

AN INVESTIGATION INTO THE COPING MECHANISMS OF
SURVIVORS OF DOMESTIC VIOLENCE

GUMEDE SINQOBILE ANGELICA

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Department of Psychology
University of Zululand, KwaDlangezwa
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DECLARATION

I hereby declare that this dissertation is my own work, and it has not been submitted before for any degree or examination in any other University, and that all the sources I have used or quoted have been indicated and acknowledged as complete references.

Gumede S.A

Date

DEDICATION

This dissertation is dedicated to my cherished parents and family.

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ABSTRACT

Domestic violence is a global issue, and it is affecting many people of different cultures and backgrounds around the world. South Africa is one of the countries which are highly affected by various forms of violence. Different people are using different coping mechanism in dealing with violence in general. This study investigates the coping mechanisms of survivors of domestic violence. It looks at the various coping mechanisms that each survivor employs to deal with such experience. This study employed qualitative research design and the target population were women. A sample of ten participants was recruited from the Empangeni Magistrate's Court, and they all participated voluntarily. Only participants who had been involved in domestic violence for at least six months were asked to participate in the study, and those women who had taken the step of going to court and reporting the matter, or laying charges. The process of getting participants was a challenge and many survivors were reluctant to participant in the study. To collect data, semi structured interviews were used and during the interview a tape recorder was used and content analysis was used to analyses the data. The findings of this research indicated the following: survivors of domestic violence view it as physical abuse. It seems most survivors have experienced this type of abuse. Others indicated that it is verbal and emotional abuse and extramarital affairs that affect them. To them they are other forms of domestic violence, and they have experienced them in their relationships. The lack of communication, sexual needs and controlling behaviour were also indicated to have been experienced by survivors of domestic violence in this study. As regards the second and third questions, which focused on coping mechanisms, survivors of domestic violence indicated to have used problem-focused strategies as a way of coping. They break the silence by reporting the matter to court, and claiming a protection order. Some participants are religious, and they pray to God. Some women, though, seemed to use negative coping strategies, such as conditioning themselves, tolerating the violence and keeping silent. In conclusion, it seems like there is still a great deal to be done in terms of educating the society and empowering victims of domestic violence. It is then recommended that the methodology to be changed by researchers on the same topic and there is also a need to educate community and empowerment to the survivors of domestic violence. The media can also play a role in broadening the awareness of domestic violence.

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CHAPTER ONE: OVERVIEW OF THE STUDY

1.1 Introduction

Violence against women is a serious problem that affects all countries including South Africa. Domestic violence, in particular, can have various effects on the physical and mental well-being of surviving victims. In the long run survivors of domestic violence can be at risk of experiencing health problems such as depression, chronic pain and alcohol abuse, and it can cause long-lasting trauma to both the survivors and their families (Rodriguez, 2011). According to Hoque, Hoque and Kader (2009), domestic violence is usually against women, and it is a major problem in South Africa: it creates a barrier to development, and it is recognized as both a serious health issue and a violation of what Americans call the right to life, liberty, and the pursuit of happiness.

This type of violence is a world-wide plague that knows no race, gender, class or nationality, affecting anyone and everyone. Survivors of domestic violence are often left to deal with the aftermath long after their traumatic ordeal. They therefore have to devise different coping mechanisms to help them deal with these bad experiences. Some survivors choose to be in denial, never even admitting that they have been a victim of abuse. Others choose to confront the issue head-on, and actively seek help and advice to overcome the abuse.

This study aims to explore the various coping skills and mechanisms survivors use when they experience domestic violence.

Domestic violence is commonly experienced by women, and often perpetrated by men, especially partners or ex-partners. Any woman can experience domestic violence regardless of race, culture, age, gender, ethnic or religious group, class, disability or lifestyle. Domestic violence can take place in lesbian, gay, bi-sexual and transgender relationships, and can also involve other family members and children. It is a health, economic, developmental, educational and human rights issue. Some women are unable to make their own decisions, or even protect themselves and their children for fear of further repercussions (Digest, 2000). Women who experience domestic violence tend to ignore what's going on, and this might be because they

are afraid of being stigmatized in their society. They might feel like failures and show feelings of guilt and shame. They also fear to take action and visit services which might help them, so they suffer silently (Crawford, Kalifani & Hill, 2009).

A study by Rodriguez (2011) has shown that some battered women have very sound psychological well-being and they are positive about life. It shows that they seek social support, accept responsibilities and have planned problem-solving coping mechanisms, which they use when they experience domestic violence. Battered women should not prolong their stay at home, or in the abusive relationship, but should look for help to promptly restore their shattered psychological integrity.

According to Rodriguez (2011: 111-112), the survivors of domestic violence, if their psychological well-being is sound, they can survive by means of problem-focused types of coping mechanism. "However, emotion-focused coping mechanisms are used when psychological wellbeing is not in excellent status". If survivors of domestic violence seek help, they might need constant supervision and monitoring, so as to check their progress, even though they may still be going for therapy.

One of the biggest issues in domestic violence is the murder of intimate partners, mostly of women by men. Even if the victim survives, according to Morgan and Chadwick (2009: 3) domestic violence is responsible for various health problems for the survivor. "It can cause physical injuries, anxiety, depression, impairing social skills and increasing the likelihood that the survivor will engage in harmful practices". Survivors may become drug addicts, or even physically injure themselves.

In Rahmatian (2009: 62), social learning theory explains that "domestic violence is not due to a chemical imbalance, nor can we blame it totally on alcohol, drugs, depression, nor a host of similar characteristics". People who have once experienced or witnessed domestic violence in the past are likely to be involved in future acts of domestic violence. Imitation of certain behaviour is one of the concepts of social learning theory in the process of imitation, aggressive behaviour can pass from one generation to another.

In Loue (2001), the feminist approach views women abuse as being the result of an imbalance of power between men and women. Women become victimized because they fall into learned helplessness behaviour. Fogle (1978) explained learned helplessness behaviour as a condition whereby an individual suffers from a sense of powerlessness which may arise from unpleasant events. That individual may feel as if she or he lacks control over a certain situation. Bowman (2003: 852) posits that when looking at domestic violence in Africa, gender inequality seems to be the main issue, as in many African systems of customary law, women have no rights or say in culture. Women are excluded from many activities, for example, the ownership of land. If the systemic inequality between men and women is not addressed, the problem of violence will continue.

According to Summers and Hoffman (2002: 175), the circle of violence consists of three separate and distinct phases. The first stage is known as tension building, and it can last for a few weeks to a year. In this stage the perpetrator becomes irritable, and verbally aggressive, and the victim tolerates the behaviour in the hope that the abuse will end. "The first stage creates tremendous psychological anguish in the victim". The second stage can be called the explosion stage. In this stage the perpetrator frequently loses control, and can even be physically abusive towards the victim. Once the perpetrator's rage subsides, perpetrator and victim move to the third stage which is the honeymoon. In this stage the perpetrator becomes remorseful, and he requests forgiveness from the victim. The perpetrator may buy gifts and give more attention to the victim in this stage. Women then who are victims of domestic violence are categorized as having battered woman's syndrome, which has four general characteristics: women believe that the violence is their fault; they are unable to place the responsibility for the violence elsewhere; they fear for their lives and their children; and they have an irrational belief that the abuser is omnipresent (Rodrigues, 2011). This syndrome makes it likely for these women to stay in the relationship and does not utilize any coping mechanisms to help themselves.

1.2 Definition of term(s)

According to Alpert (2010: 1), domestic violence is intimate partner violence, and it can be defined as "a deliberate pattern of coercive control with or without physical violent behaviour". It can be perpetrated by someone who is currently in an intimate

relationship, or someone who was in the relationship. The perpetrator and the victim could be anyone including married, separated, divorced or single individuals. They could also be both male and female or transgender. In Buzawa and Buzawa (1996: 13), domestic violence is described as “violence between intimates living together or who have previously cohabited”.

Domestic violence can include various behaviour, it could be physical, when the perpetrator slaps, beats, burns or even stabs the victim. It could also be sexual, when the perpetrator forces sexual intercourse. Psychological abuse is also part of domestic violence, when the perpetrator intimidates, humiliates and is verbally aggressive towards the victim. This behaviour may be observed in the perpetrator as she or he may be intent on emphasizing control and dominance. Economical abuse is also an act of domestic violence, whereby when the perpetrator might refuse to give his or her partner money, food, health care or the opportunity of employment (Alpert, 2010).

1.2.1 Coping

It is “constantly changing cognitive and behavioural efforts to manage specific external and internal demands that are appraised as taxing or exceeding the resources of the person” (Sabina & Tindale, 2008).

1.3 Statement of the problem

According to Buzawa and Buzawa (1996:20), domestic violence is a very critical issue affecting a large number of people, yet not enough is being done to make people aware of the damage it causes. In America women annually experience more than five times as many violent attacks by an intimate partner than do men.

The prevalence of domestic violence is different when comparing developed and developing countries. In developing countries it is evident that violence is associated with poverty and low socio-economic status. In South Africa the demographic and health surveys that were done in 1998 and 2003 show a 35.5% increase in people affected by domestic violence. The increase was mostly in rural areas among 34- to 44-year-old women. “The first national femicide study found that four women are

killed by an intimate partner every day in South Africa” (Hoque, Hoque & Kader, 2009: 34).

1.4 Motivation for the study

The researcher observed that domestic violence is a serious problem and many women seem to be scared to talk about it, thus increasing their psychological suffering. Domestic violence seems to be continuing to increase globally. The researcher hopes to identify and study the coping mechanisms which some women use to sustain their psychological functioning despite the difficult situations.

1.5 Value of the study

The results of the study are likely to contribute positively to the existing literature on coping strategies used by the South Africans who have faced domestic violence. It is further hoped that coping programmes can be formulated from the data collected from in this study. The findings will help the practitioners working with survivors of domestic violence and new strategies and interventions can be developed.

1.6 Resumé

This chapter is an introduction to the study of domestic violence. The next chapter explores more of the literature of domestic violence. It looks at the previous studies, and how the phenomenon of domestic violence has been addressed both locally and internationally.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

In this chapter, the literature that is relevant to the study is discussed to form the foundation for the study. A number of theories that are relevant in the explication of the concepts of perpetrator and survivors of domestic violence are discussed in detail to illustrate the behaviour patterns that are learned early in life and their implications later in life.

2.2 Theories

According to Hyde-Nolan and Juliao (2012), there are a number of different psychological theories that focus on causes of family violence. Most of them acknowledge the abuse of power and control by the perpetrator, but the role of control and power differs in different theories.

2.2.1 Psychoanalytic Theories

This approach focuses on one's internal psychological processes that create an urge to be abusive or to allow abusive behaviour towards oneself. Two psychodynamic theories are discussed below, namely object relations theory, and attachment theory.

2.2.1.1 Object Relations Theory

According to Hyde-Nolan and Juliao (2012: 6), this theory suggests that humans are motivated from their earliest childhood by the need for significant relationships with others". In object relations theory, objects are referred to as 'others'. The early relationship an individual develops plays a role in psychic development, and helps in the individual's relationships in future. Object relations theory suggests that an individual begins building his/her relationships during infancy and childhood. One may develop mental representations of other people, of oneself, and one's relationship with other individuals. The mental representations then play a role as they can influence an individual's interpersonal relationships.

Object relations theory implies that the early experience of a child is important. The first relationship between the child and the primary caregiver is very important as it can influence the development of a child with others and with him or herself. The

child's first year is important as it can ensure that he/she develops adequate emotional health in his/her later life. A child who lacks sufficient nurturing to maintain healthy self-esteem finds it difficult to maintain or control his/her emotional responses. The need for dependency may not be met during childhood, and this may persist into one's adulthood. The need to fulfil one's dependency when one is an adult can become demanding and desperate, and this can lead to one's experiencing domestic violence or becoming an abuser oneself (Hyde-Nolan & Juliao, 2012).

2.2.1.2 Attachment Theory

Attachment can be explained as a reciprocal, enduring emotional bond between the child and the primary caregiver, and both the infant and the caregiver play a role in producing a quality relationship. Attachment theory indicates that an infant can develop a working model of his/her relationship with the caregiver. If the primary caregiver responds in the expected way and continues to do so, the infant's model holds up. But if the caregiver is inconsistent in her responses, the infant can revise his/her model and "the security of attachment changes". "The basic concept underlying the theory of attachment is that adults have the power to both protect and provide a sense of security for their children". This theory and social isolation theory seem to agree that neglecting a child and child abuse are related to the isolation of the relationship between the child and the parent from social support systems (Hyde-Nolan & Juliao, 2012: 7).

When a child is ill, exhausted or threatened, she or he might go to the caregiver for protection and security. The secure base of a relationship is visible once the attachment bond between the infant and the caregiver is formed. Attachment is not always positive: secure attachment is preferred, and is very common. Avoidant, ambivalent and disorganised attachments can be produced in the relationship between the child and the parent or primary caregiver, but they are not common. Attachment theory indicates that child abuse or a child experiencing violence can lead to him/her having an insecure and anxious attachment, and it can be avoidant, disorganised or even ambivalent. If a child has a distorted way of relating to others at a young age, this will have a direct impact on his/her positive internal model of self. Antisocial behaviour is found to be related to his/her early experience and a pattern

of insecure attachment. Insecure attachment is found in most cases with children who were neglected and experienced physical abuse. The child who shows antisocial behaviour is likely to be a perpetrator of domestic violence (Hyde-Nolan & Juliao, 2012). When explaining this theory the researcher was exploring the understanding of domestic violence as a whole, including the perpetrators.

2.2.2 Control Theory

This theory looks at family conflicts as a result of one family member gaining and maintaining control and power in his/her relationships. The perpetrator's motivation is to obtain power and control over other family members. He/she may see the need to be in control over the way other members of the family feel and think. He/she may use different methods to gain control over other family members. He/she may use "coercion, isolation, economic abuse or even denial of personal blame". The victim might find it difficult to challenge the abuser, and as a result the victim might try to change his/her own behaviour so as to avoid continued abuse. The perpetrator may intimidate the victim by isolating him/her contact with other people (Hyde-Nolan & Juliao, 2012: 9).

According to Costa and Babcock (2008), men who are abusive in their intimate relationships with their partners respond differently by fighting as compared to men who are not violent. The violence in an intimate relationship may be used to sustain power and control over the other partner. Davis (2008) agrees that it is evident that problems related to power and control also play a role in violent behaviour in an individual. This inequality of power and control can affect victims regardless of their gender, age, and sexual orientation. Most domestic violence involves the domination of the powerful, and threats that could harm the victims. According to Durant, Kephart and McGowan (2008: 7), and Davis (2008), women stay in an abusive relationship because they are not financially independent and the finances are controlled by the partner.

2.2.3 Cognitive Behavioural Theory

This theory looks at how violent behaviour and abuse is learnt and transferred from one family member to another. It further tries to explain why the behaviour is transmitted from one generation to another, and why it might skip a generation. The

theory looks at an individual's level factors that can contribute to family violence. Two cognitive and behavioural theories are discussed: social learning theory and theory of learned helplessness (Hyde-Nolan & Juliao, 2012).

2.2.3.1 Social Learning Theory

Social learning theory suggests that individuals learn their social behaviour through observing and imitating others. Children observe important elements of behaviour, and imitate them. Social learning theory suggests that an individual shows aggressive behaviour towards his or her family members because the aggression is learned through both operant conditioning and observation. (Hyde-Nolan & Juliao, 2012). Haeseler (2013), Williams, Foster and Watts (2013), and Bhatta (2014) agree in their studies that domestic violence might be closely associated with witnessing domestic violence during the perpetrator's childhood. The person who experiences domestic violence in childhood is likely to be a victim or perpetrator of violence in adulthood. If a child experiences her mother as being a victim of domestic violence and she does nothing to change that, but becomes more submissive, it is likely that that child in adulthood will be a victim of domestic violence because that submissive behaviour has been learned. It is the same with perpetrators: the child witnesses the violence and will think being violent is the solution to all issues.

