

A Qualitative Study of Women's Long-Term Experience of
Trauma More Than Ten Years After Exiting Domestic Abuse

Olivia Carr

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Head of Department: Dr Seamus Taylor

Supervisors of Research

Dr Joe Larragy
Dr Niamh Flanagan

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To conclude, thank you to my family and my friends for their love, patience and generosity. I will make up now for all those events I've missed!

Special thanks to Dr Patricia Kennedy without whom I would never have imagined that this would have been possible.

Dedication

I dedicate this dissertation to my two sons, Jim and Stuart.
With very special appreciation of your love, support and wisdom.

Declaration

I, the Candidate, certify that this thesis is all my own work and that I have not obtained a degree in this University or elsewhere on the basis of any of this work.

Signature: Olivia Kaxh

Date: 12th July 2023

Abstract

Coercive control is a global phenomenon that has a serious impact on victims' mental, physical, sexual, and financial wellbeing. The aim of this study was to explore qualitatively the long-term impacts on women who had left coercive control relationships more than ten years previously. It was carried out to extend the empirical understanding about the ongoing role coercive control continues to have in women's lives years after they exited those relationships and thereby open the possibilities for policy and procedural changes to prevent long-term harm. Initially a review of the literature demonstrated that this specific area had hitherto received scant attention. Initially this entailed a review coercive control through a feminist and trauma focused lens to support the study of coercive control in both the private and the public domains and the impact of the dominant hegemonies through a feminist analysis of patriarchy. Ethical approval was acquired and a loosely-structured interview schedule was used for in-depth interviews with seven women who fitted the study criteria. This was thematically explored in three phases: the relationship; breaking free and their current lives. The key findings illustrate that the women who experienced coercive control continue to live with the trauma they experienced with the perpetrators and that it continues to significantly affect the women's lives physically, psychologically and financially. Furthermore, it emerged that the effects of their help-seeking encounters within the public domain, especially within the judicial and financial sectors, reactivated and exacerbated the traumas they experienced within the private sphere. Moreover, they indicated that in their experience public discourse pertaining to coercive control continues to blame and shame the victim resulting in their only sharing their experiences of the abuse they experienced with a small trusted group of friends. It is evident that significant research has taken place leading to substantial policies in relation to coercive control. However, this study demonstrates that it is imperative that hegemonic patriarchal discourse that the participants encountered be addressed for victims of coercive control, and women in general, to ensure a safe egalitarian society.

Glossary of terms

AIM: Action Information Motivation, *a pressure group that campaigned for women's equality in marriage*

An Illocutionary Act: to conveying the meaning behind the literal word

CBT: Cognitive behavioural therapy

CCV: Coercive Controlling Violence

CPTSD: Complex Post-Traumatic Stress Disorder

CTS: Conflict Tactic Scale

Cosc: National Office for the Prevention of Domestic, Sexual and Gender-based Violence, formally in the Department of Justice and Equality

DESNOS: Disorders of Extreme Stress Not Otherwise Specified

EIGE: European Institute for Gender Equality, an agency of the European Union

FLAC: Free Legal Aid Commission

FRA: European Union Agency for Fundamental Rights, an agency of the European Union

GAD: Generalised anxiety disorder

Gardaí/ Garda Síochána: Garda Síochána, Ireland's national police force

GDPR: General Data Protection Regulation

GBV: Gender-based violence

GP: General Practitioner or family doctor

GPS: Global Positioning Systems

ICD-11: International Classification of Diseases 11th Revision

IPV: Intimate Partner Violence

Istanbul Convention: Council of Europe Convention on preventing and combating violence against women and domestic violence

IWLM: Irish Women's Liberation Movement

NISVS: National Intimate Partner and Sexual Violence Survey 2010-12 (USA report)

NWC: National Women's Council of Ireland

OECD: Organization for Economic Cooperation and Development

PTSD: Post-Traumatic Stress Disorder

SAFE Ireland: National Irish network of women's domestic violence services and refuges.

SOC: Levels of a sense of coherence

Tusla: Child and Family Agency, state agency responsible for child protection and family support services in Ireland

TIP: Trauma Informed Care

UNICEF: United Nations International Children's Emergency Fund

WDV: Witnessing domestic violence

Women's Aid: Domestic violence service in Ireland and England

WHO: World Health Organization

WOVe: Women Overcoming Violent Ex

Chapter 1: Introduction

Introduction

This study explores the long-term experiences of trauma on female survivors of coercive control relationships more than ten years after they have left those relationships. This is an area that has previously received scant attention in the literature. The research explores the literature on trauma and its relationship to coercive control, including a feminist perspective on the issue of coercive control in relationships. These concepts are studied through adaptation of Bronfenbrenner's (1970) ecological framework that includes micro, meso and macro levels of social systems. This is followed by an extensive review of the literature, using a feminist lens, on the consequences for women of living in a coercive control relationship, the impact of patriarchy in the private and public spheres, taking in the trajectory from the beginning of the relationship, leaving, and the consequences for women ten years later. The social and cultural conditions in Ireland until the 1960's was such that women on marriage became dependent on their husbands. Social activists were involved in the growth of movements in Europe and America for civil rights generally and in Ireland with the feminist movement activism for change for women in Ireland. Consequently social and legal climate in Ireland from late 1960's to date is explored pertaining to legal changes to the coercive control since that time. This qualitative research study focuses on the perceptions and experiences of individual women who experienced coercive control in their relationship with an intimate partner, explores whether they perceive that they experience long-term trauma in their lives resulting from coercive control.

Background

The study was located in Ireland. The research grew out of facilitation work with a group of women survivors of coercive control women attending WOVe (Women Overcoming Violent experiences). It became evident to the researcher that many of the women, while moving from describing themselves as victims to that of survivors

continued to live in a survivalist mode. They continued to demonstrate heightened anxiety and fear and appeared unable to develop trust and collaborative relationships. Years after the end of the coercive control relationship, women spoke about experiencing ongoing psychological symptoms including extreme anxiety, flashbacks, nightmares and severe emotional distress, which they said intensified when they engaged in events that reminded them of their experiences of coercive control. When the researcher attempted to identify the problem, she found a paucity of literature through which to understand this phenomenon (Lawn & Karestan, 2021).

Study Aim

The aim of this research is to explore women's experiences and perceptions of the impact of a coercive control relationship on their lives more than 10 years after they left those relationships. Research indicates that living in a coercive control relationship significantly impacts across women's lives including their physical, psychological, sexual and financial health and that it strips them of their autonomy (Stark, 2009). This study aims to access female survivors of coercive control, who had those experiences and to understand the consequences for them, within the relationship, their journey out of those relationships, and how they have found it impacting on their lives in the years since they left to the present day.

The purpose of the study

The purpose of this research is to investigate the gap in the literature pertaining to the problems, including trauma, that women demonstrate more than a decade after leaving coercive control relationships. This research recognizes that the women who experienced coercive control in their relationships, who broke free from those relationships and who have gone on to live their lives for at least ten years after leaving coercive control relationships are the most qualified to speak about the issue and how it has impacted on their lives. Consequently, ethical approval was acquired, a qualitative methodology using semi-structured interview schedule was implemented to explore the women's experiences during the relationship, the ending process and ten years later. This generated the data for thematic analysis to explore the premise

that women suffer long-term trauma as a consequence of coercive control relationships.

The scope and limitations of the study

As an in-depth study using qualitative methods with a small group of women who lived through these experiences it is acknowledged that the findings cannot be generalized to the whole population of women who experience coercive control. However, it is hoped that it will contribute to the debate and lead to further significant qualitative and quantitative research to inform policies and services for women in those situations. This, in turn, will raise awareness of the supports that women who leave coercive control relationships and who are continuing to suffer as a long-term consequence of coercive control require from agencies including health, judicial, financial and social services.

Coercive control, its impact on women by men in intimate relationships and across civil, legal and social systems.

The term ‘rule of thumb’ is linked with the historical expectation that a man was merely expected to be moderate i.e., ‘chastise or guide’ his wife with a stick no larger than his thumb (Amussen, 1994). Many classifications have been used in research, policy, and public discussion relating to violence against women in intimate relationships. Those terms have included such expressions as wife battering, domestic abuse, and domestic violence, intimate partner violence, violence against women, gender-based violence and coercive control. Researchers note that the definitions of and terminology used to describe the issue has changed and evolved over the past fifty years, depending on who was writing about the issue, their profession and who they are writing it for, and the context and timeframe in which it was written (Jolin & Steffen, 2002; Buzawa et al., 2015). The researcher of this study considers coercive control the most appropriate term to describe the issue, so it is used throughout the research other than when discussing the legal responses innated by the Irish government in relation to the issues. The term coercive control has come to the fore due to the inadequacy of measuring of physical violence (Stark & Hester, 2019).

Coercive control is a pattern of behaviours, most frequently used by men on women, that can include physical, psychological, financial, and sexual harassment, stalking, gaslighting and manipulation that combine to control and strip the victim of their autonomy (Stark 2009). Coercive control describes abuser's intention to control the victim, the victim's fear of the perpetrator, her belief that he means to follow through with his threats, it eliminates her self-belief and the belief that she can change her situation (Hamberger et al., 2017; Sharp-Jeff et al., 2018).

Coercive control is a significantly underreported, world-wide public health phenomenon, that is mainly experienced by women in the so-called sanctity of the home (Palermo et al., 2014; Asay et al., 2016; Lausi et al., 2021). Women experience more what the researchers describe as severe injuries i.e., 23% of female victims experience broken bones compared to 2% of male victims, and the gendered impact of the abuse is also evident in the physical and psychological harms of those behaviours (Watson & Parsons 2005). Research indicates that at least one-in-three women have experienced gender-based violence and that 38% of women who are killed are victims of an intimate partner (WHO, 2021). It compares globally with other major health threats as a leading cause of death (Kerns et al., 2008). Cross-cultural studies estimate that between 15% and 71% of women report having experienced physical or sexual abuse in their lifetime, allowing some outliers, the spread in most states was from 30% to 60% (Garcia-Moreno et al., 2005: xv). Very old In the 2014 study *Violence Against Women: An EU-wide Survey* by the European Union Fundamental Rights Agency (FRA, 2014), it was reported that 15.6% of Irish women have experienced physical violence from a current or previous partner while 31% have experienced psychological violence from a current partner.

The Istanbul Convention describes coercive control as

'... a violation of human rights and a form of discrimination.' (Council of Europe Istanbul Convention, 2016).

While the European Institute of Gender Equality (EIGE, 2017) describe it as the physical, sexual, or economic, gendered violence that occurs between current or past spouses or intimate partners which

'...cannot be sensibly separated from some measure of the impact of those behaviours in terms of severity or harm.' (Watson & Parsons, 2005:39)

In Ireland the cross departmental agency, Cosc, which was established in 2007 to coordinate the delivery of responses to prevent violence against women including what at the time was termed as domestic violence, and now as coercive control, states:

'Domestic Violence refers to the use of physical or emotional force or threat of physical force, including sexual violence in close adult relationships...involve emotional abuse; the destruction of property; isolation from friends, family and other potential sources of support; threats to others including children; stalking; and control over access to money, personal items, food, transportation and the telephone.' (Cosc, 2018).

The WHO define coercive control as:

'Physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours.' (The World Health Organisation, WHO, 2021)

Watts and Zimmerman notes that coercive control

'...takes various forms, including physical violence ranging from slaps, punches, and kicks to assaults with a weapon and homicide...and sexual violence takes forms such as forced sex, or forced participation in degrading sexual acts. These are frequently accompanied by emotionally abusive behaviours such as prohibiting a woman from seeing her family and friends, ongoing belittlement or humiliation, or intimidation; economic restrictions such as preventing a woman from working, or confiscating her earnings; and other controlling behaviours.' (2002:1233)

What coercive control involves and how affects the lives of women

The research indicates that women experience coercive control as a range of abusive behaviours (Swartout et al., 2013) rather than one discrete form of violence (Krahé, 2018). The lifetime effects of women's experiences of coercive control can be psychological, physical, and emotional (Sanz-Barbero et al., 2019). Research shows that women suffer long-term physical and psychological injuries as a direct

consequence of physical violence (Sanz-Barbero et al., 2019), that they suffer chronic pain (Wuest et al., 2008). The physical impact of coercive control, in addition to the short-term impacts such as black eyes and broken bones, can result in significant long-term health issues including stomach, pelvis, head, and back pain and they also can result in chronic pain from swollen and painful joints (Wuest et al., 2008). Women are at greater risk of sexually transmitted diseases, asthma, strokes, and heart disease (Harris et al., 2012). While research indicates coercive control receives little or no attention in training programmes in medical (Pagels et al., 2015; Ngoc, 2017; Valpied et al., 2017; Baum et al., 2022) dental colleges (Parish et al., 2018; Bregulla et al., 2022). Furthermore women suffer damage to their property or reputation and limited access to transport and outside communication (Mechanic et al., 2008; Johnson, 2017; Pickover et al., 2017). Consequently, research demonstrates that coercive control from an intimate partner significantly impacts victims' lives and can result in them feeling 'less than human' (Fortes, 2015).

Coercive control has significant economic impact across the lives of female victims (Crossman et al., 2016; McLean, 2017; Peterson et al., 2017; Gürkan et al., 2018). The World Health Organisation (WHO, 2021) indicates that coercive control is disproportionately experienced by women because gender inequality reduces women's opportunities to equal access to resources globally. These impacts are experienced in the struggle by individual women for pay and gender equality (Carey et al., 2018). Furthermore, these economic effects of coercive control impact on society (Bonomi et al., 2006; Palermo et al., 2014; Peterson et al., 2018; Duvvury et al., 2022). Those costs are across a range of areas including healthcare, the judiciary, housing, the workplace, and social services including pensions.

Long-term implications of coercive control on women

To date only a small number of studies look at the health outcomes for women who were victims of domestic abuse up to ten years after they left the violent relationship (Lindhorst & Beadnell, 2011; McFarlane et al., 2020). In a systemic review of qualitative literature that had been carried out with women who had left violent

partners Sleutel (1998) suggested further qualitative research be carried out in the area because she suggests that:

'Nothing galvanizes the reader to action like a harrowing first-person account of a life lived with violence and terror.' (1998: 537)

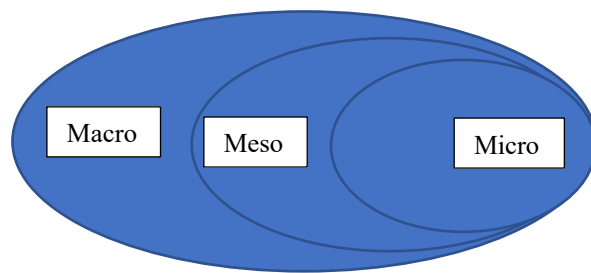
That research indicated the commonalities in women's stories about the abuse that they experienced. However, while significant research has focused on the issue of coercive control, little attention has been given to the voices of the women who have left those relationships about their perception of the long-term mental and physical or other consequences on their lives. The literature does indicate that women with a history of coercive control decades previously had higher propensity for psychological disorders and Post-Traumatic Stress Disorder (PTSD) than women who did not experience coercive control (Cook et al., 2011). The psychological impacts of coercive control on victims have been compared with the PTSD experienced by victims of the Holocaust (Herman, 2015) and with Complex PTSD (CPTSD), a disorder which takes into consideration the consequences of living in an ongoing traumatic environment such as in the case of victims of coercive control (Cloitre et al., 2009). However, a significant dearth of literature exists in relation to the impact, and consequences, of coercive control across the lives of women who are out of those violent relationships for more than ten years. This is especially significant when linked to evidence that PTSD is associated with numerous physical health problems, is linked with dementia and premature death (Lohr et al., 2015) and the evidence that poverty, and all the stresses that it entails, can follow victims of coercive control into retirement and old age (Adams et al., 2012).

Exploring victims' experience of coercive control in the family, community and society: the micro, meso and macro levels.

To explore the experiences within the myriad issues involved in coercive control relationships the research explored women's lives in the relationship, their experiences in their community including the social, legal and financial systems. It included the

attitudes the women encountered in society generally when they left the relationship and the long-term experiences of the impacts of coercive control. The researcher employed an adaptation of Bronfenbrenner's (1977) ecological framework. This approach that nested the micro system, meso system and a macro system, centred around the victim, as set out schematically in Figure 1.

Figure 1: The micro, meso and macro systems



Micro system – the family system where coercive control occurs.

Mesosystem – the survivors links into local culture, community supports, health care, resources, and socio-economic framework, which they may or may not take part in, but which have an influence on their daily lives.

Macro system – social attitudes about coercive control and male entitlements as demonstrated in cultural and subcultural attitudes within the social, legal and economic structures and in social policy and legal responses pertaining to the support and protection of women in relation to coercive control.

Adapted by researcher from Heise, 1998.

This created a starting place from which to analyse the literature relating to coercive control through a feminist lens and the long-term experiences of survivors of coercive control. Furthermore, the response carried out to prevent and respond to coercive control by the WHO (2021); national governments (Gov UK, 2022; Cosc, 2018) and by NGOs across the world, including, Women's Aid (2022).

At the micro level, the intimate relationship within which the women are involved, the framework created the opportunity for the researcher to explore theories of coercive control and its impact on women in their home, to explore how coercive control impacts on women physically, psychologically, sexually and financially.

At the meso level, the community and social level women experience outside the home and life with the perpetrator of coercive control the framework opened the possibility to explore how the consequences of coercive impact women's lives as they try to break free from the perpetrators and how their support systems, family and friendships respond and the reaction of health care providers, financial services and the judiciary when they attempt to access help because of their experience of coercive control. It also creates the opportunity to understand their perception of the understanding within those systems of coercive control.

This stage also created the opening to study the experiences that resulted from the perpetrators' behaviour in relation to women's financial well-being by exploring its impact on their capacity to work outside the home. This included its impact on their workplace experiences, their career development and the compounding effects of these impacts on women's credit history. Furthermore, the macro level opened the opportunity to explore how the implicit and explicit rules and structures that govern society, 'the ideology made manifest through custom and practice in everyday life' (Bronfenbrenner, 1977: 5) are experienced by victims of coercive control.

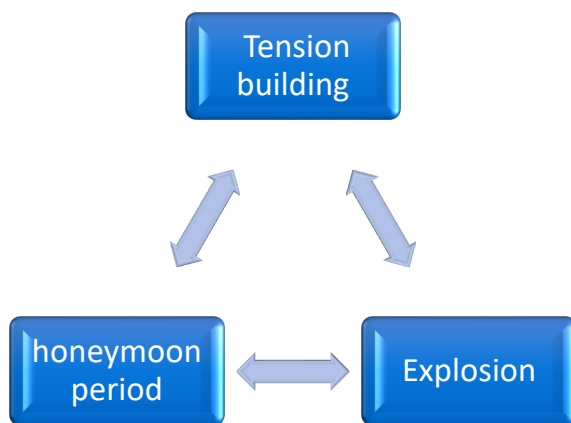
At the macro level in society, research links gender-based inequalities and violence against women (Latzman et al., 2018). This framework created the opportunity to explore questions of how patriarchal social and cultural attitudes, and discourse, shape and influence responses women experience to coercive control. Furthermore, how socio-political and other structures may consciously or unconsciously govern the minds of the service providers, and others, about what women who are victims of coercive control experience when they try to access support from state institutions and society in general.

The Cycle of Power and Control within coercive control relationships

Research suggests that victims of coercive control, especially younger victims, frequently do not recognise the early signs (Começanha et al., 2017; Francis & Pearson, 2021). Early in the relationship coercive control can be subtle with perpetrators using "gaslighting" and manipulative behaviours (Sweet, 2019) that

disempower the victim who, as a result, can find themselves isolated, cut off from family, friends and a supportive community by the time they realise that they are victims (Taggard & Montayre, 2019; Smyth et al., 2021). The patterns of behaviours that are used in coercive control, frequently beginning with the psychological behaviours outlined by Sweet (2019) was originally described by Walker (2006).

Figure 2: Cycle of Power and Control



The researcher expanded Walkers (2006) cycle of violence to acknowledge changes that occur over the life span of violent relationships to include the opportunity to explore extended periods of time in some of the phases or the elimination of other phases in the cycle.

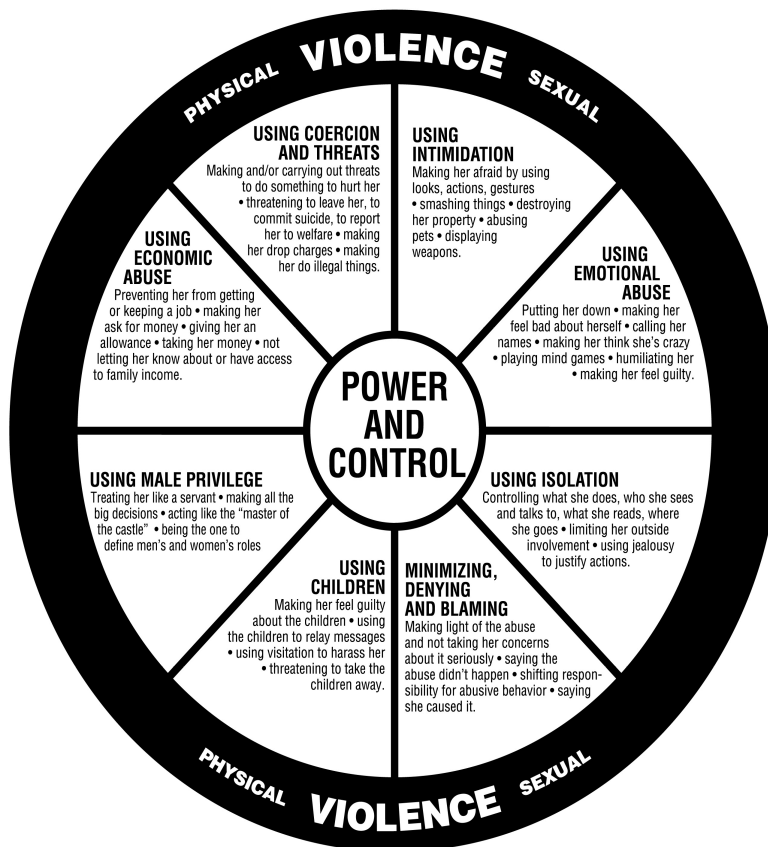
This framework is drawn upon by the researcher to demonstrate how the perpetrator of coercive control initially draws women into and maintains the cycle of abuse within the relationship. It explains how the first stages the tension within the relationship builds up and women work to try to alleviate the tension, a phase women describe victims of coercive control as walking on eggshells (Martin-Denham, 2021). This phase can result in an acute and typically violent explosion, which is the phase when women are at serious risk of physical and psychological injury. She indicates that this phase is followed by what she described as a honeymoon period where the perpetrator is contrite and loving, raising hope within the victim that all will be well again in the relationship. However, she suggests that coercive control increases over time. Since the original research was carried out little work has been done to understand the psychological impact of that cycle (Both et al., 2019). As the spiralling pattern as

described by Walker (2006) can be seen only over time, the present research opened the opportunity to use that lens over a longer duration than usual to view the pattern of coercive control as revealed by women’s experience of changes over the course of time beyond the termination of coercive control relationships.

How power and control are maintained in coercive control relationships.

Coercive control behaviours change over time as perpetrators assert their right to exercise power and control over their intimate partner using the behaviours described in the ‘Wheel of Power’ by Pence & Paymar (1993). The fear generated by the use of the tactics outlined in the wheel results, over time, in the control of the women who live under those conditions.

Figure 3: Power and Control Wheel



The Power and Control Wheel was created by Ellen Pence & Michael Paymar (1993) for use in the Duluth Domestic Abuse Intervention Programme.

They suggest that the behaviour is not about power over but rather a right to that power. They indicate that the behaviours were used to assert and maintain that right. The fear generated using the tactics outlined in the wheel results over time in the control of women who live under those conditions.

Ultimately coercive control infiltrates all aspects of the victims' lives, as the perpetrators' coercive control instils fear and it takes away their autonomy, freedom and sense of self (Stark, 2013). Using the Power and Control wheel expanded the research from the microsystem to both the mesosystem and the macro level by opening it to explore the impact of those behaviours across all aspects of women's lives. It opened the lens to victims' experience of how coercive control impacted their lives within their local communities, including family, friends, workplace, financial services, the judiciary and health care.

A systematic review of the literature by Sylaka & Edwards (2014) supported most recently by Johnson & Belenko (2021) indicates that the positive and negative responses to disclosed coercive control have significant impact on victims' mental health and have been linked to the development of PTSD in victims (Schackner et al., 2021). The research indicates that emotional and psychological support was deemed as the most helpful response and that victim blaming and disbelief were regarded as the most damaging (Cala et al., 2016).

In the context of the macrosystem, this study explores how awareness about coercive control, gender inequality, individualising the problem by victim blaming and patriarchal ideology may have negative impacts on women who experience coercive control when they attempt to break free from abusers and when they access support services (Myer, 2016; Khaw et al., 2021). Voth Schrag et al., (2021) demonstrated that negative initial encounters with service providers can be linked to the victims remaining longer in those relationships. Aujla (2020) indicated that women said responses were 'like sugar-coated words' and they described the impact of these encounters as revictimization within the community.

Thesis structure

Literature has identified that leaving coercive control can be a dangerous, and hazardous, journey for victims (Davies et al., 2008). It has been demonstrated that women who leave are at risk of significant violence and murder from the coercive control perpetrator (Alsaker et al., 2008; Davies et al., 2008; Zeoli et al., 2013; Hing

et al., 2021). Furthermore, the failure among professionals and social systems to recognize the existence of a continuum of coercive control post-separation exacerbates those risks for victims (Stark, 2006; Sheehy & Boyd, 2020; Fernqvist & Sépulchre, 2022; Tegler et al., 2022). Furthermore, a scarcity of research exists in relation to the financial abuse that women experience when they are trying to break free from coercive control perpetrators (Thomas et al., 2015; Hing et al., 2021; van Gelder et al., 2021; Tegler et al., 2022).

Chapter 2 examines the impact of coercive control on victims and explores it using the concept of trauma. It studies the literature that makes the links between coercive control and trauma including PTSD and CPTSD. A feminist lens is used to explore how coercive control impacts the victims' private lives and how it continues in their lives in the public domain after they leave those relationships

Chapter 3 consists of an extensive literature review of the long-term impacts on women's lives mentally, physically, sexually and financially and the impacts of hegemonic patriarchal, social, and cultural environments on survivors.

Chapter 4 traces and summarizes the development of policy and service provision in relation to coercive control in Ireland. It explores the conditions women encountered in Ireland that left them dependent on their husbands once they married, the social and legal responses to, and the changes women activists brought about to address those conditions. It includes an overview of the impact of the COVID-19 pandemic on victims of coercive control.

Chapter 5 This chapter presents the methodological approach used in this study. It discusses the researcher's ontological and epistemological approach, the research design, the recruitment of the participants, and ethical approval for the study. It describes the research methods and the analytical process used to carry out this study.

Chapters 5, 6 and 7, present a thematic annotated analysis of the three stages that were created from the interviews. These stages reflect the women's experiences in the Relationship, Breaking free from the Relationship, and the Long-Term Impacts: ten years or more after the end of a coercive control relationship.

Chapter 8 is a discussion on the key findings of the study that includes the impacts of coercive control on the women's health and well-being within the private domain and perceptions of the impacts of their interactions within the public domain as they sought support in their journey to freedom from coercive control.

Chapter 9 presents an overall conclusion, recommendations and limitations of the research.

Chapter 2 Examination of coercive control through a feminist and trauma informed lens.

Introduction

This chapter examines the impact of coercive control on victims and the concept of trauma and coercive control. A feminist lens is used to explore how coercive control impacts across the victims' private lives and how it continues in their lives in the public domain after they leave those relationships. Furthermore, it explores how coercive control continues to impact within their encounters in their communities and society at large. It studies the discourses women encounter in the public domain, who holds the power within the discourse, how that power is maintained and how it further impacts the victims of coercive control in that domain. As indicated in the previous chapter it studies these concepts through an adaptation of Bronfenbrenner's (1970) ecological framework that includes micro, meso and macro levels of social systems.

Coercive control and its relationship with trauma

Coercive control is defined as abuse of a victim's 'dignity, liberty, autonomy and personhood' and it focuses on 'what abusive men prevent women from doing for themselves' over time and is a violation of women's rights as human rights (Stark, 2012: 7). Jolin & Steffen (2002) suggest that coercive control is rarely a discrete episode but rather that it escalates and gets worse over time. It is perpetrated by abusers on women in the private domain, the micro level in society, through the use of physical and psychological violence, isolation, monitoring of their lives, manipulation and gaslighting, financial control, and through threats and intimidation.

Research indicates that the psychological impact of living with coercive control is post-traumatic stress disorder (PTSD), with one study suggesting that up to 97% of victims have core PTSD symptoms (Khadra et al., 2015). Furthermore, the mental health effects on victims of coercive control have been compared to those

demonstrated by victims of the Holocaust (Herman, 2015). Those effects live on in the body of the victim long after the trauma was experienced (van der Kolk, 2014). Further research compares coercive control with Complex PTSD (CPTSD), a disorder which takes into consideration the consequences of living in an ongoing traumatic environment (Cloitre et al., 2009). Since the 1980s, scholarship has developed which demonstrates that PTSD is a disorder that was applicable across traumatised groups including female victims of crime (Resnick et al., 1993), victims of childhood sexual abuse (Rowan & Foy, 1993), children who witnessed violence including domestic abuse (Dyson, 1990; Streets & Gerald, 1990; Kirkpatrick & Williams, 1998) and women who were victims of domestic violence (Walker, 1985; Luxenberg et al., 2001). Trauma is a familiar concept that is often applied loosely in everyday language. However, in the 1970s when it was first proposed to include PTSD in the *Diagnostic and Statistical Manual of Mental Disorders*, (DSM-111), the literature was mainly based on research into male combat veterans and holocaust survivors (Friedman, 2007). It was acknowledged that PTSD could occur from a single distressing experience that generates an intense emotional reaction that overwhelms the body's ability to cope (Herman, 1992a). It may result from traumas including a life-threatening event, or the witnessing or learning of a trauma experience by a loved one, or traumatic stresses including the death, serious injury, or threat to physical integrity of a close relative (Courtois & Ford, 2015).

Post-Traumatic Stress Disorder is defined by Terr (1991) as type one and type two. Type one is the result of a one-off event that causes acute stress that usually resolves over time. Type one is the trauma experience when a person is in a situation like a car crash, the traumatic event that has a significant impact on the victim, and while it can repeat in the mind, it is over, and generally the recovery process can begin. On the other hand, type two is linked with repetitive, prolonged and cumulative exposure to a range of stressors (Terr, 1991; Herman, 1992a; Courtois & Ford, 2015). The latter, type two, is linked with coercive control, and it is suggested that because of the increased severity of violence, anticipatory fear, and the sense of helplessness encountered by victims, they are at an increased risk of experiencing PTSD (Cody et al., 2014; Salciogiu et al., 2017). Cody et al., (2014) suggest that the risk of physical abuse in such relationships is approximately 40% and that the increased severity of coercive control is linked with the increased risk of PTSD and CPTSD, and is also

linked with living in environments where there is a constant threat of physical violence.

Herman (1992b:383) recognised that the women who were victims of abuse bore an ‘uncanny resemblance to hostages, political prisoners, and survivors of concentration camps’. She asserted that their traumatic response was more complex than PTSD because of the victim’s prolonged repeated history of trauma. She indicated that CPTSD resulted in a range of symptoms including dissociation, flashbacks, social isolation, and a deep feeling of shame. As a result of the work with survivors of trauma in the 1980s-90s the Disorders of Extreme Stress Not Otherwise Specified or DESSOS syndrome was developed which considered the complex nature of trauma experienced over time and from known perpetrators (van der Kolk et al., 2005; Cloitre et al., 2012). It acknowledges that such trauma can create lasting change in psychological arousal, emotional cognitions and memory, and victims are at the risk of misdiagnosis of personality disorder (Cloitre et al., 2009; Courtois & Ford, 2015).

Figure 4: Essential features of post-traumatic stress disorder (compiled from Harrison et al., 2017:142)

Symptoms:	May be experienced as:	Can lead to:
Re-experiencing aspects of the stressful event	Nightmares, Flashbacks, Triggers, including hearing, seeing, or smelling something that can cause involuntary, intrusive memories of the event.	Physical responses including trembling, nausea, and pain. Psychological responses Including extreme distress, feeling of being back in the situation again, disjointed recall (Ehlers et al., 2004)
Hyperarousal	Constant awareness of threats to safety Easily startled	Irritability & anger Sleep problems Concentration difficulties Panic & anxiety Guilt & shame Self-harming behaviours
Avoidance & emotional numbing	Avoiding places and people, distracting the self from thoughts, memories, and feelings of traumatic events.	Isolation Withdrawal

Luxenberg et al., (2001:374) stated that while most people experience at least one traumatic event in their lifetime, up to 25% will go on to develop PTSD. They suggested that a significant factor was the developmental stage of the victim, or the relationship within which the trauma occurred, such as in the case with victims of coercive control. In the context of an intimate relationship, they claimed that the victims presented with a more 'complex picture' than victims of single event traumatic incidents. The links between PTSD and interpersonal relationships are posited as a fundamental breakdown of trust (van der Kolk et al., 2005; Ford et al., 2015; Courtois & Ford, 2015) and are associated with psychological abuse and trauma (Wuest et al., 2008; Cloitre et al., 2009; Herman, 2015; Sanz-Barbero et al., 2019; van der Kolk 2014). This exacerbates the suffering of victims with CPTSD, resulting in hypervigilance and reactivity about real or imagined threats and loss (Luxenberg et al., 2001; Ford et al., 2015; van der Kolk, 2014; Chortois & Ford, 2015). Additionally, sexual assault, rape by an intimate partner is a significant predictor of PTSD (Temple et al., 2007) which when combined with coercive control, is associated with the development of PTSD (Ullman et al., 2007). Research indicates that victims are vulnerable to significant stress during the pregnancy thereby furthering their risk of PTSD in coercive control relationships (Devries et al., 2010; Qu Fan et al., 2017; Berhanie et al., 2019; Martin-de-las-Heras et al., 2019; Mojahed et al., 2021). Furthermore, research links chronic sleep deprivation with psychological harm (Buysse, 2014; Tempesta et al., 2015; Pires et al., 2016) and coercive control (Maharaj et al., 2022). Without sleep to support good brain function (Goldstein et al., 2013; Watson et al., 2015) research suggests that fear which is not appropriately processed by the brain due to sleep deprivation, may be linked with enduring PTSD symptoms including nightmares and depression (Pigeon et al., 2011; Feng et al., 2018; Gallegos et al., 2021).

Research carried out in refuges with victims of coercive control indicate that women who experience psychological abuse have high levels of both PTSD and CPTSD (Dokkedahl et al., 2021). Women have long spoken of walking on eggshells (Martin-Denham, 2021) when trying to describe their lives with violent partners. Dokkedahl et al., (2021) report that victims describe how they are living in a world constantly fearful of saying or doing something innocuous that they fear might trigger a violent response. Thus they presented with a more complex picture, than victims of single

event traumatic incidents like a car crash. Simon et al., (2019) state that the isolation which victims of coercive control are forced to live in by their violent partners, leads to the lack of ‘perceived social supports’ and thereby places them at greater risk of developing CPTSD.

Women living in coercive control environments could be described as living in constant terror or psychological warfare, constantly trying to anticipate their partners’ reactions to keep themselves and their children safe. Dorahy et al., (2013) suggest CPTSD results in a state of altered consciousness. They indicate that the victims develop dissociative symptoms to protect their ego from the anticipatory violence and to protect themselves from a sense of shame. This could be a result of women accepting responsibility for the violence and experiencing feelings of guilt because they continue to live in those relationships. Victims of coercive control with CPTSD develop what Sanderson (2013) describes as a lack of trust in a safe world which, when linked with the previously described sense of guilt and shame, can lead to an inability to seek help outside the relationship. Moreover, the mind, altered by CPTSD to protect the victim by allowing them to dissociate from their reality, can essentially become another warden, keeping them from accessing outside support to escape their violent partner (Sanderson, 2013).

Pill et al., (2017), in a systemic review of PTSD and CPTSD related to coercive control suggest that further research is necessary. They suggest that it is required to develop an understanding of the long-term mental health consequences for coercive control victims and the development of specific CPTSD treatment for them. The 2018 edition of the *International Classification of Diseases (ICD-11)* describes CPTSD as a condition with the symptoms of PTSD plus more complex symptoms resulting from ‘chronic, repeated or prolonged abuse’ resulting in ‘emotion regulation, self-identity and relational capacities’ (Cloitre, 2020). All of this indicates that women while living in coercive control relationships and upon leaving such relationships can be living with significant trauma-related psychological impacts, including PTSD and or CPTSD, as a result of living with the perpetrators of coercive control. Furthermore, CPTSD if left untreated results in a range of long-term chronic impairments including revictimization (Dokkedahl et al., 2021). It can result in mental and psychological problems long after the trauma is experienced and treatments recommended to address

the issues include cognitive behavioral therapy to promote mental health and safety among survivors (Iverson et al., 2011; Lutwak, 2018). Moreover, research indicates that the women's experiences of coercive control continue after they leave those relationships.

How coercive control continues after women leave the relationship.

Coercive control continues when women attempt to break free from the perpetrators of the abuse. The research discusses what is termed as post-separation violence or abuse. According to Spearman et al., (2022: 3) this is the:

‘...ongoing wilful pattern of intimidation of a former intimate partner that includes (1) legal abuse, (2) economic abuse, (3) threats and endangerment to children, (4) isolation and discrediting and (5) harassment and stalking.’

Davies et al., (2008) reported that as early as 1991 the term ‘separation assault’ appeared in domestic violence literature. It had traditionally received less attention but research now demonstrates that women are at significant risk of distress, pain and violence when they leave or as they try to leave a violent partner and that during the separation phase women are at an increased risk of being victims of significant violence and murder (Alsaker et al., 2008; Davies et al., 2008; Zeoli et al., 2013; Shoener, 2016; Badden, 2017; Hing et al., 2021; Spearman et al., 2022). The literature indicates that coercive control impacts the victims’ agency, decision making and autonomy (Bruton & Tyson, 2018) and that it significantly interferes with their capacity to find healthy relationships after they leave the perpetrators (St. Vil et al., 2021). The multi-layered nature of coercive control can also have significant effects on victims’ capacity to negotiate the range of systems that they encounter when they try to break free (Bjørnholt, 2019). While the literature acknowledges that the violence does not necessarily stop when a woman separates from her partner (Ford-Gilboa et al., 2009), it shows that, even where there is no physical contact, women indicated that they were still experiencing psychological abuse over the phone or internet (Pomicinoetal et al., 2019).

Women are aware that trying to break free from perpetrators can be very dangerous. Those who leave indicate that they continue to look over their shoulder because of their fears of further violence and that they modify their behaviours to try to protect themselves from the ex-partners (Myhill, 2015; Myhill & Hohl, 2019). Davies et al., (2008) point out that 53% of the women said that not only did the violence not stop after they left, but that it escalated. They contend that the gender power relationship that women experience within violent relationships is mirrored by a gendered society.

Research demonstrates that women continue to experience coercive control and that happens in the form of stalking, as well as assaults. Stalking is more likely to be perpetrated by males and is linked with the homicide of victims (Monckton-Smith et al., 2017). Ornstein & Rickne, (2013) demonstrates that 10% of women experience stalking or assault post-separation. Stalking is linked in the literature with higher levels of coercive control, psychopathy, and more extreme psychopathology in perpetrators (Norris et al., 2015; Cheyne & Guggisberg, 2018; Cunha et al., 2022). Women's fears when they are experiencing stalking are compounded when they know that the period during the break-up of a coercive control relationship is associated with severe violence and femicide (Cheyne & Guggisberg, 2018). There is also compelling evidence supporting a link during break-up between stalking and ongoing mental health issues, including PTSD in victims (Dardis et al., 2017; Senkans et al., 2021). In addition to the fear and terror that the victims experience from the perpetrators' behaviour, the literature reports that victims of stalking experience victim-blaming, not being taken seriously, and significant under-recording of the crime by police (Brady & Nobles, 2017; Taylor-Dunn et al., 2021). This is happening to women in a climate where women, impacted by the physical, psychological, emotional and financial impacts of coercive control, are struggling to work, take care of their children and find the time, childcare and financial resources to access maintenance and respond to access issues within the court system.

The literature indicates that women who are mothers are at significantly greater risk when it comes to separation violence than women without children, with ongoing abuse and harassment (Davies et al., 2009; Pomicinoetal et al., 2019; Sousa et al., 2021). Women suggest that child custody orders do not take into consideration the broad and systematic abuse used by perpetrators and that custody orders can lead to

unsafe situations for them and their children (Spearman et al., 2022). This is evidenced by the deaths of 19 children who were murdered by perpetrators of domestic violence in England between 2005 and 2015 during formal or informal access situations (Women's Aid, 2016). The need to change the system that allows perpetrators to abuse of court orders and prevent their use of court systems to further abuse their victims is well documented (Beeman, 2022). There is evidence that courts render women voiceless in their attempts to protect their children, often failing to take the needs of children into account when issuing court orders (Saunders, 2015; Gutowski & Goodman, 2020; Sheehy & Boyd, 2020; Gezinski et al., 2021). Furthermore, they experience a legal system that silences them in relation to coercive control, while accusing them of parental alienation, when they try to protect their children (Sheehy & Boyd, 2020).

In the context of separation abuse, women frequently give up the fight for child support, or sole custody, because of the fear, exhaustion, financial costs, and the impact that taking time out to attend court has on their work (Shoener, 2016; Tegler et al., 2022). This happens in an environment where the legal system either does not have a clear understanding or definitions of coercive control or fails to recognise a continuation of coercive control, as when society and the law consider that joint custody is still appropriate, despite coercive control having been a significant factor in the separation (Stark, 2006; Beeman, 2022; Fernqvist & Sépulchre, 2022). The impact of power, given to perpetrators by institutions, over victims' lives which results in ongoing coercive control, is an area that currently receives little attention in the literature (Tutty et al., 2023). All of which women encounter in a patriarchal environment where women do not feel that they can rely on the police or court systems (Crow & Murray, 2015). Women's struggles with both the legal and financial systems after they leave, as their feelings that they are alone without support and at extreme risk of violence, are documented in the literature (Wydall & Zerk, 2021; Bryngeirsdottir & Halldorsdottir, 2022). At the same time, it demonstrates women's agency in the strategies they use, while managing their fear in the face of their ex-partner's violence and coercive control, at a very dangerous time in the history of coercive control relationships (Bruton & Tyson, 2018).

