COPING RESOURCES OF WOMEN EXPERIENCING INTIMATE PARTNER VIOLENCE: AN ECOLOGICAL PERSPECTIVE

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ABSTRACT

Intimate partner violence poses a major challenge for social workers worldwide and also in South Africa. A qualitative study was done from an ecological perspective with a sample of 20 abused women, with the goal of exploring and describing their coping resources. The data were collected by means of semi-structured interviews, and then transcribed and categorised. The first theme, significant others, was subdivided into three subthemes, namely family, friends and neighbours. The second theme yielded two subthemes, church and church members. The last theme, professional help, was divided into four subthemes: social case work, social group work, nursing sister and psychologist. It was concluded that some abused women utilise resources in order to cope with their abusive situation. A number of recommendations are also presented here.

Keywords: coping; ecological perspective; intimate partner violence; qualitative research; resources; support

INTRODUCTION

The United Nations (UN) Committee on the Elimination of all Forms of Discrimination against Women defines gender-based violence as "[v]iolence that is directed against a woman because she is a woman or that affects women disproportionally. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty" (UN 1992, par 6). Intimate partner violence (IPV) – which is but one form of violence against women – can be viewed as a growing

challenge for women globally and across their lifespan. IPV includes physical violence, sexual violence, threats of violence, stalking, and emotional and economic abuse (Beyer, Wallis and Hamberger 2013, 1; Slabbert 2014).

A number of women worldwide, with estimated figures varying between 20 and 50 per cent, suffer from IPV. This disturbingly high percentage implies that domestic violence is a huge problem which transcends culture and ethnicity (Kim and Lee 2011, 2992). It is very difficult to obtain accurate statistics in South Africa, as a significant number of women are reluctant to report domestic violence for fear of further physical and emotional turmoil. It is, however, estimated that a woman is killed by her intimate partner every six hours in South Africa – the highest incidence of death through domestic violence in the world (Björnberg 2012).

According to the Institute for Security Studies and Africa Check (2014), figures for 2013/2014 indicate that cases of assault with the intent to cause grievous bodily harm (GBH), with the victim typically needing medical assistance, have actually decreased by 3.5 per cent (6 758 cases) from the previous financial year. Unfortunately, these statistics are less reliable as assault is not routinely reported to the police and the police do not always record all cases of domestic violence. The incidence of IPV thus remains of great concern in this country (Institute for Security Studies and Africa Check 2014).

It is increasingly clear that the way in which communities and society respond to IPV has direct consequences for women's safety and well-being. How abused women cope and what resources they use when dealing with the violence in their lives could also greatly determine their safety (Allen, Bybee and Sullivan 2004, 1016). The goal of the present study is to describe the coping resources of abused women from an ecological perspective.

THEORETICAL BACKGROUND

The ecological perspective on domestic violence focuses on the role of the social environment and context within which people function. People are significantly influenced by the interactions and transactions of overlapping ecosystems. Human relationships form a closely interwoven web within environmental contexts, with a reciprocal relationship existing between humans and their environment. The interdependence of relevant systems in an individual's life is also significant. People's actions are affected by their environment and, in turn, the environment can be shaped by the actions of individuals and communities, with the availability of resources also affecting this interaction (Oduru, Swartz and Arnot 2012, 278). The Integrated Service Delivery Model (Department of Social Development 2006, 10) indicates that people should connect with one another and with their environment, to be more effective in their decision-making and planning skills, among other things.

Bronfenbrenner identifies five levels of systems that should be considered when addressing issues such as domestic violence. The first is the microsystem, in which a

woman forms close relationships with friends, family, gangs, religious groups or sexual partners. On this level a woman might find support and comfort with certain people, should she experience stress and turmoil with an abusive partner. Microsystems could also be unsupportive, for instance if religious groups and family are not much help (Bronfenbrenner 1979; Oduru et al. 2012).

Mesosystems, the second level, describe the interrelationships between systems, for instance between family and work. Closely linked to the microsystem, friends, family and colleagues in the mesosystem could be a useful support system. However, abused women often experience tension in this system, as the work environment might not be supportive of their absence from work, should they be recovering from a violent episode (Bronfenbrenner 1979; Oduru et al. 2012).