Roberts, Hegarty and Feder (2006) support that social learning looks at violence as learnt behaviour from people a child considers as role models. Most perpetrators of violence and victims come from families where the father was abusive towards them. Violence may be perpetrated by one generation on another, thus continuing the cycle of violence. Some perpetrators of domestic violence do not come from violent families or homes, but they are, nevertheless, abusers.

“Operant conditioning is the strengthening of behaviours through positive and negative reinforcement, as well as the suppression of behaviours through punishment” (Hyde-Nolan & Juliao, 2012: 11-12). Social learning theory suggests that when children grow up they receive feedback from other people about their behaviour. From that, they start to develop standards for judging their own behaviour, and seek out models who match their standards. Children who grow up in abused families may learn to become violent themselves. Some studies indicate that

children who observe their fathers abusing their mothers at a young age are also likely as adults to abuse their own partners or wives (Hyde-Nolan & Juliao, 2012). This is supported by the study done by Rahmatian (2009) which suggests that people who have been exposed to domestic violence when they were young are liable to perpetrate a high degree of intimate violence. The same study shows that with 48% of perpetrators of domestic violence one of their family members had been a victim of it. 72% of offenders reported that they were first exposed to domestic violence as when they were juveniles, and only 28% reported that their first exposure to violence was when they were adults. The study shows that men who at a young age were exposed to violence are likely to be perpetrators of violence themselves. This is because they have learnt that the society accepts the abuse of women, and they continue their violent behaviour (Rahmatian, 2009: 62-66).

2.2.3.2 Learned helplessness

This theory explains why the victims of domestic or family violence stay in relationships after they have experienced the abuse. This theory was originally suggested to explain the loss of will that is related to recurring obstacles to escape from an unpleasant situation.

Victims of domestic violence may learn that their behaviour may have contributed to the problem; as a result, they may stop that behaviour even if the problem is no longer there. They have learned to be helpless after being exposed to the violent violence, and they do not see how to escape from it. (Hyde-Nolan & Juliao, 2012).

Apart from the learned helplessness explanation, Wilson (1997) indicates that victims of domestic violence encounter a number of obstacles when trying to break the cycle of victimization in the relationship. They may be faced with the following difficulties: (i) Personal obstacles, such as fear and shame, unavailable resources, and no emotional support. (ii) Cultural obstacles, such as beliefs about marriage in certain cultures; gender roles; and their religious beliefs. (iii) Relationship obstacles, such as financial instability. And (iv) institutional obstacles: such as the lack of services in the area and lack of knowledge on what steps to take when confronted with violence.

2.3 Factors of Domestic violence

There are various issues to be considered in their association with domestic violence, and they will be discussed briefly below. Sociology looks at social structures such as work, school, and family as having an impact on people which can result in violent behaviour. There are risk factors such as age, gender, race, stress, socio-economic factors and alcohol abuse which can all contribute to the violence. Unemployment, alcohol and stress have been found to play a big part in causing violent behaviour (Roberts, et al., 2006).

2.3.1 Gender

Previous studies on domestic violence indicate that in domestic violence, men are mostly the perpetrators and women the victims. This difference could be due to the fact that within the society, it is acceptable for men, rather than women, to show violent behaviour. The society may expect certain behaviour from women such as: being submissive and passive, and that might indirectly encourage violent behaviour in men (Mears, 2003).

According to Davis (2008: 16), it is evident that about 95% of domestic violence is committed by men as compared to women. Physical abuse is the most common type, and it is committed on women more than men. If men experience physical abuse they tend to ignore the matter instead of reporting it and this might be the reason that less information is known about their experience of domestic violence. Some people may view psychological pain as less painful than physical pain, but it is evident that psychological pain does hurt as much as physical pain. An individual does not need to have a broken nose or a black eye to be viewed as a victim of domestic violence.

2.3.2 Alcohol

There is a debate whether alcohol abuse does play a role in domestic violence or not. Mears (2003) suggests that the cause of domestic violence might not be alcohol abuse; there might be underlying causes. Mears (2003) He suggests that the society may expect certain behaviour such as violence after consumption of alcohol, but the cause of violence may not be alcohol: it can be merely an excuse for such behaviour.

2.3.3 Race/ethnicity

Some researchers indicate that domestic violence takes place across all races, but other studies suggest that it is more common in minority groups and to people in a low socio-economic class. Some researchers claim that certain racial groups tolerate domestic violence, and that can contribute to the high rate of violence within that group. It is difficult, though, to be certain which racial group has a high rate of domestic violence, and the data obtained from police do not give a clear explanation in this regard (Mears, 2003).

2.3.4 Family context

Research indicates that people who grow up in violent families and homes are at high risk of becoming violent in their intimate relationships. It suggests that violence is learnt, and a child exposed to violence at a young age could later become violent himself/herself. The child may learn that violence is acceptable as a way of resolving a problem (Mears, 2003).

2.3.5 Cultural and social context

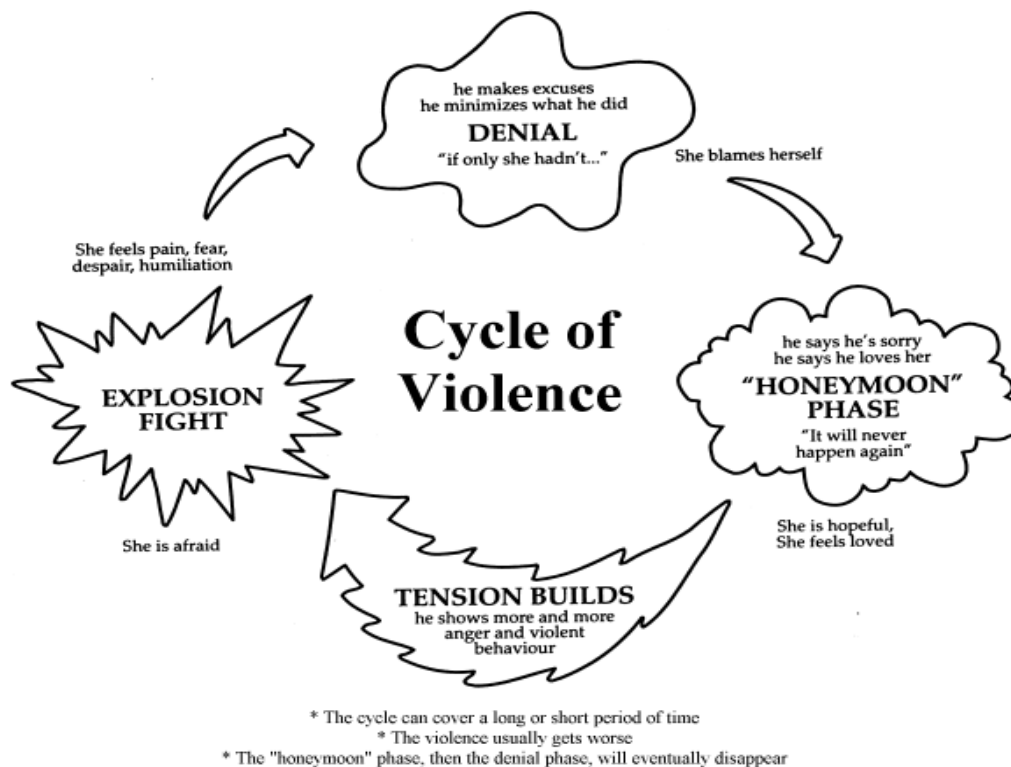
Traditional patriarchal views in the society may indeed encourage such acceptance as being in tune with the cultural and social values that prevail in that society (Mears, 2003).

2.3.6 Mental disorders and personally traits

In other studies, it is suggested that men who are violent towards their intimate partners may “suffer from a range of mental disorders, such as antisocial or borderline personality disorder” (Mears, 2003: 132). Some perpetrators may suffer from post-traumatic stress disorder. They may have low self-esteem, show aggression and jealousy, and their communication skills might be impaired. Research literature on this may be limited, because in most incidences it focuses on the court report, and it may not represent the whole population. Victims’ mental health may be affected as a result of domestic violence. They may suffer from depression and PTSD, and may drink an excessive amount of alcohol as compared to its consumption by the general population (Mears, 2003). Victims of domestic violence might also have problem related to their self-esteem and confidence.

2.4 The cycle of violence

The cycle of violence consists of three separate and different stages or phases which operate in a circular pattern. The first stage is known as the tension phase, followed by the explosion phase and the honeymoon phase (Summers & Hoffman, 2002).



2.4.1 Tension building

According to Summers and Hoffman (2002), this stage can last from a few weeks to a year. The perpetrator may become irritable and be verbally aggressive. He may make accusations and level insults, and inflict minor battering. The victim might become passive, may tend to blame herself, and develop a feeling of hopelessness (Fisher, 1990).

2.4.2 Explosion stage

Summers and Hoffman (2002) explain that the second stage is when the perpetrator frequently loses control and can be violent towards the victim. At this stage it is quite possible that the victim will be sexually assaulted, physically injured, or even killed (Fisher, 1990).

2.4.3 Honeymoon stage

This stage happens once the perpetrator's rage subsides. It is remorseful, and the perpetrator might request forgiveness from the survivor. More attention, including gifts, might be offered to the survivor (Summers & Hoffman, 2002). Fisher (1990) states that the perpetrator may become extremely loving towards the victim, and makes excuses for his behaviour. He becomes a very loving and caring partner. As time goes on the honeymoon stage becomes shorter than the other stages, and the victim experiences more tension and denial. The violent behaviour in the relationship increases, and love, care and tenderness diminish.

2.5 Domestic Violence Act 116 of 1998

Domestic violence can also be described as intimate partner violence, which is a pattern of violence and control. It may or may not include physical abuse. The perpetrator may be someone who is or was in a relationship with the survivor (Alpert, 2010).

The Domestic Violence Act 116 of 1998 aims to provide for the issuing of protection orders with regard to domestic violence and for matters connected therewith. An individual should recognise that domestic violence is a serious social evil, and in South Africa there is a high incidence of domestic violence. Domestic violence survivors are vulnerable members of the society, and the practice can take many forms (Domestic Violence Act, 1998).

According to Smythe, Artz, Combrinck, Doolan and Martin (2008: 166-167), the Domestic Violence Act aims to protect the victims from domestic violence or abuse by "providing all-encompassing legal definition of domestic violence, setting out broad-ranging criteria for a domestic violence relationship, and outlining new legal duties and responsibilities mandating law enforcement officials to assist victims". The Act (1998) also explains that its aim is to protect the victims of domestic violence - from abuse, and introduce measures which seek to ensure that the relevant organs of the state give full effect to the provisions of this Act. The Act describes a domestic relationship as one between a complainant and a respondent. They might be married or divorced according to any law, custom or religion. They may have lived or still be living together as if married, although they are not. They might be parents, or have

parental responsibilities for a child. They might be family members, or individuals who were once married, or engaged, or dating, or even recently sharing the same residence.

Domestic violence means, according to the Act; “physical abuse, sexual abuse, emotional, verbal and psychological abuse, economic abuse, intimidation, harassment, or any other controlling or abusive behaviour towards a complainant where such conduct causes the harm of the complainant” (Domestic Violence Act, 1998). Finnbogadottir, Dykes and Wann-Hansson (2014) describe domestic violence as violence that can take place in an intimate relationship, and it can also be perpetrated by any family member – a parent, a sibling, an intimate partner or a person known to the family. Marsden (2014) indicates that in most cases of domestic violence, the perpetrator is someone the victim knows.

Economic abuse may include: “the unreasonable deprivation of economy or financial resources to which a complainant is entitled under law, or which the complainant requires out of necessity, including household necessities for the complainant”. It also includes unreasonable refusal of household things which the complainant (survivor) has an interest” (Domestic Violence Act, 1998). The Act also defines emotional, verbal and psychological abuse as “a pattern of degrading and humiliating conduct towards a complainant” that may include repeated insults. It can also include repeated threats, obsessive behaviour and jealousy which can constitute serious invasion of the privacy, integrity, liberty and security of the complainant or victim.

According to the Act, harassment means “engaging in a pattern of conduct that induces fear of harm to a complainant”. This can include repeatedly watching the victim, and going around the victim’s place or building. The perpetrator repeatedly makes telephone calls, sends letters, electronic mail and telegrams to the complainant. According to the Act, physical abuse can mean any act or threatened act of physical violence towards the complainant. Sexual abuse can mean any conduct by which the perpetrator abuses, humiliates, commits violence on and degrades the complainant (Domestic Violence Act, 1998).

2.6 Coping mechanisms for domestic violence

In the study done by Rodriguez (2011), he shows that survivors of domestic violence appreciate a psychological well-being that is good. They seek social support and accept their responsibility in planning how to solve the problem they are experiencing. The findings of the study suggest that the survivors of domestic violence must not prolong their stay at home or in an abusive relationship. They should seek help so as to restore their broken psychological well-being. Domestic violence affects woman physically, mentally and socially; it makes them weak and always fearing for their lives.

The survivors of domestic violence are found to be at high risk of developing psychological disorders such as depression, post-traumatic stress disorder (PTSD), insomnia, alcohol abuse, somatic complaints, and anxiety; and these negative psychological effects are long-lasting. If a victim of domestic violence does not have enough coping mechanisms to deal with it, he/she may consider committing suicide (Rodriguez, 2011).

Rodriguez (2011:114) looked at the study done by David, Chin and Herradura (1998), which revealed that domestic violence takes place when the perpetrator is under the influence of substances such as alcohol. In Rodriguez (2011:114) mention in a study done by Adair, Gultiano and Avila (1998) which indicates that some victims of domestic violence do not report it because of psychological pressure. They tend to cope with it by keeping it to themselves. Some women, according to Rodriguez (2011), cope with it by sharing their experiences with their friends rather than their families. Substance use is another coping strategy some victims of domestic violence use in dealing with the situation.

Domestic violence can impair the dimensions of psychological well-being. There are six of these dimensions, namely, "autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self-acceptance. Each of the dimensions reflects all the different challenges that an individual can come across in his or her life (Rodriguez, 2011:15).

Emotion-focused coping and problem-focused coping can both reduce the psychological distress of domestic violence. Rodriguez (2011:16) indicates eight ways of coping which are as follows: "Seeking social support, confrontive coping, distancing, self-controlling, accepting responsibility, escape-avoidance, planful problem solving, and positive re-appraisal". In the problem-focused category, there is planful problem solving and accepting responsibility, and the other ways of coping are in the emotion-focused category. Confrontation suggests hostility, and an individual readiness. Confrontive coping entails aggressive efforts to alter the situation. When someone is using distancing coping they detach themselves and minimize the significance of the situation. Self-controlling is when someone regulates his or her feelings and actions. Seeking social support means to look for "informational support, tangible support and emotional support". Accepting responsibility is to acknowledge one's role in the problem and try to make things right. Escape-avoidance is using wishful thoughts and behaviour to escape the problem. In planful problem solving, one uses an analytic approach to solve a problem. In positive reappraisal one focuses on one's personal growth and this might have a religious dimension. All these coping processes are used by the survivors so as to reduce or minimize stressful events (Sabina & Tindale, 2008).

In the study done by Rodriguez (2011:119 "They tried their best to cultivate warm and trusting relationships with others by acknowledging themselves as loving, giving and individuals that can be trusted". They see that only a few people can listen to their problems and give them time to speak about what they are going through. Disadvantaged women in this study seem well situated when it comes to environment mastery, personal growth and self-acceptance. They are able to modify their environment so as to help themselves in their personal needs and in managing their finances. They can also create a lifestyle that suits them and can handle their daily responsibilities. This study reveals that these women have no regrets about their ups and downs in life, and they don't seem to be disappointed in their lives. However, they lack confidence in themselves. Abused women show poor conditions in term of autonomy. They seem to have difficulties resisting social pressure, and maintaining individuality within their society.