The gender stereotypes that operate within the legal system significantly impact victims' struggle for justice (Hay et al., 2021; Delgado-Alvarez & Sanchez-Prada, 2022). This is evidenced in the literature that shows perpetrators are allowed to continue making frivolous cases, acknowledged as paper or procedural abuse, that cost women time and cause anxiety, while adding a further financial burden on women with depleted resources, and putting further stress on poor households (Miller & Smolter, 2011). The literature demonstrates this is part of the myriad ways that the court system further victimizes women and how it facilitates their ex-partners' abuse as they attempt to break free (Bjørnholt, 2019; Tegler et al., 2022). Women describe their experiences of support services, especially the police and legal system, as being one of luck - lucky to meet the right person on the day - indicating that overall, their expectations are not high when accessing legal or police assistance (Saxton et al., 2021). All of these play a significant part in women's journeys out of violent relationships (Garcia-Jimenez et al., 2019).

Women disengage from the judicial system for several reasons including judicial responses and a lack of social support (Garcia-Jimenez et al., 2019). In this context, psychological support has been deemed highly important to their continued engagement (Cala et al., 2016). The literature demonstrates that resources are available to ensure the safety of women in the form of protection orders and that they are effective when implemented (Sullivan et al., 2021). Women who did persist in the system found that they experienced further abuse within the system, that perpetrators received lenient sentences, that violations of protection orders were not followed up, that the courts mandated access despite women's experiences and that women were imprisoned for defending themselves (Gezinski & Gonzalez-Pons, 2022). It also found that the system can render women voiceless and that it can be used by perpetrators to further victimise women and hurt their children (Saunders, 2015). Moreover, the research shows that when women try to take the perpetrators through the judicial system successful convictions is low (McPhee et al., 2022). Additionally, the literature demonstrates the ways the court system can create lasting harm for mothers and children both emotionally and psychologically, and tools exist that measure the range of harms women encounter in those environments (Gutowski & Goodman, 2020; Gutowski, & Goodman, 2022). It can be seen that women encounter patriarchal, paternalistic, gender stereotyping and blaming discourse from professional institutions

which lack awareness and empathy and thereby add to the plight of victims seeking to escape (Ramsay et al., 2019; Delgado-Alvarez & Sanchez-Prada, 2021; Hay et al., 2021; Tegler et al., 2022). Furthermore, women indicate that those systems blame them for the violence in the relationship, and that triggers or reactivates the impacts of pain from the relationship (Berns, 2017; Aujla, 2020; Khaw et al., 2021; Voth Schrag et al., 2021). The experiences of separation violence are endured by women, who have already endured years of physical, psychological, sexual, and or financial abuse in the private domain, are now taking on the public domain while possibly living with PTSD and or CPTSD (Cloitre, 2020; Dokkedahl et al., 2021).

While the literature documents financial abuse within coercive control relationships (Jury et al., 2017; Hageman & St. George, 2018), there is less awareness of the impact of financial abuse when women are trying to break free from their abusers (Thomas et al., 2015; Hing et al., 2021; van Gelder et al., 2021; Tegler et al., 2022). A significant number of perpetrators exchange ongoing economic abuse for physical and mental abuse (Krigel & Benjamin, 2021; Postmus et al., 2018). These situations are further complicated even when the mother has full custody of the children with women indicating that court and social workers' lack of awareness of coercive control places them at further risk from perpetrators in the context of child access (Khaw et al., 2021). Perez et al., (2012) indicated that those who had experienced PTSD were at greater risk of further abuse after leaving those relationships.

Scant research exists on perpetrators' use of financial abuse to continue to exert coercive control over their victims after the relationships have ended (Gutowski & Goodman 2022). The literature does tell us that the situation is exacerbated when children are involved (Pomicino et al., 2019), indicating that financial abuse can impact the downward spiral that accompanies women, and children after leaving, and can be a significant factor in homelessness for victims (Gilroy et al., 2016). However, the literature does demonstrate that women, despite the impacts of past and ongoing abuse, find the inner resources to maintain their work, take care of their children, and broker with financial institutions to service debts, often without social support, (Goodman et al., 2003; Lloyd et al., 2009; Riddle et al., 2009; Parker & Gielen, 2014; Sanders, 2015; Ramsay et al., 2019; Tarshis, 2022).

Frequently, women who leave coercive control relationships may find themselves facing financial institutions that lack awareness and empathy for victims who are living in poverty while carrying the burden of debt because of coercive control in the relationship and the impact that has on their capacity to move forward (Ramsay et al., 2019; Adams et al., 2020). The literature demonstrates that the struggle women encounter when addressing those institutions can be extremely stressful and exhausting (Laing, 2016; Wydall & Zerk, 2021). Furthermore, the consequences of coercive control can result in a fourfold risk of homelessness among victims, some of which may be linked directly to the perpetrator's financial abuse, which can significantly impact their capacity to rent or buy homes years after they leave the relationship (Weissman, 2023). Research demonstrates that this could be alleviated by short-term loans to victims (Sullivan et al., 2016) which could relieve the mental health issues, including depression and PTSD, that are linked in the literature with homelessness among victims (Rollins et al., 2012; Gilroy et al., 2016). In so doing it could protect women from turning to sources of finance that are outside the mainstream and who charge exorbitant rates of interest, an area that has yet received little attention (Johnson et al., 2022).

Coercive control in the public domain impacts victims.

Coping with all these factors can force women to give up their hopes, and dreams, for their careers after leaving the perpetrators (Hess & Del Rosario, 2018). The psychological effects described above can reignite that core sense of self that was targeted by the coercive control perpetrator during the relationship (Masterson et al., 2015; Cirici Amell et al., 2022). Furthermore, women feel ashamed that they were victims of abuse (Safe Ireland, 2015). They can feel that they are 'not normal' and thus they can hide it and consequently experience ongoing isolation within society similar to what they endured within the relationship (Kennedy & Prock, 2018; Taggard & Montayre, 2019). All these factors vitiate against women building essential networks within the public domain. Furthermore, they impact their capacity in the workplace and thereby their careers after they leave (Lantrip et al., 2015; Hing et al., 2021; MacGregor et al., 2022).

Women's capacity to work is impacted on by the risk of depression and generalised anxiety disorder (GAD), which the literature describes as long-term consequences of coercive control (Comeau & Davies, 2012; Pickover et al., 2017). This can be associated with the use of antidepressants for such conditions (Stene et al., 2012). One study of women's employment indicated the significant role work played in the empowerment of a group of middle-class women (Kumar & Casey, 2020). However, further research shows that a significant number of women experience a drop in income, experiencing low pay, or income support, after leaving coercive control relationships (Moulding et al., 2021). That study called for significant policy changes to assist women leaving, including affordable childcare, housing, and the opportunity for equal representation in court, alongside recognition of the sexism and discrimination that women endure. The literature suggests that victims' recovery can be supported by intrapersonal and interpersonal processes (Flasch et al., 2017) and that therapeutic interventions are significantly beneficial for survivors mental health (Keynejad et al., 2020). However, it continues to keep the focus on the private lives of victims of coercive control rather than addressing it in the patriarchal cultural discourse in the macro or public domain.

The patriarchal culture that victims of coercive control encounter when they leave.

Activists have worked to bring attention to women's ongoing experiences of coercive control and to bring about societal and political change to address those experiences. Women encounter a macro system when they leave coercive control relationships that are dominated by patriarchal hegemony or the common-sense ideology of the dominant social group (Gramsci 2010). They encounter a world where women are portrayed in mass media, including film, music, and television, through a patriarchal construction of gender and the patriarchal portrayals of love, romance, and mutual responsibility for violence in relationships (Easteal et al., 2015; Wright & Tokunaga, 2016; Collins & Rothe, 2017; Hill et al., 2021; Maas & Bonomi, 2021; Roche, 2023). Mass media has been depicted as the public school for reinforcing hegemonic meanings of gender not just to women but also to men, with animation movies carrying those meanings and values to audiences of children (Galloway et al., 2015; Kertz,

2015; Dosser, 2022). This is reinforced in digital media through sexist and misogynistic games available for public consumption and in the misogynistic attitudes toward women who participate in that community (Gabbiadini et al., 2016; Sobieraj, 2018).

Within the public domain, the responses to misogynistic and violent behaviour have included marginalising the perpetrators of those behaviours, describing perpetrators as unwell, and using terms that include lad culture or toxic masculinity. Research indicates these typically individualise and disavow those perpetrators of overt misogynistic behaviours while maintaining or failing to challenge the more deeply seated patriarchal hegemony (Harrington, 2021). Depictions featuring the female slap were a regular feature of black and white movies through the 1940s into the 1960s, they usually resulted in men returning with like treatment, and the couple usually ended up in a passionate embrace: love conquers all. Such cultural depictions of women's domination continued to be evident in 1990s media within *Shakespeare in Love* and *Spin City*. In classic movies like *The Quiet Man* and *Donovan's Reef*, the hegemony of male domination was demonstrated with the female lead experiencing a spanking before she ultimately succumbed to participating in the 'love story'. This rhetoric continues to hold influence today in popular fiction and movies like *Fifty Shades of Grey* and *Beauty and the Beast* where the feminine is demonstrated as being subordinate and long-suffering for love (Maas & Bonomi, 2021; Roche, 2023).

Women's encounters with these portrayals of gender across the media and the ambivalent sexist culture in sports and athletics (Ash et al., 2017; Sliwak et al., 2020), contribute to patriarchal cultural discourses about coercive control (Power et al., 2006) which influence women's capacity to break free from perpetrators (Lelaurain et al., 2021b). While research found that patent blaming of victims for their abuse is not typical among college students, nevertheless, many subscribe to the theory that men hit when they lose their tempers, and they echo the media refrain 'Why did she stay' (Eigenberg & Policastro, 2016; Whiting et al., 2019). These sexist attitudes and victim blaming exist in both men and women; however, they are stronger in men in the general population and much stronger among men who perpetrate coercive control (Martín-Fernández et al., 2018).

These views contribute to the hegemonic discourse in the macro domain, relating to the traditional gender roles assigned to women as the peacekeepers within coercive control relationships (Kelly et al., 2022). The common-sense patriarchal portrayal of women as feminine, passive, caring, and submissive in society and the home (Parent et al., 2020) continues to be persuasive at a cost to women who don't accept male dominance as the status quo, or who step outside the culturally acceptable roles for women. It is also rhetoric that links longstanding forms of patriarchy with new social and cultural forces such as 'lad culture', with its connotations of heterosexual, male bonding, and trivializing violence against women (Hunnicut, 2021; Bolton et al., 2022). These perceptions have been linked with the return to conservative gender values, and to a backlash against feminism, in both the public and private domain, with consequences including increased violence against women (Wemrell, 2023). While research indicates that economic equality can protect women from coercive control further research suggests that a risk of backlash exists when equality threatens men's position in society. Research indicates that the decrease in crime generally in England and Wales reversed during the 2008 financial crisis and was linked with an increase in violence against women (Walby et al., 2016; Gómez-Casillas et al., 2023).

How social structures maintain coercive control as a private issue

This patriarchal rhetoric also maintains the culture that keeps coercive control a private problem while masking the role that social structures play in preventing it from being a public issue (Wright-Mills, 2000). One area this is evident is concerning the social problem alcohol plays in relation to coercive control against women (Curtis et al., 2019; Green et al., 2021; Mayshak et al., 2022; Roach et al., 2022). Alcohol is a subject of some controversy in the research about coercive control (Eckhardt et al., 2015; Averett & Wang, 2016; Leonard & Quigley, 2017; Jones et al., 2019) with perpetrators blaming the alcohol, not taking responsibility for their behaviour and stressing that they are not violent men (Easton, 2008). Furthermore, research demonstrates that they shift the blame onto their victims (Javaid, 2015). All of this indicates that alcohol in the context of coercive control requires further research (Horne et al., 2020). The common thread in the research is the focus on individualising alcohol abuse as a

private issue pertaining to coercive control while at times placing blame on the victim's dysfunctional behaviour for their involvement with alcoholics (Whittle & Hall, 2018). In the public sphere, the legal response is clear, alcohol consumption is not deemed an excuse for illegal behaviour. However, alcohol abuse crimes are contextualised in the individual private lives of victims under coercive control rather than as public issues.

The experiences of women are compounded by the ideology of male dominance pertaining to hegemonic mindsets that prevail in both males and females, regardless of social status or education, concerning violence against women (Schermerhorn et al., 2022), which can generate further difficulties for victims when they attempt to break from coercive control relationships. When they turn to legal, and health care professionals for support to break free from the abuse, they may well encounter men, and women, who believe themselves to be gender neutral but may themselves, as products of cultural hegemony and patriarchal constructs themselves, reinforce the problem. The results of these attitudes are evident in the voices of women, who, when seeking support at meso and macro level, about coercive control describe experiencing being evaluated as to whether they resemble the ideal innocent victim or are to blame for the violence they experienced for years (Myers, 2016). This misogyny can impact women's internalised conversations, perceptions and behaviour, rendering them vulnerable to accepting conservative gender roles (Freund, 2019; Constantinescu, 2021).

Giladi & Petherbridge (2021) describes how the illocutionary act when women attempt to tell their experiences of coercive control, fails or misfires when reciprocity is not achieved. This creates the possibility of women experiencing not being heard, and consequently not being protected, because their experiences are outside the applicability of the listeners within those environments. Research indicates that victims of coercive control speak of not being heard or understood by service providers, these include emergency departments, police and court systems who they suggest may not be open to hearing or may not understand the intricacies of coercive control (Li et al., 2015; Vonkman et al., 2017; Miller & Becker, 2021). Additionally, because of stress, lack of support, economic and/or social disadvantage, and power imbalance, victims may lack the capacity or the professional language used in those

environments, placing them at a further disadvantage in communicating which may result in ‘epistemic injustice and discursive abuse’ (Giladi & Petherbridge, 2021: 23). These experiences may be compounded by the cultural hegemony and patriarchal constructs within the public political spaces where women seek support.

The Sociological Imagination (Wright-Mills, 2000) indicates that the ordinary ‘man’ is unable to turn their private problems into public issues because they do not know the role that social structures play in those private problems. Wright-Mills, whose interactions with the ‘silent feminists’ including Mead, Horney and Klein, and his exchanges with de Beauvoir, influenced his anti-essentialist approach to his theory of gender and feminism, appealed to social scientists to look to the public structures that underlie private troubles and act to bring awareness to those in power, to use their power to educate to bring about change and freedom. His appeal is as important today to women who are victims of coercive control as it was when he wrote it fifty years ago. Some of the gaps that social scientists can fill are within public structures that work against women who are victims of coercive control. These include gaps about issues including disbelief of victims’ experience among service providers, service providers’ lack of knowledge of the issues involved in coercive control, poor responses among the legal and justice system when victims approach them, and lack of culturally specific responses for women who are perceived by those systems as different (Anderson, 2015; Robinson et al., 2021; Ibrahim, 2022; Selestine et al., 2022). Cusack (2013) proposes an overhaul of the court system which she indicates demonstrates how patriarchal attitudes within the judiciary can shape perceptions of and responses to coercive control that can contribute to the problems of victims.

Research indicates that victims are constantly faced with the dominant discourse or common-sense knowledge of coercive control in media reporting that demonstrates patriarchal attitudes (Smith et al., 2019). In so doing patriarchal power produces and reproduces the common-sense knowledge of the issues while it limits the power of the marginalised voices of its victims. These common-sense views of coercive control perpetuate the use of terms including perpetrators’ poor management skills, ‘anger issues’, or describing it as a ‘relationship issue’ (Rossiter, 2011). Furthermore, it is discussed concerning individual psychological or pathological issues rather than acknowledging that they occur within a patriarchal culture of power and dominance.

Foucault (1980) describes the correlation between power and knowledge, how knowledge constitutes power relations and how it constitutes a powerful network that runs through society. Through the flow of common-sense everyday language, the dominant interests have the power to create knowledge that describes coercive control as a personal rather than a public issue. Patriarchal power resists the challenge for social change made by supporters of victims, thereby ensuring that victims' voices stay in the margins.

Methods of gathering information on coercive control can lead to underestimation and marginalisation of the ubiquity of coercive control in society (Johnson, 2006). These practices can be demonstrated in questionnaires such as the Conflict Tactics Scale (CTS), which is used in the gathering of information relating to coercive control. They focus on the violent acts – not on the harm done to the victims, and they could be perceived as gender blind because they tend to ignore issues such as that men are usually able to inflict more violence in their actions than women because of their greater physical and or economic power. Other forms of information-gathering do not count the repetitions, actions, or harms involved in coercive control cases nor do they appropriately take into account the relationships between the victim and the perpetrator (Walby & Towers 2017). However, by not including coercive control in their framework for measuring violence against women, Walby & Towers ignore the experiences of living with coercive control, how the abuse pervades all aspects of women's lives and how it instils fear and takes away their autonomy, freedom and sense of self (Stark, 2013). Myhill & Kelly (2021) suggest this as a flaw in the Walby & Towers framework. They suggest that the dichotomy they set up between physical violence and non-physical control ignores how coercive control impacts the breadth of women's lives and thereby misses out on the body of research that demonstrates men's use of power and control (Paymar & Pence 1993) and its impact within coercive control relationships. Creating a dichotomy between physical violence and non-physical control while ignoring coercive control could result in precedence being given to one woman's experience over another's.

How women demonstrate agency in coercive control relationships

Lloyd et al., (2009) suggest that frequently women who are victims of coercive control are perceived as lacking agency, and that agency is defined as exiting or preventing the abuse. Research indicates that the judiciary only considers women's agency as leaving the relationship and not going back; otherwise, they are considered to have lost or be without agency. Such a view overlooks both their agency within the relationship and the patriarchal social, cultural and economic pressures that influence their decisions about preventing and exiting it (Hamilton, 2010).

Agency is described as the 'sociocultural mediated capacity to act' (Ahern, 2001: 112) which suggests that it should not be confused with resistance. Women's agency can be seen in myriad ways throughout the literature on coercive control. Women are acting with agency in their private spaces on an ongoing basis. They demonstrate their agency in their actions to care for and protect their children from violence, placating their partners to prevent further violence, and hiding their injuries while trying to protect themselves and their children from the prospect of homelessness if they leave the relationship (Myer, 2016). Their agency can also be heard in the stories of preparing for the future as in having what women frequently describe as 'runaway money' or having secret bank accounts, maintaining supportive friendships under extreme physical, emotional and financial duress, holding down jobs, in their fantasies about killing their partners or committing suicide or in their acts of self-defence (Goodman et al., 2003; Lloyd et al., 2009; Riddle et al., 2009; Parker & Gielen, 2014; Sanders, 2015). In these ways women who are victims of coercive control demonstrate that they are not passive victims being acted upon but rather that they are constantly proving agency by strategizing while in the relationships and for life after the relationships have ended.

Conclusion

This chapter recognises that by the time women attempt to leave coercive control relationships they may have spent years living in environments that have been likened

to the traumatic environments experienced by Holocaust survivors. This chapter incorporates a trauma lens that looks at the long-term trauma of coercive control including when women leave the relationship and enter their community and attempt to access support within the community. A feminist lens is used to explore the micro, meso and macro systems within which women experience coercive control. This includes how the lack of awareness about gender inequality and patriarchal ideology impacts victims while they are attempting to move forward in their lives and how that impact continues to maintain the consequences of coercive control on their lives. It examines the meaning of agency as experienced by women concerning coercive control. It describes women's acts of agency within relationships and how these acts demonstrate their survival initiatives, for themselves and their children while living in coercive control relationships. It explains the impact of coercive control on women as they try to exit the relationship and the impact of social cultural and professional attitudes on them as they attempt to build lives after coercive control relationships.

Chapter 3 Literature Review: An exploration of the long-term consequences of living in a coercive control relationship

Introduction

This chapter consists of an extensive review of the literature on the consequences for women of living in a coercive control relationship, how the impact endures throughout their relationship, through the process of leaving the relationship, and the consequences it can have for women years later. The consequences of coercive control on women's lives are complex, and interlinked and are woven into their lives across the private and public domain. The long-term consequences for women who have left coercive control relationships have received sparse attention in the literature. This chapter explores coercive control in terms of the interlinked experiences in their lives in the micro, meso and macro domains on their lives in the long-term

The long-term physical consequences of coercive control

The long-term consequences of coercive control on survivors have not received much attention in academic scholarship (Lawn & Karestan, 2021). Among the limited number of studies carried out, one with adolescent mothers found that they were suffering from depression thirteen years later (Lindhorst & Beadnell, 2011). Another study reported that more than 25% of women who attended support services for coercive control were continuing to experience PTSD symptoms seven years after the relationship ended (McFarlane et al., 2020). These studies suggest that women carry the effects of coercive control after they leave the relationship. This is the focus of the current study.

A range of studies have documented the breadth of injuries that women experience during and in the aftermath of coercive control. This is critical to understanding the long-term consequences on the lives of women. Łukasik et al., (2015) in a study of the somatic long-term consequences of coercive control found that survivors were more

likely to suffer from long-term physical illnesses than those who did not experience coercive control. This included a higher risk of developing a range of diseases, and survivors were more likely to seek help from GPs, consultants, and emergency departments. They recommend that patients should be screened for coercive control especially if they present with a variety of symptoms that seem unrelated or more intense than is represented by their physical state. A meta-analysis conducted by Lohr et al., (2015) indicates that post-traumatic stress disorder (PTSD) accelerates the ageing process and that it affects the whole body resulting in the risk of multiple health problems. They show that trauma-induced PTSD experienced earlier in life, while linked to numerous physical health problems, is also linked with dementia and premature death.

The short-term impacts of coercive control include broken bones, fractures, burns and lacerations. However, the consequences also include a broad range of chronic long-term disorders including such conditions as gastrointestinal problems, fibromyalgia, chronic pain, bladder, kidney and urinary tract disorders, hypertension, chronic fatigue and chronic pain, which affect the quality of women's lives long after the coercive control relationship has ended (Campbell, 2002; Coker et al., 2011; WHO, 2017; Simon et al., 2019) including long-term sexual and reproductive health impairments resulting from coercive control (O'Brien Green, 2020). The physical violence women endure in coercive control environments can also seriously impact women's reproductive health, resulting in miscarriages and stillbirths (Afiaz, 2020) leading to long-term physical and psychological pain. Pregnancy can be a time of significant risk for women during the pre-, peri and post-natal stages with women experiencing significant stress and worry about the damage the violence may have on their unborn child (Martin-de-las-Heras et al., 2019). Coercive control has also been linked with endocrine dysfunction and aggravated menopausal symptoms (Stubbs & Szoeki, 2021).

Victims of coercive control attending for medical support can experience blaming and belittling when seeking help while at the same time hearing excuses being made for the perpetrator (Loke et al., 2012). This is a consequence of what the literature describes as a gap within training programmes in medical schools, where coercive control has received little or no attention (Pagels et al., 2015; Ngoc, 2017; Valpied et

al., 2017; Baum et al., 2022). Furthermore, nurses in primary care indicate that they are underequipped to address the issue of coercive control and that when they do so they are likely to refer patients to the general practitioner (Sundborg et al., 2015). All this is despite the significant evidence of the value of supportive interventions to victims of coercive control (Ogbe et al., 2020). All of these can result in victims of coercive control failing to get essential early interventions and support, thus leaving them vulnerable to later life complications.

Furthermore, women living with coercive control expend huge energy trying to protect themselves and coping with the physical harm they experience while attempting to protect their children from abuse and hiding the abuse from others. Women indicate that they internalise their partner's, and societal attitudes, and that they share responsibility for the abuse that they are experiencing which can result in physical and psychological effects of coercive control (Potter et al., 2021). These impacts of coercive control can result in enduring impacts on women's health long after they leave the relationship.

The long-term psychological consequences of coercive control

Research on the abuse women experience when they are in coercive control relationships across large and small sample studies confirm that it frequently results in cumulative and serious damage to victims' physical health (Coker, 2000; Coker et al., 2011; Domenech Del Rio & Sirvent Garcia Del Valle, 2017; Karakut et al., 2017; Simon et al., 2019; WHO, 2017) and that it can lead to changes in women's behaviour, including alcohol and drug use, as a consequence of their experiences (Stubbs & Szoek, 2021). Research indicates that survivors of coercive control may use alcohol as a coping mechanism (Mason, & O'Rinn, 2014; Leonard & Quigley, 2017; Baily et al., 2019; Curtis et al., 2019; Wilson et al., 2020; Green et al., 2021; Gezinski et al., 2021; Mayshak et al., 2022; Roach et al., 2022; Weiss et al., 2022). The literature demonstrates that survivors may use substances to self-medicate to cope with the enduring effects of coercive control (Øverup et al., 2015). Recent evidence has emerged indicating PTSD is a factor in this increased use of substances among some victims (Sullivan et al., 2020). Women have indicated that they use substances to cope

with environments where they can see no way to escape. The literature suggests an increased substance abuse risk among those who experience sexual violence (Guggisberg, 2012). Additionally, such coping mechanisms, related to the mental health consequences of coercive control, can lead to alcohol and substance abuse and dependence, use of psychoactive drugs and pharmacotherapy medications which have been linked to risk-taking behaviour and further trauma (Logan et al., 2002; Campbell, 2002; Breslau & Anthony, 2007; Cogle et al., 2009; Guthrie & Kunkel, 2016; Costa & Gomes, 2018). Dutton (2006) posits that female victims are five times more likely to abuse substances than other women. Research indicates that women may use it to numb their pain (Heron, 2022) which may render women more vulnerable (Emery et al., 2019). Consequently, this can result in women experiencing more difficulty in their attempts at moving on when their experiences are compounded by the effects of coercive control-induced substance use or abuse and it can have a grave impact on their attempts to reach their full potential after they leave the perpetrator.

A Swedish study (Scheffer & Renck, 2008) found that on leaving coercive control relationships women carried feelings of shame, guilt, and suicide ideation and confirmed that women were suffering from both PTSD and Disorders of Extreme Stress Not Otherwise Specified (DESNOS). However, they found that the women showed high levels of a sense of coherence (SOC) which they suggested may have been a factor in their successful exit. They indicated that high levels of SOC are associated with coping and managing life's stresses and are suggested to be stable by age 30. Thus, they questioned whether this indicated that women with lower levels of SOC are less able to leave coercive relationships.

Studies indicate that survivors of coercive control are at risk of a range of psychological negative consequences (Dutton et al., 2006; Coker et al., 2011; Herman, 2011; Ahmadzad-Asi et al., 2016; WHO, 2017, Costa & Gomes, 2018). A systemic review of the literature on therapeutic interventions for survivors found that those who had the opportunity for individual therapeutic sessions benefited more than those in group sessions. However, they indicated that the benefits fade in the short term and significantly by the end of 12 months (Arroyo et al., 2017). Perhaps they are encountering what the literature now describes as post-separation abuse, alongside

their struggle with legal, financial, career, childcare and social challenges that are reactivating, and adding to, the impacts of the coercive control they had previously encountered.

Research demonstrates that women's mental health is significantly impacted by coercive control (Warshaw et al., 2009; Karakurt et al., 2014; Stubbs & Szoeki, 2021). Coercive control undermines a woman's sense of self and her sense of her place in the world, leading to a difficult struggle for women after they leave their violent partners (Moulding et al., 2021). The extensive range of mental health problems that survivors can experience can significantly impact their ongoing mental health and well-being. These problems can include difficulties with depression and anxiety (Herman, 1992a; Lagdon et al., 2014; Ahmadzad-Asi et al., 2016; Costa & Gomes, 2018), dissociation (Iverson et al., 2013), suicidal ideation (Wolford-Clevenger et al., 2017) and self-harming (Wong et al., 2011), physical ill health, feelings of fear and helplessness (Herman, 2011; Salcioglu et al., 2017), guilt and shame, (Herman, 2011; Chapman & Monk, 2015), anger, hypervigilance, suicide and self-harming behaviours (Herman, 1992a), substance abuse including alcohol (Guthrie & Kunkel, 2016; Costa & Gomes, 2018). Furthermore, it can result in relationship difficulties or what Herman (1992a) describes as interpersonal sensitivity. These impacts can significantly interfere with the survivors moving on with their lives and developing loving, supportive relationships.

A study by Estefan et al., (2016), which included women who were five years post the violent relationship, indicated that they experienced long-term depression. The *ICD-10 – Classification of Mental Health and Behavioural Disorders* (WHO) classifies depression as mild, moderate or severe. Mild or moderate levels of depression are associated with the loss of interest in and enjoyment of life, increased fatigue with difficulty relating to work, social activity and domestic work, and sleep difficulties. Severe depression comprises distress, agitation, loss of self-esteem, feelings of uselessness, guilt, suicide ideation and sleep difficulties. Severe depression is also associated with loss of appetite, weight issues, and loss of libido.

Estefan et al., (2016) suggest that psychological and emotional abuse must be considered when looking at the long-term mental health of victims of coercive control.

This is supported by Bonomi et al., (2006) who suggest that the longer the abuse persists the worse the depression experienced. Mental health issues associated with coercive control are extensive, those frequently cited concerning coercive control include depression, anxiety, and dissociation (Dutton et al., 2006; Coker et al., 2011; Herman, 2011; Ahmadzad-Asi et al., 2016; WHO, 2017, Costa & Gomes, 2018).

The impact of sleep deprivation on survivors, while sparse, indicates that it can have significant impacts on victims' physical and mental well-being (Gallegos et al., 2021). While it emerges as a common occurrence within coercive control relationships, either as a form of abuse by perpetrators or a protection mechanism by victims (Maharaj et al., 2022), it is linked with a long list of chronic health disorders and early death (Walker, 2017). Meanwhile, extant research demonstrates the psychological damage of sleep deprivation in the context of coercive control (Buysse, 2014; Tempesta et al., 2015; Pires et al., 2016), and is linked with sleep terrors, nightmares and depression (Pigeon et al., 2011).

Survivors state that experiencing coercive control damages their trust in self and others, creates heightened sensitivity to interpersonal interactions and puts them a greater risk of exposure to further traumatic events (Briere & Jordan, 2004; Cogle et al., 2009). Furthermore, it increases irritability, hopelessness, anxiety and depression, which further impairs victims' engagement in meaningful or positive relationships (Dutton et al., 2006; Mechanic et al., 2008; Cogle et al., 2009). Crossman et al., (2016) indicate that living in coercive control relationships results in living in a constant state of fear. This heightened state of fear combined with ongoing physical, psychological, or sexual violence is linked with long-term PTSD and CPTSD.

Some survivors endure a lifetime trying to protect themselves from further negative experiences which can be associated with negative emotional states and negative cognitions (Beck et al., 2015). This can be exacerbated by the impact of psychological abuse. Other negative feelings including stigma (Crow & Murray, 2015; Eckstein, 2016) and anticipated stigma (Kennedy & Prock, 2018) can result in self-blame, low self-esteem and a fear that they cannot take care of themselves in relationships (Walker, 1979). This can significantly impede their capacity to engage in interpersonal relationships going forward.

It has been suggested that getting out of the relationship does not mean recovery from the scars of coercive control (Ford-Gilboe et al., 2009; Ban Hong et al., 2015). Abrahams (2010) suggests that the women she researched carried residual scars up to seven years after leaving the relationship. Anderson et al., (2013) advised that having resilience, and getting on with their lives, did not indicate that women were free from traumatic symptoms. Women in that study indicated that the physical and mental scars stayed with them and made recovery difficult. Furthermore, women said that ‘it was all so confusing’ indicating that the damage of psychological abuse had impacted their perspective of themselves and others and that it impeded their capacity for self-love and kindness (Bryngeirsdottir & Halldorsdottir, 2022). That study indicated that although the women were free from their violent partners, they continued to carry the terror internally. All of which indicates that women carry the mental and psychological impacts of coercive control long after they have left the abuse (Herman, 1992; Lagdon et al., 2014; Ahmadzad-Asi et al., 2016; Costa et al., 2018) and that it is a significant burden that they carry while trying to restore some semblance of normality on their lives after they leave such relationships.

Suicide ideation as a consequence of coercive control.

Suicide ideation is recognised as a significant risk factor for victims of coercive control (Cavanaugh et al., 2011; Hui & Constantino, 2021; Rasmussen et al., 2021). A high correlation exists between suicide ideation and experiences of mental, physical, psychological and sexual abuse (Potter et al., 2021) and coercive control (Kavak et al., 2018). Wolford-Clevenger et al., (2017) identified a suicide risk among women who were victims of coercive control and who had depression. Research indicates that victims of coercive control, in comparison to women who are not victims, are three times as likely to have made a suicide attempt in the past year (Agenda Alliance, 2023). Furthermore, the longer women were exposed to coercive control the greater they were at risk of suicide (Kavak et al., 2018), with victims turning to suicide because they believe that they have no alternative way out of the abusive relationship (Wong et al., 2011). It has recently been suggested that the use of the offence of ‘unlawful act manslaughter’ could provide a way for seeking justice for these victims

and holding perpetrators to account in the context of coercive control-generated suicide (Lodge, 2020). This offence rests on the distinction that such an act of manslaughter rests between negligence and heedlessness. (Leigh, 2017).

How coercive control impact survivors' economic lives

The effect of coercive control impacts women's financial lives in a multitude of ways, including their incapacity to maintain job stability (Adams et al., 2012). Significant research exists that documents women's inability to participate in employment because of the mental and physical effects of the recurring episodes while in an abusive relationship, and their capacity to sustain employment from its consequences after they leave (Staggs & Riger, 2005; Swanberg & Logan, 2005; Showalter, 2016). Some research indicates that poverty, which is often among the long-term consequences, can in general increase the risk of coercive control as impoverished victims may find themselves trapped in a cycle of abusive relationships to survive (Slabbert, 2017). The combination of these factors has been demonstrated to exist for up to six years after women have left the relationship (Crawne et al., 2011; Adams et al., 2012). All of which can lead to survivors having a poor work history, not being given or not taking on roles of responsibility, resulting in their either not having employment or working in low-paid jobs. Shoener (2016) demonstrates that these factors can result in women leaving relationships without a stable employment record or the education and training required to move into well-paid employment and thereby access a lifestyle above the poverty line. For all that, economic abuse continues to be what Postmus et al., (2020) describe as an invisible form of abuse that can be linked with home insecurity. Consequently, women experience outcomes that include financial instability, inability to access health care, and other benefits that accrue in long-term employment. Furthermore, it can impact through to older age because of the lack of retirement savings or pension rights and thereby leave victims in poverty when they retire (Adams et al., 2012).

Coercive control and the barriers to housing stability

Instability of housing, and homelessness, are a significant problem for women survivors with housing needs not being met (Baker et al., 2010; McLaren, 2013). Coercive control can impact survivors' financial history resulting in poor credit rating and thus their ability to get mortgages or rental homes after they leave the perpetrators (Weissman 2023) which can leave them vulnerable to pawn brokers and private money lenders (Johnson et al., 2022). These long-term impacts are a further problem women encounter which links poverty to significant homelessness and long-term financial problems (Breiding et al., 2017; Eriksson & Ulmestig, 2017; Slabbert, 2017). A link between housing instability, health, and work-related problems is clearly demonstrated in the literature (Pavao et al., 2007; Rollins et al., 2012). When women leave they can be forced to sell the family home following which they may find themselves in the precarious rental market. Struggling with rising rents low- or middle-income survivors can experience significant challenges, all of which increase for those on a single income. All of this puts further stress on victims who may be carrying significant health and psychological burdens from coercive control. In Ireland the financial cost of coercive control to a woman has been estimated at €113,457 over twenty years, translating to approximately €2.7 billion each year cost to Irish survivors (Safe Ireland, 2021b).

Coercive control impact on women's social capital

Isolation resulting from coercive control costs women their connections with family, friends and broader networks. Stark (2007:470) suggests that isolation cuts a woman off from 'alternative sources of information and support', thereby cutting her off from any opportunities to explore different world views and any perspectives other than that of her partner, leaving her completely vulnerable to his worldview. Women who have been victims can remain stuck in blaming themselves, which can result in severe emotional disorders including anxiety, distress, shame and grief and other chronic disorders (Ban Hong et al., 2015). Isolation as a tactic of coercive control can also come against the victim when women try to leave and move on the perpetrators. They can find themselves without a network to turn to for support as they escape the abuse, and in the immediate aftermath of leaving. This includes support on finance,

accommodation, and keeping themselves and their children safe. It can also be important for their survival in their health care and financial entanglements that they encounter as they struggle to develop their lives outside the relationship (Dichter & Rhodes, 2011; Hing et al., 2021). Social support and employment have an alleviating effect on the consequences of coercive control (Ban Hong et al., 2015). Social supports have a mitigating impact on negative mental health among victims; however, victims are frequently deprived of those supports. Lower social support is associated with higher rates of depression in victims (Mburia-Mwalili et al., 2010; Ogbe et al., 2020). The literature demonstrates that survivors' social support and employment play a significant role in women's positive mental health after coercive control (Douge et al., 2015). Coercive control perpetrators use a range of strategies to interfere with women's capacity to hold on to their relationships outside the home, including interfering with their capacity to maintain work (Stark, 2009). These strategies which include showing up at women's workplaces result in women having difficulty holding on to their jobs and thereby having workplace friendships and supportive relationships.

The importance of social capital has long been established with significant research demonstrating how connections to families, networks and communities play a significant role in an individual's mental health through to old age (Nyqvist et al., 2013). Putnam (2000: 297) suggests that social capital makes us 'healthy, wealthy, and wise'. It generates opportunities for the development of trust, emotional and social support, group participation, and connections between divergent groups, that allow for access to information, opportunities, and different world views. Isolation in the context of coercive control prevents women from participating in kindred, friendship and social relationships that would allow them to have the immediate or long-term benefit that those relationships confer. Without trust, emotional support and social networks, women are deprived of opportunities to hold on to their own identities and self-belief and are thereby vulnerable within that isolation to the worldview propounded by their abusive partner (Stark, 2007). This can result in the victim succumbing to the belief that she, rather than the coercive control perpetrator, is responsible for the abuse and ultimately losing faith in herself and the possibility of a safe world (Hong et al., 2015)

Social capital has been linked with stress reduction and other possible health benefits (Chen et al., 2015) and it plays a significant role in recovery from mental health problems (Brown & Baker, 2018). Women who participate in support groups associated with leaving coercive control relationships benefit from connections and thus from access to social capital (Larance & Porter, 2004). Those social connections that victims of coercive control gain in support groups play a similar role to the life-enhancing gains of individuals with mental health, or learning difficulties, who benefit from similar programmes (Webber et al., 2018). The benefits of social capital for victims have also been the focus of research in the context of neighbourhoods and social ties (Kirst et al., 2015; Wright & Skubak Tillyer, 2017) and the reported benefits for women concerning employment status and depression (Mburia-Mwalili et al., 2010; Douge et al., 2014).

Women who were victims of coercive control often experienced being prevented from free participation in the social and professional networks and thereby prevented from accruing the long-term benefits such social capital participation could create in their lives. These benefits could support them to live healthy, economically viable lives, and reach their full potential. When they leave coercive control perpetrators, women typically experience a lack of social capital combined with a multitude of long-term health consequences which are physical, psychological, emotional, financial and economic (Courtois, 2004; Dutton et al., 2006; Cogle et al., 2008; Cogle et al., 2009). These can impose significant restrictions on independent life functioning. Research indicates that financial effects are long-lasting and are seen to cross both educational attainment and socio-economic strata. They are linked with economic instability, low social status and a long-term sense of shame (Trygged et al., 2013).

An outline of treatment by Courtois (2004) suggests that life skills, affect regulation, self-care, coping skills, social skills, problem-solving and decision-making are all important areas that need to be addressed in the treatment of CPTSD in the context of coercive control. Temple et al., (2010) have recommended further studies with women who have left. They suggest that the mental and psychological effects of coercive control may increase because of the pressures that women face relating to finances, housing and encounters with the judicial system. This argument is supported and expanded by Moulding et al., (2021) who indicate that even after leaving such

relationships, women's mental health is significantly impacted by the long-term consequences of coercive control in areas of their lives, including work and social connections. Crapolicchio et al., (2020) indicate that PTSD is compounded in women who have experienced psychological abuse and who were blamed for the coercive control in the relationship as they then engaged in self-blame. Lawn & Koenen (2021:1) contend that while women survive the consequences of coercive control, the long-term effects have not received significant attention and suggest that it is 'a contributor to major non-communicable diseases and mortality in women'. The research indicates that women who have been victims and have left those relationships are at risk of both physical and psychological impacts of that abuse which can have immediate and long-term effects on their physical and mental well-being.

The impact of coercive control and patriarchy when women leave

Research indicates that it is when women attempt to leave coercive control relationships that they are at their most vulnerable because of the physical, psychological, sexual, and financial abuse that they experienced in the private domain; it is then that they are forced to take on the patriarchal structures of the public domain. When women leave or attempt to leave their abusive partners, they move into the public domain that may well be dominated by judgmental attitudes and latent and institutionalized patriarchy. It is within this culture that they describe the unsafe situations they encounter when they attempt to avail of the family court system for support in their fight against their abuser (Zeoli et al., 2013 Clarke, 2021; Khaw et al., 2021), and where they encounter the effects of court-issued gender biased judgements (Eilers, 2019). Women indicate that child custody orders do not take into consideration the broad systemic abuse used by perpetrators and that custody orders can lead to unsafe situations for them and their children (Pomicino et al., 2019). This is evidenced by the deaths of children in court-mandated access (Women's Aid, 2016) and the research demonstrating the risks, and harms including death, women experience in those situations (Gutowski, & Goodman, 2020; Spearman et al., 2022). Furthermore, the research shows that when women try to take the perpetrators through the system, successful convictions in the context of coercive control are few (McPhee et al., 2022).

All of these demonstrate the missing and essential judicial, financial, and social structures to protect women's physical, psychological, and human rights and the trade-off that victims must make for freedom from violent perpetrators (Thomas et al., 2015; Goodman et al., 2016).

Survivors' long-term experiences within the public domain.

A study based on these accounts cannot alone directly explore the issues of coercive control. It is essential to include the influences of the patriarchal discourse on coercive control and to be situated within the wider literature that encompasses macro-societal as well as micro-social factors, as it builds on empirical evidence. It requires the inclusion of how the public domain comes to shape the life course of the victim as she seeks to make a new life. It cannot, unfortunately, be assumed that the public response is always remedial or progressive. The evidence that the present study will present cannot directly cover the activities and attitudes of those services, professionals and institutions charged with responding to coercive control. But, drawing on the personal accounts of coercive control survivors, it provides unique insights into this wider domain.

