

University of Nebraska - Lincoln

DigitalCommons@University of Nebraska - Lincoln

Open Access Theses and Dissertations from the
College of Education and Human Sciences

Education and Human Sciences, College of (CEHS)

7-1-2009

Beyond barriers: A phenomenological study of women reporting intimate partner violence in college

Megan Watson

University of Nebraska at Lincoln, mewatson@unlserve.unl.edu

Follow this and additional works at: <http://digitalcommons.unl.edu/cehsdiss>



Part of the [Education Commons](#)

Watson, Megan, "Beyond barriers: A phenomenological study of women reporting intimate partner violence in college" (2009). *Open Access Theses and Dissertations from the College of Education and Human Sciences*. Paper 43.
<http://digitalcommons.unl.edu/cehsdiss/43>

This Article is brought to you for free and open access by the Education and Human Sciences, College of (CEHS) at DigitalCommons@University of Nebraska - Lincoln. It has been accepted for inclusion in Open Access Theses and Dissertations from the College of Education and Human Sciences by an authorized administrator of DigitalCommons@University of Nebraska - Lincoln.

BEYOND BARRIERS: A PHENOMENOLOGICAL STUDY OF WOMEN
REPORTING INTIMATE PARTNER VIOLENCE IN COLLEGE

By

Megan Elizabeth Watson

A DISSERTATION

Presented to the Faculty of

The Graduate College at the University of Nebraska

In Partial Fulfillment of Requirements

For the Degree of Doctor of Philosophy

Major: Psychological Studies in Education

(Counseling Psychology)

Under the Supervision of Professor Roger Bruning

Lincoln, Nebraska

July 2009

BEYOND BARRIERS: A PHENOMENOLOGICAL STUDY OF WOMEN
REPORTING INTIMATE PARTNER VIOLENCE IN COLLEGE

Megan Elizabeth Watson, Ph.D.

University of Nebraska, 2009

Advisor: Roger Bruning

The purpose of this qualitative study was to explore the experience of intimate partner violence and help-seeking in college women. This study used a phenomenological approach and qualitative interviews to elicit descriptions from a sample of five college women who had been in abusive relationships and had subsequently sought counseling. These were undergraduate women who had experienced abuse while in college and had recently been or were currently in counseling. Themes from the analysis of the participant interviews highlight the individual experiences of intimate partner violence as well as bring to light the experience of intimate partner violence in the context of college life. Textural themes include (a) shame and embarrassment; (b) isolation; (c) being controlled; (d) distress; (e) help-seeking; and (f) helpful counseling. Structural themes include (a) impact on academic performance; (b) impact on overall college experience; (c) impact on functioning in college setting; and (d) suggestions for administrators. These themes provide valuable information to the field of psychology in terms of the implications of intimate partner violence in a college woman's life as well as how to facilitate and provide services to this population. Further implications for mental health professionals and those on college campuses include prevention strategies and beneficial responses to

these situations from the women themselves. Limitations of the study, recommendations for clinical practice, future directions and the researcher's reflections are also included.

ACKNOWLEDGEMENTS

I want to take this opportunity to thank those who have supported me throughout the dissertation process. The creation, execution, and completion of this research study has been affected by many people in my life. I want to start by thanking my doctoral committee. The chair of my committee, Roger Bruning, has supported me throughout my graduate career. I appreciate all of the opportunities he has provided me including his willingness to step up to be my chair in the past few months. His wisdom, encouragement and time have been much appreciated. Michael Scheel has been an important part of my doctoral career. I have learned a lot from him through course work, supervision and mentorship. I have appreciated Doug Kaufman's willingness to step up and fill in on my committee in the past few months. He has been accommodating and supportive at a crucial time. My outside member, Helen Moore, has been able to lend a unique voice to my dissertation study which I have really valued. It is also important to acknowledge my past chair, Oksana Yakushko. She assisted me with the conception and proposal of this study and aided in the development of my research and clinical skills. Most importantly she continually reminded me of what is important in life and how to have good balance. Several people have been supportive and integral in my development as a psychologist. I want to thank Maria Prendes-Lintel for all that she has done for me personally and professionally. There are many people in the Counseling Psychology program at UNL whose assistance and support I appreciate. I want to especially thank my peers in the program, I am grateful for their support and feel that I have made some very special friends along the way. I also want to thank all of those at the Center for Instructional

Innovation, FIRST Project, and CAPS who have aided me on my journey; I appreciate all of them.

I want to say a special thank you to those who provided their stories and experiences and made this study possible. My participants were willing to give their time and to share what they had been through to aid in my understanding of this phenomenon. Without them, I would not have been able to gather the rich data that made this research study more meaningful for me and the field of psychology.

It is most important to express my appreciation to those in my personal life who have supported me. First, I must express my most heartfelt appreciation to my husband. Bob has been there for me throughout this process with love, support, laughter and a lot of fabulous food. I could not have gotten through this without him. My mother, father and brother have been a loving and supportive influence throughout my life. My mother has been encouraging with her words as well as her pen. My father has been willing to lend his support in many ways and my brother Erik has kept me laughing. I dedicate this dissertation to my brother Adam whom I miss very much. I believe he would be proud and highly amused that anyone would call me doctor. Erik's wife Dana, all of my extended family, Bob's family, and all of our friends have all been there for me, not just during this time but always. I appreciate them all for what they do and how they have helped. I know that there are many people who have helped me get this far and I hope that they know how much they mean to me and how much I appreciate them.

TABLE OF CONTENTS

CHAPTER I: INTRODUCTION.....	1
Philosophical Foundations.....	4
Research Questions.....	5
CHAPTER II: REVIEW OF LITERATURE.....	7
Understanding Intimate Partner Violence.....	7
Prevalence.....	7
Etiology and Theory.....	9
The Nature of Intimate Partner Violence.....	12
Psychological Effects of IPV.....	19
Physical Effects of IPV.....	21
Counseling and Intimate Partner Violence.....	24
Benefits of Counseling.....	24
Counseling Utilization.....	25
Barriers to Counseling.....	26
Understanding Intimate Partner Violence in College.....	28
Prevalence of IPV in Youth and College Populations.....	28
Etiology and Theory of Dating Violence.....	31
The Nature of IPV in College.....	34
Consequences of IPV in College.....	39
Counseling and IPV in College.....	40
Conclusions.....	41
CHAPTER III: METHODOLOGY.....	43
Phenomenological Approach.....	43
Sampling Method.....	48

Data Collection	49
Interview Questions	50
Participants.....	51
Data Analysis	52
Verification Procedures	58
Ethical Considerations	60
Investigator	61
CHAPTER IV: PRESENTATION OF DATA.....	64
Individual Descriptions.....	65
Shorti.....	65
Textural Description of Shorti’s Experience	65
Structural Description of Shorti’s Experience	67
The Essence of Shorti’s Experience	67
Jane	68
Textural Description of Jane’s Experience	68
Structural Description of Jane’s Experience.....	70
The Essence of Jane’s Experience	70
Dawn.....	71
Textural Description of Dawn’s Experience.....	71
Structural Description of Dawn’s Experience	73
The Essence of Dawn’s Experience.....	73
Allison.....	74
Textural Description of Allison’s Experience	74
Structural Description of Allison’s Experience	76
The Essence of Allison’s Experience	76

Francis.....	77
Textural Description of Francis’s Experience	77
Structural Description of Francis’s Experience	78
The Essence of Francis’s Experience	79
Composite Textural Descriptions	80
Shame and Embarrassment.....	80
Isolation.....	83
Being Controlled.....	85
Distress.....	86
Help-seeking	87
Helpful Counseling.....	89
Composite Structural Descriptions	90
Impact of Academic Performance	90
Impact on Overall College Experience	93
Impact on Functioning in College Setting	94
Suggestions for Administrators.....	95
Group Essence	97
CHAPTER V: DISCUSSION AND CONCLUSIONS	98
Discussion.....	98
Limitations	113
Implications for Clinical Practice	114
Recommendations for Future Research.....	116
Closing Comments.....	117
REFERENCES	119
APPENDICES	152

List of Tables

Table 1	Textural Themes and Invariant Constituents	81
Table 2	Structural Themes and Invariant Constituents	91

List of Figures

Figure 1	Data Analysis and Description.....	57
----------	------------------------------------	----

List of Appendices

Appendix A	Recruitment Flyer	152
Appendix B	Phone Interview	154
Appendix C	IRB Client Informed Consent	156
Appendix D	Consent to Record.....	159
Appendix E	Qualitative Interview Protocol.....	161
Appendix F	List of Resources.....	164
Appendix G	Transcription Confidentiality Agreement.....	166
Appendix H	Member Checking Instructions.....	168
Appendix I	List of Initial Themes.....	170

Chapter I

Introduction

Each year at least 4 million women are victimized by their intimate partners. Approximately 2 million of these women suffer serious injury, and 3,000 suffer fatal injuries. These figures equate to an annual victimization rate of 44.2 intimate partner physical assaults per 1,000 US women age 18 years and older (Tjaden & Thoennes, 2000). To highlight the seriousness of the situation, Russell (1995) reports that 30% of women killed in the United States die at the hands of a husband or boyfriend. Most clinical researchers believe that intimate partner abuse tends to be underreported, and to date, the research on partner abuse remains difficult to interpret because of the underreported nature of this problem (Miller, Veltkamp, & Kraus, 1997). Given the high probability that any female client may have experienced intimate violence, however, it is essential that mental health professionals understand the nature of intimate partner violence (IPV) and receive appropriate training in assessing for this type of violence (Campbell, Raja, & Grining, 1999; Douglas & Strom, 1988).

Intimate partner violence may not be the stated reason for seeking treatment. If a woman is not in crisis, she may hope to maintain silence about the violence (Wolkenstein & Sterman, 1998). Browne (1991) indicates that it is often difficult for clients to disclose violence. Being labeled or labeling oneself as a victim is difficult under any circumstance and can be even more difficult when violence has occurred within intimate relationships, particularly for young women. Victims may be reluctant to disclose for a variety of reasons, including believing that disclosure represents a violation of a code of loyalty or fearing considerable danger or retaliation by the perpetrator (Enns, Campbell, &

Courtois, 1997). Victims may not even identify themselves as victims and so do not seek out supportive resources (Fass, Benson, & Leggett, 2008).

In a 12-city femicide study, Campbell (2004) found that the majority of women who were killed by their intimate partner were seen in the criminal justice, health, social services, or shelter systems during the year before they were killed. This finding suggests that, in many cases, there was an opportunity for professionals to provide an intervention, such as safety planning, with these women. This study also indicated that approximately 50% of the women who were killed or almost killed by their intimate partner did not accurately assess the seriousness of their situation. This finding indicates that women who have been abused would benefit significantly from talking with a professional who can help them to perceive their risk more accurately (Campbell, 2004). Women who are in these situations are at times unable to understand or admit how precarious their circumstances are. As a result, it is imperative that mental health practitioners ask the right questions and assess for IPV in all women, even when it is not their presenting problem. One way of understanding how best to facilitate this process is to talk with survivors who have been through it and to gain insight from their experiences.

Graduate programs have frequently been deficient in providing training relevant to the diagnosis and treatment of all forms of trauma and interpersonal victimization (American Psychological Association, 1996; Pope & Feldman-Summers, 1992; Walker, 1989). Campbell, Raja, and Grining (1999) conducted research on the training of mental health professionals in the area of IPV. Their study included a sample of 415 mental health professionals. Their questionnaire was divided into two sections, one to assess the participants' training on violence against women and the second to rate their degree of

professional experience counseling survivors of violence. Results showed that 14% of the sample had received no formal training on sexual assault, domestic violence, or incest. Of the untrained group, 70% had current client caseloads, 43% had treated sexual assault survivors, 48% had treated intimate partner violence survivors, and 57% had treated incest survivors. The results of this study suggest that there are professionals who lack the appropriate training for this type of work (Campbell, Raja, & Grining, 1999).

Information on the experiences of women who have been in violent relationships and their decision to talk to a professional will be invaluable for this population of professionals who will be or are working with this population.

Little also is known about the circumstances of IPV in college environments. Women who experience this type of violence generally do not report what has happened to them or talk about the violence they have experienced. In order to gather this type of data, it is necessary to elicit the stories of those who have experienced the phenomenon and had the courage and strength to seek out professional help. By obtaining these women's stories of violence and the how and why of their disclosure to a professional, those in the mental health and college administration fields can better understand how to serve these women. The current qualitative phenomenological study gathered information from college women about the violence they experienced, how this violence affected their academic life, and their process of talking with a professional about that relationship. The term intimate partner violence will be used rather than domestic violence. While similar to domestic violence, it differs in that IPV occurs within the confines of any romantic or intimate relationship, not just between married persons (Bowman & Morgan, 1998). Due to the fact that the percentage of women to men being

victimized in violent relationships is between 90-95% female victims, this study focused on female victims (Watkins, 2005). This study focused on traditional age college women as the circumstances and experiences of nontraditional college women may differ significantly. The results of this exploration will be shared with those in the community in an effort to provide the field with a better understanding of IPV in college and what helping professionals can do to combat the barriers to disclosure.

Philosophical Foundations

A paradigm or worldview is a set of beliefs that guide action (Guba, 1990). Social constructivism is the worldview approach used in this study. In this worldview, individuals seek to understand the world in which they live and work, leading the researcher to look for complex observations rather than narrower meanings. The goal of research is to rely on the participants' views of the circumstances being studied. Often these subjective meanings are constructed socially and historically and not simply imprinted on individuals, but are formed through interaction with others and through historical and cultural norms (Creswell, 2007; Lincoln & Guba, 2000). The constructivist or interpretive approach posits that there are multiple, equally valid social realities. Knowledge or meaning emerges through interaction between persons or environments and is described as co-constructed. Researcher values are assumed to influence the research process, although the researcher is expected to examine and understand how his or her values, personal beliefs, and characteristics have influenced the co-construction of meaning (Haverkamp & Young, 2007). The story and the context become the data that inform the research study.

The social constructivist paradigm lends itself to phenomenological study, in which individuals describe their experiences (Moustakas, 1994). Research questions are answered by eliciting the stories of those who have lived the phenomena. As a future counseling psychologist I appreciate and am in a unique position to be able to elicit people's stories from them. I value individual's lived experiences as a vital resource in understanding phenomena that are as complex as the people who experience them. This study elicited personal experiences of college women who have experienced intimate partner violence and have talked with a helping professional about the violence.

Research Questions

The main questions of inquiry are:

1. How do traditional age women in college experience intimate partner violence?
2. What enabled these women to seek mental health care in light of that violence?

Sub-questions include:

1. How does being in a violent relationship affect women's academic life?
2. Were there factors unique to college life that facilitated or hindered the abuse?
3. Does the experience of IPV differ for women in different years of college?
4. Where there specific facility or helper factors that facilitated disclosure?
5. Did the helping professional ask specifically about intimate partner violence?
6. What was happening in the women's lives when they decided to seek help?
7. What was the experience of disclosure like for them?

8. What advice would they give to helping professionals and administrators on college campuses regarding prevention and mental health services?

Chapter II

Review of Literature

Understanding Intimate Partner Violence

Prevalence

More than a million incidents of intimate partner abuse are reported to law enforcement officials each year in the United States (Rennison & Welchans, 2000). According to data from the National Violence Against Women Survey (NVAWS), close to 1 in 4 women report being raped and/or physically assaulted by a current or former spouse, cohabiting partner, or date at some time in their lifetime (Tjaden & Thoennes, 2000). A national survey conducted in the United States revealed that one of every eight marriages experienced some form of physical violence by the husband annually, and nearly twice that report at least one physically violent incident over the course of marriage (Straus & Gelles, 1990).

Survey data indicates that 45% of women versus 20% of men reported fear of serious injury or death at the hands of an intimate partner. In addition, women sustained injury, required medical treatment, were hospitalized, sought therapy, lost work time, contacted the police, and obtained protection orders at greater rates than did men (Tjaden & Thoennes, 2000). Although less likely than males to experience violent crime overall, females are eight times more likely than males to be assaulted by an intimate partner (McFarlane, Willson, Malecha, & Lemmey, 2000). Highlighting the most serious form of intimate partner violence, Puzone, Saltzman, Kresnow, Thompson, & Mercy (2000) report that 30% to 50% of female murder victims are killed by an intimate partner. Studies have found that 65% to 80% of victims of intimate partner femicide (the murder

of a woman) previously were abused by the partners who killed them (Campbell, 2004; Sharps, Koziol-McLain, Campbell, McFarlane, Sachs, & Xu, 2001).

Estimates of prevalence are known to be low, partially due to the nature of IPV, which typically occurs in private and is often not reported to the police by the victim (Taylor & Sorenson, 2005). According to some estimates, only about half of intimate partner violence incidents are ever reported to police (Langan & Innes, 1986). Figures that are presented are generally based on surveys that further represent marked underestimates of the problem. National estimates are generally derived from self-reports obtained through telephone or door-to-door interviews. Such surveys typically do not include low income households, those who do not speak English fluently, those whose lives are especially chaotic, military families living on base, and individuals who are hospitalized, homeless, institutionalized, or incarcerated at the time the survey is conducted (Browne, 1993).

Additionally, few studies employ consistent definitions of IPV or allow for the comparison of different types of IPV, much less their occurrence across age, sex, and racial/ethnic categories or diverse communities (DeKeseredy & Schwartz, 2001; National Research Council, 1996). Many psychological forms of abuse also may go undetected by surveys that focus on severe forms of sexual assault and physical violence because often psychological abuse cannot be defined in terms of specific behaviors but depends on the context and goals of those behaviors (Neufeld, McNamara, & Ertl, 1999). The terms abuse and violence are not conceptually equivalent, although they are often so used in the literature, confusing the question of what is actually being studied (Marshall & Rose, 1987). While the field is still struggling to find the best way to understand the prevalence

of IPV, it is clear that this form of violence against women is a significant issue that deserves attention.

Etiology and Theory

Most researchers agree that there is no single factor that accounts for partner violence (for review, see Carlson, Worden, van Ryne, & Bachman, 2003) and that there may be different types of violent people and violent relationships (e. g., Holtzworth-Munroe, & Stuart, 1994; Johnson, 1995; Saunders & Hamill, 2003). Feminist scholars contend that issues of gender and power are the main cause of IPV (Dobash & Dobash, 1979; Stark & Flitcraft, 1991; Yllo, 1993) but sociologists from other traditions including family sociology argue that patriarchy is just one variable in a complex list of causes (Gelles, 1993; Straus, Gelles, & Steinmetz, 1980). Salazar and Cook (2002) contend that in the past decade, the United States has been moving toward an ecological understanding of the nature and scope of violence. Researchers have indicated that violence occurs at many levels, including the levels of societies, families, relationships, individual perpetrators and victims (Carlson, 1984; Hotaling & Sugarman, 1986).

In the past decade, explanations for sexual and physical aggression that blamed the victim have become less pervasive (Klein, Campbell, Soler, & Ghez, 1997). Advocates, researchers, service providers, and survivors celebrated the historic passage of the Violence Against Women Act of 1994, the first federal legislation specifically focused on crimes against women. State level reforms have also become common across the country. By 1999, pro-arrest and prosecutorial empowerment strategies, full faith and credit for protection orders, domestic violence courts, batterer treatment programs, and coordinated community interventions became prevalent (Epstein, 1999; Feder, 1997;

Mills, 1998). Increased awareness and the recognition that intimate partner violence is a community issue led to changes in law and practice that were beneficial to victims. Researchers who study IPV also offer a broader array of specific theories about why violence between intimates exists, which allows for a more comprehensive understanding of contributing factors. While individual variables are important and will be touched on, the focus here will be on environmental and contextual explanations of IPV.