Exosystems, the third level, include institutions and practices not related directly to women, for instance the police and government. The fragmentation of the extended family and welfare policies that do not always offer the necessary support might play a role here, while a supportive police officer or social worker could be of great value. The exosystem could thus be either supportive and make life easier for the abused woman or unsupportive, creating additional stress. Practice often reflects a different picture than do policy documents. For instance, South Africa has one of the most progressive constitutions in the world and powerful legislation to protect women, but IPV is still very prevalent and poses a huge challenge (Björnberg 2012; Bronfenbrenner 1979; Oduru et al. 2012).

Macrosystems, as the fourth level, refer to those aspects that are part of a given culture or community. Certain belief systems still view women as subordinate. Potential hazards posed by, for instance, the use of public transport such as taxis alone late at night, could severely affect the coping methods of abused women. On the other hand, resources offered by a community, such as identifying sympathetic neighbours and involving community members, can empower the abused woman by helping her to cope (Ali 2007; Bronfenbrenner 1979; Oduru et al. 2012).

Fifth is the chronosystem, where changes in both the person and the environment alter the mutual relationship. In South Africa, for instance, the political environment is largely supportive of women and their rights, affording women legal grounds for litigation and defence. As mentioned before there is, however, a huge discrepancy between what is written on paper and what happens in practice, given the statistics on domestic violence (Bronfenbrenner 1979; Dyer 2010). Certain life stressors could also arise through any changes that occur. Most people (including abused women) cope quite well with serious life stressors, when the stressor is ameliorated or its consequences are mastered. As a result of coping with the stress of domestic violence, an abused woman's self-esteem and sense of competence, relatedness and self-direction could be strengthened by her triumph over adversity (Beaulaurier, Seff, Newman and Dunlop 2007, 747; Bronfenbrenner 1979; Oduru et al. 2012).

In assessing IPV, careful evaluation should include the abused woman's physical health, mental health and well-being, her beliefs around self-image and the causes of the abuse, her self-esteem, problem-solving skills, social skills, existing social support and material resources. Constraints to effective coping should also be evaluated, including environmental constraints and the level of threat, in addition to concurrent stressors such as low income (Levendosky and Graham-Berman 2001, 171).

RESEARCH METHOD

As mentioned before, the goal of this study is to describe the coping resources of abused women from an ecological perspective. The research question was: What resources are available to abused women? (Creswell 2012).

To address the research question, a qualitative approach was used to gain a clear picture of the resources available to abused women. Fouché and Schurink (as quoted in De Vos, Strydom, Fouché and Delport 2011, 316), indicate that in qualitative research the lived experiences of participants are significant. Thyer (2012) pinpoints an advantage of qualitative research in that it can provide social workers with rich insights into the lives of participants. Another advantage is that social workers may become sufficiently acquainted with a specific social issue such as domestic violence, which might lead to more effective service rendering. Social workers researchers also come into close contact with the participants by interviewing them (often in their natural environments) and this is a rewarding way of collecting data.

The study utilises an exploratory and descriptive design, as described by Fouché and De Vos (as quoted in De Vos et al. 2011, 95). Exploratory studies aim to gain insight into a situation, phenomenon or person(s). In this study, insight was gained into the type of resources available to abused women. Strydom (2013, 152) explains that in exploratory studies, creative questions should be posed, and that serendipitous factors could have an influence on the findings. Here, a "thick description" of the data from the interviews was obtained, and in this regard the study can also be viewed as descriptive. Descriptive and exploratory studies often overlap, as was the case here.

Two non-governmental organisations (NGOs) and the services of a psychologist were used to obtain the sample of 20 participants for the study. Both purposive and snowball sampling were used: the former where 16 of the participants were selected for their first-hand experience of domestic violence (Whittaker 2009, 34) and the latter to source four more participants, which allowed the researcher to obtain a thick description of the data (Strydom and Delport (as quoted in De Vos et al. 2011, 393). The sample, obtained in the Western Cape (three suburbs in Cape Town and two small towns close by), was drawn from a population that had to meet the following criteria for inclusion:

• They had to be female, between the ages of 22 and 60

- They had to be in an abusive relationship at the time of the study, or had to have been in an abusive relationship no more than six months prior to the study
- They had to reside in or around Cape Town
- They had to have received professional help from a social worker, psychologist or nursing sister during the preceding six months, or still be receiving such help (see Slabbert 2010, 110)

Semi-structured interviews were used to obtain data. The interviews, lasting between 60 and 90 minutes, were recorded on tape with the permission of the participants, before being transcribed. Similar patterns were identified, after which the data were analysed and categorised into relevant themes and subthemes (Creswell 2012).