Rodriguez (2011:120) looked at coping skills or strategies used by abused women in her study. She showed that these women always use the following mechanisms: “positive reappraisal seeking social support, accepting responsibility and planful problem solving”. They seem to look for informational, emotional and tangible support. They also take time analysing their problems, so as to be able to understand and come up with the right solution. The abused women always wished for miracles, and they prayed a lot. In most cases, they detached themselves from the experience so as to avoid being severely hurt (Sabina & Tindale, 2008).

Shelter helps those women who have experienced domestic violence, or have seen it, to be motivated so that they can help themselves. Victims of domestic violence need support from their families and peers. They also require professional help to feel comfortable about sharing their experiences without any anxiety at being judged by others (Bergen, Edleson & Renzetti, 2005). When women move to a shelter they may have various doubts, and this is where they need more support from staff and from other victims of domestic violence. The group sessions help the survivors and also give each other courage from other women who are survivors of domestic violence, and understand what they are going through. Women in the group come to understand the reasons they experience domestic violence, and that it is not their fault (Bergen, et al., 2005). The results in the study done by Rodriguez (2011:121-124) also indicate that survivors of domestic violence need shelters or homes where they will feel secure so as to deal with the traumatic experience of the abuse. If they are not being pulled out of their abusive relationship they will not be able to attain “psychologically sound well-being”. The study further mentions that female victims of domestic violence should receive therapy to restore their self-confidence rearrange their lives and gain the strength to resist the pressure of society. “The findings of this study provided support that battered women must learn to speak about the adversities they have experienced to be able to be given immediate psychological help”. In several countries, including South Africa, human right activists have formed organisations that can help by providing counselling to abused women. They can provide legal assistance, and even offer training to government personnel based on domestic violence issues (Bowman, 2003).

2.7 Impact of domestic violence on victims

According to Kishor and Johnson (2004) domestic violence puts women (who are the common victims) at risk of damage to their health and well-being, which could have fatal consequences (homicide or suicide), and involve maternal or AIDS-related issues. Non-fatal consequences of domestic violence could include the development of mental, physical and reproductive health problems. Of these (and there are many) the most common are: depression, PTSD, and eating disorders. Victims could also have physical health problems such as chronic pain, injuries, HIV and sexually transmitted infections (STI's). One may be vulnerable to having a miscarriage if pregnant, or give birth to a child with low birth weight, which can lead to some disorders in the child (Kishor & Johnson, 2004:73). Baird and Mitchell (2014) agree that domestic violence in pregnant women can cause a lot of damage to the child. It could give rise to premature labour, low birth weight, and possibly death and miscarriage.

Some survivors can develop self-destructive habits which can include abusing alcohol and other drugs, overeating and engaging in risky sexual behaviour. Some victims of domestic violence may be underweight or obese, and this may put them at risk of being diagnosed with hypertension or diabetes (Kishor & Johnson, 2004:73). Domestic violence can create emotional distress, which can make it difficult for a victim to escape the violence, because of doubt whether he or she would be able to survive without the perpetrator, fear for the safety of the children, and anxiety about their custody. The community may also judge and exclude the victim, which may induce the victim to stay in an abusive relationship (Department for Child Protection: 2012).

Domestic violence can be as damaging to children as it is to adults. Children who experience it directly or indirectly may suffer from depression or eating disorders, and they may have nightmares or suffer trauma (Hurley, 2014:35). "Witnessing or experiencing domestic violence also poses significant risk to children's speech, language and social interaction".

2.8 Prevention

Under the Domestic Violence Act 116 of 1998, anyone who is suffering from domestic violence by husband, partner or anyone in a relationship with (can be at home) can put and have issued a protection order against that person. One can obtain a protection order from the family court (Domestic Violence Act, 1998). This primary prevention can include providing information to the public health practitioners about the violence. It is also to demonstrate that the violence can be preventable. There should be a policy framework in place that can organise, develop and evaluate the strategies that can help in preventing violence (Renzetti, Edleson & Bergen, 2011). Increasing family communication can help in prevention, and it can decrease the chances of one partner having extramarital relations (Bhatta, 2014). Prevention might be helpful to those people who might be affected by domestic violence in future, they can utilise the information they obtained in taking better decisions for themselves.

2.8.1 Stopping learned helplessness

According to Bergen et al. (2005), the first step can be to ask a survivor of domestic violence to leave the abusive relationship. This can be a tricky process, and the survivor may need support from the community and other outside sources. Survivors need to be taught to change their thinking about their failures. They need to be motivated about their successful stories, and also learn how to control their own lives. Their self-esteem and confidence need to be emphasised, so as to protect themselves against feelings of helplessness and depression. Psychotherapy and counselling can educate women to be able to control their lives and to remove thoughts of victimization.

2.8.2 Psycho-education

Educating the community has been the primary focus in helping it to understand violence against women, and try to change its members' attitudes. The community discussion focuses on looking at the common myths, and then trying to challenge them so that the victims of domestic violence can be helped. The discussion challenges the attitude within the community that allows violence to be perpetrated within the community. Commonly education can also be transferred to all health sectors, such as hospitals, clinics and social services. The media can play a huge

role in educating the community about domestic violence and its effect on the victims within the society (Bergen et al., 2005).

2.8.3 Increasing awareness and educating

The most common way of preventing domestic violence in the community is to increase the awareness of the people in it. An effort should be made to educate the community about how bad the problem of domestic violence is, and how necessary it is to act against it. To educate the community, one should give information which is accurate and informative. A reliance on education suggests a belief that information provided to a potential perpetrator or victim will modify the behaviour of that individual, and prevent domestic violence. Effective prevention can build a good foundation in preventing domestic violence and by giving information can transfer the behaviour and the way people/ community do things (Renzetti et al., 2011: 216).

Training seems to be important in reducing and preventing domestic violence in an intimate relationship. Training for ordinary people in the community, nurses and other relevant professionals on their responsibilities and roles in the process of fighting violence is essential. It gives them guidance on how to identify and manage the victim of domestic violence. It is vital that health professionals be aware of domestic violence issues and how to meet the victims' needs (McGarry, Westbury, Kench & Furse, 2014). This is supported by the studies of Furlow (2010) and Husso, Virkki, Notko, Holma and Laitila (2012), which indicate that health professionals seem to lack training and knowledge on the causes and effects of violence, so they often feel inadequate to conduct their work.

Schools, community leaders and school nurses play an important role in educating children and the community about domestic violence. It is important that they are trained so as to be able to identify the warning signs of abuse, and try to intervene. Hurley (2014) suggests that schools have a huge role in preventing violence. Children can be taught at a young age how to treat one another so as to prevent repetition of violence the child experiences or witnesses. In the process of teaching children that domestic violence is bad, it should be emphasised how destructive it is of loving human relationships.

2.8.4 Educating youth

Another prevention method that can help is to direct all prevention methods at the youth. The strategy is to reach young people that might be at risk of either committing or being subjected to violence. Identifying them at an early stage can help in implementing prevention strategies. Parents, teachers and other mentors are, of course, powerful influences on the young, and can teach them to control their emotional intelligence and increase their cognitive intelligence. The media can also provide information to young people about violence, and how to control and prevent it (Renzetti et al., 2011).

2.8.5 Community mobilization

This approach can help in understanding the relationship between individuals and organised group processes. Community mobilization may help in empowering the community, and also strive to promote equality in social relations in terms of power (such as resources and authority). Using community data may also serve to promote effective decision-making. Individuals and organisations can work together, and help the community in addressing violence against women. It can create public pressure to make laws, policies and practices that would promote long-term prevention. “The goal of a community mobilization effort is to engage multiple sectors of the population to address a health, social or environmental issue, to empower individuals and groups” (Renzetti et al., 2011: 219).

In the interests of community peace, community mobilization focuses on crime prevention and acknowledging the effects of violence within the community. There can be community activities such as events that would honour victims of domestic violence, and try to help in building shelters for the victims. There should be a focus on activity that would promote the culture of equality and non-violence (Renzetti et al., 2011).

2.9 Resumé

This chapter has looked at studies by other researchers on domestic violence. The following chapter will focus on the methodology used in this study.

CHAPTER THREE: METHODOLOGY AND DESIGN

3.1 Introduction

The purpose of this chapter is to discuss the methodology of the study undertaken. This chapter touches on the sampling method, data collection and data analysis which were described in Chapter One. It also looks at ethical considerations and the researcher's reflections on the process of the study.

3.2 Methodology

The study employs a qualitative research design. A qualitative method was chosen based on the fact that "qualitative research focuses primarily on the depth or richness of the data" (Struwig & Stead, 2001:121). The qualitative research approach employs research methods such as interviews, focus groups, participant observation, content analysis, etc. Thus this study focuses on the personal experiences of individual participants.

Qualitative research is about understanding the participants' perspectives (beliefs, feelings, emotions, meanings) and their backgrounds. Since behaviour does not occur in a vacuum, it is essential to understand the participants' environments or social contexts. It is essential to note the process of how past events plays a role in an individual's behaviour and thought patterns (Struwig & Stead, 2001).

The target populations for this study were women who were victims of domestic violence within the Empangeni region. The victims were identified at the Empangeni Magistrate's Court when they came to lay charges of domestic violence, or during the case proceedings

The process of getting participants to assist in the research was a major challenge. The researcher spent a lot of time recruiting the participants for the study, but many survivors were reluctant to participate. This could be because domestic violence is a sensitive topic, and some people were not ready to talk about it openly.

A purposive sample was used and 10 participants were recruited from the Empangeni Magistrate's Court. Only participants who had experienced domestic

violence for at least six months were requested to participate in the study, and those women who had taken the step of going to court to report the matter or lay charges. A purposive sampling method is based on the willingness and availability of participants in the study. In the purposive sampling method the researcher relies on the participants' experiences (Welman, Kruger & Mitchell, 2005: 69).

The objective was to find out which coping mechanisms are most used by survivors to deal with violence. It was also to find out how these mechanisms combat domestic violence.

3.3 Data collection procedure

Semi-structured individual interviews were used to collect data. The interviews were conducted in the Empangeni Magistrate's Court boardroom. It is a quiet and comfortable venue, where participants felt free to share information and discuss issues. Open-ended questions were asked in order to get a deeper understanding of the information that was provided by the participants. During the interviews, a tape recorder was used, with the consent of the participants, to ensure that sensitive material was captured so as to get accurate data for analysis. This method of capturing data allowed the researcher to obtain profound information from the participants as they spoke freely and without any distractions.

Before the interviews began, the researcher sat down with all the participants, and explained the study and what the aims of it were. The researcher also gave an opportunity for participants to ask questions in case they needed clarity. The participants were given the option of using both English and isiZulu during the interview. The pre-interview process helps in developing the relationship between the participants and the researcher, and ensures the privacy and confidentiality of the study to the participants so that they will be comfortable in responding. Before the interviews were conducted, the researcher touched on issues relating to informed consent. Most of the participants signed the consent without hesitation, but there were a few who refused to sign it or any other paperwork that was initially given to them; but they came round eventually. Each participant was then interviewed, and shared his/her experiences with the researcher. Some participants were not so keen, but did take part in the interview.

To create a comfortable atmosphere the participants were informed about the tape recorder to be used, as tape recorded interviews can be intimidating to the participants (McMillan & Schumacher, 2001). Numbers were used instead of names to ensure confidentiality and the anonymity of all the participants. Each participant was given a number instead of a name for analysis purposes

3.4 Data analysis

Content analysis was used in analysing the raw data gathered from the participants with the aim of identifying the ways participants utilize in coping with domestic violence. Since almost all the interviews were conducted in isiZulu, they were then translated into English before their transcription verbatim. The researcher translated the raw data by listening line by line to the interviews to make sure the translation was accurate. To eliminate any bias on the part of the researcher, the raw data and translation were shared with another researcher in the field. The translations were also taken to a language specialist.

3.4.1 Content analysis

According to Westbrook (1994), content analysis is a method used to analyse verbal, written and visual communication. It is based on the notion that many words gathered from the interviews can be grouped in different categories or themes in which words share similar meaning.

According to Elo and Kyngas (2008:109-110), the process involved in content analysis is as follows: opening coding, creating categories and abstraction. Opening coding means that “notes and headings are written in the text while reading it”. The information is read repeatedly, and all headings are written down so that they will describe all the aspects of the content. When coding, the lists of all categories are grouped. The purpose of grouping the data is “to reduce the number of categories by collapsing those that are similar or dissimilar into broader higher order categories”. The purpose of creating categories is to create the means to describe the phenomenon, and better understanding and knowledge. Data was translated from isiZulu to English during the transcription process. The researcher listened attentively to the interview tapes so as to ensure accuracy in translation and transcription. Data was then coded.

3.4.2 Coding

Coding units of data refers to the grouping of words that have the same meaning. Themes refer to the “clusters of categories that share community such as reference to a single issue” (Westbrook, 1994: 246). In this study themes were made and the relationship between them.

Coding identifies the main categories and subcategories, but it does not descriptively paraphrase the themes. After the interviews the researcher must organize and finish the notes so that the analysis can begin. There are advantages in coding: it helps in following up and creating new questions and it fractures the data, thus freeing the researcher from description and forcing interpretation to a higher level of abstraction. Coding helps in the integration of the entire analysis and also “yields the desired conceptual density” (Westbrook, 1994: 247). In this study repeated themes were grouped together into categories, each category was given a name, and literature was added so as to support the discussion.

3.5 Ethical considerations

The researcher informed all the participants that confidentiality would be strictly maintained in the interview while obtaining data. The participants of this study were given consent forms stating that the information they were sharing would be used only for the study, and there would be anonymity. The researcher ensured the safety of the participants throughout the study, and they were informed about psychological help they could receive in case they were re-traumatized. Participants were informed about voluntary participation, i.e. they could choose whether to participate in the study, and were free to withdraw at any time if they wished to. Permission to conduct the study was obtained from the University of Zululand’s Psychology Department, and from the UZ Research Committee. A certificate was given to signify permission to conduct the study. The certificate number is UZREC 171110-030 PGM 2014/85. A letter was written and submitted to the Court manager asking for permission to conduct the study on the Court premises, and also to ask for the participants.

None of the participants were under age, so there was no need for parents’ consent. All the transcripts for this study, and the audio recordings, were deposited in a safe place, and their anonymity and confidentiality were strictly respected.

3.6 Researcher's reflection on the process

In this section, the researcher shares her feelings on the research, and her reflections on individual influences on it. One cannot deny that sometimes it has been difficult to maintain a neutral position when conducting the research.

Completing this study was not an easy task, beginning with the need for the proposal to be approved by the Research Ethical Committee; but in the end all went well. Obtaining permission from the Court was not difficult, but recruiting research participants was a major challenge as most people were in a hurry, and some were reluctant to take part in the study.

The interviews went well, although some participants were difficult and did not want to participate fully. The interviews were emotionally challenging to the researcher, in that the participants were abused women and the researcher is a woman, so she felt the pain of their experience. Some interviewees were still emotional, and that might have caused bias on the researcher's part.

Most of the research participants were African women, and in hearing them share their coping skills the researcher saw a need for community programmes for mutual education. Most of the research participants appeared to be motivated and positive about their lives, and they hoped that coming to the court would be to their advantage. The researcher was warm and sympathetic towards the participants, and that helped to keep them motivated and willing to participate. When she approached them for their participation they expressed their need to speak out, and their sense of its importance, saying that doing so was therapeutic itself.

3.7 Demographic information/Results

Participant one

A 36 year old African woman from KwaMbonambi, she is not married and has three children, the last-born with an abusive partner. She is employed and also gets support from the child grant money.

In my opinion, domestic violence is a situation where there is a conflict between me and someone I am in a relationship with. It could be for various reasons, such as

having another relationship with someone else outside, and leaving me in the house. In the end I found out about the affair from the person my partner was having the affair with, and not from him. The abuse I experienced was from his partner, not himself.

When I found out I took the decision that I would talk to my partner in the house, I would discuss the matter, and ask him if he sees the mistake he made. In that way, he seemed to understand the mistake he made; that is why I ended up taking the decision of coming to court so as to protect the decision we agreed on with him. The abuse I experienced was coming from his partner, and I still live with him in the house, and in my opinion they are no longer together.