One of the theories about why IPV occurs is the Family Violence approach. Family violence researchers suggest that sociodemographic factors of structural inequality influence the incidence of intimate partner assaults (e.g., Anderson, 1997). Sociologists, utilizing national surveys, find strong relationships between intimate partner violence and age, cohabiting status, unemployment, and socioeconomic status that suggest that social structure may incite violence (DeKeserdy, 1995; Stets, 1991; Straus, Gelles & Steinmetz, 1980). A related theory that has gained support is Goode's Resource Theory (Goode, 1971), which suggests that violence is an ultimate resource used to derive power within relationships. Goode argued that individuals lacking other means of power, such as income or professional status, are more likely to rely on violence to achieve greater power within the relationship. From this theoretical perspective, it is the power differences between partners, rather than individual sociodemographic position, that influence the use of violence.

Feminist scholars argue that the cause of partner violence is based in gender and power and represents men's active attempts to maintain dominance and control over women (Yllo, 1993). Feminist scholars focus on the interplay between cultural constructs of femininity and structural conditions in the environment (Walker, 1984). Walker,

(1985) has suggested that rigid sex role stereotyping during childhood and in marriage or other intimate relationships could cause distortions in the way women respond to violent behavior. Women are taught to be dependent on others for their sense of security and well-being, and to accept the responsibility for keeping intimate and family relationships intact. Gender Theory proposes that violence is a resource for constructing masculinity, and thus the use of violence has different meanings for women and men (Connell, 1987; Ferree, 1990; West & Fenstermaker, 1995). Additionally, Gender Theory proposes that intimate partner violence will be affected by social processes that sustain men's societal dominance, such as cultural support for unions in which men have greater resources than their female partners (Anderson, 1997).

Theoretical explanations for the relationship between masculinity and partner violence have focused on gender role socialization (Crowell & Burgess, 1996; Harway & O'Neil, 1999; Thorne-Finch, 1992). Some researchers have theorized that the process of masculine socialization and internalization of cultural expectations may produce a restriction of vulnerable emotions (Brody 1985; Levant, 1996). By early childhood and then consistently into adulthood, males are found to be less emotionally expressive than females. Because anger is one of only a few emotions that masculine-socialized men see as acceptable to express, it may be the most common emotion expressed during periods of distress. Men who rigidly adhere to gender norms for emotional expression are likely to convert a variety of emotions, such as fear and helplessness, into anger. Thus, gender rigidity increases the likelihood that emotions will be suppressed and converted into anger, a dynamic that is likely to increase acts of violence (Lisak, Hopper, & Song, 1996).

Few studies have integrated structural theories of violence and feminist scholar's position about gender and power (e.g., Stark & Flitcraft, 1996). However, a growing body of research on gender suggests that a more thorough understanding of gender relations must include simultaneous analyses of power structures formed around race or ethnicity, social class, and sexuality (e.g., Connell, 1987). Studies indicate that cultural constructions of masculinity and femininity are not the same for everyone. Rather, meanings of masculinity and femininity may differ among racial, ethnic, or socioeconomic groups (e.g., Messerschmidt, 1993). For example, Stark and Flitcraft (1996) suggest that middle-class professional men maintain power and control in their household through control of economic resources, whereas these sources of power may not be available for working-class men as women entered the labor force. Thus, the significance of gender, in cases of intimate partner violence may be linked to racial or socioeconomic inequality (Anderson, 1997). It is important to understand, as much as possible, the reasons that IPV exists and is maintained in order to effectively work with survivors. Efforts to debunk the myths that tended to blame the victim have served to better inform communities and providers. More research in the field is necessary to better understand IPV and the factors that facilitate disclosure and help-seeking.

The Nature of Intimate Partner Violence

Intimate partner violence is defined as physical or psychological maltreatment perpetrated by men against women to gain control, power or authority (American Psychological Association, 1996). Physical and sexual assaults, or threats to commit them, are the most apparent forms of IPV and are usually the actions that allow others to become aware of the problem (National Center on Domestic and Sexual Violence

(NCDSV), 2004). Regular use of other abusive behaviors by the abusive partner, often reinforced by one or more acts of physical violence, makes up the larger picture of abuse. Although physical assaults may occur only once or occasionally, they instill threat of future violent attacks and allow the abuser to take control of the woman's life and circumstances (Dutton, 1992).

Abuse can encompass a variety of tactics including; intimidation, emotional abuse, isolation, minimizing, denying and blaming, manipulation by using children, economic abuse, male privilege, and coercion and threats (Pence & Paymar, 1986). Psychological abuse includes threats of physical harm to the woman, her children, or family; behaviors that denigrate her character, her ability to function in job-related, parenting, or other roles; and behaviors that suggested that her needs, wishes, or feelings are not worthy of consideration (Kasian & Painter, 1992). Abusive relationships have frequently been described as coercive, fear producing and unpredictably violent (Browne, 1987; Murphy & Cascardi, 1993; Tolman, 1989; Walker, 1984). Once the violence starts, it generally continues in a cyclical fashion.

Walker (1984) identified the pattern referred to as the "cycle of violence." The cycle of violence can happen many times in an abusive relationship, taking from a few hours to a year or more to complete. Phase One is the tension building phase, which can involve the abuser picking fights, acting jealous and possessive, criticizing and threatening, drinking and using drugs, and/or being moody and or generally unpredictable. Phase Two is the crisis phase and involves the abusive act, which can include verbal abuse, sexual abuse, physical abuse, emotional abuse, increased control over money, restraining the partner, and/or destroying property. Phase Three is the

calmer phase or what has been called the honeymoon phase, in which the abuser will ask for forgiveness, make promises, stop drinking or using drugs, go to counseling, be affectionate, or simply refrain from abuse (NCDSV, 2004). In all phases of the cycle of violence the victim is being controlled by the perpetrator (Ganley, 1989). Each of these stages involves stress and tension for the victim. Despite the fear and terror, many women feel that they are unable to leave the situation.

Many myths exist concerning why women stay in abusive relationships. Most of these myths have their basis in attempting to understand the individual characteristics of the woman (Anderson, Gillig, Sitaker, McCloskey, Malloy, & Grigsby, 2003). The general public tends to misunderstand violent relationships and why women stay. Worden and Carlson (2005) found that two thirds of those surveyed reported that they believed that women could find ways of leaving abusive relationships if they really wanted to. In the same study it was found that one in four respondents believed that some women wanted to be abused, and many respondents agree that some violence follows women's mistreatment or provocation of their partner. Research in the field discredits these myths. Brown and Ballou (1992) suggest that IPV is a strategy used by the abuser to subjugate the victim. Examining only the relationship or the victim's behavior directs attention away from the responsibility of the abuser. Environmental barriers as well as tactics by the abuser must be explored.

Economic dependence, greater commitment to the relationship, and having been abused as a child are all negatively associated with the propensity to leave (Gelles, 1987; Strube & Barbour, 1983; 1984). Ferraro and Johnson (1983) noted six rationalizations that were identified by survivors: the salvation ethic (need to care for the abuser); a

commitment to religion or tradition; denial that the abuser could control his behavior, that their injuries were real, or that they were blameless victims; and the lack of knowledge of or inability to see alternatives. Immobilization can result from isolation, depression, substance abuse, and economic control in violent relationships (Davis, 1997; Farrell, 1996; Lempert, 1994).

Families are often affected by the loss of financial support because of the women's immediate injuries and violence-related health outcomes (Brush, 2000). Nonlethal intimate violence results in financial losses to women conservatively estimated at \$150 million per year (Greenfield, 1998). Victims have reported that they lack support in the workplace (Barnett, 2001). Only a scattering of corporations and businesses have sponsored programs to benefit abused women. Most executives and managers in corporations have not addressed the effects of IPV (Bryant, Eliach, & Green, 1991). Women and their children struggle to live independent of their abuser after fleeing, in part because of insufficient community living skills (Gorde, Helfrich, & Finlayson, 2004). Deficits often result in a poor work history, financial dependence on the abuser, and an inability to find safe, affordable housing (Brandwein, 1999; Krishnan, Hilbert, & Pase, 2001). Many women must deal with excess debt or economic losses, perhaps accrued in her name by her abusive partner (Dutton, 1992). Nearly 50% of homeless individuals are women who are victims of IPV (Mullins, 1994). This leaves women with a difficult decision to make between her safety and her own and possibly her children's basic needs.

A victim often stays with her abuser because she fears he will respond with even more violence (Sullivan, Basta, Tan, & Davidson, 1992). Women who try to leave may

place their own lives and those of their children at risk (Morton, Runyan, Moracco, & Butts, 1998). Many women suffer increased violence once they leave an abusive relationship. In the United States, separated or divorced women are about 10 times more likely than married women to be victims of violence by a spouse or ex-spouse (Rennison & Welchans, 2000). Nearly three quarters of emergency room visits by women who have been abused occur after separation (Stark & Flitcraft, 1998) and, of the women who are killed by their abuser; approximately 75% lose their lives after separation (Horn, 1992).

One reason that many women do not leave these situations is attributed to family and social role expectations. Female socialization in a patriarchal society relegates her to the role of primary caretaker of her relationships and her family (Debold, Wilson, & Malave, 1993). The victim's role as caretaker puts the blame on her for the failing relationship. This role expectation adds to the already burdening blame that many abusers place on their victims. Internalizing this blame makes it difficult to escape, as the victim is expected to repair the damage. Victims who feel they have no other alternatives than to remain in the relationship must place a high value on the promises and apologies, often provided during the honeymoon phase, by their abuser (Anderson, et al., 2003). Women who are trying to keep their family together may feel that they are unable to leave for fear of losing their children, believing that reporting their own victimization might trigger an investigation by child protective services (Barnett, 2001).

Individual and societal values encourage the victim to love her abuser through the difficult times and many times lead her to believe that her children would suffer if she leaves (Anderson et al., 2003). Kearney (2001) found that women held deeply internalized desires for romantic love, commitment, and the security of economic shelter

and a two-parent family for their children, and they accepted the accompanying social and cultural expectations of care giving and self-sacrifice. These women may feel that in order to stay true to their role of wife, in the societal and biblical sense, that they must remain in the relationship regardless of the danger to themselves. According to some religious leaders, a few slaps and pushes or male domination of a wife and children do not constitute an adequate rationale for breaking up a home or asking for a divorce (Alsdurf & Alsdurf, 1988). This leaves these women with few alternatives.

People often question why victims do not report abuse to the police. Intimate partner violence often goes unreported (Fleury, Sullivan, Bybee, & Davidson, 1998). Roy (1977) found that about one third of her sample of currently or formerly married women, who had called a domestic violence hotline, had never sought police help. Data from the National Crime Survey (NCS) estimated that 52% of domestic violence incidents were reported to the police (Langan & Innes, 1986). In an analysis of more recent NCS data, 56% of female victims of intimate male violence indicated that the police had been contacted about a particular incident (Bachman & Coker, 1995). Fleury, Sullivan, Bybee and Davidson (1998) found that only 24% of the women sampled reported having contact with the police as often as they needed it in the prior 6 months. Reasons for this underreporting of violence are complex; 90% of these women gave multiple reasons for not calling. A small number of women (3%) indicated they did not call because of a desire to keep the matter private; nearly all the women indicated situational barriers to calling. Many women were physically prevented from calling the police; others believed calling the police would be either ineffective or would make matters worse. Hirschel, Hutchison, and Dean (1992) have argued that arrest alone is ineffective in stopping

violence because it is rarely accompanied by an extended time in jail. Others have advocated overnight incarceration as a more powerful deterrent than arrest alone (Berk & Newton, 1985; Dutton, 1987).

Research has shown that women are actively engaged in efforts to stop the abuse (Gondolf & Fisher, 1988; Schwartz, 1988). These efforts are often hampered by a lack of social support, medical services, child care, and other community services (Henning & Klesges, 2002). Some women who are able to leave are forced to return when outside opportunities are inadequate to sustain them. Anderson (2000) found that women who are unable to find a job and a place to live quickly may return to the abuser. Also, women with children are more likely to return due to a lack of child care or fear that they will not be able to provide for their children. In a qualitative investigation, Kearney (2001) found that women who did leave found the social and personal aspects of their lives difficult. Women reported that abusers became less predictable; their desire for vengeance and retaliation escalated the threat of serious or fatal injury. These women found that personal and socioeconomic resources for rebuilding their lives were depleted. They reported feeling hampered by the emotional traumas of leaving in a state of still-diminished selfhood and fearful about removing children from their home, usually to a shelter in which they had very little autonomy, money, or confidence (Kearney, 2001). Often victims are unable to provide for themselves and their children without emergency assistance and many who have such assistance are still in financial trouble. Additionally, many victims do not know how to access emergency assistance and funds (Buel, 1999). Women who have endured intimate partner violence have struggled with many barriers, in their own home and in the community. And while they are often viewed as passive, it

is clear from the research that these women are actively surviving in difficult circumstances. Further complications for these women include the psychological and physical effects of long-standing abuse.

Psychological Effects of Intimate Partner Violence

In light of the experience of intimate partner violence described above, it is not surprising that many women who are victims of IPV suffer psychological effects. The experience of the abuse and the tension associated with not knowing when the next assault will occur and the relief often experienced in the honeymoon phase has been described as living in a constant flux of emotions. Research has tended to reveal a dose-response relationship in which the extent of abuse is positively related to mental health difficulties (Koss, Bailey, Yuan, Herrera, & Lichter, 2003), although even low levels of abuse are associated with depression and other mental health concerns (Carlson, McNutt, & Choi, 2003). Fear, hypervigilance, and lack of trust are hallmarks of long-standing abuse (Walker, 1994). Survival tactics are learned by the victim as a matter of necessity. Fear of mate and fear of not being able to survive alone have been noted. Some victims go so far as to report that they felt safer in staying, as they knew what the abuser was doing and where he was (Anderson, et al., 2003).

Victims of intimate partner violence often encounter long-term emotional and psychological symptoms that affect their ability to perform routine tasks effectively (Gorde, Helfrich, & Finlayson, 2004). Negative psychological outcomes associated with traumatic event exposure include higher risk of psychiatric disorder (e.g., Kilpatrick, Saunders, Best, & Von, 1987) including posttraumatic stress disorder (PTSD; Kilpatrick, Ruggiero, Acierno, Saunders, Resnick, & Best, 2003) major depressive episode (MDE;

Kessler, Davis, & Kendler, 1997) and substance abuse (Kilpatrick, et al., 2003). More specifically, IPV is associated with depression, anxiety, dissociation, personality disorders, psychosexual dysfunction, obsessive-compulsive disorder, substance abuse, somatization, suicide and PTSD (Abbott, 1997; Alpert, 1995; Campbell & Lewandowski, 1997; Gerlock, 1999; Gleason, 1993; Gorde, Helfrich, Finlayson, 2004). Research indicates that PTSD is experienced by 55% to 74% of victims of intimate partner violence (Astin, Lawrence, & Foy, 1993; Woods, 2000). High arousal symptoms are common, including anxiety, phobias, sleep disorders and nightmares, panic attacks, nervousness, heart palpitations, hypervigilance, and hypersensitive startle responses (Walker, 1994).

Women who are victims of violence experience persistent and generalized symptoms of anxiety (Ellis, 1983; Hilberman & Munson, 1978; Sales, Baum, & Shore, 1984). Symptoms of anxiety may include those associated with panic disorder (e.g., unsteady feelings, trembling or shaking, exaggerated startle response, choking, sweating, fear of going crazy or doing something uncontrolled), generalized anxiety disorder (e.g., nausea, diarrhea, or other abdominal distress, dry mouth, or cognitive impairment), or agoraphobia (Saunders, 1990). Difficulty getting to sleep or staying asleep is common for trauma victims (Figley, 1986).

Subjective feelings of depression and sadness may result from the abused woman's social isolation and the restriction of rewarding activities with her abusive partner (Lewinsohn, 1975). The woman who experiences abuse often gives up enjoyable or rewarding activities as an attempt to reduce the abuser's anger (Dutton, 1992). This loss of enjoyment may lead to feelings of hopelessness. Stark, Flitcraft, Zuckerman,

Grey, Robison, and Frazier (1981) found that of the women admitted to a hospital emergency room following suicide attempts, 29% were women who had been abused, half of whom had been assaulted that same day and 75% of whom had been assaulted within the prior six months. An assault by an intimate partner is a catalyst event for one of every four suicide attempts by all women and one in two attempts among black women (Stark & Flitcraft, 1988). The psychological scars that have been described here are often not visible, what may be visible to providers are the physical scars.

Physical Effects of Intimate Partner Violence

There are other effects, beyond the social, emotional and psychological. Many women suffer from the physical effects of the abuse. Examples of physical abuse include hitting, pushing shoving, punching, pounding, slapping, or use of a weapon or object to injure (Dutton, 1992). Psychological and physical abuse is associated with arthritis, chronic pain, migraines, speech disorders, sexually transmitted infections, ulcers, pelvic pain, intestinal problems (Coker, Smith, Bethea, King, & McKeown, 2000) and includes the injuries caused by the physical assaults that result in doctor's visits or hospitalizations (Crane & Costantino, 2003). Women who have been abused often report abrasions, lacerations, fractures, and dislocations (Kyriacou et al., 1999). A study by McKenzie, Burns, McCarthy, and Freund (1998) found that 26% of the respondents in an inpatient hospital population stated that they had been abused by a husband or partner. Nineteen of these 26 women reported having incurred contusions, 3 reported stabbings, 3 reported fractures, and 4 reported forced sexual contact. According to Shields, Resick, and Hanneke (1990), between 32% and 59% of women who have been abused are also

victims of sexual abuse, the rate of marital rape in the general population is estimated to be between 6% and 14%.

Head trauma is also a significant concern for these women. In a sample of 53 women who had been abused, 92% reported having received blows to the head in the course of their battering; 40% reported loss of consciousness (Jackson, Philp, Nuttall & Diller, 2002). Abusers will often target the woman's head, face, or neck in the form of head-banging, head and shoulder-shaking, and hair pulling; these assaults can result in traumatic brain injury (Muelleman, Lenaghan, & Pakeser, 1996). They may suffer neurological damage, with symptoms including headaches and disorganization (Deering, Templer, Keller, & Canfield, 2001). Traumatic brain injury due to repeated physical assaults may present as cognitive deficits (Jackson, Philp, Nuttall, & Diller, 2002). According to the National Institutes of Health (1999) Consensus Panel, long-term consequences of traumatic brain injury may include memory impairment; attention and concentration limitations; language deficits; and difficulties in problem solving, abstract thinking, insight, judgment, planning, information processing, and organization. Physical abuse can be debilitating for a women which may lead to more dependence on her abuser.

Pregnancy seems to be a period of increased risk of intimate partner violence for women. Studies have estimated that between 5.2% (Torres & Han, 2000) and 33.7% of pregnant women experience partner abuse (Huth-Bocks, Levendosky, & Bogat, 2002). Violence during pregnancy may have serious adverse consequences for both the mother and the child (Johnson, Haider, Ellis, Hay & Lindow, 2003). Research indicates that violence during pregnancy may be the result of increased jealousy and resentment toward the unborn child (Campbell, Oliver, & Bullock, 1993; Mezey, 1997). Bacchus, Mezey, &

Bewley (2006) found that pregnancy had a significant impact on the power dynamics of violent relationships and appeared to increase the victim's vulnerability to violence.

