relates to women’s difficulty in acknowledging or understanding EPA. The next section highlights the turning points that occur in women’s lives. These turning points enabled them to see their relationship as unhealthy, controlling and abusive, which consequently helped them to decide to leave. I then talk about women’s difficulty leaving the relationship. The final section describes women’s post-relationship journey. This framework draws on the journey for women away from family violence (see Chapter 2) as outlined by DHS (2004). The chapter concludes with a summary of my findings.

Women’s awareness of EPA

All women interviewed in my study were asked about their awareness of abuse within their relationships. I was interested in identifying any triggers or turning points or events that produced this awareness. Several themes emerged through these conversations and they are summarised in Table 8. The timing and process of awareness varied among the women. Most women became aware during the relationship, which encouraged them to leave. Others became more aware after the relationship had ended, which heightened their understanding of abuse. Four women revealed they had returned to the relationship or had taken their partners back, several times, before finally breaking up with them permanently. The process realising and understanding the abuse was complex for these women.
Table 8: Themes relating to women’s awareness of abuse

<table>
<thead>
<tr>
<th>Themes</th>
<th>Number of women</th>
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<tbody>
<tr>
<td><strong>Trouble acknowledging</strong></td>
<td></td>
</tr>
<tr>
<td>Not realising and not understanding</td>
<td>19</td>
</tr>
<tr>
<td>Hope it will improve</td>
<td>13</td>
</tr>
<tr>
<td>Normal, not as bad</td>
<td>11</td>
</tr>
<tr>
<td>Love</td>
<td>7</td>
</tr>
<tr>
<td>Not me, can’t be</td>
<td>5</td>
</tr>
<tr>
<td><strong>Awareness – turning points</strong></td>
<td></td>
</tr>
<tr>
<td>Perspective and validation from formal and informal sources of support</td>
<td>20</td>
</tr>
<tr>
<td>Change in beliefs or loss of hope in the relationship</td>
<td>13</td>
</tr>
<tr>
<td>Child(ren) related</td>
<td>10</td>
</tr>
<tr>
<td>Physical, sexual</td>
<td>5</td>
</tr>
<tr>
<td>Maturity</td>
<td>4</td>
</tr>
<tr>
<td>Meeting someone</td>
<td>4</td>
</tr>
<tr>
<td>Seeing the effects</td>
<td>3</td>
</tr>
<tr>
<td><strong>Difficulty leaving</strong></td>
<td></td>
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<td></td>
<td>8</td>
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</table>

Trouble acknowledging the abuse

Most women in my study had trouble acknowledging EPA, and I identified five main themes relating to it. I would like to point out that negative and offensive behaviours did not usually start, or women did not notice them, until their partner declared their love, or the couple were together for sometime or were married. This seemed to have lured women deeper into the relationship or commitment and made it harder for them to separate and leave their partners. Liang et al. (2005) highlighted that relationships comprise a range of interactions; sometimes the intimacy of these interactions may make subtle abuse difficult to distinguish and understand. In addition, it may be difficult to classify the relationship as abusive, when the violence shifts in its nature and severity including the abuser alternating between loving remorse and violence.

Not realising or not understanding. Emotional abuse is rarely acknowledged or recognised by its victims (Loring, 1994) and they do not always define their experience as abuse, if it was ‘only psychological’ (Enander & Holmberg, 2008). A similar problem was described by 13 women in my study.

My participants reported that they did not recognise what they were experiencing as abusive. At the time of the relationship, the abusive behaviours were not obvious to these women. For example, Sue (a former nurse) said that she knew what physical abuse was, but she did not understand what EPA was and had never heard of financial abuse before. Maria said that she just thought her ex-partner was immature and perceived his behaviour accordingly. In general, some women reasoned that it was something to do with their partner’s personality. Marshall (1999) explained that women may dismiss behaviours, such as domination and monitoring, as something about their partner and hence it was something they
had to bear. Since the relationships started well for women in my study, they found it confusing when it deteriorated over time. Moreover, since some of them were in abusive environment for a long time, they were unsure anymore about the behaviours.

Four women described a feeling of wrongness, but they were not sure, or did not know what it was or how to deal with it. Violet’s quote summarises the similarities between women’s difficulties in recognising the abuse:

_I certainly knew that it was very different to any other relationship that I’ve been in before, but again, because he was quite manipulative, I had a lot of trouble acknowledging that what he was doing wasn’t right. I was acknowledging it as severe, but it’s something that he’s doing as a response to what I’m doing so there was a lot of self-blame and I’d beat myself up about it a lot._ (Violet)

Self-blame for the partner’s behaviour and embarrassment was also seen as a barrier in recognising abusive behaviours. For example, Annabel said “*Because you are also saying ‘I deserve that’, in your head, or this is too embarrassing to talk about it to anyone*”. Another key barrier related to other people not recognising the abuse women were experiencing.

Annabel, a mother of two young children, said:

*Look, I even went to a counsellor after I had my second child, because it was when it was the worse and she didn’t even recognise it, that I was under abuse, didn’t recognise it, even though there were obvious signs there.* (Annabel)

**Hope it will improve.** Trouble in acknowledging the abuse among more than half of the women related to their desire and hope for improvement. Women either made excuses for their partner’s behaviour or believed their promises that things would improve and hence gave them second chances. They felt committed to the relationship and hoped the situation would improve or they would be able to change their partners. Researchers in other studies found that women stayed because they still had fantasies of saving their relationships (Chang, 1996), or because they believed that their partners would change (Fanslow & Robinson, 2010).

Some of my participants pointed out how their ex-partners manipulated them for forgiveness. For example, Nicky said that it was his apologies about his behaviours and promises of change and therapy attendance which made her believe he was still the person she loved. She thought it was the reason for why it went on for so long and why she allowed it to continue. Walker (1979) described a phase in the cycle of violence when a man would be apologetic, calm and offer promises of change. This would cause women to feel both relieved and confused.

Not uncommonly, women took responsibility for ensuring change occurred, as Samantha’s experience illustrates:

*I think I always knew there was some sort of theme and I would go, ‘ok well, it’s my responsibility to grow in this area, I’ve got to give a bit, ohh he’s just like that’ and I*
just kept compensating and making excuses all the time till I got as sick as him and as twisted as him. (Samantha)

Nina’s experience was similar:

I made excuses for him, thought that I had to ... if I loved him and wanted to be with him, I would have to just take it and live with that and what I needed or wanted wasn’t as important ... There was always this kind of fantasy of things are going to get better because I’m going do this, and we’re going do that, and we’ve talked about that and we’ve dealt with that. (Nina)

Early in the relationship, a woman may consider that by changing herself she can make things right. She believes in her capability to resolve the situation, hoping it will get better, while tolerating stress (Chang, 1996). Similarly, even though Adele felt disconnected from her husband, she was willing to give the relationship a go and made an effort to make it work. Some of my participants attended couples counselling, sometimes moving on to a second counsellor when the first one did not work out. They tried different approaches to identify the reasons behind the issues and to keep their relationship together. Most men on the other hand did not stay in counselling for long. According to Keys Young (1998) and Davis (2002) many of their participants sought help in dealing with the cause of abuse and attempted to stop it or salvage the relationship. Mahoney et al. (2001) pointed out that women place high values on their relationship and are dedicated to working through problems. Despite the violence, women cherish the relationship and care about their partners and, hence, try various strategies to avoid breaking up (Murray, 2008).

Normal, not as bad. Under half of the women indicated that they considered their partner’s behaviour to be normal, due to their personal family history or perceptions of intimate relationships. They came to believe that others around them had similar experiences and that it was just the way it was. In Tamara’s experience, her female friends had husbands who were also very critical of them. That made her think it was normal and it was something that happens behind closed doors. Emily began to think that she deserved to be treated the way she was and she could not just have ‘all good’ in the relationship. Women in other studies suggested that they may not seek support due to their acceptance that violence is normal, and a common form of interaction and a part of intimate relationships (Horrill & Berman, 2004; Petersen et al., 2004)

Grace said that she did not really know what her first relationship was supposed to be, because her parents had an estranged relationship. As a consequence, she blamed herself, thinking that she was doing the wrong things. Starting a new relationship and not having it to compare with anything else can be difficult for young women. Nicky describes this point:

At the start you think, ‘ohh, we’re just having a fight, fighting is normal’. You want to
fight, it’s normal to have an argument in your relationship … I had boyfriends before but I never had a serious relationship, so it was my first serious, serious relationship, so that probably has something to do with it as well, doesn’t it? You’ve got nothing to compare it to really. I had probably seen my Mum in a couple of definitely verbally abusive relationships, not physical, so some part of me probably thought it’s normal to yell and scream and say horrible things to each other. (Nicky)

Nicky thought her experience was not as bad and there were other women worse off. Her ex-boyfriend tried to normalise his behaviour through statements such as:

‘It’s not like I’m hitting you. It’s not like I’m smashing the crap out of you’. Or even when he did start to hit me, it was like ‘It’s not like I’m bashing your head against the table or something, like a slap here and there’, ‘It’s not like I’m the worst man in the world. I’m not one of those men, one of those women bashers’, or whatever, he would say that a lot, and I guess in a way you think, ‘hmmm, my God, I can deal with that’. (Nicky)

Similarly, the women in Chang’s (1996) study felt scared and confused, as they were told by their partners to stay in the relationship because they were not physically abused.

**Love.** Love can be a confusing and addictive feeling, even more so, when a person who is supposed to love, nurture and care for you is being abusive. Evans (1996, p. 38) said that the “abuser’s declarations of love are in direct contrast to the hurtful things he says”.

Given that individuals want to be loved, a woman is persuaded to believe her partner when he says ‘I love you’ (Evans, 1996). Around a quarter of the women in my study said that they did not see the abuse, or did not realise it was occurring, because of the feelings of love toward their partner and because they were told they were loved by their partners. Emily said that her ex-boyfriend declared his love for the first time five and a half months into the relationship and two weeks later the bad behaviours started. She said that “it was almost like he waited until he said ‘I love you’, and we were feeling more connected to one another, before it started coming out”. She knew early on that the relationship was not right and knew what she was in for about 15 months before getting out of the relationship. In a similar way, Sally’s ex-boyfriend declared his love, which she considered to be a very powerful statement, and a very important context as to why she let it go on for so long:

> I thought with this relationship, the abusive one, this is how it’s supposed to be. It’s supposed to be passionate and ‘I love you’, ‘I hate you’, because it was all that passion … I just think telling they love you is very powerful and you put up with almost anything, I reckon if someone’s telling you they love you ... you want to give them the benefit of the doubt. You want to have the relationship. (Sally)

Burke et al. (2001) provide an example of the pre-contemplation stage, or the period before the recognition, where a woman perceives abuse as love and believes that the abuser loves her. Similar reports were made by two women in their 20s:

> When I first got with him, it was probably very attractive to me, that he was soooo into
me at the start. It's a very grey area between somebody who's so in love with you, that they just want to be around you all the time, and somebody who's actually a little bit psycho and obsessive and controlling. For a whole year I think I just thought ‘ohh my God, my boyfriend, he loves me and we want to be around each other all the time’ and that’s just what love is. I do think we loved each other very much actually, but I think now, I am more aware of the fact that it’s not normal, that he wanted to know where I was 24 hours a day, but when you are young and excited, you think ‘ohh my God he loves me so much’. (Nicky)

Now with hindsight, well before our daughter came along, I was convinced that he was so controlling, because he loved me so desperately and that’s what he’d tell me as well … He admitted that he hit other girlfriends before, but it was largely in response to them cheating on him or something like that, whereas I never did any of that and I coped it just as bad, if not worse, and yeah he’d say ‘ohh, it’s because I’ve never felt like this about anyone before and you make me so angry because you mean so much to me, so when you stuff up it hurts more’ and so I firmly believed that, but now I know that there was never any love there, ever, ever, ever. (Violet)

According to Enander and Holmberg (2008), love is blinding and is connected to hope, which makes leaving at this stage seem unimaginable. In the study by Fanslow and Robinson (2010), a large number of women reported that a feeling of love towards their partner was their main reason for staying or returning.

Not me, can’t be. Three women indicated disbelief that they had ended up in an abusive relationship. They did not think they would let that happen to them or be “part of the statistics”. It is hard to believe for someone that they could be ‘one of those abused women’ (Queen et al., 2009). Tina explained:

I always used to think, it won’t happen to me. I’ll do this, I’ll do that, I’ll do the other, but until you’re in it, you don’t know what you’ll do. I was talking big, and yet I was in it, and I couldn’t act big … once you experience it, it’s difficult, it’s hard, you’ve seen fear like you’d never seen it before. (Tina)

Annabel expressed her disbelief:

You still don’t believe it’s happening to you. You don’t quite believe that this is actually your life, you are actually one of those abused women, you are a part of that statistic, because you’re going, no, no, [it will] never happen to me, no, no, I am strong. (Annabel)

Some women in Davis’s (2002) study indicated that they could not talk to anyone about the abuse because of the sense of shame in being identified as abused women.

Awareness – turning points

Turning points are incidents, circumstances or specific factors that can shift a woman’s perception of herself, or her situation, and consequently encourage her to consider change (Chang et al., 2010). Based on the information I gathered, I identified seven main themes of
awareness of EPA. Half of the women described aspects of awareness which related to realisation or loss of hope in the relationship, which was usually a gradual process. Other women experienced particular significant turning or trigger points. One of my participants said that her awareness is ongoing.

The occurrence of individual or a combination of turning points, epiphanies or realisations shifted and expanded women’s views of their situations, letting them see the relationship in a different light. It helped them start planning to leave their relationship. However, not all women left the relationship straight away. Besides the main categories discussed below, for some women, their trigger points related to their partner’s infidelity. One woman lived on a small island where everything was really open and any occurrence of derogatory behaviours was publically discussed by the community. This helped her notice how mean her ex-husband was to her. Nina said that her turning point was in having a parallel bullying experience at work from her boss and reading about bullying, which helped her make a connection to her relationship.

**Perspective and validation from formal and informal sources of support.** Over half of the women described that accessing advice from formal or informal sources of support were their trigger points. Seven women explained that they found different formal sources of support helpful in terms of recognising their situation, categorising the abuse, and understanding that it was not their fault and they deserved better. For example, Maria realised that her partner was subtly financially and emotionally manipulating her after she spoke with child protection services.

Simona had support from a complementary health worker. With their help, she learned that her ex-husband’s ways were wrong. She made a decision to leave, knowing that if she stayed, she would have a breakdown. Even though Sara felt that there were many signs that their relationship was unhealthy, it was not until she actually got information and documentation on EPA and the nature of power and control, and had conversations with women in support services, did she realise what was happening to her. Likewise, when Lisa filled in my questionnaire on behaviours, she said it was not until she saw similar information in print that she realised it was happening to her and she had a name given to her experience. Naming the abuse by professionals can be an important and helpful factor for some women. According to Pence and Das Dasgupta (2006) putting a name to an experience or an event is a powerful act. Women in a previous study indicated that they felt relief when their experience was named and their feeling of responsibility for the partner’s abusive behaviour was reduced (Bagshaw et al., 2000).

Information and support are important when they provide validation such as abuse is
not acceptable, abuse is real and something can be done about it. Professionals can help women by offering insight into the dynamics of the relationship, provide clarification, help them face the reality of their circumstances and evaluate long-term effects and its seriousness (Rothery, Tutty, & Weaver, 1999). Chang et al. (2010) described how interaction with healthcare providers changed their participants’ view of violence, themselves, and their relationship with the abuser. Women reported that they felt validated and began to recognise that they deserved better.

In my study, six women described how their informal support networks helped them perceive their situation as unhealthy, or made them think that they had become one of those people they used to question. Four women were in their 20s, while the other two were in their 30s. Some of these women watched their friends go through similar relationships or had been treated in a similar way:

*I had a friend going through a relationship very similar to mine and I think it was me watching them in that relationship and thinking that it was unhealthy and then realising that I was doing the exact same thing and then ... That was probably one of the main things, seeing it from an outside perspective, what it actually looked like ... ooh my God, I’m doing the same thing, and she’s got out of her relationship, that means I can too.* (Grace)

Other women discussed their experiences with informal networks who in turn described similar experiences or offered information on EPA. Sally’s mother told her there “*should be 99% happiness*”, when she described her relationship as mostly unhappy. For Abby, it was an appointment with a hairdresser that led her to speak out about some of the events that occurred. The hairdresser’s comments and suggestions encouraged Abby to discuss the situation with her ex-boyfriend and consequently break up with him. It was through her friends that she was able to name the abuse or see him as abusive:

*You almost need someone to verify that your feelings are valid to a certain point. It’s almost like you need someone to say it’s ok to call him a rapist, it’s ok to call him abusive ... It’s ok to do that.* (Abby)

Queen et al. (2009) stated that their participants defined themselves as abused women after gaining insight into their lived experiences through the evaluation of family and friends, or after exposure to abusive literature or television programs. Chang et al. (2010) found that information about their options and support from others helped women in their study to view their situation differently and contemplate change.

**Change in beliefs or loss of hope in the relationship.** Half of the women asserted that they did not experience a particular trigger point, but rather it was: a realisation that the relationship was wrong; that there was no respect for them or they did not share the same values; that there was loss of hope in the future of the relationship; or that their partner had no
ability to connect emotionally. For some of them it was a gradual development of awareness of abuse, especially after the end of the relationship. In order to describe this theme I present some examples women provided. Simona described how it dawned on her and how she grew stronger and began believing in herself:

More than 10 years of marriage and all the forms of therapy I could have done, I just went ‘ohh my God, it’s not me’. I came home and I literally said, ‘It’s not me’, and he said ‘I don’t know what fucking tram you are on, but I’m not with you’ and that’s when I went [snaps her fingers], right, you’re never going to change. This is who you are and I need to make that decision ... You need to start saying ‘hey, shit, it’s not me’, and that’s what finally woke me up. (Simona)

After Tina’s ex-husband begged for forgiveness once again, she said that she lost hope for the future and something inside her said: “If I didn’t get out now, there would be no third chance for me”. Part of her said this is what I will have to live with and another part of her was struggling to say: “It’s got to change, it’s got to be different. There has to be something different”. She realised that she was living in false hope and a lie. Several women described how they began thinking that there was something else possible for them and they did not have to live that way. For example, Violet, in her early 20s, said “as far as I know I’m only here once and this is what I’ve got. There’s got to be more than this. I wanted more from my life than this”. Similarly, Abby, who is of similar age to Violet, described thinking during the public incident with her ex-boyfriend, “Is this it for me? Is this all I’m going to have? I’m going to marry this guy and then that’s going to be it? It kind of induces a sense of panic. I was like, this can’t be it?” Change in beliefs and loss of hope that the partner was going to change or the relationship had any benefits for them were identified by some researchers as trigger points or a reason for why women leave their relationship (Bagshaw et al., 2000; Chang et al., 2010; Eisikovits et al., 1998; Patton, 2003).