Research indicates that women who experience coercive control suffer a range of long-term health issues (Oram et al., 2016; Karakurt, 2017). However, there is a shortage of research relating to those women who do succeed in leaving and developing independent lives, free from the perpetrators. Studies with women who had left the relationship for five or more years report that they lived with the psychological impact which left them with issues of trust both in the world in general and in new relationships (McDonald et al., 2013; Sanderson, 2013; Hong et al., 2015). Women victims express a need to be in control of their lives as they move forward to build their lives after leaving coercive control relationships. This was reported in a study of women who were on average 20 months out of coercive control relationships, many of whom indicated that moving forward was impeded by the ongoing struggles with their violent ex-partners that continued after they left the relationship (Ford-Gilboa et al., 2009). The study suggests that the socio-economic status of women impacts some women's ability to survive outside the relationship. This situation is exacerbated when

coercive control perpetrators are allowed to use the court system time and again concerning issues including child access and maintenance (Tegler et al., 2022). Women also express the frustration of having to go to court and of how seeing their abusers brought the abuse to life again in their minds and how it all left them exhausted (Cerulli et al., 2012). They indicate that being forced back into court by perpetrators helps to create opportunities for the perpetrator's renewed coercive control over their lives. Furthermore, it generates a loss of earnings for the victims who are consequently absent from work, losing holiday days, or having to organise and pay for childcare to leave or collect children from school or crèche, all of which impede their capacity to move forward with their lives. Women remain entrapped in a constant struggle for justice in the public domain, because the individualizing, pathologizing, and de-gendering of coercive control, patriarchal power and privilege remain invisible (Pearce, 2016).

Conclusion

This review of the literature points to the need for a deeper definition and scrutiny of how the problem of coercive control is represented. There are two aspects to this: first, the depth of the impact and long-term consequences deriving from the experience of coercive control directly. Second, the depth of social tolerance or ignorance of the role of the public domain in framing the problem. The literature points to the importance of situating the private experience of coercive control within a wider matrix of causes that include underlying patriarchy that is often embedded institutionally, and in failures in the public domain in response, due to similar factors. While vulnerable to continuing coercive control within the private domain women often find, upon leaving it, that the public domain where they may have expected to address the issue of coercive control is not free of patriarchal power, privilege and hegemony. However, there is a dearth of research on how all those factors have long-term impacts on women's lives. Moreover, the lack of research on the trauma impact that continues to be reactivated within the public domain by the systems that the survivors' approach for help and the patriarchal discourse they encounter in society results in survivors carrying the impacts of coercive control as they attempt to move on with their lives. Additionally, it renders them vulnerable to the reactivation of trauma as they attempt

to reach their potential in their lives many years after leaving coercive control perpetrators.

Chapter 4 Policy developments and service provision: From domestic abuse to coercive control

Introduction

This chapter traces the development of policy and service provision concerning domestic abuse in Ireland. The term domestic abuse is frequently used in this chapter as it is, historically, the term mainly used in legal responses. While the chapter is not an exhaustive account it acknowledges that the changes in Ireland took place within a global context of activism for civil rights. The 1960s saw the growth of many such movements in Europe and America. These included the civil rights movement for African Americans, the anti-Vietnam protests, the Northern Ireland civil rights movement and second-wave feminism, which saw the growth of women's groups focusing on equal rights for women (Smyth, 1993). The chapter explores the conditions women encountered in Ireland that left them dependent on their husbands once they married, the social and legal responses to domestic abuse, and the changes women activists brought about to address those conditions.

The emergence of activism on women's issues in Ireland

In Ireland domestic abuse was considered a private issue between a couple up until the 1960s. The change in attitudes began after the joint efforts, between 1967 and 1970, of The Irish Housewives Association, the Association of Business and Professional Women in Ireland and several other women's groups leading to the First Commission on the Status of Women in 1970 (Connolly, 1996). The focus of the First Commission's report was on equality for women and girls. Following this, the Council for the Status of Women was established. This was an association of women's groups with a focus on women's equality (NWC, 2023). Domestic abuse, the term in use at that time, was an issue that they brought to public attention with the publication of the *First Report of the Council for the Status of Women* (1973). Furthermore, it supported the rights of parents to regulate their families. The campaign for access to

contraception was taken up by Irish Women United (IWU) and the Contraception Action Programme (CAP) (Kelly, 2019). The IWU was founded in 1975 as an umbrella organisation for other women's groups with a focus on women in the home and society and the aim to end discrimination against women (Malcome, 2021). These groups also focused on putting issues including domestic violence, women's right to control fertility and their right to rent or buy a home, into the public domain, all inequality issues that rendered women vulnerable to abuse from men, that were enshrined in Irish law and patriarchal attitudes at that time. The contraception campaign was boosted by the 1973 McGee judgement in the Supreme Court, that the ban on the importation and sale of contraceptives was unconstitutional (Fahey & Nixon, 2014). Ultimately the work of these women's organisations influenced the introduction of the *Health (Family Planning) Act 1979*, a response to the contraception issue that the Minister for Health, Charles Haughey, described as an 'Irish solution to an Irish problem' (Kelly, 2020). The legislation allowed the prescribing of contraception for family planning purposes to married couples at the discretion of a doctor. This gave married women some autonomy in a legal climate where married men had the right to have sex with or without his wife's consent. Furthermore, the work of the Council for the Status of Women (CSW) advanced the changes in the *Social Welfare Bill 1974* whereby the mother of a child became the qualified person to claim the children's allowance.

Meanwhile, in 1970 another group of women, mostly journalists, formed the radical feminist group entitled The Women's Liberation Movement (IWLM) with a manifesto, *Chains or Change? The Civil Wrongs of Irish Women*, which included women's reproductive rights (Malcome, 2021). Nuala Fennell was one of the original members of IWLM alongside Mary Kenny, Mary McCutchan, Mary Anderson, Nell McCafferty and June Levine. However, Nuala Fennell broke from that group and became a founding member of AIM (Action Information Motivation) in 1972 and Women's Aid in Ireland in 1974. AIM was the first pressure group to bring the public's attention to the reality of marriage breakdown (Mahon, 1998; Galligan, 1998; Levine, 2002; Connolly, 2002). The focus of Women's Aid was on providing support for victims of domestic violence, raising awareness of domestic abuse, and setting up a refuge for women who were experiencing domestic abuse in Ireland (Women's Aid, 2013). The first women's refuge in the UK was established in Chiswick, London in

1971 by Erin Pizzey. Nuala Fennel visited the Chiswick Refuge and as a consequence, the first refuge for women who were victims of domestic abuse was opened in Dublin in 1974 (Simic, 2020).

In 1978 the IWU was involved in setting up the first Rape Crisis Centre (RCC) which was launched when 2500 women took to the streets in Dublin to protest against violence against women (Connolly, 1996). While in the 1970's rape within marriage was not perceived as a crime the Council for the Status of Women lobbied for it to be criminalised. The Free Legal Aid Commission (FLAC) supported the work of the organisations working with women by giving free legal aid to women who needed to access support to family law as victims of what was then called domestic abuse (Mahon, 1998; Ferriter, 2012). The activism by women in those organisations in Ireland significantly advanced the implementation of the first legal responses to domestic abuse in Ireland.

Changing the climate, legally and socially in Ireland regarding domestic abuse

The 'Seventies

The Commission on the Status of Women in Ireland, with other women's organisations, was involved in bringing about the ending of the Marriage Bar for civil servants in 1973. Up until that time women in the civil service, and a significant number of other employers including banks and Air Lingus, were forced to end their employment when they married (Mosca & Wright, 2020). While the marriage bar had existed in other countries it had generally ended by the late 1950s, however, its continuity in Ireland has been linked to the country's patriarchal culture (Foley, 2022). Furthermore, the work of the Commission resulted in changes in the Social Welfare Bill 1974 whereby the mother became the qualified person to claim the children's allowance. The male breadwinner model existed in Ireland whereby a husband was perceived as the breadwinner and the wife as the dependent care giver in the home (Muldowney, 2008). This culture which creates the financial dependence of women is frequently referenced in the literature as a significant factor in domestic abuse

(Thomas et al., 2015; Hing et al., 2021; van Gelder et al., 2021; Tegler et al., 2022). Following a European Commission directive on unequal pay for women, the Irish government addressed the issue with the *Anti-Discrimination (Pay) Act 1974* which eliminated pay differentials based on sex, thus ending the situation where a woman was paid approximately one-third less than her male counterparts for the same work (Jobling, 2023). The ending of the marriage bar was extended to female employees in most other employment situations by the *Employment Equality Act (1977)*. It aimed to eliminate discrimination in Ireland based on marital status and sex. These social changes and the changes in the law in Ireland have been attributed to the activism of the women's movement during that period (Jobling, 2023). Undoubtedly, the fact that Ireland became a member of the European Economic Community (EEC) in 1973 was a factor that influenced social change in Ireland.

These changes were implemented alongside the legal changes and protections for women in the home. These included the *Family Law (Maintenance of Spouses and Children) Act 1976*, which introduced the right for women to get a barring order in response to the situation where a partner 'molests or puts in fear' his wife or children. This order was only available for three months and only for a wife. The law allowed a woman to go back to court to renew the order for a further three months again and again if the violence continued. Furthermore, it enforced into law the right to maintenance for a spouse, and in the case of noncompliance, for that maintenance to be attached to earnings. *The Family Home Protection Act of 1976* gave women further protection under the law by preventing the sale of the family home without written consent, before the implementation of the act a woman had no right to sell the family home while her husband had the right to do so without her consent.

While the issue of rape within marriage had been raised by the Council for the Status of Women, it did not receive legal attention. Irish Law failed to address patriarchal power concerning marital rape as the law at that time recognised that marriage gave a husband what was termed as consent to intercourse thereby, a husband could never have had intercourse without her consent (Gartland, 2011). At that same time women's adultery was penalised in civil law, the notorious tort of "criminal conversation" or "Crim Con" that dated back to the seventeenth century, permitted a husband to legally sue another man for compensation for sleeping with his wife (Howlin, 2016). Despite

continued efforts carried out by the Council for the Status of Women, it was not until 1990 that marital rape became a crime, however 'Crim Con' was abolished by the *Family Law Act (1981)*.

The 'Eighties

The legal responses to domestic abuse in Ireland saw a series of updates on the law that were implemented in the 1970s. *The Family Law (Protection of Spouses and Children) Bill, 1981*, created the provision of an interim protection order. Its purpose was to protect a woman while the issue of a barring order was being heard in the courts. It focused on speeding up the court response and included the power to arrest a man who breached such orders. It was suggested that a man who was arrested might think before repeating such behaviour. However, it did indicate that mandatory sentencing within the civil law was not favoured, thereby clearly demonstrating that violence within marriage remained outside criminal law, in effect restating that it was a civil or private issue (Dáil Éireann debate, 1981).

The *Law Reform Commission Report (1983)* highlighted that a married woman, and her children, were deemed to have the same legal domicile as that of her husband. Nuala Fennell, a women's activist and a member of the Irish Fine Gael party who was appointed Minister of State in December 1982 with responsibility for Women's Affairs and Family Law, sponsored the *Domicile and Recognition of Foreign Divorces Bill* in 1985. Before this, women who could not get a divorce in Ireland could find themselves divorced by a husband who was domicile where the law of the country in which he resided determined whether he could get a legal divorce that would be recognised elsewhere (Muldowney, 2008). The 1986 Act recognised foreign divorces and consequently, granted the right to independent domicile to married women.

Ailbhe Smyth (1993) indicates that severe repression both socially and economically played a role in what she termed as a 'weary disenchantment' (P 264) among feminist activists during the 1980's. She suggested that 1983-1990 was a time of 'severe repression' (p 250), an era that saw the growth of defenders of issues including the anti-abortion movement, which resulted in the Eight Amendment of the Constitution

Act 1983 equating the right to life of a woman and a fetus, thereby making Ireland the first country in the world to constitutionalize the fetus (De Londras, 2015). The prohibition of divorce on divorce continued, despite an attempt to introduce an amendment in the 1986 referendum, indicating continuity of traditional sexual morality in Ireland (Hornsby-Smith, 1992). The Irish government's referendum on divorce in 1986 saw the same response when the motion was defeated when almost 64% voted against it. The Council for the Status of Women indicated their support for the introduction of divorce, stressing that it would allow women to leave unhappy marriages, while at the same time, they did not actively lobby for the amendment. Research suggests that this indicates that the Council did not have a mandate to speak for all the women's groups on the controversial issue of divorce (Dillon, 1993).

The 'Nineties

Smyth (1993) indicated that the election of Mary Robinson as President of Ireland in 1990 generated renewed optimism among feminist activists. The 1990s saw the implementation of several legislative acts for which the Council for the Status of Women (CSW) and groups of activists had been lobbying. *The Criminal Law Rape (Amendment) Act, 1990* updated the law on rape, including criminalising rape within marriage, and came into effect in 1991. The first case brought under this law in July 1992 was dismissed on a technicality, when it went before the court again in December of that year a jury of eight men and four women unanimously found the defendant not guilty in just one hour's deliberation (Anderson, 1998). The first successful prosecution under the act occurred in 2002 when a husband was unanimously convicted, and ultimately sentenced to six years in jail (Gráinséir, 2018).

It was during the 1990s that the first research into domestic violence was carried out in Ireland. Research carried out by Shanahan (1992) indicated that the underreporting of domestic violence was 70% in Ireland. This was followed in 1995 when Women's Aid sponsored the first major study of domestic violence in Ireland funded by the Department of Social Welfare and private sponsors. This study, *Making the Links* (1995), carried out by Kelleher and Associates with Monica O'Connor, revealed that 18% of all the women questioned reported experiencing domestic violence, that it

permeated all social classes in Irish society and that only one in five women reported the abuse to An Garda Síochána (AGS) implying that such reporting rarely led to the arrest of the man. While both reports indicated that only a small proportion of victims seek help from the An Garda Síochána it also emerged that only 3% of women reported their experiences to other agencies such as social workers. Kelleher (1995) indicated that social workers were not trained at that time to recognise domestic abuse as an issue. Since that time research has revealed that under-reporting of the issue is linked to women's fear, both because of their domestic violence experiences and through an inability to make sense of those experiences (McKibbin & Gill-Hopple, 2018). The findings from these studies correspond with the research on domestic violence globally which points to a significant lack of statistical knowledge of the breadth of the problem of violence against women (Fernández-Fontelo et al., 2019).

This era saw a change in the legal language used in Ireland from the term domestic abuse to domestic violence. The Domestic Violence Act, 1996, updated the provision of safety orders, barring orders and protection orders. Furthermore, it gave the An Garda Síochána more power to intervene where an order was breached, however as stated above only a very small percentage of women at that time reported the crime to An Garda Síochána because of the very low arrest rate. Also, the fact that these orders were acquired through the civil court continued the perception of domestic violence as a private issue between the couple rather than the perpetration of a criminal act by one person against another.

Divorce was legalised in Ireland for the first time under *The Family Law (Divorce) Act, 1996*. It implemented a no-fault system under the Irish divorce law which means that the conduct that preceded the divorce is not considered unless it would be “unjust to disregard it” which Collins (2023) indicates is a very high bar to reach and rarely taken into consideration. This Act allowed a couple to divorce if they had lived apart for four years out of the previous five years, where no chance of reconciliation exists, and where what the court considers to be proper provision for the spouse and dependent children has been made. It includes ancillary orders about custody and access to children, financial issues including maintenance and issues relating to the family home and succession rights.

COSC, the National Office for the Prevention of Domestic, Sexual and Gender-Based Violence was set up in 1997 in response to the recommendations of the *Task Force on Violence Against Women (1997)* which drew together the responses from different agencies working with victims of domestic abuse into a national strategy (Kearns & Coen, 2014). Its main focus was to ensure the delivery of a whole government response to domestic, sexual and gender-based violence. While its key work was the national strategy, it published other reports including the survey: *Awareness raising of domestic and sexual violence: a survey of post-primary schools in Ireland (2008)* and *Guiding Principles Report 2010 2014 Guiding Principles for Public Awareness Raising Relating to Domestic, Sexual and Gender-based Violence (2010)* and acts as a source for information on research and funding for domestic violence prevention and awareness raising in Ireland (COSC, 2023)

The Twenty First Century

In 2002 a major Irish study into the issue of violence against women, and men, was carried out. Prior to this, no research had been commissioned to scope the prevalence of sexual violence in Ireland from childhood to adulthood for men and women. The SAVI Report: Sexual Abuse and Violence in Ireland (McGee et.al., 2002) was commissioned by the Dublin Rape Crisis Centre. This research set out to apprehend who was being abused, who was carrying out abuse and to whom victims were disclosing the abuse. The aim of the research included accessing information for awareness raising, prevention, to develop appropriate services for victims and for policy development. The research indicated that 20% of women and 16% of men in Ireland reported experiencing sexual abuse in childhood. It found that 42% of women reported sexual abuse in their lifetime, 10% of whom reported penetrative abuse, and 21% attempted penetrative abuse, while 28% of men were victims of sexual violence. Furthermore, the report indicated that the abuser was known to 76% of female and 80% of male victims.

This was followed by the *Domestic Abuse of Women and Men in Ireland: report on the National Study of Domestic abuse (Watson & Pearsons, 2005)*. This extensive report demonstrated among other things, that 15% of the respondents reported a

lifetime prevalence of severe physical, emotional or sexual abuse and that only one-fifth reported their experiences to An Garda Síochána. It also demonstrated that the rate of arrests and convictions had risen between 1995 and 1997. However, it demonstrated that while the number of call-outs to An Garda Síochána increased over the following years, the report showed that the number of convictions declined. It indicated that the fall continued, with arrests leading to convictions decreasing to less than 70% in 2000 and 46% in 2003. However, the recorded increase in callouts indicated that women experiencing domestic abuse became aware of their right to support whereas the responses that had been put in place for them were still failing to follow through with a legal response to their experiences.

Following the Beijing Platform for Action in 1995 the government departments, social partners and the National Women's Council of Ireland (previously the Council for the Status of Women) collaborated to develop a policy document, *The National Women's Strategy 2007-2016*, for the advancement of women in Irish society. The *First National Strategy on Domestic, Sexual and Gender-based Violence 2010 – 2014* followed this with a focus on prevention, services, and policy development in relation to violence against women.

In May 2008, COSC organised a conference at Waterford Institute of Technology to consider the theme 'Stopping domestic violence – what works?' This was followed by consultations with a range of state bodies and organisations that women who were victims of violence turned to for help and support. The research gathered from all these sources was drawn together by COSC and the strategy focused on changing social attitudes to reduce domestic and sexual violence, improving support for victims and holding perpetrators responsible for their behaviour.

The Second National Strategy on Domestic, Sexual and Gender Based Violence 2016-2021 was launched in January 2016. It built on the first strategy with its aims to

- 'Change societal attitudes to support a reduction in domestic and sexual violence'
- 'Improve supports available to victims and survivors and'
- 'Hold perpetrators to account' (P 2)

The Strategy acknowledges that domestic violence impacts women and girls disproportionately and brings attention to the issue of coercive control. Furthermore, it advocated that coercive control is a consequence of unequal power relations. However, while all of the proposals appear to be a positive inclusion in the armoury of legal responses to domestic abuse, it is questionable whether it has played a role in moving the issue from the private to the public domain because domestic abuse continues to be treated as family law rather than as a criminal law issue. Society as a whole and agencies to whom victims turn for support need to review those systems and consider if they reflect the dominant hegemonic culture or are gender-aligned to support victims of abuse. This process needs to include the voice of the victims themselves to develop an understanding as to why the system is failing for so many women and then to create the changes necessary to make a real difference in the lives of victims of domestic abuse.

An attempt to address and generate change in public attitudes was made in 2017 when COSC issued a brief entitled *Speak out, don't be a bystander*. The bystander approach was about supporting members of the public to intervene where it was safe and legal to do so when they witnessed domestic violence. This approach is in keeping with international evidence of their potential in the prevention of sexual assaults on university campuses (Fenton et al., 2016). One such program was piloted at Cork University for two years and now forms a blended learning module that seeks to raise knowledge and awareness of the issues while leading to changes in attitude and behaviour.

The *Domestic Violence Act 2018* saw the expansion of the previous acts relating to domestic violence to include issues involving couples who were not living together, allowing television links into court and the provision of court accompaniments to attend court hearings with victims of domestic violence. The Act which was inaugurated on 2nd Jan 2019, includes coercive control as a criminal offence for the first time in Ireland. This came about as a result of the lobbying and campaigning of domestic violence groups such as Women's Aid. That same year in July 2019 Ireland implemented the Istanbul Convention. This involves in part the reporting of State

progress on their implementation of strategies to combat and prevent violence against women and domestic violence. In Ireland coercive control is defined as

'[the]psychological abuse in an intimate relationship that causes fear of violence, or serious alarm or distress that has a substantial adverse impact on a person's day-to-day activities.' (Press release Department of Justice 29 June 2021)

Coercive control is perceived to undermine the victim's dignity, liberty, autonomy and personhood' and it focuses on 'what abusive men prevent women from doing for themselves' over time (Stark, 2012: 7), and it covers crimes including stalking, sexual assault, harassment and taking someone's money, offences that are perceived under the law as crimes but had not previously been addressed in the law on domestic violence. These changes acknowledge that domestic violence is rarely a discrete episode but rather that the violence escalates and gets worse over time (Jolin & Steffen, 2002). These changes were supplemented by the implementation of the Harassment, Harmful Communications and Related Offences Act 2020. It criminalises the recording, distribution or publication of intimate images of another person without their consent. The act was introduced in response to the proliferation of social media in modern society and it responds to the criminal acts carried out by perpetrators using modern technology in the production of 'image-based sexual abuse' (McGlynn & Rackley, 2017) and can now lead to a prison sentence of up to three years. However, while there have been significant changes in the law those legal responses to domestic violence continue to address the issue as a private one between the couple without addressing the broader societal issues that continue to exacerbate that issue and not treat violence against women as a criminal act (Leahy, 2023)

The government implemented the third national strategy, Zero Tolerance for Domestic, Sexual and Gender-based Violence in June 2022. Its focus is on the four-pillar implementation plan of Protection, Prevention, Prosecution and Policy. It includes a budget of €363 million for implementation. In the context of domestic violence, the broad plan includes raising awareness, housing, training the professionals who encounter victims, policies to support victims' safety, and wraparound services for victims of domestic violence. It also incorporates a provision

for the development of a Domestic Violence Register, increased detention powers, and improved prosecution of perpetrators. A central tenet in this new strategy is that Ireland will have a dedicated agency focused on domestic, sexual, and gender-based violence by 2024 to change the attitudes and assumptions in society that underpin domestic and gender-based violence against women. The breadth of this focus, which was expanded to include domestic abuse and violence against women, awareness raising and training across the first responders and general population, is an important inclusion in the strategy for victims of domestic abuse. However, the opportunity to address the entrenched patriarchal societal culture that underpins the attitudes that beget domestic abuse and violence against women in the public domain was missed. While issues are being addressed in campaigns about coercive control by NGOs including Women's Aid, there is a need for the government to initiate campaigns that address the attitudes and behaviours that beget violence against women, including coercive control at patriarchal, cultural and societal levels in the public domain. This could help make significant change in the cultural hegemony that prevails in the general population leading to a change whereby coercive control is no longer a private issue and would ultimately receive the zero tolerance in society discussed by Goldner (1998) more than twenty-five years ago.

The Study on Familicide & Domestic and Family Violence Death Review was published in May 2023. The report was commissioned by the Department of Justice to investigate the level of familicide and homicide victims within the Irish population between 2000-2019 to review cases with a domestic abuse history to develop protocols and guidelines. A two-pillar approach was advanced under which agencies and professionals including An Garda Síochána, medical personnel, probation, Tusla, State services, and NGOs with a role in supporting the family were consulted to identify potential warning signs, and an emergency team to support the family and community. The second pillar was designed to develop best practice in relation to domestic homicide review with a focus on research to address the issues, again with consultations including family and all the relevant bodies in Ireland and taking responses in other jurisdictions into consideration to make recommendations and develop best practice in Ireland and to develop policies and practices to help prevent future deaths. This work was carried out with the support and assistance of families of victims, service providers and NGOs. It identified that the victims are usually female

victims of domestic abuse and that the perpetrators are frequently their male partners or ex-partners. It set out strategies to enhance the support services available to families and all community victims with a focus on trauma informed care. Trauma Informed Care (TIC) involves the participation of a whole organisation to which a victim turns for support in trauma training to deliver a service that ensures victim safety and that a victim is not retraumatised within the organisation.

The *Work Life Balance and Miscellaneous Provisions Bill 2022*, which provides victims of domestic violence with five days paid leave in a 12-month period, came into operation on 27 November 2023. It includes a spouse, civil partner, cohabitant, or someone who was in such a relationship. Its purpose is to support the individual to access the medical, legal and social support they need to move to safety after domestic violence. Alongside of this the Criminal Justice (Miscellaneous Provisions) Act 2023, includes new offences including stalking, which is linked with extreme psychopathology in perpetrators of domestic abuse and femicide (Norris et al., 2015; Cheyne & Guggisberg, 2018; Cunha et al., 2022). This now creates the opportunity for the courts to give up to a maximum ten-year sentence in the context of stalking or non-fatal strangulation.

Furthermore, funding has been awarded for the new co-ordinating domestic violence agency Cuan: the Domestic, Sexual and Gender-Based Violence Agency which was passed by Oireachtas and was established by January 2024. The agency has a significant brief to address in the context of the issues involved. It will work with NGOs and Domestic, Sexual and Gender Based Violence services (DSGBV) concerning areas including research, refuges and other services for victims, governance for service providers and reporting on the work carried out.

The COVID pandemic and its impact on victims of coercive control

As this research was conducted during the Covid 19 pandemic it was perceived as important by the researcher to make mention of its impact on victims of coercive control. The Covid 19 pandemic had a catastrophic impact on life and death globally

since early 2020. Its impact was felt across a broad range of situations including health services, fiscal costs, education and businesses and workers. The emerging research indicates that the lockdowns applied by most governments to contain the virus resulted in a situation where coercive control ‘intensified’ during the COVID-19 pandemic (UN, 2021). *The Oireachtas Library & Research Service | L&RS Note* (2020) reports that domestic violence increased in Ireland and globally during the Covid 19 pandemic. In Ireland, the report indicated that this accounted for a 25% increase in the number of incidents reported to the Gardai.

Women’s Aid (2019) reported a 43% increase in victims of coercive control accessing their 24-hour helpline during the first Covid lockdown between March and June 2020. Boserup et al., (2020) suggest that Covid 19 lockdowns ‘may cause a catastrophic milieu’ in relation to coercive control and indicated an increase in cases of up to 33% while positing a threefold increase in cases in China's Hubei province in 2020.

The WHO indicates that emergencies such as the Covid 19 pandemic increase women’s vulnerability to coercive control because ‘Perpetrators of abuse may use restrictions due to COVID-19 to exercise power and control ...’ (WHO, 2020, 1). They suggest that it may impact across women’s lives such as through an increase in their isolation from supports, both formal and informal, reductions in their income and greater caretaking responsibilities within their home. In what has become our ‘global village’, where pandemics can quickly traverse the earth, protective systems must be put in place before victims of coercive control find themselves unprotected in similar vulnerable and significantly unsafe positions again.

Coercive control support services and gaps in provision in Ireland

Ireland had no legal responses to coercive control in the 1970s. Activists have worked tirelessly to lobby for legal changes, to mount campaigns and to raise awareness of the issue to protect victims of coercive control. These activists were involved in the foundation of a significant number of organisations that have been addressing the issue since that time. Women’s Aid, a feminist activist organisation, has been at the

forefront of this work. Their work focused on the delivery of frontline services to women where there were no legal responses to protect women from violence and abuse from partners or ex-partners. Since that time, they have been actively involved in lobbying for the legal changes outlined above that have been put in place for the protection of victims of coercive control in Ireland. They were involved in the setting up of the first refuge in Ireland in 1974. In 1992 they launched a national phonenumber aimed at giving information and support for victims of domestic abuse. During this time, they have also been active in the sponsorship, including getting funding from government and private organisations, of research about coercive control in Ireland. In Femicide Watch 2019 Republic of Ireland, A Legacy of Loss for Women, Family and Community they demonstrated that, since 1996, 230 women have died and that 157, or 87%, were murdered by a man known to them. Furthermore, they focus their attention on developing a range of support, education and training programmes, including training Gardai, health workers, psychotherapists, volunteers and frontline staff on domestic violence and abuse, while at the same time continuing their involvement in awareness-raising campaigns. Women's Aid also provides a court accompaniment service for victims of coercive control.

Since the 1990s activists and many voluntary, and community groups joined forces to set up support for victims of coercive control, and to raise awareness of the issue. One such group was Women Overcoming Violent experiences (WOVe). This group was founded to provide a safe environment to support women who were victims of coercive control. The philosophy was one of empowerment through a group therapy environment within which women could develop coping skills and strategies for a safe future. Its focus was to break the isolation and help women identify with other women in similar situations. It aimed to work with women who were victims of coercive control where they were at, whether that was still in the relationship or if they were out of a violent relationship and still struggling to get on with their lives. It had no core funding, all the work was carried out by a small group of volunteers. It worked this way for more than twenty years running up to twice weekly groups with a voluntary psychotherapist, however, burnout ultimately led to it ending in 2014. In 2001 another response was set up by local activists who saw the need for a service for victims of coercive control in Dublin 12. Because of their commitment, the Dublin 12 Domestic Violence Service opened in 2002. They were supported in this endeavour

by other organisations including Women's Aid. Their work included a helpline, court accompaniment and meeting victims of coercive control on a one-to-one basis. However, these two groups and probably many more around the country found themselves unable to continue. In some cases, the volunteers are so involved with the day-to-day organisation and work of such groups that they are unaware of other voluntary organisations that are available to lend support or they don't learn of their existence until it's too late.

One such support organisation is Safe Ireland, an umbrella organisation for 39 support agencies throughout Ireland supporting victims of coercive control, founded in 1998. At least twenty-one agencies involved deliver support and the provision of refuge for victims. The organisation informs national policy, supports agencies providing refuge accommodation for victims of coercive control, and is involved in the development of essential services for women and children. Groups affiliated to Safe Ireland provide myriad services in relation to prevention and support for victims of coercive control including working in communities to raise awareness of the issues, supporting training and providing research to assist local community activists to respond and prevent coercive control. Safe Ireland (2022) proposed a cross-governmental departments response to the housing issue experienced by victims of coercive control. Their submission entitled Whole Housing Approach aimed to address the significant problem of homelessness among victims, and their children, of coercive control. They proposed a system to alleviate the problem which includes funding for refuges, public and private rentals, social housing, and flexible funding for victims. Across Ireland there are 144 refuges for victims of domestic abuse, yet the supply is continuing to fall far short of the needs of victims. Despite the work carried out by these organisations and groups, as well as feminist activists and NGOs lobbying and raising awareness, women are still experiencing coercive control at the same levels as when it was first brought to public attention during the 1960s and 1970s. In the Irish context, the lack of local support services is a significant contributing factor to women continuing to live in those environments. Safe Ireland points out that coercive control victims do not have a place to go to for safety in 9 counties in Ireland as those counties do not have any refuges for victims of coercive control.

Funding for the work carried out by these agencies is frequently made available on a year by year, or on an ad hoc basis which significantly impacts the plans that these organisations can make for future services. Some organisations receive core funding from Tusla, the Child and Family Agency and funding is also made available by the Commission for the Support of Victims of Crime, COSC, and community grants. In some cases, funding is accessed by the groups themselves organising community fundraising events.

The CEO of Safe Ireland, Mary McDermott, indicated that the refuge infrastructure was ‘completely Dickensian’. When interviewed, she indicated that requests for refuge spaces outnumbered the places available tenfold in the previous six months, and that the situation was placing women and children at risk of grievous harm and that the lack of availability of local support is impeding Irish women victims of coercive control from accessing safety (Safe Ireland, 2021a). While it is almost fifty years since the first refuge opened in Ireland the situation concerning violence against women, there continues to be a significant shortfall in the available responses to women who try to escape the violence. In a press release, Safe Ireland (2022) welcomed the Tusla (2022) report on the provision of services for victims of coercive control that acknowledged a lack of wraparound services, and inadequate refuge places across the country. Their argument is supported by Youngson et al., (2021) in research on rural Canadian women which shows that their situation is exacerbated by the lack of access to local support services to help them leave domestic violence relationships. Another noteworthy acknowledgement within the research on survivors of trauma is that of Trauma Informed Service (TIC) and its benefits for the survivors of trauma when it is built into service provision. Many services within the community voluntary and statutory environment have been undertaking training to use a trauma-informed approach in this area. Coercive control has been associated with PTSD and CPTSD and as such it is imperative the services that women attend in the community and society are trained in a trauma-informed way to ensure that interventions do not re-traumatise victims. This involves

‘... establishing empowering, transparent, caring, and respectful relationships; and being responsive to individual and collective needs’. (Wilson et al., 2015)

When women seek help from services whether they are still in the relationship or have left they are vulnerable, both to returning to the perpetrator and becoming a victim of assault or murder at the hand of the perpetrator. As such, all services they attend must have awareness of TIC, not just the domestic violence support services. Consequently, all agencies women who are victims of coercive control turn to for support must regularly participate in this training including An Garda Síochána, the legal and court services including Judges, housing and financial services.

Conclusion

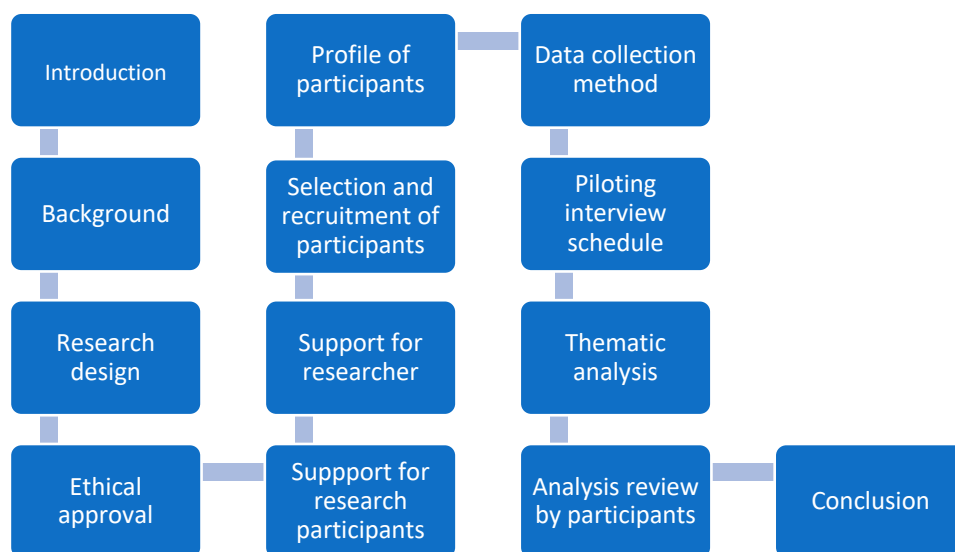
This chapter has demonstrated an overview of the changes in attitudes to what was termed as domestic abuse, now coercive control in Ireland since 1970. It has shown how feminist activists have driven those legal changes. It has reviewed the legal changes that their lobbying has brought about and where the gaps remain concerning coercive control. It has presented an overview of agencies that have worked or are currently working with victims of coercive control and the shortfalls in the patriarchal cultural and legal responses. Furthermore, it acknowledges the struggles those agencies encounter accessing sufficient funding to meet the needs of victims and where they perceive the system still falls short of its goals.

Chapter 5 Methodology

Introduction

This chapter discusses the methods used to explore the impact of coercive control on women who have left those relationships for more than ten years. Figure 5 lays out the overview of the chapter. It starts with the background to the study after which the researcher contextualises her involvement with the issue and how that involvement led to the development of the research to explore the problem. The researcher adapts the Saunders et al., (2009) research model of the onion to sequence the following sections of the research. The next section outlines the epistemology and ontology that shaped the researcher’s questions about knowledge and beliefs. The following section summarises the processes involved in receiving ethical approval, and then, the work involved in engaging the participants, including the criteria for their inclusion in the study, is discussed. This is followed by a brief account of the type of research undertaken in this study. The data and collection methods are then outlined, and the methods used to analyse the data are described. The final sections describe the use of thematic analysis in the research, and the process to involve the participants in the evaluation of the analysis.

Figure 5: Overview of Chapter 5 Methodology



Background

A literature review on trauma including PTSD and CPTSD and coercive control revealed that much of the research has focused on the physical, psychological, sexual, and financial violence that women experience while in those relationships. A substantial body of research exists about the causes of coercive control, its physical, mental, and health consequences, its impact on employment, and interventions for working with women who have experienced coercive control (Johnson, 2008; Herman, 2015; Showalter, 2016; Finley, 2020). To date, research about the long-term consequences of having lived in those relationships and having left for more than a decade has received little attention.

Evidence indicates that participants who had been out of the relationship for more than one year experience repercussions pertaining to their health, finances, their children, and their community (Evans, 2007). Moreover, Howard et al., (2010) indicate that it is implicated in chronic long-term mental health issues. Domenech del Rio et al., (2017) demonstrate what they described as ‘strong, lasting effects’ where women were victims of ‘physical, sexual, emotional or economic abuse’.

The issues identified in the literature had already been recognised by this researcher both in her professional practice as a psychotherapist working with survivors of coercive control and in her work with Wove for approximately twenty years. WOVE was created in 1992. It developed after Move, Men Overcoming Violent Emotions was founded in 1989 to work with men concerning them taking responsibility for their violence. It was set up to work with men for the safety and well-being of women and their children who were experiencing or had experienced coercive control. WOVE was developed when it was realized that it was essential to hear from the partners of the men attending if they experienced their behaviours and attitudes changing as a consequence of attending MOVE meetings. It worked as a support group with female victims of coercive control. Initially, it provided a ten-week program but over time women stayed and the work went deeper and more therapeutic which indicated that women continued to experience long-term consequences having left the violence. The

research literature indicated that women who experienced coercive control demonstrated symptoms including PTSD and CPTSD as a consequence of their lives with the perpetrators. The researcher identified the same issues among those women who experienced coercive control and attended therapy in her private psychotherapy practice. However, there was a dearth of literature about long-term consequences of this on women who had left those relationships for more than ten years and therefore a major knowledge gap. Thus, with over two decades of psychotherapy experience, this researcher set out to address this lacuna as a researcher

Consequently, the research focused on gaining insight into the experiences and perceptions of women who were out of coercive control relationships for more than ten years. A research proposal was submitted as part of a doctoral study to Maynooth University to explore the long-term consequences of coercive control on women. Therefore, this study explores an area that has not previously received attention with the hope that it will raise awareness of that research gap and contribute to scholarship in this important area and subsequently to the shaping of policies and services in Ireland and beyond.

Research design

The researcher, as a feminist, recognised that a qualitative methodology was the most appropriate method for exploring and thus generating and collecting research data about the experiences of coercive control as perceived by women. Qualitative methodologies create the opportunity to explore lived experiences from the participant's perspective and provide descriptive data.

She perceived that it creates the opportunity to study reality from inside rather than outside and it produces descriptive data in the respondents' own words (Sarantakos, 2012). Aware of her immersion in the issue of coercive control for some considerable time, the researcher paid critical attention to how that and her gender, social class, education and sexual orientation could impact the study (Campbell & Wasco, 2000; Flick, 2010).

The researcher was aware of her subjective orientation and personal convictions about the study and how consequently she could not step outside the discourse, she could not step outside the phenomena that she was attempting to explore (Hesse-Biber, 2008). Thus, she was constantly vigilant of the centrality of maintaining awareness of her location in the research and of the social dynamics and power hierarchies within all aspects of the research process. This entailed continuous personal reflection on her education, training, social and economic position as well as her age and gender, across all aspects of the research.

The process of reflecting on and acknowledging her subjective perspective also brought home to her that her experiences did have positive elements insofar as her capacity to support an open and sensitive environment for the participants (Merriam & Greiner, 2019). Using interviewing as a method of collecting data involved the researcher grappling with the difference in her role as a researcher rather than that of a psychotherapist. It entailed her reflecting on her knowledge of the issues and her work as a psychotherapist with coercive control victims and on how this could shape the information explored in the research process. The researcher acknowledged her role as one of gathering information and not of supporting others. This highlighted the need for a support network for the participants and eventually for herself during the research process.

The researcher was very aware of the possible power differentials that could develop between participants and researchers. With that in mind, she maintained a focus on ensuring within the research process an ethos of collaboration between equals. Therefore, she consciously ensured a strategy whereby participants were regularly reminded of their power in the research relationship throughout the research process. Furthermore, she was aware of the importance of a safe environment and worked diligently to ensure, that participants felt safe to discuss the issues that allowed for the deep, rich data to emerge.

In the context of this study, the framework she developed supported her ability to maintain a constant questioning of herself, her motivation for the research and how her epistemology impacted her interpretation and understanding of the issues involved. Feminist epistemology underpinned the research in the context of

empowering the participants first to have their voices heard and second to know that their voices could contribute towards change relating to the social and political attitudes related to coercive control. The researcher's range of experiences helped hone her capacity for constant reflection on her practice to ensure that the safety of the participants was paramount. It also ensured that she stayed continually aware of her capacity for bias in her work. Reflexivity and the flexibility required in these different environments involved the researcher being constantly aware of where she positioned herself in relation to the research area and the settings she was involved within. She maintained a constant awareness of her background and experience of working with trauma throughout the research process. All these life experiences and life skills formed part of the toolbox that the researcher took into this study.

This study explores the phenomenon of coercive control as experienced by the participants to understand the world from their vantage point. It recognises that their reality of coercive control was created and understood via their personal experience and interactions with the perpetrators (Flaskas, 1995). This interpretation views reality as socially constructed (Gergen & Gergen, 2004) and that it is shaped in the social environments where individuals interact with others and that their life experiences, and perceptions, emerge from those interactions (Gergen, 2009). A feminist epistemology defines gender as fluid and maintained by the everyday individual and social practices extant in a particular society (Hines, 2018)

To access an understanding of these practices of coercive control, this study drew on central considerations of feminist research about the 'politics of asking questions, paying attention to language/discourse and reflexivity' (Lafrance & Wigginton, 2019: 538). It recognises that women who have had the subjective experience of coercion, domination or oppression have a unique authority to speak of that experience (Harding, 2019). The study sought to access the meanings made by women in their lives with the perpetrators of coercive control, and of their lifeworld pertaining to their interactions with the professionals and institutions while they were addressing issue of coercive control. It recognises women's knowledge as valid and that their experiences provide a genuine source of knowledge to understand gender inequality and to explore the multiplicity of ways that coercive control impacts on women's lives (Walby, 2007) and to create the opportunity to hear their voices.

This exploratory study works to understand the reality of the participants' lives through exploring their perceptions and interpretations of their interactions in the context of their lives with the perpetrators of coercive control and to make their worlds visible. Furthermore, the researcher attempts to understand the reality of their lives after they left the perpetrators and in the context of their perceptions and interpretations of the institutional reality they encountered in society after leaving the abuser. This included exploring their experience of their use of social and emotional supports from family and friends and their encounters with a range of professionals, including the medical, financial, and legal institutions, and the perceptions and meanings of those encounters for the women. It set about creating the opportunity to hear their experiences and interpretations of the situations that the participants put upon those experiences from their world view, and to understand the nature of their reality in those interactions. The aim is to bring their voices to the issue of the long-term consequences of coercive control to generate knowledge in an area not previously studied.