The limitations of the study were that it was conducted in only one province, the Western Cape. Second, as a relatively small sample was taken, the findings could not be generalised. As this study was explorative and descriptive in nature, further research is needed to verify the findings.

Ethical clearance was obtained from the Ethical Committee of the University of Stellenbosch. Ethical considerations included voluntarily participation, informed consent, confidentiality and debriefing. No personal information on the participants was displayed – pseudonyms were used. Participants were offered the opportunity to debrief after the interviews, but all had access to professional services, if they wished to debrief at a later stage (Mouton 2006, 24).

DISCUSSION OF THE FINDINGS

From earlier discussions it is clear that resources in a person's life can either be supportive or unsupportive. Trotter and Allen (2009) argue that women often use resources such as friends, family, neighbours and the church to help them when they have been abused, before seeking professional help. Saleebey (2002, 16) maintains that informal resources always have something to offer a person in need, despite poverty, oppression and other hampering factors. This emerged very strongly from the participants' stories: "The people care for me. They will help me if he beats me. I can always go to Jacky if there is a problem. She always welcomes me with an open heart" – Cathy. From the research three themes were identified, namely significant others, church and professional help, and these are analysed and interpreted in greater detail.

Theme 1: Significant others

Three subthemes emerged here, namely family, friends and neighbours. Significantly, most participants found their family, friends and neighbours to be very supportive: "I have two friends. They help me and talk to me … The aunty over there has also been

very nice. She will always talk to me and be nice to me … My sister helps me to look after the children. They go there if things are not right" – Nita.

Subtheme 1: Family

The following excerpts indicate how family members offered support to the participants:

> My mother is my biggest support. If it was not for her, I would not cope. She is always there for me and also helps with the children. She will sometimes bring me food and help me to buy electricity. She is very good to me and helps me the most – Edith.

> His family helped me a great deal and talked to him if he messed with other women and also when I was beaten up, especially his mother. They tell me to come to them if he gets violent. They also get very upset with his behaviour. At one stage they took me to the doctor to get stiches after he has beaten me up – Meg.

> Sometimes my family will help me, but they are also unhappy that I am still with him. They do not understand this. This creates a lot of tension and they want me to leave him, because he is so violent – Olive.

It is significant that in-laws were also viewed as supportive, as is clear from Meg's statement. Trotter and Allen (2009, 229) view informal helpers as important role players in assisting women living with, or attempting to end, abuse. Family might be of great help to an abused woman, but can also put unnecessary pressure on her to either stay or move on when she is not ready to do either. Trotter and Allen's (2009) study shows that negative and mixed reactions from family and friends are not rare occurrences in the lives of survivors. Moreover, their findings emphasise the fact that "social support" is multifaceted, consisting of both positive and negative reactions, and should not merely be viewed as a single construct.

Twelve participants (60%) concluded that their family or in-laws were supportive, while four (20%) indicated that their family were not always supportive, but criticised them for not leaving their partners: "My family is upset with me, because I do not leave him" – Ivy. The families of four participants (20%) lived far away or were deceased: "My parents are both dead, and my sister stays in the Eastern Cape" – Beth.

The support of friends is the following subtheme to be discussed.

Subtheme 2: Friends

Trotter and Allen (2009, 229) found that the friends of abused women could be of great support, but could also expect them to act in ways toward their partners that they might not be able to do. Flinck, Paavilainen and Asredt-Kurki (2005, 386) opine that friends

play an important supportive role in abused women's lives, as is echoed by the following interview excerpts:

> I also have a good very friend to whom I can talk. I go to her to escape from my circumstances. She cheers me up. We laugh and make jokes. It is good to spend time with her, as she makes me forget all my troubles. I wish we can see each other more often, I see her only every second month when she comes and visits her aunty – Amy.

> There is one woman I can talk to. She is a friend. She does not stay too far and I often go there after work. She is always friendly. She was also in the same situation and understands me. She also sometimes looks after the children – Ivy.

> I have two friends. They helped me and talk to me, but they also wanted me to leave him. They do not understand why I am still with him. They are very upset if they see the marks on my body. They do not like him at all and will not talk to him … They could see his jealousy – Nita.