For women who have experienced abuse the escalation of continued violence brings with it the increased risk of lethality, for herself and for the abuser. Between 1980-1984, 10,521 women were killed by their abusive male partners (Browne & Williams, 1989), 65% to 80% of victims of intimate partner female murder were previously abused by the partners who killed them (Pataki, 2004; Sharps, Koziol-McLain, Campbell, McFarlane, Sachs, & Xu, 2001). On average, more than three women are murdered daily by their intimate partners (Bureau of Justice Statistics, 2001). Women who perceive their partner to be extremely dangerous are often correct about that perception; however, at least some of those who do not perceive their partner to be highly dangerous are underestimating their risk (Campbell, 2004). Murder-suicide is most likely to occur between husband and wife, girlfriend, or estranged partner (Stuart & Campbell, 1989). The wife as well as some or all of the children and /or other family members may be killed as well. The abusive partner may also target his own children for murder before taking his own life (Pagelow, 1990). Men tend to kill and be killed in far greater numbers than do women; however, women do at times kill their abuser. Studies indicate one third of the persons killed by spouses are husbands killed by wives (e.g., Browne, 1987). Campbell (1986) stated that when women do kill, they are more likely to be responding to, rather than initiating, violence. Douglas and Strom (1988) identified seven risk factors for lethality when the woman who has been abused ultimately is the one who kills the abuser. Risk factors include; frequency of violence, severity of injuries to the victim, man's threat to kill, woman's suicide threats, man's abuse of drugs, man's frequency of

intoxication, and the presence of forced/threatened sexual violence. At the point of lethality, men are almost at equal risk of death from the women they have abused as the reverse. These startling statistics highlight the need for effective services for survivors of IPV; however, these services are often underutilized or unavailable.

Counseling and Intimate Partner Violence

Benefits of Counseling

Research provides support for the efficacy of advocacy and counseling services for victims of intimate partner violence (e.g., Henning & Klesges, 2002). Findings suggest that psychoeducational, supportive counseling for abused women may be an effective approach for improving self-esteem, affect (anxiety, depression, and hostility), assertiveness, social support, locus of control, coping abilities, and self-efficacy (Cox & Stoltenberg, 1991; Mancoske, Standifer, & Cauley, 1994; Tutty, 1996; Tutty, Bidgood, & Rothery, 1993). Specifically, women who worked with an advocate reported less violence, were more successful in acquiring social services, and reported a higher quality of life, in the 2 years following initial contact (Sullivan & Bybee, 1999). Sullivan, Bybee and Allen (2002) found that women who received services experienced a reduction in depression and an increase in self-esteem.

Surveys indicate that crisis services, counselors, and support groups are seen as beneficial by most women who have been abused (e.g., Bowker & Maurer, 1986; Gordon, 1996; Hamilton & Coates, 1993). Women who receive advocacy services are more likely to seek and follow through with legal recourse (Weisz, 1999; Weisz, Tolman, & Bennett, 1998) and report greater success in acquiring resources and support than women who did not receive advocacy (Sullivan, Campbell, Angelique, Eby, & Davidson,

1994; Sullivan, Tan, Basta, Rumptz, & Davidson, 1992). Casework and group work have proven helpful to many survivors, particularly when performed by therapists trained in partner abuse (Horton & Johnson, 1993). Green (1998) suggests that there is evidence that disclosure of abuse to a supportive individual can lead to breaking the cycle of transmission of violence later in life. It is clear that counseling works; however, getting women to come in has historically been difficult.

Counseling Utilization

Despite the potential benefits of victim services, many abused women do not utilize the available services in their community (Henning & Klesges, 2002). Community-based counseling and support services, such as those offered in many shelters and victim advocacy programs, are used by only a small number of survivors. Gondolf (1998) found that only 7% of the victims in his multi-site program evaluation had ever gone to a shelter and one-quarter had participated in counseling that targeted the violence. Henning and Klesges (2002) found that of the female IPV victims, all of whom reported prior physical aggression by a current/former intimate partner; only 14.9% reported the use of formal counseling or supportive services to address their abuse. Horton and Johnson (1993) found that it took the average victim more than eight years of abuse in a relationship before she was willing to leave her partner; those survivors who ended the abuse and remained in relationships endured abuse for an average of 10 years. Despite this long-standing abuse these women were generally unwilling to disclose this abuse to a helping professional.

Barriers to Counseling

Goodstein and Page (1981) report that 65% of female victims of intimate partner violence have engaged in psychotherapy at some point in their past. Of those who sought help from a mental health professional, most did not return for a second visit. It was hypothesized that these clients may have decided not to return because they did not feel that the therapist was going to respond to the violence they were experiencing. Some clients may fear professional authority and power (Douglas, 1991). In addition, clients may believe that the therapist will investigate the family for the purpose of breaking it up if any violence is disclosed (Dersch, Harris, & Rappleyea, 2006).

Many abused women have chosen to conceal their abuse from health care providers, not only because of fear of retaliation from their abusers but also because of a perceived lack of interest or sympathy (Gerbert, Johnston, Caspers, Bleecker, Woods, & Rosenbaum, 1996; McMurray & Moore, 1994). Nabi and Horner (2001) found that victims of intimate partner violence were more likely to believe that people accepted violence toward women as normal and therefore would not help. Findings from this study highlight the issue of the social norm surrounding intimate abuse. Abused women feel that others ignore the problem, thus giving tacit consent to the abusive male (Nabi & Horner, 2001).

Cascardi, Langhinrichsen, and Vivian (1992) as well as O'Leary, Vivian, and Malone (1992) found that 65% to 70% of women seeking treatment for marital problems reported at least one act of physical victimization by a spouse in the year before assessment; however, only 3% to 6% spontaneously mention physical aggression as a problem for which they are seeking treatment. Defining oneself as the victim of a family

member or close intimate may require significant and painful alterations in the victim's perceptions of the perpetrator and of themselves. Victims struggle with the reality that the person who professes to love them, assaults them and displays blatant disregard for their well-being (Browne, 1991). Additionally, low counseling utilization may be a consequence of the victim not voluntarily admitting that the violence is a problem. In some households, abusive behavior has been so constant that residents view its occurrence as normative and, unless an alternative is presented, do not consider themselves to be victims (Browne, 1991). Whatever the reason, many researchers have documented the fact that many victims do not identify themselves as such (Bornstein, 2006; Enns, Campbell, & Courtois, 1997; McCloskey & Grigsby, 2005; Wolkenstein & Sterman, 1998).

Therapists seldom screen for IPV and may not understand how serious and dangerous it is. Consequently, they may fail to address even the most basic of concerns about victim's safety (Ackerman & Ackerman, 1996; Hansen, Harway, & Cervantes, 1991). Partner violence often is undetected and underreported by mental health professionals (Avis, 1992). There are several reasons a therapist may choose not to assess for partner violence. Douglas (1991) contended that violence may go undetected in a therapeutic context because therapists have preconceived ideas about the type of person who commits intimate partner violence and what type of person would be a victim. Therapists may fail to appropriately recognize or assess for violence because a client does not fit within this preexisting framework (Bograd & Mederos, 1999).

Horton and Johnson (1992) examined perceived counselor helpfulness. They reported that counselors perceived as helpful were praised because they exhibited an

understanding of the victim's plight and the complex decisions she faced. Counselors who were not appreciated for these reasons received strong disapproval (this was particularly true of clergy). Thus, professionals with training in abuse who were sensitive to the victim's plight received high praise, whereas counselors who were not trained in abuse were criticized. Some well intentioned advocates engage in dangerous victim-blaming; working from the assumption that there is something about the victim's behavior or past that precipitates the violence (Buel, 1999). Sexism seems to flourish even in mental health professionals (Eisikovits & Buchbinder, 1996; Ross & Glisson, 1991); gender bias can affect a therapist's ability to recognize IPV (Petretic-Jackson & Jackson, 1996). While researchers have some ideas about what keeps women from talking with a helping professional there is much less known about what facilitates disclosure by those women who do.

Understanding Intimate Partner Violence in College

While there is a significant amount of research on intimate partner violence, results from these studies may not generalize well to college women because of differences between the populations: age, level of education, degree of social isolation and financial dependence on one's partner, developmental stage of career decision making, and previous life experiences (Albaugh, & Nauta, 2005). This is of concern due to the fact that IPV also appears to be prevalent in college settings.

Prevalence of IPV in Youth and College Populations

Research studies have found that approximately one out of ten high school students had experienced physical violence in dating relationships. Among college students, the figure rises to twenty-two percent, equivalent to the rate for adults (Cate,

Henton, Koval, Christopher, & Lloyd, 1982; Henton, Cate, Koval, Lloyd & Christopher, 1983; Makepeace, 1981; Roscoe & Callahan, 1985). Between 20% and 30% of high school and college students have inflicted or sustained physical violence in a dating relationship (Bennett, & Fineran, 1998; O'Keefe, 1997; Sugarman & Hotaling, 1989; White, & Koss, 1991). A study by Roscoe & Callahan (1985) comparing the responses of high school students with college students concluded that the phenomenon of dating violence in both groups is very similar. Studies specific to college students have found that about 20% of college students have been physically assaulted by a dating partner (Cate, et al., 1982; Makepeace, 1981; Stets & Pirog-Good, 1989) and as many as 20% to 25% of college women are raped (Fisher, Cullen, & Turner, 2000). College-age women are at high risk for all forms of violence against women. More than half of all stalking victims are between 18-29 years-of-age (Violence Against Women Grants Office, 1998) and the highest rate of IPV is among women ages 16-24 (Bureau of Justice Statistics, 1998). Sexual assault is the second most common violent crime committed on college campuses and most perpetrators are known to the victim (Fisher, Sloan, & Cullen, 1995). Homicide committed by intimate partners is the leading cause of death for Black women between the ages of 15 and 24 (National Center for Health Statistics, 1997).

Scholars have estimated that about one in five undergraduate men and women become involved in a physically abusive relationship with a partner while in college (Berkel, Furlong, Hickman, & Blue, 2005; Makepeace, 1986; Silverman & Williamson, 1997). Current epidemiological reports suggest that IPV in college populations is on the rise. Recent studies show that as many as one in three college couples will be involved in at least one incident of violence (Centers for Disease Control and Prevention, 2000; Fass,

Benson, & Leggett, 2008; Jackson, 1999; Lewis & Fremouw, 2001). Marshall and Ross (1987) found that violence was received by 62 percent of a college sample and expressed by 74 percent. In fact, IPV -- including physical assaults, emotional or psychological abuse, and sexual assault or coercion -- is higher among dating couples than among married couples making the college years a period of particular vulnerability (Coker, Smith, Thompson, McKeown, Bethea, & Davis, 2002; Sugarman, & Hotaling, 1989). Deal and Wampler (1986) reported that 47% of their sample of respondents reported some experience with violence in a premarital dating relationship.

In a study of female college students conducted by Pirog-Good and Stets (1989), it was reported that only 28% of the women who experienced sexual abuse recognized the incidents as abusive. Fass, Benson, and Leggett suggest that a large number of college students who have inflicted or experienced physical violence failed to recognize these episodes as abusive. In a study conducted by Berkel, Furlong, Hickman, & Blue (2005), 17% of college-aged Black women surveyed indicated that they had been in an abusive relationship. The length of the abusive relationship ranged from 4 to 48 months. Of the 11 women who indicated they had been abused 7 stated that they had left and returned to the relationship at least once (National Center for Health Statistics, 1997). Bogal-Allbritten and Allbritten (1985) found that the majority of the students in residence halls who responded to their survey (65%) knew of another student who had been involved in a violent relationship and 19% reported at least one personal experience, ranging from threats of bodily harm to slapping, punching, being struck with an object, being assaulted with a weapon, or being choked.

These numbers are striking and suggest that there may be a uniqueness to the college experience that facilitates violence in intimate relationships. Within the last decade, the apparently increasing seriousness and relative frequency of campus crime has resulted in an increased level of attention from a variety of sources, including researchers, the media, legislators, and lawyers (Bromley, 1992). Congress passed the *Student Right-to-Know and Campus Security Act* (20 U.S.C. §1092) in 1990 to require all Title IV eligible institutions of higher education to publicly disclose crime statistics and crime prevention and security policies and procedures on campus. The law was amended in 1992 (known as the Ramstad Act) to require that schools afford victims specific basic rights and again in 1998 (known as the Clery Act) to emphasize reporting obligations regarding sexual assault on campus. The Ramstad Act also requires universities to develop additional policies, programs, and procedures to deal with campus acts of violence (Bromley, 1994; Karjane, Fisher, & Cullen, 2002). Intimate partner violence is common on college campuses, to the point that laws have been enacted to encourage college officials to pay attention to and inform the community about this type of violence. The percentages of incidence are varied; however, it can be assumed that physical violence is a common and perhaps difficult problem to measure in the relationships of college students (Fass, Benson, and Leggett, 2008). Researchers have since begun to explore what it is about this environment or time of development that puts college students at risk.

Etiology & Theory of Dating Violence

Violence in adolescent dating relationships appears to stem from some of the same social causes as marital violence. Perpetrators of dating violence and sexual

harassment tend to be young men who feel pressured to be hyper-masculine, powerful, dominating and violent so as to 'prove' their manhood (Davis, 2000; Hong, 2000; Scully, 2001). Existing literature documents the 'boys will be boys' assumption that accommodates sexual harassment and dating violence (see Klein, 2006). There is evidence that social acceptance of male domination and degradation of women is common among youth (Carlson, 2003). Such beliefs are tied to male efforts to become socially acceptable. In such environments, then, boys may consider it a right to use violence against girls (Klein, 2006).

Dating allows for rehearsal of the roles teens expect to assume in adult relationships. Research studies of both high school and college students found that abuse is more likely in serious rather than casual dating situations (Henton, Cate, Koval, Lloyd & Christopher, 1983; Laner and Thompson, 1982). In the majority of abusive dating relationships, violence does not occur until some degree of commitment has been established (Burke, Stets, & Pirog-Good, 1989). Dating violence appears to begin at about age 15 or 16 (Durst, 1987; Henton, Cate, Koval, Lloyd, & Christopher, 1983). Stets and Straus (1989) found that the greater risk of assault typically occurs when individuals live together but are not married. Some of these women have not seen models of healthy relationships in their own homes and so are not sure what a healthy relationship looks like. Marshall and Rose (1987) found that having experienced violence from a parent or guardian is predictive of experiencing intimate partner violence.

Specific factors in adolescent and female development contribute to the young victim's vulnerability to violence. Pressure to conform to peer group norms as well as the pressure from the sexual intensity of adolescence, contribute to a perceived need to have

a dating partner (Gamache, 1998). For many young people, this is their first encounter with a “real” relationship and they are unsure as to what constitutes healthy and unhealthy relationships. Jealousy is perceived to be the most pressing cause of dating violence. Jealousy is the most frequently mentioned cause listed for IPV (Makepeace, 1981; Matthews, 1984; Roscoe & Benaske, 1985; Roscoe & Callahan, 1985; Roscoe & Kelsey, 1986). While frequently citing uncontrollable anger and jealousy, between a quarter to over a third of males report that the primary cause of violence was to intimidate, frighten, or force the other person to give them something. The boldness of these claims differentiates violent married males from their dating counterparts. Violent husbands tend to rely heavily upon a set of “loss of control” reasons, such as anger, alcohol or drugs (Sonkin, Martin & Walker, 1985). Laner (1990) suggests that students mistakenly accept unhealthy behaviors such as jealousy as just a common aspect of dating. Chung (2007) explored young women’s perception of dating violence. She found that young women tended to internalize the blame for the violent relationship and believed that men’s use of violence was a result of upbringing or cultural background rather than choosing to be violent.

The primary developmental task for adolescents, according to Erikson (1950), is to establish a separate identity in the world apart from their family identity ties. Super (1990) suggests that college students are in a developmental stage in which adjusting self-concepts and implementing career choices are likely to occur. When an adolescent is raped or beaten, this work is interrupted and there is often a regression back to the safety of earlier stages of development. Teenagers have a need to believe that they can have some control over their environments. Rape or abuse upsets a teenager’s perception of

her ability to control her environment and can damage the adolescent's emerging sexual identity. An adolescent is much more likely than an adult to internalize blame for the rape or abuse.

The Nature of IPV in College

Albaugh and Nauta (2005) found that experiences of psychological aggression were more frequent than other types of abuse, but at least 20% of the college women in their study had experienced at least one instance of sexual coercion and physical assault from intimate partners. Neufeld, McNamara and Ertl (1999) found that over 90% of respondents reported experiencing some form of psychologically abusive behavior by an intimate partner, and nearly 60% of respondents reported experiencing five or more separate abusive behaviors. More than three fourths of the college women sampled reported experiencing some form of psychological abuse within the past 6 months, the vast majority of those women reporting more than one incident. Psychological abuse is frequently a precursor to and an accompaniment of physical abuse among abused women (Martin, 1981; Okun, 1986; Tolman, 1989; Walker, 1979).

The most prevalent forms of violence are those considered to be less physically violent, such as throwing objects, slapping, and pushing, but life-threatening violence may also occur. Violent behaviors may include slapping and pushing, hitting, and threatening or using weapons. About 3% to 5% of undergraduates report having been choked, beaten, or threatened with a weapon (Aizenman, & Kelley, 1988; Riggs, 1993). One study, surveying male college students, found that 82% reported engaging in verbally abusive behavior and 21% admitted to committing physically abusive behavior in the past year (Shook, Gerrity, Jurich, & Segrist, 2000). West & Rose (2000) found a

substantial percentage of low income African American youth experienced physical, sexual and psychological dating aggression. More than one half of the sample reported less physically injurious forms of violence, such as pushing and slapping. Severe forms of physical aggression, such as beatings and threats with a weapon, were inflicted and sustained by about one in four participants. Three quarters of the sample reported various forms of psychological aggression such as insults and name calling.

Teens, especially those pregnant and who are already parents, are at greater risk for abuse in their relationships than any other age group, yet are the least likely to either report or seek adult intervention (Parker, McFarlane, Soeken, & Torres, 1993). Some teens are fleeing abusive homes, becoming homeless and more vulnerable to dating violence often by much older men. It is not uncommon to hear teen girls say that they believe it is better to have a boyfriend who hits you than no boyfriend at all. Teen victims' decisions to stay with an abuser are generally due to peer pressure in combination with immaturity, no knowledge of resources, and low self-esteem (Levy, 1998).

Pirog-Good and Stets (1989) found that physical and sexual abuse in dating relationships is grossly underreported to officials. An estimated 81% of on-campus and 84% of off-campus sexual assaults are not reported to the police (Fisher, Sloan, & Cullen, 1995). Sloan, Fisher, and Cullen (1997) indicate that the statistical information about campus crime is deficient due to serious underreporting. In their survey they found that students reported less than one fourth of all on-campus victimizations to any authority; for some violent crimes, such as rape, sexual assault, and robbery, students' reporting rates were even lower-close to one fifth of all on-campus victimizations. Dating violence

takes place most often in the residence of one of the partners, followed in frequency by vehicles and, lastly, out of doors (Makepeace, 1981). Anywhere from 70 to 93 percent of violent acts take place in private settings, outside the view of others (Laner, 1983; Roscoe & Kelsey, 1986). Rickgarn (1989) reports that the problem of courtship violence in residence halls is well known to residents, although it goes largely unreported.

There are several reasons why college women do not report intimate partner violence. First, women who sustain less severe forms of physical or sexual abuse may view these incidents as normal or not serious. Some women may fear being blamed by authorities and being held partially responsible for the abuse, particularly if they are still dating the abusive partner. Additionally, some women may fear retaliation from their partners if they report the abuse or may fear that such a report will end the relationship (Pirog-Good & Stets, 1989). College women are more likely to be raped or sexually assaulted by a known individual; 9 in 10 college women who were victims of rape have known their offender (Fisher, Cullen, & Turner, 2000). Hutchison and Hirschel (1998) found that women in dating relationships were significantly less likely to access legal and supportive services than married IPV victims and are generally underserved by community agencies. Henning and Klesges (2002) suggested that women in dating relationships may be less likely to describe their abuse as domestic violence. Perhaps they perceive domestic violence as something that occurs specifically in marital relationships. As such, they may not seek out or utilize services specifically described as services for domestic abuse. Fass, Benson, and Leggett (2008) suggest that it is possible that college students are succumbing to a deep-seated societal issue that fosters the perpetuation of intimate violence, which is minimization and denial.