Child(ren) related. A quarter of the women described concern for the safety and future of their unborn or existing child(ren) and children witnessing the abuse. This was a very emotional and personal event that made them realise the negative effects. It made their willingness to leave their partners stronger. Several researchers described that protecting others from the abuse and fear for children’s safety and their scars from witnessing abuse was often a turning point, or motivation for women to seek help or separate from their partner (Bagshaw et al., 2000; Campbell et al. 1998; Chang et al., 2010; Davis, 2002; Enander & Holmberg, 2008; Fanslow & Robinson, 2010; Haj-Yahia & Eldar-Avidan, 2001; Landenburger, 1998; Petersen et al., 2004; Smith, 2003).

Tamara described several events she experienced during and after pregnancy. She first noticed her ex-partner being dominating during her first pregnancy. During the second
pregnancy there was an event when he had a standover stance. Another time he punched her in the stomach and later he was physically violent against her, which caused her to have a bruised face, painful shoulder and sore back. During this event, her very young child stepped in between them to protect Tamara and seeing possibility of her child being hurt was an eye-opener. Afterwards she decided that she needed to get away from him for good. A similar story was told by Annabel:

> When he attacked me I was pregnant; because he was hurting my unborn child, then it sort of was a wake-up call ... He was emotionally abusing me so much in front of my kids. I think it was knowing that my kids are hearing this, my kids are going to grow up thinking that they could talk to their mother like this. I think it was that, that really got to me ... It was at that point that I knew, because of my children, otherwise I would have just brushed it off ... To see my kids, see their father act like that to me ... I think that was the worst, to see my kids and also see their fear and just feeling despair. (Annabel)

Rothery et al. (1999) said that perpetrators are well aware of the advantages of manipulation, by threatening to harm children. This form of behaviour often is a trigger that motivates women to leave an abusive relationship.

Violet was very protective of her unborn child. She wanted nothing to do with her husband, because she was scared of what kind of childhood their child would have, and how he would treat their child. More than anything, Violet wanted to give her child a good life, realising that the treatment she received was not good enough and she had to get out of the relationship. She said that when she fell pregnant, that was when she had the epiphany:

> I realised he’s never going to change. This is not good enough and I do not want to bring a child into the world in this marriage, and so it was pretty much ever since I fell pregnant that I made the decision that I was going to leave. I just didn’t know when. I wanted to wait for an opportunity to leave, because I had a vague idea of how the family court system worked and I didn’t want to get off for lack of a better word, prematurely because I hadn’t gone to the police about the things that he’s done previously ... I just thought, with the control that he has exerted over me, imagine what he’s going to be like sort of with his own flesh and blood ... and so I was just really terrified about that and it allowed me to step outside the situation ... If I hadn’t become a mum I probably would have stayed with him. (Violet)

For some women a turning point related to a partner’s lack of involvement, interaction and mistreatment of children. Maria on the other hand reassessed her situation when she realised that she did not want to have her son grow up to be like her partner.

**Physical and sexual violence.** Several women explained that the last straw for them was when the physical or sexual abuse started. Chang (1996) found out that her participants viewed physical abuse as a clear communication that their partners did not love them. For Lisa, it meant that her husband had no respect for her. While Sally, did not realise for a long time to what was happening, until he actually hit her. She indicated that if it had not been
physical, she would have probably stayed. Similarly, because of physical abuse, Emily got out of her relationship:

\textit{Finally, one day, he started throwing things at me across the room, and then two days later he started throwing things at me again, heavy objects, like full bottles of water ... and then he started pushing me against the wall, and then just, something really different, it was just like the straw that broke the camel’s back for me, and as much as I felt like a complete idiot, I just rang my mum, just said, ‘Mum, some stuff has gone wrong and I’m going to have to come home’.} (Emily)

Several researchers found that increased severity of abuse, actual injury, fear of being killed or a ‘matter of life and death’ were turning points for women, which helped them reassess their situation, seek help and leave the relationship (Chang, 1996; Chang et al., 2010; Enander & Holmberg, 2008; Fanslow & Robinson, 2010; Patton, 2003). Enander and Holmberg (2008) found a turning point which related to a ‘matter of life and death’. The change came for Tina when she decided she had had enough:

\textit{The final point for me was that if I had to die to be free, than I’m willing to make that sacrifice. The abuse, the mind games, the control, [it was] so bad, that I have made up my mind. If I had to die to be free I was willing to pay that price.} (Tina)

\textbf{Maturity.} This theme was mentioned by four women. They said they grew up and became more mature and this was what changed their awareness of the quality of their relationship. For example, Simona said that she was turning into a woman, and was no longer a vulnerable and insecure girl. Violet said that she hated to say this about herself, “\textit{but I was sort of young and naive enough to think that he loved me and needed me and I can fix him essentially, I can make him all better}”.

\textbf{Meeting someone else.} Nearly a quarter of the women spoke about meeting their current partners, which helped them realise how unhealthy their past relationships had been and how they were treated. For Elizabeth, the understanding came from her current boyfriend (then a friend) who was concerned about her. He tried to explain the situation she was in, made her realise how manipulative her ex-boyfriend was and challenged his behaviours. A new partner was one of the turning points discussed by women in Patton’s (2003) study, while Smith’s (2003) participants reported that meeting a non-abusive man helped them reconnect with others and recover from abuse. This is how Samantha described her experience:

\textit{It wasn’t until I met someone else and I started seeing the difference in behaviours. It’s not until you actually experience something close to what you believe in, that you actually get it, because I lost faith. I thought that it was just me, that I had these ideals, and that I was possibly just hopeful that one day this great relationship and idea of love existed ... It wasn’t until I met someone that went ‘no that’s not’ and someone who did buy flowers and someone who did all of a sudden make me feel different, the way that I was meant to be feeling ... I just met this selfless, giving, smiley, positive, sorted, good person, and then I would go home to my ex and go what}
the fuck? ... I’ve been with my new boy friend now for three years and he hasn’t changed. He’s actually the real deal, and actually a really good, loving, caring, supportive person ... but I think if I was on my own and hadn’t met him, I may have even repeated and found someone like my ex again, because I began to think it was normal. I had to actually meet someone new to teach me that it wasn’t normal and that’s the scary thing because if you don’t meet someone nice, what do you do? (Samantha)

Seeing the effects. Three women recalled how the recognition of unhealthy effects they were experiencing, such as crying, unhappiness, losing their hair and general physical un-wellness, helped them realise that their relationship was unhealthy.

Difficult leaving the relationship

Some women described different aspects that made it difficult for them to leave the relationship. Stalking and constant contact were big problems for two women. They found it difficult to get away from their partners and felt pressured to stay in the relationship. For example, Nicky said it took her probably four years to actually break off with him completely:

Because when I did, he would either stalk me really badly and be aggressive at my house or just come to my work ... to the point where I think I would give in a lot because it was easier to give in and easier to be with him and make him happy, rather than to cut off completely ... It’s easier to do what they want. It’s easier to do what the man wants, because otherwise you have to deal with them being psychos, or even if they are not physically violent, they are crazy. (Nicky)

Nicky said that connection to his family was another barrier to leaving. She described her concern for his mother and reluctance to leave her with him.

The decision to leave also related to fear of the partner and the consequences. For example, Tina was not able to make a move because she lived in fear of what her husband would do. In a different situation, Abby felt that she could not leave, because her ex-partner threatened to kill himself if she left. This situation made her feel guilty. Adele said that her husband imposed structures in their lives, which made it more difficult to leave the marriage.

For most of these women, leaving involved much planning and several attempts to separate before they finally left the relationship. During the planning stage, women visited local DV shelter or support service, saved money through sale of personal belonging, or asked for assistance. For example Violet went through a lot of planning before she decided on the way to leave her husband. On the day she planned to leave, she made an excuse to go for a walk with her child and never came back. She had to use a phone box to call a family member to pick her up, because she was afraid to use her mobile in case her plan did not work and he could check her call history. In fear of her ex-husband driving past or looking for her, she also had to think of places where she could be picked up. Violet concluded: “I just had to think of
all these ridiculous things to cover my bases”. Similarly, Fiona went through a planning stage:

Something clicked inside me and I thought what am I doing? And it took about eight months of planning how to get rid of him and get some help. I felt I couldn’t go to family and friends, because nobody knew what was going on. I’m sure my closest friend knew but I didn’t feel that I could talk to her really about it, so I got some outside help and packed his bags, left them out the front. I had the cops on hand if I needed them, but he thankfully went quietly. (Fiona)

Two of the women had to leave the country in order to finally separate from their partners. Abby ended up getting on a plane and leaving after their second separation, because she could not get away from his obsessive and erratic behaviour and stalking. Even though she was in a completely different country he was still harassing her via e-mails. As a result, she had to block him, change her phone number and e-mail address. On her return to Australia, she could not live at her parents’ house or in the area where she grew up because his behaviour commenced again, which was also supported by his friend’s harassment. Nicky also saw going overseas as her only option:

I remember the moment, where I broke it off for good and why I did that and everything, and it’s so dumb now that I think about it. I went overseas and I made up something about how I had to go and do this work overseas and that it was really important to me and he had to let me do that, that I would come back and have babies with him, if he let me do this thing … It was really hard to get him to say yes, but he did say yes in the end … The only way I could break-up with him was to leave the country. He would find me where ever I was, in Melbourne or Australia … he even tried to come over there a couple of times. He called me one day and was screaming at me about something, and I was so far away from him, on the other side of the world and suddenly I thought, I don’t have to put up with this and I just said ‘I am not putting up with this anymore’ and hung up on him and it was like, I felt this, it was like I was far enough away that he wasn’t going to hurt me … I had to be that physically removed from him to be able to. (Nicky)

According to Lutenbacher, Cohen, & Mitzel (2003) strategies to leave an abusive partner could be spontaneous, or could involve years of systematic planning, as the previous examples showed.

Post-relationship journey

Honesty, I feel like I’ve come out better. Don’t get me wrong, I still have my issues and I still have my moments, where I have to check myself and I say, ‘no, no, hang on, you are good enough and you are not stupid and you can do this’, and I’ve actually got to mentally talk myself through … I do feel a little bit awkward sometimes (Violet)

Towards the end of the interviews I asked 18 women (one woman had to leave early and another cut the interview short) about the things that helped them during or after the
relationship, what personal strengths they developed, or what had changed since they separated from their partners. They described their experiences as “horrible” and “devastating” including their current state of self-doubt, continuous negative physical or emotional effects, including when they have to speak about their experience or have any involvement with their ex-partners. Landenburger (1998) stated that the process of independence and self-belief may never be complete for some women. Smith (2003) supports this argument by saying that it is very difficult to recover from IPV.

However, there is also a healing phase. In this phase, women restructure their lives, and reaffirm and rebuild themselves. They begin to search for a new meaning in life and consider the things that will help them become stronger and gain balance. Women will try to make sense of their abusive past or relationship (Landenburger, 1998). Even though women in my study reported that their experiences were horrible, their experiences have influenced the decisions they make now and they managed to transcend these experiences into something positive. Besides the main five categories outlined in Table 9, women spoke about: starting or finishing a higher degree; a general feeling of increased happiness; a decrease in negative effects, such as difficulty sleeping or anxiety, and some of the physical effects like general poor health, skin-related issues and body aches and pains. Simona, in her 40s, said: “Today I am not that woman, I am a woman of strength”.

Table 9 Post-relationship journey

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<th>Post-relationship journey</th>
<th>Number of women</th>
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<td>Strength and confidence</td>
<td>15</td>
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<tr>
<td>More awareness, understanding and knowledge of abuse</td>
<td>13</td>
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<tr>
<td>(Re)discovering self</td>
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<td>Reconnecting with people</td>
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**Strength, confidence and freedom.** Three quarters of the women explained that they now feel much stronger, more confident, discerning and sure of themselves. Reaching a stronger sense of personal power was evident from women’s narratives in the DHS (2004) study, whereas improved self-confidence was described by Smith (2003) and Horrill and Berman (2004). Simona defined her current state:

> I’m very fortunate to have developed these experiences into strength ... I’ve made the choice to make this, I say this carefully, but a positive experience. I’ve chosen to no longer be a victim; I’ve chosen to be a voice. **(Simona)**

The support from formal and informal networks and personal resilience helped these women to: develop a stronger personality; become more assertive; be able to stand up for themself and not put up with bad behaviours; know what they want; and make decisions. For
example, Abby spoke about demanding respect and knowing exactly what is “ok” and what is not in a relationship. Getting over her experience gave her a sense of greater confidence and more self-respect. Similarly, Grace’s communication within her new relationship improved. She now initiates discussion of things she potentially finds inappropriate and she knows what she wants. Nicky said that she is sensitive and quite defensive towards behaviours because she learnt that she does not want to be in that situation again. Besides inner strength, Adele felt more balanced in herself than she did before. Violet described her strength:

I think I’m essentially the same person that I was beforehand, except I’m a lot more organised. I’m a lot more focused. I’m a lot more goal-driven now, like I want a lot more for myself and I want a lot more from my life because ... I feel so cliché saying this, but I just really don’t take anything for granted anymore because I know how shit my life was before. (Violet)

Lisa described that strength “comes in the leaving ... at that time when the house is packed up and you walk out that door”. Horrill and Berman (2004) identified that the sense of women’s own strength was an essential factor in staying out of an abusive relationship.

**More awareness, understanding or knowledge of abuse.** Nearly three quarters of the women said they now have increased awareness of what abuse in intimate relationships is. Where is when you are in a relationship it is cloudy according to Nicky, who said that “They do so much to cloud your head, and make you think it’s your own fault”. Annabel said that:

through the counselling, I’ve gained the ability to understand why I’ve got myself involved with someone who was abusive to me, why I stayed. It got me to understand that and also to identify what the abuse was, because I didn’t understand it, and I think that might be it, we don’t understand it. (Annabel)

Most participants in the study by Queens et al. (2009) did not perceive themselves as emotionally abused until after the relationship had ended. Removing herself from the relationship helped Simona understand EPA. She pointed out that the mental abuse she endured was the big part of why she did not understand it whilst in the relationship. A quarter of the women indicated that they became more aware of abuse and perceived the behaviours as abusive after separation and after being removed from the day-to-day behaviours. These women were able to look back and reflect on their experiences and their partner’s behaviours. Abby said that she never called her ex-boyfriend abusive until a year later after separation. Educating herself and reading about DV helped Sue to gain a better understanding of EPA after separation. Increased knowledge helped women in Petersen et al’s (2004) study understand that their experience was IPV and that it was wrong.

A quarter of the women said that they look out for and pick up the signs and patterns of men’s behaviours. Some said they are wary of future bad behaviours in a relationship. They
concluded that they became better in dealing with and responding to EPA and are hopeful that they would be able to stop the situation before it would escalate.

Other women spoke about their increased understanding of abuse in other relationships. They gained increased awareness of the struggles other women go through, and were sympathetic to women who also found themselves in this situation. For instance, Nicky said:

*I do think I naively looked at other women in abusive situations and thought I would never be like that and why you wouldn’t just leave; and now I can see that it’s much more complicated than anyone can ever imagine and people need their own time to leave relationships or understand there’s another way. I think I know more now, how damaging it is in the moment and also ongoing, even when you are not in that situation anymore. I think the insight I now have into other women, and in my work: I don’t judge women who come in here, and are being totally abused by their partners, and I try and help them in every way I can, but I’m not going to judge them for not leaving, because I fucking didn’t.* (Nicky)

*(Re)discovering self.* This theme combines various aspects that half of the women described about themselves during interview. It was largely concerned with personal strengths and the autonomy they have gained. I borrowed the term of this theme from Horrell and Berman (2004) because, similar to my participants, their participants reflected on past selves and described who they had become after separation. This was an important aspect for them in staying out of violent relationships. Reclaiming freedom, recognising choices and engaging in possibilities were the positive aspects described by women in the DHS (2004) study. All women in Smith’s (2003) study indicated that regaining freedom was liberating for them. Similarly, my participants expressed that they gained freedom and independence after separating from their partners.

Women explained that they now had freedom to do things they wanted to do, but were not previously allowed to do, speak freely or be themselves. Feelings of and actual freedom allowed one woman to see new possibilities in her life, while it gave another woman time to find herself. Women also described having freedom of personal choice, such as: choosing their own clothing; wearing make-up again; spending their own money; interacting with anyone they wanted to; inviting people home or visiting friends; or spending time with their child(ren). Due to previous demands or prohibitions from their partners, they could not do these things in the past. For example, Sally said “I am my own person” and she does what she wants now, makes her own decisions and believes she cannot be told what to wear, where to go or who to see.

Personal freedom also related to not having to rely on anybody else. Becoming self-reliant was one of the sub-categories of the ‘healing, growth and independence’ theme.
reported in Smith’s (2003) research. One of my participants said that she could breathe and relax now, and not look over her shoulder or watch the clock. Emily mentioned working on personal and career development and doing her own preferred activities. During interview she said that she craves a lot more “me time” than she has ever did, because she previously was surrounded by people and spent too much time with her partner. More self-respect was evident in Annabel’s story, who said she learned to love herself and to see herself as a worthy person. These factors were playing a big role in her decision to avoid going for someone who would be abusive towards her. She wanted more for her life and her children. Tamara, on the other hand, became sociable once again and went back to performing activities she loved. Rediscovering oneself for women meant learning to stand on their own two feet. Similarly, finding oneself was an aspect that allowed women to rediscover their interests, perceive new possibilities in life, and become independent in Horrill and Berman’s (2004) study.