What I can say is that if you find yourself experiencing domestic violence, especially if your partner is willing to talk and discuss the matter, you can speak to him, and make him realise that a situation like this makes the environment a very hostile one. I sat down with him and we spoke. I also gave him my advice, and he showed signs of having accepted the mistake he made. He agreed that I can take any action so as to protect myself from experiencing the abuse. It becomes worse if your partner does not agree to talk and discuss the problems you are facing of finding yourself experiencing the abuse. I think those who experience the abuse but cannot speak to their partners, I think what might help them is to go outside and seek help, maybe speak to the counsellors, or speak to other women at church and also speak to people that were married and were in the same situation like them on how they survived and coped with the issue.

Participant two

She is a 38-year-old African woman from Richard's Bay. She is not married and has two children, one with an abusive partner. She is employed and has been in an abusive relationship for about three years.

It started with finding five girls in the house, but it was young girls and he would just say he was coaching them. It was students from the University of Zululand, and he would say "I am coaching them." but you would just see that there was one girl that was looking at you in a bad way. If I spoke out it seemed like I was insecure, and I

was being taken care of. Fine, that passed and I fell pregnant in March, and only realized it in April, so during the whole time I was pregnant I could not go out because to go to gala dinners or parties the unborn child would be affected, and in the meantime he was going out all the time and coming back home around three o'clock in the morning. So this whole time you are alone in the house, and it is during the pregnancy. He would go from Friday, Saturday till Sunday, and I would be sitting alone in the house. Even during the week he had meetings, and maybe he would come back around 11 at night. It carried on and there was a lot of things happening, but he was a caring father because it was his first child. But looking back, pregnancy is not sickness and you can go anywhere, and you go to work. He did not want me to go out and he said the child would be affected and at that point I thought he was being sweet and caring. Now you give birth, loose the weight and the child is with the nanny, but he still doesn't go out with you, yet he still goes out with other people. He then tells you that you must get friends, because he does not want to go out with you. It carries on, and you are looking at it like he just does not want to go out with me but prefers his friends. Once in a while you will want to go out with him, but he will not do it, and you get used to it, and it becomes natural that he will go out and leave you at home alone, and tell you if you want to go out you must get friends. I don't have a lot of friends because when I invite people into my space I invite few people into it. Then you look at it and ask yourself, really? What happened to that vibrant woman I used to be? Because all of a sudden you are sitting at home and what you want in a relationship you are not getting. You start getting this person: first of all he doesn't sleep in the same bed as me half of the time, he will sleep on the couch or in the other bedroom. He will come to bed only to make love, then leave. You get used to it, but still ask questions: "Why don't you come to bed?" At first he will reply nicely, and say "No, I am thinking, praying," and this and that. If you start resisting he will be aggressive, but then "I am a woman, I need you to comfort me." Before we stayed together, things were fine, and he would come to visit after my shift. This one day you wake up and say, "No, man, how I am taking this, and what I am doing to myself?" And you start questioning these things. You look deep into it, because the time it is happening you don't look deep, and you just say "Maybe he is like this, and only wants to be on his own, and don't be in his face." You look and make excuses for him, but when you look back, you realise that this man is sleeping on a couch because he has been getting it (loving) elsewhere, and he doesn't want

yours. You can sit there, but he is just fine and doesn't want anything. It then grows, and he starts sitting on a couch when you are at home and having dinner as a family. You will physically feel another woman sitting in between the two of you because he is busy on his phone and chatting. It is dinner time, but he just sitting, eating and chatting, and sometimes he would ignore the food that you had cooked from the heart. Those things build up and they build up.

"I think to myself it's going to get better, first of all you think this is normal, or you want something that is abnormal if you want somebody to sleep in the same bed as you, and hug you at night and that is abnormal. You start conditioning your mind that this is normal, it is okay, he can sleep on a couch and you will sleep on the bed on your own and be cold, it is fine. You condition yourself, until one day you realize that it is not fine, it is wrong. I think that what happened is that you condition yourself because you wanted it so much and you think it is normal and you turn a blind eye. Then it builds and it builds until one day you just realize that this is not on. The whole time I am experiencing it, I just condition myself so that this is the norm and it is supposed to be like this, and not every relationship is the same, and this is my relationship with this guy. The day the blindfold was off my eyes, it was like somebody just moved, and I was like, 'Really, was it me?' For the past three years I have been dealing with that, and why did I really do that to myself. Hence this whole saga – you realise that now. Then he becomes bored because he would tell you that things that you don't want to hear. You have a child already and it is not his, now you have two kids already and you are 38 years old. 'Who's going to want you? I want you, and I am the only man who wants you because you have my kid, the other kid is mine, understand. So this is your world and it ends here for you, it is here, it is just the end of the world here for you now, and you better make it work, because if you go outside who will want you?' He is emotionally manipulating you, to think that this is the end of the world. I think that is worse for other women that are not independent financially. It becomes where I am going to go because he is the source of income, and what am I going to survive with on, and stuff like that. So for me it was like 'Where would you go? Who's going to want you? You have two kids, and you are old.' For me it was emotional – you look at it until one day you realize 'Stuff him, I am attractive, I am beautiful, to hell with it – I got two kids, two boys to raise with or without a man by my side.' But during that period you can't see all of that, you don't

see all of that, and you see the worse part, and you're busy trying to make something that is not working work. In the process the other person is benefiting by emotionally or whatever abusing you.

"They need a strong support system to be able to stand because I had my friends support. They were always there to listen even if they saw that my staying here (in this relationship) was nonsense, but they would listen, give advice even knowing that I would not take it, but they were still giving it. My friend would be there and tell me 'My friend, it is your decision. I will be there and whatever decision you take I will still be there for you.' So that is the kind of support or mechanism that you need, to have somebody who can be there for you no matter what, even if she sees that your decisions are not good because sometimes you can see bad decisions, but you can't take someone out of the situation: you need to realize that yourself, for you to take yourself out the situation, because if you come and tell me that there is no reason for me to stay, I will listen and know that So-and so was right, but she doesn't understand that life is dark at the end of this tunnel. I see her in pain, but she understands, as it is always easy to the person outside the relationship. So if you are going to get that kind of support, the person who will not give up on you, who will still be there even when you are taking the wrong decisions. They should see that you are not in your right senses, but think 'I cannot make those decisions for her, but I will be there for her.' Talking about the abuse also does help; you have to talk about it. Talking is therapy itself.

Participant three

She is a 27-year-old African woman from KwaMbonambi. She is not married, and has one child. She is unemployed and has a child support grant as a source of income. She was in an abusive relationship for about three years.

"The person I was in an intimate relationship with was the one who was abusing me. If we had a fight he would abuse me. If we had a fight he would physically hit me, threatening to kill me. We were not staying together, I was staying at home and he was staying in the same area as me. I came here to the court because he was abusing me even if I was with my friends; he would hit me, and call threatening to kill me. He would hit me to the point that I would need medical assistance.

“I face the situation by speaking to my friends and also going to church. Another thing that helps is to come to court and open a protection order against that person. For me, coming to court was my decision, but I was scared because he still calls me.

“People who are in the same situation as mine should speak out about their problem, and must not keep it to themselves.”

Participant four

She is a 64-year-old African woman from KwaMbonambi. She is a widow, has five children, and her daughter is the perpetrator. She is unemployed, and the only source of income is the pension. Her daughter has been abusing her for about ten years or more.

“My daughter is the one who is abusing me by not staying at home and having lot of boyfriends, and when she comes back home, she will not behave like a child. She acts like a boss or someone we are sharing a man with. She does not ask or say anything when she wants something or wants to do something, she will just do it or take things. For example, she will just eat food without asking anyone for permission. Maybe when I am from town, she will come and not say anything, but will open the fridge and eat anything she wants, and sometimes she does not share with her siblings, but at times she will share. If I speak to her she will be rude. Then I talk to her and tell her that if she wants something she must ask me because this is home. Then she will be rude, and not agree with that. If she comes home at times, she will want new and clean blankets, whereas she did not wash the dirty ones she had used. When I speak to her about it, it ends up in a physical fight. I fight with her because I am older than her. I believe it was only once when I saw her washing the blankets, but still on other days she would use this blanket and at other times she would use the other one. Then I talk to her, asking her to behave like my biological child, but she does not treat me like I am her mother. At times she would fight her younger sister, and they would fight over a minor issue. At times i think maybe she uses alcohol or something, but I just don't understand what is going on in her mind. The reason I came here is because she had a knife, she was at home and doing something with a knife, but I was just scared because I thought she might do something to me with the knife. She wanted to stab me, saying I am not her

biological mother, and I must die. That is why I came here. I would not be able to share other incidents, but she does a lot of things.

“I tolerate her, I am a believer and I pray. I believe praying helps me, and without it she could have stabbed me with a knife. The other thing that helps me is that I report the matter to the police, council, and leaders at church. They all try to speak to her, but she does not listen. They try to come and pray at home, but she refuses the prayer, but they pray even though she does not want the prayer, and they also advise her, but she does not listen. God is helping me and is protecting my life.

“I can advise people who are experiencing a similar situation to mine to hold on and tolerate the situation if it is your child.”

Participant five

She is a 25-year-old African woman from Empangeni. She is not married, and has one child. She is employed at the Fire Department, and does not have any other source of income. She was in an abusive relationship for about six months.

“My experience was with both emotional and physical abuse. When I say it was emotional, I would get stressed, then from being stressed I would get depressed because obviously I am stressed by the things that are happening to me. It just gets into you and depresses you. It is emotional because the things that happen to me affect me, like if he shouts at me, or wants to choose friends for me, or whatever, and his controlling behaviour. Another factor is the other people he was dating because they would come to speak to me. Some would harass me by sending text messages, and calling me.

“In fact I have tried to be strong, and fortunately I am not a person who talks while still angry. Unfortunately the time I asked to speak to him, he never gave me that chance, then this happened.

“The first thing you have to decide is what you want. Secondly, draw up a plan that you see will help you. Another thing: you have to inform your friends, a colleague that you trust, the one you see that if she listens to you, you will be better, and she

will be able to say something. But in fact you want to be listened to by someone who will understand what you're telling them. Then that person will be able to help you, like come with a short list of decisions that you can take.

Participant six

She is a 45-year-old African woman from Empangeni, she is married and has two children. She is unemployed and has a pension as a source of income. She was in an abusive relationship for about five years.

“Domestic violence is something that is painful in a household where we don't treat each other in an appropriate manner. Maybe you are abused, sexually, morally or spiritually, and you find that things are not going well. I can tell you now that I am being abused as my husband has relationships with two other girls. One of the girls calls me, sends me texted messages, and swears at me and tells me that my husband is no longer having sex with me, which is true, as the last time we were intimate as a couple was in August 2011. I can see that I am abused, and it painful, because it is also affecting the children as my husband behaves anyhow in front of the children. He will go around with the girls, and what makes it really painful now is that he took a girl and had sex with her in my bedroom while me and the children were on holiday in December. That really makes me want a divorce.

“It is difficult, my sister, I don't want to lie. The method that I use is to keep quiet most of the time, and if I am quiet my husband even feels bad. He sees that there is something I should be asking, things I should be questioning, but I am just quiet and not asking him anything. The only thing I do, if his girlfriend has called me, I just forward the call. If she sends threatening smses I just forward them to him. If she sends pictures I also forward them to him. At times she will send pictures of them having sex in our car. They have sex in our car, and sometimes I find used condoms. So I don't talk, but I just forward everything to my husband. Then he will come back and talk to me if he wants to, or he will be angry, asking me what I have sent to him, and I am suspecting the girls for nothing. He says I take the condoms, then I lie and say I found them in the car, and he accused me of calling the girls and threatening them. This has been going on since 2008 till the present. I always keep quiet and

say nothing, and I know it is harming me, and I have been quiet for a long time, and it has made me a bitter person. I want to get rid of him next to me.

“It is difficult to tell someone what to do or to give another person a recipe that you used. I do have friends who are in similar situations as me, and I always tell them what I do because I know discussing the issue with him would not help me, as my husband denies everything. He even denies something that is so obvious. I have decided that talking will not help me, so I would rather be quiet. I have told others that they should try and speak out if they can't keep quiet anymore, but you should be calm while you are talking to him, and maybe one day he will see that he is wrong and apologise to you. They could also maybe go to counsellors and also to the priest at church, or to marriage counsellors. I also did all that, but it did not help, because if we get to the people who are supposed to help us and where we are supposed to speak your mind about everything that is bothering us, my husband prevents me from talking. He would even say I go around talking about him, and telling people about the family secrets. Then I would tell him that we should go and talk to people that would assist us with counselling, and we should reveal everything. We went for therapy till we stopped because we would always come back without being helped as we fight while we are there with counsellors as well, and we end up not talking about the real issues. I tell people to go to counsellors, and there are different types of counsellors that they could go to, to get helped.”

Participant seven

She is a 48-year-old Indian woman from Richard's Bay, she is married, and has two children. She is unemployed, and her husband is the source of income. She was in an abusive relationship for about 30 years.

“Domestic violence so far has been verbal abuse, it's been emotional abuse and physical abuse. Physically he hits, verbally he's vulgar, he's very vulgar and abusive. He says 'Pack your bags and get out!' as long as things don't go his way. He says 'Pack your bags and go, take your bags and stay wherever, stay with whoever.' It is degrading and emotional – he stripped me of everything I had. He calls me names, accuses me of cheating or having an affair. He also tells me that I am almost 50 years old, and no men would ever want me.

“I have been spiritually strong, I have converted the pain into empowering myself by reading the Bible and hearing the Godly messages. Whenever I have issues I read the Bible, go to church and also listen to gospel messages, gospel words or scripture.

“You see, my daughter is in the same situation, and she is not married to this guy. I tell my daughter all the time that you know what your choice is to do. I tell my daughter all the time that nobody is forcing you her to stay in that relationship. I am staying in the relationship because I have a son that has mental retardation. I have stayed so long because you know, when you have a child/son, it is difficult to take the child and stay at anybody’s house or any other home that you don’t rent or own yourself because, a child makes a noise, gets up in the middle of the night and drops things. You can’t take a child that is like that, that has got some disorder, into somebody else’s house because people like to take their own stuff. So I tell my daughter ‘You’ve got kids, but the thing is you don’t have to stay in the relationship, you can walk out at any time. You’re not married to this man, and you don’t have to sit years and years and listen to his bullshit,’ and that is a logical thing. You’ve got to evaluate it sometimes because if there is violence and there is abuse, if a man demoralises you to such an extent that you say ‘What does it matter anymore?’, you know what – it seems like your entire atmosphere, all those around you, they come to know what a terrible person you are even though it is not your fault. They will make their own assumptions, and treat you like it’s the truth because the person that is abusing you to the world for some reason seems like he is innocent and he seems so charming because people, when they look at an abuser, don’t look at him as the person he is. You know, in my case with my husband, at the moment he earns very well, and he is in a good company and it has been like this for the past eight years, so when I tell my family about the abuse and the situation I am in, I don’t expect them to treat him differently because of the way he is treating me, like punish him – I am not expecting that. But they will carry on with him, like a normal person, and he will carry on with everybody else as normal, even though if he is fighting and hitting us at the same second, he can walk away and move from the other room and we will still be crying or wiping the blood off and cleaning up and he will be talking and laughing like nothing has happened.

“My family saw we bought a house, so I have a house and now if I am going to divorce him where am I going to stay. I am going to impose on them, and they don’t want any part of it. This is what is happening in my life. Like any other person I go and talk to my sister weekly or monthly about my issues and troubles. I just battle because they are Hindus and I am Christian, so I take it to God and I pray about it, or I get a colleague to worship with, but with them now, what they do, they feel like ‘Okay, now why are you complaining because we don’t hear any problems?’ after my husband has called them. They ask me, if I get divorced now where am I going to go, or am I going to stay with them? Right now they don’t support me.”