College students, especially first year students, are particularly prone to stress (D’Zurilla & Sheedy, 1991) due to the transitional nature of college life (Towbes & Cohen, 1996). They must adjust to a new social environment. College students, regardless of year in school, often deal with pressures related to finding a job/career or a potential life partner. The problems and situations encountered by college students may differ from those faced by their non-student peers (Hirsch & Ellis, 1996). The environment in which college students live is quite different. The continuous evaluation that college students are subjected to, such as weekly tests and papers, and the striving for specific goals, is one which is not often seen by non-students (Ross, Neibling, & Heckert, 1999; Wright, 1964). Marshall and Rose (1987) found that stressful events significantly predicted violence in dating relationships for females. They suggest that stress may exacerbate the likelihood and perhaps the severity of violence between partners. This stress may increase vulnerability and be a barrier to seeking help.

Women students victimized by other students often face challenges specific to a closed campus environment. Proximity, the high incidence of alcohol use, and peer pressure within a living environment make this a unique setting. Victims of sexual assault or dating violence may continue to encounter their assailants in residence halls or at campus events. Even changing one’s living arrangement or class schedule may not remove the threat or additional trauma. Varying levels of intimate relationships are formed and consummated in residence halls. Given the number of different patterns of dating relationships that exist in residence halls, relationship violence becomes very possible. Relationships become abusive and, often aided by the influence of alcohol or other chemical substances, the violence escalates to greater levels of abuse and injury

(Fisher, Sloan, Cullen, & Lu, 1998; Rickgarn, 1989). Williams and Smith (1994) found in their sample of 221 subjects that 159 had some experience with dating violence; 40% of those cases reported that one or both of the partners had been drinking prior to the violent act. Mahlstedt and Welsh (2005) describe a complex relationship between alcohol and dating violence. They suggest that alcohol is an important risk factor in dating violence; however, women in their study did not identify it as such unless explicitly asked.

Raymond (1992) reported that close to 80% of victimizations committed against students were by fellow students. When fellow residents fail to get involved or report the behavior to staff, the residence hall environment appears to condone these actions. The implicit message may be that this behavior is, in fact, acceptable. Such acceptance may lead to the impression that this is normal behavior and may increase the risk to female residents (Rickgarn, 1989).

In summary, college students of traditional age are vulnerable to being victims of violence. They are typically in a new setting with a variety of environmental stressors, away from direct parental supervision and old support systems, and at in a heightened time of sexual impulses. They are under peer pressure, their identities are not yet firm, their competence is not yet established, and they often have mistaken beliefs about their invincibility. They live among others who are experimenting with new freedoms. Thus, college students typically create a population at risk for victimization (Roark, 1987). This interaction between developmental vulnerabilities and environmental opportunities for violence makes college a potentially dangerous place.

Consequences of IPV in College

According to Hilberman (1976) symptoms unique to adolescent survivors are sudden personality changes, drop in school performance, withdrawal from usual school or social activities, promiscuous behavior, sudden phobic behavior, self-destructive or risk-taking behavior, drug or alcohol use/abuse, development of eating disorders such as bulimia or anorexia and alienation from peers or family. Victims of campus sexual assault face potential traumatization-intense fear and emotional numbing, loss of control, and the shattering of their trust and their belief in their ability to make sound judgments about the people and world around them (Karjane, Fisher, & Cullen, 2002).

Scarpa, et al. (2002) found that psychological difficulties are heightened in college students who have experienced violence and suggest that they are at risk for potentially more severe problems related to Axis I and potentially Axis II mental disorders. Such emotional and behavioral difficulties have a negative impact on multiple facets of a student's life, including relationship difficulties, problems with concentration and academic achievement, drug/alcohol abuse, and other risky behaviors. Other symptoms include low perceived control, dysphoria, poor coping skills, and low self-esteem (Aguilar & Nightingale, 1994; Coffey, Leitenberg, Henning, Bennett, & Jankowski, 1996). Abuse in dating relationships also is associated with an increased probability of future relationship abuse (Makepeace, 1981; O'Leary, Barling, Arias, & Rosenbaum, 1989; Scarpa, 2001; White & Koss, 1991). Findings such as these highlight why intervention by mental health care professionals is so important.

There is speculation that intimate partner violence may be related to career decision-making skills, readiness, and behaviors (Brown, Reedy, Fountain, Johnson, &

Dichiser, 2000; Chronister & McWhirter, 2003, 2004; Gianakos, 1999). Chronister, Wetterson, and Brown (2004) noted that intimate partner violence interferes with women's education and career achievements and economic attainment. Albaugh and Nauta (2005) found that the frequency with which women had experienced sexual coercion was associated with lower career decision self-efficacy with respect to perceived ability to engage in accurate self-appraisal, select goals, and problem solve. These developmental and social concerns indicate that the nature of IPV for dating violence in late adolescence and early adulthood may set the stage for all significant relationships in the future. This is important information for helping professionals and presents an opportunity for intervention and in some cases prevention.

Counseling and IPV in College

Researchers and practitioners have identified the hidden nature of IPV and have found common ground in their explanations of this phenomenon. Young people do not seem to talk about dating violence as a problem or seek help to deal with it (Fass, Venson, & Leggett, 2008; Levy, 1998). While a good deal of dating violence involves severe force, dating partners rarely seek professional help. On average, about 1 in 25 victims seek out the assistance of a teacher, counselor, member of clergy, or police officer (Henton, Cate, Koval, Lloyd, & Christopher, 1983; Makepeace, 1981; Ullman, 1999). In a study of 650 college-age women, 42% reported that they had been victims of sexual coercion, but only 28% of those victims sought help. The dominance of individualistic and pathologizing explanations of dating violence make it difficult for women to speak up and seek help because they may believe that they are responsible for the violence and inadequate for not leaving the abusive relationship (Chung, 2007).

Among those who did seek help, most (75%) sought it from a friend rather than from a professional (Ogletree, 1993). Koss, Gidycz, and Wisniewski (1987) similarly found that 42% of college female rape victims had never told anyone about the incident. While most of the literature about intimate partner violence focuses on the correlates, prevalence, or incidence of violence in particular groups, empirical research that seeks to more thoroughly understand reporting behaviors is needed (Berkel, Furlong, Hickman, & Blue, 2005).

Conclusions

Violence against women continues to be a major problem in U.S. homes and communities (Berkel, Furlong, Hickman, & Blue, 2005). Intimate partner violence is common on college and university campuses as well (Albaugh & Nauta, 2005). The consequences of IPV have been well documented and present significant difficulties for women currently in violent relationships and for their futures (Abbott, 1997; Alpert, 1995; Campbell & Lewandowski, 1997; Gerlock, 1999; Gleason, 1993; Gorde, Helfrich, Finlayson, 2004). As common as this problem seems to be, the number of women reporting abuse and talking with professionals remains quite low (Gondolf, 1998; Henning & Klesges, 2002). The literature discusses barriers that keep women from talking (Buel, 1999; Fleury, Sullivan, Bybee, & Davidson, 1998; Henning & Klesges, 2002) but little can be found about the women who do talk. With all the developmental changes and new found responsibilities, college is a difficult time for many young adults; add new relationships and the potential for violence becomes a reality for many (Bogal-Allbritten & Allbritten, 1985; Makepeace, 1981). College administrators as well as mental health professionals will benefit from additional knowledge about the experiences

of women in college who have been abused by an intimate partner and an understanding of their decision to disclose this information to a helping professional.

Chapter III

Methodology

Phenomenological Approach

The qualitative tradition of inquiry used in this study was phenomenology.

Phenomenology focuses on the exploration of the structures of consciousness in human experiences (Polkinghorne, 1989). Phenomenological study describes the meaning for several individuals of their lived experiences of a concept or a phenomenon (Creswell, 2007). The method of phenomenology originally was developed by the philosopher Edmund Husserl (1962). According to Wertz (2005) Husserl, in the tradition of Giambattista Vico, Franz Brentano, and William Dilthey, broadened the concepts and methods of modern science to include the study of consciousness, influencing philosophy, other humanities, and the social sciences throughout the 20th century. Husserl formulated scientific methods that assist psychological researchers in the investigation of human experience and behavior (Wertz, 2005).

Giorgi (1989) has identified phenomenology as a descriptive process that investigates the relationship between persons and situations, and provides knowledge of psychological essences, that is, the structures of meaning innate in human experience. This is accomplished through phenomenological reduction, which is a methodological device invented by Husserl to help make research findings more precise. The process of phenomenological reduction according to Giorgi (1997) means to:

- (a) bracket past knowledge about a phenomenon, in order to encounter it freshly and describe it precisely as it is intuited (or experienced), and;
- (b) withhold the existential index, which means to consider what is given precisely as it is given, as presence, or phenomenon. (p. 238)

Phenomenological research requires an “attitude of wonder” (Husserl, 1954) that is highly empathic. According to Giorgi (1989) the researcher strives to enter fully, through the written description, into the situations and circumstances of the participants. This sharing of the experience is the basis for later reflection on meanings and experiential processes. The focus, suggests Giorgi (1989) is on the meaning of the situation as it is given in the participants’ experience. This is the implementation of the phenomenological *Epoche*. Husserl called the freedom from suppositions the *Epoche*, a Greek work meaning to stay away from or abstain. In the *Epoche*, researchers set aside prejudgments, biases, and preconceived ideas about the phenomena in preparation for deriving new knowledge (Moustakas, 1994). The researcher not only attends to what is experienced but also reflects on the how – the psychological processes. Processes such as, bodily, perceptual, emotional, imaginative, linguistic, social, and behavioral can provide valuable information. Through this process the researcher carries out an intentional analysis using the phenomenological psychological reduction (Giorgi, 1997; Wertz, 2005). Some have suggested that separating oneself from the data is an impossibility and that it may be more accurate to think in terms of remaining curious and open to new information during data collection and analysis (LeVasseur, 2003; van Manen, 1990).

According to Wertz (2005) phenomenological researchers may solicit the participation of laypersons, expert-professionals or literary-witnesses, and/or a system or group of related persons as well as using their own experience as a source of information. The basis of the decision of whom to include requires a judgment of whose experience most fully and authentically represents what the researcher is interested in (Wertz, 2005).

This judgment can be based on a review of literature, past experience of the researcher or by consulting experts in the field. Once the participants are selected, data is collected through detailed interviews. A semistructured interview is the most common way of collecting this information. A semistructured interview is open-ended and provides the flexibility to follow the participant's lead. The researcher also has the ability to ask questions and respond further to participant's replies in an effort to enhance the details of the participant's story. Thus, interviews with the various participants will, to some extent, be different from one another (Morrow & Smith, 2000). The advantage to this type of interview is that the interviewer has the opportunity to be responsive to each participant (Patton, 1990; Richards & Morse, 2007). This allows the researcher to follow the participant's story and gather additional information.

Descriptions are usually verbal and may be generated from the point of view of the "self," the "other," or both, suggests Wertz (2005). Descriptions may be provided verbally or in writing by individuals through dialog/interview or in group discussion. In each case, the researcher gives the participant(s) a descriptive task with instructions that identify a focus and yet remain open enough for the participant to elaborate (Wertz, 2005). Typically participants are asked two broad, general questions: "What have you experienced in terms of the phenomenon?" "What contexts or situations have typically influenced or affected your experiences of the phenomenon?" Other open-ended questions may also be asked that focus attention on generating data that will lead to a textural description (what participants experienced) and a structural description (how they experienced it in terms of the conditions, situations, or context) of the experiences. These

descriptions should provide an understanding of the common experiences of the participants (Creswell, 2007; Moustakas, 1994).

The most outstanding characteristics of data sought by the phenomenological researcher are concreteness and that the descriptions reflect the details of lived situations rather than hypotheses or opinions regarding the phenomena. The data collected should provide the researcher access to unique descriptions of psychological life beyond any previous knowledge or preconceptions. Optimally, these descriptions of the phenomena will provide data that transcend even what the participants themselves think or know about the topic (Wertz, 2005).

The researcher must decide how many interviews to conduct. Patton (1990) noted that there are no rules for sample size in qualitative inquiry. Sample size depends on what the researcher wants to know, the purpose of the inquiry, what is at stake, what will be valuable, what will have credibility, and what can be done with available resources and time. The question of “how many participants?” can only be answered suitably by considering the nature of the research question and the potential findings. The number of participants cannot be mechanically determined beforehand or by formula. Rather, deliberation and critical reflection considering the research question, the life-world position of the participant(s), the quality of the data, and the value of emergent findings with regard to research goals are required in an ongoing assessment of adequacy (Wertz, 2005).

The phenomenological researcher, as suggested by Wertz (2005), continually focuses on relations among different parts of the situation and of the psychological processes that underlie it while attempting to gain explicit knowledge of how each

component contributes to the organization of the experience as a whole. The researcher moves from part to part and from part to whole in order to grasp the big picture and expose the lived experience. A distinctively phenomenological characteristic of analysis is that the researcher attempts to grasp the essence of the individual's life experience through imaginative variation, also called the structural description. In an advanced stage of analysis, the researcher may intentionally abandon the Epoche and examine the situation in view of previously posited concepts and theories. Preconceptions may be used as heuristic guides for knowledge. If they are phenomenologically useful, then they may expose aspects of the material that were not yet previously evident (Moustakas, 1994; Wertz, 2005). The information collected can then be connected to previous findings and research.

Phenomenology was selected for this study because the aim was to understand and describe participant's experiences of intimate partner violence in college and to understand the process that facilitated participants' disclosure of abuse to a mental health professional. The exploratory nature of qualitative research was needed in this instance due to the lack of information in this area. Barriers have been identified but there is little research on what factors facilitate disclosure. The descriptions provided by these women who have experienced IPV in college and were able to talk with a professional will inform college administrators and helping professionals. This type of qualitative investigation aims to inform practice by providing rich, elaborated descriptions of specific processes or concerns within a specified context (Haverkamp & Young, 2007). Having a better understanding of the circumstances of this type of abuse and the

conditions necessary for disclosure will shed light on a college phenomenon that is often overlooked and underreported.

Sampling Method

The sampling method utilized in this study was purposeful sampling. Purposive sampling is common in qualitative research. The researcher selects individuals and sites that can purposefully inform an understanding of the research problem and central phenomenon of the study (Creswell, 2007). The ideal participants are those who know the information required, are willing to reflect on the phenomena of interest, have the time, and are willing to participate (Spradley, 1979). This researcher interviewed a sample of college women who have experienced IPV while in college and who have discussed these experiences with a mental health professional. The goal of the research was to understand IPV in a college setting and the circumstances in which victims reveal this information to a helping professional.

Eligibility for participation included being an unmarried female victim of heterosexual intimate partner violence while in college, being a traditional age student currently enrolled in classes, being at least 19 years of age, and currently or recently engaged in mental health services in which the abuse was discussed. Participants were recruited from a large Midwestern university and a small private college. Flyers describing the study were placed in the offices of campus counseling centers and the women's center as well as other visible places on campus and in the community (see *Recruitment Flyer* in Appendix A). Emails describing the research study were also sent out through several college listserves. Mental health professionals on campus were contacted and informed of the study and encouraged to refer any clients that they thought

fit the criteria and might be interested. Participants made contact by calling the phone number provided and engaged in a short phone interview conducted by the researcher to determine eligibility for the research project (see *Phone Interview* in Appendix B).

Data Collection

The method for data collection was participant interviews. Once participants met all of the criteria for participation based on the phone interview an appointment for a face-to-face interview was arranged. The interviews were conducted in a private office with only the participant and researcher present. This researcher explained and asked the participants to sign the *Client Informed Consent* (see Appendix C) and the *Consent to Record* (see Appendix D) forms. All interviews were tape recorded, names were not included on the recordings; all interviews are identified by a pseudonym. Tapes will be maintained in a locked file cabinet located in the researcher's locked office. Transcripts will be maintained in the same manner. No identifiable information was recorded on the tapes or the transcripts.

The interview began with the script provided on the *Qualitative Interview Protocol* (see Appendix E). The participant then was asked several demographic questions including, age, ethnicity, year in school, current relationship status, and whether they are currently seeing a mental health professional. This researcher then continued with the semistructured interview questions, allowing the participant to elaborate and asking follow-up questions as necessary. The interviews lasted approximately 45-60 minutes. The researcher kept a journal after each interview, writing down thoughts about the phenomena and questions to be used during data analysis.

Debriefing occurred at the conclusion of each interview. This provided an opportunity for the participant to reflect on the interview process and to add information that she felt was important but that the interview questions may not have covered adequately. At this time this researcher shared more detailed information about the study with the participants and discussed the next steps in the research process. All participants were offered a list of counseling opportunities and other community resources specifically for victims of intimate partner violence. None of the participants were in need of shelter services, one participant did ask for and was given a list of counseling resources (see *List of Resources*, Appendix F). Each participant was asked if she would like to look over the transcript for accuracy; none of the participants were interested in doing this. They were also asked if they would like to read over the themes that were created and participate in member checking for the study; two participants agreed to member checking. A list of tentative themes was sent to these two individuals along with a return envelope to send back any changes or additions and their thoughts on the tentative themes. *Member Checking Instructions* (Appendix H) were included in the envelope sent to the participants on how to read over the themes and document what they thought about the tentative results. Participants gave few comments and were supportive of the themes that had been developed.

Interview Questions

The interview questions are constructed to capture the lived experience of each participant through open-ended, descriptive questions which ask about intimate partner violence and talking with mental health professionals (Morrow & Smith, 2000). Kvale (1996) identified six criteria for an ideal qualitative interview. First, the answers should

be spontaneous, rich, specific and relevant. Second, the interviewer's questions should be short and the interviewee's responses long. Third, the interviewer should follow up and clarify participant meanings. Fourth, the ideal interview is interpreted throughout the process; that is, the interviewer is engaged in analyzing and interpreting the data as it is produced. As a result, the interviewer is able to verify those interpretations within the interview context. Finally, the interview should be a story contained in itself that requires very little added description or explanation.

Participants in this study were asked to give some demographic information and to tell of their experience(s) with intimate partner violence in college and the process of talking about that violence with a mental health professional (see *Qualitative Interview Protocol*, Appendix E). As participants talked about their experiences, follow up questions were asked to clarify or encourage elaboration. Participants were also asked what advice they would give to college administrators and mental health providers on college campuses in considering intimate partner violence in their college community. Participants were thanked for their time and for sharing their stories. Each participant stated that she was grateful for the opportunity to talk about what happened to her and to make an effort to keep this from happening to other women.

Participants

Polkinghorne (1989) recommends that researchers interview from 5 to 25 individuals who have all experienced the phenomenon. Lincoln and Guba (1985) recommended sampling to the point of informational redundancy, where no new information is forthcoming despite continued interviews. Hill, Thompson, and Williams (1997) recommended a sample size of 8 to 15 participants to better understand whether

findings are rare (applying to only one or two people) or more common (applying to several people); they discouraged larger samples because of the time involved in analysis and because additional cases typically add little new data. Amount of data is not the sole concern, but whether the researcher can cast a wide net to encompass the full range of participant actions and meanings, as well as theoretical explanation for them (Morrow & Smith, 2000).