In this study three participants (15%) mentioned that their friends put pressure on them to leave their partners: "They don't like him. They asked me several times to leave him. They said he is going to destroy me and don't want to be friends with me if I stay with him. The one said I could come and stay with her" – Beth. Five participants (25%) indicated that they were isolated from their friends: "My friends are all in the Eastern Cape" – Kay. Half of the participants (50%) indicated that their friends were supportive of them and empathic: "My best friend is always there for me. She understands me and I can contact her anytime. She is always there for me" – Lauren. Two participants (10%) did not mention friends at all.

The last subtheme resorting under significant others, refers to neighbours.

Subtheme 3: Neighbours

The following excerpts indicate how supportive the participants' neighbours were:

> The aunty there over the road encourages and supports me tremendously. She sometimes brings me soup and also looks out that no one will steal the washing from the line if I am away. I can go to her if he gets too difficult – Florry.

> The people who stay behind us come and knock if he beats me. They hear me shouting … He stops then if they come – Olive.

> If he beats me too much, I go to the neighbours and that man will come and talk to him. Then things go better for a while … but not for long – Pam.

Eleven participants (55%) found their neighbours extremely helpful in trying times, by running to them for help or calling out. Three participants (15%) regarded their neighbours as women to whom they could talk and who would help them. Authors such as Pyles and Kim (2006), Bosch and Bergen (2005, 311) and Douki, Nacef, Belhadj, Bousaker and Gacham (2003, 1650) agree that neighbours and a community should be involved in caretaking. Caretaking is a change agent, renewing the possibility of hope – a hope that threads through the strengthened relationships in a family, neighbourhood, community, culture and country. It is clear from the responses given by Florry and Olive that they experienced their neighbours as part of their resources, helping them cope. Despite the severe challenges women in IPV might face, family, friends and neighbours could offer valuable support (Flinck et al. 2005, 386; Saleebey 2002, 14). Chan, Lam and Cheng (2009, 559) suggest that the community can be very effective in helping to counter the problems of family violence. Neighbours, for instance, can form part of an abused woman's safety plan and her coping mechanisms.

Theme 2: Church

The next theme is the role of the church, which the participants indicated as a resource. Landman and Theron (2007) emphasise the healing effect of spiritual discourse and how stories of faith can help women deal with IPV. Pyles (2007, 283) notes that religious institutions such as churches might be hugely supportive by offering spiritual, emotional and practical assistance. She does, however, caution that these institutions could also be a hindrance, since they might advocate silence and urge an abused woman to not divorce her husband. In this study the participants noted that the church was a support, rather than a hindrance. The subthemes identified, namely pastor/minister and members of the church, are closely linked.

Subtheme 1: Pastor/minister

Pastoral care varied in this study, from the minister/pastor being actively involved in counselling and praying, "The pastor prays for me often and told me several times that I must leave him" – Beth, to more practical help with coping skills and obtaining protection orders: "The minister organised a camp. I attended. The sessions were outstanding and helped me to realise that I am not useless" – Sally; "The pastor took me to the court and helped me to get a protection order" – Rosy. Four participants (20%) reported that their pastor/minister had helped them in their struggle with domestic violence. This echoes Dyer's finding (2010, 33) that some women who are exposed to IPV will seek a minister/pastor's help, and that perspectives and practices used by clergy to address partner violence are mostly compatible with clinical best practices. Hodge (2005, 287) compiled a spiritual eco-map that could be of some help. An eco-spiritual map indicates which spiritual resources are present in a person's life for instance a ladies group. He concluded that spirituality and religion can offer great support to people in need.

Subtheme 2: Members of the church

Eight participants (40%) reported that people at their church were a great support and helped them in practical ways, such as looking after their children or calling the police if necessary: "The church people help me sometimes … especially if things are difficult. The one church man has also called the police … they also brought me food once when I was not well" – Kay; "The sister of the church told me she would ask her sister if I could stay there. I need to leave. They will receive me with open arms" – Cathy. Two participants (10%) listed the negative aspects of certain church members (such as gossiping), but still regarded fellow church goers as helpful. The participants' views on the church as a helpful resource varied from finding the church very supportive, "There is a church sister that always helps me" – Gill, to not always finding the church helpful: "There was a church woman whom I talked to. She talked behind my back … now I don't talk to her anymore" – Rosy. This echoes research by Pyles (2007) who concluded that the complexity of IPV is not always fully understood by faith-based institutions.