Participant eight

She is a 45-year-old African woman from Enseleni, she is single and has one child, and two are deceased. She is self-employed as a street vendor. She was in an abusive relationship for about a year.

“Domestic violence to me is when I am threatened to the extent that I cannot speak to another person, I must not greet other people. If I talk to my family I must report to him on whom I talked to, and if I do not let him know he becomes physical. I must set a certain time that I must now talk to a certain person, and in less than five minutes I must go, and maybe we have not even finished with our conversation. You also know, if you’re talking to a family member there are a lot of things that you talk about. At this moment at home i don’t have parents, I only have sisters, and I stay with them in the house, and I only talk to them and discuss family matters, but at this moment at home it is like I am a visitor, because we don’t get along.

“What I do to cope with the situation is to stay inside the house until sunset, and always with him. I stay in the house because of my safety and to not be beaten, I must listen to him and stay with him. Coming to court and opening a protection order against him is an action of me saying he must go back to his home, and I don’t even know his home, and I don’t know his family, so I decided that it is better that he must go home. At home I can’t talk to anyone, and if I do, I must hide it from him at all times, so I decided that he should go because I can’t talk about him all the time.

“I can’t tell someone what they can do because the decision I took I decided myself, so I can’t talk about someone else, and I only talk about me, and I must only think for myself and nobody else.”

Participant nine

She is a 25-year-old African woman from Empangeni, she is single and has one child. She is employed at the Department of Education, and does not have other sources of income. She was in an abusive relationship for five years.

“Domestic violence is when you are being abused, and a person is beating you. It is physical or emotional abuse. It is when someone does something that you are against, and he breaks your heart. But you continue staying with that person, and keep telling yourself he is saying and doing all the abuse because it is out of love, and you tell yourself that you deserve it as he is abusing you. You don’t realize that he is having a problem. In my opinion I can say domestic violence is when you don’t realize that the person who is abusing you has a problem, and you blame yourself.

“What made me cope during the abuse was that I loved him, and I believed that he loved me, and all the things he was doing to me, like beating me, was because he loved me. Most of the time he would hit me because he was insecure. If a male that was approaching me called, and he found that out, then he would beat me. All the cases where he beat me were because a guy called and he was insecure, so I thought it was love, and he loved me too much, and I was also in love with him. The time came when I realized this was not worth it and he was abusing me, and I realized that I didn’t deserve this, and I got out of the relationship. I did not seek any help, but I used to talk to my friends about it and they would say ‘Leave the guy!’, and I did not see their point, and I didn’t understand why they said it because I believed that he was doing it out of love.

“If someone wants to get out of a relationship, they can report him to court so as to be protected by law, because some people end up being stuck in a relationship, although he can kill you. They can talk to their friends to help them, and they can also seek help for that person if they see that they still want to continue with him, and they can seek help for those abusive people or perpetrators. You can seek

counselling for the perpetrator so that he will change, because he is not normal: abusing someone is not normal.”

Participant ten

She is a 36-year-old African woman from Empangeni, she is married and has no children. She is employed as a social worker at Correctional Services, and does not have other sources of income. She was in an abusive relationship for 13 years.

“In my understanding domestic violence comes in different forms, and it depends on how the other person treats you. But all in all, domestic violence is the pain that you experience at home, and it depends on what exactly you are experiencing. Me for instance, I did experience all types; it was, physical, financial, verbal, emotional and psychological. I experienced everything, even sexually. It ended up that he would have sex with me if he wanted to, and if he didn't he would not have sex with you. He would never ask if I am all right or not if he wanted to have sex with me, and he would expect me to be all right when he was all right as well. At some point in time he would not sleep at home, and eight months would pass without sex. At the moment it has been a year and a half without having sex with a man, and it has come to the point now where I say I've had enough now. I could see the way he was caring for himself: he was pushing me to have an affair so that he could have something for the divorce, and that is why I choose to divorce him first, because I have experienced all sorts of domestic violence, and some incidents I can't mention. When you put divorce papers down for sexual assault or sexual abuse, the man being divorced from just thinks that one does not care about him. I am not sure how other people will view it, but in my opinion it is a painful thing, and I think it is better if somebody beats you than abuses you emotionally and psychologically He would treat me badly, and he would say 'No wonder you do things like this – it is because you did not have parents, and you were not raised well. Your mother did not raise you well because she died early,' as if it was my fault that my mother passed away. That person is destroying you emotionally and psychologically. He would say 'You are good for nothing,' and you could have money or be educated, but he would say this because I cannot have kids. All those things left scars, and it is better to have a visible scar because it heals than to have a scar internally.

“For me to cope I will tell you one word: suppressed. I suppressed it all because all these years he would talk and I would cry, but I would suppress it. I would put it in my subconscious mind as if it did not happen because he also wanted that. It would be more like I had forgotten about it, but I had not. This damaged me too much, and that is why I am taking treatment for depression because when it comes to consciousness it all comes back. I have not forgotten it, and not forgiven him, but I have always kept it inside me and I did not talk to anyone.

“From my perspective I don’t want to lie: I did not use any skills to overcome domestic violence. Number one: talking about it; two: seeking help, does not mean you are weak, so if you are in that situation you must look for a professional person whom you will talk to, so that you will not damage yourself internally. You must report it and seek help, and if you do not do these things it hurts you a lot. One thing I have learnt is that once the perpetrator has started to abuse you he will never stop, I thought that he would change and become better; at some point I would pray for this change. But even if you can pray if someone is abusive he will still remain abusive: it is his nature, and ‘Ubuntu’ is useless to him.”

3.8 Resumé

In this chapter the methodology used in this study has been discussed. The following chapter focuses on the results and data analysis.

CHAPTER FOUR: DATA ANALYSIS AND DISUSSION OF RESULTS

4.1 Introduction

Data analysis and the interpretation of the results, is discussed in this chapter with a summary of all the key issues in the study. The study investigated the coping mechanisms of survivors of domestic violence. The sample of ten participants from the Empangeni Magistrate's Court was recruited and interviewed. The purposive sampling technique was used to select participants of the study and data was collected using semi-structured interviews, and all the interviews were recorded.

Content analysis was used to make sense of the data obtained from the participants. The aim was to create a model that can describe the phenomenon in a conceptual form (Elo & Kyngas, 2008:107). Content analysis provides an opportunity to a researcher to assess theoretical issues that contribute to the better understanding of data. "It is assumed that when classified into the same categories, words, phrases and the like share the same meaning" (Elo & Kyngas, 2008:108).

4.2 Participants

4.2.1 Age

Firstly, looking at the age of all participants, it appears that they were all in different age groups. Their ages ranged from 25 to 64. This is supported by the literature, which states that domestic violence is not confined to a specific age group. The victims can be of all ages, and it can be experienced by anyone regardless of race, culture, etc. (Digest, 2000).

4.2.2 Occupational status

Of the ten participants, four were unemployed, five were employed, and one was self-employed (as a vendor). This seems to indicate that both employed and unemployed people can be victims of domestic violence. However, some studies support the view that most victims of domestic violence are unemployed, and tend to remain in a relationship for financial reasons. They indicate that domestic violence worsens if the perpetrator is unemployed, or if there is a change of in employment. Being unemployed may trigger the violent behaviour. A study done by Anderberg, Rainer, Wadsworth and Wilson (2013) discusses their key theoretical results, which

suggest that if the perpetrator continues to be unemployed, he may become less violent, which is opposite to the victim. If the victim is unemployed, the incidence of domestic violence is likely to be high, as it is difficult for her to leave the relationship since she is financially dependent on the perpetrator. Mishra, Patne, Tiwari, Srivastava, Gour and Bansal (2014) support the view that housewives are more vulnerable than professional women and prone to experience psychological and sexual abuse. Some studies agree that occupational status does not mean a lot and even employed people can be trapped in an abusive relationship.

In the study by Mishra et al. (2014) it is noted that the prevalence of domestic violence was not high among victims who were educated; it was higher among those who were illiterate, or non-graduate. An education can serve to protect a victim, and so can financial independence. Financial dependence and domestic violence in most cases are associated, as the victim feels as if she would not be able to survive without the perpetrator (abuser) (Mishra et al., 2014). It is also said that women experience domestic violence regardless of their educational background or socio-economic status: anyone can be a victim. Their educational level does not prevent their husbands/partners from being violent towards them. In the study by Aisyah (2014), it is suggested that their financial independence does in a way contribute to the domestic violence they experience since it challenges “cultural patriarchy”. Even though financial independence might be a contributory factor, it is mentioned that women with a high school education or above are more likely to be verbal about the abuse, and to file for divorce compared to those with only primary education, or none. Women emphasize the importance of education, as it helps them not to be undermined by men. Domestic violence might be associated with the lower class, but it is not confined to them, and the community attitude makes it difficult for successful independent women to seek help. They are afraid of what the community will think of them (Aisyah, 2014).

4.3 Interpretative Analysis

In this section, verbatim accounts are provided. Each category and their common themes will be discussed, as will the stories from survivors of domestic violence.

4.4 Question one

Based on the first question, which is “Please define what you understand by domestic violence”, these are the common themes of the stories shared by the participants.

4.4.1 Physical abuse

Domestic violence can be physical, when the perpetrator is hitting the victim. The following are verbatim experiences of the participants.

Participant three: *“If we had a fight he would physically hit me, threatening to kill me. We were not staying together, I was staying at home, and he was staying in the same area as me. I came here to the court because he was abusing me. Even if I am with my friends; he would hit me. He would hit me to the point that I would need medical assistance”.*

Participant four: *“My daughter is the one who is abusing me by not staying at home and having a lot of boyfriends; and when she comes back home, she will not behave like a child. When she comes home at times, she would demand new and clean blankets, whereas she did not wash the dirty ones she had used. When I speak to her about it, it ends up in a physical fight. I also fight with her because I am older than her. The reason I come here is because she pulled a knife on me, she was at home and doing something with a knife, but I was just scared because I thought she might do something to me with the knife. She wanted to stab me, saying I am not her biological mother, and I must die.”*

Participant five: *“My experience was both emotional and physical abuse.”*

Participant seven: *“Domestic violence, so far it has been verbal abuse, it has been emotional abuse and physical abuse. He physically hits me.”*

Participant eight: *“Domestic violence to me is when I am threatened to the extent that I cannot speak to another person, I must not greet other people. If I talk to my family I must report to him on whom I talked to, and if I do not let him know he becomes physical.”*

Participant nine: “Domestic violence is whereby you are being abused and a person is beating you, it is physical or emotional abuse. It is where someone does something that you are against, and he breaks your heart.”

Participant ten: “But all in all domestic violence is the pain that you experience at home, and it depends on what exactly you are experiencing. Me, for instance, I experienced all types; it was physically, financially, verbally, emotionally, and psychologically.”

According to the Domestic Violence Act (1998), physical abuse may involve any act that may threaten a victim. This act may involve hitting the victim, pushing, punching, burning, throwing things or objects at her, or threatening with a certain weapon, or it may be an act of assault against the victim using a certain weapon. Baird and Mitchell (2014) agree that physical violence may involve physical force against the victims. The perpetrator may use weapons such as knives. Furlow (2010) suggests that physical abuse may be any traumatic assaults that may involve physical force that creates injuries, disability or even death.

Physical abuse is commonly experienced by survivors of domestic violence; this is also found in this study. About seven out of ten participants reported to have experienced physical abuse from their partner, or even their children. McGarry et al. (2014), agree that domestic violence can involve an intimate partner, or just a family member. *Participant four* experienced domestic violence from her daughter, and it became so severe that she was afraid her daughter wanted to stab her. *Participant one* reported that she had to get medical care after the physical abuse from her boyfriend, and her boyfriend hit her in front of her friends. This might seem like physical abuse only, but the damage it does to one’s self-esteem as a woman is very severe. The embarrassment one experiences is bad, and that can badly affect one’s functioning.

When men think that women are not doing their job properly, not following their given gender role, they tend to be more physically and emotionally abusive towards them (Aisyah, 2014). Perpetrators of domestic violence enjoy being in control. They want their partners to be submissive, and if they are not, then it is likely that they will be

physical towards them, and this to them is a way of demanding dominance and respect from their partners.

4.4.2 Verbal and emotional abuse (manipulation, degrading and threats)

The following are the participants' experiences based on the threats and manipulation they have experienced in their relationships, which cause emotional and verbal abuse.

Participant two: *"You have a child already and it is not his. Now you have two kids already, and you are 38 years old, who's going to want you, I want you and I am the only man who wants you because you have my kid. The other kid is mine, understand. So this is your world and it ends here for you, it is here, it's just the end of the world here for you now, and you better make it work, because if you go outside who will want you?"*

Participant three: *"He calls threatening to kill me."*

Participant five: *"When I say it was emotional, I would get stressed then from being stressed I would get depressed because obviously I am stressed by the things that are happening to me. It just gets into you and depresses you, because the things that happen to me affect me, like if he shouts at me or wants to choose friends for me or whatever."*

Participant seven: *"It's been emotional abuse, he says pack your bags and get out as long as things don't go his way, he says pack your bags and go, take your bags and stay wherever stay with whoever. It's degrading and emotional – he stripped me off of everything I had. He also tells me that I am almost 50 years old, and no men would ever want her me. Verbally he's vulgar, he's very vulgar and abusive."*

Participant nine: *"It's emotional abuse. It is where someone does something that you are against, and he breaks your heart. But you continue staying with that person and keep telling yourself he is saying and doing all the abuse because it is out of love, and you tell yourself that you deserve it as he is abusing you."*

Participant ten: *“I am not sure how other people will view it, but in my opinion it is a painful thing, and I think it is better if somebody beats you than abuses you emotionally and psychologically. A person treats you badly, and he would say “No wonder you do things like this. It is because you did not have parents and you were not raised well. Your mother did not raise you well because she died early.” As if it is my fault that my mother passed away. That person is destroying you emotionally and psychologically. The person would say you are good for nothing, and you could have money or be educated, because I cannot have kids. All those things left scars, and it is better to have a visible scar because it heals, than to have a scar internally.”*

This violence may involve “traumatic violence or threats of violence used to coerce and terrorize the victim”. It might be humiliating and demeaning to the victim. Withholding access to certain things such as money or food is viewed as another form of emotional abuse (Furlow, 200:135). According to the Domestic Violence Act (1998), and Baird and Mitchell (2014), emotional and verbal abuse may be explained as a way the perpetrator degrades and humiliates the victim. One may argue that verbal and emotional abuse may be very close to psychological abuse. The perpetrator may show his hostility in various ways: with insults, which may result in emotional pain to the victim; or by expressing his jealousy, or threatening to harm the victim or people around her. His behaviour may also result in intimidation and social isolation.

This kind of domestic violence seems to be highly prevalent in this study as about 6 out of ten participants reported that they experienced it. Some people might turn a blind eye to this kind of violence as they may think it is normal, but it is not. Emotional abuse seems to be accepted by women, they accept being controlled and disciplined by their partners. In African society women do not see themselves as being abused: they view violence as a form of love and respect (Tshweneagae & Seloibe, 2010). *Participant five*, for example, mentioned that at some point she got depressed because of her experience. Her boyfriend shouted and wanted to choose people to associate with, and that can really damage and limit one’s independence. Feelings of inferiority and worthlessness can be created because of emotional abuse. Other psychological effects may include panic attacks, or depression (Tshweneagae & Seloibe, 2010).

Emotional abuse is so powerful and damaging it can affect one's ability to leave the relationship. For instance, *participant two* is 38 years old, and has children, and her partner was manipulative, and would make her feel less of a woman, make her think she was old and no one would love her. This experience is common in most survivors of domestic violence, and some would even rather have physical than emotional and verbal abuse as they think the latter is more damaging. According to Mckinnon (2008), women who are emotionally abused tend to lose self-esteem: their confidence is impaired, and they have a sense of shame in the community. They may have feelings of loneliness and despair. Davis (2010) says that emotional and verbal abuse is more damaging to the survivor than physical assault.