Participants in this study were unmarried, traditional age, college women (over 19 years old) who had experienced heterosexual intimate partner violence while in college and who had disclosed this violence to a mental health professional. All participants were college students from a large Midwestern university or a small private college. Five individuals responded to the recruitment efforts and were interviewed. Two of the participants stated that they were told about the study by their counselors, one saw an email on a listserv, one saw a flyer and one heard about it from a friend. Four of the participants were 23 years old and one was 19 years old. Three of the women had a senior standing in school and one had a junior standing. Four of the women were from a large Midwestern university and one was from a small private college. Two participants identified as Caucasian, one identified as Latina, one identified as biracial – Native American and Caucasian -- and one was unwilling to disclose this information.

Data Analysis

Qualitative data analysis is the process of discovering or constructing meaning from data. Methods of data analysis are mere heuristics or an aid to the researcher's thinking (Morrow & Smith, 2000). Behrens and Smith (1996) noted four attributes common to all modes of qualitative data analysis. First, data collection, analysis, and

writing are inseparable and integral: the various research activities often occur simultaneously and cause the investigator to circle back to additional research steps. Second, data analysis is constructive, not discovery. The researcher is the instrument of the research, and complete objectivity and replicability are neither possible nor desirable. Qualitative researchers are involved in managing overwhelming amounts of complex data utilizing a process of breaking down then building up again, of breaking apart data from their original context and reordering them in the form of categories, themes, stories, propositions, or theories. Finally, analysis rests on a foundation of rich description: of context, site, actors, and action (Morrow & Smith, 2000). Marshall and Rossman (2006) propose that typical analytic procedures fall into seven phases: organizing the data, immersion in the data, generating categories and themes, coding the data, offering interpretations through analytic memos, searching for alternative understandings, and putting the findings into a report or other narrative format. Each phase of data analysis involves data reduction, as the large amount of collected data is brought into manageable chunk, and interpretation, as the researcher brings meaning and insight to the words and acts of the participants in the study (Marshall & Rossman, 2006).

In order to prepare the data for analysis, the phenomenological researcher must listen to and transcribe verbal descriptions and interviews. Once in written form, data are read first without the research focus in mind in order to grasp the participant's expression and meaning in the broadest context. Significant statements, sentences or quotes are highlighted. This process of highlighting statements that provide an understanding of how the participants experienced the phenomenon is called *horizontalization* (Moustakas, 1994). Horizontalization is the process of listing every significant statement relevant to

the topic and giving it equal value (Creswell, 2007). Because the description may be lengthy and complex, particularly when it involves time and multiple features and processes, the researcher must differentiate parts of the description by identifying meaning units, or *invariant constituents* that organize data for later analysis of parts. The invariant constituents are the unique qualities of the experience that stand out (Moustakas, 1994). These invariant constituents are then organized into themes allowing for the emergence of themes that are common to all participants. In phenomenological research, the identification of themes, development of clusters of meaning, and any “coding” or categorization of data typically is preparatory in that it organizes data for a more in-depth, structural analysis that follows (Wertz, 2005).

Coding, as described by Richards and Morse (2007), is linking data or concepts rather than merely labeling. Descriptive coding is used to store things known about data items such as respondents, events or contexts. The researcher can then access this factual knowledge about the respondent such as gender or age, the setting such as clinic or hospital setting or the context such as the year of the interview or which question was being answered, when seeking patterns, explanations, and theories. Topic coding is the most common and the most challenging sort of coding done in qualitative research. Topic coding is an analytic activity; it entails creating a category or recognizing one from earlier, reflecting on where it belongs among your growing ideas, and reflecting on the data that is being referred to and on how they fit with the other data coded. Analytic coding develops from the topic coding and is used to make, celebrate, illustrate and develop categories theoretically. This activity takes the researcher beyond merely linking

data to the process of questioning the data about the new ideas developing in the new codes (Richards & Morse, 2007).

A further consideration for generating data involves analytic and reflexive or self-reflective memos. The analytic journal consists of interpretive memos, sudden insights, questions to ask during follow-up interviews, hunches, informal categories or themes, and countless other ideas that occur during the course of the investigation. The reflexive journal is used to track the investigator's personal thoughts and feelings during the investigation. These notations may be used in a number of ways, depending on the paradigms guiding the research and the investigator's personal leanings. In practice, observational entries, interpretations, and reflexive memos often flow from one to the other: therefore, many investigators keep a single journal to accomplish these multiple purposes (Morrow & Smith, 2000; Moustakas, 1994).

The researcher creates a narrative that temporarily reflects the original experience. This involves preparing an organized written description of situation(s) in the first-person language of the participant(s) called an *individual phenomenal description* which includes verbatim examples from the participants. The individual phenomenal description is presented first as a *textural description* which is a description of the experience. Next, the researcher will write a *structural description* or a description of how the experience happened. Here the researcher reflects on the setting and context in which the phenomenon was experienced. Finally, a composite description is written consisting of the phenomenon incorporating both textural and structural descriptions. This passage is the essence of the experience and represents the culminating aspect of a phenomenological study (Moustakas, 1994; Polkinghorne, 1989; Wertz, 2005). The

analysis of the data collected in this research study followed the modification of the Van Kaam method as described in Moustakas (1994) as well as the strategies that have been outlined above and depicted on the *Visual Diagram of Research Method* (Figure 1). A computer program specifically designed for qualitative research analysis, ATLAS.ti, was used in the beginning to organize data; coding was then done by hand.

The recorded interviews were transcribed by the researcher and a paid transcriptionist. The transcriptionist signed a confidentiality agreement (Appendix G) and verbalized an understanding of the delicate nature of the information and the need for confidentiality. The data were organized to aid in analysis and verification. Each interview was played and the transcript was reviewed for accuracy. The specific interview questions were labeled and the transcript was prepared for insertion into ATLAS.ti for analysis. Individuals were identified by the pseudonym selected at the time of the interview and any identifying information was removed from the transcript. Immersion in the data was achieved by becoming familiar with the participant's stories. All of the interviews were read several times over in order to grasp the participant's expression and meaning.

Significant statements, sentences, and quotes were highlighted within the computer program. The process of highlighting statements in order to provide an understanding of how the participants experienced the phenomena is called horizontalization (Moustakas, 1994). The data was organized by margin notes, comments from the reflexive journal, and quotes into initial descriptive codes. Topic coding involved identifying significant statements and grouping them in to meaning units, or

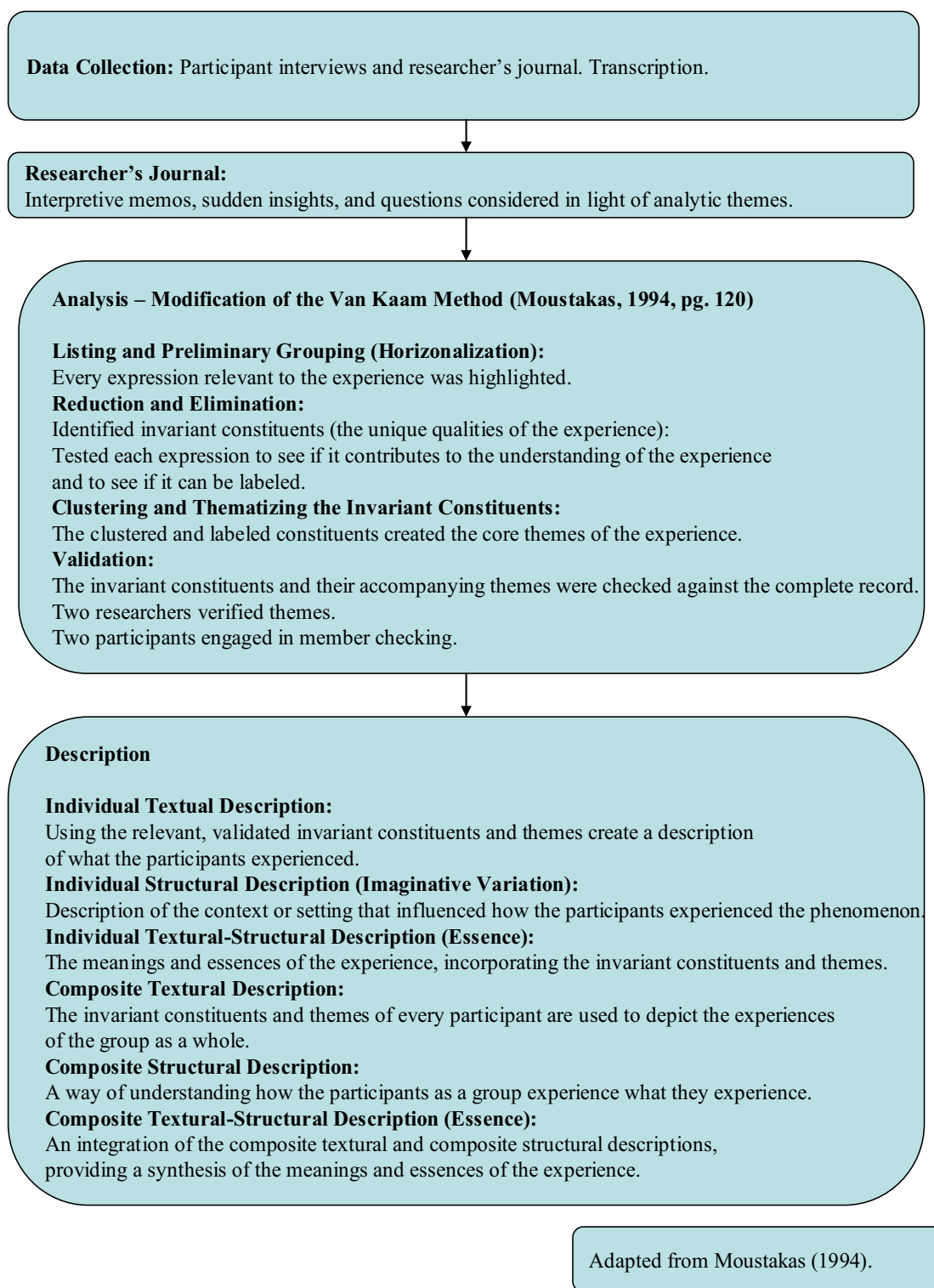


Figure 1. Data analysis and description.

invariant constituents, and patterns with supporting information. Invariant constituents are the unique qualities of the experience and are created by grouping the significant statements identified during horizontalization and grouped by meaning. Interpretations of the patterns and groupings were made with analytic memos. Each invariant constituent was looked at to see if it contributed to the understanding of the experience and to determine a label that matched the idea. The invariant constituents were then clustered into groups to create themes that highlight the lived experience of the group. All interviews were then searched for alternative understandings or contradictory information.

Verification Procedures

In qualitative research, conventional standards of reliability and internal and external validity give way to different criteria. Eisner (1998) offered coherence as an appropriate standard. Coherence is the tightness of the argument that one presents. Researchers should consider whether their conclusions have been supported, to what extent multiple data sources have been used to give credibility to the interpretations that have been made, if the observations are congruent with the rest of the study, and if there are anomalies that cannot be reconciled. Erickson (1986) identified three types of evidentiary inadequacy that have bearing on adequacy of amount, type, and variety of data: (1) inadequate amounts of evidence, (2) inadequate variety of evidence, and (3) faulty interpretation of evidence which can impact validity. A safeguard against these inadequacies is to immerse oneself in the field. Immersion can be applied to time spent in a particular setting, length and number of interviews, and pages of documentary evidence.

Investigator bias and subjectivity are not viewed negatively in qualitative research. They are presumed to be a normal aspect of conducting research where the researcher is the tool of the investigation. However, the ways in which bias and subjectivity are viewed and managed are important (Morrow & Smith, 2000). There are two primary types of bias that affect qualitative research. The first is the potential for confirmatory bias common to all humans in the meaning-construction process (Mahoney, 1991). During the investigation of the phenomena, and particularly during the analysis, the researcher can take steps to challenge confirmatory bias. An active and conscientious search for disconfirming evidence, as well as discrepant or negative case analysis, challenges the researcher's confirmatory bias and increases researcher sensitivity to the meanings of incoming data (Erickson, 1986).

The second type of bias is researcher subjectivity. Researcher subjectivity should be framed carefully in relation to the paradigm underlying the research. It would be inappropriate to control subjectivity in a study that focuses on the mutual construction of relationship and meaning between investigator and participants (Heshusius, 1994; Moustakas, 1990). Depending on the researcher's paradigm, subjectivity is managed in different ways. It is the responsible attention to, management of, and disclosure of the researcher's subjectivity and other kinds of bias that are key to rigor in interpretivist/constructivist and postmodern paradigms (Morrow & Smith, 2000).

In this study several efforts were taken to verify the data. In order to address evidentiary inadequacy the researcher looked for informational redundancy; by the fifth interview consistent information had created distinct and describable themes that captured the meaning of the phenomenon. To address the potential for confirmatory bias

a lengthy effort was made to search for disconfirming evidence or negative case examples, none were found. Two common practices were employed to look for researcher subjectivity; peer review and member checking. Three additional researchers read over the selected quotes, invariant constituents and themes. Significant feedback was provided in terms of the organization of themes and the labeling of invariant constituents. Discussion was had about the autonomy of each theme and the possible collapsing of several of the invariant constituents and themes. What had been ten textural themes and five structural themes became six textural themes and four structural themes. Shame and Embarrassment were collapsed in to one theme and the theme of Isolation was further developed. The structural themes were further arranged in to four distinct themes. Some quotes were rearranged to avoid overlapping. All suggestions and feedback were incorporated into the final results. Participants were asked if they would like to participate in member checking; two volunteered. These participants looked at the selected quotes, invariant constituents and themes to be sure that the results were consistent with their understanding of the phenomenon. These two participants made few changes and returned their comments to the researcher. The participants were supportive of the themes and provided validation of the organization of the data. A few words were changed per their suggestions. All of the participant's comments and changes were incorporated in to the final presentation of the data.

Ethical Considerations

The purpose of the research was explained to the participants. Full disclosure was made during the discussion of the *Informed Consent* (Appendix C) and *Consent to be Recorded* (Appendix D). Participants were given the opportunity to ask questions and

were reminded that they could stop the interview at any time. Confidentiality was emphasized due to the personal nature of the information being discussed. In light of the sensitivity of the information being discussed, all participants were offered a list of referral agencies for mental health counseling and intimate partner violence specific services in the area (see Appendix F).

Participants were invited to play a larger role in the research by engaging in member checking. This process not only ensures accurate data but also gave the participants an opportunity to have some level of control over their own data and to play a larger role in informing the community about intimate partner violence in college. In addition, participants were given the opportunity to be further involved to ensure that the final product is a good representation of their unique life experiences.

Investigator

Suzuki, Ahluwalia, Arora and Mattis (2007) suggest that the researcher's perspective is tied to his or her level of experience within the community under study. In an effort to begin the reflexive process, I will disclose my own experience with the population being studied. I have been interested in and researching intimate partner violence since my first year as an undergraduate student. I took every opportunity to take classes and write papers related to the subject. The first opportunity I had to work with this population was during my Masters program. I worked in a program called AMEND in Denver, Colorado, which treated both the victim and the offender in a violent relationship. I wanted to understand better the dynamics of relationships that are violent and the women who find themselves in these situations. I then worked for three years in a prison where I interacted with a number of domestic violence offenders.

With my return to school I wanted to work with survivors again. In my work with international victims of torture and immigrants/refugees, I have had several clients who were experiencing abuse perpetrated by their intimate partners. These experiences highlighted for me that intimate partner violence occurs in all contexts and allowed me to experience first hand the difficulty that women have in leaving these relationships. In my experience with undergraduate women, I began to wonder about how these women, many away from home for the first time, deal with violent relationships. I have been conducting a literature review ever since, looking for information about college women and intimate partner violence and wondering what facilitates the disclosure of this information to a mental health professional. I always have been interested in the counseling process and more specifically what conditions facilitate the disclosure of personal and even potentially dangerous information to a mental health professional. I am invested personally and professionally in having a better understanding of how the mental health community can better serve women who have been in abusive relationships.

As a therapist I have my own set of beliefs about work with this population. My theoretical orientation affects the way I see the world and my work with clients, it is also the lens through which I do research. I come from a feminist and ecological perspective. I believe that IPV is bigger than individual characteristics and is sustained by issues of gender inequality and sexism. In my clinical work, I focus both on the individual variables that have played a role in the situations that clients find themselves in, both the strengths and the focus of change, and the environmental impact. This, in particular, has an impact on how I research IPV; looking at both the individual and the environment. I believe that it is important to empower women to make changes in their own lives and to,

when appropriate, help them to understand the larger picture of violence against women. It is imperative that I draw a distinct line between my role as a therapist and my role as a researcher. My work here is to capture the experience of those who have encountered IPV in college and not to facilitate change. My aim is to listen to the stories that these women share with an open mind, remaining curious at all times and working towards describing the phenomenon rather than doing the work of counseling. My hope is that by giving them a place to share their story I will be empowering them in a way that is distinctly different from the experience of counseling. I do think it is important to be sure that the women that I interact with have the resources that they need/desire and will provide those resources when necessary. I believe in the importance of social justice and giving back to the community that we research. I plan on sharing the information and insights brought forth by this work with those in the community working with this population.

Chapter IV

Presentation of the Data

Consistent with the phenomenological process, the data are presented first through individual descriptions and then through a description of the themes that were identified through a systematic integration and analysis of the interviews as a whole. The approach used in this study is a modification of the Van Kaam method described in Moustakas (1994). Each individual's lived experience is described in as much detail as possible. Efforts have been taken to ensure that the information presented does not make the participants identifiable. Some of these women continue to have contact with their perpetrators and most are still in contact with the counselors they speak about in their interviews; therefore some information has been removed.

First, each individual is briefly described in order to provide context and richness for understanding their experiences. The *individual phenomenal description* is separated in to two parts, the *textural description* and the *structural description*. The textural description provides a narrative of what the participant experienced in terms of intimate partner violence and counseling and includes verbatim examples from the interview. The structural description places the experience in context and is a reflection of the unique setting, the college environment. A synthesis of the information then is provided for each individual in a paragraph that describes the *essence* of that person's experience.

Themes, developed through horizontalization and the creation of invariant constituents, are described in narrative and table form. Themes are organized in the same manner as the individual descriptions by both the textural and structural descriptions. The *composite textural description* serves to provide a summarization of the experiences of

the group as a whole. The *composite structural description* places the experience in context. Essence, the final step of the phenomenological analysis, is the integration of data, which provides a complete picture of the participants experience (Moustakas, 1994).

Individual Descriptions

Shorti

Textural description of Shorti's experience. The experience of intimate partner violence for Shorti is one of a single assault with long-lived repercussions. Shorti, a student athlete, was visiting her boyfriend when "he decided to pretty much attack me. I was sleeping about five o'clock in the morning. I am a really heavy sleeper and didn't realize anything and I woke up and my clothes were off and I woke up to him pretty much raping me." Shorti had told her boyfriend that she was not ready for sex and wanted to wait. Shorti was far from home, "I was scared. Like I was...I was 20 hours from home and I knew nobody and there were like three guys living in the house. I was just scared. That was on a Wednesday and he was taking me home on Friday." Shorti stayed with her boyfriend for some time after that. She indicated that she was too afraid to report the assault, "It kinda scared me; he scared me out of saying anything." Shorti experienced quite a bit of difficulty when she did decide to end things, "...he is not staying out of my life at all. He continued to bother me and finally in November he gave in to being done but he told me - I will be going to school there next year, I will be there, I'm coming after you and I'm getting you back in my life." Since that time Shorti finds herself being fearful much of the time, "...I'm like scared to death if he comes here and I don't want to know personally what I would do because I might flip on him. ...I'm just

full of anger with him.” This was scary for Shorti and familiar as this was not her first abusive relationship.