Ellison, Trinipatoli, Anderson and Johnson (2007, 1094) and Fourré (2006, 111, 174) observe that faith-based communities (such as churches) can provide tremendous support to vulnerable women. Support groups, where women who are in similar situations meet and support one another, could help with restoration. In this study none of the participants indicated that they were part of such a support group, but the responses of Gill and Cathy indicate that they found church members to be supportive.

Theme 3: Professional help

Four subthemes were identified under this theme. All the participants in this study made use of some form of professional help, varying from medical intervention or social case work, to social group work or psychological help. Mesatywa (2009) stresses the importance of professional help for women in IPV, as there are multiple needs to be addressed through practical assistance, counselling, medical care, help with emotional upheaval, etc.

Subtheme 1: Social case work

Twelve participants (60%) received some form of social work intervention, be it support services or practical help with their children. Social work services varied from counselling: "Mrs Brown of the Welfare was very good to me, she helped me tremendously. I went to her every week and she helped me to see that I am not a nobody" – Sally, to intervention: "She saw us together and told him that he cannot beat me up like this. She told him he must be nice to me, because I am his wife and the mother of his children … She explained the court thing and where I could go. I think he got a bit of a fright, but he still beats me, but is more cautious" – Joy, to introducing women to valuable resources such as child care grants: "She helped me to get 'all pay'.

If it was not for this grant I would not have been able to keep my children" – Gill, to help in gaining legal protection: "Anna [social worker] helped me to go to the court to get a protection order. She helped me to fill in the correct forms and showed me where to hand it in and explained to me what it means" – Amy. This correlates with Hetling's view (2011, 1047) that for many battered women, social work intervention constitutes a safety net. Apart from assisting abused women in gaining access to the necessary resources, counselling and consultation services, social workers may help them cope better with their situation. The harsh reality is, however, that many abused women do not report abuse and thus do not receive the necessary intervention; alternatively some social workers might not be efficient in identifying and dealing with the complexity of IPV (Warrener, Postmus and McMahon 2013). Wahab (2005, 34) observes that it is mostly members of the social work profession who intervene when low-income women are exposed to domestic violence, as these women often need help with their children and with resources. Postmus and Hahn (2007, 1044) support Wahab's view, indicating the intertwined relationship between poverty and violence. This is usually where social workers become involved in women's lives.

Subtheme 2: Social group work

Three of the 12 participants who received case work intervention (15%) indicated that at some time in their abusive relationships they were also part of a social work group: "My Welfare is very proud of me. I attended all the group sessions. It was every Wednesday from 9 to 10. I also received a certificate" – Rosy; "There was a social worker at the welfare office that had a group for depressed people. She helped me a great deal. She was like a friend to me. If it was not for her, I wouldn't have made it" – Tina. This echoes the findings of Grauwiler (2008, 318) that the 15 women in her study experienced social group work as essential in their efforts to deal with IPV and resolve the consequences of the abuse. The support these women received from one another also helped them cope in life. Chronister, Harley, Aranda, Barr and Luginbuhl (2011) as well as Gillum (2008) support group work for abused women because of its empowering qualities, while Gondolf (2007, 341) emphasises the value of culturally focused counselling groups for perpetrators of domestic violence.

Subtheme 3: Clinic sister

The participants all made use of medical services for the treatment of wounds. Medical care varied from treating wounds in the clinic or day hospital: "The sister here at the clinic treated my stab wound. She also gave me ointment to put on. She also gave me an injection for the pain" – Hope, to hospitalisation: "I was in the hospital for two days, because of all my wounds. The nurses helped me to get better. They told me to look after myself" – Meg. These findings are supported by Busch-Armendariz, Johnson, Buel and Lungwitz (2011, 1194) and Davhana-Maselesele, Myburgh and Poggenpoel (2009,

2524) who indicate that women in IPV tend to visit hospitals or clinics frequently due to injuries or miscarriages following assault. Fleury-Steiner, Bybee, Sullivan, Belknap and Melton (2006, 339) indicate that tangible support such as medical care may bolster survivors' confidence. Seven participants (35%) indicated that the clinic sister also helped them deal emotionally with their trauma: "I've never been to the Welfare. I was too scared to go there. I was scared of him. I could go to the clinic and talk to the clinic sister" – Joy; "I come here to the clinic and the sister helps me. She also helps me with pills and a food parcel" – Diane. Based on their study in the trauma and resuscitation unit of an urban hospital in South Africa, Joyner, Theunisen, De Villiers, Suliman, Hardcastel and Seedat (2007, 19) recommend that workers in the healthcare sector receive adequate training to deal with the huge fall-out of domestic violence. Flinck et al. (2005, 341) concur, adding that in a clinical context, nurses should be equipped with the necessary skills for dealing with IPV.