This research acknowledges the difficulty women sometimes have in finding language to express the depth of their experiences and acknowledges the silences, the unsaid and the 'stumbling half-said' during the interviews (Harding, 2019). The researcher has constantly reflected on her power to ensure that the participants' voice was ultimately the voice that is heard in the finished analysis (Anyan, 2013). It reflected the women's search for words in the inclusion of the 'em', 'eh', and ellipses used where the participant paused for thought. However, some changes have been made to ensure that the confidentiality of the participants is protected.

This study generated ways to create an environment to empower the participants to bring the multiplicity of their experiences to the front and centre of the discourse. The aim of the research was to generate material that would provide an in-depth understanding of the phenomenon thereby capturing the real-life perceptions and understanding of the experiences of the participants of and beyond their lives with the perpetrators of coercive control. The issue of power was further addressed with the agreement that on completion of the analysis phase each participant would receive a

printed copy of the analysis. This process also ensured that the participants' words were quoted and contextualised as they were meant to be heard by the researcher. This ensured the participants' ownership of their life stories and of how they were told thereby validating the analysis carried out in the research project. This analysis of the findings was compared to the literature reviewed pertaining to coercive control and trauma.

This study has used an inductive approach to build meaning from the perceptions and experiences of the participants described within the qualitatively-gathered data (Thomas, 2006) to discover if any of these effects have resulted in consequences in the participants' lives that have persisted for ten years or more after leaving these abusive relationships.

Ethical approval

An application for ethical approval at Tier 3 was completed and forwarded to the Social Research Ethics Sub-Committee at the National University of Ireland, Maynooth. Tier 3 is the required standard for research that requires greater scrutiny, including research with vulnerable people, to ensure that the research process does no harm to the participants. Ethical approval was granted to carry out the research with a group of up to 14 women who had been victims of coercive control and who had been out of those relationships for ten years or more.

Ethical approval required the design and provision of an information and consent form for the participants. These outlined the purpose of the study, what it involved, what information would be collected, data analysis and how it would be processed and stored. It included an opportunity for the participants to see, discuss and validate the research findings. It ensured that their confidentiality would be protected and guaranteed should they agree to take part, their right to withdraw from the study at any time and the possible disadvantages of taking part in the study. The ethical approval included the provision that a support network was available if a participant became distressed during or after the interview process.

Support for research participants

The participants were informed that a therapist was available, *pro bono*, if they needed support because of revisiting the coercive control relationship and its consequences on their lives since their relationships ended.

A team of seven psychotherapists, all of whom had previously worked with vulnerable clients, was set in place and their names and contact numbers was given to the participants. All the therapists agreed to work therapeutically, *pro bono*, with any of the participants should they become distressed and in need of support because of the interview process or its aftermath. None of the participants in the study availed of the outlined support.

Support for the researcher

The team members also proposed that they would be available to the researcher to provide support to her in the event of any vicarious trauma because of the research. The researcher was also involved in regular peer psychotherapy supervision with a group of systemic psychotherapists who indicated that they would support her throughout the research project.

While the researcher did not contact the psychotherapy team that had been set up for the research process, she did discuss her experience of vicarious trauma (Smith et al., 2021) in her systemic psychotherapy peer group. She experienced vicarious trauma after hearing some of the extremely traumatic experiences that the participants described during the interviews even though she had worked with those issues with women for many years.

The researcher was conscious of her position in relation to interviewing the participants involved. She organised the first meeting with the participant to suit their lives and the time that they indicated that they could afford to give to learning about

the research. During the first meeting she created the opportunity for them to discuss any challenges they thought might arise from participating in the process. She explored their responses with them and reiterated consistently their right to withdraw before, during or after the interview process. She informed them that psychotherapists were available, pro bono, should they experience distress on discussing their experiences or perceptions of those experiences, during the interview process. At that point, the participants were given a list of the therapists with their contact details.

The researcher informed the participants that they would be given the analysis of the interviews, that they would be given the time they required to read the document and that a meeting would then be organised to suit them to discuss the analysis. At that meeting she also reiterated that the written documents would protect their anonymity and that their confidentiality would always be protected. All but one of the participants indicated that they wished that their information would be very carefully protected. They indicated that although they were victims of coercive control that they felt that they would be viewed as having a responsibility because they stayed with the abusers, and they clearly did not want people to know their history. The researcher informed them that she respected, acknowledged, and understood their position and that she would follow their example as to what they wished to take out of the analysis draft documents when they read them.

Subsequently, one interviewee did request a change when she read the document. She indicated that a short sentence in the document might act as an identifier and that was removed. It had been agreed with the participants that all children's names, ages, and the places discussed by the participants would be removed from all the transcripts.

During the interview the researcher regularly checked if the participants needed to take a break. She was aware of her ethical responsibility to act with care in any follow-up questions when the participants brought new information into the interview. This resulted in her devising ways to consistently inform the participants of their right not to answer any questions that they wished to pass over.

When writing up the analysis the researcher found it difficult working through the interviews with respect while having to leave out some of their heartfelt information. During this process the researcher consistently reflected on the attitudes and any

hidden assumptions she may have developed in her interactions with the participants and the literature to ensure that she maintained a non-biased position with the information. She discussed with her peer group her difficulty in relation to making choices in what she wrote up in the analysis and she came to terms with the fact that she was not being disrespectful with the participants' trust but rather she was making their voices heard in a context whereby others could hear and respect them.

Selection and recruitment of participants

The study was conducted between March and October 2019. The criteria for participation in the study were that the women had lived with and experienced coercive control and had left their relationships for ten or more years, before 2010. As it happened all of the women who participated in this study were mothers with children under their care both during the relationship and when they left those relationships. In late 2018 the researcher contacted national and local community agencies who provided services for women victims of coercive control. Meetings were organised with personnel from these agencies, where the researcher explained the focus of the research. While the agency personnel responded positively. They indicated that it was unlikely that they would be able to assist the researcher as they were not in long-term contact with women who were the proposed focus of the study. Therefore a new approach had to be adopted. The researcher wrote to psychotherapists informing them of the study requesting their support making contact with participants. These contacts yielded the opportunity to meet up with three women who ultimately participated in the study.

Subsequently, the remaining women who participated in the study were accessed through WOVe and then through the networks and communities of those women. This ultimately led to the participation of five women. One woman withdrew from the research due to her circumstances.

Figure 6: Profile of the participants

Age when met partner (years)	Age at marriage, living together (years)	Education level on meeting partner	Early employment	Duration of relationship (years)	Children in the relationship	Age at interview (years)
17	27	Junior Cert	Sewing	16	Yes	55
14	17	Junior Cert	Sewing	21	Yes	56
20	26	At college	Studying	26	Yes	56
18	19	Leaving Cert	Shop work	25	Yes	70
21	23	College Degree	Teaching	20	Yes	77
28	28	Leaving Cert	Finance	7	Yes	56
19	20	Left school at 14	Sewing	25	Yes	66

An individual meeting was set up at a time and place convenient for each participants when they indicated an interest in participating in the research, to inform them about the study. At that meeting the woman was invited to contact the researcher if she was interested in taking part in an interview. Each woman agreed to participate and a second meeting was organised. The second meeting was organised at a venue where confidentiality for the interview could be guaranteed. Some of the participants decided that they preferred to have this in their own homes and some of them decided to use the researcher's private office. The interview process started when the participant read an information sheet and signed a consent form. The interview time varied between one hour and one and a half hours. Each interview was recorded on a Dictaphone and a password protected iPhone. The interview schedule was a semi structure interview schedule divided into three sections, The relationship, breaking free of the relationship, and ten years after the relationship. At the end of each stage, the

researcher checked in with the participant to enquire how she was feeling, and if she felt okay to continue with the interview process all of the participants agreed to continue with the interviews. When each interview finished the researcher again checked in with the participant and she made a follow-up call within a couple of days to ensure that she was not experiencing any repercussions because of the interview process. None of the participants required attention from the support team.

Data collection method

This is a qualitative research study designed to obtain an in-depth understanding of the long-term consequences of coercive control. The research design was constructed to ensure that the methods used allowed the reconstruction of the participant's lifeworld and viewpoints at different times in their history relating to coercive control (Flick, 2010). The research was designed to explore the lived experiences of the women over three phases of their lives. Phase one and phase two were designed as retrospective studies of the women's lives in the relationship and trying to break free from the abuse (Flick, 2010). Phase three was designed to explore the long-term consequences the participants ascribe to having lived with coercive control.

Qualitative research endorses the belief that there are multiple constructions and interpretations of reality (Merriam, 2002) and therefore was perceived as the appropriate method of collecting the data for this exploratory study. Furthermore, qualitative methods are perceived as an appropriate way to create the environment to hear those silenced voices (Oakley, 1998). A semi-structured interview schedule allowed for the flexibility to adapt and follow the participants' narratives and the directions they took while continuing to maintain a focus on the research aims (Cohen & Crabtree, 2006; Ruslin, 2022). As a research methodology it created the opportunity to explore the participants' perceptions and experiences of coercive control and to discover how it has impacted on them as individuals over this longer timespan. Subsequently, the researcher constructed a research instrument to generate and collect the data pertaining to the perceptions and feelings of women who had experienced coercive control and left ten years previously pertaining to the impact of those experiences to explore that gap in the literature.

A semi-structured interview schedule was deemed the most appropriate method for this study. The researcher interview style was that of a conversation with the participants ‘helping each other develop ideas’ (Harding, 2018). It generated the data pertaining to their perceptions and experiences of living with the abuse and their understanding of any consequences it has had on their lives ten years post those experiences (Denzin, 2001; Merriam, 2002; Flick, 2010).

Interviewing created the opportunity to explore the unique experience each participant had of coercive control (Harding, 2018). Furthermore, it opened the opportunities for the participants to explore their perceptions and meaning as they emerged for them in the interview process. It also allowed the time for them to bring those to the fore and for the researcher to follow up on any new issues that they brought to the interview that had not previously been covered. The semi-structured schedule created the opportunity for the researcher to follow up on those issues and explore how the participants perceived and ascribed meaning to the issues that they brought to the fore and clarify their perception of the issues as they emerged (Denzin, 2001; Harding, 2018). The process strived to open opportunities for the participants to bring their rich in-depth descriptions into the interview process to explore and understand from the participants world view their unique experiences, perceptions, and their unique meanings in the context of their living with and beyond the abuse (Denzin, 2001; Merriam, 2002; Flick, 2010).

The flexible semi-structured interview schedule was created to ensure a ‘bottom up’ and ‘inside out’ approach in the research (Reinerman-Jones & Lackey, 2011; Baily, 2012) using inductive reasoning methodology thereby creating the opportunities to go from the specific examples drawn from the participants’ responses to the general patterns of coercive control abuse. The semi-structured interview schedule ensured the flexibility and openness in its approach to allow the researcher to explore and follow the themes as they emerged in the interviews. This supported the exploration with the women of their experiences of the problem of coercive control within private and public spaces including courts and hospitals (Bacchi, 2009). The semi-structured interview schedule was designed as an iterative process to allow the conversations to follow down avenues that the participants deemed appropriate (Thomas, 2006). This

was organised in acknowledgement that the participants were the experts and to access their deep meanings of experiences of coercive control, their experience and perceptions of it, and the social structures they encountered as they were breaking free from it, and to explore their perceptions of their current lives after living through all those experiences (Flick, 2010). This approach included a pilot study to ensure that the information gathered was appropriate to the research aims (Kallio et al., 2016).

Piloting the interview schedule

Evaluating the interview schedule is a crucial element of ensuring that the interview schedule is clear, unambiguous and generates the data that meets the need of the research (Lavrakas et al., 2019). Consequently, the interview schedule was piloted in two interviews, one with a woman who had worked in a women's refuge and another with a woman who had experienced coercive control (Kallio et al., 2016). Because of those interviews, it was acknowledged that the original interview schedule required expanding to include the opportunity for the participants to tell their story from the beginning of their experience with coercive control. It was also thought that its inclusion would allow the participants to settle into the research process by creating the opportunity for them to discuss the early days of the relationship prior to the abuse, thereby creating the environment for rich data to emerge that included their perceptions, descriptions, and feelings. This was completed and the reviewed schedule contained retrospective biographical sections that opened the opportunity for the participants to discuss their relationships from the time they met their partners and their lives with the perpetrators. That became the first section of the interview schedule, and it was created to ensure the research was understood from the individual biography of the participants of living with coercive control and it became the starting point of the analysis (Denzin, 2001).

The aim of the subsequent parts of the semi-structured schedule was to act as a guide to explore the women's perceptions of the issues they encountered after they left their abusive partners, and of their perceptions of the impact of coercive control on their lives ten or more years after that, as they emerged in their reflections during the interviews (Merriam, 2002). It created the environment whereby the women

interviewed guided the process to allow deep, rich data to emerge from the interviews that the women who had experienced the problem were exclusively placed to bring their knowledge to the gap in the literature about the problem (Castleberry & Nolan, 2018).

This generated the data to explore how coercive control impacted on women's lives in the context of their health, finance, career and their relationships with family, friends and their intimate relationships ten or more years post such relationships. These interviews were all electronically recorded in situ during the interview process.

All the interviews took place in a private safe venue, they lasted between 60-90 minutes and were broken into the three sections as outlined and at the end of each section the interviewer checked in with the participant as to how she was feeling to ensure that she was well and to query if she wished to continue with the interview. The first interview was carried out on 8 August 2019. It began with a review of the introductory meeting to ensure that the participant was still familiar with the aims of the study.

Thematic Analysis

The researcher listened to the recorded interview within days of the sessions following which each transcript was typed and read. This supported the researcher to maintain close listening in subsequent interviews with a focus on the ways coercive control was and continued to be a problem for the participants. Furthermore, it sustained the interviewer's attention for moments of insight, realisation or turning points in the history of the problem for the participants (Denzin, 2001). Listening to the recordings also ensured that the data being obtained was of sufficient detail and richness for the purpose of the study before subsequent interviews were held. As this process was carried out after each interview it supported the researcher to recognise where no new patterns, information or themes were being created or developed from the interviews (Guest, 2020; Hennink & Kaiser, 2021). The researcher had planned to interview up to fourteen women, however, having completed five in-depth interviews the researcher was aware that no new info was emerging and that she had reached

saturation point (Saunders et al., 2018; Braun, & Clarke, 2021). Nevertheless, the researcher continued on and completed two more interviews just to further ensure that saturation was achieved.

The researcher started the analytic process after the first interview when she listened to and transcribed the interview. Through this process she was aware of what was emerging from the data and she was able to subsequently adjust the interviews to generate a deeper focus on some categories and themes as they emerged through the data (Merriam & Grenier, 2019). The researcher used thematic analysis to identify the common themes and patterns that were in the data, to explore and understand perceptions, experiences, and meanings that the participants brought to the study (Braun & Clarke, 2006; Maguire & Delahunt, 2017) in order to develop and modify the codes and themes from the data (Lester et al., 2020). This inductive process was one of constant comparison to identify the themes within the data which were then explored through the research already available relating to coercive control and trauma (Thomas, 2006; Baily, 2012).

The analysis was carried out using the six steps provided by Braun & Clarke (2006). The interviews were carefully listened to and transcribed following each interview. Then a copy of the verbatim transcripts that accurately reflected the recorded conversations was read and notes were written in the margins. The researcher noted feeling completely overwhelmed by the sheer volume of printed material this had produced. As she read through the transcripts and the notes, some of which had been made after the interview she wondered how she could take it upon herself to decide what to keep during the analysis and what she had to let go. Ultimately, with the help of the peer group she had set up to support her through the research process, she realised that she was not disrespecting the women's voices by taking some and leaving other important pieces from the interviews. She realised that the shared aim of herself and the participants for the research required her to stay focused on the material that helped to address the aim of the research. Consequently, the researcher was able to return to the data to understand how the participants made sense of their experiences, what they believed therefore and how it exposed the world that they encountered and experienced.

Addressing the aim of the research required the researcher to read and re-read each transcript several times to familiarize herself with the data. This allowed her to see the individual narratives before she generated initial codes (Braun & Clarke 2006; Ezzy, 2013; Lester et al., 2020). The first stage in coding was carried out tentatively. The researcher was highlighting data that was describing and ascribing meaning to the phenomena pertaining to the research aim which she carried out using a pencil marking first stage codes and noting her initial thoughts. She then went through the data using coloured highlighters indicating reflections, perceptions and experiences of the participants pertaining to the research question. Alongside this she continued writing thoughts and notes in the margins of the transcripts.

The researcher developed organising codes to draw similar codes together into categories. The whole process involved multiple readings of the data. She then gathered those categories into key themes that represented patterns or meanings while constantly keeping in mind how those themes fitted with the aim of the research project. At this point the researcher drew together themes, collapsing some into others and setting up some new more fitting titles for others. During this phase the researcher was connecting the data to the conceptual framework and seeing new unanticipated dimensions in the data that required further studies within the literature. Next, she typed all the themes under their headings and then pasted them into PowerPoint presentations under those descriptive headings.

These were then printed out to review those themes. At this stage some of the themes were collapsed into different group headings and changes were made to ensure that the patterns of meanings under those themes grouped together. The final stage was the writing up of those themes into the thematic analysis with the women's voices speaking to the issues. In this stage the researcher noted the frequencies that the codes were reflected in the data. The analysis was written up into three documents, the Relationship, Breaking Free and Long-Term Impacts: Ten years or more after the end of a coercive control relationship.

Review of analysis by participants

When the researcher had completed the analysis of the interviews and it was reviewed by her supervisor the researcher contacted all the interviewees and arranged to give them copies of the analysis to read. These documents were then given to the women to review to ensure that the researcher had understood and appropriately written up the words, perceptions, and experiences and that the meanings derived from the interviews attributed to them had been appropriately interpreted. It was also done to maintain the researcher's endeavour for credibility and validity in this small exploratory study (Whittemore et al., 2001; Noble & Smith, 2015).

One of the interviewees said that she did not want to read the document as she indicated that doing the interview was a cathartic experience for her and that she had decided to move on from the abuse. As all that process happened during the Covid pandemic organising meetings for feedback with the participants took more time and organisation than had previously been anticipated. Furthermore, because of Covid 19, one of the participants requested a phone interview rather than face to face for this stage.

The researcher took notes of the comments made by the participants during these meetings. All the participants indicated that they felt that their words had been appropriately interpreted. One woman asked to change what she believed might give rise to someone recognising her. Another woman asked for a word to be changed, which she said that she had used at the time of the interview that she had come to realise when reading the document had not appropriately conveyed her feelings on the issue. A third woman said that while reading the document she remembered the reason why she felt so fearful during the relationship. All of these issues were addressed in the finished document.

At those meetings, all the women were asked if they had anything that they wished to add to the process at that time. The researcher took the comments made by the participants and incorporated them into the research. In the analysis chapter, the researcher triangulated the findings with a selected number of theoretical perspectives

from the literature and explored alternative perspectives to develop a deeper understanding of the issues explored in this study and enhance the internal validity of the study (Thurmond, 2001; Flick, 2010).

Conclusion

This chapter outlined the methodology used to carry out an exploratory study on the long-term impact of coercive control on women who were victims and who have left the relationship for more than ten years. The researcher uses the research onion model while moving from the conception of the problem through the layers, or in this case stages, to the research techniques and procedures. The chapter described how basic research using a qualitative approach with a semi-structured interview schedule was perceived as the most appropriate method to access the knowledge to address this previously unaddressed gap in the literature. It acknowledges the limitations pertaining to the small numbers and lack of cultural and ethnic diversity among the participants in this exploration has on its capacity for generalizability. However, it is hoped scholars will be able to use the new and original knowledge it generated to access the resources for larger-scale research that will feed into policy and practice for the women who experience the long-term consequences of coercive control.

Chapter 6 The Relationship

Introduction

This chapter outlines the recollections and understanding of women who had been in relationships with partners where they experienced coercive control. It explores how those women describe what they encountered as they experienced the changes within their relationships. It then outlines what the women describe about the impact those experiences had on them and on their relationships with family and friends. Additionally, it analyses the areas of reproductive health that were raised by the women themselves during the interviews. It draws on the experiences of coercive control as recounted by the women who participated in the study. Through these lenses it explores the depth and range of trauma the women experienced while they were living in the private domain with the perpetrators of coercive control.

Innocence and Romance

The initial stage of the interview was an enquiry about the beginning of the relationship the participants had with their partners. Most of the participants indicated how romantic love had played a part in the early stage of their courtship. They indicated that they learned about romantic love through films, songs and television. Some of them indicated that they were innocent about what to expect of their relationships or of how adult relationships were supposed to function. One woman indicated that she and her boyfriend had lived together and that they then broke up for a year before they got back together, and then married.

One of the women indicated that:

'It was love at first sight, a short romance, we got engaged and the following year we got married.'

Another of the interviewees expanded this when she alluded to her innocence in the context of relationships by adding that it was her first proper relationship:

'I was in love...it's like your first love, first proper relationship... you think everything is wonderful.'

Three other women also indicated that it was their first adult relationship and how they too were innocent of what to expect in such a relationship. One of those women spoke of her experience and how she understood when the abuse started in the relationship. She explained what he led her to understand:

'I wasn't attractive and that was OK because people met people who were the same level of attractiveness as them and he wasn't attractive either.'

Two of the women said that they were attracted by what they perceived as the softness their partner displayed in the initial stage of the relationship, one woman explained:

'At the time I found him very caring and eh, loving, supportive.'

The women developed their understanding of love and romantic love from across all forms of media platforms, from literature, movies, television and songs. Lelaurain et al., (2018) demonstrated that the ideology of romantic love was linked with patriarchal stereotypes, in gender inequalities and coercive control. This transference of cultural norms through the media inspires a belief and understanding within common-sense everyday language or, as Gramsci (2010) puts it, the hegemony through which women filter their perceptions of relationships and develop their understanding about romantic love. It is through such sources that young women learn that 'love is what it's all about', that 'love is all it takes' and how 'love conquers all'. This discourse of love, being loved and love at first sight featured very strongly in the women's recall of their early relationship. While some resisted early marriages the majority were married either young, or slightly under the average age of the time.

Five of the women in the study indicated that with hindsight there were indications of coercive control in the relationship before they married their ex-partners. One woman recalled that money was a noticeably big issue for her ex-partner and how it emerged early in the relationship however she indicated that she accepted it at the time without realising what it signified for the future. She said that:

'Money [was important to him] but having other things like class, and I think he had an awful chip on his shoulder because of where he lived, and I remember meanness, like when we were involved in sport and we'd share cars and we didn't have a car; so somebody would give us a lift and he'd always give the minimum required kind of, you know if you're sharing, petrol money. But sometimes, you might buy the driver a drink; but he'd buy himself a drink, you know that kind of thing...It was this kind of, I suppose, self-centredness was there from the very beginning'.

Women indicate that, on reflection, there were signs of emotional abuse that did not register as such at the time. They recalled signs of a lack of compassion and support early in their relationship. One woman remembered:

'He phoned [from another country] and I went over. I got a bit of a warning; I was very sick, and I passed out at one point, and he wasn't very nice, and there were lots of little red lights in hindsight.'

Women indicated that early in the relationship they experienced pushing and shoving, both physically and emotionally. One woman said that she covered up for him when he first displayed violent behaviour when she was going out with him:

'We were sitting on the stairs talking [her parents were in the sitting room] and I must have done something or said something to him, but he just pulled me by the legs and, erm, reefered me all the way down the stairs ... [her father came out] 'Ah yes Da we were messing and I fell', the noise, ... I didn't think that was even violent.'

These women all experienced what they later recalled as red lights or early signs that that all was not right. However, these signs did not penetrate the love story that they were living in at that time. Their perceptions of love and romance had been culturally developed through the mass media's patriarchal construction of gender and its portrayal of love, romance and a mutual responsibility for violence in relationships (Easteal et al., 2015; Collins & Rothe, 2017; Maas & Bonomi, 2021). Research indicates that young women are significantly influenced by the portrayal of love that is presented in the media (Hefner & Wilson, 2013; Galloway et. al., 2015; Kertz, 2019). They did not know that what they had perceived as loving early in the relationship could have been a manifestation of what they would later learn to be manipulating and controlling behaviours (Rathus et al., 2019). Consequently, they

continued to act according to that construction of gender through which they had developed their understanding of love and relationships unaware of its links to ambient sexism and coercive control (Collins & Rothe, 2017; Lelaurain et al., 2021b). The women remembered how they engaged in self-blame at that early stage in the relationship. This is described in the literature as part of a set of behaviours, including a form of internal dialogue, that women employed to preserve the ideal relationship in the face of reality (Lelaurain et al., 2021a). Two of the women indicated that they did not understand what was happening to them. The literature indicates that may be a consequence of women's desire for the warmth and protection of romantic love which it suggests can mask the signs of coercive control (Power et al., 2006). Women in the study said that these were first indications of what they later experienced in their marriages from their ex-partners as coercive control. Francis and Pearson (2021) indicated that youth is a significant factor in women not recognising the warning signs of coercive control and consequently they are at greater risk of becoming victims of coercive control in their romantic relationships.

Coercive control as part of the 'private' relationship

The women in this study developed their understanding of their place in society through the cultural hegemony, i.e. common-sense language that depicted male domination and the social acceptance of violence against women. Coercive control was not openly discussed, it was a private problem kept in the private domain (Mills 2000). While the women in the study had grown up in the social and cultural hegemonic environment that informed them that 'love hurt' (Maas & Bonomi, 2021), in spite of this they recalled that they were shocked when they encountered the early signs of coercive control in their relationships. Six of the women in this study experienced physical violence; however, all of them indicated that they first experienced psychological abuse prior to physical abuse from their ex-partners.

One woman described her experience:

'It was kind of gradual, ah, and it was mostly threats, first of all. And, em, it would be...kind of holding me by the arms and things like that, not an actual slap or that kind of thing but trying to intimidate me.'

For others the escalation from psychological to physical abuse came quickly:

'I was on a pedestal, likewise I thought the world of him...Eh, when we got married it was six months into the marriage when everything started to go downhill, and it started with him having an argument and pushing me into a chair constantly and me trying to put my, my voice into the argument out, and him not letting me by constantly pushing me and calling me names and running me down and that was when I got the first slap across the face.'

They recalled that they did not initially understand what was happening, that they blamed themselves and that they kept it to themselves. The women indicated that this was the beginning of the process of not talking to others about what was happening to them in their relationships. One woman said:

'I was in shock; I couldn't tell my friends. I could talk to nobody.'

Another woman recalled that she didn't tell anyone about the abuse because she believed that society and her family would say that she had made her choice to marry him and that she had to put up with the consequences:

'You made your bed and you lie in it.'

Women recalled how the abuse escalated in the early days of the relationship. They described experiencing all aspects of their lives coming under his control:

'A big part would be he'd control where I worked, he controlled how I worked, I wasn't allowed work outside the home.'

They indicated that this eventually resulted in them not socializing, even with him:

'I stopped going out with him because I knew by the look that I was going to get it when I got home...every time I went out with [husband] there was always an argument when I came home.'

The women in this study described how these first experiences of coercive control happened gradually and in private. They spoke about the confused state that they found themselves in when they first experienced coercive control and that they kept these experiences to themselves. These experiences happened in the micro level

(Bronfenbrenner, 1977) the private space within which they lived their lives. Their recollections reflect their experiences as they lived their everyday lives in the context of coercive control. They indicate that their perception was that it was not only a private experience, but also one to be kept private and hidden. In this they reflected common-sense language of the hegemony within which the patriarchal dominant discourse described coercive control as a private problem. Perpetrators of coercive control use a range of controlling behaviours including manipulation, verbal and emotional abuse, male privilege, gaslighting and isolation to maintain that power over their partners (Sweet 2019; Rathus et al., 2019; Taggard & Montayre, 2019; Lyons & Brewer, 2021) and the women recalled that their partners resorted to physical violence when those forms of abuse fail to achieve their aims.

Women spoke about the abuse in the context of their partners' attempts to exert control over them. This aligns with the literature on coercive control. Stark (2009) says that coercive control is what men used to constrict women's autonomy to express themselves across any or all aspects of their lives. The women's descriptions aligned with the research which discusses the 'intentionality of the abuser,' with the 'victim's negative perception of control', and the 'abuser's credible threat to gain control' (Hamberger et al., 2017). Women indicated that they constantly modified their behaviour which echoed Myhill & Hohl's (2019) suggestion that it is the 'golden thread' that runs through abusive relationships. It leads the abuse victim to continuously modifying their behaviour to protect themselves and to cope with the abuser. Some of the women in this study indicated that the emotional abuse started early in the relationship and remained a constant in their lives. Other women spoke of how their experience of abuse started with psychological abuse and proceeded to include emotional, financial, sexual and physical abuse.

The psychological and emotional abuse

The pattern of psychological abuse emerged as starting early in the relationships. Women said that it generated feelings of self-blame and shame within them. Some indicated that it started before they were married and that the abuse they were experiencing was already impacting on their sense of self. They said that it resulted in

them being cut off or cutting themselves off from family and friends and subsequently left them isolated. One of the women said that:

'I felt that I had let myself down. I couldn't tell my friends. I could talk to nobody, and I felt isolated. I felt that nobody would like me, I had let myself down and I couldn't tell anybody.'

Five of the women interviewed indicated that they felt ashamed that they experienced coercive control and that this resulted in them becoming isolated from family and friends. As one woman said:

'I wouldn't have talked about things like that to anyone anyway ... it was private.'

One woman recounted that her ex-partner wanted to be with her all the time and not leaving her with time for friends. She remembered that ultimately it resulted in him isolating her from her best friend:

'I always remember he scourged me.; he cycled all the way to the job with me...sometimes I used to work till nine o'clock and he used to meet me and, he'd always be everywhere.'

Women didn't understand that these behaviours were indications of coercive control. They didn't know that the hegemonic culture that keeps coercive control private also prevented them from knowing the signs and thereby protecting themselves from partner abuse. Women recalled how they talked to themselves about the abuse. They indicated how they had tried to make sense of it initially. One woman indicated that she thought of it just as a 'little glitch', blaming the surrounding circumstances including being under each other's feet in a small flat. Two of the interviewees said that they couldn't make sense of what was happening to them, that the mind games were constant, they knew something was wrong, but they just couldn't make sense of it. One interviewee said:

'I was just in shock; I couldn't believe it. He blamed me, I remember he said that this was my fault but that what he did [a slap across her face] would never happen again, but it did, and it got worse and worse.'

This women indicated that he did not apologise, he just said it would never happen again. Two other women indicated that, at the time they could see only their ex-partner's potential. As one of these women said:

'I could see his potential and I was going to bring that out in him. I suppose, I didn't see what was before my eyes, you know...I saw this, but I found myself taking responsibility for it.'

The responses of these women correlate with the literature that some victims of coercive control do not know or understand that those psychological behaviours, what they recalled as mind games, are early indications of coercive control (Grillo et al., 2021; Minto et al., 2020). Women recalled how they were belittled and how if they responded they were blamed for the ensuing arguments unaware at the time that these behaviours would ultimately lead to complete power and control over them (Paymar & Pence 1993). One woman recalled how that process ultimately led to complete control and domination over her:

'I was completely belittled...he blamed me...it was all my fault...He checked what I did, everything I did...making sure I did it right.'

Women indicated that they could see now that the abuse started with negative comments on how they kissed their ex-partners, how they held his hand, similarly negative comments about the clothes that they wore and on their body shape. However, they recalled that they didn't realise at the time that they were abusive comments because of their lack of awareness about coercive control behaviours. Women indicated that they didn't realise the effects that the pattern of put-downs and the body shaming comments were having on their self-esteem right from the beginning of the relationship and how those effects could be long lasting (Taggard & Montayre, 2019). The experiences described by the women in this study correlate with the literature of the experience and psychological impact of coercive control (Começanha et al., 2017).

One woman indicated that it was:

'...tapping away at my self-esteem and my confidence too, kind of...I suppose it always planted the idea that nobody else would want you.'

Women recalled how the constant psychological and verbal abuse had the effect of eroding their self-esteem and self-confidence, leaving them less able to cope and manage. For some, the emotional abuse was in the context of laughing at their nervousness and their fears, of not being considerate of their circumstances. One woman said:

'...even when we were young and we were in London I was working shift work and often I'd be coming home really late at night and I'd be nervous and he never came to meet me, or if I asked him to pick me up, he wouldn't, you know. And that extended to, like, I can remember coming in, and, like, the front door wouldn't work, except, I remember it being dark, and I'd come in and he'd be laughing, saying 'I could hear you struggling with the key, and I was sitting here laughing!'

Two of the women indicated experiencing this form of neglect as psychological or mental abuse and recalled its emotional impact on their lives. They also spoke about the abuse they experienced when ex-partners withdrew from them within the relationship and how that impacted on their sense of self-worth. They recalled the sense of loneliness that they experienced in their relationships. One woman recalled the psychological abuse she experienced of waiting year after year for her ex-partner to come home to her and their children for her birthday; though it was on a bank holiday, he always claimed he had to work at his office. Another woman remembered the psychological and physical impact of being left sitting in their car while pregnant, freezing for hours, on a Christmas day because he stopped to visit some of his friends on the way to her parents' rural home. Women spoke about the pain that deeply impacted on their sense of self-worth and self-esteem when their ex-partners consistently put their work, their friends and their other interests above their relationship with them. Women spoke of the lack of care and compassion as they lost their pregnancies and the lack of support when they had their babies. They indicated that they told no one about their experiences, because it was private, but they recalled how the mental abuse affected their sense of self-worth and self-esteem (Masterson et al., 2015).

One woman said that the psychological abuse was:

'An effort to try and intimidate me mentally, so it was mental abuse.'

This woman indicated that when her first child was a year old, she contemplated suicide. Mental abuse was compounded with the ex-partners' spending on alcohol to the neglect of the needs of the home and children. The literature indicates that combined abuse, mental, psychological, physical and sexual abuse, correlates with high suicide ideation (Potter et al., 2021). This woman spoke about her new-born baby being in hospital for three weeks because she failed to thrive. She indicated that she had to warn the hospital staff that they were not to let him take her baby. She recalled that she was afraid, that she felt pathetic for feeling so afraid, and that she had to hide from her ex-partner:

'I had to tell them in the hospital not to give her to him if he came in because he was eh, threatening staff like that...yea. I can't remember why I was afraid of him at that time but I know I was, but I, eh, told people not to... tell him where I was staying or that kind of thing.'

Later this woman said that:

'I didn't really reflect on how frightened I was until I read the transcript, then I remembered the incident when I actually had a gun to my head. I was told I would be shot, my four-year-old said 'you wouldn't have the guts to shoot your wife'.'

This woman indicated that when she was living in the coercive control relationship she didn't reflect on why she was so frightened. This correlates with the research linking trauma, PTSD, and CPTSD with victims of coercive control, where disassociation from the trauma is a means to survival (Herman, 1992a:383). Women indicated that the ongoing mental abuse was exhausting, and a daily struggle to keep doing what they had to do to survive. They recalled their ex-partners' lack of respect for their homes, and how they did not provide appropriately for the maintenance and upkeep of their family and homes. They recalled how all these areas of abuse generated a significant and constant stress response in their lives. Women remembered that their ex-partners invited their friends to visit their homes and how they stayed late into the night making noise, and how that disturbed everyone else in the house.

One woman recalled that:

'It was exhausting because a lot of the time I never got proper sleep at night, with him coming home late, and all that kind of thing. I know I often took the kids out at night, maybe to walk the streets for fear of him coming home and em, a lot of interrupted sleep.'

One woman recalled her ex-partner inviting his business colleagues for meals, expecting her to do all the preparations while she worked full-time and had sole responsibility for childcare. Women remembered their ex-partner withdrawing, not participating or helping with the children, or cutting themselves off in a room on their own, and how that impacted on their daily lives. A woman remembered how:

'Like he'd be watching television all the time, and sometimes I'd stand in front of him and he'd just say "back off. You know or, I'd say "if I was to put a box around me you might talk to me" and he'd just look round me, you know. His thing, if I looked for anything from him, he'd just say "back off", and he'd put his hand up and that was like, help with the kids or help with anything, you know.'

This woman said that there was a flip side to the behaviour for her:

'I was getting nothing positive from my relationship so I was able to throw myself in [to her work] and the fact that he ignored me; I had to do something with my energy so I worked and made progress.'

She recalled how he put her career down and how:

'He carried that on with my children, when they chose [similar] careers, he'd say it's easy, it's an easy option.'

Women recalled the numerous ways that the mental abuse deeply impacted on their sense of self-worth and self-esteem. It was unrelenting and long lasting according to two of the participants. Women's descriptions of abuse were associated with their partners' attempts to exert control over them. While for some women the abuse moved quickly from psychological to emotional and then to physical abuse, other women indicated that the emotional abuse started early in the relationship and remained a constant in their lives.

One woman recalled how early in the relationship; her ex-partner was:

'Standing with other people his age criticizing the way I was doing something you know, even though I would have been, I would have achieved an awful lot more in the...world than he would'.

Another woman spoke about how her ex-partner berated her for her fears and anxiety when he left her in a violent city during an insurrection:

'He went off to a conference [to another continent], his wife [the interviewee] on the roof during the massacre, other women's husbands moving their wives out of those places. Ah, it was horrendous when I think about it now.'

One of the women indicated when psychological abuse became physical and her family knew about the abuse, 'because I'd have black eyes' that they spoke about going to him to get him to stop the abuse. However, she didn't allow them to go to him:

'...because it would come back on to me so it's a vicious circle that you are in all the time.'

This woman feared that the violence she was experiencing would become worse if she allowed her siblings to come to her home, the private domain, to approach her partner about the abuse.

The women's descriptions of their early experiences demonstrate that from the beginning they perceived those experiences of abuse as something to hide, not bring outsiders in to help. They were already filtering it through the social construct of coercive control as a private problem (Wright Mills, 2000). They described how they experienced the shame of being the victims of coercive control and how their sense of shame led to them hiding the abuse, keeping the coercive control a secret (Taggard & Montayre, 2019), which led to them becoming further isolated within the relationship. They had learned from the society, the cultural and social dominant patriarchal narrative that regarded coercive control as a private problem. At the time, under the stress of coercive control, they were not aware or did not consider the gendered nature of society that associated male gender identity with male domination in a patriarchal society.

Living in isolation, in distress and pain they were unable to access, or allow in support, to inform or raise the awareness that their private problems were what Mills (2000) described as public issues. The literature correlates with the women's descriptions of how they internalised the responsibility for the relationship and consequently their experience of shame and self-blame (Thaggard, & Montayre 2019). They recalled how it led them to being isolated from family and friends which can leave victims with a lack of 'perceived supports' in their lives which the literature indicates can leave them vulnerable to CPTSD (Simon et al., 2019). The isolation can also leave them more vulnerable to the manipulation, threats and violence of the coercive control perpetrators (Ban Hong et al., 2015; Schneider, 2018). Furthermore, this leaves victims unable to talk their experiences through with other people; thus, they were without other voices in their head that could have counteracted the voice of their abusive partner. The pattern of psychological behaviours experienced by the women is echoed in the literature by Sweet (2019) who links it with 'gaslighting [or] manipulating' them and getting into the victim's head so that they didn't know or understand what was happening to them. Women in this study indicated that it happened early in those relationships and resulted in them struggling to make sense of it all.

Women indicated that the snide remarks, body shaming, put-downs and taunting that they received from their partners became a constant in their lives. They spoke about how they got used to the lack of empathy, the impatience, and how with hindsight they are now horrified by what they went through. Women indicated that they experienced loneliness from the impact of their ex-partners withdrawal from the relationship and how they experienced abuse from being constantly and severely neglected by their ex-partners. Their stories of their experiences reflect the cycles of violence described by Walker (2006): they spoke about how the atmosphere would change from what they described as normal to abusive, without warning. They said that when the mood changed they would be frightened as it would always get worse, ending in either psychological and/or physical violence; and then it would change back to so-called normal again. They recalled how they found themselves 'walking on eggshells' during that phase, for fear that they would trigger another outburst, and the violent cycle would begin again (Walker 2006).

Women recollected that fear and stress were constant in their lives because they never knew what would trigger the abuse. They said that it never stopped, that in effect there was no time without fear and stress, because between-times was always only the calm before the storm. For other women, however, their ex-partners moved on from psychological to physical violence. For them, it was a case that once the Rubicon to physical violence was crossed there was no going back, and physical violence along with a range of other forms of abuse became a normal part of the relationship. Women indicated that they then lived in fear and terror of his controlling behaviours and his silent threatening moods, and they spent their lives trying to constantly modify their behaviours to prevent outbreaks of violence in their homes. Furthermore, this silent and ignoring behaviour has been associated with generating a feeling among victims of being 'less than human' (Fortes, 2015). Many women recalled that this had happened when they were already isolated because the perpetrator had forced or manipulated them to cut off contact with family and friends. All the experiences the women described are in line with the research of the Wheel of Power and Control (Paymar & Pence 1993) where power is enforced by the fear those men use to maintain what they perceive as their right to power over their partners. Despite this, women recalled that they continued living their daily lives. Their personal agency was evident in the way they managed to keep the roof over their heads, care for their children and put food on the table, placate their violent partners, and try to prevent the abuse, while trying to hold down jobs either inside or outside the home (Goodman et al., 2003; Lloyd et al., 2009; Riddle et al., 2009; Parker & Gielen, 2014; Sanders, 2015).

While the women in this study recalled different experiences of psychological abuse, the behaviour they recalled demonstrated that the patterns and the aims of the coercive control that they were experienced were in the service of their partners' efforts to exert power and control over their lives (Paymar & Pence, 1993). They indicated that while surviving in the coercive control relationship, they were unable to think about, process and reflect on what they were actually experiencing and its impact on their daily life. This was particularly evidenced by the realisation of one of the women that she had disassociated from the gun violence she had experienced in the relationship until she read the transcript of the interview.

Alcohol impacts on coercive control

Four of the women talked about how alcohol abuse played a part in their experience of coercive control. Three of the women recalled their abusive partners' use of alcohol and they described how the alcohol abuse created a further layer on their experiences of coercive control. One woman spoke about how her alcohol use started; even after all the years since she left the relationship, she still spoke about how she felt shame, and blamed herself for succumbing to alcohol addiction.

One woman spoke about her ex-partner's intermittent alcohol abuse:

'He was spending most of his wages on drink, and I had to undertake a lot of the upkeep of the house and that kind of thing. Erm, also, he had no interest in materially providing for us.'