Shorti had a hard time dealing with what had happened to her, “...I started having nightmares with all that happening again. It started with things coming into my head during the day and I just had a major like week long break down... I just broke down, I kinda fell into this depression I was like - I can't handle this anymore, I can't handle the nightmares anymore. My roommate - I talked to her about some of it and I was like I need to get help so I can start living a normal life. I called my mom, especially like because it was starting to affect my game too and I was there one day and I just broke down. I text messaged my mom and I was like I need help. It was pretty much like a whole two weeks of breaking down - I couldn't really do anything. I was scared - like scared of walking around campus during the day. I was just having nightmares of random people attacking me - it wasn't even him. I was always... I was like- I was just freaked out to go anywhere. I was like - I can't do this by myself anymore.” Shorti was worried about her grades and her game. As a student athlete, she was aware of what the consequences of not doing well in school would mean for her.

This led Shorti to make an appointment to see a counselor, “I flat out told her [the counselor] – this [the abuse] is what I'm here for and she was like well tell me the story about it and I did...” Shorti felt comfortable with her counselor because she was a female and because she was knowledgeable about intimate partner violence, she said of her counselor, “She was really great, she knew everything. So I'm guessing that she has worked with it [intimate partner violence] before...” Through this work she has been able to feel more comfortable. She stated, “...we've kinda been dealing with things, like one

thing at a time like especially with me being able to just walk around campus and interact and communicate with anybody has been really hard.”

Structural description of Shorti’s experience. Shorti was dealing with a very difficult situation while trying to stay focused on her school work and athletic obligations. Being on campus, Shorti was afraid that her boyfriend would be able to find her, “It’s been hard. Cause like, I’ll see things that look like his car or people on campus that look like him and he wants a transfer here to go to graduate school. And I’m just like no, please no, don’t do that.” This continued fear and the flashbacks and nightmares started to affect her school work, “For two or three weeks I fell behind in school and like I couldn’t concentrate, I couldn’t focus cause I was up with nightmares all night. I wasn’t sleeping. My school fell pretty bad for a while.” With support from a roommate and her family, Shorti was able to get help before permanent damage was done to her academic or athletic career.

The essence of Shorti’s experience. Shorti experienced an assault by someone that she cared about and trusted. This experience caused difficulties in her life that she thought, at first, she could handle on her own. She became quite distressed and had what she described as a “breakdown.” She felt afraid on campus, not only of her ex-boyfriend showing up on campus but of all males. She could not sleep or concentrate on her school work. She had trouble with her game and was afraid of her male coaches. She talked to people in her life that she trusted and with their support she sought mental health treatment. Shorti felt she had a good match with her counselor and could tell that her counselor had a lot of knowledge about intimate partner violence. Shorti was able to tell

her story and get the support that she was seeking. As a result, Shorti believes that she is making progress and getting her life back.

Jane

Textural description of Jane's experience. Jane's experience of intimate partner violence was with a long term, long distance boyfriend who was controlling and violent, "My boyfriend lived seven hours away so we never really got to see each other a lot. He's just really really controlling basically. He only got violent with me...about...one time he locked me in his basement. One time he pushed me down some stairs. That was probably the most violent he had ever been. A lot of times he would get upset, he wouldn't let me leave." Even though Jane was in a long distance relationship, she felt controlled by her boyfriend, "Basically I avoided other relationships girlfriends/friends. If I wanted to go out and hang out with my friend, just like at her house, watch TV, I would get drilled about it. Like, 'Were you drinking? There were guys over there I just know it.' So like that. So basically all I did was go to class and come back and if I went running or to exercise or something and I missed a phone call, he would be like, 'What were you doing? You weren't at the gym for an hour, what were you doing?'" So I always had my phone on me and I didn't talk to anyone about my boyfriend. I knew I was in a bad relationship and I was kind of ashamed of it." There were times when Jane's boyfriend would become physically violent, "...that is when he pushed me down some stairs. It was like outside, cement stairs. I don't know what it was but it hurt, it took like a month to heal. So it might have been a fracture or something. I was actually really scared and he threw my suitcase out on the lawn. I was just like sitting out there and he was like 'come back inside, I'm sorry.' I went upstairs and I was so scared of him. I locked myself in a

room and he like went crazy, trying to get in the room. I called the police. He broke my phone. He actually did that a lot. He would break my stuff, my phone, he broke I think 3, no 2, 2 of my phones.”

Jane did not define the relationship as abusive, “...I didn’t see it as abuse. And then I was also under the blanket of it was all alcohol related and if he was ever violent it was alcohol and we had an agreement that he would not drink anymore. Which he did all the time behind my back anyway.” Jane took on responsibility for the relationship and blamed herself for the abuse, “I was ashamed of it. That it had happened to me at all. The hardest thing for me was to admit that...I was ashamed that it was happening to me but since I was depressed anyway I thought it was me. It was hard to realize that someone that I loved so much didn’t give a crap about me.” Jane also felt like the abuse was her fault in some way. She stated that she would do things that she thought were just as bad as what he was doing, she stated, “He wouldn’t back down from an argument until I was crying or I would threaten to kill myself or cut myself and then he would back down.”

While Jane did not go in to counseling to talk about the relationship, she was able to talk about what she was going through. She went in to counseling due to feelings about a recent abortion, “I was so depressed about the baby, so I had to get a new therapist to deal with that. She kind of made me see that he was abusive.” She continued with the relationship and then went to see another counselor, “I didn’t want to kill myself but I felt like I was in a bad place and if it progresses I might start thinking that so I checked in to the hospital and there was a woman there who just came for cognitive therapy and she would meet with me and her thing was that you need to think about these different things. So I sought her out and wanted to see her...She’s actually the one who got me to break

up with him again and helped me get more self confidence.” Jane felt broken down by the behaviors of her boyfriend, and this feeling was cumulative as this was not the first abusive relationship Jane had experienced.

Structural description of Jane’s experience. Jane was not able to experience college the way she wanted to, “I definitely did not have the college experience because I totally avoided it so I wouldn’t have to argue with him. ... We couldn’t even talk on the phone; it was always an argument and me defending myself. Basically our relationship was so stressful that I couldn’t take more than 12 credits each semester which is why I’m doing an extra half [year]. I couldn’t handle getting my homework done in the time that I wasn’t fighting with my boyfriend.... Sometimes I don’t even remember past classes or how they were I just remember what we were fighting about during some of the semesters.” Jane found herself unable to get her school work done in the way she wanted to, “But then we would always get in a fight on the night before a paper was due or a test. I would spend about two or three hours arguing with him and then I would have to stay up the rest of the night trying to get my studies done. It’s kind of weird now to have all the time in the world to do my homework and stuff.” Jane’s relationship extended the amount of time it took her to get her degree and added stress and pressure to her academic life.

The essence of Jane’s experience. Jane tried to maintain an abusive relationship and better herself by going to college. This proved to be a difficult task. Jane was not able to take as many courses as she wanted because of the stress of her relationship. She also found herself isolated and unhappy. Jane endured physical, psychological and emotional abuse, although she did not define the relationship as an abusive one until a counselor

suggested it. She went to counseling because she became depressed and was concerned about becoming suicidal. She saw several counselors. She never went because of the relationship; rather she went to deal with the residual emotional effects of the relationship. She took hits to her self esteem and self concept and even had to make a very difficult decision when she became pregnant. Jane appreciated a counselor who was “blunt” with her, who called her on things but was still understanding and empathetic. She wanted to be heard and understood but she also wanted to be challenged. Jane has not completely separated herself from this individual but is no longer dating him. She tried to leave several times before actually deciding that she could no longer remain in the relationship. She is planning on moving away to continue her academic career.

Dawn

Textural description of Dawn’s experience. Dawn’s experience with intimate partner violence was one of feeling controlled and trapped. She was isolated and went back and forth about leaving for some time. Dawn moved away from her family to be with her boyfriend, “He seemed nice at first. It was kind of the verbal threats. If things didn’t really go his way he would threaten me... We moved away from my family and I felt pretty isolated even from my friends.” Dawn felt broken down by the things her boyfriend said, “A lot of times he would tell me that I wasn’t worth anything, that my ideas were a fairytale and that I wouldn’t find anyone that would give me the type of love I wanted, that I should almost just settle because he would never cheat on me. ...I had lost self esteem and confidence.” Dawn felt controlled by her boyfriend’s moods and by his questioning, “His fuse was like this [gesture indicating about an inch] long. It just felt like anything I did or said he’d just be mad immediately. There were nights where I

would cry myself to sleep...I hated going home... It was just little things like, 'you didn't respond to my email right away. What were you doing?' He always thought I was cheating on him or something...I felt like I was in jail, controlling everything that I did."

Dawn found that the decision to leave was a difficult one, "...I couldn't tell him over the phone and I sent him an email that I can't do this. So of course that just like put him in a rage. He came home, threw a lot of my stuff on the lawn and was throwing all of my stuff in the living room and I called my parents. ... He slept on the couch that night but then he came in to the bedroom. It kind of scared me because before he had slept with a knife next to him just for safety or whatever but he took the knife out with him and then brought it back in with him. I was just really scared because he was so mad that I was leaving him and I thought he was going to try and do something to me." Dawn was able to get herself out of the relationship. Dawn reflected that while she had not previously been in an abusive relationship she did come from a strict household where her father was an authoritarian.

Dawn had a hard time dealing with the abuse that she had suffered, "It was very difficult, very emotional. I had very little self confidence." Dawn went to counseling to get help but found that it was not what she was looking for so she did not return. Dawn's parents encouraged her to go back, "...and then I went back home for Christmas over the break and then it was so hard for me to come back here [to school]. Even though I missed school and living independently, I didn't want to be away from my parents again. So my dad suggested that I should go to counseling. They still saw that I was really sad and depressed. Even though I was with them I was still really depressed." Dawn was looking for a counselor who would give her space and allow her to go at her own pace. She found

someone who let her tell her story and allowed her to be vulnerable, “The other counselor she just kind of let me talk and tell my story and I just felt more comfortable with her. She allowed me to be very vulnerable.”

Structural description of Dawn’s experience. Dawn felt that the relationship put a significant strain on her ability to focus on her school work, and the responsibilities that she had at school caused problems in her relationship, “...if I had to do something that would cut in to our time together he would make me feel bad about it. He was really impatient. I had joined some group, some coarse group and we had practices. A lot of times he acted as if I wasn’t really in it and I was really doing something else. I just felt like I had to prove everything to him, that I had to study or had a test or whatever.” Dawn had to justify everything that she did, “Even using the computer when we lived together was such a burden to him. I’m just thinking about it now how he controlled even just the computer. I couldn’t really even get on the internet. Oh my gosh.” Dawn was not able to go back to school full-time until she left that relationship.

The essence of Dawn’s experience. Dawn was in a relationship that she described as ‘like being in a jail.’ She was unhappy and felt that she was being controlled most of the time. Dawn was away from friends and family. She was so unhappy that she dreaded going home at night. She was constantly having to defend herself and the things that she needed to do for school. She finally decided to leave but felt that she could not do it on her own. She called her parents and they helped her get out. Dawn felt lost and depressed after leaving. While she felt good about being on her own and finally being able to go to school full-time, she was having a hard time dealing with the effects of the abuse. She went to see a counselor but did not feel that it was a good fit for her. After some

encouragement from her family she tried again. This time Dawn found a counselor who gave her the space to be vulnerable and to talk about what she had been through.

Allison

Textural description of Allison's experience. Allison's experience with intimate partner violence was one of accountability and control. Allison felt like she had to do everything right, "It was not like the extreme but I considered it abuse in the fact that it was emotional. There were a couple of occasions where it became physical. ...Right away it was that he was in charge type of establishment. We moved in together and then – I mean, a great guy – and then we moved in together and then it wasn't until...like a year or two years into the relationship...in any stressful situation, it was kind of like, don't bother him or he will get upset or whatever... Allison often had to explain herself to her boyfriend, "Just the idea of for three months there, I wasn't working and it was like having to justify all that I did all day while he was at work., I think that kind of started it. Allison would also have to justify spending time with her family, "I'm like, 'well, sorry, I'm going to go visit my sister because it's my niece's birthday.' 'Are you crazy – you have homework, you have to clean the kitchen? Okay, if you clean the kitchen, then you can go.' 'I'm 19, what are you talking about if I clean the kitchen, I can go. You clean the kitchen and I will see your ass later.' So, then, I take off and then do I even want to come back."

There were several times where the abuse became physical, "He gets up to go to the bathroom and I was just joking around with him because I was eating cereal. 'Oh, I dropped my cereal on your laptop' while he was like over there in the other room. He rushes back in there realizing that I was just joking. I really didn't drop my cereal on his

laptop. I was just messing with him. Maybe that was a little bit of my passive-aggressiveness – trying to joke around with him. But, I wanted him to get off his stupid laptop already. He slapped me. He was saying don't joke around about that. ... I remember a couple of occasions – for sure two – where we'd be driving and I was really, really bad about checking my blind spot. So, we'd be driving and on a couple of city streets, they kind of merge and so I know I should check my blind spot. I do the safe check – where you look but I really don't know what I was looking for and so I was just kind of turn my head. We almost hit a car. So, he just grabbed my hair --- like, 'look, here is how you check your blind spot' – kind of like trying to help me but you really don't need to grab someone's hair and push them so they can see the blind spot.”

Allison was having a hard time dealing with everything she had going on in her life, “I had started my new job and just the idea of working full time at that job... Going to school and this time I was like ¾ time and then, cooking and cleaning, family stuff. It was just like ‘are you kidding me.’ So, I started the counseling and not to address any type of abusive situation just to address like everything – as a whole to figure things out and during that time I was also contemplating just getting out of the situation. That wasn't for the abuse but just like ‘is this the person I really want to be with for the rest of my life.’” Allison felt like the abusive relationship interfered with other parts of her life, “One thing that came out of the counseling was the fact that the reason that I wasn't happy in the relationship, besides the fact that he is really controlling ... was the fact that in the relationship, I wasn't able to see my family as much as I wanted.” Allison felt comfortable with her counselor and was able to sort things out for herself, she stated,

“The counselor was really nice. I didn’t think I would be as comfortable with him because he was a guy but...it worked out fine.”

Structural description of Allison’s experience. All the pressure of the relationship made school more stressful for Allison, “So, maybe that can be attributed to that conditioning of ‘you have to do well or you are going to affect the relationship.’ But, at the same time it did make it more stressful.” If Allison did not do as well on a test or paper, she felt the need to lie about it, “...he would be like how did your test go and I would say that I got a blank percentage above what I really got. I was just like, oh, I’m doing great or blah, blah, blah. I know I could have done better than 85 but, I didn’t want to get into it just because I got a B instead of an A.” Allison spent a lot of time just trying to avoid conflict, “...just didn’t want to go through the lecture and all that stuff.” Allison did well in school and at times appreciated the extra push but generally believed that the added pressure was too much.

The essence of Allison’s experience. Allison had been in a relationship that was encouraging at times but also overwhelming and stressful. She felt like she had to explain herself and live up to a standard that was hard to meet. She found herself having to lie about her grades and hide things from her boyfriend because she did not want to deal with the consequences. There were a few times that Allison’s boyfriend was physically assaultive when trying to correct her behavior. This was enough to keep Allison in line. What bothered her most was that she felt like she had to choose between her boyfriend and her family, and generally he won. Allison decided to go to counseling because it was offered through her work and she was feeling overwhelmed with work, school, and her relationship. She was unhappy with her relationship and was trying to make good

decisions for herself and her future. Allison missed her family and felt a lot of pressure at school to perform a certain way. She was able to talk through this in counseling and realized that she did not want to choose her boyfriend over her family anymore.

Francis

Textural description of Francis's experience. Francis' experience with intimate partner abuse was one of control and manipulation and then abandonment. She felt that things were good in the beginning, "It was slow over time when it happened." She began to feel controlled and manipulated, "It was just these mind games that he was playing. This constant power. Manipulation and power. ...I guess I say I was abused or violence or whatever it was – he never hit me – it was never physical violence whatsoever but it was just more mental. It was mental mind games – it was manipulation." Francis found herself giving in and second guessing herself, "He would manipulate money from me and he would – the friends that I had, he never liked. So, then it got to be that thing where he would plant little notions and ideas in my head about people and slowly I separated from all my friends. I slowly separated from my family."

Francis felt like she couldn't leave the relationship, "I would try to leave and I would always start off at the beginning to try to talk and then he would like 'Now what, do you think you are going to try to leave?' And so it just got to the point where I felt like I was trapped and there were so many times where I tried to end the relationship. My friend and I sat down one night and there was like 8 instances over that year and some months where – I was like, 'I can't do this anymore – this has to stop – I'm not happy.' And of course he would suck me right back in 'Francis, I love you. Things will change.'" While the relationship was difficult, the way it ended was devastating, "He said he was

going to be back in about a half hour and I asked him to get me some food while he was out because I was hungry. He was like – yeah, sure, and I had won some money...he was like, well, I'd won \$500 and he was like 'Well, can I have some money' - and so I ended up giving him \$300 and he left and never came back. No phone call. Nothing." Francis had been in abusive relationships in the past but had never dealt with a loss like this.

Francis had a hard time dealing with the loss of the relationship, "I quit sleeping...So, I have a history of anxiety and depression and alcohol is a great way to numb those feelings and to self-medicate. The anxiety came back. I couldn't sleep. I was afraid to sleep at night. Couldn't sleep in my bed. I slept on the couch. I lost weight. I had no appetite. No desire for anything. I was just a shell. My friend stayed with me because I didn't want to be alone." These feelings led Francis to counseling, "This thing is too big for me to handle on my own. I can't even tell you what spurred it or sparked it in my head. It was when I was driving to work and it was just like I can't live like this." The first counselor that she saw was not a good fit, "But, I had problems with the therapist. Just because I would go in there and just word vomit. But, I would get no feedback." Francis quit going but then decided, because of her difficulties, to return and see someone else. With the second counselor Francis found someone who helped her work through her difficulties, "So, now the therapist I see is wonderful. He has given me so much insight as to – you know we talked about him a lot and about why I feel like I don't deserve to be loved."

Structural description of Francis's experience. Francis felt that the relationship got in the way of her school work, "He injured his back and I missed lots of classes taking him to the doctor appointments.... I mean you can see when he entered my life

and I was straight A's and the semester I met him, I got straight F's. You can see it. A's, A's, A's, B's, A, A, A, B+. And, boom-boom-boom, straight F's. From the semester I met him. It's catching up – well, not exactly catching up but he sidetracked me and distracted me from my goal.” The loss of the relationship caused her even more difficulty at school, “So, when he left, I literally stumbled. I collapsed. It was right in the middle of the semester. It definitely affected my grades. My grades suffered tremendously...I had withdrawn from one of my classes because I had gotten so far behind that I didn't think about the consequences of withdrawal. ...I also failed another class and then miraculously, I passed the rest of my classes. I went to the professors and just explained to them what had happened and they were all very understanding and I made up things and I did that. But, one of the professors was not very friendly. So, hence I am in the class again this semester.” Francis has found a place of support but continues to deal with the academic and emotional repercussions of the abuse.

The essence of Francis's experience. Francis felt like her relationship took over her life. She missed classes, her grades dropped and she lost touch with friends and family. Her boyfriend would play 'mental mind games' with her which led to self doubt. Her identity became about him. This was shadowed only by the effect that him leaving had on her. Her boyfriend left one night and never returned. This was devastating for Francis. She became depressed and suicidal. She stopped going to class and had trouble leaving her house. She was driving one day when she decided this was too big for her to deal with on her own so, she sought counseling. The first counselor was not a good fit for her, but the second one was. Francis needed someone who would give her feedback. She

needed to gain some insight into why she kept finding herself in relationships with men who treated her badly.