4.4.3 Unfaithful partner / extra-marital affairs

The participants in this study indicated that the abuse at times does not come from their partners directly, but from the woman they are having an affair with. The following are verbatim responses from the participants based on their experiences.

Participant one: “Domestic violence is a situation where there is a conflict between me and someone I am in a relationship with. It could be for various reasons, such as having another relationship with someone else outside and leaving me in the house. In the end I found out about the affair from the person my partner was having the affair with, and not from him. I experience the abuse from his partner.”

Participant two: “It started with finding five girls in the house, but it was young girls, and he would just say he is coaching them. They were students from the University of Zululand, and he would say, I am coaching them, but you will just see that there is one girl that is looking at you in a bad way. If I spoke out it seemed like I am insecure and I am being taken care of.”

“It then grows and he starts sitting on a couch when we are at home having dinner as a family, you will physically feel another woman sitting in between the two of you because he is busy on his phone and chatting. It is dinner time but he is just sitting, eating and chatting and sometimes he would ignore the food that you had cooked from the heart. Those things build up and they build up.”

Participant five: *“My experience was with both emotional and physical abuse. When I say it was emotional, I would get stressed, than from being stressed I would get depressed because obviously I am stressed by the things that are happening to me. It just gets into you and depresses you. Another factor is the other people he was dating because they would come to speak to me. Others would harass me by sending text messages and calling me.”*

Participant six: *“I am married and I can tell you now that I am being abused by my husband, he has relationships with two other girls. One of the girl calls me, sends me texted messages, and swears at me and tells me that my husband is no longer having sex with me, which is true, as the last time we were intimate as a couple was in August 2011. I can see that I am abused. It painful because it is affecting my children as my husband behaves anyhow in front of the children. He would go around with the girls, and what makes it really painful now. He took a girl and had sex with her in my bedroom while me and the children we were on holiday on December.”*

A study by Mutiso, Chessa, Chesire and Kemboi (2010), focusing on low-income residential areas in Kenya, shows that extramarital affairs do contribute to domestic violence. This is supported by Bhatta (2014), who indicates that men often have extramarital sexual affairs. She does not deny that married women have them too, but they are commonly associated with men. Being unfaithful to your partner might not seem like direct abuse to the victim, but one cannot deny the consequences it has. If one partner has an affair, he/she is inviting a third person into the relationship, and that person can cause psychological abuse to the victim. Psychological abuse may affect the victim's sense of self, which can result in severe depression. Extramarital affairs can also have a physical impact on the wife, as she might be affected by HIV or some other sexually transmitted disease.

McKinnon (2008) describes domestic violence as one partner attempting to dominate the other, amounting to harassment, insults and entry into the victim's place without her consent. It is behaviour that can cause great emotional pain. The participants described domestic violence not just as physical abuse, but also as the

harassment and insults they get suffered from their partners' mistresses, as reported, for instance, by *participant five*.

The study by Aisyah (2014:216) suggests that about six out of the 19 survivors of domestic violence interviewed mentioned that their partners (husbands) were having an affair. In most cases polygamy and mistresses suggest may entail economic deprivation for the wives and children at home. These women do not emphasize the issues of jealousy and competition, but they view their husband's behaviour as disrespectful and damaging to their self-identity, their self-esteem as women, and their social status in the society. The study indicates that violence occurs mostly when the husband/partner has been "challenged about his affair with other woman". Men lie to their partners about their affairs. "Advising men to adhere to religious and cultural values and norms, such as abstaining from alcohol and not having affairs, leads to arguments that often end in violence". In many societies women are expected to be pure and monogamous, whereas men can be sexually promiscuous and can flaunt their masculinity by having affairs. In most cases divorce usually occurs after a man has had an affair.

4.4.4 Lack of communication and sexual need

It seems that communication between the perpetrators and victims of domestic violence is another major issue. No attention and love is given: the perpetrators distance themselves from their victims, and do not even satisfy their sexual needs. They may just make excuses for themselves. The following are the experiences of the participants.

Participant two: "You start getting this person, first of all he does not sleep in the same bed as me half of the time, and he would sleep on the couch or the in other bedroom. He would come to bed only to make love, then leave. You get used to it, but still ask the question: "Why don't you come to bed?" At first he will reply nicely and say no, I am thinking, praying and this and that. If you start resisting he will be aggressive, but then "I am a woman, I need you to comfort me."

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"You look deep into it, because the time it is happening you don't look deep and you just said maybe he is like this, and only wants to be on his own, and don't be in his

face. You look and make excuses for him, but when you look back, you realise that this man is sleeping on a couch because he has been getting it (loving) elsewhere, and he doesn't want yours".

Participant six: "The last time we were intimate with my husband as a couple was in August 2011".

Participant ten: "I experienced everything, even sexually; it ended up that he would have sex with me if he wanted to, and if he didn't he would not have sex with me. He will never ask if I am all right or not, if he wants to have sex with me, and he would expect me to be all right when he is all right as well. At some point in time he would not sleep at home, and eight months would pass without sex. At the moment it has been a year and a half without having sex with a man and it has come to a point now where I say I've had enough now."

According to the Domestic violence Act (1998), sexual abuse refers to an act that abuses and degrades and violates the integrity of the other person. Sexual abuse involves forcing the victim to do sexual acts; it is hurting her during sex, and forcing her to have sexual intercourse which is not protected. According to Furlow (2010:134), sexual violence may involve "physically coercing sexual acts with the victim". The victim may lack understanding of the act, or may be unable to refuse to participate because of alcohol or disability. The victim may also be intimidated into not refusing. Bhatta (2014), and Baird and Mitchell (2014), agree that sexual abuse is forcing the victim into sexual acts. One may say it is rape. It could also mean forcing the victim to take part in sexual activities such as pornography. Sexual abuse is all too common around the world, and it might have a huge impact on the health of the victim.

Judging from the results in the current study, participants seem to have an issue with insufficient sexual activity from their partners. In most previous studies, women objected to their partners would force them into performing a certain sexual act without their permission. But in this study, participants need to be loved and given attention. Participants speak of their partners not wanting sexual intercourse, and then wanting it again. They feel their partners have disrespected them, and not

considered their feelings. In marriage, both men and women have a right to sexual need. Even culturally it is expected that the married couple should take care of each other. See, for example, *participant ten*.

In South Africa, men of traditional cultures still treat women as they please. Because of lobola money women are expected to be submissive to their husbands, as men may view paying lobola as like buying a woman. Most men think they can sleep with their wives whenever they feel like it because they paid lobola for them, and they treat them like property. Chireshe and Chireshe (2010) support report that some women mentioned that their husbands demand to have sex with them whenever they feel like it, and that women seem to agree that lobola promotes gender inequality, and forces women to stay in an abusive relationship.

4.4.5 Controlling

The verbatim experiences of the participants show controlling behaviour. Controlling behaviour is common, and some survivors might not pay attention to it, but might consider severe forms of violence as domestic violence.

Participant five: “.He always wants to choose friends for me and his very controlling”.

Participant eight: “Domestic violence to me is when I am threatened to the extent that I cannot speak to another person, I must not greet other people.” If I talk to my family I must report to him on whom I talked to. You also know if you are talking to a family member there are a lot of things that you talk about. At this moment at home i don't have parents; I only have sisters, and I stay with them in the house, and I only talk to them and discuss family matters. But at this moment at home it is like I am a visitor because we don't get along.”

In an abusive relationship, controlling might be defined as one partner dominating over the other partner, and controlling everything they do in such a way that the victim is unable to take her own decisions. (Domestic Violence Act, 1998). It is a social system where “women’s subordination to men is defined as natural, and

violence continues to be seen and accepted as a conventional means of controlling women” (Baird & Mitchell, 2014: 420).

In the study done by Mishra et al. (2014), it is suggested that the perpetrators of domestic violence seem to exercise more control over their partners as compared to non-violent people. It noted that the controlling behaviour was especially evident over the victim’s access to certain things outside the home, such as friends, healthcare, etc. The controlling male may also be suspicious about the wife’s faithfulness, and also show aggressive behaviour if the victim talks to other males. A similar pattern is suggested in this the present study where other some participants indicate that their partners control them. Only two out of ten participants reported it, but that does not mean it is less prevalent in their locality than elsewhere. This controlling behaviour might be ignored if one is experiencing another form of domestic violence which might be severe and dominant. Marsden (2014:2522) suggests that the violence is triggered to by perpetrators, especially if they feel like as if they are losing control in their relationship. Domestic violence can be used to “suppress women’s autonomy in order to promote and preserve the relative power of men in the society.”

Biblical interpretations on the subject of male domination are commonly mistaken if perpetrators use them to oppress the victims. There are male perpetrators who are apt to quote verses that suit themselves, such as those which say that God created man, not woman, in his image, and woman was made out of man’s rib. They therefore expect their woman to be submissive. (Tshifhumulo & Mudhovozi, 2013).

4.5 Question two

The following are the common themes found in answer to question two, which was: “How have you coped with the ordeal of family violence?” When discussing question two, most themes that emerged were the same as themes that emerged from question three, which was: “What other coping mechanisms, besides the one you used, could help other survivors?” In discussing each of the themes, the researcher will not repeat a discussion. That is why questions two and three will be discussed together.

Coping can be described as “any action taken to manage stressors that tax an individual’s resources. There are two functions of coping: to regulate the distress and to manage the problem that is causing that distress (Libuku, Small & Wilkinson, 2008: 7). The strategies and coping mechanisms survivors of domestic violence employ are influenced by other factors such as economic status and needs, mental health, and some sociological circumstances. They are also influenced by their perceptions of abuse (Haeseler, 2013). Survivors sometimes believe that they deserve the abuse, and that they are incompetent to cope or live without the perpetrator. They also blame themselves. Some survivors stay in the abusive relationship, making excuses for it and justifying their abuse. Some employ “self-protective, cognitive distortions or delusions such as rationalization and justification.” Women in violent relationships go through different stages, from “self-blame to abuser blame”, take all the responsibility for the perpetrator’s abuse of them, and go on believing he will change until the last stage, when they are trying to cope with despair (Haeseler, 2013: 35).

The coping strategies women employ in dealing with domestic violence have an impact on their mental health. PTSD, depression and anxiety are often the result when one uses emotionally focused strategies, avoidance strategies such as denial, wishful thinking, worrying, disturbed thoughts and distraction behaviour (Ting, 2010; McGarry et al., 2014). Women intent on leaving an abusive relationship need to make plans on matters such as where they will live, and whether it will be in a shelter, or with family, or at a friend’s place. They need to consider who will get custody of their children, and possibly deal with a mental health problem, or even worsening of the abuse from the perpetrator, that can even end with death (Haeseler, 2013). It is not an easy process to leave the abuser: some women make several attempts to leave, but keep coming back (Haeseler, 2013).

Women who leave an abusive relationship try to cope with lot of stressors, such as healing from abuse, being a mother and also the lack of social support. If they are mothers they will have mixed feelings about whether they are breaking up the family. (Haeseler, 2013). Women may feel ambivalent about seeking social support from other people, because of cultural and societal sanctions against leaving, and they may feel isolated from the society. A woman’s feelings of ambivalence may come

from the pressure she gets from the family, and the stigma from the community (Haeseler, 2013).

Self-efficacy “can be defined as the belief that one can successfully carry out an action to produce a desired outcome.” If one lacks self-efficacy, and has low self-esteem, it will be difficult for one to take action against domestic violence. It is difficult to empower a domestic violence survivor, but the process is much better more effective if one’s self-esteem is healthy. The short-term impact result of domestic violence can be anger, sadness, and feelings of guilt and self-blame. The long-term result can be damage to the survivor’s identity, a loss of self-belief (Libuku et al., 2008:5).

For coping with stress, two ways can be described: a problem-focused strategy, which is action-oriented, and aims to reduce stress; and an emotion-focused strategy, which is a dissociating strategy (Kaye, Ekstrom, Johansson, Bantebya, & Mirembe, 2007; Canady & Babcock, 2009).

Problem-focused approaches can include fighting back, and looking for help. This is where the survivors take action to overcome their stress (Kaye et al., 2007). This can be seen as an active or engaging strategy. The emotion-focused approach can include minimizing damage, when survivors decide to keep quiet and say nothing. Withdrawal is another form of emotion-focused strategy. The main goal of this strategy is to restrain all the emotions that arise out of the situation. Some people who experience domestic violence hesitate to report it, and make decisions for themselves. They tend to exhibit the emotion-focused style more than the problem-solving strategy (Kaye et al., 2007).

4.5.1 Break the silence

Most participants emphasized the importance of talking about one’s issues to other people rather than keeping it to oneself. The following are examples of testimonies from participants who believe that breaking the silence is very important, and will help an individual to cope with abuse. They may have different opinions on how to break the silence, but overall they believe talking is good for one. This form of coping mechanism is part of a problem-focused strategy.

4.5.1.1 Protection order at court

Participant three: *“Another thing that helps is to come to court and open the protection order for that person. For me, coming to court was my decision, but I was only scared because he still calls me.”*

Participant four: *“The other thing that helps me is that I report the matter to police.”*

Participant eight: *“Coming to court and opening a protection order for him is an action of me saying he must go back to his home, and I don’t even know his home, and I don’t know his family, so I decided that it is better that he must go home.”*

4.5.1.2 Speak out

Participant one: *“When I found out I took the decision that I would talk to my partner in the house, I would discuss the matter, and ask him if he sees the mistake he made. In that way, he seemed to understand the mistake he made.”*

Participant three: *“I face the situation by speaking to my friends.”*

Participant nine: *“I used to talk to my friends about it, and they would say “Leave the guy,” and I did not see their point, and I didn’t understand why they said it because I believed that he was doing it out of love.”*

Five of the ten participants in this study indicated the importance of breaking the silence, by speaking to friends or their partners. Some use a government institution such as a court to open cases. In this study no one seems to report talking to their families for support. Participant seven mentioned that she does not receive support from her family, and they seem to take her husband’s side. Support from friends and family seems to be important to the victim of domestic violence, and in the Hayati, Eriksson, Hakimi, Hogberg and Emmelin (2013) study it was indicated that women in that study did receive relevant support of that kind. Having someone to talk to and discuss your issues with, especially abuse, seems to be beneficial to the survivors. It is undeniable, judging from the literature, that not everyone receives the support from family and friends that they need. This may be because some people perceive domestic violence as a private matter involving only two people. According to

tradition, once a man has paid lobola, the woman belongs to him. Kaye et al. (2007) agrees that social support is vital, and it is helpful to some, but this strategy could worsen the situation. Some participants in the study viewed it as one of the factors that worsen their stigmatization.

Survivors spoke of emotional support as important in coping with the violence. They said even though their families were not going to change their situation, the affirmation of their family support gives them relief. Some families provide advice and ideas on how to handle the situation (Ting, 2010). Professionals who were interviewed in the study by Haeseler (2013) agreed with this. In linking question three, eight out of ten participants mentioned the importance of speaking to friends and family, and also seeking professional help, like going for therapy. The results of the study by Modallal (2010) indicates that about 43% of participants use positive coping strategies when coping with the violence. It indicates that most women show healthy self-esteem, and they have the support of their friends and family.

Most participants in the study by Hayati et al. (2013) used social institutions, but one participant who had decided to leave her husband said she was getting good support from both government bodies and non-government ones. That support is best that gives survivors confidence and the feeling of being able to change their lives. It is stated that survivors who leave their abusive partners find help easily as compared to those women who are still living with their abusive partners. Support from government and non-government bodies helps women to restore their confidence, and encourages them to escape the abuse (Hayati et al., 2013).

Clinical Intervention, as explained in Ting's study (2010), seems to be helpful to the participants. They indicated that therapy is helpful, and individual or group counselling is important. They indicated that talking to someone could make them feel much better, although some women indicated that they thought mental health treatment was for people with severe mental illnesses, and they were scared to be stigmatised in the society. In the current study, some women say they had used mental health practitioners, but still the gap is huge: there is still a lot to be done by mental health care practitioners to change people's thoughts and fear of stigma within the community (Ting, 2010).