My participants also described more personal factors such as feeling happier, younger and/or looking after themselves. Similar to the findings in Horrill and Berman (2004), one of the women in my study mentioned reaching a desired weight. Simona disclosed that she now feels sexy as a woman and has regained her identity, which was important to her. A similar but unique feeling was described by Annabel:

*It’s only now that my joy of life has come back and I investigate stuff. I am looking forward to things and I joined social groups, and so I am a different person. I am happier. I’ve lost weight, and I’m starting to dress up as a girl, like skirts or dresses. I wouldn’t do that before, look after myself, go to a beautician. So, I spend more time on me, because I understand the importance of that ... I feel more alive now, than I [have] ever done through my marriage and more free ... I’m looking forward to life, to socialise and go out. So that’s long term, I feel so positive and I feel positive for my children as well. I feel that it’s been an awful experience for them, but in the long term, we are setting ourselves up.* (Annabel)

I discovered similar findings in the DHS (2004) study, where women spoke about being ready and having the courage to move forward.

Several women mentioned that they either have an interest or are currently raising awareness of intimate partner violence, particularly EPA, by either sharing their own story with other women or participating in campaigns to raise awareness, by public speaking or by voicing their experiences. For some of these women, participating in this research and sharing their story was a good opportunity to make a contribution and help other women. Tamara’s and Simona’s quotes outline this concept well:

*I’ve since joined a single parents’ groups and am expanding my social network. I’m willing to do things like this [participate in research] and actually talk about my experiences to help others ultimately and not focus on that as being part of me. It is part of me because it is my past, but it’s not who I am.* (Tamara)
One example today is, I will become as much as I can be involved with organisations, research, people that really want more awareness about what it means, I’ve given talks at an International Women’s Day event. I’ve joined the White Ribbon Day campaign in my own municipality … all those therapies, all that yoga, all that research, all that study, all that singing … but I’ve been fortunate to have had that; not every woman has that same fortune, so, that’s why, it’s my responsibility as one of those women that had that fortune to bring awareness, and so my passion has become to bring awareness about abusive men and what they do to women. So my contribution is, when I see something like this (referring to my research participation) I take part in it, and I’ve made a choice to write my story, and however long that takes, but that’s something that I owe back [sic] to other women. (Simona)

Like these women, Tina also participated in several campaigns in the media and magazine and had done various talks at various groups about her experience. Smith (2003) said that finding purpose in life, such as helping others, was a healing process for some of her participants. Evans (2007) found a strong theme relating to women willing to support others by turning their experience of abuse into expertise. These women voluntarily worked within fields related to DV, assisted others, or were open about their abuse within an educational setting.

**Reconnecting with people.** Three women highlighted how they socially reconnected with people. Annabel explained:

> I can allow people in my home. When he was in my house, I couldn’t allow anyone in my home, because I was always worried how he would react. I now talk to my neighbours … I’m talking to all the neighbours in the street … It’s like I can interact with people now. (Annabel)

Horrill and Berman (2004) found that ‘sustaining relationships’ and reconnecting with friends and family was important for most of their participants in their efforts to remain free from violent relationships. Previous loss of these networks and isolation was something that they did not want to experience again.

**Letting go.** Two of my participants described aspects of letting go. Smith (2003) found that letting go of the past was one of the factors that helped women to heal:

> … gotten rid of the anger, I really think it’s important, women need to be guided through releasing the anger, so that they understand, the actual implications of that abuse, I think that’s vital and I’ve chosen not to be angry because, I was just destroying myself, and I was actually being him (Simona)

Annabel spoke about putting aside revenge and learning how to deal with her partner:

> I’ve also learned how to deal with my ex-partner. I’ve learned how to push my revenge aside, which is massive with him, and how to push my anger and my resentment and my fear, that was big too, because I had lots of fear with him, and I just know how to deal with him now, contain him. (Annabel)
Conclusion

Before awareness, there is a stage of non-realisation, or a lack of understanding of abuse. Victims of EPA rarely recognise this form of abuse and many do not perceive themselves as abused. Similar to other reports in the literature, over half of the women in my study said they did not realise that they were abused, or what they were experiencing was considered to be abusive. This indicates how insidious, subtle and hidden EPA can be. A small number of women described experiencing a feeling of wrongness, but did not know what it was, or how they should have responded. Embarrassment and self-blame for their partner’s behaviour, including lack of understanding and awareness by others, was also perceived as a barrier to recognising abuse. The second main reason for their difficulty acknowledging abuse related to women’s hope that their situation would improve or that they would be able to change it. Within this theme women discussed how they made excuses for their partners, gave them second chances because of the apologies and promises, tried to change and modify themselves or felt responsible for the relationship. Some women attempted couples counselling, but usually without success. Seven women described their perception of the situation or their partner’s behaviour as normal or not so bad.

All women described experiencing a combination of turning points or epiphanies that made them aware and enabled them to identify the relationship as unhealthy, unacceptable and abusive. The most frequently mentioned turning points referred to gaining perspectives and validation from formal and informal sources of support. Women disclosed that formal sources of support helped them to understand their situation. These services also helped women to acknowledge that they deserved better. For other women, it was speaking to or seeing friends or family and those people with similar experiences. The second biggest turning point described by half of the women related to loss of hope in the relationship. This theme described women’s desire for a better life or that they simply became fed up with their partner’s behaviour and excuses. Some of these women described how this awareness was gradual for them. The third most common trigger point related to fear and concern for their unborn and existing children, their wellbeing and other negative effects if they stayed in the relationship. Concern for children was the strongest factor in women’s willingness to leave their partner.

This research project aimed to explore women’s lived experiences of EPA including its effects. It was important to ask women about positive aspects in their lives or what they have achieved since the abusive relationships ended. Doing this in interview helped them to move away from the previous conversation of negative experiences and highlighted their successes. All of the women took pride in speaking about their progress and achievements.
Three quarters of the women spoke about their increased personal strength and confidence. They were more discerning and sure of themselves. These positive changes helped them to be more assertive, gave them the ability and confidence to stand up for themselves, demand respect, know exactly what they wanted and make decisions.

Just over half of the women reported more awareness of different forms of abuse in intimate relationships. Their experience of MIPV, with the support of various networks, helped them to comprehend violence at a deeper level. This knowledge gave them hope that they would be able to detect and respond to the situation before it escalated in future relationships. Some also spoke about their wariness of such behaviour in future relationships. They flagged caution in not falling into the same trap again. These women looked for signs and patterns that may occur in a man’s behaviour. They now set standards for healthy relationships. This knowledge helped them to be more understanding towards other women who are or have been in abusive relationships. They feel more empathy for them and have the courage to offer support or advice.

This suggests that confidence, independence and healthy self-esteem help women to stand up for themselves and not put up with behaviours they think are unacceptable. But educating women about MIPV (at pre or post violence), its specific types of abuse, behaviours and signs is not enough. I recognised abuse in my relationship but was not assertive for many reasons. I also brushed off a lot of behaviours and had low expectations of my partner and our relationship. Similar issues seemed to have been an issue for women in my study. Even when they recognised abuse—if they were still in the relationship—they did not have the skills or strength to do anything about it until it got much worse. Hence, my suggestion is to educate women, focusing on their personal growth including confidence, independence, assertiveness and empowerment. Besides educating and raising women’s awareness on all the above aspects, we also need to educate boys and men about different forms of abuse, how wrong it is, and teach them respect towards women. This is what Simona said:

Girls need to be made aware that’s it’s not ok. At the same time though I say, boys, that age need to be made aware. That it’s not ok to treat the women that way. It’s got to go hand in hand. We’ve got to stop saying ‘girls need this’ [snaps her fingers], ‘women need to do that’ ... I know that what I lived is abuse. I know its mental impact on me and physical and emotional and all of that, but the perpetrator, no one standing there telling him, and he thinks [snaps her fingers] ‘it’s ok and he’ll continue to do it, so he’ll continue to do it to the next woman. It’s ok that I’m informed, but what about the perpetrator? (Simona)

Domestic violence awareness education needs to commence before the intimate relationship starts to develop. Schools are a good setting for early prevention programs (Lutenbacher et
al., 2003) since they are the major locations where “children and young adults build their gendered identities and a sense of being in the world” (Powell, 2010, p. 127).

In the next chapter I examine the support and responses women received from formal and informal sources of support. I discuss helpful and unhelpful responses women described. I also point out women’s resilience and personal resources they drew on to deal with their relationship or post-relationship experience.
Chapter 7

Support for and responses to emotional and psychological abuse

Many women who experience MIPV seek formal and informal forms of support to help deal with the effects of the abuse or as a way to ensure their safety (Shannon et. al., 2006). Informal sources of support are family members, friends and neighbours or other community members. Formal support networks are organisations and services including: police; healthcare providers; psychologists; women’s refuges; legal services; clergy, community groups; and many more. These networks can play an important role in women’s lives. They can reduce social isolation, influence women’s behaviour and wellbeing, help them become safe and free from violence and with recovery from abuse (Bosch & Bergen, 2006). Horrill and Berman (2004) argue that reconnecting with friends and family members and sustaining these networks were essential for nearly all of their participants in remaining free from violence.

In this chapter I will describe my participants’ experiences in approaching formal and informal forms of support. Under each of the support networks I will describe women’s helpful and unhelpful experiences. Mostly women spoke about whom they found helpful, rather than what type of help and support they received or experienced. Accordingly, I will name the professionals and people these women referred to. With these experiences I aim to identify the gaps, and show what responses and types of support my participants found most and least helpful. This information can be of use to formal sources of support for the ongoing education and more supportive responses. Similarly, informal sources of support may also gain a better understanding and become more aware of how they may need to respond to women experiencing MIPV.

While external sources of support (formal and informal) were important for emotional and practical support, validation and education of women in my study, they also drew on their own resources. Consequently, I will describe these factors and the suggestions my participants made for other women.

Women’s personal resources and resilience

Besides receiving support from formal and informal networks, most women reported other factors they found helpful in dealing with their relationship or post-relationship experiences. In other words, it was their own agency (in conjunction with resilience) that got them through.
For a quarter of these women, this included external activities such as physical exercise, yoga, meditation, work and study. Tamara summarised this theme as:

... having something other than what was going on with me, to focus on. It gave me a reason to keep moving on, to not fall and sink down into full-on depression, because I had something else to live for. (Tamara)

A quarter of the women discussed their use of other resources. Some mentioned reading books, gathering information and educating themselves about EPA. Smith (2003) said that reading and journaling were helpful in the recovery process, while DHS (2004) reported that learning helped women in their study to identify the process of abuse and to document their suffering. These activities helped women in another study to comprehend their situation and make changes (Bagshaw et al., 2000). Other women in my study said that spending time on their own was helpful.

Other helpful aspects women described related to their: religious faith and spiritual practice; leaving the country and having a forced time away from their ex-partners; having less contact with the ex-partner; and spending time with their children. Similar to Smith’s (2003) findings, my participants reported that meeting a new partner was helpful. Shannon et al. (2006) referred to their participants using strategies such as: participating in activities with their children; exercising or meditating; and religion to deal with their experiences.

Several women found it very helpful to give something back to others, as I noted in the previous chapter. For example they participated in community education campaigns or sheared their experiences with others. Lutenbacher et al. (2003) identified a ‘survivor advocacy’ theme in their study. Many of their participants had a compelling desire to help others, to care for other victims and to prevent other women experiencing what they had experienced.

**Suggestions to other women**

In this section I discuss my participants’ suggestions to other women who are still experiencing or have experienced EPA in intimate relationships. Half of these women suggested that it was important to be surrounded with good support and appropriate counselling. Women suggested using every avenue, whether it was friends or professionals, to get help because different things work for different people. These support networks need to be trustworthy, safe and validating. Women need to put themselves and children first and get involved in whatever social networks they can find, which could support and help them throughout their relationship and beyond.
Some found it helpful to talk to other women who have been in a similar situation. Grace said that telling people about her experience helped, while Fiona suggested:

*Talk to as many people as you can. Just tell your family, tell your friends. Keep telling people [giggles]. That’s one mistake that I think I made was keeping it to yourself, and that’s what they [partners] want you to do. They want to isolate you. You just got to tell people.* (Fiona)

Almost half of my participants spoke about the need for women to build confidence, self-esteem and assertiveness about personal rights in order to gain the ability to stand up and say: “you cannot do that, what you are doing is wrong”. Emily said that a woman who does not have clearly defined relationship standards, and does not perceive herself as someone deserving to be treated with a certain amount of respect, will be in a very vulnerable position when she commences a new relationship:

*If you are not strong enough and if you don’t have a high enough opinion of yourself and how you should be treated, you’re leaving yourself right open to be mistreated, and it’s definitely harder once you in it and attached, to break away.* (Emily)

Murphy and Smith (2010) suggest that relationship abuse prevention programs targeting youth need to develop an approach that helps both girls and boys to attain more assertive responses to the early warning signs of intimate relationship abuse. It is also important to help young people to recognise behavioural warning signs of abuse.

While acknowledging how difficult this could be, a third of my participants suggested preventing abusive behaviour early, by breaking away from their violent partners and leaving them. One woman advised that women need to get out, as it would be a safe thing to do for oneself and for the children, for personal sanity and wellbeing. Some women emphasised leaving sooner than later. As Rachel pointed out, “*the longer you go with that behaviour, the more you find it accepting and OK*”. Violet, who is a mother in her 20s, said that if a woman believes it is in her best interests to leave, either physically, spiritually or emotionally, she needs to go. Several women suggested that if a woman decided to leave, she would need to stay away and stick with her decision, with support if required. Similarly, Tina drew attention to the process of leaving:

*If you’ve been with them one year, two years, three years, and you don’t see any change, what makes you think it’s going to happen now? And when you get out, stay out. Don’t believe the lies. If they come back with tears, don’t believe the tears, because you cry and they don’t feel your tears. If they come back with roses, if they come back with being sweet and nice, that’s another trick to get you back. Once they’ve got you back, they’re going to go straight back to where you came from. Whatever they do afterwards, it’s all a lie, and most of the time, we’re living our lives in false hope … nothing will change, nothing will ever get better … I’m not saying that they can’t change or won’t change, but if you’ve given them one chance, even if you’ve given them a second chance, how many chances are you going to give them? …*
Domestic violence will take you down the road you don’t want, you don’t deserve and don’t expect. (Tina)

Formal sources of support and their responses to the women

All women contacted one or more formal sources of support. They wanted to receive information on abuse and understand their experiences, receive validation and acknowledgment, deal with the effects, or ensure their experience was not, or would not, affect their mothering skills or relationship with their child(ren). This section outlines their experiences of helpful and unhelpful support and responses (see Table 10). The following quote is from the mother of a teenage girl, who described why she joined support groups:

For a long time, I didn’t think that I needed any help, because I could deal with it myself, but then, just slowly over time, I’ve realised that I wasn’t coping, so instead of seeking a therapist, I didn’t think that was a right thing to do, I booked myself into different support groups ... over the years that just lead me on to different support groups. (Fiona)

Some women tried a combination of support sources, either because of a referral, bad experiences or wanting to try different options. For example, Elizabeth started seeing a psychologist because her GP identified that she scored highly on anxiety levels and moderately on depression. Some women came across their support services through their partner’s behaviour change programs (which, according to the women, their partner usually did not go through with).

<table>
<thead>
<tr>
<th>Helpful support</th>
<th>Number of women</th>
<th>Unhelpful support</th>
<th>Number of women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional support</td>
<td>15</td>
<td>Lack of or poor, unhelpful, inappropriate response, advice or support</td>
<td>14</td>
</tr>
<tr>
<td>Practical support</td>
<td>10</td>
<td>Lack of empathy, sympathy or understanding, and disbelief</td>
<td>9</td>
</tr>
<tr>
<td>Education and awareness</td>
<td>7</td>
<td>Location of services and access</td>
<td>5</td>
</tr>
<tr>
<td>Referral</td>
<td>6</td>
<td>Not recognising the abuse</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Poor or no referral</td>
<td>3</td>
</tr>
</tbody>
</table>

Helpful responses

Keys Young (1998) found that women experienced sensitivity, understanding and considerable support from formal services. Non-judgemental support from professionals was a most positive response, while validation of their situation was an important factor in women’s initial help-seeking efforts. Women valued the provision of information, practical support, referrals, help with making decisions and taking actions that would help them deal with the situation. Other things their participants mentioned included services, and professionals showing patience and
determination to identify their problem and encouragement to speak about the problem. This consequently helped women decide on their next steps in dealing with abuse (Keys Young, 1998).

Most of my participants (19) described positive experiences with formal support networks and identified the type of support that was helpful (Table 10). The sources of support women found most helpful were: counselling services in general (10); psychologists or psychotherapists (9); general practitioners (5); and other types of support (e.g. group and phone line support, legal services, solicitors, police, parenting classes and mothers’ groups, shelters and alternative medicine such as acupuncture or Chinese doctors) (9). This is not dissimilar to other studies where the professional services women considered to be most helpful were: crisis counsellors; social workers; psychologists; clergy; psychiatrists; lawyers (Hamilton & Coates, 1993); and legal services and legal staff and drug/alcohol programs (Shannon et al., 2006).

**Emotional support.** Around three quarters of the women received emotional support from formal networks. Support provided by a maternal health service was described by Annabel:

> I went for help for my kids from [services name], their health unit. From there I’ve learned that there was a workshop for my toddler and me [name of the workshop] and it was reeeaaallllly good ... the [name of the workshop] really helped me, because I didn’t have a bond with my children. They teach you how to bond and I didn’t know how to play. So I learned how to play, I’ve learned how to see my child. I also learned that, even though he was three, he had experienced it as well ... They understand as well, they can feel your pain. (Annabel)

Emotional support from the mothers’ group, kinder community and the local primary school was a big social support network for Sue. It was a source of normality, routine, stability and gave her and her kids a sense of belonging.

Emotional support comes in a form of encouragement, guidance or affirmation (Liang et al., 2005), listening or providing advice (Keys Young, 1998). For example, Emily working with her psychologist looked at what was acceptable and unacceptable in the relationship. This professional pointed out that it was not her job to tell Emily what to do and what not to do, but rather explained the possibility of experiencing the same treatment, if she returned to her boyfriend. In addition, she encouraged Emily to have some time alone and rediscover herself. Gordon (1998) reported that women found counsellors, who provided encouragement and support, to be most helpful.