This woman indicated that as well as being a coercive control perpetrator her ex-partner was a regularly reforming alcoholic. Consequently, she recalled living in fear and stress, while physically exhausted, because she was responsible for all the emotional and financial care of their children while she was experiencing continuous mental abuse:

'A few months, maybe six months, after the second child was born, he sobered up and promised he would reform, he wasn't going to drink again and that, so I decided I would have a third child and...I had a third child, and it was all right for about 6 months, and then he went back drinking again. And at that stage I moved out of the house with the 3 children.'

One woman indicated that the alcohol abuse began before she got married. They went on their first holiday together. She became ill and spent a week in hospital. The night she was released from hospital they went out to a music bar:

'He had a good few drinks on him and he got rowdy [they left the bar] I remember being pushed up against the wall. The pub DJ had to come out and he intervened.'

This woman recalled how she didn't understand what was happening at the time, she did not tell anyone and that she felt embarrassed and ashamed by what had happened to her.

She said that:

'I was surprised that I couldn't deal with it so I hid it.'

Another woman recalled how her husband went on 'benders' and that they always ended up costing money to fix:

'He sometimes went on benders, they always ended up badly, it was always my fault cos I wasn't a proper wife.'

This woman remembered this after she had read the transcript in which she said that her ex-partner didn't drink. She said that she had put it out of her mind because they were episodes, that although they were terrifying at the time, they weren't constant in the marriage like the coercive control. She recalled that she never said anything about the behaviour to her family and that she had no friends left because of isolation.

Women indicated that they did not understand the early signs of alcohol abuse in their partner and that as the alcohol abuse got worse, they were more invested in the relationship. They recalled that they worked to either intervene, protect themselves from abuse or hide the alcohol abuse because of the shame and embarrassment they experienced as victims of abuse in those circumstances. Women indicated that they believed that their partner would reform and permanently stop drinking. When the alcohol abuse started again, they tried to modify their behaviour to protect themselves from coercive control.

Women recalled how they stopped socialising with their abusive partners, as they became aware, that everything they did on those occasions could become an excuse for abuse, and because:

'I always got it [abuse] when I got home.'

The levels of the stress and anxiety of trying to manage in those environments was exhausting and it significantly affected all other aspects of their lives. The women's recollection of trying to protect themselves because of their fears of the consequences of their partners drinking in the context of coercive control are consistent with the literature i.e., that women are more at risk of physical violence when alcohol is involved (Curtis et al., 2019).

The thread of alcohol abuse and its link to coercive control remained a private issue in the lives of all the women in this study who experience the dual problem of coercive control and alcohol abuse from their partners. They not only experience physical and psychological abuse but also the financial abuse that occurred because of perpetrators spending family resources. This resulted in unpaid bills and little money for essentials including food while the abusive partners spent that money on alcohol. They experienced the fear and exhaustion of living in an environment where abusers came home late at night and created havoc for them and their children, while at the same time, trying to create a safe and stable environment for the children. During all these events, alcohol typically remained a 'private problem' they experience, i.e., absorbed entirely at the micro level of their lives.

One woman recalled the coercive control perpetrator's support for her alcohol misuse, only then to use it to blame her for his behaviour which correlates with the literature. This interviewee indicated that she began abusing alcohol in the relationship. She said she felt:

'...shame over why I, why I fell into drinking alcohol. I couldn't understand that, [I] tried to give up drinking, I can't believe I fed into it, like, but I did try and he used to say, "ah sure one drink won't kill you" I was involved in alcoholism for years as well and that was in the marriage. And I got sober six months after he left.'

For women with addiction issues this further compounds the sense of shame they indicated that they experienced for being victims of coercive control. This woman indicated that every time she tried and was succeeding in managing her addiction, he encouraged her back to her drinking habits. Victim blaming resulted in the woman in this study becoming ashamed, she blamed herself for allowing her ex-partner to treat

her that way and for not letting others know what was going on in her relationship, which echoes the literature on alcohol and coercive control. The women in this study who indicated that alcohol was an issue, whether their own use, or that of their ex-partners, reported living in a constant state of heightened anxiety, shame and self-blame.

Women said that this occurred while they lived in a state of constant fear of the known threat of physical or psychological abuse in the relationship. Research indicates an average prevalence of alcohol abuse of 7% among victims of coercive control (Costa & Gomes, 2018) however, Sullivan et al., (2020) indicate up to one-third of victims of coercive control use alcohol and indicate a link between alcohol abuse and the severity of PTSD that victims of coercive control experience. Moreover, where a woman is abusing alcohol within the relationship it is linked with more severe physical abuse and coercive control (Emery et al., 2019). Furthermore, indications are that victims involvement in alcohol abuse may be a form of self-protection, it may be the victim's attempt to numb their sense of shame (Heron, 2022).

The women in this study demonstrate how that public/ private attitude towards alcohol abuse clearly impacted on them and played a significant role in them carrying the shame and responsibility for managing the coercive control, compounded by alcohol abuse that they sustained in their relationships.

Physical abuse; living with fear and anxiety

Women discussed the impact which coercive control had on their levels of anxiety. They indicated that they had found themselves living in fear and terror and they spoke of how this impacted on their lives with their ex-partners. Three of the women said that the physical violence emerged for them early in their relationship. They recounted that their early experiences of coercive control were mainly psychological abuse or controlling behaviours. One of the women described it as:

'...walking on eggshells, and oh, that was straight away, from then on it was, the mind games were just unbelievable.'

Another woman recalled the terror of waiting for the violence to erupt after a breach of the rules that he had set up for the running of the household, how:

‘That day or after a few days of silently terrifying me the violence would start, he would beat me up.’

Women indicated how they lived constantly in these fearful emotional states. They discussed their experiences of the build-up of tension, the ‘walking on eggshells’, before the violence they fearfully anticipated eventually erupted, and how things then returned to ‘normal’, in much the same way described by Walker (2006). However, they indicated, that while some men in the beginning apologised, that changed over time to the perpetrators blaming the victim for their behaviour. The women indicated that there was no ‘honeymoon’ period, they lived in fear, constantly modifying their behaviour to try to prevent the tension building towards another violent eruption. They remembered the fear that they always felt when they heard the key in the door, and how they looked around the house to make sure that everything was as he dictated it should be, to try to protect themselves from another episode.

The women recalled that they had to constantly modify their behaviour both at home and outside the home. Women indicated that they had to be conscious of the impact of what they wore and with whom they talked, to make sure that they didn’t say or do anything to disrupt their partners’ mood. Women reported living two different lives at the same time, one the happy time with their children and the other the fearful, anxious and threatening time that started as soon as they heard the key in the door.

One of the women indicated that this resulted in her world becoming smaller and she described how she became isolated because she grew afraid of doing or saying anything in company that would make him annoyed. Research supports these women’s experience that victims of coercive control live in constant fear between episodes and that they are constantly watching what they do or say, modifying their behaviour, trying to prevent further abuse (Crossman et al., 2016). One woman indicated that when she and her partner went out socialising, he accused her of laughing and being:

'All over this person [any person], it was always something like that, and I got to the stage I stopped going out with them because I always got it [physical abuse] when I came home.'

Women said that these arguments could lead to an immediate violence outburst or to a prolonged time of silent terror, hours or days, as they waited for the violence to erupt. Women recalled how they constantly modified their behaviour in the mistaken belief that they could protect themselves from the abuse. This resulted in them becoming cut off from their friends and family and it left them vulnerable without any support systems in their lives.

One woman recalled:

'It was like two worlds really, one with the kids and me happy together and then the constantly terrified [world] of when I'd say or do something to start the whole cycle again.'

One woman recalled what she described as the 'violence of silence' and how it dominated the whole household. She spoke about the psychological abuse as she waited for what she knew would be the eruption into physical violence. The women all recalled living in extremely fearful, anxious environments. The experiences of the women in this study are echoed in the research on the effects of coercive control and its psychological effects on women.

Women remembered how this isolated them and how their families didn't understand the change in their behaviour. They recalled that they stayed away from their family sometimes because the just could not be themselves and sometimes because they didn't want them to see their "black eyes or busted lips". Other women remembered how their partners ensured that they left the bruises on their bodies where they could not be seen by others. As a result of the physical violence women who tried to manage their behaviours to protect themselves became more isolated from the supports that may have protected them from the abuse or supported them to get out of those situations. Consequently, these women were living isolated lives at the micro level. Herman (1992a) suggests that coercive control perpetrators establish their control through the use of repeated psychological trauma. She compares the levels of terror, fear, stress and the resulting exhaustion women in coercive control experience on a

daily basis with victims of the holocaust (Herman, 2015) while other researchers have linked these victims' experiences with CPTSD (Wuest et al., 2008; Cloitre et al., 2009; Sanz-Barbero et al., 2019; van der Kolk, 2014). The women's recollections of their coercive control perceptions and experiences – physical and psychological – fit with the descriptions of the behaviours that abusive men use to maintain what they see as their right to power (Paymer & Pence, 1993; Potter et al., 2021).

Suicide ideation, self-blame and coercive control

After the initial shock of being subjected to coercive control, five of the participants in the study indicated that they never told anyone that they had experienced abuse when it started. They indicated that they recalled how they carried feelings of embarrassment and shame because they were victims of abuse. These impacts of coercive control worked against them, preventing them from accessing support from outside the micro level of their existence.

'I didn't say anything because I felt embarrassed, and I felt ashamed because I would have thought when I was younger, I was strong, and I wouldn't take this off anybody.'

Women indicated that their partners held them responsible for the abuse and this consequently resulted in further self-blame among some of the participants. Women said that they continued to feel that way, years later; one of the participants wondered out loud at the interview if:

'...it was something lacking in me that is still there.'

Women recalled that they could not believe or understand how they had allowed this to happen to them. Their ex-partners blamed them for the abuse and, because of being blamed they began to blame themselves. The women indicated that they felt overwhelmed by it all, and that there was no way out of it all for them. Five of the women interviewed indicated that this resulted in them considering suicide during the relationship.

One woman said:

‘At that time, I just could not stop crying. I’d be crying walking up the road you know because, this thing was constantly in my head, in my body, the fear of what way is he going to look at me, what is he going to do, all of this fear and because he had convinced me I was the problem I was the one that was going to get out.’

As a result of being blamed for the violence this woman believed at the time that that her young children would be better off without her:

‘I did say to the doctor, on more than one occasion, that I felt like doing myself in.’

Another woman recalled that after a judge refused her a judicial separation, she considered committing suicide outside the court:

‘There had been some case that somebody had set fire to themselves, outside someplace like that, and I thought that I would do that, I would burn.’

One of the women in the study spoke of being so distressed with the mental abuse that she was experiencing that she contemplated suicide when her first baby was one year old. Of the five women who considered suicide, four spoke to their doctors about feeling stressed, and three indicated that they were given antidepressants. One of those women indicated that she took one, felt distant from herself and realised that she was not the problem, so she didn’t take any more. The experiences recalled by the women in this study are supported by the research that indicates that while some doctors treat the physical symptoms or other presenting problems, they can engage in behaviours including victim blaming and belittling while making excuses for the perpetrator (Loke et al., 2012) and nurses in primary care say that they are underequipped to address the issue of coercive control (Sundborg et al., 2015). However, only one of these women indicated that she told her doctor what was causing her stress, she indicated that she told her doctor what was happening in her relationship, and he put her on anti-depressants. She indicated that she was “probably suicidal”.

The suicidal ideation these women experienced correlates with the literature on mental health consequences for women experiencing coercive control (Potter et al., 2021). The literature acknowledges that mental health issues including hopelessness, helplessness and powerlessness are linked with suicide ideation (Herman, 1992; Cogle et al., 2009) while Potter et al., (2021) demonstrated the correlation of that link with coercive control. Furthermore, coercive control with its loss of self (Stark, 2009) and depression have been identified as factors in suicide ideation (Wolford-Clevenger et al., 2017). All of which are identified in the recollections of the women in this study.

The act of breaking their silence, whether to the court system or to a GP, was a very significant step for the women in this study. They undertook this when they were at a very low ebb, experiencing extreme distress, isolation and suicide ideation. However, they experienced that the systems where they sought support were influenced by the hegemonic common-sense approach of coercive control as a private problem. When the women went to their doctor, they were treated with a narrow clinical approach for suicide ideation through the use of antidepressants, with their sense of shame and self-blame unresolved, rather than addressing the coercive private world that contributed to the problem. When one woman went for help to the judicial system, she was sent back to live with her coercive control partner, where she experienced further abuse. The victims were left with either medication for their private problems, or thoughts of suicide because they perceived that there was no other way to escape from the perpetrators. The patterns pertaining to suicide continues for women who are victims of coercive control as research indicates that women who are victims are three times as likely to have attempted suicide in the past year compared to women who are not victims of coercive control (Agenda Alliance, 2023).

Coercive control, sexual abuse, rape and victim blaming.

Three of the women in this study indicated that they were victims of rape within their marriage. The women said that they had grown isolated early in their relationships, so they had not been talking to anyone about the abuse they were experiencing. After they were raped, the women said that they continued to live with it in silence. One woman spoke about it happening in the context of childbirth, another in the context of

being refused a legal separation and the third woman spoke about it in relation to talking to her doctor about being given antidepressants.

She said that:

'I remember even telling him [the doctor] about it, I said I was attending the rape crisis centre cos there was, my husband raped me. And he didn't bat an eyelid, where I was afraid to say it.'

Rape within marriage only became a criminal offence in Ireland in 1990 with *The Criminal Law Rape (Amendment) Act*. However, it took twelve more years before a man was successfully convicted of the crime. The women had grown up in that culture where a woman did not have the right to bodily autonomy within marriage. One woman described her sense of hopelessness and powerlessness after being raped within marriage:

'He raped me and that was really the lowest point. I think, there was nothing, I felt totally helpless, there was nothing I could do.'

This sense of not having bodily autonomy was summed up by another woman in the research who indicated:

'I couldn't ever refuse cos he would've beat me up, and then rape me, I'd learned that it was easier in the long run to give him what he wanted when he started [raping her].'

She recalled that she was powerless in the face of her husband's sexual demands which she said often occurred directly after he had beaten her up. During the interview she did not call it rape. She had previously indicated that she had spent her life trying not to upset him, because of his physical and psychological violence, while saying that performing sexual activity when she did not want it, was part of the overall pattern of coercive control.

The women in this study did not bring cases against their ex-partners for rape within marriage, they were living without support of family or friends, they were isolated with the perpetrators of coercive control. Women who were raped within marriage

recalled that they experienced it as one more form of abuse. They experienced the trauma alone without anyone to confide in and some indicated that they did not seek therapeutic support for many years after the event. These women's reports on their experience are corroborated by the literature on sexual violence in the context of coercive control (Dworkin et al., 2017; NIPSVS, 2017; WHO, 2021; Wright et al., 2021). Furthermore, the victims' recollections of their sense of powerlessness demonstrates the pattern of the perpetrators' use of power to generate the fear of violence to achieve his aims (Hamberger et al., 2017). Moreover, the isolation, self-blaming, and an awareness of the social attitudes towards victims of rape, when combined with coercive control, is associated with the development of PTSD (Ullman et al., 2007). All of which is linked in the literature, which outlines that sexual assault by an intimate partner is a significant predictor of PTSD (Temple et al., 2007).

Economic control and coercive control

Six of the women in this study recalled their experience of economic abuse during the relationship. One woman indicated that money issues emerged early in their courtship:

She indicated that she experienced a 'pattern of meanness':

'That pattern, like, about money [was there] from the very beginning, like he was with me for my 21st Birthday and he said, was it okay if he didn't come out to celebrate. I was going to another part of the country to participate in an event and he didn't come, and he got me a present in the pound shop, the equivalent of the two Euro shop, even though he had a job, he was working when we were in college'.

She recalled how this pattern continued throughout her marriage, at times when she didn't receive any acknowledgement of her birthday, even special birthdays, or on significant career successes when he would ridicule her success and say 'what's there to celebrate?'.

Women recalled that they first became aware of economic problems within their relationship when they had young children. Some women were forced to give up

working outside the home because it would have interfered with their partners' tax-free allowances or because of childcare issues.

One woman said:

'A big part would be he'd control where I worked, he controlled how I worked. I wasn't allowed work outside the home, if I did work outside the home it had to be money into the hand. He didn't want my wages interfering with his wages and tax and all that type of thing. So, when I had my first child, I left normal employment that I was in, taxes and all that. I left work to start raising the family and I started doing home sewing and that was money into the hand'.

Women spoke about their ex-partners not paying bills when they didn't get any piece work from the factory, they said that their coercive control partners put the bills "on the fireplace". They left the bills there, unpaid, until the women had work and the money to pay their share of the bills. Women worried about the electricity being cut off while they tried to manage the money, to keep food on the table for the family, when they were not earning. Women indicated that what he earned was his money and they recalled the fear that they experienced while they were waiting for the sewing factory to contact them so that they were earning again. As one of the women said:

'He knew for every skirt I made how much I'd get, and that money would be put into the kitty and his wages was his wages...To me, that was coercive control.'

Women recalled how they didn't have money for clothes and how consequently they perceived that they lost the ability to look after their appearance. Women recollected how this impacted on their self-esteem and restricted their meeting up with people outside the home. At the same time women spoke about how their ex-partners used their shabby clothes as further fuel to abuse them about their appearance.

One of the women recalled how her ex-partner treated her when she complained about her situation:

'All my clothes I used to have, they soon got shabby, and I remember now, he'd go: there's shirts there belonging to me if you need clothes, and I used to wear his shirts then with a belt on them.'

Some of the women recalled how money was stolen from them to try to prevent them from meeting up with their friends. Women recollected that this was another way of trying to keep them isolated.

One woman recalled:

'I'd be getting ready to go out, go up have a shower put on me make up, come down and – no money in the kitty, its gone, he's taken it. So, I'm running around at the time to the phone box to phone my friend to say – he's taken the money, I haven't got it, and she would be screaming down the phone to me to get a taxi, you are coming out, we are going to have our night out and I'll look after you and she done that for many, many years.'

Women recalled that this pattern of economic violence covered every aspect of their lives. Women said that their families were always giving them clothes and shoes for their children. They remembered that they went without food to feed their children. As women were experiencing this poverty their partners were spending significantly on themselves, as one woman indicated 'his wages were his':

'Money, he had absolute control of it and always said we couldn't afford anything I needed but we always had the latest electronic equipment he wanted and for years we had a new car every year.'

This pattern was also recalled by another woman:

*'He used to say to me, I deserve to go out cos I'm working all the week. It wouldn't be out; it would be Jamaica for 2 or 3 weeks! It would be Las Vegas...it was fe***n' everywhere!'*

Women said that while they were experiencing financial hardship, their partners dressed up and went out regularly by themselves. They recalled how their ex-partners had no shortage of money to spend on their whims, while they didn't have enough to feed and clothe their children.

One woman recalled how she was told by her ex-partner that the family home had to be re-mortgaged because of his gambling:

'I was left with all that big debt that he re-mortgaged, well, we re-mortgaged because I signed on the dotted line, so I was told anyway when I got legal advice, I was told I gave it to him as a gift. Well, that's what his solicitor said, I gifted him all of them monies.'

This had a long-term impact on this woman's economic life and resulted in further hardship for her when the marriage ended. The literature indicates that the economic abuse and the long-term ramifications of the economic control described by the women in this study, does not get sufficient attention in the research on coercive control (Krigel & Benjamin, 2021; Postmus et al., 2018). Furthermore, within the context of coercive control economic abuse causes stress and hardship and is one more significant factor that impacts on the health and wellbeing of victims (Sanders, 2015). This was demonstrated by the woman signing the forms to re-mortgage her home under the gaze of her violent partner in the presence of the financial adviser and later by the lawyer advising her that she had gifted those monies to that violent partner. As a consequence, she experienced long-term poverty and the fear of repossession of the family home, where she lived with her two children under that cloud, for many years after the relationship ended. Women who did seek professional advice during this phase in their relationships indicated a lack of awareness among professionals of coercive control relationships (Stark 2009).

The responses from the professionals that women encountered indicated that they considered the problems were private, not societal issues. The experiences that the women in the study recalled corresponds with the literature on how coercive control partners use economic privilege and abuse to impose power and control within the relationships (Paymar & Pence 1993). The women's recollections of their experiences are reflected in the literature that acknowledges the pattern of economic abuse that they described as 'what's yours is mine and what's mine is my own' (Jury et al., 2017).

Impact of coercive control on women's careers

Women recalled that exhaustion was a constant problem in their lives when they were living with abusive perpetrators. They indicated that exhaustion emanated from stress, anxiety and lack of sleep that was the result of their partners late-night abusive behaviours. For some of the women they were kept from sleeping by the constant arguments, putdowns and abuse that they experienced right into the night. On top of this for some women, were the sexual demands of the perpetrators, for others it was their abusive partner's late-night socialising, and for some this was all combined with their partner's use of alcohol. The women indicated that all these problems in addition to the responsibility of children, careers and managing their homes, was absolutely exhausting.

One woman said:

'I worked all the time and, whereas on the one hand it was great to get out of the house, and when I was in work, I had to concentrate there and somehow I couldn't be worrying about the stuff at home, but on the other hand it was exhausting because a lot of the time I never got proper sleep at night, with him coming home late, and all that kind of thing.'

Another woman in the study recalled how difficult it was for her managing everything on her own:

'I always used to say that if I had a wife, I could have done much better because I, I suppose I had total responsibility for family and I had no one to support me in my career and I think I just got exhausted.'

This woman recalled the public/private mixed presentation that her ex-partner demonstrated; she spoke about his showing off about her in public while she experienced the opposite in the privacy of the home

'So, he would say things to me like 'Oh, I was talking to such and such and saying what you are earning and they were really impressed' cos he was sort of showing that off; but every so often there would be the put-down, 'well after tax I was taking home more than you'. So, there was that put-down.'

Three of the women in the study indicate that they had to stop working outside the home when they had their children either because of difficulties relating to childcare, or lack of support from their ex-partners, or because of what they describe as coercive control. This is reflected in the literature (Stark 2009).

One woman indicated that, while her partner had a good wage and she was on a small income doing piece work in the home he controlled what little she had:

'I was paying half of all the bills that came in cos I was earning a wage, and this was it, going to be 50/50'.

One woman indicated that she was forced to leave her career because of childcare and had worked in his business without a wage while she still had full responsibility for the children and for everything in the home. All the women in the study indicated that coercive control significantly impacted on their work lives. They experienced emotional stress, lack of sleep leading to exhaustion and an inability to concentrate. Other women indicated that their ex-partners used coercive control to prevent them from working outside the home. Women recalled how a lack of support from their ex-partners had an impact on their careers, how the coercive control forced them to lose their jobs or how lack of childcare and exhaustion ultimately resulted in employment instability. All of these women's experiences correlate with the literature that demonstrates how the patterns of behaviour used by perpetrators of coercive control has a profound impact on women's career and economic lives (Stark, 2009; Lantrip et al., 2015; Showalter, 2016; Hess, & Del Rosario, 2018).

Women's Reproductive health and coercive control

The women who participated in this study were not asked specifically about coercive control and pregnancy. However, during the interviews pregnancy emerged, either as the time that a participant first experienced abuse or the participants broached the subject themselves while they were recalling their experience of coercive control. O'Brien Green (2020) indicates that women who are living with abuse are at greater risk of a range of violent behaviours during both the pre- and post-partum period of their pregnancy. Included among the harms generated by coercive control were

miscarriages and stillbirths (Afiaz et al., 2020). The participants in this study indicated that the violence they experienced during pregnancy and post-partum included physical, psychological, emotional, sexual and economic abuse.

For one of the interviewees, abuse during her pregnancies manifested itself in the form of emotional abuse and lack of support during and following her miscarriages:

'I had two miscarriages before our first baby was born...He wasn't there for me at all...he didn't express any support. Even though I was in pain afterwards he didn't come home to help me or anything like that.'

She indicated earlier that, six months into the marriage, his behaviour had changed from being kind and caring to not coming home after work and not wanting to spend time with her. One of the women recalled how she had experienced three miscarriages before the birth of her first child and that it was directly after her first miscarriage that she experienced the physical violence for the first time:

'He hurled me back onto the bed and he stormed out of the room. Oh, and he added something like, losing his child.'

Research carried out by Qu Fan et al., (2017) indicate that although stress is not readily accepted by the medical profession as a factor in miscarriages, citing the NHS website as one example, they indicate that a meta-analysis of the literature on miscarriages does demonstrate stress to be a factor pertaining to coercive control during pregnancy. One of the women in this study indicated that her partner bit her finger, 'he nearly bit it off', she had informed her GP that she had 'scalded it with an iron'. She said:

'I remember when I went down with that scald he says to me, your baby wasn't breach last week and its breach now so he said there's something after happening to you that's after making that happen. And he had to ring up the Rotunda [hospital] and I was sectioned within 2 days.'

This woman's experience reflects the research that indicates the correlation between abuse and preterm births (Berhanie et al., 2019). Some of the women's experience was that the coercive control was present prior to their pregnancies. However, for some women, their pregnancy was the first time that abuse emerged in their relationships. The women's experiences are supported by the research indicating women are

vulnerable to violence during the prenatal (Devries et al., 2010) and perinatal period (Mojahed et al., 2021). Three of the participants indicated that economic abuse was a significant issue either during or in the time directly after pregnancy.

One woman said:

'The first pregnancy, the day I announced it, and then with every pregnancy, baby, there would be issues around paying for it, paying for the medical expenses and, you know, I'd always be stressed out in gathering the money together and he just wouldn't acknowledge that, you know.'

One woman indicated that after she had her first child, she was forced to reduce her days at work because of childcare issues and her ex-partner's lack of support. She recalled that:

'By degrees he made it impossible for me to work [even] on Saturdays so I stopped. It was really hard because I had to ask him for money for everything, even like sanitary towels, I was so ashamed of what I had become.'

One of the interviewees said that during pregnancy she was accused of:

'...squandering his money [even though] I was putting more into the pot than he was or the same anyway.'

Another woman indicated that she experienced economic abuse during her second pregnancy. She said that she had worked almost up to the birth of both her babies and indicated that she was able to return to work soon after the first child was born. Her job facilitated the hours and a family member could mind the baby. However, this was not available when she had her second child, so she could not return to work. She recalled that:

'I really needed nappies and baby food for...and he threw the money on the ground, he said that's what you are to me, a leech, I'm to pay for all of you now.'

Women indicated that physical and mental abuse continued during their pregnancies. One woman clearly described a memory from her second pregnancy many years previously. She said:

'A few weeks before my second child was born, he [her ex-partner] got in a rage. He jumped up from his chair and punched me in the stomach. When my baby was born, he had marks on his legs that the hospital said were birthmarks but they went away after a while. I always thought that they were bruises from him punching me.'

The women in this study reported the economic hardship, stress, shame, violence and anxiety, and their effects on their lives during and after their pregnancies. All of these women experienced economic abuse during their miscarriages, pregnancies or postpartum. The literature echoes the women's experience of the significant effect that economic abuse had on them during pregnancy (Gürkan et al., 2018).

Psychological abuse during pregnancy had not received similar attention to that of physical abuse; however, this situation is changing. In this study women indicated that the psychological abuse they experienced was of their partners belittling them in relation to the changes in their bodies or of their partners closing-down emotionally to them and therefore not being available to them during the pregnancy. One of the interviewees indicated that when:

'I was pregnant on the first child, and he told me he wasn't interested, he didn't find me attractive anymore.'

Women spoke of how these forms of abuse had long-term consequences on their self-esteem and sense of self-worth. Women indicate that they experienced sexual abuse and rape at that time in their lives. One woman said that:

'As soon as I arrived home after having my baby, I had an episiotomy so had lots of internal and external stitches, he demanded sex and then gave out to me about the stitches hurting him.'

Research indicates that coercive has a significant impact on both the pre- and perinatal stages of pregnancy and the women experienced significant anxiety about the risks of harm to their unborn babies (Martin-de-las-Heras et al., 2019). Women in this study indicated that during pre-natal or post-natal medical appointments or hospitalisations they were rarely approached in relation to their experience of coercive control, although they indicated that they would not have told their history or that they would have lied about the signs had the medical professionals queried their symptoms.

However, women said this may have been different had their practitioners had coercive control training or had protocols been in place to ensure that the approach was appropriate and without their partners present during interviews. Miscarriages are also a time that emerges as a time of significant vulnerability for women with some disclosing the shock of enduring multiple miscarriages without any care or compassion. Women indicated that it was during a miscarriage that they first experienced coercive control.

Women have spoken of hiding their periods because they were accused of starting arguments due to pre-menstrual tension and they have spoken about the experience of period poverty due to financial abuse. For others coercive control has manifested itself as financial abuse whereby they have had to carry the complete burden of finding the financial resources to meet the costs of the pregnancy and birth, including that of their midwives and other ancillary expenses that they have encountered both during their pregnancy and after their babies were born. Women indicated that they first realised they were victims of coercive control (Stark, 2009; Crossman et al., 2016) after childbirth when their partners removed themselves from the home environment claiming work commitments thereby leaving them isolated and self-blaming and sometimes impoverished because of abuse, without any physical or emotional support.

The patterns of behaviour generated from the recollections of the women in this study indicate that coercive control does not end for victims during pregnancy. It coincides with the literature that indicates that women are at risk of violent behaviours both pre- and post-partum (Devries et al., 2010; O'Brien Green, 2020; Amara Mojahed et al., 2021) and how these factors may be involved in miscarriages and stillbirths (Qu Fan et al., 2017; Berhanie et al., 2019; Afiaz, 2020) Furthermore, the patterns of physical and psychological abuse reported here coincide with the literature on a wide range of experiences including economic abuse experienced around pregnancy (Gürkan et al., 2020).

Conclusion

This chapter traced the participants' experience of coercive control during their relationships with their ex-partners. It reflected the particular experiences of this group

of women while they were in their relationship. Women spoke about how they didn't have a framework to understand what they were experiencing when the abuse began and how they rationalised it in the early phase of the relationship. They recalled the pattern of isolation they experienced and how this intensified the abuse that they were experiencing. Their experiences in the relationship are reflected throughout the literature on coercive control. They indicate the private nature of their understanding of the abuse that they experienced. They spoke about love, and the role of the discourse pertaining to romantic love, within their everyday lives. Some of the women reached out for support but their sense of their problem being individual and private was compounded by the professional responses.

While in the relationship women who resorted to the court system recalled a justice system that was separate from their world view, one which further victimized women by the application of a male-dominated patriarchal system set up to protect the 'rights' or privileges of males. Women were not aware that their private problems were in fact public issues that deserved to be spoken about and addressed as social issues. Their illocutionary acts to elicit support failed when they turned to the structures that they thought could have given them support. Nevertheless, despite being abandoned within the private domain, the women's personal agency was evident in their continuing protection and care of their children, their attempts at placating their partners to prevent further violence and hiding their physical and psychological injuries in their attempts to live 'normal' working lives.

The women indicated how the coercive impacted over time on their mental, physical and emotional health and their economic and sexual lives. Furthermore, they indicated the broad range of impacts of the abuse during and after their pregnancies. Their recollections are supported by the literature on the patterns of abuse experienced by women who are victims of coercive control. All the participants left their abusive relationships. The next chapter demonstrates how these relationships further impacted on these women's lives as they tried to achieve their independence from their abusers.

Chapter 7 Breaking free from abusive relationships

Introduction

This chapter focuses on the women's recollections of their experience and perceptions of those experiences as they were trying to break free from their coercive control relationship. It analyses those recollections in the context of the impacts of coercive control on their lives at the meso and macro level. The research explores the women's perceptions of their experiences within the local culture and their communities. It includes the community supports, health care, and other supports and resources that they recalled. Additionally, their experiences and perceptions of their interactions with the social, legal, and economic structures in society: the cultural, patriarchal attitudes they encountered within those structures are also incorporated in this chapter. It opened the opportunity for the women to recall and reflect on their experiences of how dominant patriarchal discourses resulted in their illocutionary acts either going unheard or misheard within those systems. It also created the opportunity for them to explore their journey from leaving the violence to ultimate freedom and the impact of that journey on them physically, emotionally, and financially.

Struggling with the effects of coercive control while breaking free

The women in this study recalled how difficult it was for them when they tried to break free from the perpetrators of coercive control. They indicated that they experienced physical, emotional, sexual, and financial abuse during their struggle for freedom. They also spoke about the ways that their ex-partners used their children to inflict pain both on them and the children. One of the women in this study spoke of the damage her ex-partner did to their home just before he left the house:

'He smashed the house up the night before he moved out, broke up worktops, eh, he just said to me, you're not getting this house the way it is, he, he broke up loads of stuff and took nearly everything that he paid for. Well, even though I paid for most as the years went on, most of the stuff was his, the telly was his,

the computer was his and even though there were two kids that were getting left in the house with me, he made sure that he got a van to get rid of all of it.'

Women were left in broken-up homes without the basic necessities that most people take for granted and without the resources to replace the damage that was done to their homes. They pointed out how the financial abuse continued after they left the relationship. The same woman also recalled:

'He gave me nothing until I brought him to court, I had to bring him to court for maintenance, he walked out and gave me nothing, I was living on, thank God, I had it, my old job at that time. And I used to ring the Vincent de Paul and the money that I earned went towards the mortgage and the bills. But I had no money left for food while I was waiting on my maintenance order.'

One woman described the pain that her ex-partner put her through by drawing out leaving the house until he decided that the time was right for him, even though he had a place to go to at the time the court order was made:

'The Judge told him he was to leave the house and it was two weeks before Christmas that he actually left. And it was like he had cut a knife through the whole family.'

Women pointed to the emotional difficulty this created with their children. One woman recalled how the mental abuse she had experienced during the marriage left her feeling about herself after the relationship ended. She said:

'When I left my marriage, I thought I would never again be with anybody because I felt I was so repulsive and disgusting and nobody would want me.'

Women carried the scars of the emotional abuse, and the impact that it had on their sense of self and self-esteem, after the relationship with their abusive ex-partners ended. They noted that it left them without hope for future loving relationships. Another woman said that she left the family home:

'I ran away and hid in a family member's house with my child. Eventually I got a place of my own, but I still hoped to reconcile, eventually it ended up with him beating me up and raping me'.

Women described how they still had hopes for the relationship even though they felt forced to leave. They recalled how this left them vulnerable and caused them further pain. They spoke of the fear and stress the impact of the physical and psychological abuse left in their lives during the break-up period. They pointed out that they became fearful of going out or seeing their ex-partners in the streets or meeting up with their ex-partners anywhere at that time. One woman recalled how the fear continued for years:

'I thought I saw him; it was a good few years ago. I'm a wimp really when I think of it, but eh, I nearly wet myself in the street and I hadn't seen the f.....r in years.'

Women said that the fear and stress stayed with them for years after they left their coercive control partners. Some women indicated that they blamed themselves for it, they spoke of it as if it was a weakness in them. One woman recalled that she became very frightened as a result and that it made her fearful of leaving her home:

'He stalked me for at least a year, I had to keep hiding and not answering my door if I didn't know who was there, it was a very frightening time.'

Stalking is an coercive control behaviour that leaves victims feeling constantly fearful and unsafe, whether it is outdoors, where they are constantly scanning their environment, or indoors, where they are checking that all the doors and windows are locked in their homes. This woman spoke about the ongoing fear and terror that the stalking behaviour generated in her all the time, even when her ex-partner wasn't the person who was knocking at her door. While this woman contacted the police, the fear that the stalker generated in her impeded her from taking further action, she said:

'He knew where I lived, and I was too afraid.'

Stalking is linked in the literature with post-separation violence (Ornstein & Rickne, 2013). It is associated with higher levels of coercive control, both physical and psychological, with psychopathy, and more extreme psychopathology in perpetrators, severe violence, and femicide (Norris et al., 2015; Cheyne & Guggisberg, 2018; Cunha et al., 2022). It is linked with ongoing mental health issues including PTSD in victims (Dardis et al., 2017; Senkans et al., 2021). Additionally, research demonstrates its

association with victim blaming and significant under recording of the crime by police (Brady & Nobles, 2017; Taylor-Dunn et al., 2021).

Women noted how their ex-partners found indirect ways to continue the coercive control after they left the relationships. Sometimes perpetrators used the children to continue the mental abuse on women. One woman recalled that after she separated from her ex-partner, he resumed his mental abuse by involving the children:

'He used to try and em, indoctrinate the kids. I remember he would bring the kids back and he'd get them to kneel in the porch before he'd let them in and he'd say, he would ask them to pray to God to take the devil out of mammy. So, it was ridiculous but I, I struggled, it's very hard to, eh, not to run him down in front of the kids or that kind of thing, to you know, help them, so long as they weren't too upset. I'd just avoided it as much as possible.'

Women's recollections of the impact of coercive control on their sense of self correlates with the literature of how it acts as a barrier to women moving on to new, healthy relationships (St. Vil et al., 2021).

The women in the study described their exhaustion, stress, and the fear that they lived in when they tried to break from their coercive control partners and how that fear and stress did not end when they left their abusive ex-partners. The literature indicates that the ending phase of an abusive relationship can be a very difficult and sometimes very dangerous time for women who were victims of abuse (Alsaker et al., 2008; Davies et al., 2009; Zeoli et al., 2013; Shoener, 2016; Badden, 2017; Spearman et al., 2022). Furthermore, the literature indicates that women suffer twice the risk factor of coercive control when children are involved (Pomicino et al., 2019). Stalking, as one of the women recollected experiencing, is acknowledged in the literature as a frightening experience perpetrated post separation that can generate fear and terror, leading to mental health issues including PTSD (Dardis et al., 2017; Senkans et al., 2021).

Women pointed out how these behaviours were stressful across different aspects of their lives and how hard and painful it was for them to cope with those behaviours. Some women recall blaming themselves for what they perceived as their weakness, believing that the problem was in them, as they continued to experience the fear their ex-partners instilled in them during the relationship, and for years after they left. These

findings mirror the literature pertaining to the impact of coercive control on victims (Ford-Gilboe et al., 2009; Abrahams, 2010; Ban Hong et al., 2015). The reflections of the women in this study, their descriptions of their experiences of coercive control, and their struggles to address those private problems alone, echo what Wright Mills (2000) explored as the challenge to transform such ‘private problems’ into ‘public issues’.

But the public space too proves problematic. Women discussed the pain they experienced trying to reconcile with their ex-partners, and about not putting their partners down in front of their children, as they struggled within what is effectively a patriarchal framework of discourse, to break free from coercive control perpetrators. They recollected how they continued to look over their shoulders in fear, and how that fear forced them to continue to modify their behaviour to protect themselves in much the same way as they did when they were living with the coercive control perpetrators (Myhill, 2015; Myhill & Hohl, 2019). Furthermore, women recalled how all this was exacerbated by the significant difficulties they encountered within the justice system as they tried to break free from their coercive control partners.

The justice system and its impact on the victims of coercive control

The women in this study recalled the struggle they experienced within the macro system when they attempted to get support as they tried to leave their coercive control partners. They spoke about the struggles they encountered as they tried to get the support of the legal system to help them to overcome the strategies their abusers used to prevent them leaving the relationships. Some encountered a demoralising, disempowering backlash when court officials supported their abuser. For one woman in this study that backlash significantly empowered her abuser to maintain power in the private domain. She recalled one time she went to court for support, and how her ex-partner would use it against her whenever she tried to withstand his behaviour:

‘When I got to court, I was abused by the judge, so I think that was the biggest effect because my then ex would say, remember the last time we went to court, and sneer.’

This woman recalled a judge using patriarchal misogynistic rhetoric to re-victimize her within the court system which empowered her ex-partner to further abuse her after the court experience, thereby emphasising her complete powerlessness in the face of her abuser (Hamberger et al., 2017). Another woman recalled that while the physical abuse ended when he left the relationship, other dimensions continued:

'Oh, Jesus! The psychological abuse went on and on.'

This woman's experience of psychological abuse and its impact on her mental health, leading to the depression that impeded her ability to work after the abuser left the relationship, confirms what is seen in the literature (Estefan et al., 2016). Another woman recalled how she was exhausted by the years that she spent trying to use the court system to get justice for herself and her children. She pointed out that she got maintenance orders for her three children, but she never received any money. Her coercive control partner was allowed by the legal system to miss multiple court hearings without ever experiencing any penalties. Eventually she learned that he had a claim due, and she informed her solicitor:

'I'll waive all my rights to his money if you get me a legal separation; that's how I got it. I got my legal separation on the 31st of July, the last day of court, because he was due a claim that he had, and I waived all my rights to his money to get my legal separation, that's how I got it, and that was the start of my journey.'

This woman realised that to make the break and move on from her abusive ex-partner, she had to make the choice to give up her rights to back maintenance and all other money she was entitled to under the law. She decided that for her mental and physical health she needed to let it go and move on with her life. She said that it was a struggle because she carried the sole financial responsibility for the family, but that it did give her freedom.

Another woman recalled that her ex-partner wouldn't allow her that freedom for several years after her divorce settlement. She recalled how the court system permitted him to continue his abusive controlling behaviour towards her. She said that he became a lay litigant, he dismissed his lawyer. Consequently, he no longer had to pay legal

fees in his fight to continue to use coercive control over her through the justice system. She stated that he fought against the original settlement by taking her to court for years even though he never succeeded. She said:

'He kept using his right to fight and the law allowed him. It cost me money all the time even though he never won. The law allowed him to vent his anger and have me pay for it. I paid my lawyer, and missed work, but it cost him nothing, he'd always said he'd retire so I'd get nothing, that failed, so he went on and on.'

The dominant societal discourse pertaining to coercive control that exists within the court system, and with some of the professionals within it, worked against these women. The results of such hegemonic attitudes impact within the judicial system by allowing abusive perpetrators unfettered access to the court system, thereby empowering them to commit further psychological abuse, which the stressed, fearful and exhausted victims recall as completely disempowering. One woman recalled how the courts supported her partner's coercive control at a time when she sincerely believed that he could kill her, she said:

'The courts did little to assist, I'd say that the system does not help that in any way, in fact it fuels it even more.'

The themes from the women's narratives match what the literature describes as 'paper abuse' or 'procedural abuse', using the court system to bring frivolous cases against them to continue to assert their dominion over them and to instil fear and cost them time and money after the coercive control relationship had ended (Miller & Smolter, 2011). Women noted that being weak, struggling with coercive control to make relationships work, keeping the abuse private and taking responsibility for managing the abusive perpetrator's behaviour, only supported the social and cultural hegemony within the macro system, while standing up to the oppressor and being strong in the face of the abuse denied them the status of the 'ideal victim' (Myers, 2016). Furthermore, these attitudes are reinforced within the media, and the professional and social supports women access within the macro system, where victims regularly hear the refrain, 'why did she stay?', which further disempowers and blames victims for the coercive control they experience (Eigenberg & Policastro, 2016; Whiting et al., 2019). These views reflect the hegemonic support of traditional gender attitudes that

result in women performing as peacekeepers within abusive relationships (Kelly et al., 2022) and those traditional gender stereotypes are reflected in the cultural and social discourse pertaining to coercive control. The women recalled how this manifested itself in victim blaming and the shaming of victims, triggering similar experiences similar to those they encountered within the abusive relationships (Berns, 2017; Aujla, 2020; Khaw et al., 2021; Voth Schrag et al., 2021). The hostile sexist attitudes that victims of coercive control recall encountering exist more generally, even among some women. However, such attitudes are higher among men and still higher again among those who perpetrate coercive control (Martín-Fernández et al., 2018).