Men's financial dominance may increase the likelihood of their being violent towards their wives or partners. Because of this dominance it is sometimes difficult for victims to seek help from their families since the families believe that the man has a right to discipline his woman (Modallal, 2012).

4.5.1.3 Seeking social support

According to Canady and Babcock (2009), and Mishra et al. (2014), social support is viewed as a protective factor for survivors who have experienced domestic violence. Psychologists also have a role to play, as they must provide more direct intervention and be supportive at the same time to survivors of domestic violence. Social support does have an impact mentally and health-wise on the survivors. The findings of this research are in line with the literature, and the participants seem to be much better with support; without it they battle. Although support from family is important in the study by Aisyah (2014) one woman thought of leaving her husband, but her parents refused to allow her to stay with them. Some women feel the shame of leaving the marriage and going back home. This is attested to by one participant in the current study, who mentioned having little support from her family; in fact her family supported her husband rather than her.

4.5.2 Conditioning

The following are the experiences of the participants who believed that conditioning themselves would help them to cope with their situation. The other participant believed that the abuse she was experiencing was because her partner loved her so much

Participant two: *"I think to myself it's going to get better. First of all you think this is normal, or you want something that is abnormal if you want somebody to sleep in the same bed as you and hug you at night. You start conditioning your mind that this is normal, it is okay, he can sleep on a couch and you will sleep on the bed on your own and be cold; it is fine. You condition yourself, until one day you realise that it is not fine, it is wrong. I think that what happened is that you condition yourself because you wanted it so much, and you think it is normal and you turn a blind eye. The whole time I am experiencing it, I just condition myself so that this is the norm, and I*

think it is supposed to be like this, and not every relationship is the same and this is my relationship with this guy.”

Participant seven: *“I have converted the pain into empowering myself by reading the Bible and hearing the Godly messages.”*

Participant nine: *“What made me cope during the abuse was that I loved him, and I believed that he loved me, and all the things he was doing to me like beating me was because he loved me. Most of the time he would hit me because he was insecure.”*

In this study two out of ten participants reported that they condition themselves. They tend to think that the violence they are experiencing is normal, and then they suppress the way they feel. It is evident in many studies that most survivors of domestic violence tend to think that the abuse in their relationship is normal, and they deserve it. This even influences the time they take before reporting the matter. They may tend to postpone a report, and look for interventions. This is evident in *participant two* who conditioned herself, and ignored her feelings and the hurt she was experiencing. Some survivors may think that if their partners abuse them it is because of love, and that makes them not seek help.

4.5.3 Religion

It seems that most participants seek God in their abuse, and that helps them to cope with the abuse they are experiencing. The following are examples of the participants' experiences.

Participant three: *“I face the situation by speaking to my friends and also going to church.”*

Participant four: *“I am a believer, and I pray. I believe praying helps me, and without it she could have stabbed me with a knife. They try to come and pray at home, but she refuses the prayer, but they pray even though she does not want the prayer and they also advise her, but she does not listen. God is helping me and is protecting my life.”*

Participant seven: *“I have been spiritually strong, I have converted the pain into empowering myself by reading the Bible and hearing the Godly messages, Whenever I have issues I read the Bible, go to church and also listen to gospel messages, gospel words or scripture.”*

Religious beliefs and practices can give survivors of domestic violence hope, hope that things will change. There is also evidence that some women believe that they will not get support from their church leaders and members every time they need it. In one study it was discovered that most women think that if they admit to being victims of domestic violence, they will be seen as sinners (Libuku et al., 2008). In the study by Libuku et al. (2008), it is indicated that about 58% of the participants contacted religious people as their way of coping with domestic violence. Religious beliefs and practices can give survivors of domestic violence both hope and strength to deal with it. They can also help them to accept the situation.

Some survivors of domestic violence prefer reading a Bible if they are being abused, and this is also found in the current study, where survivors reported reading the Scriptures as a way of coping with domestic violence. They believe speaking to God will help them, and reading the Bible, and receiving prayers from church members. They believe God is protecting them from the violence, and that He will also help in intervening. The studies by Ting (2010), and Catherine and Fuchsel (2012) confirm that most survivors believe that their faith in God will help them in coping with domestic violence. They said reading the Bible at night and having a good relationship with God helps them to cope with the violence. Some people tell their pastors and church members, and they ask for prayers from them. Some women believe in God's will, and that helps them to cope. They remain passive, believing that in a patriarchal society their situation is their fate.

Watlington and Murphy (2006: 839) indicated show that in African-American society religion plays a vital role in helping women cope with domestic violence. Most women seem to use prayer as a coping skill in dealing with the distress in their lives. They tend to use religion more often than traditional mental health services, and believe that God is their friend in solution to any problem you facing they are facing. It is evident in the literature that mental health outcomes are of minor significance to

survivors of domestic violence who use religion as a coping mechanism. “Religious coping demonstrates that religious variables are related to less depression, anxiety and hostility”. According to Goodley (2012:53), most African-American abused women tend to seek help from their families and God before going to healthcare workers such as psychologists, social workers, and law enforcement officers. “The church has often put responsibility for the abuse on the woman by encouraging her to pray, honor her sacred obligation to marriage and forgive her partner.” Churches are powerful, and provide a place of healing, hope and opportunity in such ordinary but fundamental matters as learning how to read and write, and helping with shelter, clothing and other requirements for a life of human dignity. Churches have provided food for the soul and spiritual growth, which help one overcome life’s daily challenges.

Since many people believe that being close to God helps, church leaders must break their silence on domestic violence, and enable people to become more aware of it. This awareness can be promoted through the use of church activities such as ministries and religious education, by means of sermons. The preachers can give God’s perspective, by using their understanding of the Scriptures to teach people to understand the Bible and use it properly when taking decisions. It is indicated in some studies that interpretation of the Bible can be misused in a relationship to oppress women. Some scriptures have been used to persuade women to stay in an abusive relationship. The church emphasizes the necessity to forgive, since Christ forgave us. So a preacher can use the Scriptures to empower women and encourage a healthy relationship with no abuse (Goodley, 2012).

4.5.4 Suppression, tolerance and silence

These coping mechanisms are negative and disengaging mechanisms. Avoidance coping could include ignoring the problem, pretending nothing happened, and keeping one’s feelings to oneself (Waldrop & Resick, 2004). According to Cooper (2013), most women experience domestic violence when they are pregnant, and they tend to tolerate it because they feel there is nothing they can do to change the situation. Most participants reported that they keep quiet and tolerate the situation. The following are verbatim responses of the participants.

Participant four: *“I tolerate her”.*

Participant five: *“In fact I have tried to be strong, and fortunately I am not a person who talks while still angry. Unfortunately the time I asked to speak to him, he never gave me that chance, and then this happened.”*

Participant six: *“The method that I use is to keep quiet most of the time, and if I am quiet my husband even feels bad. He sees that there is something I should be asking, things I should be questioning, but I am just quiet and not asking him anything. The only thing I do, if his girlfriend has called me, I just forward the call. If she sends threatening smses I just forward them to him. If she sends pictures I also forward them to him.”*

Participant eight: *“What I do to cope with the situation is to stay inside the house until the sunset and always with him. I stay in the house for my safety and not to be beaten, I must listen to him and stay with him.”*

Participant ten: *“For me to cope I will tell you one word: suppressed, suppressed. It is because all these years he would talk and I would cry, but I would suppress it. I would put it in my subconscious mind as if it did not happen, because he also wanted that. It would be more like i have forgotten about it. but I did not. This damages me too much, and that is why I am taking treatment for depression because when it comes to consciousness it all comes back. I have not forgotten, and not forgiven him, but I have always kept it inside me and I did not talk to anyone.”*

Five out of ten participants reported using the disengaging mechanism as their way of coping with domestic violence. Only one person's answer to question three suggested tolerance as a coping mechanism. Some women tolerate the abuse just for peace and to maintain harmony within the family. Women are often blamed for their failed marriage and the victim's family often encourage her to stay in the marriage even if it is not working. They encourage women to avoid conflict as if it their fault (Hayati et al., 2013). The survivors of domestic violence find it difficult to escape it. Their internal resources may tell them that they have the power to fight and escape the violence, but again these resources may as often make them feel

powerless and incapable of escape. This is because of social norms, and what is expected from wives: they have to maintain peace and harmony at home (Hayati et al., 2013).

Women's self-efficacy, their sense of their own power, seems to be affected by rural isolation and the cultural values that emphasize the importance of the family unit. The study by Hayati et al. (2013) shows that most women use various coping skills that can include, disengagement from their situation.

According to Waldrop and Resick (2004), most women who experience physical abuse use avoidance as a coping strategy. The literature indicates that most survivors who use this strategy are those who have experienced severe domestic violence, and mostly physical abuse. These women were most likely not to receive social support from family and friends. Previous studies show that survivors of domestic violence who use more active coping strategies in dealing with it are those who have never experienced it before in their families. Those survivors who have a history in their family of domestic violence mostly use avoidance skills in dealing with the problem.

Keeping silent and not saying anything seems to be common to survivors of domestic violence. In keeping silent their aim is to minimize the damage –they are trying to avoid arguments which will lead to violence (Kaye, et al., 2007). In the current study, participants seem to use this mechanism as well. *Participant six* mentioned that she just keeps quiet and her husband feels bad and gets worried about her. What becomes clear is how damaging keeping silent can be: some survivors can have may suffer from anxiety, PTSD, depression, etc. *Participant ten*, for example, ended up suffering from depression because of the abuse, and not talking about it, or using some other coping mechanism to engage with the problem. In the study by Aisyah (2014:213) on women in Indonesia, it is suggested that most women do not look for help from other people. Those who experience domestic violence view it as natural and normal. These women believe that “speaking out about domestic violence causes a woman to feel shame, which undermines family honour.” They believe that they deserve it, and it is better to keep silent.

In the elastic band strategy, the victims of violence may have employed “constant stretching, by making efforts to oppose the violence.” They may seek support outside in the community, they may be assertive, spiritual, and make a positive diversion. But “the stretching was often followed by withdrawal and surrender though submissiveness, keeping silent or ignoring their husband’s behaviour.” In most cases the submissive way may be followed by an act of silence (Hayati et al., 2013). Most survivors in the current study were often observed to have used this strategy.

Many women In the study by Ting (2010) many women indicated that they cope with the violence by using a wishful thinking strategy. The survivors hope that things will change, and their husband will also change as time goes by. One participant in this study believes that her partner is abusive towards her because of love. She believes that things will change if she does not upset him. Even though in this study none of the participants use distraction as a coping mechanism, other studies show survivors using it. In Ting’s study (2010), survivors use work and school as distractions from the abuse they experience at home. When they are at work they tend to think less about the abuse because they are busy. Some even take their children to the library if they are not studying just to get out of the house, and they say that helps them a lot. Some women cope with domestic violence by being in denial, and they avoid thinking about it by using some distractions. Some survivors think their men’s violence towards them is an act of loving care (Ting, 2010).

Other women uses ego defence mechanisms to cope with domestic violence, they make excuses and rationalise their partner’s actions. They may say he was tired, or had a lot of work, or it was alcohol that made him violent, and when he was sober things would go back to normal (Libuku et al., 2008).

According to Calvete, Corral and Estevez (2007:369-370), a cognitive schema is defined as a “structure for screening, coding and interpreting experiences in a meaningful way.” Situations that are traumatic to individuals, such as abuse, can have a damaging impact on the “victim’s pre-existing cognitive schemas about themselves and the world and can produce maladaptive cognitions.” In some studies it is suggested that the victim’s cognition can be affected by the trauma of the violence. Domestic violence can impair one’s schemas that are related to self-

efficacy, self-confidence and self-worth. When the victims of domestic violence use maladaptive schemas in dealing with domestic violence, they can become vulnerable, and can have difficulty in managing their situation. These schemas influence a victim to use avoidance as a coping mechanism. They also limit her confidence in social support, as she believes that other people will not be there to support her. They will abandon her, or even hurt her (Calvete et al., 2007).

4.6 Resumé

This chapter has focused on the results of the study and also on discussions of the research findings. The following chapter focuses on recommendations, the limitations of the study, and the conclusion.

CHAPTER FIVE: RECOMMENDATIONS. LIMITATIONS OF THE STUDY

5.1 Introduction

This study set out to investigate the coping mechanisms of survivors of domestic violence in the Empangeni area in KwaZulu-Natal. It is hoped that these will assist in further studies that might be related to the topic. The limitations of the study and its recommendations are discussed in this chapter.

5.2 Limitations

- The results of this study cannot be generalised because they do not represent other survivors from other provinces and locations. The sample comprised of only ten participants, who were interviewed at the Empangeni Magistrate's Court
- The information gathered and the results were based on participants'/survivors' experiences. One should note that domestic violence is a sensitive issue, and some people hold back and do not speak about it openly and freely. Some participants were fearful, and did not find it easy to trust the procedure, which made them hold back information that could have been valuable to the study.
- The methodology was another limitation. This study employed qualitative techniques, and the limited number of participants were all from the same area of Empangeni. The use of a quantitative method could have provided another view. Especially using scales that measures emotion or problem focused coping.
- The study was done at the Magistrate's Court, where most participants were preoccupied with opening a case and obtaining a protection order. Time, therefore, was another limitation. Most participants did not have enough of it, as they had to go and see the magistrate, and fill in forms., Some participants gave vague responses and were in too much of a hurry to give full details, so some valuable information may be left may have been omitted.
- All the participants in this study were females, but of course domestic violence can happen to anyone regardless of their gender.

5.3 Recommendations

In this section the researcher makes some recommendations for survivors of domestic violence and people working with them, such as therapists and social workers, nurses, etc. These recommendations will help women with similar experience of domestic violence on how they can help themselves, and what has helped other survivors to cope with their predicament. The findings will also help those practitioners working with survivors of domestic violence on which strategies and interventions to develop.

- The methodology used in this study may have been too time-consuming, since most participants were at court to lay charges, and they seemed not to have time to spare. It is recommended that future researchers on the same topic change the method of collecting data. It would be beneficial to use questioners or focus group to collect the data.
- Clinicians need to educate the community and emphasize self-empowerment to survivors of domestic violence. They also need to educate the community about mental health issues. In educating people they need to understand individual cultures, as in some cultures gender equality is not considered normal; therefore those women who choose to stay in abusive relationship need information on ways they can use to be safe. In the Empangeni area it seems that little is known about the best ways to cope with domestic violence and its possible effects, such as mental illness. “Domestic violence ministries work with survivors to support their empowerment, renew self-esteem and self-worth, provide guidance and promote domestic violence awareness and education.” Health fairs, conferences and discussions which are open to the public would help to equip survivors with the knowledge they need (Goodley, 2012: 56).
- The media can also play a huge role in broadening awareness of domestic violence. The local radio station could have discussion programmes which would educate the community on how to treat women. There are a few programmes in the broadcasting media that look at the dynamics of domestic violence, but there is a need for a more aggressive approach within the society. In and around

Empangeni there is still a lot to be done, especially in the rural areas, where most survivors still consider domestic violence as normal. Psycho-education and awareness campaigns would help and be beneficial to the community, so that their mind-set would be modify.

- The nurses and social workers dealing with women issues have a huge challenge in addressing the issues related to domestic violence and gender inequality. These social therapists must encourage the survivors to seek help, especially at the clinics. As much as policies have changed, there is still a huge need for practitioners to familiarize the society and survivors with them. Practitioners can make the information be more accessible to the community.

5.4 Conclusion

Looking at the survivors' definition of domestic violence, it is clear that in this study most survivors of domestic violence had been victims of physical abuse, but had also experienced other forms of domestic violence.

In this study survivors of domestic violence have been found to use religion in dealing with the abuse they experience in their relationships. They believe that praying to and having faith in God is a good is an effective coping mechanism. This study was done at the Magistrate's Court, so all the participants had taken the step of going to court and reporting the matter. Even though some survivors were not open enough, some expressed their belief that the violence they experience is because of love.