Subtheme 4: Psychologist

In this study three participants (15%) had at some stage in their abusive relationships made use of psychological services. Two (10%) had also made use of social work interventions. Psychological services varied from counselling: "My psychologist tells me regularly what a strong woman I am. She helps me to work through everything. If I divorce him, I won't be on his medical aid anymore and won't be able to go to her anymore" – Sally, to inpatient treatment for depression: "In Stikland the psychologist helped me to go on and she taught me to be more assertive" – Rosy.

Women in IPV often suffer from depression and need psychological care. Wright, Kiguwa and Potter (2007, 631) argue that in therapy abused women might be able to identify their situation, be able to speak about it and ultimately be empowered. Guoping, Yalin, Yuping, Momartin and Ming (2010) and Miller (2006) echo previous researchers' views on therapy and argue that because of the severe trauma abused women face, psychological help may be of great benefit. Levendosky and Graham-Berman (2001, 181) add that if the psychological functioning of abused women is not properly addressed, harm could come to their children because of the risk of child abuse.

CONCLUSIONS AND RECOMMENDATIONS

This study provided a picture of the resources and coping methods utilised by women in IPV. It is clear that despite the challenges they faced, they still had resources that helped them cope. All participants mentioned the support they received from informal networks such as family, friends and neighbours. The church (specifically the pastor/minister and members of the church) was also noted as providing support and a way of coping. Lastly, social case work, social group work, nursing sisters and psychologists were amongst the professional support services the participants utilised.

The following recommendations can be made:

- More research should be conducted on the resources available to abused women. Any lack or inaccessibility of resources should also be noted.

- In social work assessment, the availability of resources for abused women should be identified and evaluated.

- The expansion and utilisation of informal resources should be taken into consideration when social workers draw up an intervention plan for IPV cases.

- The ecological perspective could be utilised meaningfully in terms of case, group and community work with abused women.

- This study mainly focused on the micro- and mesosystems. Research on the role of the macro- and chronosystem in IPV should also be conducted, to evaluate the different systems that play a role in IPV.

REFERENCES

Ali, A. H. 2007. *Infidel, My Life.* London: Free Press.

Allen, N .E., D. I. Bybee, and S. M. Sullivan. 2004. "Battered Women's Multiple Needs." *Violence against Women* 10 (9): 1015–1035.

Beaulaurier, R. L., L. R. Seff, F. L. Newman, and B. Dunlop. 2007. "External Barriers to Help-seeking for Older Women who Experience Intimate Partner Violence." *Journal of Family Violence* 22 (8): 747–755.

Beyer, K., A. B. Wallis, and L. K. Hamberger. 2013. "Neighbourhood Environment and Intimate Partner Violence: A Systematic Review." *Trauma, Violence and Abuse* 30: 1–32.

Björnberg, K. 2012. "Violence against Women in South Africa, a Cultural and Socio-economic Issue." http://www.genderacrossborders.com/.../violence-against-women-in-South Africa (accessed 11 March 2013).

Bosch, K. M., and M. Bergen. 2005. "The Influence of Supportive and Non-supportive Persons in Helping Rural Women in Abusive Partner Relationships become Free from Abuse." *Journal of Family Violence* 21 (5): 311–323.

Bronfenbrenner, U. 1979. *Toward an Experimental Ecology of Human Development.* Cambridge, MA: Harvard University Press.

Busch-Armendariz, N. B., R. J. Johnson, S. Buel, and J. Lungwitz. 2011. "Building Community Partnership to End Interpersonal Violence: A Collaboration of the Schools of Social Work, Law and Nursing." *Violence Against Women* 17 (9): 1194–1206.

Chan, Y., G. Lam, and H. Cheng. 2009. "Community Capacity Building as a Strategy of Family Violence Prevention in a Problem-Stricken Community: A Theoretical Formulation." *Journal of Family Violence* 24 (8): 559–568.