The literature acknowledges the societal and cultural view of women's inferior position in society, the lack of acknowledgement of gender-based violence and the insufficient supports for women who attempt to leave coercive partners (Pomicino et al., 2019). The women's descriptions of their negative experiences reflect the literature pertaining to women's experience of support services, especially the police and legal system (Saxton et al., 2021). Furthermore, the responses of these systems play a significant role in how women continue their journey towards breaking free from the abuse (Garcia-Jimenez et al., 2019). Women spoke about their coercive control ex-partner's use of the judicial system to further abuse them from the onset of their journey to freedom, and how this cost them financially, and reignited the anxiety and fear from the abuse they experience in the relationship within them. When women attempt to leave, they are attempting to bring their private problem of coercive control into the public domain. However, their comments reveal that they do not find the social activists or social supports to help them in their struggle against the structures that maintain, and sustain, the attitude that coercive control is a private problem (Wright Mills, 2000).

Women pointed out the difficulty of trying to explain their coercive control experiences when they attempted to seek support to have their needs met in court (Clarke, 2021; Khaw et al., 2021) and the negative impact that had on them seeking further support (Voth Schrag et al., 2021). They described their experiences of being silenced by the dominant patriarchal discourse that they experienced within that system. The recollections of the women in this study correspond with similar patterns pertaining to issues including maintenance, access to children, and financial abuse

echoed in a Swedish study (Tegler et al., 2022) demonstrating the myriad ways the system revictimizes women, as they try to escape coercive control. The literature indicates that the court not only re-victimizes but facilitates that process. It calls for coercive control to be addressed as a public issue with state-supported solutions (Bjørnholt, 2019) and furthermore, it suggests that protection orders may play a significant role in supporting the isolated victims (Sullivan et al., 2021).

These studies indicate the power that the judicial system could bring to bear on the issue of coercive control if the will of those within that dominant elite acknowledged, accepted, and implemented change to the legal systems, and the attitudes that underlie those systems, in response to coercive control. This could help bring about zero tolerance to abuse against women (Goldner 1998) by addressing the cultural hegemony that prevails in the general population, changing coercive control into a public issue and thereby supporting women struggling with and trying to escape from coercive control relationships. Notwithstanding the difficulties the women encountered with the justice system, they did not end there, the women's comments showed that they were comparable to those they encountered within the financial system.

The costs of coercive control financial abuse during separating phase

All the women in this study experienced economic difficulties when their relationships with their ex-partners ended. Maintenance orders were put in place by the courts as part of the separation process. However, these orders were frequently either fully ignored or broken by the coercive control perpetrators. One woman recalled how her ex-partner promised the court that he would pay maintenance, and explained what happened:

'He was asked to pay 20 pound a week and, "yes Judge, I will", and he paid one 20 pounds into a bank account that I had set up and nothing ever came through it again...never, he never paid maintenance.'

Women described how their ex-partners had said before they initiated the breakup of the relationship that they would give up work rather than pay maintenance. One woman said:

'There was a court order for maintenance but I never got it. And after, em, the first...I think it was 3 years or something after we split up, he took early retirement out of his job, and I never saw a penny of it [the retirement package]. I put my kids through school. Paid for their books, paid for the uniforms, done everything on my own. Communion, confirmations, did it all on my own.'

This woman recalled that when she went to court for maintenance her ex-partner told the judge that he couldn't pay because he had no money, and this was accepted by the court. Women indicated that they had to get money from the community welfare office to survive, and that their ex-partners lied when the community welfare officers went to them to get them to pay maintenance:

'It was after that, the beating up and all, that he stopped giving me maintenance. I went to a community welfare (office) and got money. They tried to get him to pay but he told them that I had refused the money. He said that he'd give me the money if I went to his house and slept with him!'

This woman pointed out that the abuse was ongoing and frightening. She was in constant fear of not being able to survive financially because she feared that he would have her payments cut off as he lied to the authorities. Women spoke about how their ex-partner emptied all the money from joint bank accounts and how this was never considered by the courts. One woman recalled how none of this was considered when it came to the separation:

'He closed them, he took the money out even though the money was in a joint account that you needed a signature, he wiped it out and he had a pension and I never saw any of that. He took all that and because he didn't do a full disclosure, the courts didn't know he had all this money lying in the bank account or a shoe box, so when the separation came, the judgement on the separation was that the house would be sold when [daughter] came of age.'

Women said that the ex-partners had a safe roof over their heads, while they lived in constant fear of losing the home that they had for themselves and their children. One

of the women recalled how her abusive ex-partner had orchestrated it so that she was left with significant debt when he left the relationship:

'I was left with all that big debt that he re-mortgaged, well we re-mortgaged because I signed on the dotted line. When I got legal advice, I was told I gave it [the funds from re-mortgaging their home] to him as a gift. Well, that's what his solicitor said, I gifted him all that money.'

Women maintained that because they were left with all the financial responsibilities for the family, they had to take minimum wage jobs after their ex-husband left, to keep paying the bills. They said that they couldn't take advantage of education and training programmes to update their skills. As one woman said:

'I needed to have a weekly wage that I could pay my bills.'

Women recalled living in fear of losing their homes. They said that most of the money they earned was going towards the mortgage. One woman said she and her children:

'...didn't have a Christmas dinner, 'cos they got all my wages, all my wages went to the bank.'

While another woman indicated that she still has to borrow from friends:

'I'm dependent, sure I have to borrow money from everybody.'

Women recalled how the financial pressure that they experienced was very stressful. They pointed out how financially stressful it was, keeping a home, working, and trying to care for their children. One woman said that it was responsible for her trying to reconcile with her ex-partner. She described how the maintenance was paid but that it did not meet the cost of living for her and the children:

'He had been ordered to pay maintenance early on, but he never did increase it. That was one of the reasons I had to go back to court, or that I attempted a reconciliation at some stage, because eh, I was finding it hard to manage [daughter] (who) still talks about the cold in the house, about seeing her breath when she'd wake up in the morning 'cos I couldn't afford to run the heating.'

One woman who had ‘a good income, a good career’, indicated that it was used against her at her divorce. Her divorce went through at the time the recession impacted in Ireland. She said that her salary was cut, and she couldn’t go back to court:

‘Because I didn’t have the money for a solicitor and because I was earning too much, I couldn’t get free legal aid, ‘cos I was left with all our debts and the kids’.

One woman recalled how when she went for her separation and divorce that she discovered the joint bank account, which she thought held her savings, didn’t exist. She pointed out that she:

‘Filled out the forms [early in the marriage], those forms never went anywhere, so the bank accounts stayed in his name so, any money I actually had over living [expenses] was lodged in, probably over five or 10 thousand a pop, was lodged in his bank account, I only found out about that after I would have separated and I looked for, em, joint bank accounts and there weren’t any’.

All the women in the study recalled the impact of financial abuse and how it was a significant issue for them during their separation.

Financial abuse within coercive control relationships is well documented (Hageman & St. George, 2018), there is less awareness of the continuing impact of financial abuse on what women describe as their painful, fearful, and traumatic journey to break free from coercive control relationships (Thomas et al., 2015; Hing et al., 2021; van Gelder et al., 2021; Tegler et al., 2022).

The women in this study spoke about how the consequences of that financial abuse impacted on so many aspects of their lives as they attempted to gain autonomy after they left the coercive control perpetrators. Some of the women said that where the court mandated maintenance, they either received no payments or that the payments that they did receive were sporadic. Others recalled that maintenance was not sufficient to meet the costs of growing children and that it didn’t stay in line with inflation. One woman said that returning to court was not an option as she was caught between having too high an income to access Free Legal Aid while struggling on her

income to care for her family and pay the debts that she was left responsible for after her divorce.

Women's experiences of the consequences of financial abuse were stressful and exhausting, and they perceived it as ongoing coercive control. This is supported in the literature that links the legal abuse perpetrators continue to use against their partners to maintain coercive control (Gutowski & Goodman 2022). All the women in this study were mothers. The literature indicates that for mothers the separation process is compounded when maintenance or access are involved; women's risk of coercive control abuse is twice that of women where children are not involved in the separation process (Pomicino et al., 2019). The women in the present study said that the financial abuse impacted on their capacity to keep their homes, to feed their children, and on their personal development in relation to improving their careers to attain higher incomes and to provide towards pensions for their future lives.

Keeping a roof over our heads

Keeping a roof over their heads was a significant issue for the women in this study. They spoke about the struggles they encountered, on top of the financial struggles addressed above, trying to hold onto their homes during the breaking free phase of their relationships. During this time, they endured the difficulties of trying to keep banks from foreclosing on their mortgages and thereby forcing them out of their homes. One woman recalled the stress of trying to deal with the bank officials while her ex-partner refused to participate in the process:

'I've had to fight the banks for the last ten years, because of both [the banks and her ex-partner], the maintenance of the mortgage, he's controlling the whole situation. Because the banks won't negotiate with me as an individual, so I'm deemed as, em, what's it called, uncooperative, with the banks and I've lost all my credit rating, but it's not because of me; it's because of him!'

That woman spoke about how she has struggled in that situation for more than ten years. She was not alone; other women also recalled living under similar ongoing stressful conditions for years. They indicated that they were left powerless and stressed

trying to deal with letters coming from banks informing them that they were going to be evicted. One woman said:

'I was threatened with re-possession about five or six times, like there was two or three Christmases ago that me and the kids didn't have a Christmas dinner, 'cos they got all my wages in the bank and now I just couldn't do it anymore and I got involved with MABS [Money Advice and Budgeting Service] and MABS just said, give them what you can afford which, em, I was at that stage I was coming out with about €350 and they wanted €200 a week and I was giving it for years.'

Women in the study described how they were left with little to live on after paying their mortgages. They were also left with the responsibility for the debts created during the relationship with their ex-partner. In this research the women were the parent who had the main responsibility for the children. They indicated that they had to be resourceful to cope with the situation in which they found themselves during the break-up phase of the relationship. One woman said:

'I own the mortgage on my house rather than 50% of the mortgage on my house, I had to find the way to earn the same sort of money but to be there for a child.'

Women spoke about how they had to find new ways of earning enough to keep paying their mortgages while taking care of their children. Women pointed out the difficulty of getting affordable housing and paying rent. One woman recalled:

'I got a place [to rent] through a friend after the first place I got was going to be sold, but it had been really hard paying [the] rent without maintenance, friends and family helped when I hadn't enough money.'

That woman described her ex-partner's attempts to have her cut off welfare by telling them that she wouldn't take money from him. She recalled how lucky she was because she got the support from a female community welfare officer. This woman's recollection is consistent with the literature which indicates that women's expectations of accessing support from systems is low, especially that of the court and police, and that they speak of being lucky to have met a good guy (Saxton et al., 2021).

The women pointed out that no account was taken of them carrying sole financial, and emotional responsibility for the children following the breakup of the abusive relationship. They recalled what they described as the unfairness of the legal system. They indicated that it did not consider coercive control in the breakdown of the marriage, made no allowance for their partners not meeting court orders for child maintenance, or acknowledged that they had kept up maintenance on the home, maybe for years, that it didn't take these issues into account when the proceeds of the house, their home, was divided up 50:50. One woman said:

'He never paid a penny in maintenance. He never bought a copybook, he never bought a tin of paint. He didn't give money towards coal to heat the house. That's what I'd done, and I found that so unfair.'

The themes demonstrate the women's recollections of the difficulty they experienced keeping a roof over their children's heads, when they were trying to break free from the perpetrators of coercive control. They recalled the support that they got from friends, charitable organisations and some community welfare officers. In the literature there is much evidence that homelessness is a significant issue for women when they leave coercive control relationships (Gilroy et al., 2016). Women demonstrated their personal agency at a time when they were suffering extreme stress, fear trauma and exhaustion (Goodman et al., 2003; Lloyd et al., 2009; Riddle et al., 2009; Parker & Gielen, 2014; Sanders, 2015). They demonstrated this by finding work that enabled them to keep a roof over their heads while taking care of their children, despite all the barriers they encountered after leaving coercive control (Tarshis, 2022). They endured extreme stress and anxiety as they brokered with banks to prevent either the sale or repossession of their homes while servicing debts they carried as a result of the coercive control relationship (Ramsay et al., 2019). At the same time perpetrators refused to comply with the banks in relation to their mortgages thereby undermining the victims' credit ratings for what the macro-level financial professionals described as the women's non-compliance.

The women did all this in a cultural environment where they encountered patriarchal, paternalistic, gender stereotyping and blaming discourse from professionals, from financial institutions, social welfare and especially the legal profession, who lack

awareness and empathy to the plight of victims seeking to escape from coercive control and who inhabited the elite male-dominated macro level from whom they sought support (Ramsay et al., 2019; Delgado-Alvarez & Sanchez-Prada, 2021). Furthermore, those same professionals empowered the perpetrators of coercive control to continue to maintain power and control over their victims through the judicial and financial systems. Women indicated that the systems that were supposed to protect them, instead allowed perpetrators to continue to manipulate, instil fear, and use coercive control over their victims.

Those women's experiences are acknowledged in the literature pertaining to the multifaceted range of negative experiences that women encounter from the systems that they turn to, in addition to the perpetrators of coercive control in post-separation abuse (Spearman et al., 2022). These encounters impact on women as those systems support their ex-partners' continued coercive control over their lives (Bruton & Tyson, 2018). Furthermore, the women's recollections include the systemic abuse that they experience within the social and cultural environments and bias that they encountered from court and other agencies that they turn to for support (Hay et al., 2021; Tegler et al., 2022). All of which supports the women's descriptions, and the literature's acknowledgement, that leaving coercive control perpetrators can be a very difficult and dangerous time for women (Herman, 2015).

The ongoing struggle with coercive control on work and career

As it happened all the women in this study were mothers and all of them had custody, with shared access, of their children. The ongoing pressures of raising their children post-coercive control while trying to manage work and careers generated specific issues for the women in this study. The impacts on women's careers stemmed from several areas in their lives that all emanated from and were interwoven with the behaviour and consequences of coercive control and its impacts as they tried to attain freedom from the perpetrators. Furthermore, the women at that time continued to struggle with physical and psychological consequences that coercive control had on them both while they were in the relationship and the effects that those consequences had on their lives after those relationships.

Needing a weekly wage to survive

While the women in the study reflected on the effects of the financial abuse that they experienced during the separation process, it emerged that its impact went much further. Two of the women in this study described how they had to work for a weekly wage to pay their bills. Consequently, they could not take up opportunities for career advancement. One woman recalled that:

'I have won competitions for my work and I; my catwalk work went to a competition in college and I came second but I actually think I came first 'cos the wrong name was put out on the wrong person and I just said "there's a reason for that"' I wouldn't have been able to take up a course in college I needed to have a weekly wage so that I could pay my bills'.

While this woman had been awarded maintenance by the courts, her ex-partner put money into a bank account on the day she received the maintenance order but she never got anything after that single payment. Women noted that they had no savings, they had been living for years 'hand to mouth', so after they left the coercive control relationship their lives were a weekly struggle of juggling bills and trying to pay for food. Another woman who had said earlier that she was a top employee in her firm, called upon for special assignments, couldn't take advantage of her status because:

'I couldn't afford to do what some of them, like to go back to college and learn to do, like designing and pattern cutting and all, I never had the money to save, I was barely able to feed the kids.'

These women's financial conditions prevented them from taking advantage of career advancement and ultimately better incomes.

Time out of workforce because of coercive control

Women's capacity to maintain participation in the workforce is significantly undermined by coercive control (Stark, 2009; Tarshis, 2022). Breaks in employment history, whether through being forced to leave jobs or not being able to maintain jobs as a direct consequence of coercive control, or being forced to work in the black economy, or as unpaid, and undocumented, labour in a family business, results in

significant difficulties for women acquiring well-paid employment after they leave those relationships (Staggs & Riger, 2005; Swanberg & Logan, 2005; Showalter, 2016). Consequently, some women in this study found that their skills were either out of date, or that cultural shifts in the business world had rendered their jobs obsolete, when they tried to return to the workplace. Where they got opportunities to return to education and training women found that that they got part-time jobs, at basic rates of pay, because they did not have relevant work experience. One woman who had worked in administration in a family business recalled:

'When I left [the marriage] I felt that I was unemployable, that I couldn't do anything. So, when I left, I had to start from scratch in my mid-forties, I was lucky I met some good people, community welfare, one woman in particular who believed in me even though I didn't in myself. Anyway, that meant that I had no [work] history, I had to go out as someone way older than everyone else and get myself employed. I work for ten years part-time in a variety of jobs all at the same time, basic rates.'

Women who had been out of the workforce because of living with coercive control found it difficult to advance when they returned, despite working hard to address their skills deficits.

Impact of coercive control on self-confidence relating to career advancement.

Women described how the impact coercive control had on their self-esteem also created another barrier on their capacity to advance their careers after they left the perpetrator of the abuse. One woman said:

'I let myself down at interviews, I find I kind of get panicky, I just feel when I go for an interview, I feel like I'm being judged, and I feel like I lose my confidence and that's all to do with the way I was feeling when I left my marriage.'

The impact of coercive control strikes at the core of the victim's sense of self, and its impact can have long-term consequences on the victims (Stark 2007). When women leave those environments, it can continue to impact across all aspects of their lives. In this study it was evident that this had a significant impact on their careers. Women

said that they did not feel that they were good enough, or able, to go forward for advancement in their jobs because of the long-term impacts of coercive control on their sense of self.

Exhaustion, lack of support, coping with everything and a career

For other women it was the exhaustion of coping with everything on their own that interfered with their capacity to maintain their careers. One woman recalled:

'I had no energy to advance my career or anything like that, do further studies or that kind of thing; I probably retired very early, and I left on, ah, medical grounds, it was an accumulation of years of trauma.'

All of the women commented on how the lack of support impacted on their careers. They spoke about how having the sole responsibility of children, home and career, was exhausting. One woman said that:

'I always used to say that if I had a wife, I could have done much better because I, I suppose I had total responsibility for family and I had no one to support me in my career and I think I just got exhausted.'

Women spoke about the impact of the stress and exhaustion of having to juggle work and household bills, completely alone, and how that interfered with their career progression.

Childcare responsibilities' impact on work and careers

The women in this study maintained the main responsibility for their children's day-to-day lives. Consequently, childcare played a significant role in the work that they were able to do after they separated, and subsequently, it impacted on their careers. One woman recalled:

'I had to become a Jack-of-all-Trades and master of none, em, from going door-to-door selling, to teaching, to going back to college during the recession'

because I would have been covered for back to education and all that as opposed to being the business development manager of a big financial institution where I had my company car and you know, my own apartment or house or whatever, I had to find the way to earn the same sort of money but also to be there for a child, to be there for her physical and emotional needs because this impacted her greatly.'

Leaving the coercive control relationships did not end the problems for women, rather it presented them with a whole new range of difficulties. Women pointed out how they were left with the full responsibility for raising their children while many of them were left holding responsibility for significant debts when their relationship with the perpetrator ended. For some of the women involved in this study the abuse had already impacted on their work histories by the time they left their partner, so they continued to live on the poverty line, unable to take advantage of education and training to improve their career prospects and consequently their income (Shoener, 2016). They recalled that they were stressed out and exhausted because of having complete responsibility for the financial, physical and emotional consequences of raising their family, maintaining their home, and holding down a job. Women described how they frequently had to deal with solicitors and to return to court for issues relating to their separation agreements, and the difficulties all this caused for them in maintaining their jobs, never mind finding the time, finances, and the energy to focus on career advancement (Adams et al., 2012). All of this resulted in women not being able to take advantage of career development opportunities after leaving the relationships.

Some women pointed out that coercive control impacted on them emotionally while with and after they left their abusers and that it affected their ability to access job promotions or forced them into early retirement for stress-related illnesses. The women's recollections demonstrate their experiences of struggling in the public domain to access support from the social and legal systems that appeared to be available to them. Their reflections demonstrate the lonely exhausting journey that women continue to have during their struggle to leave coercive control and the lack of resources available to support them to achieve their potential after leaving. Some of the women indicated that their lives were consumed by the ongoing struggle for survival, legally, financially and psychologically, that they had to be 'father and mother' to their children. The social and cultural hegemony towards gender roles that prevail across the social and legal spectrum allows some men an a la carte approach

to fatherhood, such as enjoying access with their children without paying court-mandated maintenance, and that this results in long-term consequences on women at a significant cost to their careers. These descriptions concur with the literature on the long-term impact of coercive control on women's careers (Staggs & Riger, 2005; Swanberg & Logan, 2005; Adams et al., 2012; Showalter, 2016). However, for these women caring for their children held another dimension where they encountered ongoing psychological difficulties. It involved minding their children when they were not with them, always thinking ahead and trying to keep their children safe from the distress and upsets that they encountered from their fathers.

Protecting the children during the break-up phase

After the coercive control relationship ended all the children who were not independent lived with their mothers. Women indicated that protecting their children from the emotional and financial abuse of their ex-partners was a constant and regular source of stress in their lives. Women recalled the stress that they experienced seeing and managing their children's distress when their ex-partners gave up contacting their children. One woman said:

'He eventually stopped seeing the kids for a few years. [Daughter] didn't know why her da wasn't coming to see her or wasn't calling her on the phone. And she's crying nearly every night on the bed asking me "Mammy why doesn't me daddy love me" and I'd tell her "he does, he's going through some bad times", and I said "he will call you".'

Women said that it was very difficult seeing their children being so distressed. They recalled how they had risen above their own pain to ensure that their children were able to cope. They spoke about doing everything they could to look after their children without their ex-partners' support while they continued to foster their children's relationship with their fathers. One woman said:

'I did everything on my own. Literally everything on my own, I was father and mother to them [her three children].'

Despite this she ensured that the children were ready and available to spend time with their father whenever he did turn up to access visits. Mothers' support of fathers' relationship with their children was not reciprocated by the fathers according to the women in the study. Their experience was that the abuse continued to be perpetrated, through their children, after their separation. One woman said:

'[where there are kids] there can't be a clean break, you know, and he can still hurt me by hurting my kids, every time he talks to them, he says something that's inappropriate or hostile and hurts them. And then it hurts me.'

Women pointed to how their children were impacted by their ex-partners' abuse of them, and how vicariously that continued to hurt them. They indicated that their children were angry as a result of their ex-partners' abuse, their broken promises and their failure to show up for access. They recalled that they, as mothers, were frequently the target of that anger from their children. Women were placed in the role of trying to mediate those behaviours. One woman recalled:

'I think the eldest child was affected because he used to tell her, don't trust that woman, she's crazy and em, she'll ask you to do crazy things and stuff like that, for a long time during her teenage years the eldest girl was quite antagonistic, eventually, she grew through it.'

Women said how difficult it was managing the consequences of the separation, and all the ancillary behaviours that the coercive control perpetrators had on children's behaviour, without support. They indicated that being a sole parent took its toll on them physically and emotionally. One mother recalled:

'I suppose when the kids were growing up there was a lot of anxiety in relation to them as teenagers and I was totally responsible, I was exhausted and it was like, every time I went to bed, somebody would wake me and there were a lot of incidents with hospital and guards and all the rest of it and I was solely in charge and that was terrifying, and also 'cos one of my kids had [health] problems and I was totally responsible and that was exhausting, I had to stay out of work and, balance work and minding him.'

Women experienced ongoing exhaustion that impacted across their whole lives while trying to take care of their children alone. They pointed out that this included having to ensure that their children were cared for emotionally and financially when their ex-partners were still involved with the children. Some mothers recalled that their

children said that their fathers had no food in the fridge when they went on sleepover access. One woman discussed the experiences of trying to protect her child when she met her dad or went to stay with her dad for weekend access:

'He's supposed to come at Four; he wouldn't come until half-four or five o'clock, and she's standing waiting, waiting. And she'd come back [after access visit] and she'd tell me she's starving that eh, she hadn't got anything to eat while she was out. He'd take her on a Friday at around the five or six o'clock mark and she'd be home Sunday at twelve o'clock, and that was her time with her da. And I had to make sure she had money to buy her food, he wouldn't buy food.'

Women noted that they were constantly in heightened states of anxiety, that having to manage their children's everyday needs when they were with them was extremely stressful and exhausting, but that it was brought to another dimension when they were on access with their fathers. One woman remembered the worry, fears and stress of trying to protect her child from the consequences of access. She said:

'My daughter would come back with loads of issues and I was not going to allow the access over the weekend. In order to do that I was not going to break court orders and I prepared the papers and I was going in to represent myself, I rang my sister [about losing the documents] absolutely hysterical, I could feel the pressure cooker building and eventually I found the documents that had slid off my photocopier over the back of the radiator and so I was just like a pressure cooker about to blow.'

Women described the huge pressure of the responsibility of taking care of their children after separation from their abusive ex-partners. They spoke about the stress of always trying to be one step ahead of a problem. They indicated that their children were left unfed and hungry while on access visits and that they had to make sure that their children had money for food. Women pointed out that protecting their children from the emotional and financial abuse of their ex-partners was a constant, terrifying, exhausting and regular source of stress in their lives. They were enduring this on top of the cumulative effects of the years of physical, psychological and emotional abuse and the considerable loss of social supports in their lives (Courtois, 2004; Dutton et al., 2006; Cogle et al., 2008; Cogle et al., 2009; Moulding et al., 2021).

The research indicates that women who are mothers are at significantly greater risk when it comes to separation violence than women without children in the context of

ongoing abuse and harassment (Davies et al., 2009; Pomicino et al., 2019) and that their capacity to move forward with their lives is impeded by their ex-partners' ongoing attempts to maintain control over their lives (Ford-Gilboa et al., 2009). While research indicated that risk may be compounded by the age and gender of the children and by issues including social, cultural, educational, and financial factors (Sousa et al., 2021) the strongest factor that emerged from the women within this study were issues pertaining to maintenance and access. The women's recollections were in line with the literature, which indicates that court orders for maintenance meant nothing to their ex-partners and similarly in the context of access, where they indicated that the needs of the children were not taken into consideration when such court orders were made (Gezinski et al., 2021) and how the distress that they saw their children endure had significant emotional and psychological impact on their health.

Women spoke about how they had to help their children cope with the distress they experienced when their fathers gave up contacting them. They discussed how they had tried to protect their children's emotional well-being by making excuses to the children for their ex-partner's behaviour. Their experiences demonstrate a pattern of how the hegemonic patriarchal dominant discourse can override the evidence relating to women's legitimate fears and the trauma that attending court involves, that the system can render them voiceless and that it can be used by perpetrators to further victimise the women and hurt their children, all of which are echoed in the literature (Saunders, 2015; Gutowski & Goodman, 2020; Sheehy & Boyd, 2020). Furthermore, when professionals generally, and court professionals in particular, are responding from the hegemonic discourse without specific knowledge about coercive control it seriously impacts women's capacity to access justice for themselves and their children through the court system. At the same time, it can facilitate the revictimization of victims of abuse, by presenting opportunities for perpetrators to reassert coercive control (Beeman 2022). The reflections of women in this study indicate that this is particularly the case when they approached those systems for help, it is why victims say that they have to pick their battles, as seen in Sweden since the 2016 reforms, where the burden has been placed back on victims in the private space to deal with maintenance issues without clear definitions about coercive control (Fernqvist & S  pulchre, 2022), as can be seen in the literature especially in relation to the police and the court system (Crow & Murray, 2015). The women's recollections of their experiences correspond with the

research about the costs, mental, physical and financial, and exhaustion generated by the hours spent in court trying to address issues of child access and child maintenance and ultimately giving up on the court systems that were supposed to be available to support them through what society, and the culture has defined as their private problems (Tegler et al., 2022).

Women in this study described how they lived with ongoing stress and anxiety having to cope without financial, emotional and physical support while attending to all the regular needs of their children. They indicated that they were the parent who attended the school meetings, hospitals and they were the only parent available in the middle of the night when things went wrong. They spoke of the pressure of all of this on top of trying to maintain their careers to make enough money to pay the bills and keep a roof over their heads. They were doing this after years of the physical, psychological, sexual, and financial abuse of coercive control that they indicated had impacted on their physical and mental health. These findings are reflected in the literature pertaining to the ongoing impact coercive control has on victims, including that of CPTSD (Cloitre, 2020; Dokkedahl et al., 2021).

The ongoing toll on health of trying to get free.

Women in this study recalled how breaking up with their coercive control ex-partners compounded the toll that living with them had taken on their health. One woman recalled how that impacted on her within months of her getting out of the relationship:

'It was all the stress and the worry. I remember the first year I was away from him, that was my first Christmas with the three children on my own, I had everything sorted and Christmas eve I ended up in hospital with pneumonia. I had had shingles six weeks previous to that, so yeah, my physical body wasn't able for it.'

This woman indicated that this was the beginning of physical disorders that continued to be an aspect of her life for many years. Women recalled how the separation had a psychological impact on them. One woman recalled that she went to her GP who prescribed antidepressants:

'...after the marriage had ended, I slept all day, like I had no life, well I was on [antidepressants], well the first time I was suffering from a very bad bout of depression, I think I was out of work for about a year.'

Women spoke about the struggle of coming off antidepressants and then returning to their GPs to be prescribed them again and how for some of them that struggle continued for years. One woman said:

'I went on antidepressant when I was married and I've been on it ever since and the doctor does say "do you want to try coming off of it". I say "No, I'm doing fine the way I am".'

The psychological impact of the relationships was ongoing for the women in this study. Women recollected them as taking a significant toll on their lives. One woman recalled how she thought she would never escape:

'I just felt that I would never be free, no matter what I did he seemed always able to come after me for something else, I wished I could go asleep and never wake up.'

Women spoke about the impact that having absolute responsibility for their children's welfare had on them. They recalled the stress and the exhaustion that had on them on top of trying to maintain their careers. They described their experiences of physical exhaustion, terror and stress during the break-up phase of their relationships. One woman said:

'When the kids were growing up there was a lot of anxiety in relation to them as teenagers and I was totally responsible.'

The narratives of the women in this study are borne out in the literature that demonstrates that women suffer significant long-term health issues because of living with coercive control (Coker, 2000; Plichta, 2004; Coker et al., 2011; Karakut et al., 2017; WHO, 2021). This research shows a pattern of significant health impacts during the break-up phase of their relationships from physical to psychological to emotional abuse as they tried to break free from their abusive partners. They described how that emerged from the beginning of their journey of attempting to leave their abusive partners, to their efforts in trying to get support from professionals in the macro level which, they recalled, left them in a constant state of exhaustion, stress and, at times,

terror. Those experiences of ongoing stress, fear, and terror following years of abuse within the coercive control relationships are linked in the literature to the risk of victims developing PTSD (Herman, 2015) and CPTSD (Dokkedahl et al., 2021).

The women in the study recalled that being ‘mother and father’ to their children resulted in them being on call 24 hours a day, every day, and how the accumulation of all of their experiences, including a state of constant exhaustion, impacted negatively on their psychological well-being.

Suicide thoughts during the break-up phase

All the women in this study indicated that suicide crossed their minds at some time during the separation process. The women endured the struggle to get out of the relationship following years of stress, exhaustion, and abuse within coercive control relationships. One of the women recalled one of the times she considered suicide was when she failed to get a Judicial Separation from her abusive and alcoholic ex-partner, the judge would not grant her a separation and she was forced to go back to live with him. She said:

‘...the Judge said he couldn’t give an award, a separation at that time and eh, so I had to go back and live with him. And I remember coming home from court and that night he raped me and eh that was really the lowest point I think, there was nothing, I felt totally helpless, there was nothing I could do, there had been some case that somebody had set fire to themselves, outside someplace like that [the court], and I thought that I would do that, I would burn.’

Although this woman showed that the abuse, she experienced was physical, psychological, and financial, and that it impacted on her children, her experience demonstrates how the court system’s lack of awareness of coercive control failed her, and her children, and thereby left her open for further abuse. Women went to their GP when they were experiencing suicidal thoughts. One woman recalled her GP prescribing antidepressants:

‘[on antidepressants] I had no feelings, never mind suicidal feelings, I had nothing at all, she just said to me about depression, she asked, was there depression in your family [she indicated that the GP did not ask her about her

personal history] I think I might have told her at that stage 'cos I was like crying for help.'

Women said that doctors did not ask about what they were experiencing in their lives. Some women said that they would not have told their doctors about the abuse at that point had they asked them about it. They described how they felt completely exhausted and couldn't see the point of going on with their lives. One woman commented:

'Since the relationship I have thought about suicide, not self-harm, or maybe they are all the same, eh, it has been there at times. Sometimes I have been low, so low that I felt that all the work was pointless, and I did think of ending [it].'

Women recalled that sometimes when they were unwell, they went to bed hoping that whatever was wrong would just let them die so that they didn't have to face another day. Women indicated that the pressure of trying to protect their children from their father's abusive behaviour on top of all the other responsibilities of being single parents was exhausting. One woman described one such occasion:

'...the Liffey was looking black and velvety like Alice in Wonderland going "come to me" and it was just the most bizarre thing, instead of looking cold and, it was velvet, it was peace, my head was, the pain in my head, the, the fish going around in the, trying to look after this child and the, my finances and to keep going and everything and it was calling me in like a welcoming, warm, duveted bed, it was just, the electric blanket, everything was there, like Alice in Wonderland, touch the spindle, [then] something clicked and I was, oh my God.'

Women pointed out that suicide ideation was an ongoing part of their lives during the break-up phase of their relationship with their ex-partners. They pointed out that the experiences that they were going through during this phase were very stressful and sometimes completely overwhelming. Women said that sometimes it was difficult to see the point of trying to continue in the face of so many difficulties. They recalled their sense of being totally alone with those responsibilities. They described how they experienced the discourse that blamed them for the violence in the relationship and how that experience triggered their pain from the coercive control relationship (Berns, 2017; Aujla, 2020; Khaw et al., 2021; Voth Schrag et al., 2021). The women's recollections demonstrate the pattern of behaviours due to, in their estimation, a lack

of awareness of coercive control within professionals across the social and cultural macro systems which rendered those systems frequently unavailable, or unhelpful, in their plight against their abusers or for accessing the support they needed to recover their lives after leaving the coercive control perpetrators. They all indicate that at times they experienced an overwhelming feeling of not being able to continue. Feelings, including powerlessness, hopelessness and helplessness that are linked with coercive control, are noted in the literature with suicide ideation and PTSD (Herman, 1992; Cogle et al., 2009; Potter et al., 2021). However, the personal agency of the women in the study is demonstrated in their capacity to continue minding their children physically, psychologically and financially despite all the difficulties they were personally encountering (Goodman et al., 2003; Lloyd et al., 2009; Riddle et al., 2009; Parker & Gielen, 2014; Sanders, 2015).

Conclusion

All the women's recollections concur with the literature on coercive control and breaking free from coercive control. They recalled that their separation process was a difficult, long and drawn-out affair. The experiences that women in this study spoke about aligns with the literature that indicates leaving an abusive partner can be a very difficult and sometimes dangerous time. These women spoke of the difficulties trying to keep a roof over their own and their children's heads during the break-up phase of their relationships. They pointed out how their abusive ex-partners did not work with them to keep their homes and the long-term impact their coercive control ex-partners' behaviour had on their credit rating. They showed that they experienced extreme difficulties paying off their mortgages while attempting to meet their children's most basic needs. Women in the research spoke about how those difficulties were exacerbated in some cases with further physical, psychological and emotional violence, rape and stalking by the abusive ex-partners. They indicated how this impacted on their mental health, including thoughts about suicide while they were going through those difficult times. They demonstrated that the legal system did not take into consideration the responsibilities that women continued to have for their children when making decisions about the sale of the family home and the division of the proceeds. They recalled that the ending period of the relationship was traumatic

and exhausting and how it significantly impacted on their physical, psychological, emotional and mental health. They spoke about the difficulties that they experienced taking care of their children alone and about the many strategies they employed when trying to protect their children from their ex-partners' abuse and neglect. The patterns across the study of the women's experiences corresponds with the literature pertaining to the significant difficulties women experience at the macro level when they are particularly vulnerable from the cumulative experiences on their health from their years of living with coercive control. The next chapter focuses on the women's perceptions of the impact of coercive control on their current lives.

Chapter 8 Long-Term Impacts: ten years or more after the end of a coercive control relationship

Introduction

This chapter explores the reflections of the women in this study of the long-term effects of coercive control more than ten years after they left the relationships. It explores their current narratives of their lives post coercive control and their understanding of the impact that it has had on them. It includes their perceptions of their physical, psychological, emotional and financial wellbeing that the experience of coercive control has had on their lives. Furthermore, it opens up the opportunity for the women to explore their experiences, and their perceptions of those experiences, of the impact their interactions at the macro level of society, including the justice, financial, and medical systems have had on their lives.

Struggles to keep their homes

At the time the interviews were carried out women in this study were still fighting to keep a roof over their, and their children's, heads. They talked about the ongoing financial control that they continued to experience from the perpetrators of coercive control and its impact on the interactions they were having with banks and other financial institutions. One woman noted that she is still living in that situation ten years after she left her partner, she said:

'I've had to fight the banks for the last ten years, because of both the maintenance, and the mortgage, he's controlling the whole situation. Because the banks won't negotiate with me as an individual, so I'm deemed as, em, what's it called, uncooperative with the banks, and I've lost all my credit rating, but it's not because of me it's because of him.'

This woman described this constant struggle as exhausting and stressful on top of the normal struggles to manage maintaining her job and minding her children. Similarly, another woman who has been fighting to keep her home for years pointed to the struggle she has been enduring to put food on the table while trying to pay a mortgage

to keep her home. She pointed out that she had re-mortgaged the family home, her ex-partner took the money and when she made enquiries, she was informed by a solicitor that she had given him a gift of that money. When he left, he was able to afford to buy a property outright, while she had the re-mortgage debt on a home that would have otherwise been almost mortgage clear. She said:

'I was threatened with re-possession about five or six times. I got involved with MABS and MABS just said, "give them what you can afford", which, I was at that stage I was coming out with about €350, and they wanted €200 a week, and I was giving it for years, and then the girl in MABS said "cut it down to about €150", and that's what I'm giving them now, and em, I don't even understand the scheme that I'm involved in, but, but I've already signed the deeds over'.

This woman stated that MABS had been very supportive in her journey towards accessing the security of her home. However, she said that the process has been extremely slow and stressful as it's been going on for a few years and that the process has involved many stops and starts. Currently she is still trying to succeed with the housing agency, whereby she will get an opportunity to join a buy to rent scheme, and hopefully, secure her home for the next 30 years. A significant aspect of the problem that she is encountering is that her ex-partner will not sign the documents to transfer the home to the housing agency, even though it's in negative equity. She stated that the bank holding the mortgage is closing its Irish base, and that she is experiencing extreme anxiety, sleeplessness, exhaustion and she is very fearful about the prospect of becoming homeless as a consequence of his continuing abusive controlling behaviour more than ten years since the relationship ended.

Another woman pointed out that she had accumulated significant debt because her ex-partner refused to pay maintenance for their daughter. She said that she was forced to take low-paid work in order to have a weekly income to keep a roof over their heads in order to survive, look after her home, and take care of her child. Yet, she pointed out that she had to repay those debts from the 50% she received from the sale of the family home, all the while he owned his home outright. After selling her home she was forced to live in private rental accommodation, she said:

'My money was going down, and going down. And I applied for housing, and then I applied to Alone [Housing agency] and I was housed by Alone four years ago. I had one month's rent left, I moved into Alone [house] with a month's rent and the deposit of a month's rent four years ago.'

Another woman said that she has spent years coming up with innovative ways to make money to pay her mortgage, watching how she spent every euro, while taking care of her daughter. This woman spoke about how she copes with her financial difficulties:

'I would be very resourceful and I would find a way, and because I don't have huge financial needs, I'm not a handbags and shoes lady, I have a great eye for a deal, em, as my friends say I can turn one euro into the spending power of five.'

All of the women described how they found themselves always watching every penny. They said that they were constantly afraid that something would go wrong with the house, or family, and they would be forced to go further into debt, or actually find themselves homeless. They also stated that, because of the continuing coercive control of their ex-partners in their responses to the banks, the fear, stress and anxiety had been further impacted as they had lost their credit rating. Consequently, they said that they found themselves unable to access regular sources of finance and regularly depended on the good will of friends and family. Some of the women revealed that they had pawned or sold their wedding or engagement rings, or that they had sold bags of their clothes by weight, getting very little in either case, just to make ends meet.

Women said that they experienced the legal system as unfair in the way that it treated them after they left the coercive control perpetrators. They described how the legal system supported the perpetrators in their attempts to force them to leave their family home that they had put everything into maintaining, both financially and emotionally, in order to keep their children safe and secure. They spoke about the impact of the no-fault divorce that they encountered which resulted in a 50%-50% division of the proceeds from the sale of the family home, without consideration of the coercive control that was perpetrated against them which resulted in the breakdown of the marriage. This, despite the fact that maintenance orders had been ignored, and women had been left with the absolute responsibility for the physical, financial, and emotional

care of their children. One woman pointed out how unfair it was, after all she had given, as well as the fact that he owned another home:

'He never paid a penny in maintenance. He never bought a copybook; he never bought a tin of paint. He didn't give money towards coal to heat the house. That's what I'd done and I found that so unfair.'

The implications of the patterns described above clearly demonstrate that the women in this study continue to live with coercive control and its impacts many years after leaving the perpetrators. The women clearly show that they are struggling to keep a roof over their heads for more than ten years after leaving the relationship. Their experiences coincide with the literature that demonstrates a strong correlation between housing instability, work-related issues and health (Pavao et al., 2007; Rollins et al., 2012). Furthermore, their experiences correspond with the research which shows that women experience long-term financial impacts as a consequence of coercive control (Showalter, 2016; Breiding et al., 2017; Eriksson & Ulmestig, 2017; Slabbert, 2017). Women assert that negotiating with the legal and financial institutions was extremely stressful and traumatic (Cerulli et al., 2012; Laing, 2017). They said that they found themselves with a poor credit history as a consequence of the coercive control, some women discovered that they had no credit history because, unbeknown to them, all the finances during the abusive relationships were in the perpetrator's name. The consequences of which can have significant impact on the survivors' capacity to access mortgages or rental properties when they are struggling to rebuild their lives after coercive control (Weissman 2023). Women said that their struggles were compounded by their difficulties of trying to keep banks from foreclosing on their homes while trying to keep their children physically and emotionally safe.