Women in my study described several aspects of support. Professional services helped them to learn assertiveness, coping techniques and taught them how to communicate with their partners. Women were taught how to understand their emotions, rather than suppress or push them onto others, how to look after themselves, how to move forward and go through
their experience, and how not to become a candidate for falling into a similar trap with someone else in future. Support networks also helped women improve their mothering skills, encouraged healthy behavioural patterns and how to be open to new relationships. These professionals listened to women, provided them with relevant information and helpful tactics, such as, how to work with their negative emotions, how to put personal boundaries, and how to be able to stand up to the partner’s behaviours and not give into him. The following examples reflect some of these aspects.

Specialised workers at the police station gave Sara some advice about court proceedings, and what she might need to say. With the support of counselling and a psychologist, she became to feel stronger, more discerning and resilient. Emotional support from the counsellor created a safe place for Annabel to express her anger. Lisa’s counsellor informed and reassured her that the decisions she made were her decisions and the key question she gave her was: “Is what I am doing, helping me? and after you mull over that for little while, hmmm – it’s not helping me, and that’s when I decided to go”. A different approach was taken by Grace’s counsellor who helped her leave the relationship and deal with separation:

*I was 17 and it was about three months before I broke up with him and going to the counselling actually helped me to be able to break-up with him. She was very visual, so she had a white board and I would draw a lot of things on there like lists and stuff like that, and that helped me because it kind of put it in a way that I could look at and see, so she was really good … and then had counselling as well after I’ve broken up with him, which was good, because then she helped me deal with, like the after effects of separation, because he was, like obviously we went to school together, so I had to see him ever day. There’s always internet stuff like e-mail, phone messaging and he used to follow me home and stuff like that, so she was able to help me with that too.*

(Grace)

Half of the women said that it was important for them to be acknowledged, validated, understood, believed, not judged and taken seriously. Sue said that it made her feel less alienated, while for Samantha it provided credibility. Women indicated that they have received this form of support from their general practitioners, police, counsellors, psychologists, phone support lines and support groups. Keys Young (1998) showed that non-judgmental support from professionals was considered by women as the most positive response. Annabel saw a counsellor:

*who actually understood everything, understood where I was in my journey ... for me it was my salvation because I found somebody who actually understood what abuse was and what was actually happening, where I couldn’t understand.*

(Annabel)

Adele had a positive experience with a magistrate who had looked at the things her husband had been doing and could see exactly what was going on. Factors such as being taken
seriously and believed were reported to be helpful by women in previous studies (Bosch & Bergen, 2006; Hamilton & Coates, 1993; Keys Young, 1998). Similarly, Feder et al. (2006) highlighted that women value confirmation that their experience of violence was undeserved and unacceptable. Women wanted the health professionals to contest their false beliefs about abuse (e.g. self-blame).

**Practical support.** As well as emotional support, practical support was also very important. Practical support included: support services taking action to ensure their safety; ringing solicitors on their behalf; and subsidising their legal support. Providing assistance to access transitional housing and helping them move were other practical ways women were supported. Furthermore, women were helped to get counselling, were provided with useful documentation relating to courts and intervention orders and were accompanied to court. Similar practical support was reported in previous research (Bosch & Bergen, 2006; Keys Young, 1998; Liang et al., 2005).

Rachel said that her psychologist looked up information for her and helped her prepare for custody matters, while a welfare service helped Sue to write letters to the court. When Emily’s situation reached boiling point and she struggled with her studies, her GP spoke with the university staff and rearranged her exam times. Due to trauma and ill-health, Sara had a mental health plan facilitated by her doctor, so she could have ongoing support from a psychologist. A women’s refuge helped Tamara get a violence restraining order, change the locks on her house, and supported her get over the initial shock of leaving.

Some women described having access to ongoing support if they needed it, which was mainly counselling services. Women in other studies reported a great sense of comfort and reassurance, knowing that help was available from agencies, should they require future support (Horrill & Berman, 2004; Smith, 2003). This was found to be helpful in enabling women to remain outside abusive relationships (Horrill & Berman, 2004).

Tamara explained that the lack of support was the best support the services could have given her:

*First and foremost they said to me ‘Are we going to help you to leave for good or are we just going to help you until you forget about it and go back to him anyway?’ So they were really quite adamant with that. They weren’t going to help if I was just planning on returning … So the guilt combined with ‘are we just going to help you get over your injuries until you go back’ was probably what made me go through the whole process. (Tamara)*

In contrast, women in another study experienced judgmental viewpoints from refuge staff, which encouraged them to consider returning to their partners (Bagshaw et al., 2000).

**Education and awareness of violence.** With the help of formal support, under half of
the women became more aware and educated on the nature and different forms of MIPV, including power and control in the relationship. They learned what was acceptable and unacceptable in relationships, and began to understand that it was not their fault, and that they deserved better. For example, with the help of couples counselling Tamara said “that sort of opened my eyes up, that I was better than what I was getting, that I did deserve more”.

Counselling services also helped Annabel gain the insight to understand why she got involved with someone who was abusing her and why she stayed. These services also helped her understand and identify abuse. She began to want more for herself and her children. With the support of a welfare service, Sara found the words to describe what was happening to her:

... and to really realise that was family violence ... I’m just really grateful for those services, they’re absolutely vital ... I had one of the community health workers who was able to give me documents about how to detect FV, or people who are prone to abusive behaviours. So within four weeks of meeting someone, you should be able to work out, do they tick all these boxes and you can know within four weeks if you should step out of this relationship before you get in too deep, and that was invaluable from here on in. (Sara)

**Referral.** A quarter of the women described referrals to specialists or other services as a helpful form of support. Referrals were made by GPs, phone support lines and services such as the Women’s Information and Referral Exchange (WIRE). Likewise, in other studies, referrals and ‘directions to someone who did help’ was one of the responses women found most helpful and beneficial (Bagshaw et al., 2000; Hamilton & Coates’s, 1993; Keys Young, 1998). According to Seeley and Plunkett (2002), providing information to women and referrals to emergency housing, DV services and legal programs are two aspects of standards for counselling practice. They argue that counsellors frequently need to support women in accessing services and information that increases their options. This helps to address women’s practical constraints. Rosenberg and Fenley (1991) pointed out that early identification, effective referral, ongoing support and follow-up, and supportive education of abused women at care sites could eventually decrease the prevalence of abusive injury. In general, my findings on helpfulness of formal sources of support are consistent with previous research.

**Unhelpful responses**

Seventeen women described their negative experiences with formal sources of support (Table 10). Several of them mentioned how hard it was to find good support and it often depended on the person who was providing it. The networks women referred to as least helpful were not dissimilar to those who others considered to be most helpful: counselling services in general (9); psychologists or psychotherapists (9); and other support such as: general practitioners; phone line support; maternal health nurses; mothers’ groups; clergy; and police (5). Similar
findings were reported by Hamilton and Coates (1993) who found that those least helpful were: physicians; nurses; employment counsellors; addiction counsellors; police officers; and financial counsellors. Whereas Shannon et al. (2006) found that it was: medical personnel; support groups; crises lines; clergy/church; women’s shelters; and marriage counsellors.

Some of the narratives in my study indicated a lack of knowledge among women about formal services. For example, one woman contacted Lifeline but was afraid to speak to them about her issues because of the fear of the conversation being recorded and possibly used against her in legal procedures. Whereas Abby felt like she could not speak to a DV service or support groups, because she had not contacted police and did not consider herself to be a woman with broken bones. She felt that her experience was not as serious as other forms of MIPV and that she would be out of place if she contacted these services. Fanslow and Robinson (2010) found that the main reasons their participants did not seek help from formal sources of support was because they perceived the violence they experienced to be normal, or not as serious. Women in an earlier study reported a need for improved promotion of DV services and information addressing their fears about help seeking and leaving the abusive partner (Keys Young, 1998).

**Lack of or poor, unhelpful or inappropriate responses, advice or support.** Most of the 17 woman who discussed unhelpful responses, indicated that formal support networks provided inappropriate responses, unhelpful or discouraging suggestions, or chose a poor or unsuitable approach to deal with their issues. It was evident from the narratives of my participants that it was important to identify their needs and the pace of recovery before proceeding to support or while supporting them. It seemed like some professionals were following their own approach without asking women about how or what it was they wanted to deal with, and they seemed to take on an impersonal approach to problem solving. Samantha recalled her psychologist wanting to address her upbringing and relationship with parents rather than analyse and help her with relationship issues, which she was more prepared to work on. This made her feel as if the psychologist did not have enough confidence in her:

_I knew what the issue was ... I knew the issue was him [chuckle], but they seem to go – ‘ohh well something happened in you childhood and that’s why you are making these decisions’, and it wasn’t like focused work. It was too broad and I got very little out of it ... I said, ‘look, I’ve got a problem with him, is it right or wrong? I’m lost’, but no one was really analysing the relationship with me and I didn’t get told what was right or wrong in a relationship, so the lines get blurred and you forget what is right and wrong. (Samantha)_

Lisa found her self in a similar situation. She approached a male counsellor thinking that she would get an objective male view, but instead:
and all he wanted to do is get back at my ex. I said that’s not what I want, I’m not a vindictive person. I don’t hate that man. I feel sorry for him. I don’t want to have this retribution happening, so I didn’t go back to him. (Lisa)

Liang et al. (2005) suggested that both informal and formal networks work with abused women to deal with their issues as they define them, rather than how professionals define them. Seeley and Plunkett (2002) pointed out that women can benefit from the type of counselling that increases their sense of control and entitlement to their own feelings, perceptions and thoughts, and encourages them to set their own pace of change and make informed choices. The Domestic Violence Prevention Unit (2000) outlined essential principles of working with victims/survivors. One of the principles related to empowerment of women, that is, “that the responsibility for decisions for action remains with the client and not the worker” (p. 19).

Some women also revealed that when they described their experiences to formal networks they were not told whether their relationship was good or bad, or whether their partner’s behaviour was right or wrong. Women wanted guidance and to know what was acceptable or whether they should act on it. They also wanted to hear something they had not already thought of and was not condescending. For example, Maria experienced patronising comments from the phone counselling staff. She said “they would be saying dumb things like – ‘ohh, you can’t change him’. Really patronising, simplistic, reductive, shut you up kind of thing, in the first half an hour of the conversation, and it’s like jeepers creepers, this is not helpful. I can work this much out for myself”. Women in Dienemann et al’s (2005) study reported how professionals did not understand their needs and did not ask what (issues) they wanted to work on. Two very similar situations were described by Emily (late 20s) and Elizabeth (early 30s). Their respective psychotherapist and psychologist thought that their relationships were fine. Elizabeth’s professional said that she just needed to try and negotiate her standing with her boyfriend. This made her feel like she had not articulated her situation well enough to get the support she needed. Emily’s professional, who was also seeing her boyfriend, reflected that their relationship ‘had legs’ and he really loved her. She was disappointed with the response, since she previously explained how the relationship made her feel and how she was treated. She indicated that she needed someone to tell her “you shouldn’t be getting treated like this, you shouldn’t be putting up with this behaviour, this is unhealthy stuff, you need to get out”. It appears that women need to be heard, actively listened to and be helped to name the abuse. Bagshaw et al. (2000) said that non-physical abuse needs to be named by counsellors as a form of DV, because it gives them a context in which to
comprehend what is happening to them. By naming it as ‘violence’, it will challenge the common view that non-physical abuse is normal and an acceptable part of a relationship.

Several of my participants indicated that the formal networks also advised them to stay in the relationship or to try a new approach in dealing with their partner. For example, Maria believed when a child and maternal health nurse suggested to give her partner the benefit of the doubt and “see if he has changed”, she was giving a wrong advice. In Tamara’s situation, her counsellor was adamant that people could change and was set on keeping couples together. He wanted Tamara to try to stay in the relationship for the sake of their children and her partner, but not for her own sake. She felt like her needs were not considered and there was no discussion of her leaving the relationship. Adele, on the other hand, felt intimidated during sessions with her husband and family therapist. She said that the therapist could have done more harm than good, because he was making suggestions that she thought were inappropriate.

Formal networks can help women become free from abuse and help them recover, but they can also be unsupportive and respond with disregard (Bosch & Bergen, 2006) or respond inappropriately to women by offering inadequate advice or responses, or normalising the abuse (Dienemann et al., 2005). Tamara explained that her counsellor made her think that she was overreacting, being silly or “a drama queen”, blowing things out of proportion, and that the abuse she was experiencing was normal. Similarly, Emily was made to doubt her decision about leaving her boyfriend. Tina indicated that she did not want to seek further support from police or clergy due to their initial inadequate responses. She was once told by police to go to court and get an intervention order, which she was afraid to do and thought the intervention order would not provide enough security. In the same manner, when she approached a minister of the church (more than 10 years ago) for guidance relating to her husband’s violent behaviour, she was told that her home was the safest place she could be. Hamilton and Coates (1993) found that ‘giving advice which women did not wish to follow’ was ranked as least helpful by abused women in their study. Adele described how she made a statement about domestic violence to the police, and without her consent the police applied for an intervention order on her behalf. The whole situation made her feel unsettled because she did not want to go down that road.

Several women had negative experiences with phone support lines and counselling:

I tried phone counselling and again, more platitudes they hand out. They don’t actually give you some skills; they don’t talk about skills and how to deal with it or what my options were. If I wanted to leave, this is what I could do, these are the support services. Nothing like that came up, more like: ‘how do you feel and why do you think you are feeling like that?’ No concrete help at all ... it’s almost like they had a question in front of them, they just read off the questionnaire. There was no
identifying that I was an individual with my own set of circumstances and no one actually defined what help I needed. No one asked what do you want out of this conversation? Or what help do you need? That didn’t happen. (Lisa)

Similar to other studies (Dienemann et al., 2005; Hamilton & Coates, 1993), Sally experienced disinterest on behalf of the professional she sought support from. She noticed how the psychologist’s eyes would glaze over a lot of the time, which made her wonder whether she was being listened to.

**Lack of empathy, sympathy or understanding, and disbelief.** In this theme around half of the women described the feeling of being dismissed, disregarded, disbelieved or that professionals “just didn’t quite get it” when they spoke about their experiences of EPA. It made them feel as if they were not going to receive adequate and appropriate help and therefore they reduced their visits or did not return to the service. For instance, Adele was accused by her couples counsellor of being “self righteous” during their session. She thought that it was because her ex-husband came across as very reasonable and it was hard to see his abusive behaviour. Seeley and Plunkett (2002) found that counsellors often underestimate the effects of controlling behaviours and emotional abuse. In other studies women reported professional services being indifferent, unresponsive, responding to the perpetrator with compassion and showing lack of empathy or understanding (Keys Young, 1998), did not believe them (Laing et al., 2010) or did not have an accepting attitude (Hamilton & Coates, 1993).

Overall experience of phone support lines made Sue feel like an outcast, frustrated and alienated: “I felt like they were treating me like a mental health case, which is really wrong”. She found this type of support superficial and useless:

> For someone like me, ringing up, they know none of my history and ringing these numbers actually exacerbated the distress that I was going through and the frustration. I would never, ever, if I went through what I’ve gone through again, or if I come across anyone that goes through what I’m going through; I would actually tell people, do not ever ring these people, because they are inexperienced, they are judgmental, they are ignorant, and they are not qualified …When you end up with people that aren’t qualified, they can actually be quite damaging. (Sue)

She pointed out that women experiencing DV are often stretched financially and do not always have a home phone, so ringing 1800 or 1300 numbers from a mobile phone can be costly. Having children, housework and other day-to-day activities, do not allow women to stay on the phone for too long or they are forced to ring much later in the evening. So when Sue rang at night, she experienced indifferent, condescending, patronising and unsympathetic responses. Losing a phone connection, getting through to an automatic phone system, having to describe their circumstances again and/or bring a new person up to date were a few other
issues relating to poor responses. Judgmental, rude, patronising and unsupportive responses from professionals were considered to be negative responses by women in other studies (Liang et al., 2010; Dienemann et al., 2005).

There was also discouragement and lack of understanding and sympathy toward women from legal services. Simona said that the continuous obstacle for her is a lack of recognition and a poor grasp of what women really endure during family violence from the Family Law Court. Another woman reflected on similar matter:

*Can you imagine a male judge, these really arrogant experienced men in court, I felt, were all against me; they were not respecting or listening to me or my side of it and had no respect for understanding the history of this case. You just reach a point of complete despair, you don’t know what else to think; you think you’ve gone insane.*

(Sue)

Sara suggested that some lawyers are very apprehensive about getting into the “nitty-gritty” matters. Some of her documentation on the history of violence she had experienced was not examined thoroughly or put on file, and in the duty lawyer’s opinion there was no family violence. Similarly, Sue pointed out that lawyers coming out of universities need to be educated on every form of DV. She described them as “vultures” that should have put her in contact with the right support from the beginning. During custody procedures the court was unsupportive, made Rachel feel exposed, and made out she was an “evil woman” who was apparently stopping her ex-husband from visiting their child. She said they had not sought to understand their situation and what he was doing to her.

There were a small number of examples in relation to unhelpful responses from police. For instance, Rachel was told by police to ‘get more on her partner’ when he had breached her intervention order. In some respects it made her feel that it was not important in their working day and consequently made her think the situation was insignificant. When Tamara approached a police station for support, she was told that they did not get involved in DV situations and hence could not escort her back home to pick up her belongings and the belongings of her children. They suggested asking friends or family members to help her instead. Women in another study highlighted unhelpful police responses as: failure to take action on breaches of intervention orders; expression of dislike of doing domestic violence ‘jobs’; failure to take women’s needs into account; and putting responsibility on women to take action or indicating that there is nothing they could do (Keys Young, 1998).

Grace, in her early 20s, said that doctors become uncomfortable when you talk to them about the issue of abuse. They do not know where to look when women disclose their history of abuse: “They just give you some pills and a referral and then just send you on your way,
like that’s very clinical and cold”. Some women in another study expressed lack of confidence in their GP’s capability to comprehend their circumstances (Bacchus et al., 2002).