Chronister, K. M., E. Harley, C. L. Aranda, L. Barr, and P. Luginbuhl. 2011. "Community-Based Career Counselling for Women Survivors of Intimate Partner Violence: A Collaborative Partnership." *Journal of Career Development* 39 (6): 515–539.

Creswell, J. W. 2012. *Educational Research: Planning, Conducting and Evaluating Quantitative and Qualitative research.* Boston, MA: Pearson. Fourth edition.

Davhana-Maselesele, M., C. P. H. Myburgh, and M. Poggenpoel. 2009. "Lived Experiences of Women a*Gender and Behaviour* 7 (2): 2517–2540.

Department of Social Development. 2006. *Integrated Service Delivery Model.* Pretoria: Department of Social Development.

Douki, S., F. Nacef, A. Belhadj, A. Bousaker, and R. Gacham. 2003. "Violence against Women in Arab and Islamic Countries." *Affilia, Journal of Women and Social Work* 6 (3): 165–171.

Dyer, J. 2010. "Challenging Assumptions: Clergy Perspectives and Practice Regarding Intimate Partner Violence." *Journal of Religion and Spirituality* 29 (1): 33–48.

Ellison, C. G., J. A. Trinipatoli, K. L. Anderson, and B. R. Johnson. 2007. Race/ethnicity, Religious Involvement and Domestic Violence." *Violence against Women* 13 (11): 1094–1112.

Fleury-Steiner, R. E., D. Bybee, C. M. Sullivan, J. Belknap, and H. C. Melton. 2006. "Contextual Factors Impacting Battered Women's Intentions to Reuse the Criminal Legal System." *Journal of Community Psychology* 34 (3): 327–342.

Flinck, A., E. Paavilainen, and P. Asredt-Kurki. 2005. "Survival of Intimate Partner Violence as Experienced by Women." *Journal of Clinical Nursing* 14 (3): 383–393.

Fouché, C. B., and A. S. de Vos. 2011."Formal formulations" in *Research at Grassroots: For the Social Sciences and Human Service Professions*, edited by A. S. de Vos, H. Strydom, C. B. Fouché, and C. S. L. Delport, 89-101. Pretoria: Van Schaik. Fourth edition.

Fouché, C. B., and W. Schurink. 2011. "Qualitative Research Design." In *Research at Grassroots: For the Social Sciences and Human Service Professions*, edited by A. S. de Vos, H. Strydom, C. B. Fouché, and C. S. L. Delport, 307−328. Pretoria: Van Schaik. Fourth edition.

Fourré, C. 2006. *Finding Your Way through Domestic Abuse.* USA: Green Press.

Gillum, T. L. 2008. "The Benefits of a Culturally Specific Intimate Partner Violence Intervention for African-American Survivors." *Violence against Women* 14 (8): 917–943.

Gondolf, E. W. 2007. "Culturally Focused Batterer Counselling for African-American Men." *National Institute of Justice* 6 (2): 341–366.

Grauwiler, P. 2008. "Voices of Women: Perspectives on Decision Making and the Management of Partner Violence." *Children and Youth Service Review* 30 (3): 311–322.

Guoping, H., Z. Yalin, C. Yuping, S. Momartin, and W. Ming. 2010. "Relationship between Recent Life Events, Social Support and Attitudes to Domestic Violence: Predictive Roles in Behaviours." *Journal of Interpersonal Violence* 25 (5): 863–876.

Hetling, A. 2011. "Welfare Caseworker Assessments and Domestic Violence Services: Findings from Administrative Data and Case Narratives." *Violence against Women* 17 (8): 1046–1066.

Hodge, D. R. 2005. "Spirituality." *Families in Society* 86 (2): 287–296.

Institute for Security Studies and Africa Check. 2014. "South Africa's Official Crime Statistics for 2013/2014." http://africacheck.org/factsheets/factsheet-south-africas-official-crime-statistics-for-201314/ (accessed 5 November 2014).

Joyner, K., L. Theunisen, L. de Villiers, S. Suliman, T. Hardcastel, and S. Seedat. 2007. "Emergency Care Provision for and Psychological Distress in Survivors of Domestic Violence." *South Africa Family Practitioner* 49 (3): 15–27.