Homelessness, and the fear of becoming homeless, is a significant factor in the ongoing lives of survivors of coercive control, research indicates that victims are four times as likely to be homeless as women who are not victims of coercive control (Adams et al., 2021). Furthermore, it can be a lead in to a speedy downward spiral in the victims' lives that could be successfully alleviated in the long-term through the use of short-term flexible grants (Sullivan et al., 2019). Homelessness is also linked with mental health issues including depression and the development of PTSD among victims of coercive control, and it is linked with their children's wellbeing (Rollins et

al., 2012; Gilroy et al., 2016). As a consequence of poverty, victims of coercive control may find themselves forced to access money from pawnbrokers or private money lenders at very expensive rates because the regular financial institutions are no longer available to them, thereby rendering them in more dire circumstances. The impacts of the use of these lenders has yet to receive attention in the literature pertaining to victims of coercive control (Johnson et al., 2022).

Women's lives were shaped and structured in the private sphere by their lives within the micro level, the separated domestic sphere of childrearing, which Fraser (1985) indicated was the lynchpin of women's subordination. When they left that private sphere, they encountered experiences that were reinforced by the macro level where their lifeworlds were 'colonized' by the differentiation between male and female roles. On leaving the micro level women said that they carried the consequences of the physical, psychological, financial and sexual violence and the fear, shame and self-blame of coercive control. They stated that the consequences of those experiences were reinforced within the macro level by the hegemonic, patriarchal discourse they encountered within the elite structures who they approached for support to address coercive control. The women pointed to the protracted difficulties they experienced with financial professionals such as mortgage providers or banks. They noted that as a consequence of the hegemony among the professional elite that they were left to engage, or try to engage, with their ex-partners. This forced women into situations where they continued to spend years trying to engage with perpetrators who continued to use coercive control through the power handed to them by those professional institutions. The descriptions of the women in this study of ongoing coercive control, years after separating from the perpetrators, is one that receives little attention in the literature (Tutty et al., 2023). Their experiences within the legal and financial institutions correspond with the literature in relation to their struggles to recover after coercive control relationships (Bryngersdottir & Halldorsdottir, 2022)

Some of the women in this study recalled how these situations gave rise to exhaustion, stress, fear, terror and the experience of re-traumatisation by their ex-partners and also by those institutions. They reflected on their experience of the injustice of the system that awarded the perpetrator fifty percent of the resources of the marriage on divorce despite years of ongoing abuse including financial, physical, psychological, sexual

and ongoing coercive control. Their reflections are inspired by their personal experiences of the social injustice which the hegemonic patriarchal discourse that continues to maintain coercive control as private problems, not as public issues. They reflected on their experience of the injustice of the no-fault divorce system in Ireland which generally results in 50-50 sharing of resources. One woman pointed out that she actually accepted a 60-40 split against her. She said that he started at 100% for him and that she could not endure the harassment, which included the tyres on her car being slashed, so eventually she decided that she had to walk away and keep herself safe.

The women pointed to a range of situations where the law pertaining to coercive control, including the breaking or non-compliance with safety orders, maintenance and access orders, are carried out by perpetrators without fear of real consequences. It demonstrates how hegemonic attitude aligns with the perpetrators of coercive control and thereby generates apathy and indifference towards the subordinated in their struggle against it. Furthermore, it shows that no account is taken of the lifeworld of the women who expressed their devastating struggle against that power, or how it empowers the perpetrators, and the long-term mental, physical, and financial implications that has on victims' lives that still exists to the present day. The women indicated that the stress and exhaustion generated by these issues exacerbated their inability to give the necessary time and attention to develop their careers and that this has significantly impacted economically on their lives to the present day.

Career development and pensions

Women spoke about their difficulties advancing their careers while in the coercive control relationships and during the ten, and in some cases many more, intervening years since the relationship ended. They spoke about the exhaustion and stress of coping on their own working to prevent the banks and mortgage holders from taking their homes. They pointed out that living in this constant state of stress, fear and exhaustion impeded their ability to take career opportunities. Furthermore, they described how this was happening while they were also coping with the sole responsibility for their household needs, including those of their children, and how that forced them to think and act in the short term. Women spoke about how long-term

consequences of the coercive control impacted on their core beliefs about their capacity to succeed in the world. This resulted in some working women finding themselves in temporary or in minimum wage jobs or ultimately retired on basic state pensions. The struggle that impeded many of the women from taking career opportunities was stated simply by one of the women:

'I am still working week to week.'

Another woman, who had said earlier that she had a good career prior to her separation, stated that her career suffered as a consequence of the stress and exhaustion of the residual impacts of coercive control. She described how it unfolded:

'I lost my credit rating because of that [ex-partner not participating with banks] and I could lose my home now, I mean, it's been up for repossession because of that, but I've kept fighting, [with the result] I retired early, spent my pensions and I've had temporary jobs since.'

One woman pointed out that she has not been able to improve her work opportunities. She said that she always had to find work that she could fit around childcare, because of the lack of support from her ex-partner. Now, more than ten years after the coercive control relationship ended, she said:

'[All my] dreams were gone, I was really good at my job, I'm on minimum wage even in the job I'm in now.'

The aftermath of the struggle of living with coercive control, which left women anxious and exhausted, when combined with the impact of the abuse on their self-esteem, significantly impeded them from reaching their potential. This was described by one of the participants:

'I was lacking in energy for a lot of stuff that I would have needed to do to advance my career. Also, em, I feel that economically I was very much held back in that, em, I would have been quite interested in, maybe, developing some entrepreneurial kinda thing, you know, but I was always weary doing anything, you know, that would make me vulnerable to criticism, as a mother or as a [person], you know.'

The abuse that targeted the core sense of women impacted on the long-term earning and career opportunities of the women in this study. One woman said that:

'I was offered a job in the HSE which would have been much better paid and with a pension but I couldn't take it, I didn't even tell friends because I was so scared of going in there, I always felt that if they could really see me that they would know that I wasn't good enough so I never moved into better-earning environments. It meant that when I retired, I had to keep working because I haven't the pension other people have and I am still to this day, working that is.'

Another woman stated that she became distressed and extremely anxious when she put herself forward for promotions. She said that she decided that she couldn't put herself through that any more. She described why she made that decision and what caused it:

'I feel like I lose my confidence and that's all to do with the way I was feeling when I left my marriage and it's still there. I don't feel worthy of getting a position although I know I can do it, it just, it does affect you.'

Ultimately, some women said that the years of living within the traumatic and stressful environment of coercive control resulted in their being forced into early retirement on medical grounds after years of trauma.

As has been demonstrated by the examples above, women still carry the consequences of the coercive control abuse in their lives many years after they left the relationship. The women in this study recalled the range of ways that those consequences continue to impact throughout their work lives. They said that it severely impacted their chances of following their dreams and goals of long-term careers (Hess & Del Rosario, 2018). They described how coercive control has resulted in their living with diminished self-esteem, traumatised and exhausted, and how this impacted on their ability to cope with workplace stress. They expressed how it impacted their core sense of belief of being able to cope, how the trauma they experienced gets triggered within work environments and consequently, how coercive control and financial instability has played a significant role in the lifespan of their careers (Lantrip et al., 2015; Hing et al., 2021; MacGregor et al., 2022). The women in this study demonstrated that the impact of the abuse on their ability to reach their potential later in life was significant.

Consequently, women are enduring a lower standard of living than they would have enjoyed had they been able to continue and further their careers. These women lived with increased stress in relation to their financial survival and their ability to keep the roof over their own, and their children's, heads. They point to how these circumstances follow them into retirement as they continue to experience the financial difficulties resulting from not being able to reach their potential in the workplace, the ongoing psychological and physical health consequences and for some of the women being forced to continue to work into older age.

Mental health, antidepressants and addiction

Women in this study have described how they were living under stress for years while in the relationship with their abusive ex-partners. As already outlined, some of the women said that they had informed their doctors during or after the relationship about their mental health struggles and that they had been prescribed medication for depression. This situation has not changed for some of the women in the intervening years. One woman described it as a constant struggle:

'On and off, I was on them [antidepressants] say for three years, off them, back on then for about five. This is another battle of trying to stay off them again.'

She pointed out that she is currently struggling not to go back on antidepressants. She said that she had been diagnosed with PTSD and she said 'I think it's only starting to lift now' some 18 years since the relationship ended. Another woman described her struggle with what her doctor named as depression:

'My stress levels would be very short, I think, at the moment, for a long time. Like a silly thing would get me all upset, I could just break down and cry, the GP has said it to me a few times, you know, "could you be a little bit down?", yeah, probably depression, but you don't want to kind of accept that you've got depression, you know.'

For these women living with the stress and the resultant use of antidepressants is now a constant in their lives up to 20 years since the coercive control relationship ended. Another woman described the conversation she had with her GP, she said:

'I am on an antidepressant but I've been on that for 20 odd years, but I'm not depressed and [when] the doctor does say, "Do you want to try coming off of it", I say, "No, I'm doing fine the way I am".'

Women described how their mental health was impacted in a range of different ways. One woman talked about her current anxiety relative to her past experiences of coercive control:

'When I was in the marriage, the anxiety would have been connected with definite specifics, and there is, I suppose, traces of it now, this unconnected anxiety.'

Women spoke about living with a sense of anxiety, or being very nervous, but not having anything now in their lives that they felt was making them anxious. One woman said that it is a constant in her life:

'I guess, I'm very, I'm very nervous, I don't go to bed without making sure the alarm is on, I check all the doors. When I'm out, like, I'm always aware of everything around me, I guess, I'm, I'm always, maybe, scanning around me.'

These levels of stress, anxiety, nervousness have resulted in women still living careful, and sometimes, fearful lives. Their descriptions demonstrate how it penetrates all aspects of their lives both outside, and inside, their homes years after they have left the coercive control relationships. One woman spoke about how she is actively experiencing the pain in her present life:

'I ended up in James' Hospital a few weeks ago, em, they weren't sure, they weren't sure if it was part of a panic attack that brought it all on, I ended up with chronic pains in my chest, and em, so they did loads of tests, so they think it was a bad panic attack.'

Women spoke about the consequences of the anxiety in their lives today. One woman said how little things blow up out of proportion as a consequence of her past experiences:

'...a simple letter, this is not the end of the world and this huge anxiety and huge stuff and when I traced it back and I was able to work it back to that day and the anger and the fear; the situation that I'm dealing with at the moment

shouldn't be upsetting me as much as it is but it is actually compounded by em, emotion around similar stuff that has happened with him years ago.'

The interviews with the women for this study demonstrated that the anxiety impacts on different women in different ways. Another woman spoke of her anxiety now:

'I think in more recent years any anxiety I have has been about money.'

For that woman the stress is her constant struggle to make ends meet and she pointed out that she still lives in fear of losing the roof from over her head.

Five of the women said that they drink more alcohol now than they did previously and two said that it is social drinking. One woman noted that when she was forced to stay in a women's refuge, she saw first-hand how alcohol abuse impacted women and how that mental picture stayed with her and helped to protect her:

'Because I was so aware of it [alcoholism] and because I saw women that ended up in that place.'

She said that as a consequence of seeing how those women were struggling with addictions on top of their experience of coercive control she became very conscious of her own drinking patterns. Another woman commented that the extra wine might be good for her:

'I probably have drank more wine than I should have [when asked does it interfere with her life]... no, it might have given me more energy.'

One woman in this study still attends AA meetings and she indicated that she still feels the shame of addiction:

'I, I genuinely feel shame over why I, em, why I fell into drinking alcohol at the eh, I couldn't understand that.'

Earlier in the interview this woman said that she did not drink at all when she met and married her ex-partner. She described how he encouraged her to drink and then used her drinking to blame her for his abuse of her. She became sober within six months of

the end of the relationship, and has remained sober ever since, despite all of this she still carries the shame of her addiction.

All of the women in this study described the myriad ways they are suffering from the mental effects of having lived with coercive control (Herman, 1992; Lagdon et al., 2014; Ahmadzad-Asi et al., 2016; Costa et al., 2018). They pointed to experiencing panic attacks and symptoms consistent with generalized anxiety disorder (GAD). One woman said she has continued to suffer with panic attacks since the coercive control relationship ended and that she was recently hospitalised due to a severe panic attack. Some said that they have been prescribed antidepressants in the long term for the conditions while others spoke about their on-again, off-again struggle with prescribed antidepressants (Stene et al., 2012). Depression and GAD are consistent with the literature on the long-term consequences of coercive control (Comeau & Davies, 2012; Pickover et al., 2017). Women stated that therapeutic interventions were not proposed although research indicates it is more beneficial in relation to ongoing and long-term consequences of coercive control (Keynejad et al., 2020). Other women did not say that they are depressed, they described themselves as suffering from anxiety or worry or they indicated that they live in fearful states. While women said that they drink more alcohol now than previously, most said it was social and not a problem. However, one woman said that she still attends AA meetings and that she still feels shame for her drinking patterns. The women talked about ongoing links between coercive control, mental health issues, PTSD and alcohol use as a problem and a coping mechanism (Mason, & O'Rinn, 2014; Baily et al., 2019; Gezinski et al., 2021; Weiss et al., 2022).

The general theme that emerged in this aspect of the study was that women experienced health consequences of coercive control as a private issue. The research revealed that women were seldom asked by doctors or health care providers about the source of their distress. Thus, the general practitioners they encountered either did not receive the training to ask questions or they accepted hegemonic dominant patriarchal discourse that coercive control is a private issue. While some women stated that they would have spoken about the issue, most of the women interviewed maintained that they would not have told their doctor. The women were also socialised within the hegemony that structured coercive control as a private problem and, as a consequence

of the abuse, a problem for which they carried the shame and blame. This problem is exacerbated by the frequently-reiterated question ‘Why did she stay?’ and by the queries into women’s histories in search of the source of the coercive control perpetrated against them.

It is evident from the women’s narratives that depression and antidepressants and alcohol are among the long-term consequences of coercive control in their lives. The stress and anxiety that women point to having suffered during their relationships continue to have a range of impacts on their mental health. They spoke about their ongoing struggle of living with the fear they continue to experience as consequence of coercive control abuse.

Fear, nightmares and sleep.

Women talked about how the fear that they lived in is woven into their lives today. One woman said:

‘The fear is there; it’ll always be there. And I don’t think it’s even to be hurt, it’s to be treated the way I was treated.’

Women described how that fear is like a shadow always waiting to come out into the open in their lives. One woman described how it impacts on her current life:

‘A sound I am not expecting, I keep lights going on and off in my house on timers, but they [the timer switches] clicking on can trigger a real fear, like when he used to come home, and my heart would be pounding in my ears, that feeling is still the same now.’

Women spoke about becoming overwhelmed by fear, how fear still sprung up within them that stemmed from the past, not their current situation. One woman said that trying to survive when she left the relationship with her small child kept her from feeling the fear, she described how now years later it can come up out of nowhere and overwhelm her. She said:

'The fear, and the lack of control in what could have been, and that little two-year-old kept me out of that then, it was just, whatever chemical balance in my head it had just reached, and over the last four weeks I've been dealing with stuff, and I was able to trace back, why am I getting, why this is overwhelming.'

One woman spoke about how that fear persisted in the feeling of not being good enough to aspire to more in her relationships:

'I've had relationships since. Ah, and they suited me at the time but I was wonder, I'm wondering now if I kind of lowered my expectations, you know, and that the fear that, em, I, wasn't sure enough of myself to look for something better, you know.'

While fear is a daytime intrusion in some women's lives, nightmares interfere with many during their sleep. One woman described a recent nightmare:

'...as recently as the last two weeks I'm having nightmares with, featuring my ex-husband, I'd wake up screaming, I cannot believe what's going on here. And yes absolutely. I'd wake up screaming and he would be featuring, my sister and my daughter like they would have slept over, there maybe a couple of weeks ago, and she would have, like you had another one last night. Jesus, she said it's like you were, it starts off, whu, whu, and then it's a full-blown, absolute scream and like, they can't, they try to come in to wake me up.'

She described it as:

'You know the way when you are asleep and you can't move in your sleep and you're trying to move in your sleep. It's that sort of, powerless, powerless. Powerless is the word I would use. Like you have a weight on you and you cannot physically move.'

This woman pointed out that these nightmares are still a regular intrusion in her life and that her sister and her daughter are used to hearing her trying to scream in her sleep. Another woman said that she often wakes in real terror, thinking that the nightmare is real. She said that:

'I have nightmares a lot, I wake up during the night often thinking that I've been woken up by some noise, and remind myself that there cannot be anyone there because the alarm hasn't gone off. Sometimes, when I wake up, I lie there thinking someone is sitting on my bed, and that they are going to hurt me: I keep trying to keep my breath even so that they will think I'm asleep, so that they will get on with whatever they came in for.'

While this woman said that she wakes believing her nightmares are actually really happening other women forget the content of their nightmares but wake in the full-blown process of panic attacks. One woman described what happens to her:

'I didn't know what they were like, I didn't remember, I didn't even know, I was just waking up in the middle of the night with panic attacks. And I often had to put my head out the window and try breathing and it'd stop.'

Women spoke about not knowing the source of fear in their nightmares or about waking knowing that they were trying to escape something, or of a sense of being absolutely powerless in their nightmares. One woman talked about not knowing what she was fighting against during her nightmares:

'I do sometimes have nightmares and broken sleep and talk in my sleep; I have sometimes lashed out and hurt my hand and things like that.'

Women described how the nightmares still lead to broken sleep and how they cause exhaustion. One woman said:

'Sometimes I have nightmares, sometimes I have the weirdest dreams, sometimes where I don't know where this is all coming from. It's like I'm tired and exhausted and I go to bed and as soon as I hit that pillow it's like I just, you can nearly hear your brain. I mean my pillow has the mark of my head in it, I obviously am so tense when I'm going to bed at night, I'm so, I don't know, I just, I feel the tension.'

However, one woman in the study who said that she has sleep problems suggested that:

'I think it might be eh, hormonal cos I'm menopausal.'

Other women describe their sleep problem as a long-term problem and that they have been prescribed medication to help them with it. One such woman said:

'I twist and turn the whole night I keep thinking that's what's wrong with me 'cos I'm not getting a proper night's sleep. My sleep is broken up every night, I can't sleep, I take something to help me sleep every night, it's like my brain doesn't switch off.'

Another woman said that she has found meditations help her cope with sleeplessness:

'I have sleep problems, now lately what I'm doing now to sleep is I'm putting on an eight-hour meditation, so I drift off, I don't remember drifting off, but before that, before I started doing that I wasn't sleeping.'

Yet another woman with the same problem said she found YouTube music works for her sleeplessness:

'I still have problems with sleeping and I always wake up lots of times during the night, lots of times with panic, at the moment I'm using the sleep-relaxing music on YouTube to go to sleep and leave it on most of the night so that when I wake up, I connect with it again to sleep. It's working as all these things do for a while.'

Sleep problems and bouts of sleeplessness and broken sleep was a problem for all of the women in the study. One woman said

'I go through bouts of having difficulty sleeping, I do sometimes have nightmares and broken sleep and talk in my sleep.'

Women in this study discussed how the impact of fear during the day and nightmares at night are a constant problem for them and that they are a long-term consequence of the coercive control on their lives. They pointed out that they experienced nightmares, fear, panic attacks: hurting themselves in those nightmares by hitting their flailing arms against their beds and other bedroom furniture while fighting off the terrors in those nightmares. They spoke about how the fear that wakes them out of their sleep and the constant broken sleep that they experience result in feelings of exhaustion during the day. The women's narratives of coercive control and its consequences are associated with PTSD and CPTSD (Luxenberg et al 2001; Courtois, 2004; Cloitre et al., 2009; Van der Kolk, 2014; Herman, 2015; Ford et al., 2015; Lohr et al., 2015; Crapolicchio et al., 2020; Dokkedahl et al., 2021; Maharaj et al., 2022). The women's recollections indicate that they have been experiencing sleep deprivation as a long-term consequence of coercive control and research indicates that they are at further risk of ongoing psychological harm as they are deprived of the essential sleep required for good health (Buysse, 2014; Tempesta et al., 2015; Pires et al., 2016) and for good

brain function (Goldstein et al., 2013; Watson et al., 2015). The women described how they live in fear, day and night, and that they have difficulty switching off their brains resulting in nightmares and depression which is linked in the literature with more severe PTSD (Pigeon et al., 2011). Current research indicates that sleep deprivation is linked with fear not being appropriately processed by the brain and may therefore be linked with enduring PTSD symptoms (Feng et al., 2018).

The women in the study describe how they have continued to experience sleep deprivation ten, and in some cases many more, years after they left coercive control relationships. They stated that the trauma, fear, anxiety, stress and exhaustion that they experienced during the relationships continue to create problems to the present moment in their lives.

What is emerging from the literature is the realisation that sleep deprivation among survivors of coercive control has potentially significant long-term implications for the victims' physical and mental health and PTSD (Gallegos et al., 2021). Living with these consequences significantly depletes energy and the capacity to live quality lives. Some of the women are still experiencing those consequences while they are trying to hold down careers, care for and nourish their children and fight to keep their homes. Others are experiencing sleep deprivation while they are trying to maintain some quality of life on significantly depleted pensions as a consequence of their experiences of living with coercive control. Notwithstanding all of those experiences, women describe how the abuse has left them with still further emotional intrusions, including flashbacks, years after they have moved on from living with the perpetrators.

The past in the present, flashbacks

Women in this study discussed their current experiences of flashbacks. They spoke about how the memories of a past traumatic experiences of coercive control intrude in their lives. Women said that when the intrusive flashbacks happen, they feel as if they are taking place in the current moment. One woman said:

'Sometimes, they are probably activated by something in the present you know.'

Women in the study pointed out that they have gone to significant lengths to try and avoid the source of the intrusions in their lives. One woman described how:

'I moved out of the bedroom because of that [flashbacks], and I gave [daughter] the bedroom and I never liked that bedroom and then I got it blessed, and I, don't like watching things like eh, anything to do with domestic violence on the telly it just puts me in a real down mood. It's like as if it brings me back.'

According to these women the flashbacks can be extremely vivid. One woman said:

'They are as horrendous now as they were, I can look back and know, I can know in every inch of my house where I was beat up against or choked [she recalled an incident] I can remember, it's like you are back there, yes.'

Women described how the flashbacks can intrude at any time, that they experience the flashbacks when they were in relationships with others and when they are alone. One woman said:

'I struggle in relationships with flashbacks, when it comes, especially to intimacy [in current relationship], sometimes more than others. It just shoots me into the past.'

Women commented on how flashbacks can intrude when they are relaxing enjoying a programme on the television. One woman recalled:

'In today's world, sometimes if I see [tv programmes of violence against animals] and I have that, that image in my head, it does come back to me to see that somebody could wring a pigeon's neck, that was doing an act of kindness but he almost enjoyed it, like the child that pulls the wings off butterflies, like that sort of thing. It would come back, yes.'

Another woman spoke about how it brought her back to the feelings of never being right, the feeling of never being attractive:

'Actually last night I had [flashback] because I am back sleeping in the bedroom where I slept with my husband, and I just started thinking about him

last night, and thinking of how lonely I was in that bedroom with him, and how I felt about myself and I remember thinking, that if my hair was a different colour, if I lost weight, or if my skin was different, or if I wore this or that or the other thing, that maybe he'd find me attractive.'

One of the women said that she has tried not to let the flashbacks have the power to shift her head back in time, but that it is still there in her body:

'Yeah, I would, there'd be days I'd think about different things that would have happened through the years, I try not let it, I think I'm at a stage now regarding that, that I don't let it absorb, now it probably is inside but I'm trying not to let it.'

All of the women in this study indicated that they still experience flashbacks relating to the coercive control abuse they experienced. They recalled different ways that these intrusions happen to them. They spoke about how flashbacks could come into their lives as they were relaxing watching television and how they have been forced to change their lives to protect themselves from the intrusions. Women spoke about how horrendous flashbacks can still be in their lives. They said that they could come from nowhere, intrude on moments of intimacy and trigger real fear within them. One woman spoke about how she has struggled to prevent them and how now they impact on her body rather than on her mind. Flashbacks are strongly associated in the literature with PTSD and CPTSD as a consequence of trauma experienced over time, and by a known perpetrator, as the women in this study recalled in their relationships with the perpetrators (Luxenberg et al 2001; Courtois 2004; Cloitre et al., 2009; Cloitre et al., 2012; Van der Kolk, 2014; Herman, 2015; Courtois & Ford, 2015; Ford et al., 2015; Lohr et al., 2015; Crapolicchio et al., 2020; Dokkedahl et al., 2021; Maharaj et al., 2022). Women described how they have struggled for years with these long-term consequences while they are trying to rebuild their lives after coercive control relationships. Most of the women in this study have indicated that sometimes that struggle can become too much and how suicide sometimes has appeared to be a way out of the pain.

Suicide

Suicide ideation emerged as an ongoing struggle for some of the women in this study many years after they leave coercive control relationships. Five of the women indicated that suicidal, or as they said just wanting to sleep, thoughts still come into their minds as a result of their lives in the abusive relationships. One woman said:

'Since the relationship I have thought about suicide, it has been there at times. Sometimes I have been low, so low that I felt that all the work was pointless and I did think of ending, part of me knows that I couldn't do that to my kids. Sometimes it's hard going on even after all these years but I guess by now I am used to living that way.'

Another woman also cited her children as a factor that influences her not to take action. She said she felt it would have a terrible impact on her children:

'I said to the doctor only recently, I don't know but, in my head, I thought about it and it comes back to the same thing: I couldn't leave the kids. It would destroy them, I think if the children weren't there, I think I'd be gone, I do.'

One woman informed her doctor of her suicidal ideation and was prescribed medication. She said:

'I would have went down and explained it [suicidal thoughts] to the doctor and she put me on very strong medication and then I wasn't suicidal anymore.'

This woman pointed out over the course of the interview that she has been prescribed medication many times over the years for depression and suicidal thoughts. She also spoke about the struggle she has encountered trying to come off, and staying off medications. Another woman indicated that she coped by remembering the source of the problem, she said:

'Over the last four weeks it came [suicidal thoughts] to the surface over another issue that I am dealing with and it is actually, thank God, I was actually able to pin it back to this [past experiences], and realise that this was it.'

One woman recalled a time when she actually took some pills:

'When [son] stopped me from seeing the kids, the grandkids, that was heart-breaking, and I did take a few pills, I just wanted to sleep, [she said that her ex-partner still tries to influence her children against her] And I'm still blamed for an awful lot, not by the kids, but by the ex, 25 years later.'

As the examples above demonstrate, women continue to carry the psychological impact of coercive control years after they leave those relationships. All of the women in this study spoke about suicide ideation while five of them spoke about it as a recent, or ongoing, experience in their lives. They pointed out that suicide ideation is linked with their coercive control relationships. The women's recollections are echoed within the literature on the correlation between the suicide of victims, their suicide ideation and coercive control (Cavanaugh et al., 2011; Hui & Constantino, 2021; Rasmussen et al., 2021). The risks of suicide and suicide ideation are perceived to include coercive control, physical and psychological violence and mental health issues resulting from long-term living with the abuse (Kavak et al., 2018). These women stated that they continue to live with suicide ideation ten or more years after the ending of the coercive control relationships. They described how they have coped with and overcome those intrusions. Women spoke about the burdens of coping with the shame and self-blaming and also the blaming of others. They frequently commented that the only reason that they are still surviving is because they don't want their children to carry the burden of their mother's suicide and how, at times, even that is not sufficient to keep them going.

Their recollections indicate that after more than ten years out of coercive control relationships they are still suffering the long-term consequences and of having difficulty in keeping themselves motivated to keep surviving. The recollections described by the women in this study of suicide ideation and self-harming behaviours are for them the continuing long-term impacts of their experiences of coercive control (Herman, 1992; Cogle et al., 2009; Wolford-Clevenger et al., 2017; Potter et al., 2021)

Shame, self-blame and pain

The women in this study described how they are still carrying shame and responsibility for the abuse that they experienced while they were in coercive control relationships. Women spoke about how they hide, or don't tell people about their history, because they are ashamed or feel that they would be judged negatively if people knew what they had experienced. They also spoke about how they experience the pain of loss because of the impact of the abuse on their capacity to develop loving relationships. One woman said that she feels that she is cowardly:

'If I am talking to someone who I think won't understand then I censor what I say, it makes me feel that I'm a bit cowardly, for example a couple of weeks ago I spoke to a woman, at, I said I haven't seen you since the death of your husband and to offer, and she said, "thank you very much, of course we were separated for a long time and bla, bla, bla," and I was thinking she's so open about it, you know, em, if that were me I wouldn't say that, I think I'd be judged, yea, she couldn't hold on to a man and whatever.'

Another woman described how she continues to blame herself for being a victim of coercive control. She said:

'I tell as few people about my past as possible because I still feel ah, sort of, as if it was my fault. Sort of, if I had only been able to be something more, I know it's stupid, but a part of me still carries the shame of being beaten up when I was with him, I still feel deep down that I should have left, spoken to people sooner, that other people left and got on with their lives much sooner than I did, that I didn't have the courage to try to get out sooner because I felt useless, there are lots of things that I am closed about and won't do because of my past.'

While some women spoke about feeling shame, because of not doing something sooner, and getting out of the relationship, another woman said that she still carries a sense of failure of not being able to stay:

'I don't feel ashamed but I feel that I've probably let myself down that I couldn't stay in my marriage.'

Women continue to blame themselves for not seeing the potential of coercive control and also the feeling that they failed to make the marriage work. Furthermore, they said

that they will not take a chance on future relationships because they think that they could make the same mistake again. One woman described just what that is like:

'I would say do we have to go into that hole again, but it would almost be like your judgement of your partner would be kind of poor and that's the thing that you feel, it's stupid like really that everyone else could see it but you couldn't.'

One woman said that she had only one intimate relationship in her life and that was with her abusive ex-partner. She spoke about how that abusive relationship has impacted on her sense of self in her life today. She spoke about a friend:

'Sometimes I meet her straight from work and I know she's after being in the hairdressers getting her hair blow dried and all and I wouldn't have even after washing my face. And I don't know why I do it but I don't care who I meet even what way I am, I've lost that. I'm trying to get it back. I don't know why she would want to be my pal.'

It emerged that the long-term impact of coercive control on women's self-esteem left them feeling that they were not able to motivate themselves to do basic self-care. They described how it makes them wonder about why people want to be in their company or to continue friendships with them. One woman pointed out that she was not the one who cut off relationships. She spoke about how she was cut off:

'I've been cut off from all his family who I was quite close to, and I think it's probably, that's hurt me because I'm, I was very close and very supportive of his mother and his brother and sister at times of their lives when they needed me and I feel that they could have made an effort with me and with my kids and I think that's, you know, very hard.'

The women's portrayals of their current lives illustrate how the long-term consequences of the coercive control have impacted on their core sense of self. They spoke about censoring what they say to others because of their fears of being judged, how they carry the shame to this day and how they are constantly judging themselves, hiding the past because they feel responsible for the coercive control they experienced and wondering why people want to be with them. Their recollections coincide with the literature in relation to depression and low self-esteem (WHO, 2021) and coercive control (Walker, 1979; Matheson et al., 2015; Cirici Amell et al., 2022). Women say that they feel judged while blaming themselves for staying with abusive men, not

keeping their marriages together and ashamed of not seeing the potential for coercive control in the men that they married. They described how this impacts on their friendships and how they communicate with others. One woman spoke about the pain that she experienced from others cutting her and her children out of their lives. Six of the women stated that they carry blame for their relationships with the perpetrators, describing how they suffer anxiety, shame and guilt (Trygged et al., 2013; Ban Hong et al., 2015; Chapman & Monk, 2015; Crapolicchio et al., 2020; Lelaurain et al., 2021). Furthermore, they describe how these feelings continue to influence their lives, resulting in the isolation that they continue to suffer in their lives (Taggard & Montayre, 2019).

The women in this study were socialised at the micro level where they absorbed their understanding of their roles in intimate relationships, roles that the hegemony taught them that they were responsible for maintaining their marriages, that ‘good women stand by their man’. When they could no longer endure the pain, those marriages inflicted on them and they approached the macro level for support, they endured varying levels of hegemonic patriarchal discourse that in some cases gave further power to the perpetrators. They had lived within coercive control relationships where they endured the painful history of being blamed, shamed and abused, to find themselves further abused by the dominant patriarchal discourse from within echelons in society to whom they had turned for protection from their abusers. Now, most of the women in this study have retreated again to the micro level where, even there, many stated that they do not feel able to speak about the violence that they have endured for fear of further negative judgement.

Trust and relationships after leaving coercive control perpetrators

Women spoke about trust, about trusting themselves to protect themselves, and trusting others not to hurt them. They described how this can impact and impede them from developing relationships now, all these years after leaving coercive control perpetrators. One woman described how this works against her:

'I would not trust as much as I should do, and I wouldn't allow myself to become vulnerable, and I think that does block relationships for the future.'

One woman pointed out that the issue of trust is always there, always present in her life and always will be. She said:

'It's very hard to trust somebody after, when you've been through a relationship like this. You want to trust people but there's always that little niggly doubt in your head. Do they mean what they say, are they being, are they just stringing you along or you can't find the medium between it, it's, you just will always have that there, I think. I think I'll go to my grave still feeling like that. It's, it's you just can't, if you, I suppose if you give it [trust], you're afraid of getting hurt again, you're afraid of something like this happening again and you won't, I don't think, I won't allow myself to be fully [involved].'

Meanwhile, another woman spoke about her perspective on what others do to get what they want, and talked about keeping herself safe. She said:

'I have always been aware that you can never know anyone, and that people just say things to get what they want. Maybe, I should say that my experience is that I don't trust that men like me as a human being, that they just want to have me, so I don't really reveal myself or leave myself open to being "got" again. I don't trust anyone else to keep me safe.'

What came across was this woman's sense of not being liked as a female person, her sense that men want to have her as an object, not a being in her own right, resulted from her experiences of coercive control. This has resulted in long-term consequences for her, her lack of trust that there could be someone who would like and respect her as a human being, and prevents her from participating in close trusting relationships. Another woman indicated that she felt she was the problem and that she no longer trusted that she was capable of bringing what was needed to make a relationship work. She described feeling responsible for that:

'Maybe myself, that I wouldn't be able to bring some qualities to a relationship that would enable it to flourish, I wonder if I am lacking something.'

One woman who met her ex-partner at just seventeen years of age said:

'I've never been, I never was with anyone before or I was never with anyone after.'

Another woman said that she made the decision never to allow anyone really into her life many years ago when she left the abusive relationship and she never changed that decision:

'I said this years ago, when my children were small, I'll never live with anyone again and people used to say to me "Ah, you're only young, you will". And I'm 21 years down the line and I'm still, I still say the same.'

Women spoke about their expectations of relationships since they left their abusive ex-partners. One woman spoke about the long-term consequences of having lived with coercive control on her sense of self and how it has impacted on her self-esteem. She said:

'Well, I've had relationships since. Ah, and they suited me at the time but I wonder, I'm wondering now if I, eh, kinda lowered my expectations, you know, the fear that I wasn't sure enough of myself to look for something better, you know.'

One woman described how she changed after she left her ex-partner. She said that she now looks for different qualities in the people with whom she has relationships:

'Do you know what, I think I trust him, but I think it might be more of who I decided to get a relationship with, maybe it's something that I can manage in a relationship, if that makes sense. I suppose I chose somebody who I thought would mind me.'

The impact of the abuse can expand across all relationships, including friendships after coercive control. A woman described how since the abusive relationship ended that she finds people, and all relationships, hard work:

'People are too hard work for me, and friends are too hard work, it's funny, the two really good close friends that I would have made through the years are very glamorous and sometimes I get, they get on my nerves, that's terrible, isn't it?'

Another woman addressed the aspect of trust in friendships, she said:

'I guess it's taken me years and years to believe that anybody would want to be my friend, so friendships have been, I guess, odd. I still wonder why people want to be my friend, what I bring. And sometimes, maybe, I'd test that by disappearing to see will I be forgotten and people show me I'm wrong, so I guess you could say trusting in relationships is not easy.'

The implications of these themes illustrate that trust issues remain in women's lives long after they leave coercive control relationships. Trust continues to present as a very significant problem for the women in developing relationships, both intimate relationships and friendships. Women wondered aloud about why people, including women, want to be their friends and as a consequence women questioned the impact of coercive control on their sense of self, they wondered what they bring to their relationships with others now. Women described how they have different expectations of relationships as a result of their experience of coercive control and that they looked for different type of relationships where they felt that they were not vulnerable to being hurt again.

The women's descriptions of their loss of trust in themselves, and others, and thereby, their capacity to build new relationships after coercive control, corresponds with the literature (Briere & Jordan, 2004; Cogle et al., 2009). Furthermore, the women demonstrate that they have lost the belief that there is such a thing as a safe world (Hong et al., 2015). They spoke about how their vulnerability, fear of being hurt again, anxiety about people's trustworthiness and their attempts to keep themselves safe, impairs their capacity to trust new relationships (Dutton et al., 2006; Mechanic et al., 2008; Cogle et al., 2009). This can be compounded by the capacity that CPTSD has demonstrated in acting as a protective warden to shield victims from the harm that it has learned comes from intimate relationships (Sanderson, 2013). The ultimate breakdown of trust and its long-lasting implications as described by the women in this study are linked to the literature pertaining to PTSD (Ford et al., 2015, Van der Kolk, 2014; Courtois & Ford, 2015). All of which limits women's capacity to live healthy, socially-supported lives after the impact of coercive control.

Current health, doctors and hospitals

Women in this study stated that they believe that living in relationships with coercive control affected their long-term physical health. One woman spoke about how:

'I, physically, I feel the last 20-odd years my body is just breaking down slowly and it's affecting my health all the time.'

One of the women suggested that she is experiencing long-term damage because she was unable to look after herself during the abusive relationship. She said:

'...[the lack of] positive health care in younger years [has had] knock-on effects today, maybe the fact that I had to concentrate, I think, so much on survival, eh, makes me think that I neglected positive health care, you know, in my younger days.'

Some women said that they had spoken to their GPs about their experience of coercive control and those women said that they found them supportive in relation to their current health difficulties. Women did point out that they can still be slow at responding to their health needs as a result of their abuse experiences. One woman described how she becomes very ill before she responds to her health issues. She said:

'I have spoken to my GP before like, she would have put me on antidepressants over the years and she understands, when I go to the doctor it's always a multitude of stuff wrong with me, it's never just one thing, as she said to me before, I build up a list, yeah. And it's when I get to that stage when I can't do anymore, I have to go. But I can end up being very sick then.'

In this study it emerged that during the relationship women did the caring component of their ex-partner's health. One woman described how the family doctor supported her to shift her focus from her ex-partner's health. She recalled:

'I would have also told him about my concerns about my husband being depressed and the doctor was the one who said to me that, like, we all have to take responsibility for our own lives.'

She said that this advice did stay with her in the intervening years since she left the relationship. Another woman described how she still experiences the chest pains, which she now knows are panic attacks, which she experienced over the years while she was in the abusive relationship:

'I was always, like, I didn't know, but used to get chronic pains in my chest, now I know it was panic attacks. I do lots of meditation now, but they can still shoot out of the blue, attack me from nowhere like, still really scary!'

One woman spoke about being hospitalised recently with pneumonia. She said that the hospital doctors responded to evidence of possible abuse in an X-ray. She said:

'Two docs came to me while I was in there and they said to me "We've looked up on your X-ray and you have two cracks in your rib" and I said "yes". He says, "Can you tell me what's going on?", I said "Well I've been through it all, I did have injured ribs", I said "Now I didn't know they were cracked, but I had an abusive husband who kneeled on me one night and punched the head off me, and me ribs, and that's what that is". So I said "He's no longer around" and I said "I'm fine".'

Another woman described a similar experience in a hospital situation. However, she said that she was too ashamed of what had caused the problem, so she acted as if she did not know what the hospital doctor was talking about. This change among hospital doctors is significantly different from one described by a woman who attended a psychiatrist for stress. She described her experience:

'I attended a psychiatrist for a while years ago for stress, [she told her history but indicated] he seemed to be more interested in medical solutions.'

The themes taken from the women's narratives demonstrate that they are currently experiencing a range of health issues in their lives many years after leaving coercive control relationships. Their experiences are echoed in the literature which describes the long-term impacts on the mental and physical health and the social lives of women as a consequence of the abuse that they suffered (Warshaw et al., 2009; Karakurt et al., 2014; Stubbs & Szoeki, 2021) and the cumulative effects of them on their health (Domenech Del Rio & Sirvent Garcia Del Valle, 2017). However, some women in the study demonstrated that they continue to blame themselves for their ill health, suggesting that they failed to look after themselves when they were young or that they

don't go for medical attention soon enough. They also recalled that some doctors in the past were 'more interested in medical solutions' when addressing their problems, although in general they indicated that GPs have become more open to addressing the issue of coercive control even without evidence of significant training in the area (Pagels et al., 2015). Similarly, women indicated that their experience of hospital doctors were for the most part positive when presented with what were perceived to be signs of abuse. One woman recalled two hospital doctors followed up on evidence that they thought indicated current abuse, showing a change within the medical profession over recent years. Overall, the women in this study indicated an improvement in the response by the medical profession pertaining to coercive control than they experienced in the past, although research indicates only very slight changes have been made in the medical school curriculums (Valpied et al., 2017; Ngoc, 2017; Baum et al., 2022). This would appear to indicate that the hegemonic patriarchal discourse pertaining to coercive control is somewhat disrupted within that group of professionals.

Women's final words

Women in this study stated that they are trying, despite their experience, to move on with their lives. One woman said:

'I do try not to be angry because I feel that that gives him a hold over me, so I like to send him peace, love, and happiness as far away from me as possible, just as I describe him as a troubled soul, and em, try not to let him have any hold over my emotions whether it's love or hate, em, because I think that they are very close.'

In the same vein another woman stated:

'I've moved on, it's irrelevant, and now I can see him as the problem.'

One woman suggested that the pain does not go away but that it changes. She pointed out how she copes with intrusions:

'It comes into my head but it doesn't intrude on my life, it doesn't affect me with my friends, I can have a chat, a lot of my friends have gone through different things in their lives as well and I can sit and talk about it and it wouldn't cost me a second thought. I wouldn't get upset about anything it's, I'd say it's dead and gone. But it's not dead and it's not gone, it's part of who I am, and what I've gone through, and I've come out very well on the other side, but it took the guts of 20 years and a lot of work.'

conclusion

Women described how for them, time, medication, meditation and sending out loving kindness has helped them to cope with some of the effects of living with the long-term impacts of coercive control. However, the women in the study have shown that they are still experiencing the mental and physical, financial, housing and social effects on their lives from their experiences of the abuse. Moreover, these effects are compounded by the effect on their careers and their capacity to work after coercive control, thereby on their earning power, with the result that the women in this study are living in poverty years after leaving coercive control perpetrators.