**Location of services and access.** Five women described their dissatisfaction with the location of the services because they had difficulty accessing them. Women could not find services local to their area. For Tamara, the nearest women’s refuge was an hour and a half drive away from where she used to live, but instead there was a local DV shelter for perpetrators of violence. Similarly, Annabel had to come into the city for support, since there was nothing in her area. Likewise, women in another study needed more services. They had difficulty accessing what was available, due to lack of childcare and/or transportation. There was also non-existent or poor coordination among agencies (Lutenbacher et al., 2003). This is what Sue said about GPs:

*There are not enough GPs. GPs are so overworked and under resourced as it is, and they are very general. They don’t have the capacity to specialise or have the knowledge to assist.* (Sue)

**Non-recognition of abuse.** Seeley and Plunkett (2002) found that failure to identify domestic violence was one of the areas of concern identified by victims/survivors who were dissatisfied with their experience of counselling. Three women in my study stated that their professionals did not recognise the signs of abuse or could not identify the problem. Sue said that no one told her she was experiencing domestic violence and needed support. Similarly, Annabel’s counsellor did not recognise her situation and, as a result, just patched her up so she could continue with her work.

A similar theme was found in other studies where women indicated that they experienced lack of attention to the signs of abuse or no recognition of their situation from professionals (Dienemann et al., 2005; Keys Young, 1998). Tower (2007) pointed out that effective healthcare response is prevented by the lack of knowledge on the part of health professionals about IPV and associated issues. Knowledge about domestic violence can prevent victimisation in counselling (Seeley & Plunkett, 2002).

**Poor or no referral.** Three women were not provided with any referral to a specialist or if there was one, it was inappropriate, too general or did not suit their needs. For example, Tamara’s counsellor who wanted to keep her relationship together, referred her to a holistic counsellor, which she did not find affective:

*I never laughed so much in life. It’s very funny. I had to talk about what the issue was and rather than talk through an issue you talk about how it affects you, and she wouldn’t do that. She would just go – ‘ok, now keep that issue [snaps her fingers], put it in a big box, wrap that box up, now imagine you are in a square and the square is what matters to you, now put this box outside the square. It doesn’t matter to you anymore’. So that was the counselling that I was referred to and I found it amusing.*
So of course it wasn’t effective … You can’t put a big problem like that in a little box with a bow on it and put it to one side. I get what she was trying to do and it might have worked for small problems, but not for big problems of ongoing psychological abuse and then physical abuse. Yeah, that’s too big to wrap in a little box. (Tamara)

Factors such as poor referrals or not telling women of any other agency or professional service that could help were described by women in the past as unhelpful (Bagshaw et al., 2000; Dienemann et al., 2005; Hamilton & Coates, 1993).

**Informal sources of support and their responses to women**

All women indicated that they approached informal sources of support, which were mainly friends and immediate family members such as parents and siblings. Other women also had some contact with their partner’s family and friends. Similar to formal sources of support, women had mixed experiences with informal networks. Helpful support was described by 18 women, while 14 women reported unhelpful responses. Twelve women found their friends to be helpful, while eleven identified their family as helpful. Consistent with previous research, women approach and reveal their experience of abuse most often through friends and family, whom they also considered to be the most supportive (Bosch & Bergen, 2006; Dunham & Senn, 2000; Fanslow & Robinson, 2010; Fry & Barker, 2002; Moe, 2007; Patton, 2003; Spangaro et al., 2010). First, I describe the types of support women found helpful, followed by unhelpful experiences (See Table 11).

**Table 11: Type of support women found helpful and unhelpful from informal sources of support**

<table>
<thead>
<tr>
<th>Helpful support</th>
<th>Number of women</th>
<th>Unhelpful support</th>
<th>Number of women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional support</td>
<td>15</td>
<td>Lack of or poor, unhelpful, inappropriate responses, advice or support</td>
<td>10</td>
</tr>
<tr>
<td>Practical support</td>
<td>10</td>
<td>Lack of empathy, sympathy or understanding and disbelief</td>
<td>6</td>
</tr>
<tr>
<td>Listening and talking</td>
<td>4</td>
<td>Indifference, unresponsiveness, avoidance of the abuse issue</td>
<td>5</td>
</tr>
</tbody>
</table>

**Helpful responses**

**Emotional support.** Most of the 18 women in my study described how their friends and family were supportive and stood by them throughout their experiences. They understood them, let them make their own decisions, offered useful and appropriate advice, made them aware of available support, and encouraged them to think about leaving the relationship. Similarly, women in other studies described how informal networks offered emotional support (Shannon et al., 2006), availability, love and acceptance, and offered advice (Bosch &
Bergen, 2006). However, a different approach was used by Sara’s mother to help her get out of the relationship:

*I finally left him and moved to my mother’s, because she could see this pattern of me repeatedly returning, regardless of the issues, and the impacts and abuse and lack of decency on his behalf. She said to me, which in some ways was manipulative, but it almost reflects the desperation of the situation, she said – ‘if, you go back to him, I will wipe you from my life’. So my mother could see that without some huge threat of losing the support that most women need when they have a young child as mother, that that was how drastic she could see the situation was … and that was what worked. Although that was manipulative, it clearly was essential. (Sara)*

Similar reports were made by women in Moe’s (2007) research, who said that help from friends and family sometimes came with an ultimatum, where these people agreed to help on the condition that a woman would leave her partner.

In cases of friendship, Sally and Grace had support from friends who had also been in abusive relationships. They understood what they were going through and provided them with affirmation, and appropriate response and assistance. Some women explained that their friends were critical of their partners and wanted them to leave the relationship, but at the same time they were understanding of why they stayed and made them aware of their continuous support, if women needed it.

Other women in my study were supported more subtly. Their friends and family gave them hugs, helped to cover the punch holes in the walls and made women aware of available support, without direct discussion about the abuse that was occurring. Even though women did not discuss the abuse outright, they knew the support was available if they need it. Two women mentioned receiving emotional support from their partner’s family and friends. For instance, Emily said that her partner’s family was aware of the abuse and sometimes would intervene when he yelled at her. Besides friends and family, Grace said her schoolteacher offered to separate her from her boyfriend during classes. She said that these little things, like someone noticing the behaviour, gave her strength to keep going.

Eight women discussed helpful support aspects such as being validated, understood, believed and reassured. Keys Young (1998) stated that helpful, appropriate and sensitive responses from friends and family helped women to manage and cope with abuse, gain emotional strength and gave them a sense of not being alone. Sue said that she gave a lot of credit to her friend, who was non-judgmental, insightful, supportive and who helped her to cope. According to Stith and McCollum (2011, p.315) “many victims lack confidence in their own experience” and enabling the victim to end an abusive relationship can occur through validation.
**Practical support.** About half of the women described experiencing support and help in terms of being looked after, provided with accommodation and offered other ongoing practical support. Their friends or family helped them move, assisted with tasks and looked up information for them or found professional support. Similar findings and definitions of practical support were reported by Keys Young (1998) and Liang et al. (2005). Sue’s friend was like a surrogate family and her support meant a lot:

*A friend of mine, who’s a doctor, who’s done a couple of legal courses ... and up until that point I have not been able to read any of my legal documents because it was so abhorrent, so repulsive and I couldn’t read anything legally. I couldn’t deal with it. It created so much stress, and she sat down and was reading stuff, and we did some legal responses and affidavits.* (Sue)

In Bosch and Bergen’s (2006) study, physically supportive behaviour was considered to be visiting without husband or partner being present. A slightly different approach was taken by Fiona’s friends, who used to be nice to her partner for her sake, in order to avoid causing any problems. After separation, Violet contacted most of her old friends and whenever she had a court appearance, she had “a fan club”, without even asking. For Nina, it was her family who provided most of the support:

*They were very supportive and talked a lot about it and looked up information for me, and I stayed with Mum and my sister for a little bit and Mum and Dad came and helped me. When I actually asked him to move out, they came in, helped me to move all his things out into the hallway so he’d come and pick them up ... Having an open door that I could approach them whenever I needed them ... My Mum has done some reading and got an aunty who works with women who have been psychically or emotionally abused or both ... and she’s come back to me and said ‘this is abuse and that’s abuse’ ... She’s quite understanding I guess, doesn’t dismiss it.* (Nina)

**Listening, talking.** Being listened to and having someone to talk to was also important and helpful for some women. Both friends and family usually played this role. For example, Sally and Grace said that talking to friends and their new partner was just like counselling for them. Similarly Abby said:

*I found it very helpful to tell them stories about my relationship, because I had kept it a secret. Very helpful to be able to tell people about it, and to have them hear me. That was very helpful ... you just basically talk about it, until you can’t talk about it anymore.* (Abby)

**Unhelpful responses**

A small number of women did not wish to disclose their abuse to family and friends. For example, Tina tried to hide it because she “did not get married to get divorced”. Some of the women mentioned that their families did not know about their relationship or the problem. Some women were either embarrassed or afraid of responses upon disclosure of their
situation, or anticipated negative reactions and inappropriate responses. Some women were already estranged from their families due to their dislike of their partner. Similarly literature indicate that women fear that family and friends would be unable to provide or offer appropriate support or assistance, be judgmental (Keys Young, 1998) or would not try to help (Fanslow & Robinson, 2010).

Fourteen women in my study discussed three main factors (see Table 11), which they found unhelpful, from informal sources of support. Fourteen women described how they found the support from their family unhelpful, while six women named their friends.

**Lack of or poor, unhelpful, inappropriate response or advice.** Half of the women disclosed some form of negative and unhelpful responses or lack of response from family members and friends. Tamara indicated that people notice a man’s horrible behaviour, but do not react because the woman may have not reacted. She clarified it by saying that she used to laugh off her partner’s behaviours and say something derogatory about herself. As a result, her friends thought there was no effect and they were just joking around. Some women revealed that family or friends used to make simple comments such as “just stay away from him”, or “it’s always hard when you’ve got a young child” or “the first few years are really hard”. For some of these women it was the end of the conversation, which was not supportive.

In terms of individual situations, one woman who was in a financially unequal relationship was encouraged by her mother to keep paying for her boyfriend’s things, because she said he would appreciate such deeds. After separating from her ex-boyfriend, Emily’s friends tried showing support by calling him names, rather than enquiring about her wellbeing or how she was coping. She hypothesised that people assumed the problem was solved since the relationship was over.

Some of these networks meant well or were sympathetic, but did not seem to know how to respond appropriately to women’s experiences. An example was provided by Tamara, a mother of two young children:

> With my ex-husband because he was so subtle about it, when I’d speak to my Mum and Dad or friends about it, especially over the phone, not so much face to face but over the phone, they were not dismissive, but they were like ‘ohh, well, everyone has fights and when you are married you do. People do get irritated and lash out. You’ll get over it, he’ll get over it too and then you’ll find an equilibrium again’. (Tamara)

Similar suggestions were made to Sally, who reasoned that people are happier for others to be in a relationship rather than to be single. She was encouraged to work through the issue and keep it together, because she had found a man. No one was encouraging her to leave the relationship, even though she was asking for advice. On the other hand, Annabel’s mother had
a more traditional approach and encouraged her to stay with her husband because of the children and the notion of family. Annabel felt despair due to the lack of support from her mother, who showed concern for her daughter’s husband. In comparison, a 22-year-old woman who met her boyfriend at 18, described her mother’s response:

I would be sobbing and she would just start yelling at me to break-up with him ... In that situation, it made me feel like I wasn’t going to break-up with him, like I didn’t want to break-up with him, and it didn’t make me feel like I was in a position to [do so]... She was probably trying to do the best job that she could and she knew how to do, but she didn’t know how to approach it ... So I never, ever told her anything about it. Once, actually a little while ago, I just made a comment ... ‘He was emotionally abusive’, it took me a lot of guts to say that, and then she was just like – ‘ohh, yeah’, but I couldn’t deal with it. If I actually tried to talk to her about it, and she said the wrong thing, I think that would really harm me, like I think that, if she just told me to suck it up or something, it would really upset me, and so I never ever told her about it. (Abby)

There was a more serious consequence for Tina, when her friend decided to help without her consent:

There was one time when I did confide in a friend, and this friend unknown to me told her husband and her husband confronted him on it, and I didn’t know that was going to happen, and when that happened all hell broke loose with him. When that happened there were consequences for me, and of course he stopped them coming here, or having any further contact, and I was worried if I do trust somebody and say something, what if they betray me like that, then what will happen? (Tina)

Women interviewed in previous research reported that informal support networks did not know how to respond to a woman’s disclosure of domestic violence, or had good intentions to help, but their responses were unhelpful, inappropriate or misguided (Keys Young, 1998). Sometimes the support lacked emotional and social support and guidance (Fry & Barker, 2002), they provided off-putting advice to women, questioned their decisions, did not assist them appropriately in accessing support networks and facilitated keeping them in the abusive relationship (Bosch & Bergen, 2006).

Lack of empathy, sympathy or understanding and disbelief. Some women described how informal networks did not understand their experiences nor did they show any empathy. In Keys Young’s (1998) report, women indicated that they were criticised for staying with or returning to the abusive partner, received lack of sympathy, were condemned, especially if their partner was perceived to be caring, charming or respectable, or if they presented as having few or no marital issues. Adele indicated that emotional support was often missing from family members because they could not really see what was going on in her relationship. She would receive reactions of disbelief, because her partner was perceived to be very charming. Samantha found herself in a similar situation where her experience was
not taken at face value. She explained how difficult it was to describe emotional abuse and how people reacted to her disclosure:

*When I used to sit down and say, I couldn’t actually find one thing that was outwardly wrong so they were always a little bit confused and a bit like – ‘why are you so, like this?’ Because I couldn’t put my finger on what exactly he was doing because he was so passive about it and that’s the hard thing. I think with mental abuse, it is behind closed doors, and it is such a passive thing, and because no one can see a mark on you, they are not really taking what you are saying at face value; it’s always a little bit like,’ ohh, maybe she’s imagining it’. *(Samantha)*

Some family or friends responded to women with several negative comments such as: “*get over it*”, “*boring, sick of you fighting, just deal with it*” or “*you’ve made your bed, so you can lie in it*”. Some were supportive to a point, and were not willing to hear about a woman’s experience unless she was going to do something about it. Other examples included informal networks questioning and criticising a woman’s decision to stay in the relationship, or thinking negatively of them, because of what they were putting themselves through. For example, Annabel described the following reactions:

*I can’t talk the truth in my family … you get called ‘you are bitter, you are angry, you are the problem’. You know you get stonewalled, it’s awful … and they just can’t get it and they think you are nuts … You want their love, you want their acceptance, but they can’t accept you of [sic] what you are, because you are something that they don’t want to talk about … because it’s too painful for them, because it brings up their own issues, their own abuse.* *(Annabel)*

**Indifference, unresponsiveness or avoidance of the issue.** This theme came up in the narratives of five women. Some family members or friends knew about a woman’s situation but said nothing, did not want to be involved, or were reluctant to give advice. Having family members who had similar experiences influenced their ability and willingness to provide support. For example, Annabel said that her mother was the wrong person to seek support from because she was also emotionally abused in her relationship. Her mother’s lack of response shattered Annabel because she perceived it as further emotional abuse. However, several of these women mentioned that they received support and help from their family and friends soon after separation.

**Conclusion**

These findings can inform formal and informal sources of support about both the identification of, and responses to EPA. It is important for professionals to be aware of helpful and unhelpful responses because they have direct implications for intervention (Hamilton & Coates, 1993). This information could be implemented into continued forms of support and education for both formal and informal support networks.
All the women I interviewed indicated that they approached either one or a combination of formal and informal sources of support. None of my participants explained or indicated that they had participated in women’s domestic violence support groups, but rather that they were involved in other general women’s, children’s and activity groups. I suggest for future researchers, that they recruit women from women’s domestic violence support groups (since it did not work for me) and to investigate how these groups are perceived by emotionally and/or psychologically abused women. Laing et al. (2010) reported that many women in their study found it helpful to speak to other women who left DV and to learn from their experiences.

Similar to other research, I found in my study that women approached their friends and family members more often, or as a first source of support, before they sought assistance from formal sources of support. All the women in my study reported experiencing mixed reactions and responses from both formal and informal networks. There was no significant difference overall between helpful and unhelpful responses from both formal and informal networks.

Emotional support was described most often including being taken seriously, being understood and validated. My participants indicated that the helpful professionals they contacted were non-judgmental and provided guidance, encouragement and information. From helpful informal networks women received useful and appropriate advice. They were allowed to make their own decisions, without being pushed, and they were made aware of support, either directly or subtly. One woman explained that support was offered with a condition and that this was manipulative but clearly essential. Support with an ultimatum may not be beneficial to all women, because someone else is exerting power and control.

The second most frequent helpful response related to practical support. Similar to past research, family and friends supported my participants by providing accommodation and childcare, helping them move and looking up information for them, including for professional and legal services. The formal support networks helped women with legal support, information and representation, moving house and finding new accommodation, and providing information on MIPV. Although, one woman said that an apparent lack of support, where the service was adamant to help her if she planned on returning to her partner, was the best support the service could have given her, and was probably what made her go through the process of leaving. Such a direct approach may not help everyone because of the similarity with controlling behaviour of the abuser. Around a quarter of the women indicated that they found referrals helpful. A low response may just mean that the professionals women approached dealt with the issue without further referral.
My participants also discussed the unhelpful responses they received from formal and informal support networks. Most women described experiencing lack of or inappropriate responses, advice or support. Some services had a poor approach to dealing with women’s issues, sometimes without discussing their needs and the method or pace of support. Consequently, it made women feel as if the service was impersonal and patronising. My participants expressed that they wanted the formal networks to name the abuse, to provide guidance and discuss things they have not heard before, or already considered. My participants were resilient and resourceful, and they did not want to be treated in a condescending manner. I would encourage future researchers to identify ways to better support women to self-help, as a means of overcoming and responding to the long-term effects of MIPV. My participants drew on their own resources and resilience, besides approaching formal and informal sources of support. Formal support networks need to identify women’s expectations of support, their levels of awareness, and what it is that they want to deal with and how. In other words, help them feel in control of the support process and empower them.

I also found that some of the women in this study had difficulty finding or accessing suitable services, or lacked knowledge on how these services worked. One woman was especially afraid her information would be recorded and used against her, if she contacted phone support lines. Women need to be provided with information about their rights and confidentiality policies of these services. There is also a need for explicit information on how these services operate and what their responsibilities are. Sometimes their job is to provide referrals to appropriate support services rather than provide advice per se.