Kim, J. Y., and J. H. Lee. 2011. "Factors Influencing Help-seeking Behaviour among Battered Korean Women in Intimate Relationships." *Journal of Interpersonal Violence* 26 (15): 2991–3012.

Landman, C., and J. P. J. Theron. 2007. "The Healing of Intimate Spaces through the Deconstruction of Religious Discourses: Co-constructing Alternative Stories of Faith in the Context of Township Spiritualities." *Practical Theology in South Africa* 23 (3): 201–218.

Levendosky, A. A., and S. A. Graham-Berman. 2001. "Parenting in Battered Women: The Effects of Domestic Violence on Women and their Children." *Journal of Family Violence* 16 (2): 171–195.

Mesatywa, N. J. 2009. The Perceptions and Experiences of African Women in Violent Partner Relationships: An Exploratory Study, PhD thesis. Stellenbosch: University of Stellenbosch, Department of Social Work.

Miller, J. 2006. "A Specification of the Types of Intimate Partner Violence Experienced by Women in the Normal Population." *Violence against Women* 12 (12): 1105–1131.

Mouton, J. 2006. *How to Succeed in your Master's and Doctoral Studies: A South African Guide and Resource Book.* Pretoria: Van Schaik.

Oduro, G. Y., S. Swartz, and M. Arnot. 2012. "Gender-based Violence: Young Women's Experiences in the Slums and Streets of Three Sub-Saharan African Cities." *Theory and Research in Education* 10 (3): 275–294.

Postmus, J. L., and S. A. Hahn. 2007. "The Collaboration between Welfare and Advocacy Organisations: Learning from the Experiences of Domestic Violence Survivors." *Families in Society* 88 (3): 475–484.

Pyles, L. 2007. "The Complexities of the Religious Response to Domestic Violence." *Affilia, Journal of Women and Social Work* 22 (3): 281–291.

Pyles, L., and K. M. Kim. 2006. "A Multilevel Approach to Cultural Competence: A Study of the Community Response to Domestic Violence Victims." *Social Work Abstracts* 24 (3): 87–95.

Saleebey, D. 2002. *The Strengths Perspective in Social Work Practice.* Boston: Allyn and Bacon. Third edition.

Slabbert, I. 2010. The Experience of Low-income Female Survivors of Domestic Violence, PhD thesis. Stellenbosch: University of Stellenbosch, Department of Social Work.

Slabbert, I. 2014. "Against the Odds: Strengths Displayed by Abused Women." *Social Work/Maatskaplike Werk* 50 (2): 256–267.

Strydom, H. 2013. "An Evaluation of the Purposes of Research in Social Work." *Social Work/Maatskaplike Werk* 49 (2): 149–164.

Strydom, H., and C. S. L. Delport. 2011. "Sampling and Pilot Study in Qualitative Research." In *Research at Grassroots: For the Social Sciences and Human Service Professions*, edited by A. S. de Vos, H. Strydom, C. B. Fouché, and C. S. L. Delport, 390−396. Pretoria: Van Schaik. Fourth edition.

Thyer, B. A. 2012. "The Scientific Value of Qualitative Research for Social Work." *Qualitative Social Work* 11 (2): 115–129.

Trotter, J. L., and N. E. Allen. 2009. "The Good, the Bad and the Ugly: Domestic Violence Survivors' Experience with their Informal Social Networks." *Community Psychology* 43 (4): 221–231.

United Nations (UN). 1992. Committee on the Elimination of Discrimination against Women, No. 19: Violence against Women, A/47/38 11 January. United Nations General Assembly Resolution 48/104. www.un.org/documents/ga/res/48/a48r104.htm (accessed 5 November 2014).

Wahab, S. 2005. "Motivational Interviewing Holds Potential for Practice with Survivors of Domestic Violence." *Affilia, Journal of Women and Social Work* 20 (1): 34–42.

Warrener, C., J. L. Postmus, and S. McMahon. 2013. "Professional Efficacy and Working with Victims of Domestic Violence or Sexual Assault." *Affilia, Journal of Women and Social Work* 28 (2): 194–206.

Whittaker, A. 2009. *Research Skills for Social Work.* Great Britain: Learning Matters, Ltd.

Wright, R., P. Kiguwa, and C. Potter. 2007. "The Significance of Sheltering in the Lives of Four Women Affected by Abusive Relationships." *South African Journal of Psychology* 37 (3): 616–637.