Composite Textural Descriptions

Data analysis revealed six composite textural themes. These themes, including quotes and invariant constituents, are described in narrative form as well as in *Table 1*. The six themes were derived from the participant's descriptions of abuse and their process of help-seeking.

Shame and Embarrassment

Being in an abusive relationship led to feelings of shame and embarrassment for the women in this study. Being in an abusive relationship is not easily defined or acknowledged by those in the relationship. These women indicated that upon looking back it was easy to see the signs of abuse but at the time there were many reasons not to admit it to themselves or to others. In some cases, the participants were not able to admit to themselves that they were in an abusive relationship. They did not want to believe that they could let this happen or that the person that they cared for would do this to them. One participant stated, "It was hard to realize that someone that I loved so much didn't give a crap about me." She further explained that she did not know it was abuse until a counselor described it as such and even felt like at times it was she who was the abusive one because she would go to extreme measures, like cutting on herself, to get her boyfriend to stop his abusive behavior towards her.

When the realization does come that the relationship is abusive, it is easier to decide to handle it on one's own or to just put up with it so that friends and family do not know or have to worry. One woman stated, "I was talking to my mom about it and she

Table 1

Textural Themes and Invariant Constituents

Theme	Invariant Constituents	Sample Quotes
Shame and Embarrassment	Keeping the abuse to themselves.	I was ashamed of it. That it had happened to me at all.
	Being afraid to speak about their experiences out loud.	I really didn't think about it as an abuse type of thing.
	Blaming themselves.	I think it was one of those like say it out loud things.
	Believing they should know better.	I felt shame. I felt embarrassed. I didn't want to tell them [family].
	Not defining experiences as abuse.	
	Not wanting to admit that the relationship was not as good as it seemed.	
	Thinking they can manage on their own.	
	Not wanting to worry others.	
Isolation	Physically moved away from friends and family.	We moved away from my family and I felt pretty isolated even from my friends.
	Discouraged from spending time with others.	
	Told that they could not see friends and family.	He would usually degrade my friends or degrade the event...
	Forced to spend more time with boyfriend.	Basically I avoided other relationships girlfriends/friends.
	Friends, outside activities, and family are ridiculed.	...slowly I separated from all my friends. I slowly separated from my family.
	Staying away so others do not know about the abuse.	I wasn't able to see my family as much as I wanted.
	Avoiding having to explain their whereabouts and upsetting their	
Being Controlled	Having to explain their whereabouts.	...he scared me out of saying anything.
	Dealing with accusations/jealousy	He's just really really controlling basically.
	Giving up on other activities to be with boyfriend.	A lot of times he would get upset, he wouldn't let me leave.
	Being manipulated.	...I felt like I was in jail, controlling everything that I did.
	Avoiding fights.	
	Being threatened.	...I felt like I was trapped and there were so many times where I tried to end the relationship.
	Being physically or verbally abused in an effort to control.	
	Changing their own behavior to avoid difficulties.	
Unable to leave the relationship.		

Table 1 continues

Theme	Invariant Constituents	Sample Quotes
Distress	<p>Being fearful.</p> <p>Feeling anxious.</p> <p>Increased stress and pressure.</p> <p>Feeling depressed or sad.</p> <p>Feeling confused.</p> <p>Low self esteem.</p> <p>Anger towards others and self.</p> <p>Symptoms of trauma.</p> <p>Not being able to trust.</p> <p>Suicidal ideation.</p> <p>Triggering thoughts of past abuse.</p> <p>Distress led to counseling.</p>	<p>I was just scared. ...I was just freaked out to go anywhere.</p> <p>...cause I'm just full of anger with him.</p> <p>I had a really bad breakdown.</p> <p>It was very difficult, very emotional.</p> <p>I had very little self confidence.</p>
Help-seeking	<p>Sought counseling because of distress.</p> <p>Wanted to talk about the relationship.</p> <p>Feeling stressed and overwhelmed and needed help.</p> <p>Feeling like they couldn't take it anymore.</p>	<p>I was like - I can't do this by myself anymore.</p> <p>So, I started the counseling. And not to address any type of abusive situation. Just to address like everything...</p> <p>I kinda fell into this depression I was like - I can't handle this anymore...</p>
Helpful Counseling	<p>Preference for female counselor.</p> <p>Desiring a supportive place to tell their story.</p> <p>Wanting to go at their own pace.</p> <p>Needing feedback.</p> <p>Focusing on strengths, building self esteem and empowerment.</p> <p>Counselor is knowledgeable about intimate partner violence.</p> <p>Looking for a good fit with their counselor.</p> <p>Trying out different counselors before they found the right one.</p>	<p>She [the counselor] was really great, she knew everything.</p> <p>With her [the counselor], our personalities were really good.</p> <p>So I think that, building self esteem.</p> <p>It was a male counselor and I just didn't feel comfortable with him.</p> <p>The other counselor she just kind of let me talk and tell my story and I just felt more comfortable with her.</p>

was asking me why I wanted to leave because up until that point I hadn't told her anything, everything was fine, everything was good. I didn't want to worry her. At the time I told her that I would tell her at some point when I'm out of the relationship about all of the stuff. And of course that really worried her." Another woman stated, "I thought I could deal with it myself." Saying it out loud or admitting it to others makes the situation real and coming to this realization leads one to feel that they should have known better or should have been able to leave the relationship. One participant stated, "You don't really want to blemish that [view of the relationship] by actually saying it out loud that 'you're a jerk and you're abusive' and that idea." Another woman stated, "...I knew better then to stay with him but I didn't know how to get out."

Shame is a powerful emotion and one that often leads to isolation. Shame was a common reason given as to why an abusive relationship was kept hidden and even sustained. One participant highlighted this fact by stating, "I knew I was in a bad relationship and I was kind of ashamed of it." Another woman stated that the reason that she did not tell anyone was, "Cause I felt stupid about it." Often these feelings facilitated an exhaustive effort to keep the abuse hidden. These women took on responsibility for the abusive situation, feeling like it was their fault or that they should have known better. Instead of placing the blame on the abusive boyfriend or the relationship, these women took on feelings of guilt, shame and embarrassment as if they had done something wrong.

Isolation

Being in an abusive relationship is a lonely prospect. Isolation can be physical and emotional and both can take their toll. Participants described feeling isolated from family and friends. In some cases this separation was both a physical and an emotional one and

in others it was generally an emotional distance. Being physically apart from friends and family can make it difficult to access the people who are generally supportive. One participant stated, "I was 20 hours from home and I knew nobody..." Another woman stated, "We moved away from my family and I felt pretty isolated even from my friends."

All of the participants described a systematic separation from the supports in their lives. In some cases these women were discouraged from seeing their friends and family. One participant stated that if she did go to visit friends and family she would have to justify why she wanted to do this, she stated. "...I would get drilled about it." Another woman stated that she could only go to see her family if it were a holiday or some kind of celebration, she stated, "It was that I was choosing between being with my family and being with him." There were repercussions for spending time away from the relationship. The consequences often led to the decision that it was just easier to not even ask or try to see friends and family. The argument or abuse that was triggered by being away was not worth it.

In some cases the participants had to endure a more subtle form of separation where the friends, family or activities that they enjoyed were ridiculed or bad mouthed. One participant stated, "He would usually degrade my friends or degrade the event..." Another woman described it as mental mind games and stated, "...he would plant little notions and ideas in my head about people and slowly I separated from all of my friends." At times the participant chose to separate herself from others so that they would not become aware of the abusive situation that she was in. Even when the family had some idea of what was happening, the separation made asking for help difficult. One woman stated, "At this point, my family knew something was going on but I had been so

separated from my family...” To avoid the fights or because of the slow, subtle separation these women found themselves relying on their boyfriends for support. This put them in a difficult situation and resulted in the decision to endure a situation that they may not have stayed in had it not been for the isolation.

Being Controlled

Being in an abusive relationship can make one feel that their every move is being controlled. This was the experience of these women; one participant stated, “He’s just really really controlling basically.” Another participant stated, “I felt like I was in jail, controlling everything that I did.” These women would have to explain where they were going and what they were doing. This would often lead to a fight or being told that they could not leave. One participant stated, “A lot of times he would get upset, he wouldn’t let me leave.” One woman described the things that she would have to do or say to be able to leave; her boyfriend told her “Okay, if you clean the kitchen, then you can go.” At times this would involve threats or intimidation. One participant stated, “He scared me out of saying anything.” Another participant described her boyfriend breaking her things and physically assaulting her to get her to do what he wanted. Another participant described a knife that her boyfriend would have next to him when he slept.

These women stated that when they did go out they would then have to deal with the accusations and jealous behaviors of their boyfriends. One participant stated, “He always thought I was cheating on him or something.” Another participant stated, “He would say he didn’t trust me and told me that I couldn’t go downtown.” To avoid these accusations, some would lie about what they were doing or not participate in activities or events. These women would change their behavior in order to avoid the argument or

upsetting their boyfriend. This controlling environment made it difficult for these women to leave the abusive relationship. One woman stated, "...I felt like I was trapped and there were so many times where I tried to end the relationship." These woman found themselves in a controlling situation that was hard to deal with and difficult to leave.

Distress

The abusive situation and the ending of that relationship caused psychological distress for the participants. Being scared, anxious, depressed, angry and overwhelmed was common. The participants described situations that led to the psychological distress. They described put downs, assaults on their self-esteem, physical and emotional abuse, sexual assault, and "mental mind game." One woman stated, "A lot of times he would tell me that I wasn't worth anything, that my ideas were a fairytale, and that I wouldn't find anyone that would give me the type of love I wanted..." Another stated, "...he would make me feel guilty for asking where he has been and then I would start to question myself as well." One often long-standing result of intimate partner abuse is low self esteem. One participant stated, "...he was really cautious about making sure that my self esteem didn't go very high" Another woman stated, "I have very little self confidence." This low self confidence was also described as feeling broken down and a loss of identity. One woman stated, "I had to rebuild myself completely..." Another woman stated, "He was so much of my identity and so much of me was wrapped up in him."

Some described having a 'breakdown' due to the abuse or the loss of the relationship. One woman stated, "I had a major like week long break down..." Several of the women stated that they were sad and depressed and for a few women this led to suicidal ideation. One participant stated, "I lost weight. I had no appetite. No desire for

anything. I was just a shell.” Another stated, “I literally just went in and cried for like a week straight and became suicidal.” For some the result was anger. They were upset that this had happened to them and angry that someone had treated them this way. One woman stated, “...I’m just full of anger with him.” This led to a lack of trust in others and specifically with men, she stated, “I don’t trust guys, I don’t trust anyone.” These women also described symptoms consistent with trauma such as nightmares, intrusive thoughts and fear. One woman stated, “I was just scared. I started having nightmares with all that happening again. It started like with things coming in to my head during the day and I just had a major like week long break down and I was like I need to go see somebody.” The lasting effects of this abuse were significant. One woman stated, “Even though I missed school and living independently, I didn’t want to be away from my parents again. So my dad suggested that I should go to counseling. They still saw that I was really sad and depressed.” Another woman stated, “I didn’t want to kill myself but I felt like I was in a bad place and if it progresses I might start thinking that so I checked in to the hospital...” For several of the women it was the psychological distress that they were feeling that led them to seek counseling.

Help-seeking

There were two primary reasons given for the decision to seek counseling; distress caused by the relationship and stress in their lives. Some talked about going to counseling because of the distress caused by the relationship or the ending of the relationship. The participants stated that they went into counseling because they felt like they could not handle things on their own any longer. Some of the women talked about feeling sad, depressed and suicidal. One participant stated, “I kinda fell into this

depression, I was like – I can't handle this anymore, I can't handle the nightmares anymore. Some were feeling stressed and overwhelmed and wanted to talk with someone about all the difficulties in their lives. One participant stated, "So I was just like – give me someone to talk to that's a female and I'll do it just cause I just can't take it anymore." Another stated, "I need help. I need help. This thing is too big for me to handle on my own."

Generally the participants did not go to counseling while in the abusive relationship. Instead, they went to deal with the difficulties that were having after the relationship ended. Two of the participants did seek counseling while in the abusive relationship but stated that they went to deal with all of the difficulties they were having and not to talk specifically about the abuse. One woman stated, "Going to school and this time I was like $\frac{3}{4}$ time and then, cooking and cleaning, family stuff. It was just like 'are you kidding me.' So, I started the counseling and not to address any type of abusive situation just to address like everything..." Another went to deal with how she was feeling after making the difficult choice to have an abortion. She explained, ". So, he wasn't there for me so I had an abortion and after that he would try to fight with me and I would just be like 'whatever.' I would just go to sleep because I was so depressed about the baby, so I had to get a new therapist to deal with that." It was the effect of the relationship on their lives that brought them in, even if they were not making the connection between those difficulties and the relationship. While it may not have been the expressed reason for seeking counseling, all of the women discussed the abusive relationship.

Helpful Counseling

Several of these women went to more than one counselor before they found someone with whom they were comfortable. These women talked about what worked well for them and what did not. Some of the women stated that they were specifically looking for a female counselor. One participant stated of her first meeting with a counselor, "It was a male counselor and I just didn't feel comfortable with him." Another participant stated that she asked specifically to see a woman when she called in for her appointment. One woman had assumed that she would be seeing a female based on the name of the counselor and was surprised that it was a male, but stated that she was glad that she decided to stick with it. Others looked more for a good fit. One participant stated, "With her [the counselor], our personalities were really good." Another woman stated, "The counselor was really nice."

The work that they did together determined how the participant felt about therapy. They looked for someone who would give them an opportunity to tell their story and to go at their own pace. One woman stated, "The other counselor she just kind of let me talk and tell my story and I just felt more comfortable with her. She allowed me to be very vulnerable." They also looked for someone who seemed knowledgeable about intimate partner violence. One participant stated, "...if they [counselors] like knew a lot of education about it [intimate partner violence] then they know how to talk to you about it. She [the counselor] was really great, she knew everything." Participants talked about specific factors within counseling that they found helpful. One woman indicated that she was looking for a counselor who would give her more feedback, she stated, "...I had problems with the [first] therapist. Just because I would go in there and just word vomit.

But, I would get no feedback.” Another woman stated of the first counselor, “He was very, almost solution focused kind of brief kind of approach and I just didn’t like it. I didn’t feel like I could really express myself. So, I didn’t come back after that first time...”

Participants talked about the importance of working on self esteem, focusing on strengths, and working with them to be more realistic about their situation. One participant indicated that it is helpful to talk about other “powerful women” who have been through the same thing to combat some of the feelings of guilt and shame. Another woman stated, “It’s amazing how you can help people see their strengths and help them see how their partner suppressed their strengths.” They wanted to be heard and supported but also wanted the counselor to be real with them. One woman stated, “She was really perceptive and she could tell if I was trying to avoid something, and she knew when I was sneaking stuff like she was really blunt.” Once they found the right fit, these women felt like counseling was facilitating their process of getting their lives back.

Composite Structural Descriptions

Data analysis revealed four composite structural themes. These themes, including quotes and invariant constituents, are described in narrative form as well as in *Table 2*. The four themes were derived from the information that the participant’s provided regarding the abuse in the context of college life.

Impact on Academic Performance

These college women saw the effects of the abusive relationship in their school work. They experienced missed classes, falling grades, lack of focus and concentration, and an inability to take as many classes as they wanted. Due to the added stress and

Table 2

Structural Themes and Invariant Constituents

Theme	Invariant Constituents	Sample Quotes
Impact on Academic Performance	<p>Not able to go full-time.</p> <p>Grades suffered.</p> <p>Missed classes.</p> <p>Not remembering coursework because of relationship concerns.</p> <p>Fights before tests or assignments are due.</p> <p>Distressed and missing class.</p> <p>Not able to focus on school.</p> <p>School and relationship are not compatible.</p>	<p>Basically our relationship was so stressful that I couldn't take more than 12 credits each semester which is why I'm doing an extra half [year].</p> <p>For two or three weeks I fell behind in school and like I couldn't concentrate</p> <p>Sometimes I don't even remember past classes or how they were I just remember what we were fighting about during some of the semesters.</p>
Impact on Overall College Experience	<p>Not able to engage in extra-curricular activities.</p> <p>Not being known on campus.</p> <p>Feeling isolated.</p> <p>Having to explain themselves and defend their whereabouts.</p> <p>Not comfortable on campus.</p> <p>Not able to meet new people</p> <p>Not able to be a college student.</p>	<p>I definitely did not have the college experience because I totally avoided it so I wouldn't have to argue with him.</p> <p>I don't trust any male figure, which our head coaches [as a student athlete] are male figures and even being around them kind of scares me.</p>
Impact on Functioning in College Setting	<p>Afraid to be at school.</p> <p>Knowing that they can be found on campus.</p> <p>Added stress and feeling overwhelmed.</p> <p>Pressured to do well.</p> <p>Desire to be in school is not respected or supported</p> <p>Not able to concentrate on school.</p> <p>Having to defend time spent on school.</p> <p>Putting off what they want</p>	<p>Cause I'm like scared to death if he comes here.</p> <p>...if I had to do something that would cut into our time together he would make me feel bad about it.</p> <p>...you are not thinking, "Oh, shit, how this will affect my relationship."</p> <p>I would say that really added more pressure.</p>

Table 2 continues

Theme	Invariant Constituents	Sample Quotes
Suggestions for Administrators	Prevention is important.	...promote more safety.
	Education about intimate partner violence.	Like I really don't ever see anything on campus about like things like telling girls to be careful or you never know what's going to happen...
	Men and women should be the target of preventive work.	
	Faculty should be good role models.	So, just making sure that more people learn about it or just like mandatory things that people have to do as a part of their program.
	Professors and others should be more understanding.	
Promote resources that are available.		

pressure they felt, these women were not always able to attend school full-time. One participant stated, “Basically our relationship was so stressful that I couldn’t take more than 12 credits each semester, which is why I’m doing an extra half [year].” Participants described missing classes which led to lower grades. One participant stated, “He injured his back and I missed lots of classes taking him to the doctor appointments because he didn’t have a driver’s license...” These relationships took their time and energy away from school. One participant stated, “I mean you can see when he entered by life and I was straight A’s and the semester I met him, I got straight F’s.” Another participant stated, “Sometimes I don’t even remember past classes or how they were I just remember what we were fighting about during some of the semesters.”

At times, the difficulties in the relationship led to not being able to get work done. One woman stated, “I couldn’t handle getting my homework done in the time that I wasn’t fighting with my boyfriend.” She went on to state, “...we would always get in a fight on the night before a paper was due or a test. I would spend about two or three hours arguing with him and then I would have to stay up the rest of the night trying to get my

studies done. Another woman stated, “School doesn’t come easily to me and I have to study and work for it but having a job too and just life’s responsibilities and when he walked in and school went to the wayside...” The distress caused by the abusive relationship made it difficult to concentrate or attend to academic obligations. One participant stated, “For two or three weeks I fell behind in school and like I couldn’t concentrate. I couldn’t focus because I was up with nightmares all night. I wasn’t sleeping. My school fell pretty bad for a while.” Another participant stated, “So, when he left, I literally stumbled. I collapsed. It was right in the middle of the semester. It definitely affected my grades.” These women were trying to maintain a stressful and abusive relationship and watching it take a toll on something that they are doing for themselves and their future, school.