My participants revealed that they felt disregarded, dismissed and disbelieved by both informal and formal networks, and the legal system including lawyers and judges. This type of response led women to reconsider whether they wanted to approach these networks again. One of the particular concerns was support phone lines. Women experienced difficulty getting through to speak with a real person and, when they did, some of these people were condescending, unsympathetic, patronising and poorly trained. Women discussed having to inform several people about their personal circumstances. Ongoing training for the individuals working in these services, and possible methods of faster access to real people and storing of individual records are suggestions for improvement. In regards to formal support networks and the legal system, women suggested that these individuals need to be educated on every form of domestic violence, while being more supportive and understanding of women’s experiences of MIPV. Lack of knowledge or awareness of MIPV, especially of the specific...
types of abuse by professionals, may lead to failures in detecting violence, making appropriate referrals and responding appropriately.

Women also described how their family and friends did not understand their experiences, showed a lack of empathy, or were indifferent to their situation. These networks did not understand women’s situations and consequently blamed them for it, or made it clear that they did not want to hear about it. They were reluctant to provide advice and support, or provided negative responses and inappropriate suggestions, they were supportive of the relationship and the man, or caused trouble by speaking up for the woman without her knowledge. Support and education for informal networks could be beneficial, since half of my participants described their dissatisfaction with the responses from their family and friends. Currently there are several brochures, websites and domestic violence support lines available in Australia for people who want to know how to support a friend or a family member who is experiencing MIPV. However, it is possible that not everyone would know how to find these things and hence there might be a need for public education awareness, and a program that seeks to assist informal networks to respond sensitively to women disclosing MIPV.

Women need to acknowledge and understand that the perpetrator’s behaviours and bullying are not normal and should not be accepted in intimate relationships. Appropriate support and education from formal and informal support networks can help. This is about helping women to understand what is acceptable and unacceptable in relationships and that they are not alone. McCallum and Al Lauzon (2005, p. 134) believe that “the debilitating and dehumanizing nature of psychological abuse must be made visible through education”. Through education, both young men and women will recognise psychological abuse in their lives and communities. This recognition would help to elevate EPA from its normalised and invisible realm (McCallum & Al Lauzon, 2005).
Chapter 8

Conclusion

The purpose of this exploratory study was to investigate emotional and psychological abuse (EPA) as experienced by women in heterosexual intimate relationships. I was interested in finding out the behaviours and effects women experienced, and how they compare with what is already known from the existing literature. As an example of a policy discourse, I wanted to find out how Australian legislation understands it, and see how their definitions compare with women’s experiences. With this study I intended to highlight the impact of EPA, to make it more visible among the general community and to show its seriousness, so those women who are experiencing EPA do not have to live with uncertainty or be misunderstood.

My research involved in-depth interviews and questionnaires with 20 women between the ages of 22 to 54 years, living in Melbourne, Victoria, who had experienced EPA from their male intimate partners (ex-husband, ex-partner, or ex-boyfriend). From this sample, I have shown the broad nature and seriousness of EPA and that current definitions used in Australian legislation are too narrow and insufficient to identify EPA. Thus, this study provides useful information for government policy, community education, support services, women subjected to EPA and the wider public.

In this chapter I discuss the findings from my study in order of their appearance in the thesis: behaviours, effects, awareness and support. I also consider the relevant implications for Australian legislation, policy and practice and some directions for future research.

Behaviours

Based on the information gathered through interviews and questionnaires, I identified and described six main categories of behaviours and 35 sub-categories (see Table 6, below). Men perpetrated behaviours that fell into the following categories: 1) threats; 2) undermining, destabilisation or invalidation; 3) indifference, discount or disregard; 4) isolation, restriction or monitoring; 5) criticism, denigration or humiliation; 6) domination, control, manipulation or coercion. All women experienced more than one type of abusive behaviour, which also varied in severity and frequency.

The behaviours outlined are the ones women disclosed and described. There is a possibility that there were behaviours they forgot to mention, did not know occurred (e.g. discrediting woman to others) or chose to keep private (e.g. sexual disregard). Even though I chose two methods to gather this information, I later faced an issue with lack of detail and clarification. Since I provided the questionnaires after the interviews and recorded them as
well, women did not provide as much detail as they did during interviews. Hence, I would suggest that future researchers provide questionnaires prior to interviews, in order to trigger women’s memories, which will allow them to discuss and clarify questions in the questionnaire in more detail during the interviews.

Table 6: Women’s experiences of EPA, behaviours perpetrated by their partners

<table>
<thead>
<tr>
<th>Threatening behaviours</th>
<th>Undermining, destabilising or invalidating</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Threats of physical harm</td>
<td>• Lie, deceive, contradict or mislead</td>
</tr>
<tr>
<td>• Threats to hurt or kill himself</td>
<td>• Make a woman question herself or her sanity</td>
</tr>
<tr>
<td>• Threats to end the relationship or abandon</td>
<td>• Blame a woman for his violent behaviours and/or his problems</td>
</tr>
<tr>
<td>• Threats to evict a woman or forced her to leave</td>
<td>• Make a woman feel bad and guilty</td>
</tr>
<tr>
<td>• Threats to take children away</td>
<td>• Encourage the view that there is no one else but him</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Isolation, restriction or monitoring</td>
<td>Indifference, discount or disregard</td>
</tr>
<tr>
<td>• Restricting contact</td>
<td>• Emotional disregard</td>
</tr>
<tr>
<td>• Isolation</td>
<td>• Use silent treatment, ignore or avoid</td>
</tr>
<tr>
<td>• Monitoring – eavesdropping</td>
<td>• Sulk or refuse to have any discussion</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Criticism, denigration or humiliation</td>
<td>Domination, control, manipulation or coercion</td>
</tr>
<tr>
<td>• Put-downs, taunts or humiliation</td>
<td>• Erratic behaviour, radical mood changes</td>
</tr>
<tr>
<td>• General criticism</td>
<td>• Manipulation</td>
</tr>
<tr>
<td>• Verbal abuse, derogatory language or comments</td>
<td>• Financial abuse</td>
</tr>
<tr>
<td>• Criticism of woman’s intelligence</td>
<td>• Intimidation or creation of fear through non-verbal acts</td>
</tr>
<tr>
<td>• Criticism of woman’s physical appearance</td>
<td>• Directly dominated and/or forced obedient behaviours (e.g. ordered you around or made certain demands)</td>
</tr>
<tr>
<td>• Accusation of cheating or having an affair</td>
<td>• Reckless driving</td>
</tr>
<tr>
<td>• Discredit woman to others</td>
<td>• Yelling and shouting</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

Behaviours described by women in my study were very similar to the accounts of other women in international research. However, I found many more behaviours that women in my study considered to be emotionally and/or psychologically abusive than is apparent in relevant Australian legislation and research. While there were similarities, what the international literature and the Australian legislation and relevant studies did, was cluster behaviours into a limited number of categories, hence a minimum of behaviours were used to identify EPA. Using a small number of behaviour, or similar behaviours, clustered into one category, does not provide an accurate representation of the diverse experiences of EPA. My analysis women’s experiences resulted in the following categorisation.

For future research, I suggest identifying which behaviours women experienced during and after the relationship. My participants described the behaviours they experienced, but not
all of them specified at what stage of the relationship these occurred, and it was difficult to do so in the questionnaires. Hence, where possible, I provided this information. Since separation does not always end intimate violence (Fleury et al., 2000), identification of post-relationship abusive behaviours can be very useful for support workers, legal professionals and legislation. I recommend that further research be undertaken to increase current understandings of emotionally and psychologically abusive behaviours in Australia among intimate partners including those in same-sex relationships. Further qualitative or quantitative research with a higher number of participants may promote our understanding of the victims’ experiences. I suggest using my findings (see Table 6) as a starting point, which can be used as part of a questionnaire, or to prompt to identify whether women experienced any behaviours under these categories. Consequently, we could create a list of behaviours that would be more or less relevant to a broad population, which then could be used and applied to relevant legislation across Australian states, as well as for community education, and information brochures in support services. Research with higher number of participants can reflect on the relevance and usefulness of these categories and behaviours, and further validate which behaviours need to be included in the context of intimate partner violence between current and former partners in Australian legislation.

EPA needs to be named in Australian legislation, as some states still do not identify this abuse as a form of domestic violence or family violence (although some behaviours could be included in EPA). The states (QLD, SA, VIC) that do identify EPA and provide behavioural examples, vary in their definition and the behaviours they include. The behaviours that are described are either too narrow or do not fall under some of the categories described in table 6. None of these states provide examples of behaviours that fall under the category of: indifference, discounting and disregard; and undermining, destabilisation or invalidation. More than half of my participants described some kind of behaviour that was categorised as ‘undermining, destabilising or invalidating’. These behaviours can be devastating to women, since they target their psychological core and emotional and psychological state, where then can begin to question themselves. Similarly almost all women described experiencing several behaviours that fell into category of ‘indifference, discount or disregard’. These behaviours are believed to have an intention to punish the partner and increase her insecurity or anxiety about the relationship or imply that she does not deserve affection (Katz et al., 2000; Murphy & Hoover, 1999). Nor does every state describe EPA in terms of threats of physical harm to oneself (perpetrator) or others, including the threat of taking woman’s children away, criticising behaviours, controlling her choices, or intimidating
or manipulating her in some way, and yet these were all common ways that women had experienced EPA.

Besides categories, we also need to consider individual characteristics or circumstances, including a woman’s perception of the behaviour, when working with women. While one woman may not find the behaviour to be inappropriate or abusive, another may experience it as violent, harmful and upsetting. As I did not specifically inquire about my participants’ perceptions of the intent of the EPA they experienced, I also suggest examining men’s intention and motivation behind the use of EPA against intimate partners further. An exploration of intent and motivation could differentiate between isolated acts of conflict between intimate partners, and coercive and harmful behaviours. It could help to identify whether there are other motives and reasons for EPA besides control and power. Furthermore, infrequent behaviour can still harm women. In this thesis I did not discuss the frequency of the behaviours and how they made women feel at any length. I suggest future research examines the frequency, duration and perception of harm in more detail, preferably through interviewing women, rather than just questionnaires. Both infrequent and frequent behaviours can be equally damaging to women. The reason I suggest these factors need to be examined in more detail is because they construct a definition of EPA, as described below.

**Definitions**

As I have explained, it is difficult to identify EPA by using a couple of examples, because the experience of EPA is wide-ranging. Consequently, it is difficult to create a universally accepted definition, because there is a lack of consensus and agreement among researchers (and in Australian legislation). The current legislation (interventions, restraining and protections orders) in each state in Australia provides somewhat different definitions. Some of these states use intent of abuse, behaviours or outcomes to describe EPA. There is a need for a common definition, in policy and courts. A broader definition is important because it has policy and political ramifications, since narrow definitions can lower the number of identified cases and incidents of EPA.

My participants struggled to come up with a definition of EPA, and were inclined to use examples relating to their personal experience. Similar to the factors found in the literature, they used a combination of factors (but not all at once), such as intent, frequency, behaviour, outcomes and effects, and who is the instigator or perpetrator and who is the receiver to define EPA.

EPA in relationships is conducted intentionally (but not necessarily) by a male partner. In other words, he intentionally chooses to use these behaviours to chip away at his partner’s
self-worth and independence, and in other instances this is done unconsciously, without intent. In an abusive relationship, the behaviours are frequent, ongoing and intense, although it may not always be the case and may depend on how women associate the behaviour with abuse. Women’s perception, recognition and interpretation of abuse are also important. Woman should be one of the main people to indicate whether the behaviours were experienced as problematic or harmful. Though, recognition of EPA is sometimes difficult, predominantly if it was carried out subtly, in a loving or caring manner and expressed in a certain tone of voice, facial expression or gesture. As a result, even third party observers may not recognise it. Not being aware does not mean the behaviour or act did not occur. This could be one of the situations where a professional would need to work with a woman, and help her identify and label her experience, in a safe manner.

Based on my findings I suggest the following definition of EPA:

Emotional and/or psychological abuse is a pattern of ongoing, frequent or infrequent behaviours that express indifference or disregard for the other person and are perpetrated to: threaten; undermine, destabilise or invalidate; isolate, restrict or monitor; criticise, denigrate or humiliate; dominate, control, manipulate or coerce another person. It is a form of abuse that is carried out subtly or overtly, with the intention, likelihood of or otherwise perceived by a receiver to have negative emotional, psychological, physical or social and economic effects on them.

The definition uses the factors of intent, pattern, frequency, duration and intensity of behaviours, outcomes and effects, woman’s perception of harm and types of behaviours. All of these factors may not be the only criteria to define EPA and, on their own, will not always be enough for a definition, clarification, assessment or proof of experiencing this form of abuse. Consequently, the context in which EPA occurs may also become important when defining or explaining EPA. Each of these factors should be examined in more detail in future research so as to validate the importance of their inclusion in the definition and understanding of EPA, and identifying whether women and men differ in the perpetration of EPA.

With the help of this definition those who are experiencing EPA and lay persons may be able to improve their understanding and awareness of EPA and identify its occurrence. Using a table of elaborated categories and sub-categories of emotionally and psychologically abusive behaviours can further help explain these abusive behaviours. It can be used as a checklist to help women and others involved identify the occurrence of EPA more accurately and differentiate it from defensive actions, conflict, common or situational couple violence or random outbursts of anger. Stark (2007, p. 104) reported that in order to distinguish abuse
from fights, “it is necessary to know not merely what a party does – their behaviour – but its context, its socio-political as well as its physical consequences, its meaning to the parties involved, and particular to its target(s) and whether and how it is combined with other tactics”.

**Effects**

I was very interested in the effects of EPA. To an extent, this related to my personal experience, and I wanted to see what other women had to say. There is much general research that provides examples of negative effects resulting from EPA in intimate relationships. I could not find information that paid exclusive attention and consideration to the particular effects of EPA in the Australian data. The symptoms are not as obvious as physical abuse and may vary significantly between individuals, as can be seen from Chapter 5. Most reports from the literature described the negative effects caused by domestic violence, which does not always specify the exact form of abuse experienced or which form of abuse caused the negative effect.

All women in my study described some form of negative effect on their emotional, psychological and physical wellbeing, as well as social and economic effects, which they believed could be attributed to their experience of EPA. Overall, I identified four main categories of effects, with 23 sub-categories, excluding some of the more individual experiences (see Table 7). In general, most of my findings on the effects of EPA are similar to past research and reports of other women internationally, in particular, the effect on emotional and psychological wellbeing and social and economic effects, except for factors

**Table 7: Self-reported negative effects experienced by women**

<table>
<thead>
<tr>
<th>Physical wellbeing</th>
<th>Social and economic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in eating habits, weight gain and loss</td>
<td>Isolation</td>
</tr>
<tr>
<td>Body aches and pains</td>
<td>Financial hardship</td>
</tr>
<tr>
<td>Skin-related issues</td>
<td>Trust in or fear of people and future relationships</td>
</tr>
<tr>
<td>Difficulty sleeping</td>
<td>Smoking, drinking</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Psychological wellbeing</th>
<th>Emotional wellbeing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feeling of depression</td>
<td>Self-esteem/respect</td>
</tr>
<tr>
<td>Psychological destabilisation</td>
<td>Fear</td>
</tr>
<tr>
<td>Traumatic symptoms</td>
<td>Crying, sobbing</td>
</tr>
<tr>
<td>Anxiety, panic attacks</td>
<td>Internalisation or self-blame</td>
</tr>
<tr>
<td></td>
<td>Anger</td>
</tr>
<tr>
<td></td>
<td>Stress</td>
</tr>
<tr>
<td></td>
<td>Making changes, modifying own behaviour</td>
</tr>
<tr>
<td></td>
<td>Pre-empting</td>
</tr>
<tr>
<td></td>
<td>Humiliation or embarrassment</td>
</tr>
<tr>
<td></td>
<td>Emotional attachment or dependency</td>
</tr>
</tbody>
</table>
such as ‘pre-empting’ and ‘second guessing’ the partner. Just over a third of my participants experienced negative effects on their physical wellbeing, which were similar to the existing literature. Though, I also found some incidence of skin-related problems, changes in eating habits, high blood pressure and vision problems, which I did not find in the literature. My findings indicate the potentially diverse impacts of EPA, which can seriously impact women’s health and wellbeing.

Women in my study had the opportunity to speak about the specific negative effects they believed might have been caused by or related to their experience of EPA. This information is useful for community education and for professionals during the process of identifying MIPV. It could be useful in cases where a woman presents with a wide range of physical and psychological health issues or when physical explanation cannot be found. Based on my findings, EPA is hard to identify, recognise and comprehend. As a result the analysis of negative effects (on physical wellbeing, in particular) may be harder to perform. Some of my participants said that even their doctors could not pinpoint the cause of their symptoms. Professionals need to be aware of the warning signs of EPA in order to be able to identify women who knowingly or unknowingly experience such abuse. They should also provide women with an opportunity to voice their stories and cautiously enquire about MIPV, as disclosure may follow.

I think it is important to identify and further study the possible negative effects of EPA, because it appears to cause short and long term health impacts. Having better ways of identifying its occurrence would be very beneficial. By correctly identifying cause and effect of these behaviours, we would be able to identify appropriate measures and sources of support. There is a need for self-reporting and collaboration with professionals to identify and confirm these effects. Information about these effects will strengthen the definitions of EPA and demonstrate its seriousness.

**Awareness**

Even though awareness of EPA seems to be growing in the general population, there is still a lack of awareness of EPA and its seriousness, compared with physical or sexual abuse. In Australia, there is inconsistency in understanding the behaviours that constitute EPA and little publicly available information on the negative effects. This could contribute to women being unable to identify their experiences as real and/or serious, and instead dismiss the effects as general poor health.

Awareness of EPA cannot be raised by just demonstrating the behaviours. There is a need to demonstrate the potential negative effects. This can reduce inaccurate diagnoses and
over medication and help women to deal with the real causes. Even though only three of my participants discussed how awareness of effects helped them become aware of the abuse, I think seeing the effects of abuse can alter the perception of self, the partner and the relationship, if we know what is causing it.