The implications of the future research are that the society would have enough information and they would be able to use coping mechanisms which is positive. They would also be motivated to stop the cycle of violence and be able to utilise services in the community.

5.5 Resumé

This chapter looked at the limitations and recommendations of the study, and it concludes the entire study.

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ANNEXURE A

P.O. Box 4709
Stanger
4450
4 February 2014

The Magistrate
Empangeni Magistrate's Court
6 Union Street
Empangeni, KwaZulu-Natal
3880
recost
Dear Sir/Madam

Request for conducting a research study

I, Sinqobile A. Gumede, student number: 200814091, hereby request permission to conduct a research study at this court. I would like to recruit victims of domestic violence who have come to this court to lay charges. I request permission as well to conduct the interviews on the court premises. I am currently registered as a Clinical Psychology Master's student at the University of Zululand. One of the requirements is that I should conduct a research study.

The research study I am currently pursuing is titled: "**An investigation into the coping mechanisms of survivors of domestic violence**". Participation is voluntary. and participants' identity will be protected throughout the study.

Yours sincerely

Sinqobile A. Gumede (Miss)
Student Psychologist

ANNEXURE B: Research Participant's Information Letter

Researcher's details

Gumede, Sinqobile A. (Miss)

Department of Psychology

sagumede@gmail.com

Dear Research Participant

You are kindly invited to take part in the research study which aims at collecting information on coping mechanisms from survivors of domestic violence. The collection of such information will be used to develop a programme that can be used by other people who have had similar experiences to yours.

Please take time to read the following information, and you may ask any questions if you need clarity. You are required to take part in an individual interview process which will take approximately an hour. The information that you will share will remain confidential, and you will remain anonymous as there will be no names required.

Your participation is voluntary, you can refuse it should you feel uncomfortable, and you are free to withdraw at any time without fear. If you decide to withdraw your information will be destroyed.

Please note that should you agree to participate, and during the course of the interview you experience any emotional discomfort, professional help from a qualified person will be made available to you. For clarity the information you will give, a tape recorder will be used.

Declaration

I _____ (signature) ___/___/___ (date), confirm that I have read and understood the information. I understand that my participation is voluntary, and that I am free to withdraw at any time without giving a reason and without cost. I understand that I shall be given a copy of this consent letter. I voluntarily agree to take part in this study.

Witness:

Ulwazi lobambe iqhaza ocwaningweni

Imininingwane kacwaningi

Gumede Sinqobile A. (Miss)

sagumed@gmail.com

Sawubona mcobeleli wolwazi

Umnyango wezengqondo

Uyamenywa ukuba uthathe iqhaza kucwaningo olinenhloso yokubhala ulwazi mayelana nezindlela abazisebenzisayo abasindile kudlame lwasekhaya. Ukuqoqwa kwalolu lwazi luzosebenziswa ukwakha uhlelo ulungasebenziswa abanye abantu ababe nesimo esifanayo nesakho.

Ngicela uthathe isikhathi ufunde lemininingwane elandelayo,uma unemibuzo noma udinga incazelo ungabuza.Uyacelwa ukuthi uthathe iqhaza kucwaningo olungathatha isikhathi esiyihora. Imininingwane ozoyabelana nathi izoba imfihlo,futhi igama lakho alindingakali.

Ukuhlaganyela kwakho akusiyo impoqo futhi unganqaba ukubamba iqhaza uma uzizwa ungakhululekile. Unalo futhi ilungelo lokuyeka noma kuyisiphi isikhathi ngaphandle kokusaba. Uma uyeka imininingwane yakho izoshabaliswa.

Uyacelwa uma uzothatha iqhaza kulolucwaningo ukuba usho uma ungazizwa kahle emoyen, usizo oluphuma kumuntu oqheqheshiwe luzonikezwa. Khona imininingwane izozwakala kahle,isiqopha msindo sizosebenziswa.

Isimemezelo

Mina_____ (Sayina)____/____/____ (usuku), ngiyaqinisekisa ukuthi ngiyifundile ngayiqonda imininingwane. Ngियाqonda ukuba iqhaza lami aluphoqiwe futhi ngingayeka kunoma isiphi isikhath, ngaphandle kokunika isizathu. Ngियाqhonda ukuba ngizonikezwa ikhophi yesivumelwano. Ngiyavuma ukuba inxenye yocwaningo ngaphandle kokuphoqwa.

Ufakazi_____

ANNEXURE C**Interview plan****Participant no.....****Title: An investigation into coping mechanism of survivors of domestic violence**

Date of interview _____ / _____ / _____ venue _____

Start time _____ _ Finish

time _____

Biographical Information

1. Date of birth _____ / _____ / _____ 2.

Age _____

3. Home language _____

4. Home address _____

5. Which cultural group do you belong to? _____

6. Marital status

married _____ single _____ divorced _____ widow _____

7. Do you have any children? Yes/No

8. If yes, How many? _____

9. Have you ever been in an abusive relationship? Yes/ No

10. If "yes", how long have you been in that abusive relationship? _____

11. What is your current employment status? _____

12. Do you have any source of income? _____

If a participant does not meet the criteria, s/he will be excluded.

Uhlelombuzo**Inombolo yobambe iqhaza_____**

Isihloko socwaningo: Uphenyo mayelana nendlela ababhekana nodlame lwasekhaya abasindile.

Usuku lokubonana nobuzwa imibuzo____/____/____

Indawo_____

Isikhathi sokuqala_____

Isikhathi

sokuqeda_____

Imininingwane Ngawe

1. Usuku lwakho lokuzalwa_____/_____/_____
2. Iminyaka yakho yobudala_____
3. Ulimi lwebele_____
4. Ikheli lasekhaya_____
5. Usiko lwakho_____
6. Isimo sakho sokushada
Ushadile_____,
wedwa_____,Ohlukanisile_____,umfelokazi_____
7. Unabo abantwana Yebo noma Cha_____
8. Unabantwana abangaki_____
9. Uyahlukumezeka ebudlelwaneni bakho. Yebo noma Cha
10. Uma impendulo yakho ku-Yebo, sekwiyisikhathi esingakanani
usebudlelwaneni obuhlukumezayo_____
11. Sithini isimo skho somsebenzi
12. Unawo omunye umthombo wemali engenayo_____

Uma obambe iqhaza engahlanganisi inqubo, uzoshiwa ngaohandle.

ANNEXURE D: Research Main Questions

My name is Sinqobile Gumede. I am doing a Master's degree in Clinical Psychology at the University of Zululand. I am conducting a study based on domestic violence, and the title is "An investigation into coping mechanisms of survivors of domestic violence". I would like to ask you some questions based on your situation. Please answer all questions as honestly as you can, but if you feel too uncomfortable to continue, you may stop at any time.

1.1 Please define what you understand by domestic violence.

1.2 How have you coped with the ordeal of family violence?

1.3 What other coping mechanisms, besides the one you used, could help other survivors?

The researcher will probe for more information if necessary.

Indikimba yemibuzo yocwaningo (Zulu)

Igama lami ngingu Sinqobile Gumede, ngiyitshudeni saseNyuvesi yakwaZulu ngenza izifundo zobuchwepheshe benqondo. Ngenza ucwaningo olusihloko sithi: Uphenyo mayelana nendlela ababhekana nodlame lwasekhaya abasindile. Ngicela ukubuza imibuzo mayelana nesimo sakho. Ngicela uphendule yonke imibuzo ngokwethembek, uma uzizwa ungakhululekile ukuqubeka ungayeka noma ingasiphi isikhathi.

1.1. Ngicela uchaze ukuthi uqonda ukuthini ukuhlukumezeka kwasekhaya

1.2. Ubhekana kanjani nosizi lokuhlukumezeka ekhaya.

1.3. Yiziphi ezinye izindlela ngaphandle osuzibalile omunye umuntu obhekene nokuhlukunyezwa kwasekhaya angazisebenzisa?

Ucwaningi uzophenya mayelana nokuthola imininingwane ethe xa xa uma kunesidingo.

ANNEXURE E: PARTICIPANT INFORMED CONSENT DECLARATION

INFORMED CONSENT DECLARATION

(Participant)

Project Title: An investigation into the coping mechanisms of survivors of domestic violence

Singobile Angelica Gumede, from the Department of Psychology, University of Zululand, has requested my permission to participate in the above-mentioned research project.

The nature and the purpose of the research project, and of this informed consent declaration, have been explained to me in a language that I understand.

I am aware that:

1. The purpose of the research project is to find out which coping mechanisms are most used by victims to deal with the violence, and also to find out how many mechanisms combat domestic violence.
2. The University of Zululand has given ethical clearance to this research project, and I have seen/may request to see the clearance certificate.
3. By participating in this research project I will be contributing towards developing a literature on coping strategies used by the South African population who have faced domestic violence. I also hope that the data that will be collected will assist in formulating coping programmes.
4. I shall participate in the project by sharing my experience of domestic violence. The researcher will ask questions related to domestic violence, and I shall respond by sharing my personal experience. A tape recorder will be used to record the interview.
5. My participation is entirely voluntary and should I at any stage wish to withdraw from participating further, I may do so without any negative consequences.
6. I shall not be compensated for participating in the research, but my out-of-pocket expenses will be reimbursed.

7. There will be no risks associated with my participation in the project.
8. The researcher intends publishing the research results in the form of a thesis and scientific articles. However, confidentiality and anonymity of records will be maintained, and my name and identity will not be revealed to anyone who has not been involved in the conduct of the research.
9. Any further questions that I might have concerning the research or my participation will be answered by Singobile Gumede, 076 868 6041.
10. By signing this informed consent declaration I am not waiving any legal claims, rights or remedies.
11. A copy of this informed consent declaration will be given to me, and the original will be kept on record.

I, have read the above information / confirm that the above information has been explained to me in a language that I understand, and I am aware of this document's contents. I have asked all questions that I wished to ask, and these have been answered to my satisfaction. I fully understand what is expected of me during the research.

I have not been pressurised in any way, and I voluntarily agree to participate in the above-mentioned project.

.....
Participant's signature

.....
Date

IMVUME YOKUFAKWA IMIBUZO YOMCOBELELI

Umcobelesi

Isihloko socwaningo:Uphenyo mayelana nendlela ababhekana nodlame lwasekhaya abasindile

UGumede Sinqobile Angelica ophuma kumnyango wezenqondo eNyuvesi yakwaZulu ucele imvume yokuba ngibambe iqhaza kucwaningo olushiwo ngaphezulu.

Uhlobo nenhloso yocwaningo kanye nemvume yokubamba iqhaza kuchazwe ngolimi engilizwayo.

Ngiyazi ukuba:

1. Inhloso yocwaningo ukuthola ukuthi iziphi izindlela abazisebenzisayo abasindile kudlame lwasekhaya, nokuba zinaki izindlela ezilwisana nodlame lwasekhaya.
2. INyuvesi yakwaZulu inikeze imvume yokuba lolucwaningo lwenzeke, ngiyibonile futhi ngiyazi ukuba ngingayicela noma kunini.
3. Ukubamba kwami iqhaza kulolucwaningo ngiyoba ngisiza ekwakheni ulwazi mayelana nezzindlela abantu baseNgingizimu Africa anangazisebenzisa ukumelana nodlame lwasekhaya. Ngiyethemba futhi ukuba ulwazi oluzotholakala luyosiza ekwakheni izihlelo zokulwisana nodlame lwasekhaya.
4. Ngizobamba iqhaza kucwaningo ngokuba ngixoxisane nomcwaningi mayelana nolwazi lwami kudlame lwasekhaya. Ngizophendula imibuzo futhi isiqhopho mazwi sizosebenza.
5. Ukubamba kwami iqhaza akuphoqwiwe neze futhi ngingayeka ukuphendula imibuzo kunoma isiphi isikhathi.
6. Ngenke ngikhokhelwe, kodwa uma ngisebenzise imali yami ngizokhokhelwa.
7. Ngenke kube khona bungozi ekubambeni iqhaza kucwaningo.
8. Ucwangingi uzimisele ngokuba ucwaningo lubhalwe kuma phepha abhaliwe. Imininingwane yami izoba imfihlo futhi akekho ozokwazi ngocwaningo, negama lami nokuthi ngingubani angenke kukhishwe.
9. Uma kukhona eminye imibuzi mayelana nocwaningo, ngizobuza u-Gumede

Sinqobile ku-0768686041.

10. Ngokusayina imvume yokubamba iqhaza, anginikezi imvume yezomthetho.

11. Imvume yokubamba iqhaza ngizoyithola ngiyigcine kumina, anye izosala nocwaningi.

Mina _____ ngiyifundile

imininigwane futhi ngiyavuma ukuba lemininingwane ichaziwe ngolimi engilizwayo.

Ngiyibuzile yonke imibuzo futhi ngathola izimpendulo ezigculisayo. Ngiyazi ukuba yini edingekayo mayelana nocwaningo.

Kusayina umcobelevi

Usuku

**UNIVERSITY RESEARCH ETHICS
COMMITTEE**

(Reg No: UZREC 171110-30)



UNIVERSITY OF ZULULAND

Website: <http://www.unizulu.ac.za>

Private Bag X1001
KwaDlangezwa 3886

Tel: 035 902 6887

Fax: 035 902 6222

Email: ManqeS@unizulu.ac.za

ETHICAL CLEARANCE CERTIFICATE

Certificate Number	UZREC 171110-030 PGM 2014/85				
Project Title	An investigation into the coping mechanisms of survivors of domestic violence				
Principal Researcher/ Investigator	SA Gumede				
Supervisor and Co- supervisor	Prof. JD Thwala				
Department	Psychology				
Nature of Project	Honours/4 th Year	Master's	x	Doctoral	Departmental

The University of Zululand's Research Ethics Committee (UZREC) hereby gives ethical approval in respect of the undertakings contained in the above-mentioned project proposal and the documents listed on page 2 of this Certificate. Special conditions, if any, are also listed on page 2.

The Researcher may therefore commence with the research as from the date of this Certificate, using the reference number indicated above, but may not conduct any data collection using research instruments that are yet to be approved.

Please note that the UZREC must be informed immediately of

- Any material change in the conditions or undertakings mentioned in the documents that were presented to the UZREC
- Any material breaches of ethical undertakings or events that impact upon the ethical conduct of the research

The Principal Researcher must report to the UZREC in the prescribed format, where applicable, annually and at the end of the project, in respect of ethical compliance.

The table below indicates which documents the UZREC considered in granting this Certificate and which documents, if any, still require ethical clearance. (Please note that this is not a closed list and should new instruments be developed, these may also require approval.)

Documents	Considered	To be submitted	Not required
Faculty Research Ethics Committee recommendation	X		
Animal Research Ethics Committee recommendation			X
Health Research Ethics Committee recommendation			X
Ethical clearance application form	X		
Project registration proposal	X		
Informed consent from participants	X		
Informed consent from parent/guardian			X
Permission for access to sites/information/participants	X		
Permission to use documents/copyright clearance			X
Data collection/survey instrument/questionnaire	X		
Data collection instrument in appropriate language		Only if necessary	
Other data collection instruments		Only if used	

Special conditions: Documents marked "To be submitted" must be presented for ethical clearance before any data collection can commence.

The UZREC retains the right to:

- Withdraw or amend this Certificate if
 - Any unethical principles or practices are revealed or suspected
 - Relevant information has been withheld or misrepresented
 - Regulatory changes of whatsoever nature so require
 - The conditions contained in this Certificate have not been adhered to

- Request access to any information or data at any time during the course or after completion of the project

The UZREC wishes the researcher well in conducting the research.



Professor Rob Midgley

Deputy Vice-Chancellor, Research and Innovation RESEARCH & INNOVATION OFFICE

Chairperson: University Research Ethics Committee

10 March 2014

CHAIRPERSON
UNIVERSITY OF ZULULAND RESEARCH
ETHICS COMMITTEE (UZREC)
 REG NO: UZREC 171110-30

11 -03- 2014