These women described how they are still living with conditions associated with PTSD including fear, shame, panic, hyperarousal, and startle responses to even very low-level noises. They also spoke about conditions that include dissociation, a belief that the world is not a safe place, whereby they do not feel it is appropriate to trust themselves or others and its impact on them developing loving, nurturing, relationships. They described how sometimes suicide seems like a solution, but that thoughts of the effect that would have on their children prevents them taking that route. One woman stated that she has spent the guts of 20 years recovering from the trauma and abuse she experienced with her ex-partner but that its imprint is still present. While some women indicated that they may enjoy a few more drinks now than in the past, they pointed out that alcohol is not a problem for them. However, some of the women did say that their recovery is still being supported by the use of antidepressants and they described changes within the medical profession in relation to the issue of coercive control.

Twenty years after a relationship, when combined with the up to twenty-five years in the relationship, is a very long time in a woman's life to be living with the trauma that women indicate goes largely unacknowledged within legal and financial systems. Furthermore, women's descriptions of their experiences indicate that they are compounded within a macro system that continues to allude to the women's responsibility in some way for their experiences of coercive control. Their depictions indicate a society that stills questions why women stay in violent relationships rather than openly addressing the patriarchal cultural and social issues involved in men's violence towards women.

Chapter 9 Discussion

Introduction

Coercive control is a global phenomenon that impacts victims' mental, physical, sexual, and financial well-being (WHO, 2021). While the issue has been the subject of significant research, women's long-term experiences of trauma ten years after leaving coercive control relationships have previously received scant attention in the literature. This study set about to explore that gap. Understanding those consequences is important for the development of responses to coercive control. This study used an adaptation of Bronfenbrenner's (1977) system to view the micro, meso, and macro social levels of women's lives using the concept of trauma viewed through a feminist lens to analyse the themes drawn from semi-structured interviews with women who had experienced coercive control and left those relations more than ten years ago. The key finding demonstrated that the women who were victims of coercive control continued to experience trauma ten years after they left the relationship with the perpetrators. Furthermore, it demonstrated that their experiences of trauma were triggered as they engaged with systems at the meso and macro levels that they turned to for support regarding coercive control and that they continue to experience the reactivation of that trauma as a consequence of patriarchal discourse and hegemonic cultural attitudes.

The Micro level: Trauma within the relationship

The themes drawn from the interviews with the participants of this study demonstrate that the women found their experiences in the coercive control relationship and since they left stressful, arduous and extremely difficult. Their recollections about when they lived in the relationship describe that time as one of a constant state of stress, fear, exhaustion and anxiety aligning with the literature that links coercive control experiences with the trauma experienced by political prisoners and holocaust

survivors (Herman, 1992b). Research indicates that victims of coercive control experiences are linked to a more complex picture of PTSD or CPTSD, a disorder which takes into consideration the consequences of living in an ongoing traumatic environment (Cloitre et al., 2009; Dutton, 2009; Pill et al., 2017).

The reflections of the participants in the current study indicated that while they were in the relationship they experienced an ongoing pattern of behaviours, that can include physical, psychological, financial, and sexual harassment, stalking, gaslighting and manipulation within which they lived their daily lives and which stripped them of their core selves and their autonomy (Stark 2009). Those reflections indicated that they lived in a state of hypervigilance and reactivity about the real or imagined threats that resulted from the perpetrator's abuse (Luxenberg et al., 2001; Ford et al., 2015; van der Kolk, 2014; Chortois & Ford, 2015). Additionally, some recalled experiencing ongoing sexual assault or rape (Temple et al., 2007; Ullman et al., 2007) and that their experiences of coercive control either started or continued during pregnancy all of which the literature links with significant risk of PTSD (Devries et al., 2010; Qu Fan et al., 2017; Berhanie et al., 2019; Martin-de-las-Heras et al., 2019; Mojahed et al., 2021). Furthermore, research links the chronic sleep deprivation they experienced with psychological harm and coercive control (Buysse, 2014; Tempesta et al., 2015; Pires et al., 2016; Maharaj et al., 2022). Women in the study indicated that they spent years exhausted and without proper sleep. Sleep is known to support good brain function (Goldstein et al., 2013; Watson et al., 2015). Women's recollections indicate that this remains an ongoing problem in their lives. Research suggests that the constant fear induced by coercive control recollected by women in this study is not appropriately processed by the brain due to sleep deprivation (Watson et al., 2015). Furthermore, fear is linked with the long-term PTSD symptoms they described including nightmares and depression (Pigeon et al., 2011; Feng et al., 2018; Gallegos et al., 2021).

This study found that several participants were diagnosed with depression and prescribed antidepressants without questions about the cause of their problems. For others, coercive control led to the use of alcohol as a means of coping with the trauma in the relationship. All of the women discussed their experiences of suicide ideation. As a consequence of these experiences' women attended individual and or group

psychotherapy. However, it emerged that the women are still enduring the long-term consequences of the trauma they experienced during the relationship. The women in the study said that they are still living with the trauma: they are still experiencing the intrusive thoughts: the nightmares, the fear and the hypervigilance that they experienced while they were living in the coercive control relationship. Furthermore, they are still living with a lack of trust in the world as a safe place.

While all of the participants tried different methods to recover from the trauma that they experienced in those relationships, for example, either individual or group therapy and some attended their GPs and were prescribed antidepressants it emerged that their trauma did not end when they left. While they attempted to recover and address the trauma they experienced as a consequence of the coercive control relationship, they moved from the private space to the public domain to access support for issues including barring and safety orders, housing, maintenance and access for children, and financial organisations to reconfigure the debt. The women indicated that it was when they attempted to access that support in that public domain that their experiences of trauma were reactivated.

Meso level: Coercive control trauma is reactivated in the public domain

As a result of the way coercive control is constructed in the public domain, victims don't trust themselves and question their behaviours. While some of the participants indicated that they had either not been asked about their situation or been heard when they tried to describe it to their GP while in the private domain, they indicated that this was exacerbated when they struggled to have their voices heard in the public domain. Their experiences are delegitimised in the face of the taken-for-granted knowledge of those within the social hegemony they turn to for support.

Women in this study describe how their encounters with legal and financial professionals impacted on their already vulnerable sense of self. The literature is strewn with examples of the professionals women turn to for support, including those within the legal system, who fail to hear or legitimise the voices of victims of coercive

control (Li et al., 2015; Vonkman et al., 2017; Miller & Becker, 2021). Women described being taken back into court time and again by coercive control perpetrators without fear of reprisals from the system (Miller & Smolter, 2011; Miller & Manzer, 2021). They spoke of the courts' entertainment of what research describes as 'procedural abuse' (Miller & Smolter, 2011), and how that lack of protection from coercive control perpetrators costs them in a range of different ways. They recalled that it has a significant impact by reactivating the trauma that they experienced within the relationship, thereby affecting both their physical and mental health. The literature indicates that this results in victims of coercive control feeling unsafe in that domain (Zeoli et al., 2013 Clarke, 2021; Khaw et al., 2021). Alongside that, it generates financial costs through having to hire solicitors, and loss of pay through taking time off work to attend the court, childcare costs, and it impacts on their careers, all of which further impacts on their mental and physical health, leading the women to express how exhausting and stressful that time was in their lives. Women pointed out how judges' attitudes towards them during court appearances supported and emboldened the perpetrators towards further abusive behaviour after those court appearances.

These experiences resulted in some women eventually deciding to give up the fight for justice. In this study, it emerged that in some cases, court orders for maintenance were ignored for years by the perpetrators without fear of reprisal. The majority of the women in this study spoke about the non-payment of maintenance, the courts' lack of teeth when it came to their ex-partners' failure to make full disclosure when it came to legally separating and its impact both mentally and financially. A woman in this study spoke about how she was forced to totally give up the fight for justice. She said that she was suffering from the impact on her physical and mental health from coercive control in the private sphere, and then she became completely depleted while taking on her ex-partner and the justice system while continuing to work and protect her children. Consequently, she raised her children without any support from him and continues to endure significantly bad mental and physical health. Another woman pointed out that she went through the court system for ten years. She spoke about experiencing years of stress, fear, nightmares and panic attacks. She had lived with the physical, psychological, and financial impacts of coercive control within the marriage, and then her ex-partner was allowed to use the justice system to continue to

perpetrate coercive control, thereby continuing the abuse and its impacts for ten years after she left the relationship.

It can be very dangerous when the judicial system works out of these preconceived ideas, when it fails to hear, or even silences victims' voices relating to coercive control. This can result when the judiciary chooses to act from their taken-for-granted patriarchal values about what is in the best interest of the children, rather than listen to their mothers. Custody orders under these conditions can place women and their children in significant danger, even of life-threatening harm (Spearman et al., 2022). This is demonstrated in the murders of nineteen children in England between 2005 and 2015 by IPV perpetrators during formal and informal access (Women's Aid, 2016). This evidence demonstrates the ultimate harm that results from the court system's failure to hear and acknowledge victims' voices during decision-making in relation to custody orders for fathers who have been violent towards their intimate partners. One of the women in this study recalled how exhausted and frightened she was while trying to protect her child from the distress she experienced during access with her father. The court system decreed that despite coercive control in the relationship, and her daughter's behaviours after access visits, that, as a father, he had rights to weekend access. This woman recounted how the struggle of fighting the court system, and the power it gave her ex-husband over her, resulted in such stress and exhaustion within her, that for a short, distracted moment, on her journey from the court, she was attracted to ending it all by suicide.

The participants spoke about the long-term impact on them of the effects of the 'no-fault divorce' that exists in Irish law. They noted that the law takes no account of the perpetrator's physical, mental, financial and sexual abuse within the marriage or their behaviour while the victims were trying to set up their new lives free from coercive control. The legal system, with its focus on physical abuse, frequently fails to recognise financial abuse as coercive control, consequently leaving women alone in their ongoing fight against the abuse (Postmus et al., 2020; Kringel & Benjamin, 2021) while Postmus et al., (2020) points specifically to the use of housing insecurity by perpetrators of coercive control.

Women disclosed that it is not only within the justice system that they encountered those hegemonic patriarchal discourses and these problematisations of coercive control. Women spoke about their experiences within the financial institutions they had to address about the mortgages on their homes. This can result in women experiencing ongoing coercive control from their ex-partners within the legal and financial systems concurrently generating huge stress, exhaustion and costs to them from their very limited financial resources. Two of the survivors of this study are still struggling to keep a roof over their heads ten or more years after they left the coercive control relationship. They outlined the problems they continue to encounter from professionals within financial institutions. They spoke about the complete lack of understanding, knowledge or awareness of the dynamics of coercive control they encountered as they confronted those professionals. They disclosed how they were described as the problem, the ‘non-cooperating party’, when their ex-partners ignored requests to address their mortgage issues, even though they worked with and responded to all the requests made by those institutions. Furthermore, they pointed out how this impacted on their credit rating and the long-term financial impact of this on them and their children. In both cases their ex-partners have moved on, and are involved in new relationships, while the women are living in terror of the bailiffs coming to take possession of their home and rendering them and their children homeless. This can result in women experiencing ongoing coercive control within the legal and financial systems concurrently generating huge stress, exhaustion and reactivating the original trauma of the coercive control relationship while generating additional costs to them from their very limited financial resources. Furthermore, they spoke about the financial professionals’ complete lack of awareness about the coercion they experienced, under the financial officials’ gaze, when they were forced into debt by the coercive control perpetrator (Ramsay et al., 2019; Adams et al., 2020). These experiences generated huge fear, stress, and anxiety about becoming homeless due to unpaid mortgages and other debts that the victims were coerced into taking out by the abuse perpetrators (Pavao et al., 2007; Rollins et al., 2012). Women spoke about the financial professionals’ lack of awareness about the dynamics of coercive control and they pointed out that they did not see, or tacitly accepted, the perpetrators’ continued use of the system against the victim, while at the same time blaming and/or shaming them for the perpetrator’s lack of compliance. They spoke about how the financial impact of the divorce law impoverished them and their children, how it impacted their

working lives and how that poverty has followed some of them into retirement. Furthermore, they spoke about the physical and psychological pain and the reactivated trauma that they still carry and how they feel that they are the ones hiding the coercive control as if they were the criminals.

Macro level: Impacts of the patriarchal culture and social discourse

The women's recollections of their past experiences and their descriptions of the impacts of coercive control on their current lives demonstrate how the 'problem' of coercive control is represented in public discourse, institutions and by professional service providers. That problematisation continues to shape the issue of coercive control within the patriarchal cultural discourse. It controls what the discourse on coercive control entails, and how that discourse supports the approach within the public domain of coercive control as a private issue. Furthermore, it delineates how the hegemonic patriarchal discourses came to be taken-for-granted 'truths', and how the presumptions and assumptions about the issue of coercive control became ideologically embedded within society at large. Thus, common-sense, everyday language, perpetuated by the powerful patriarchal culture creates the knowledge that describes coercive control as a private rather than public issue, thereby marginalising and silencing the victims' voices (Wright-Mills, 2000). Exploring this opens the opportunity to understand the consequences on the victims of coercive control of those taken-for-granted 'truths' within society generally.

The public and private spaces where women's lives are shaped and structured about the issue of coercive control are defined and addressed in the public domain (Rossiter, 2011). The present study acknowledges the power and impact of communication technology (Castells, 2008) to construct common beliefs, generate stereotypes and propagate taken-for-granted views, about issues including the causes and the nature of coercive control. In this context, the power of communication technology in the 20th and 21st centuries can accelerate the production of discourse across all echelons of society via mass media, films, music, video games and television, which frequently result in the objectification of women and tolerance of violence against women

(Wright & Tokunaga, 2016). It has been noted that new misogynistic discourses continue to thrive across the social and cultural domain and in sports environments (Ash et al., 2017; Sliwak et al., 2020). Consequently, the internalisation of subconscious bias, in conversations, perceptions and behaviours among men and women, rendering the latter once again vulnerable to the acceptance of subordinate gender roles (Freund, 2019; Constantinescu, 2021). This discourse proliferates within what Gramsci (2010) refers to as the hegemony, or common-sense language that continues to exist within the dominant culture.

These patriarchal hegemonic conservative portrayals include traditional descriptions of women as feminine, passive, caring and, in the context of coercive control, peacekeepers (Kelly et al., 2022), and perpetrators of coercive control as having poor anger-management skills, anger issues or relationship issues (Rossiter, 2011). Through the patriarchal culture of power and dominance, power has constructed this knowledge about gender and women's place. It constitutes power relations and maintains its powerful network throughout society (Foucault, 1980). That hegemonic patriarchal discourse permeates all strata of society, creates, identifies and defines the political problematisation of the issue of coercive control (Bacchi, 2009) and underpins the societal responses to victims of abuse. This hegemonic construction results in victims of coercive control stating that when they attempt to access support concerning coercive control they struggle to be heard. They say that they are not heard or that their plight is not understood within those systems; their illocutionary acts fail or misfire (Giladi & Penterbridge 2021) and they are silenced. Moreover, it ignores the public patriarchal gender power relations that are mirrored by coercive control perpetrators (Davies et al., 2009).

Women in this study describe how their struggles, alongside the burden of the physical, psychological and trauma impacts from the years of abuse they had suffered, were exacerbated in the public domain where they encountered a backlash against women's independence (Gómez-Casillas et al., 2023). They found this intensified by the mass media normalising abusive behaviours and attitudes towards women, objectifying and subjugating them (Gabbiadini et al., 2016; Collins & Rothe, 2017; Sobieraj, 2018; Hill et al., 2021; Maas & Bonomi, 2021) and thereby creating a risk of patriarchy regenerating into a complex hydra-headed phenomenon normalising

abusive behaviours and attitudes leading to the concern for repercussions for women's equality in the event of a societal failure to recognise and challenge these ideologies.

The women in this study indicated that as victims of coercive control, they struggle alone, within both the private and public domains, and they describe the parallel isolation that they experience in that struggle. Women explain how getting out of the abusive relationship is not the end of their experiences, rather it generates further problems in a different environment. In that different environment, the public domain, the impacts they experience re-activated their past trauma experiences while putting new layers on top of that trauma. In the face of these problems, they say that they are unable to stand up in the public domain. They describe themselves as unable to acknowledge the coercive control they were subjected to in the sanctity of their homes. Furthermore, they say that they continue to censor what they say in public, the parts of themselves that they try to protect because of the fear.

All these women said that they continue to live in protective mode. Women spoke about staying silent in social situations, even with other women, outside of their very small inner circle. Women indicated that the responses they encountered in the public domain resulted in their experience of carrying the stigma of coercive control (Crow & Murray, 2015; Eckstein, 2016). They indicated that they had learned to 'bottle it up', to be considered 'normal', in the world. Consequently, they feel they were not allowed to be open, or free, or themselves in the public domain; they are continuing to experience a reiteration of the isolation they encountered in the coercive control relationship. Women indicated that in coercive control relationships, they experienced a broad spectrum of abuse that included physical, psychological, sexual and/or financial abuse, or a combination of all of these abusive behaviours which significantly negatively impacted their lives. When they tried to break free from the private sphere of that abuse, they encountered a public domain where they found it extremely difficult to get the support that they needed to attain freedom from the perpetrators and to move on with their lives. They pointed out that the professionals they encountered, including those in the justice and the financial systems made their journey out of the abuse difficult for them. They encountered a patriarchal hegemonic system that, alongside the perpetrator, reactivated the trauma that they had experienced within the coercive control relationship. They indicated that when their

ex-partners failed to engage with the financial institutions, the institutions deemed that it was the women's behaviour that was problematic, rather than actively taking on the issues with the perpetrators. Meanwhile, in the women's perceptions, the current problematising of the issue of coercive control allows the perpetrators to freely carry on with their lives while they engage in ongoing coercive control over them as victims, the control afforded to them by the justice and financial systems and society at large. Furthermore, they indicate that no account is taken of the lifeworld of the women who expressed their devastating struggles against that power, the consequential empowering of coercive control abusers, and the long-term mental, physical, financial and trauma implications this has on their lives, many years on.

This study demonstrates that women live with trauma as a consequence of the coercive control experienced by perpetrators of abuse in their current lives. They found that attitudes to coercive control within society restrict the possibility of their sharing their history and the impact of that trauma and abuse. The prevailing culture and attitudes towards coercive control, and violence against women in general, reactivates and reinforces the trauma, their feelings of shame, humiliation and self-blame and impede their ability to live their lives openly and to their full potential. They indicate that after all the pain that they had experienced in the relationship, getting out and working hard to develop an independent life, they are the ones who were left with the stigma, blame and the shame as if they were the criminals, the perpetrators of a crime. They experience all of this on top of the burden of the trauma they incurred within the coercive control relationship, while they continue to experience the physical, psychological, financial and social and traumatic impacts more than ten years after leaving the perpetrators of coercive control.

Conclusion

The aim of this study was to explore the long-term consequences of coercive control on victims ten after they exited those relationships. The women described how they experienced the trauma very early in the private environments and how the social hegemony they had developed in as women, initially resulted in them taking responsibility for creating the changes necessary to prevent the abuse they experienced

in the private sphere. Their narratives demonstrate the impact of that on their physical and psychological health and their lives while they struggled in the ‘sanctity of the home’ with the perpetrators. They recounted the obstacles that were placed in their way when they turned to public support systems, and the professionals, for the essential support to move on with their lives. They described how their voices went unheard, and how the systems did not appear to understand the dynamics that they were trying to bring to their attention. Instead, they pointed out how the responses from those systems gave tacit support to the perpetrators of coercive control, while at the same time, reactivating the trauma that they had experienced within the private sphere. The women described how the misogynistic social hegemony continues to force them to hide their history and thereby impedes their capacity to talk openly about their experiences. Their accounts show how they feel these effects on their daily lives. All of the participants in this small study described how they are still living with some, or many, of the physical and psychological and financial impacts that impede their potential to lead happy interpersonal, and intrapersonal lives, and achieve their full potential as human beings in the world. They spoke about how the financial impact of coercive control combined with the divorce law impoverished them and their children, how it impacted on their working lives and how that poverty has followed some of them into retirement. Furthermore, they spoke about the physical and psychological pain and trauma that they still carry and how they feel that they are the ones hiding the coercive control as if they were the criminals.

Chapter 10 Conclusion

Introduction

The aim of this study was to explore the long-term trauma impacts of coercive control on women more than ten years after they had left those relationships. This is the first study into the long-term trauma of coercive control and thereby sets it among a very limited field of research into the issue (Lawn & Karestan, 2021). The objective was to access women's perceptions and experiences and their accounts of the trauma they experienced during their relationships, in the course of the break-up and in the ensuing years as a consequence of those experiences. The study was carried out using qualitative methods, and thematic analysis was applied to the women's narratives and the researcher ensured that their voices were continuously reflected throughout the project. This chapter summarizes the key findings concerning the aims of the study. It discusses its contribution to the knowledge of the long-term consequences of coercive control and proposes how further research in the area could expand on that knowledge. It suggests policy recommendations based on the key findings. It acknowledges the limitations of the study and how that could be improved to make changes in the lives of the women impacted by coercive control.

Summary of findings

This study employed an adaptation of Bronfenbrenner's (1977) ecological framework nesting the micro meso, macro levels centered around the women's lives to create the opportunity to explore their lives in the relationship when they broke free and their lives ten years after leaving coercive control. The study found that the women's experiences of abuse within coercive control relationships in the private domain of their lives generated trauma that endures across their physical and mental health and their capacity to live their lives to their full potential. It demonstrated that despite attending therapeutic interventions when they left the perpetrators, the trauma that they experienced in the coercive control relationship was reactivated when they attempted to access support from professionals in the public domain to assist them to break free from the perpetrators. They indicated that this particularly included those within the

legal and financial systems where they said that they encountered a patriarchal attitude and discourse that frequently demonstrated a lack of awareness and understanding of coercive control. The trauma they experienced as a consequence of the coercive control relationships was reactivated when they left the private domain, the ‘sanctity of the home’, by the systems within the public domain they turned to for support after they left the perpetrators. It emerged from their recollections as an ongoing form of tacit support to the perpetrators of coercive control, especially by the judicial system. Consequently, this resulted in a failure of those systems to meet the women’s needs and added to their struggle to move on safely with their lives. Furthermore, their recollections demonstrated how those attitudes and the trauma they generated impacted their work lives and career development while contributing to ongoing poverty and housing insecurity. Women described the attitudes they encounter within society concerning coercive control not only reactivated the trauma they experienced in the private domain but has resulted in the persistent hiding of the participants of their history which results in their carrying the stigma, shame and blame of being victims of coercive control and continuing to live isolated in small safe communities of friends, years after leaving those relationships.

NGOs working with victims of coercive control indicate that the area continues to be significantly underfunded to meet the needs of victims even at basic levels such as housing. Additionally, while the literature indicates the benefit of counselling for women who are leaving or who have left perpetrators of coercive control, it is only offered on an *ad hoc* basis where resources are available and then generally at the crisis stage when women leave the coercive control perpetrator. At the later stage in their journey out of coercive control, it is unlikely to be available *pro bono* and women frequently do not have the financial resources necessary to pay for private counselling. Furthermore, campaigns continue to focus on the issue of coercive control in relation to victims of coercive control in the home, the private sphere, rather than addressing the public issues that beget coercive control, including the patriarchal hegemonic discourse in society. These attitudes could be addressed through government campaigns that focus in ways similar to campaigns to address social attitudes like those used in relation to disabilities, mental health and social inclusion.

Furthermore, as indicated the vast majority of survivors of coercive control do not come into the public forum, their voices, or illocutionary acts go unheard in those collaborative spaces resulting in others, who do not have the inside experience of the dynamics of coercive control speaking for them. This is a consequence of the blame, stigma and shame women who have experienced coercive control carry years after leaving those relationships. Their experiences demonstrate that coercive control perpetrated against women can lead to long-term poverty and the risk of homelessness. Women accessing counselling upon leaving those relationships indicated that it did not prevent the reactivation of the trauma from the coercive control relationship that they encountered, and continue to encounter from professional systems and society itself. While this study relates to women who experienced and left relationships more than ten years ago, their recollections speak to the ongoing issues of women who are attempting to leave or who have recently left coercive control encountered by the researcher in her private practice.

Recent legislative and policy changes

An overview of the significant legislative and policy changes concerning coercive control in Ireland has been outlined in Chapter 5 which recognised the political climate within which feminist activists played a significant role in bringing about those changes. NGOs working with victims of violence against women and coercive control have been campaigning for change for decades. The latest policy response included Third National Strategy, *Zero Tolerance for Domestic, Sexual and Gender based Violence* in June 2022. |This strategy was designed with cross department collaboration and included alliances with state agencies, NGO's, the judiciary and health providers to prevent and respond to coercive control. It includes funding to training and awareness programs for all front-line support agencies that victims of coercive control access for help including funding hotlines, refuges and a Trauma Informed Care response to those who access the services. This strategy included the funding for a dedicated agency Cuan, which opened in January 2024, to ensure the enactment of the best possible responses to violence against women including coercive control across all support services.

Furthermore, tremendous changes have been carried out with the inclusion of coercive control in legislation resulting in more recent convictions of perpetrators. This legislation is complemented by the Harassment and Harmful Communications Bill prohibiting the non-consensual distribution of images, online or offline and protecting the victim's identity. The introduction of Domestic Violence Leave, five days of paid leave allows women who are or have experienced coercive control to address current or past abuse problems including legal, medical or counselling issues. Trauma Informed Care training has been introduced in many of the support agencies creating safe environments for women to access support for coercive control. Work carried out in universities in the past decade has resulted in bystander intervention training in multiple settings leading to greater public awareness of harmful situations including coercive control and the best responses in those situations.

Recommendations

Women indicate that the trauma they experience within the relationship is constantly being reactivated by the problems they encounter at the macro level. They specify several areas where they continued to experience ongoing problems including financial, housing, employment and health issues

The issue of housing instability concurs with the literature that indicates that housing instability continues to be a significant trauma for women and their children in the context of coercive control. This research supports Safe Ireland's (2021) proposal on a range of ways to address the issue. These included ring-fenced funding for refuges, the provision of public and private rentals, rent allowance, social housing, and flexible funding for victims.

Women's financial problems could be significantly alleviated with the implementation of designated flexible loans for victims of coercive control to help women get back on their feet (Sullivan et al., 2016). The implementation of the training programs listed above for members of financial institutions, MABs, mediators, solicitors, especially family law solicitors, and social welfare officers including community welfare officers whom women approach while in or having left coercive control relationships would

help address some of the sources of the financial problems that women discuss struggling with for years after leaving the perpetrators of coercive control.

All of the training programs listed above are recommended for all the professional bodies that women encounter in their daily lives to significantly improve the opportunities to support and protect women from the ongoing trauma of coercive control. In the context of dentists, coercive control and trauma-informed care training in dental colleges could create an excellent opportunity for victim support because regular dental check-ups could be an opportunity to identify women who are victims of abuse (Parish et al., 2018; Bregulla et al., 2022). This also applies to medical colleges, especially to general practitioners and emergency medicine doctors where a gap exists within training programmes concerning coercive control (Pagels et al., 2015; Ngoc, 2017; Valpied et al., 2017; Baum et al., 2022). Similarly, for midwives as research indicates this is an extremely vulnerable time for women in relation to coercive control (Martin-de-las-Heras et al., 2019; Afiaz, 2020; O'Brien Green, 2020). Furthermore, for teachers in teacher training colleges and as opportunities for continuous professional development for qualified teachers who are encountering children impacted by coercive control within homes.

The introduction of medical cards for women who are or have been subjected to coercive control could help women who are experiencing ongoing financial problems address their health issues early and thereby achieve better health outcomes into their old age. Those medical cards for women could include cover for them to access counselling for the trauma they endured within the relationship and the long-term consequences including CPTSD. This card could be set up so that women could access counselling as and when required to respond to the reactivation they experience within their lives after they leave the perpetrators. All of which would support women to engage in their self-care and well-being.

In relation to employment, a significant step would be the availability of affordable child care for women who experienced coercive control to return to work. This could then be supplemented with opportunities for education and training support so that women could either update their skills or attend further education to return to the workforce in well-paid employment. While this would postpone independence in the

short term it would support long-term well-paid employment, an issue raised by many of the women in this study. Furthermore, the opportunities for enhanced employment would create occasions for women to develop supportive relationships, build resilience and break the isolation they experienced as a consequence of coercive control.

Moreover, if society implements campaign programmes similar to those designed to change attitudes in relation to mental health and disabilities, that acknowledge and address the hegemonic culture that permeates society then all of society could benefit from the consequences of living in an egalitarian society that respects and values each individual as human beings, not as subjugated objects.

The author is conscious that this sounds like setting out an ultimate ideal but suggests that such ideals are needed to guide social change in the short and medium term if they are to bring about paradigm change. Such paradigm change would result in women across society having the opportunity to reach their potential within all sectors of life, across business, civil society, family and politics. This is necessary to undermine the hegemonic patriarchal discourse that permeates all strata of society that creates coercive control and which, indeed, narrowly defines the political problematisation of issues such as coercive control (Bacchi, 2009) as simply part of the private sphere. The author is conscious that this study is a very small step in that direction but hopes that it will inspire those with the capacity and resources to build on it in addressing the issues outlined.

Limitations and further research

As a small scale, exploratory, in-depth, qualitative study, it is acknowledged that the findings of this study cannot be generalised to all women who are victims of coercive control. The researcher was conscious that personal bias can be a problem within research, especially within a single researcher study. To manage this, systems were put in place at the study design and the data analysis stages, and by working with a support group throughout the research, and obtaining the participants' feedback on the thematic analysis of the interviews. However, the study established that this group of

women are living with trauma as a long-term consequence of coercive control, not just as a consequence of living in the private sphere with the perpetrator but from their experiences while accessing support to break free from the perpetrator and from the patriarchal dominant discourses in relation to coercive control they encountered in society in general. The impacts span their current mental and physical health, current financial impoverishment, housing instability, and the possibility of these impacts continuing into retirement and old age. The author acknowledges that all of the participants were Irish and urban dwellers, so it cannot be generalised even within the Irish context. That said, it is hoped that the empirical evidence that emerged in the study will stimulate further research in an area that so far has received scant attention.

Conclusion

While the study is rich in qualitative terms, as appropriate to an exploratory study, further augmentation via quantitative research, perhaps in connection with service provision and professional responses, including surveys and administrative data, would be the next logical step. This could be invaluable for the victims of coercive control as it would show them that they were not alone at extremely fearful and stressful periods in their lives and would create an opportunity for further research to explore how those women coped with, and if they were able to overcome, the complex hurdles that they encountered as they continued on their journey to freedom after coercive control.

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Appendices

Appendix A: Ethical Approval

MAYNOOTH UNIVERSITY RESEARCH ETHICS COMMITTEE

MAYNOOTH UNIVERSITY,
MAYNOOTH, CO. KILDARE, IRELAND



Dr Carol Barrett
Secretary to Maynooth University Research Ethics Committee

25 March 2019

Olivia Carr
Department of Applied Social Studies
Maynooth University

RE: Application for Ethical Approval for a project entitled:

A Qualitative Study of Women's Long-Term Experience of Trauma Subsequent to Exiting Domestic Abuse

Dear Olivia,

The Ethics Committee evaluated the above project and we would like to inform you that ethical approval has been granted.

Any deviations from the project details submitted to the ethics committee will require further evaluation. This ethical approval will expire on 31 March 2020.

Kind Regards,

A handwritten signature in black ink, appearing to read "Carol Barrett".

Dr Carol Barrett
Secretary,
Maynooth University Research Ethics Committee

C.c. Dr. Joe Larragy, Department of Applied Social Studies

Reference Number SRESC-2019-022

Appendix B: Information Sheet



SRESC TEMPLATE INFORMATION AND CONSENT FORM FOR RESEARCH PARTICIPANTS

Information Sheet

Purpose of the Study. I am Olivia Carr, a Doctoral student in the Department of Applied Social Studies, Maynooth University.

As part of the requirements for a PhD I am undertaking a research study under the supervision of Dr Joe Larrayg.

The purpose of this research is to explore if trauma has been a factor in women's lives when they have been out of a domestic violence/ intimate partner violence (IPV) relationship for more than 10 years. This will help us to understand the longer term consequences for women. This, in turn, will help to inform how to improve policies and services for women in those situations.

What will the study involve?

The study will involve individual interviews with women who have left relationships in which there was intimate partner violence prior to 2009. However certain women will be excluded.

Exclusion criteria

- Those still involved in an IPV relationship
- Women who are in institutions, as those women are not in full control of their existence and environment
- Women who are attending a psychiatrist and who are on medication that renders them incapable of the capacity to exert fully conscious, informed consent
- Women who I am currently, or have in the past, worked with as a psychotherapist

My intention is to interview a maximum of 14 women. Therefore, the interviews will be held with the first 14 women who self-refer and fit into the research criteria. As this is a research project the relationship with the participants during the interviews will not be a therapeutic relationship.

The interviews will take between 60 and 90 minutes. At the end of the interview women will be asked if they will be willing to participate at a later stage in a validation group where the researcher will present the findings from the individual interviews and invite discussion and comments from the participants.

To participate in this study, you have to be over 18 years of age, be able to speak English well and have left an IVP relationship prior to 2009.

Who has approved this study? This study has been reviewed and received ethical approval from Maynooth University Research Ethics Committee. You may have a copy of this approval if you request it.

Why have you been asked to take part? You have been asked because you experienced IPV prior to 2009.

Do you have to take part?

No, you are under no obligation whatsoever to take part in this research. However, we hope that you will agree to take part and give us some of your time to participate in a one-to-one interview with me which will take between 60-90 minutes.

It is entirely up to you to decide whether or not you would like to take part. If you decide to do so, you will be asked to sign a consent form and be given a copy of it and the information sheet for your own records.

All information about whether you decide to take part will be completely confidential so that the person who gave you the information about this research will not be contacted at any time about you or your decision whether to participate or not.

If you decide to take part, you are still free to withdraw at any time without giving a reason and/or to withdraw your information up until such time as the research findings are analysed. A decision to withdraw at any time, or a decision not to take part, will not have any consequences for you.

What information will be collected?

In the one-to-one interview I will ask you about your relationship, for example, whether or not you were married, whether you had children, your living and working conditions. I will ask you about the violence in the relationship, how you came to leave the relationship and what life has been like since then. With your permission I will record the interview. You will be asked if you would like to be invited to a follow-up meeting to discuss the findings from the data.

After the interview each recording will be transcribed and I will identify the themes that emerged from each one. You will then be invited to a meeting with the other research participants to hear and discuss the themes that emerged from the interviews.

Participants name and phone number will be kept for this purpose only. A designated phone will have been set up just for the research. The number will be given to all participants and it will be used for all contact during the research.

Will your participation in the study be kept confidential?

Yes, all information that is collected during the course of the research will

be kept confidential. All names will be changed. The interviews when typed will be held in a locked cabinet at the researcher's place of work, electronic information will be encrypted and held securely on MU PC or servers and will be accessed only by me.

No information will be distributed to any other unauthorised individual or third party. If you so wish, the data that you provide can also be made available to you at your own discretion.

'It must be recognised that, in some circumstances, confidentiality of research data and records may be overridden by courts in the event of litigation or in the course of investigation by lawful authority. In such circumstances the University will take all reasonable steps within law to ensure that confidentiality is maintained to the greatest possible extent.' Otherwise only under exceptional circumstances such as a serious concern for your health and welfare or that of another individual the bounds of confidentiality will be maintained.

What will happen to the results?

The research will be written up and presented as a doctoral thesis and the findings may be presented at national and international conferences and may be published in scientific journals and/or books and other publications. A copy of the research findings will be made available to you upon request.

What are the possible disadvantages of taking part?

I don't envisage any negative consequences for you in taking part, but it is possible that talking about your experience may cause some distress. At any stage during the interview if you are upset we can stop, take a tea break and you can decide if you want to continue then or at all. I can give you the phone number of a counsellor who will talk with you about the upset you are experiencing. I will also give you a list of support services. If you are agreeable I will contact you later in the day to check in with you.

What if there is a problem?

At the end of the interview, I will discuss with you how you found the experience and how you are feeling. If you experience any distress following the interview you may contact someone from the list of names provided by me. You may contact my supervisor Dr Joe Larragy at joe.larragy@mu.ie if you feel the research has not been carried out as described above.

Any further queries? If you need any further information, you can contact me: Olivia Carr, xxxxxxxx, xxxxxxxx mumail.ie

If you agree to take part in the study, please complete and sign the consent form overleaf.

Thank you for taking the time to read this

Appendix C: Consent Form

**A Qualitative Study of Women’s Long-Term Experience of Trauma
Subsequent to Exiting Domestic Abuse**

Consent Form

I.....agree to participate in Olivia Carr’s research study titled **A Qualitative Study of Women’s Long-Term Experience of Trauma Subsequent to Exiting Domestic Abuse**

Please tick each statement below :

The purpose and nature of the study has been explained to me verbally & in writing.

I’ve been able to ask questions, which were answered satisfactorily.

I am participating voluntarily.

I give permission for my interview to be audio recorded.

I give permission to be contacted to validation meeting by Olivia Carr.

I understand that I can withdraw from the study at any time, whether that is before it starts or while I am participating.

I understand that I can withdraw permission to use the data right up to the time it has been analyzed.

It has been explained to me how my data will be managed and that I may access it on request.

I understand the limits of confidentiality as described in the information sheet.

I agree to quotation/publication of extracts from my interview.

Signed.....

Date.....

Participant Name block capitals

I the undersigned have taken the time to fully explain to the above participant the nature and purpose of this study in a manner that they could understand. I have

explained the risks involved as well as the possible benefits. I have invited them to ask questions on any aspect of the study that concerned them.

Signed.....

Date.....

Researcher Name in block capitals

.....
If during your participation in this study you feel the information and guidelines that you were given have been neglected or disregarded in any way, or if you are unhappy about the process, please contact the Secretary of the Maynooth University Ethics Committee at research.ethics@mu.ie or +353 (0)1 708 6019. Please be assured that your concerns will be dealt with in a sensitive manner.

For your information the Data Controller for this research project is Maynooth University, Maynooth, Co. Kildare. Maynooth University Data Protection officer is Ann McKeon in Humanity house, room 17, who can be contacted at ann.mckeon@mu.ie. Maynooth University Data Privacy policies can be found at <https://www.maynoothuniversity.ie/data-protection>.

Appendix D: Therapists' Letter

Agreement to participate in study

Date: 15th February 2019

To whom it may concern

I am a psychotherapist working in private practice. Women who have been victims of intimate partner violence (IPV) are among my clients. I recently met with Olivia Carr, a PhD candidate with the Applied Social Studies Department in Maynooth University. At that meeting we discussed her research study entitled *A Qualitative Study of Women's Long-Term Experience of Trauma Subsequent to Exiting Domestic Abuse* and its parameters.

I have informed Olivia Carr that I will raise the topic with any client in my practice that meets the criteria for the research, that is that they left an IPV situation prior to 2009. When she informs me that she has Ethical Approval I will support her in the research project. I will inform any client who meets the criteria of the research, inform her that her participation, or just checking it out, will be completely voluntary and that it will have no effect whatsoever on our relationship. I will make it clear to her that she can stop participating at any time without any repercussions. I will inform her that should she choose to participate in the research process with Olivia Carr that all information will remain completely confidential between them.

I understand that Olivia Carr will obtain informed consent from the participants. They will be asked to take part in a one-to-one interview for approximately ninety minutes which will be digitally recorded. Olivia Carr informed me that all personal data and other personal information relating to the participants, and all the data of those referring them to the study, will be anonymized in her research dissertation and any publications emerging from that research.

I am aware that respondents may become emotional or distressed during and/or after the interview. The researcher has indicated that as a psychotherapist she will use her skills to support the respondents during and at the close of the interviews. She has informed me that through her professional contacts she has recruited qualified experienced psychotherapists with experience of IPV who will be available pro bono to the respondents subsequently if necessary. She will also supply a list of support contacts.

Sincerely

Information on Ethical Approval

2nd July 2019

Dear

I am writing to you to let you know that I got ethical approval in relation to my research involving women's experience of the long-term consequences of having lived with domestic violence. Thank you so much for your support during that process.

I am now ready to meet up with women survivors and, where appropriate, follow up interviews. It was agreed as part of the approval process with Maynooth that I get a phone to be used solely for the purpose of the research. The mobile number for the research participants to contact me is now xxxxxx. I would very much appreciate if you would give this number to any woman you believe may be interested in participating in the research.

As I said in my earlier letter to you it's important that you let your clients, or ex-clients, know that the whole process is confidential. That it is completely up to them whether or not they make the call. Should they decide to make the call, I will organise to meet them in order to have a conversation with them about what the research entails. It is important that they know that making the call is not a commitment to participate in the research. The first meeting will be to discuss the research and answer any questions that they may have. After that, should they decide to participate, we will set a date and venue for the research interview

I am attaching a copy of my original letter as I know it's been a good while since we had those conversations.

Thank you again for your support in this endeavour.

Sincerely

Olivia Carr

This part is about how life was after you left, and now after all these years out of the relationship.

I'm wondering in the context of after the relationship how it has been for you

Emotionally?

Physically?

Psychologically?

Financially (your home, health, social life, career)?

Trusting in people/relationships?

Where are you living or calling home now?

Depending on responses some of following may be used as questions or for probing deeper:

Relationships/self and others

Impact, or intrude, on your everyday life now?

Relationships with other people, family, friends, work or intimate relationships, children?

Are there any relationships, places or activities that you avoid?

Work

Any impacts in relation to your situation at work or your professional life now in relation to your advancement in work?

Any impact economically and what way?

Why do you think that is?

Social

How about your life socially?

Ever have thoughts relating to shame, humiliation?

Do you ever feel cut off from other people as a result of your past, do you think other people would understand if you were open about your past?

Can you talk about your past in company?

How would you describe yourself now in relation to your self-approval or self-esteem?

Have you developed strategies for coping with these problems?

Physical or mental health

Can you relax, what do you do to relax?

Any sleep problems?

Nightmares?

Any problems like depression, anxiety, anger, fears or shame that last a long time and interferes with your quality of life?

Any flashbacks of the violence?

Are you on any medications?
Do you ever suffer from stress?
How about your concentration/focus ability?
Prescribed or non-prescribed medication?
Have you been prescribed medication to help you with these problems?
How long for, was it on and off, was it helpful?
Alcohol?
Other substances?

Doctors and hospitals

Did your doctor ever ask you anything about your history/ did you feel able to talk to him/her about your experience in a violent relationship?
Have you had to go in to hospital for any treatments since you left?
Do you think that any hospitalisations might have anything to do with having been in a violent relationship?
Were you asked about it by anyone in the hospital?
If you had been asked about the relationship, how do you imagine you would have responded?
Do you think it would it have helped you had you been asked?
What do you think prevented you from talking about it?

Self-harming

Have you ever thought about self-harm or suicide since you left the relationship and how have you coped with that?

Well, we have completed my questions. Do you think I have left anything out that you believe should be included?

Thank you.
How are you feeling now?