In this research I discussed with women their awareness of EPA in their intimate relationships. My participants experienced behaviours that were perpetrated in a subtle and insidious manner, which they initially did not perceive or understood as harmful or abusive, and instead normalised EPA as part of intimate relationships. Almost all the women I interviewed had trouble acknowledging the abuse. Most of them indicated that they did not understand it or realise it was occurring. Others hoped their situation would improve, or it was a normal part of the relationship or not so bad. My participants struggled to recognise the abuse, due to its unpredictability and subtlety, and for some the abuse was not frequent, but included random outbursts, behaviours and comments. Some of the women related it to their partner’s personality, his experience of stress or family background. Women described walking on eggshells, frequently due to the unpredictability of their partner’s next outburst, or a situation where he would say or do something negative, fearful, humiliating or derogatory. While, for some women, their partners were apologetic for their behaviour, for others it was not always the case. Some men said they did what they did in women’s best interest and out of concern, which consequently made women feel confused or blame themselves.

Women in my study experienced multiple turning points which helped them leave their abusive relationship and increased their awareness of abuse (see Table 12).

**Table 12: Turning points that caused women to become aware of the abuse**

<table>
<thead>
<tr>
<th>Turning points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perspective and validation from formal and informal sources of support</td>
</tr>
<tr>
<td>Change in beliefs or loss of hope in the relationship</td>
</tr>
<tr>
<td>Child(ren) related</td>
</tr>
<tr>
<td>Physical, sexual</td>
</tr>
<tr>
<td>Maturity</td>
</tr>
<tr>
<td>Meeting someone</td>
</tr>
<tr>
<td>Seeing the effects</td>
</tr>
</tbody>
</table>

The findings indicate that validation from formal and informal sources of support is very important for women to identify their relationship as abusive or violent. These support networks listened, named the abuse for women, validated their experiences and shared their own, and helped them gather confidence to leave the relationship. Half of the women experienced a realisation and loss of hope in the relationship. Their awareness was gradual.
and they were either fed up with their situation, or came to a conclusion that they did not want to live that way for the rest of their life, and wanted something better and more for themselves and their children. Importantly, women need help to realise their potential for happiness and a better life. There is a need for further detailed research on awareness triggers and turning points women experience in abusive intimate relationships. This could then strengthen the support offered by formal and informal networks.

**Support**

More women in my study had helpful experiences with support services than unhelpful. It was important for women to be acknowledged, validated, believed and taken seriously, by both formal and informal networks. It helped them to understand their experiences and not discount them. They were able to see that it was not their fault and that their personal changes did not make a lot of difference to their partner’s abusive behaviour. Women began to create an alternative outlook and to change their previous perceptions of their partner and their relationship, identifying it as problematic. These sources of support also provided awareness, credibility and made women feel less alienated.

Just over three quarters of women spoke about both formal and informal networks providing what they considered to be inappropriate responses, or discouraging or unhelpful advice. They experienced a lack of empathy from these support networks, as they did not know about EPA, which made it harder for them to respond adequately. Since some of my participants reported that their informal support networks lacked knowledge of EPA, there is a need for these networks to be educated about all types of MIPV and their effects, particularly on EPA, as it is least understood.

My participants described their dissatisfaction with poor or inappropriate referrals and that the formal sources of support did not identify their needs before proceeding with their path of support. My participants were resilient, courageous and most of them actively sought support. They wanted to hear something that they did not already know, they wanted to have more individual support aligned with their needs, and in particular, what they would deal with and at what pace. Consequently, there is a need to put this into practice and provide women with more control over their recovery process. My findings indicate that there is a need for more promotion or education about the purpose of each formal source of support and their procedures. If these services are more explicit in their purpose and what they offer, it may help women avoid disappointment and frustration when they contact them. As well, women
need to know about the availability of support and that they will be taken seriously, for example, in situations where women continue to experience EPA, even after separation.

Since I only gathered the outline of women’s support experiences, I suggest further research on appropriate and helpful sources and aspects of support for emotionally and psychologically abused women. My identified categories could be used as a starting point. Future research could involve identifying women’s perceptions of what type of support they found most helpful during and after their experience of EPA, or evaluate current services and approaches that support emotionally and/or psychologically abused women.

**Policy and practice implications**

This study has relevance to social policy and practice with women who have experienced EPA. It alerts us to the need for more detailed research on EPA in intimate relationships, preferably with a higher number of participants than I was able to achieve and using mixed methods. As I have suggested, further investigation of behaviours and negative effects and triggers to awareness of this EPA would be useful. It may be beneficial to collaborate with medical staff and other professionals such as counsellors, social workers and psychologists. In doing so, a more comprehensive definition could be developed.

In relation to practice implications, there is a need for training of formal and informal sources of support on EPA, through professional and community education. This would include information on the abuse, with emphasis on the harmful effects it can cause to women’s mental, emotional and physical wellbeing, including social and financial effects. Identification of, and responses to, EPA are important aspects that support services need to know about. Educational campaigns need to include EPA to the same extent as physical and sexual abuse.

Women in my study experienced a variety of behaviours in six main categories. Having categories provides a clearer picture of what factors we need to concentrate more on and what support approach will be appropriate. For example, if a woman experienced more isolating behaviours, a professional may want to work with her on reconnecting with others or with appropriate support networks and groups. Some of my participants did not realise they were abused, and consequently did not perceive themselves to be eligible to attend a domestic violence support group, because they were not physically hurt. Highlighting the fact that these support groups are for women who have experienced EPA, as well as other forms of violence, could be a way of promoting them.

In relation to policy, one of the more important goals would be to make the problem of EPA abuse more visible to the public and those individuals who are victimised by it. Thus,
EPA needs to be identified in legislation and other related policy, instead of how it currently stands where some states do not name it, or if they do, a narrow definition is used or a small sample of behaviours is provided. The wider definition would provide examples of behaviours and negative effects, including intent, patterns of behaviours, a woman’s perception, frequency, duration and intensity, in ways that I suggested earlier in this conclusion.

* * *

I never went back to see a professional after I had had a bad experience with the support I sought during my PhD studies (where it was suggested that I learn to manage my anxiety, instead of identifying my relationship as emotionally and psychologically abusive). Instead my participants validated my experience and inadvertently helped me make more sense of EPA, my experiences and my past relationship. They helped me to become more aware of what constitutes EPA, and understand that I was not alone in the behaviours and effects I experienced. Through their personal resilience and suggestions I became more assertive and my wariness increased. I am now able to recognise the warning signs of inappropriate behaviours. My research was an educative process and I am thankful and grateful to all the women who participated.
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APPENDICES

Appendix A

Abby is a university student in her early 20s. She met her ex-boyfriend through a friend, when she was nearly 18. Every one she knew when she met him gave him a great recommendation by saying he was ‘a great guy’. They dated for about seven months and it started - what she now recognises as abuse. It was very hard for her to separate from him completely, because he tried to contact her and organise dates and treat the ‘broken up’ situation like they were still together. She broke up with her ex-boyfriend around four years ago, and is now in a new relationship.

Adele is a postgraduate student, who is in her early 30s and a mother of a young child. She said she had a very good connection with the man that she met and married. It was not until she was pregnant she understood how problematic the relationship was. It was during this time when it became clear that they had very different values. It appeared that her relationship evolved very quickly, where her partner wanted to get married and purchase a house, even though she was not comfortable and worried about doing these things so soon. They were together for five years and have been separated for around a year. She is now in a new relationship.

Annabel is in her early 40s, and has two young children under the age of 10. She said that the most traumatic experience was her relationship with her now ex-husband, where there was emotional abuse. This relationship lasted for ten years and she still has contact with him due to the shared responsibility for their children.

Elizabeth is in her early 30s and in a new relationship. She is a postgraduate student. The relationship she discussed in the interview lasted for a year. He was very insistent to have a deep and meaningful relationship from the start and was ready to settle down with someone. The relationship became serious very quickly, and Elizabeth went along with it. At the time of interview, they had been separated for about six months.

Emily is a postgraduate student in her late 20s. At the time of the interview she was in a new relationship. She met her ex-boyfriend through a friend when she was in her mid 20s. He became intense quickly in the relationship, paying her a lot of attention and ringing her every day and texting a lot. The first few months were fine and then he started changing. By this time she already felt in love with him. Their relationship lasted about three years and they attempted living together for several months. She eventually left him and had been separated for about two years.

Fiona is in her mid 30s and has a disability. She is a full-time mother to her teenage daughter and is currently in a relationship. The relationship she discussed in the interview lasted for seven years, and they have been separated for about three years. After she met her ex-partner, they moved in together very quickly, about three months into the relationship. She said that everything was fine for six months and then he put his fist through the wall, which came out of nowhere, and things went down hill from there.

Grace is a university student in her early 20s who is in a new relationship. The relationship she described during the interview began when she was 15 with a boy from her school. The relationship lasted for two years but she did not want to be in it after six months. She indicated that she was too scared to leave and worried about what he would say or where she
would be without him, because he made her dependent on him through his manipulative, critical and dominant behaviour. She left her ex-boyfriend around six years ago.

**Lisa** had commenced a university degree when we met. She is in her early 50s and has two adult children. Lisa had the longest relationship of this group of participants of around 30 years. During their relationship, things changed and her husband became less emotionally involved.

**Maria** is a postgraduate student in her late 30s. She identifies herself as having a disability. She has two children. She has had three unequal, untrusting or unsafe relationships. The one discussed in the interview concerned that with the father of one of the children. She explained to me that she thought her ex-partner was different to others. He presented himself differently and indicated that he needed support, care and nurture, which is what she fell for. They were together for two years and have been separated for three years.

**Nicky** is in her late 20s and in a new relationship. The relationship she described in the interview began in her late teens and lasted for over six years. It did not take her long to realise what was going on, but it took her a very long time to get out of it. The relationship got worse after the first 12 months and by that time she was so involved in the relationship, that it was hard for her to leave. She left him about five years ago.

**Nina** is in her early 30s and, at the time of interview, was in a new relationship. Her last relationship lasted seven years and she had been separated from him for six months. She felt that in the relationship she had to put herself second. Nina experienced extremes in the relationship where there was a lot of love and affection or else there was distance. He became her focus because her sense of worth was tied up with him and whether or not he loved her or pushed her away.

**Rachel** is in her mid 30s with a young child from a previous marriage which lasted about five years. They broke up about five years ago, but he harrasses her through constant contact. She met him when she was 18 and reconnected with him in her late 20s. She said that the first 18 months of their relationship was really fine and, even though he had an intervention order placed on him at the time, she believed his explanation for it. She assumed it was probably when they bought a house and started living together that she started to notice things were not really as they seemed. Rachel is currently re-partnered.

**Sally** is in her mid 20s. She left her boyfriend two years ago and they went out for six months. She said that the first two months were great. They started spending every night together very quickly, which soon shifted to more and more fights, and got worse and worse. She said that the frequency of their fights increased towards the end and she actually ended the relationship when he hit her on their holiday. It is only really then that she started thinking about non-physical forms of abuse.

**Samantha** is 30, and in a new relationship. She referred to the relationship described in the interview as probably her first love, which was on and off for seven years. Her ex-partner disrespected her opinions. She said that the first few years she was naïve, open, gullible, and had all the best intentions. She broke up with him more than three years ago.

**Sara** is in her late 30s, and mother of one young child. The relationship she described during the interview lasted for four years and they separated about four years ago.
Simona is in her early 40s and has two children. She married in her late 20s and they were together for ten years. She has been separated for about five years. It took her some time to build the courage to face what she was living with, say “no more” and ask him to leave. She left the relationship once before returning. She indicated that the relationship was rocky but she was committed to it. Having grown up with a single parent, she did not want the same for her children. It is only later that she learned that her commitment came at a cost of her wellbeing, safety and the cost of her children’s happiness.

Sue was the only woman who was recruited through the help of a support service. Her relationship lasted for at least four years. She separated from her partner about three years ago and was then involved in a lengthy court case.

Tamara is in her mid 30s with two young children. She was involved in two abusive relationships. The first one was when she was in her early 20s. She said that it was purely psychological, and she did not notice anything until they got married. She felt like he was treating her as his possession. Her second partner was exciting and fun when she met him and they formed a relationship when she found out she was pregnant. This relationship lasted for four years and was more abusive than the first. Tamara has been separated from her ex-partner for two years.

Tina is a 50-year-old woman with two teenage children. Her marriage lasted several years and ended over ten years ago. Her ex-husband was emotionally and physically abusive with the violent behaviour beginning soon after they married. She has participated in domestic violence prevention campaigns.

Violet is in her mid 20s and a mother of a young child. She began dating her older ex-husband when she was 20. She was enamoured with him from the start, and he was really good to her then. He was intelligent, good looking and became involved with her family. In contrast to men of her age that she had gone out with, he was a breath of fresh air. They were engaged early on in the relationship and were together just over three years. During the relationship she had no autonomy over her life. Since the separation she got back in touch with her friends and started a degree at university. She has been separated from her ex-husband for two years.
Appendix B
Plain language statement 1

Women’s lived experiences and awareness of emotional and psychological abuse in non-physically violent intimate heterosexual relationships and their effects.

You are invited to participate in research project: Women’s lived experiences and awareness of emotional and psychological abuse in non-physically violent intimate heterosexual relationships and their effects. I would like to provide some information about the research.

Please read this sheet carefully and be confident that you understand its contents before deciding whether to participate.

Who is doing the research?
My name is Alissa Lykhina. I am an international student at RMIT University, undertaking a PhD degree in the School of Global Studies, Social Science and Planning. My supervisors are Dr Suellen Murray and Dr Susan Costello.

The purpose of the research
My research topic is concerned with emotional and psychological abuse in intimate heterosexual relationships, in particular where men are the perpetrators. The research aims to develop a better understanding of the experiences of women (aged 18-65), who identify themselves as emotionally and/or psychologically abused in their intimate relationships. For my research, I define intimate partners as previous or current husband, partner, de facto or boy friend.

Having a better understanding of emotional and psychological abuse in intimate relationships could be beneficial for other women in relationships, the general public, future community education campaigns and support workers.

The questionnaire and interview
If you agree to participate, you will be involved in a questionnaire and an interview. Both questionnaire and interview are expected to take up to two hours. With your approval, the questionnaire and interview will be recorded to assist me to accurately record your responses. You will be able to amend your record of interview if necessary. A copy of the approved version of the interview can be given to you on request. The confidentiality of interview tapes, transcripts and notes will be strictly maintained both during and following the completion of the research. The questionnaire and interview is face to face and will be held at a time and place that is convenient and safe for you. I will attempt to arrange the questionnaires/interviews on support service premises, so support is available. To ensure that you are properly supported, I will interview only women who were or are currently linked in with a support service or counselor.

What does the research involve?

Questionnaire: I am looking to conduct semi structured questionnaires with 50 women on their experience of emotional and/or psychological abuse. You may choose not to answer any or all of the
questions. During this time you may say as much or as little as you want to. The questionnaire will include questions concerning:

- Have you experienced any of the behaviours?
- How often?
- How it made you feel?

The confidentiality of the questionnaire and notes will be strictly maintained both during and following the completion of the research. A report of the study may be submitted for related academic publication and conference presentations, but individual participants will not be identifiable in such a report.

**Interview:** The interviews are planned to be conducted with 15 to 20 women on their lived experience of emotional and/or psychological abuse. You may choose not to answer any or all of the questions. The interviews will include questions concerning:

- Your experience of emotional or psychological abuse
- The context/situation when these behaviours or acts occurred
- Your view on why the abuse occurred or continued
- When awareness of such abuse in relationship occurred and how
- The effects of this form of abuse
- Type of response, support and help you received or gained
- Your current understanding of emotional/psychological abuse

**Confidentiality, privacy and security**

Your name and contact details will be required to arrange questionnaire times and to send you documents that come out of the research. This personal information will not be used for any other purposes and will be held securely in a locked filling cabinet, which is separate from the interview materials, for five years, after the research is completed, at which point they will be shredded or otherwise destroyed.

The questionnaire is confidential. Your identity will not be identified, as the results from the questionnaires will be combined with those of others. You can access all your information, to ensure its accuracy and to amend if necessary, by contacting me. Only I and Dr Suellen Murray and Dr Susan Costello will have access to this data.

Your participation in the research project is voluntary and you may withdraw from the research at any time. If you become distressed during the questionnaire or interview and you do not wish to continue, I will conclude our meeting. If you chose to do so, any material collected from you will also be withdrawn at that time. If at any time during the conduct of the research project you have any concerns, please feel free to contact me to seek clarification. I will provide you with the contact details for support services, which you are encouraged to access should you feel you need them. Written informed consent will be sought before questionnaire takes place.

It is anticipated that the research analysis will be completed by December 2011 and final thesis submitted by August 2012. Findings from the research may also be presented to conferences and published in academic and other journals.

Any questions regarding the project may be directed to me on 99259914 or 0450720899 or by email on alissa.lykhina@student.rmit.edu.au. Any other queries, concerns or complaints
about your participation in this project may be directed to Suellen Murray on 9925-3929 or by email suellen.murray@rmit.edu.au, or the Executive Officer, RMIT Human Research Ethics Committee, Research & Innovation, RMIT, GPO Box 2476V, Melbourne, 3001.

Thank you for considering participation in this project.

Yours sincerely

Alissa Lykhina

Phone: 9925 9914, or 0450720899
Email: alissa.lykhina@student.rmit.edu.au

Any complaints about your participation in this project may be directed to the Executive Officer, RMIT Human Research Ethics Committee, Research & Innovation, RMIT, GPO Box 2476V, Melbourne, 3001. Details of the complaints procedure:
http://www.rmit.edu.au/governance/complaints/research
Women’s lived experiences and awareness of emotional and psychological abuse in non-physically violent intimate heterosexual relationships and their effects.

You are invited to participate in research project: Women’s lived experiences and awareness of emotional and psychological abuse in non-physically violent intimate heterosexual relationships and their effects. I would like to provide some information about the research.

Please read this sheet carefully and be confident that you understand its contents before deciding whether to participate.

Who is doing the research?
My name is Alissa Lykhina. I am an international student at RMIT University, undertaking a PhD degree in the School of Global Studies, Social Science and Planning. My supervisors are Dr Suellen Murray and Dr Susan Costello.

The purpose of the research
My research topic in concerned with emotional and psychological abuse in intimate heterosexual relationship. The research aims to develop a better understanding of the lived experiences of women (aged 18-65), who identify themselves as emotionally and/or psychologically abused in their intimate relationship/s. For my research, I define intimate partners as previous and current husband, partner, de facto or boy friend.

Having a better understanding of emotional and psychological abuse in intimate relationships could be beneficial for other women in relationships, the general public, future community education campaigns and support workers.

The questionnaire
If you agree to participate, you will be involved in a questionnaire which will take 10 to 30 minutes to complete. During this time you may say as much or as little as you want to. The confidentiality of the questionnaire and notes will be strictly maintained both during and following the completion of the research. A report of the study may be submitted for related academic publication and conference presentations, and support services, but individual participants will not be identifiable in such a report. To ensure that you are properly supported, I will only interview women who were or are currently linked in with a support service or counselor.

What does the research involve?
I am looking to conduct a questionnaire with 50 women on their experience of emotional and/or psychological abuse. You may choose not to answer any or all of the questions. During this time you may say as much or as little as you want to. The questionnaire will include questions concerning:

- Have you experienced any of the behaviours?
- How often?
- How it made you feel?
Confidentiality, privacy and security
Your name and contact details will be required to arrange questionnaire times and to send you documents that come out of the research. This personal information will not be used for any other purposes and will be held securely in a locked filling cabinet, which is separate from the interview materials, for five years, after the research is completed, at which point they will be shredded or otherwise destroyed.

The questionnaire is confidential. Your identity will not be identified, as the results from the questionnaires will be combined with those of others. You can access all your information, to ensure its accuracy and to amend if necessary, by contacting me. Only I and Dr Suellen Murray and Dr Susan Costello will have access to this data.

Your participation in the research project is voluntary and you may withdraw from the research at any time. If you chose to do so, any material collected from you will also be withdrawn at that time. If at any time during the conduct of the research project you have any concerns, please feel free to contact me to seek clarification. I will provide you with the contact details for support services, which you are encouraged to access should you feel you need them. Written informed consent will be sought before questionnaire takes place.

It is anticipated that the research analysis will be completed by December 2011 and final thesis submitted by August 2012. Findings from the research may also be presented to conferences and published in academic and other journals.

Any questions regarding the project may be directed to me on 0399259914 or 0450720899 or by email on alissa.lykhina@student.rmit.edu.au. Any other queries, concerns or complaints about your participation in this project may be directed to Suellen Murray on 9925-3929 or by email suellen.murray@rmit.edu.au, or the Executive Officer, RMIT Human Research Ethics Committee, Research & Innovation, RMIT, GPO Box 2476V, Melbourne, 3001.

Thank you for considering participation in this project.

Yours sincerely

Alissa Lykhina

Phone: 9925 9914, or 0450720899
Email: alissa.lykhina@student.rmit.edu.au

Any complaints about your participation in this project may be directed to the Executive Officer, RMIT Human Research Ethics Committee, Research & Innovation, RMIT, GPO Box 2476V, Melbourne, 3001. Details of the complaints procedure: http://www.rmit.edu.au/governance/complaints/research
Appendix C
Consent form

RMIT HUMAN RESEARCH ETHICS COMMITTEE
Prescribed Consent Form For Persons Participating In Research Projects Involving Interviews, Questionnaires, Focus Groups or Disclosure of Personal Information

<table>
<thead>
<tr>
<th>COLLEGE OF DESIGN AND SOCIAL CONTEXT</th>
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<tbody>
<tr>
<td>SCHOOL/CENTRE OF COLLEGE OF DESIGN AND SOCIAL CONTEXT</td>
</tr>
<tr>
<td>Name of participant: Design and Social context</td>
</tr>
<tr>
<td>Project Title: School of global studies, Social science and Planning</td>
</tr>
</tbody>
</table>

Women’s experiences and awareness of emotional and psychological abuse in non-physically violent intimate heterosexual relationships and their effects.

Name(s) of investigators: (1) Alissa Lykhina

1. I have received a statement explaining the interview/questionnaire involved in this project.
2. I consent to participate in the above project, the particulars of which - including details of the interviews or questionnaires - have been explained to me.
3. I authorise the investigator to interview me or administer a questionnaire.
4. I give my permission to be audio taped
5. I understand that my name and identity will not be used in this research project or any publications
6. I acknowledge that:
   a) Having read the Plain Language Statement, I agree to the general purpose, methods and demands of the study.
   b) I have been informed that I am free to withdraw from the project at any time and to withdraw any unprocessed data previously supplied.
   c) The project is for the purpose of research. It may not be of direct benefit to me. The privacy of the information I provide will be safeguarded. The privacy of the personal information I provide will be safeguarded and only disclosed where I have consented to the disclosure or as required by law.
   d) The security of the research data is assured during and after completion of the study. The data collected during the study may be published, and a report of the project outcomes in the form of my PhD thesis will be provided to the RMIT University library. Any information which may be used to identify me will not be used unless I have given my permission (see point 5).
   e) I am currently linked in with a counsellor or support service who I can contact if need be.

Participant’s Consent

Name: ___________________________ Date: ___________________________
(Participant)

Name: ___________________________ Date: ___________________________
(Witness to signature)

Participants should be given a photocopy of this consent form after it has been signed.

Any complaints about your participation in this project may be directed to the Executive Officer, RMIT Human Research Ethics Committee, Research & Innovation, RMIT, GPO Box 2476V, Melbourne, 3001. Details of the complaints procedure are available at: http://www.rmit.edu.au/governance/complaints/research
Appendix D
Interview Questions

1) Tell me about your experience of emotional or psychological abuse from your point of view
   - e.g. behaviours you may have experienced
   - which behaviour were more common or occurred more often
   - which behaviour were day to day occurrences
   - which behaviour you believe were subtle
   - which behaviour you believe were more overt, obvious, in the open

2) What was the context/situation when these behaviours or acts occurred?

3) In what manner were these behaviours done (e.g. loving, caring, joking, controlling, angry or accompanied by screaming)
   - have any of the behaviours shifted
   - did they change over time

4) What is your view on why the abuse occurred or continued?

5) At what point did you become aware or began to identify the relationship as psychologically and/or emotionally abusive?
   - What triggered this turning point?
   - Was it a turning point or gradual realisation, if so what were the steps

6) What are/were the effects of this form of abuse?
   - On your physical wellbeing
   - On your emotional wellbeing
   - On your psychological wellbeing?
   - On your perception of yourself then and now
   - What type of EPA affected you the most? The least? How?

7) What kind of response or support did you receive from family and friends regarding the abuse?

8) What kind of support did you receive from support services
   - To what extent did support services assist you, considering your experience of EPA?
   - How did it help you

9) What is your understanding of EPA now?
   - How do you see or perceive your self now

10) What helped you during this experience?
    - What helped you to deal with this experience?
    - What personal strengths helped you deal with this experience
    - What personal strengths helped you deal with the effects of this abuse?
    - What helped you most in moving beyond the abuse and effects? (if applicable?)
    - What personal strength have you gained from this experience?

11) Do you have any suggestions for other women who are or have experienced such abuse?

Ending: How did the interview make you feel?
Appendix E

Questionnaire

This questionnaire is designed to identify the non-physical behaviours or acts that you may have experienced in your adult (since 18) intimate relationship with your partner. By adult intimate relationships, I mean husbands, partners or boyfriends for longer than one month. Furthermore I would also like to know how hurt or upset you were with any of the experienced behaviours and how often have you experienced any of these behaviours or acts during the relationship. This will provide an understanding of the behaviours women experience and how it makes them feel.

The following list represents only some of the behaviours that men may perpetrate towards their partners. The list was combined from several different emotional and psychological inventories, designed by researchers in the field. If you would like to talk about your experience of emotional and psychological abuse during the survey, you are more than welcome to say as much or as little as you want. It is not a test, so there are no right or wrong answers. Your answers are strictly confidential.

There are some demographic questions. If you do not wish to answer any of these questions, please leave them blank.

Demographics:

1) What is you age: ______

2) How do you identify your ethnic background?

3) What is the highest level of education you have completed?
   • Year 10 & below □  TAFE □
   • Year 12 and below □  University □

4) What has been your main area of paid employment? (e.g. retail, hospitality, education, doctor)

5) Do you have children? Yes □  If yes, how many _____ Ages______________  No □

6) Are you currently in a relationship? Yes □  Don’t know □  (Go to Q9)  No □ (Go to Q9)

7) Do you consider it to be an equal, trusting and safe relationship? Yes □  Don’t know □  No □

8) How long have you been in this relationship? ______________

9) Were any previous relationships unequal, untrusting or unsafe? Yes □  How many? _____  No □
   Don’t know □

10) How long have you been in this previous relationship/s? ____________________________

Anything else you would like to add about the relationship/s

Thank you for your responses
Appendix E continued…

Please identify the types of behaviours that you may have experienced from your partner. If you have experienced the behaviour, please tell me how hurt or upset you were by it and how often you have experienced the following behaviour or action on a scale of 1 to 5 where: 1 = Never; 2 = Rarely; 3 = Occasionally; 4 = Frequently; 5 = Very Frequently.

### Everyday things/behaviours or acts

**Has your partner ever…**

<table>
<thead>
<tr>
<th>Behaviour Description</th>
<th>How often have you experienced any of these behaviours/acts during relationship</th>
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<tbody>
<tr>
<td>1) checked up on you and/or made you account for your whereabouts</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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</tr>
<tr>
<td>This never hurt or upset me</td>
<td>This rarely hurt or upset me</td>
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<tr>
<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<tr>
<td>2) become upset with or criticised the way you took care of the house (e.g. cleaning, cooking, laundry)</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<tr>
<td>This never hurt or upset me</td>
<td>This rarely hurt or upset me</td>
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<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<tr>
<td>3) interfered with or did not allow you to participate in daily activities (such as go to work, school or self improvement activities)</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<td>This never hurt or upset me</td>
<td>This rarely hurt or upset me</td>
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<tr>
<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<td>4) denied you private time/having time for yourself</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<tr>
<td>This never hurt or upset me</td>
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<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<td>5) prevented or did not allow you to leave the house</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<td>This never hurt or upset me</td>
<td>This rarely hurt or upset me</td>
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<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<td>6) tried to control your money</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<tr>
<td>This never hurt or upset me</td>
<td>This rarely hurt or upset me</td>
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<tr>
<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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<td>7) thrown, damaged or broken your personal belongings</td>
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<tr>
<td>How much did this hurt or upset you? (Please circle below)</td>
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<td>This never hurt or upset me</td>
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<tr>
<td>This sometimes hurt or upset me</td>
<td>This often hurt or upset me</td>
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Appendix E continued…

8) driven recklessly while you were in the car
How much did this hurt or upset you? (Please circle below)

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<tbody>
<tr>
<td>This never hurt</td>
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<td>or upset me</td>
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<td>This sometimes hurt</td>
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<td>This often hurt</td>
<td>4</td>
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<td>or upset me</td>
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9) discouraged you from participating in activities he is not a part of
(e.g. activities of your interest)
How much did this hurt or upset you? (Please circle below)

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<td>This never hurt</td>
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<td>This often hurt</td>
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<td>or upset me</td>
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</table>

10) sulked or refused to have any discussion of a problem, disagreement
and/or topic of your interest
How much did this hurt or upset you? (Please circle below)

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<tbody>
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<td>This often hurt</td>
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</tr>
<tr>
<td>or upset me</td>
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</tbody>
</table>

11) withheld affection, approval or appreciation from you
How much did this hurt or upset you? (Please circle below)

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<td>4</td>
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<tr>
<td>or upset me</td>
<td></td>
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</tbody>
</table>

12) brought up something from the past to upset or hurt you
(e.g. when he was upset with you)
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
<th>6</th>
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<tbody>
<tr>
<td>This never hurt</td>
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<td>This often hurt</td>
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<tr>
<td>or upset me</td>
<td></td>
</tr>
</tbody>
</table>

Relationship with him (Interpersonal relationship)

13) been insensitive to your feelings (e.g. showed lack of compassion, not liked
you to or not let you talk about your feelings)
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>This never hurt</td>
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</tr>
<tr>
<td>or upset me</td>
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</tbody>
</table>

14) brought something from the past to upset or hurt you
How much did this hurt or upset you? (Please circle below)

<table>
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</thead>
<tbody>
<tr>
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<td>4</td>
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<tr>
<td>or upset me</td>
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</table>
Appendix E continued…

15) tried to get you to apologise for something that wasn’t your fault
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
<th>This never hurt</th>
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<td>or upset me</td>
<td>or upset me</td>
<td>hurt or upset me</td>
<td>or upset me</td>
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</table>

16) lied, deceived or mislead you about any aspect (e.g. involving you or relationship)
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
<th>This never hurt</th>
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<td>or upset me</td>
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</tbody>
</table>

17) become angry or hurt, when you talked about him or your relationship
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
<th>This never hurt</th>
<th>This rarely hurt</th>
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<td>or upset me</td>
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</table>

18) displayed radical mood changes (e.g. nice one moment, angry/rude the next)
How much did this hurt or upset you? (Please circle below)

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<th>This never hurt</th>
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</table>

19) had a look or stance that frightened you
How much did this hurt or upset you? (Please circle below)

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</table>

20) told you no one else would want you
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
<th>This never hurt</th>
<th>This rarely hurt</th>
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</table>

21) told you, you couldn’t manage or take care of yourself without him
How much did this hurt or upset you? (Please circle below)

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<td>or upset me</td>
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</table>

22) accused you of having an affair
How much did this hurt or upset you? (Please circle below)

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<th></th>
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<th>This rarely hurt</th>
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</table>

23) blamed you for his violent behaviour and/or his problems
How much did this hurt or upset you? (Please circle below)

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<th></th>
<th>This never hurt</th>
<th>This rarely hurt</th>
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</tbody>
</table>
Appendix E continued…

24) directly dominated and/or forced obedient behaviours (e.g. ordered you around or made certain demands)  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

25) threatened to end the relationship or abandon you  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

26) threatened to evict you or forced you to leave the house  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

27) yelled and screamed at you  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

28) called you names or sworn at you (e.g. failure, bitch, whore)  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

29) threatened to hurt you  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

30) threatened to hurt or kill himself  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me

Things about/related to you

31) decided on what should be your personal choices (e.g. who you made friends with, the way you dressed, what you ate or whether you could drink or smoke)  
How much did this hurt or upset you? (Please circle below)

This never hurt
or upset me
This rarely hurt
or upset me
This sometimes
hurt or upset me
This often hurt
or upset me
Appendix E continued…

32) made you feel guilty about something (e.g. what you have or haven’t done/said) ______
How much did this hurt or upset you? (Please circle below)

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<th>This never hurt</th>
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33) said something to belittle/demean/put-down you (e.g. you are a bad partner, parent, worthless) ______
How much did this hurt or upset you? (Please circle below)

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34) treated you as or made you feel inferior or unequal to him ______
How much did this hurt or upset you? (Please circle below)

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35) criticised you if you did not live up to his perception of traditional gender role ______
How much did this hurt or upset you? (Please circle below)

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36) criticised your intelligence ______
How much did this hurt or upset you? (Please circle below)

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37) ridiculed or insulted your identity (e.g. religion, race, heritage, class, values or beliefs) ______
How much did this hurt or upset you? (Please circle below)

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</table>

38) put-down/criticised your physical appearance/attractiveness ______
How much did this hurt or upset you? (Please circle below)

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<td>or upset me</td>
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</table>

39) made you question yourself (e.g. your insecurities, confidence or abilities) ______
How much did this hurt or upset you? (Please circle below)

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<td>or upset me</td>
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</table>
Appendix E continued…

40) made you question your sanity (e.g. tried to convince or make you feel/believe that you were crazy, emotionally unstable)  
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
<th>This often hurt or upset me</th>
</tr>
</thead>
</table>

41) insulted or humiliated you in front of others  
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
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<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
<th>This often hurt or upset me</th>
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</table>

42) restricted or controlled your independence or social life (e.g. use of the car, telephone or e-mails)  
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
<th>This often hurt or upset me</th>
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</table>

**Relationship with others (Social relationships)**

43) not allowed you to, interfered with or discouraged you from socialising with your male friends or other men  
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
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</table>

44) not allowed you to, interfered with or discouraged you from socialising with your female friends  
How much did this hurt or upset you? (Please circle below)

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<thead>
<tr>
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<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
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</tr>
</thead>
</table>

45) not allowed you to, interfered with or discouraged you from seeing or talking to your family  
How much did this hurt or upset you? (Please circle below)

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<tr>
<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
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</table>

46) acted rudely to guests/friends/family member to discourage contact or visits  
How much did this hurt or upset you? (Please circle below)

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<th></th>
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<th>This sometimes hurt or upset me</th>
<th>This often hurt or upset me</th>
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</thead>
</table>
Appendix E continued…

47) threatened to hurt your family or friends
How much did this hurt or upset you? (Please circle below)

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<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
<th>This sometimes hurt or upset me</th>
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</table>

48) threatened to take away or hurt children or pets (if applicable)
How much did this hurt or upset you? (Please circle below)

<table>
<thead>
<tr>
<th></th>
<th>This never hurt or upset me</th>
<th>This rarely hurt or upset me</th>
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Appendix F
Advertisement invitation to participate in a research project

Women and emotional/psychological abuse.

Did your previous partner or does your current partner:
- become jealous without a reason?
- prevent you from seeing friends or family?
- deny you access to family assets such as bank accounts, credit cards, or the car?
- control finances and force you to account for what you spend?
- insult you or call you degrading names?
- humiliate you in front of your children or other people?
- make you feel bad about your self or think you are crazy?
- turn minor incidents into a major argument?

If these things happened to you, I would like to talk to you about it as part of a research project. The research aims to develop a better understanding of the lived experiences of women aged 18 to 65 years who identify themselves as emotionally and/or psychologically abused in their current or past heterosexual intimate relationships. The research involves a 10 to 30 minute questionnaire on your experience of behaviours involved in this form of abuse, the frequency of them and how they made you feel. You may also agree to participate in an interview along with the questionnaire.

Everything that is reported will be treated confidentiality and you will be free to withdraw from the study at any time if you change your mind about participation.

If you are interested to talk to me or have any questions regarding the research please contact Alissa Lykhina on 03992 59914 or 0450720899 or by e-mail on alissa.lykhina@student.rmit.edu.au.