Impact on Overall College Experience

Being in an abusive relationship makes it difficult to have a “normal” or satisfying “college experience.” Several factors contribute to this including the psychological distress, the controlling nature of their boyfriend, and the isolation and shame. The participants felt like they were unable to be a part of the extracurricular activities on campus. This was, at times, due to the controlling nature of the relationship. One participant stated, “I definitely did not have the college experience because I totally avoided it so I wouldn’t have to argue with him.” Another explained that she did not get involved because she was always having to explain her behavior. She stated, “I had joined some group, some coarse group, and we had practices. A lot of times he acted as if I wasn’t really in it and I was really doing something else.” Because of this, they were not

able to be a part of the college campus. One participant stated, “A lot of people don’t know who I am at my school and my campus is really small.”

The pressure of the relationship also led to added pressure in school, because of this women in this type of relationship do not have the same kind of college experience. One woman whose boyfriend would pressure her to get good grades stated, “...now I laugh about it – that some people come to school and get C’s and like, hey, I am going to graduate...” For some, the abusive relationship made campus an unsafe place. One woman stated, “...me being able to just walk around campus and interact and communicate with anybody has been really hard.” Being involved in other activities on campus were also affected, as described by one woman, “I don't trust any male figure, which our head coaches [as a student athlete] are male figures and even being around them kind of scares me. The demands of the relationship or the residual affects made it difficult to engage in school work and left little time or opportunity for additional social activities. These women described a college experience that was tainted by the abuse and different from those who do not have this added pressure and distress.

Impact of Functioning in College Setting

The impact of being in an abusive relationship is uniquely affected by the college experience. College students normally experience stressors related to performance which are exacerbated by the impact of abuse. The participants described feeling added pressure and stress at school because of the relationship and the ending of the relationship. Some felt that they had to choose between their school and their relationship. One participant stated, “...if I had to do something that would cut into our time together he would make me feel bad about it.” The bad grades and missed classes led to additional strain. These

women worked hard to make up for the difficulties that they had endured. Certain academic obligations were more problematic or took on different meaning because of their experiences. One participant stated, “A lot of times he acted as if I wasn’t really in it [course group] and I was really doing something else. I just felt like I had to prove everything to him, that I had to study or had a test or whatever.” Another woman talked about the difficulty that she faced just trying to get her school work done, “Even using the computer when we lived together was such a burden to him. I’m just thinking about it now how he controlled even just the computer. I couldn’t really even get on the internet, oh my gosh.” One participant realized that things were much easier after the relationship ended, she stated, “[Now] everything seems more doable...you are not thinking, ‘oh, shit, how will this affect my relationship.’” For one participant the college campus became an unsafe place. She stated, “He told me – I will be going to school there next year, I will be there, I’m coming after you and I’m getting you back in my life.” This was frightening for her. The interaction between the difficulties of the abusive relationship and the academic obligations of being in school led to added distress for these women.

Suggestions for Administrators

As these women have firsthand knowledge of what it is like to be in an abusive relationship and trying to stay focused on school, they have valuable insights as to what a college/university might do to respond to and even prevent this type of situation. The women had a great deal to say when asked what college administrators can do to prevent this type of violence. It was a consensus that prevention is important. Education about intimate partner violence should be encouraged and even required for everyone. One participant stated, “...I really don’t ever see anything on campus about like things like

telling girls to be careful or you never know what's going to happen because I fully trusted him and I never thought it was going to happen.” Another woman stated, “I went to a...seminar on dating and there was a few people there but it brought forth abusive relationship types and what it looks like and what do you want in a relationship. What is healthy and what is unhealthy. I guess making that more overt. You know, like in the dorms maybe.”

It was suggested that both men and women should be the targets of this information. One participant stated, “I think that a lot of times those types of situations have to do with just education and self esteem and so forth. So, just making sure that more people learn about it or just like mandatory things that people have to do as a part of their programs.” Another woman suggested that faculty could serve as role models, she stated, “As far as faculty goes they could just be not reinforcing that macho style. It's reinforced all the time.” It is important for counseling professionals to do outreach as well. One participant stated, “[A counselor came to talk to a group and said] ‘hey, we have counseling’ and he made it seem very like-if you want to talk to somebody, you're not crazy and you can just go...” Helping people to get past the stigma of going to counseling or talking about being in an abusive relationship would benefit those in this situation. One woman stated, “That is just one of the things I have run into is that there is a lot of bias – just preconceived notions and not listening. There is a stigma still...” One participant also talked about what could be done for those who had experienced this type of abuse. She suggested that professors and others should be more understanding of the consequences of intimate partner violence, she stated, “I think they could be more understanding to mental health and to circumstances.”

Group Essence

Intimate partner violence effects one's mental health, self concept, relationships with friends and family, and leads to difficulty with one's obligations. The women in this study found that being in an abusive relationship not only led to difficulties in their personal lives but they also found it causing them significant difficulty in their academic life. The difficulties in their relationships led to a lack of focus, missed classes, lower grades, and lack of social life. Overall, it got in the way of being able to just be a college student. It was generally these difficulties that led these women to seek out a mental health professional. Trouble in school, depression, nightmares, stress and feeling overwhelmed convinced these women that they could not handle their situation on their own. These women were looking for specific support from their counselor. They were looking for someone who could give them space and allow them to be vulnerable. They wanted someone who understood intimate partner violence and could match their particular needs. They wanted to feel better and get their lives back.

Chapter V

Discussion and Conclusions

Discussion

The narratives described in the previous chapter along with the themes that have emerged from the experiences of the women who shared their stories are important information for college faculty, staff and helping professionals and the broader field of psychology. While these themes are of interest in and of themselves, it is important to compare them to the existing literature and to think about them within the context of clinical work. The relationship of the experiences of these women to the themes will be reviewed in light of the existing literature. Limitations of the study, clinical considerations, and suggestions for future research follow the discussion. Finally, closing comments will provide an opportunity for reflection on the researcher's personal experiences during this study.

The women in this study described the abuse they experienced as psychological, emotional, and physical. Research suggests that part of the difficulty in determining the prevalence of intimate partner violence is the question of how to define abuse (DeKeseredy & Schwartz, 2001; National Research Council, 1996). The women in this study were asked to define abuse in their own words without the influence of a preset definition. This type of description was adopted because it is not exclusionary or focused on one type of abuse. The individual experiences of these women are consistent with previous descriptions appearing in the literature of intimate partner violence in college (Aizenman & Kelley, 1988; Albaugh & Nauta, 2005; Neufeld, McNamara & Ertl, 1999; Riggs, 1993). Research suggests that the majority of women who experience intimate

partner violence in college report it as psychological abuse (Albaugh & Nauta, 2005; Neufeld, McNamara and Ertl, 1999). The women in this study also indicated that the most prevalent type of abuse was psychological abuse and described their experiences as being put down, ridiculed, controlled and continually questioned. These experiences and their responses led to difficulties in their personal and academic life. Beyond the concern caused by the difficulties described, additional concern is warranted in light of the research suggesting that psychological abuse is frequently a precursor to and an accompaniment of physical abuse (Martin, 1981; Okun, 1986; Tolman, 1989; Walker, 1979). Two of the women did describe incidents of physical violence and one woman described a sexual assault. These reports are consistent with research indicating that roughly 3% to 5% of undergraduates report having been physically assaulted, including being choked, beaten, or threatened with a weapon (Aizenman, & Kelley, 1988; Riggs, 1993). It is important for college and helping professionals to remember that definitions of abuse can vary and it is important to ask about both psychological and emotional abuse as well as physical abuse when assessing for intimate partner violence. When assessing for partner abuse, it would appear from this study that it is important to use descriptions of behavior rather than definitions of abuse as most of the women did not see the behaviors as abusive.

The women in this study also discussed the cyclical nature of the abuse they experienced, which previously has been described by Walker (1984). Each woman talked about the good times they had with their boyfriends and the promises made after an abusive incident. One woman even stated that it was these promises that kept her from leaving. Despite this controlling aspect of abusive relationships, these women, and others

like them do leave. Research has shown that women are actively engaged in efforts to stop the abuse (Gondolf & Fisher, 1988; Schwartz, 1988), despite the widely held belief that they “let it happen.” Several women in this study stated that they had tried to leave or had thought about leaving several times before they could make it happen. In some cases, they knew that the relationship was an abusive one but did not know how to get out; others were not willing to admit that it was abuse but knew that they were not happy. This information is important for prevention efforts. For instance, outreach and educational efforts can highlight these aspects of abusive relationships and inform women of their options and opportunities to leave these relationships. It is also important to know as a helping professional to not give up if the first attempt is not successful. Helping men and women to understand what abuse is may help them to realize that they can make different choices or do something about the difficulties that they or their peers are experiencing.

For all of these women, previous abuse was an issue, some from past boyfriends and some from their family of origin. Some research suggests that having experienced abuse in the past makes women more susceptible to finding themselves in similarly abusive situations (Marshall & Rose, 1987) with an increased probability of future relationship abuse (Makepeace, 1981; O’Leary, Barling, Arias, & Rosenbaum, 1989; Scarpa, 2001; White & Koss, 1991). In addition, individuals who have experienced abuse in the past are less likely to leave an abusive relationship (Gelles, 1987; Strube & Barbour, 1983; 1984). Several of the women talked about past patterns of unhealthy relationships, some since childhood. They voiced a desire to work on changing these patterns through counseling. Two of the women even indicated that they were now in

healthy relationships and feeling good about themselves and their ability to find someone who would treat them better. This information is useful in terms of assessing for risk factors. Women who have been in past abusive relationships or family situations can be made aware of the potential of ending up in a similar situation in the future. Educational programming could be aimed at women with a history of abuse to maximize prevention efforts.

The theme of *shame and embarrassment* emerged as women talked about why they did not tell others about the abuse. The research offers several insights as to why women do not initially report or discuss this type of abuse. It has been suggested that women do not see the abuse as serious, they have a fear of being blamed, a fear of retaliation by their partner, or they have fallen into the societal practice of minimization and denial (Pirog-Good & Stets, 1989). Only one of the women in this study contacted the authorities. She did so during a particularly violent encounter and afterwards stated that she felt bad and apologized to her boyfriend. All of the women got to the point where they sought out professional help, but it generally was not because they believed they were in an abusive relationship. In fact, most of them did not initially define the relationship as abusive. Many researchers have documented the fact that many victims do not identify themselves as such (Bornstein, 2006; Enns, Campbell, & Courtois, 1997; McCloskey & Grigsby, 2005; Wolkenstein & Sterman, 1998). This may be in part due to the fact that the majority of the abuse was psychological rather than physical. Several of the women started their story in an almost apologetic way by indicating the abuse had not been physical. Research suggests that women who sustain less severe forms of physical

or sexual abuse may view these incidents as normal or not serious (Pirog-Good & Stets, 1989).

Each woman talked about keeping the abuse to themselves because they felt at fault for their situation. Anderson, et al., (2003) have suggested that the internalization of blame makes it difficult to escape, as the victim takes responsibility for repairing the damage. One woman stated that she did not tell anyone about the abuse because she believed that she should have known better then to stay in that kind of relationship. Another woman stated that she was unwilling to admit to her family that the relationship with her boyfriend was abusive because she wanted to maintain some of her pride. Ferraro and Johnson (1983) noted several reasons why women do not leave, including, a need to care for the abuser, religion or tradition, believing that the abuser could not control his behavior, believing that their injuries were not real, or that they were not blameless victims, and the inability to see alternatives. One woman stated that it was difficult to admit to herself that someone that she loved could treat her so badly. Brown (1991) suggested that victims struggle with the reality that the person who professes to love them could assault them and display blatant disregard for their well-being. Chung (2007) also found that the pressure to be in a relationship was cited as a reason young women with violent boyfriends do not tell anyone of the abuse. They want their peers to believe that they have a good relationship. One woman indicated that she did not want others to know that she and her boyfriend had so many problems. The women in this study stated that when they were actually in the situation they did not realize or were unwilling to admit their relationship was abusive. This is of particular importance for those who aim to work with or provide services to this population. Such feelings of

shame and embarrassment can serve to keep these women isolated and in the abusive relationship. Reassurance and efforts to combat these feelings could go a long way in counseling and on campus.

Isolation emerged as a theme for this group of women, which is consistent with the experience of college students as a whole. Roark (1987) suggests that college students typically are in a new setting with a variety of environmental stressors, away from direct parental supervision and old support systems, and in a heightened time of sexual impulses. The intimate partner violence literature mentions isolation as a factor; however, it is not highlighted in the research as much as it was for the women interviewed. These women talked about being cut off from friends and family, emotionally, and for some physically. Some of this was due to the fact that they were in school, but for most it was because of their abusive partners' control tactics. Two of the women talked about being far away from friends and family and feeling isolated. All of the women talked about the more subtle isolation that followed the control tactics of their boyfriends. Several of the women talked about having to defend going out or spending time with family. Often they would be accused of cheating or lying about where they had been. To avoid the fight and potential abusive episode the women chose to go out less. One woman stated that she felt like she had to choose between her family and her relationship with her boyfriend. Friends and family were bad mouthed and ridiculed. One woman stated that her boyfriend continued to "plant" thoughts or notions about her friends and family until she finally separated from them. This partner-imposed isolation is one reason that this population is hard to reach. The experience of isolation for college women appears to be quite different from that of other women who find themselves in abusive relationships.

Further research in this area is imperative to better inform those working with this population. Engaging in outreach and mentoring could serve to connect these women to those on campus. Breaking the isolation could provide an opportunity for these women to get out of the abusive relationship.

The theme of *being controlled* that emerged from the interviews is consistent with the research in the field of intimate partner violence. Pence and Paymare (1986) state that abuse can encompass tactics including intimidation, emotional abuse, male privilege, coercion and threats, isolation, minimizing, denying, and blaming. The women in this study described all of these experiences. They talked about being told where they could go and with whom. One woman stated that she did not feel like she could do the things that she wanted to do. Another woman talked about not being able to physically leave when they were in a fight and getting to the point where she would threaten to hurt herself or begin cutting on herself to end the abusive episode. One woman stated that she was told by her abuser that she should just stay with him because she would never be able to get anyone better. By using put downs and emotional abuse, he was able to control her behavior and keep her from leaving. Several women talked about having to be by their phones when their boyfriends called to check up on them. They would be accused or would get into a fight if they did not pick up the phone or go to see their boyfriend when expected. Jealousy was a common reason given for a partner's controlling behavior and appeared to be a significant factor and a large burden for these women. Jealousy is perceived to be the most common cause of dating violence (Makepeace, 1981; Matthews, 1984; Roscoe & Benaske, 1985; Roscoe & Callahan, 1985; Roscoe & Kelsey, 1986). The control tactics used against these women are a hallmark of abuse. Understanding what

this looks like for college women can help in prevention efforts as well as in counseling. Being alert to these hallmarks and asking the right questions could help elicit more information about an abusive relationship that a woman is otherwise not talking about.

Distress was a particularly consistent theme and one of the major factors that prompted these women to seek counseling. Participants spoke about the distress they felt while in the relationship and after it ended. They described themselves as being fearful, anxious, stressed, depressed, confused, suicidal, as well as describing other symptoms consistent with trauma. They also stated that they had difficulty with trust and self esteem. Walker (1994) described similar symptomatology, indicating that fear, hypervigilance, and lack of trust are hallmarks of long standing abuse. The majority of the women in this study had been in the relationship for a relatively short period of time and yet still displayed the same types of distress.

The partner abuse literature highlights the prevalence of post-traumatic stress disorder (PTSD; Kilpatrick, Ruggiero, Acierno, Saunders, Resnick, & Best, 2003), as well as other mental health concerns such as depression, anxiety, dissociation, personality disorder, psychosexual dysfunction, obsessive-compulsive disorder, substance abuse, somatization, and suicide (Abbott, 1997; Alpert, 1995; Campbell & Lewandowski, 1997; Gerlock, 1999; Gleason, 1993; Gorde, Helfrich, Finlayson, 2004). Additionally, Walker (1994) suggests that sleep disorders, nightmares, panic attacks, nervousness, and hypersensitive startle response are common reactions to being in an abusive relationship. The women interviewed discussed the specifics of the distress they experienced. Several of them talked about having difficulty sleeping, nightmares, and nervousness; however, depression and anxiety seemed to be the most prevalent. Other symptoms include low-

perceived control, dysphoria, poor coping skills and low self-esteem (Aguilar & Nightingale, 1994; Coffey, Leitenberg, Henning, Bennett, & Jankowski, 1996). Several of the women talked about low self esteem and a diminished sense of self. Self esteem was mentioned several times as something that should be a focus when counseling women who have been in abusive relationships. College and helping professionals will be most likely to see this kind of distress rather to be told up front that a woman is in an abusive relationship. Symptoms such as these should be seen as an opportunity to assess for intimate partner violence.

These women also described conditions that had prompted them to seek counseling, which led to the emergence of the *help-seeking* theme. The fact that they actually sought counseling makes them a unique population. Estimates of counseling utilization rates in the literature range from 7% (Gondolf, 1998) to 14.9% (Henning & Klesges, 2002). The majority of the women in this study sought counseling not because they believed they were in an abusive relationship but because of the psychological distress they were experiencing or the difficulty of keeping up with their academic obligations. Several of these women indicated that they felt like they could not handle things on their own anymore. This is an important factor and something that should be a focus of helping professionals and college faculty and staff. Several of the women stated that they went to counseling to talk about how overwhelmed they felt or their relationship, but did not define the situation as abusive. When reaching out to this population, it would be important to focus on these aspects rather than only putting out information specifically for women in an abusive relationship.

The *helpful counseling* theme emerged from a discussion of what worked and did not work for these women in counseling. Most of the women tried more than one counselor before finding a good match. There is support for the efficacy of counseling services for victims of intimate partner violence (e.g., Henning & Klesges, 2002). The literature on counseling theories for working with women who have been in abusive situations suggests that counseling may be an effective approach for improving a variety of outcomes, including self esteem, affect (anxiety, depression, and hostility), assertiveness, social support, locus of control, coping abilities, and self-efficacy (Cox & Stoltenberg, 1991; Mancoske, Standifer, & Cauley, 1994; Tutty, 1996; Tutty, Bidgood, & Rothery, 1993). These women indicated that once they found the right fit, counseling was beneficial.

The women interviewed in this study were clear about the importance of finding the right counselor. They knew they were doing better because they felt better about themselves, were in better relationships, and/or were no longer in so much distress. One woman stated that she felt like she was getting her life back. These women spoke of the importance of finding someone who gave them space and allowed them to work through their concerns at their own pace. They wanted someone who was knowledgeable and understood what they were going through but that was also supportive and gave them feedback. Horton and Johnson (1992) found that professionals with training in abuse who were sensitive to the victim's plight were seen as most helpful. This was validated by the women in this study. One woman in particular stated that she could tell that her counselor had experience with women in her situation and felt appreciative and reassured by that knowledge. Several of the women stated that it was important for them to have a female

counselor. One woman in particular asked specifically to meet with a female counselor when she called to make her appointment and stated that she would not have talked with a male because of what had happened to her. While this was not the case for all of the women, it is an important consideration.

The women in this study spoke about the impact that abuse had on their *academic performance*. Research has shown that the emotional and behavioral difficulties experienced by college women who have been in abusive relationships have a negative impact on multiple facets of their lives, including creating relationship difficulties, problems with concentration, drug/alcohol abuse, and other risky behavior. These behaviors can and often do interfere with their educational and career achievement and thus their economic attainment (Chronister, Wetterson, & Brown, 2004; Scarpa, et al., 2002). Women in this study described problems with concentration and focus. They also talked about missing classes, getting lower grades and taking fewer credit hours. These are factors that have not been mentioned much in the literature. The impact of abuse on college women is important for college faculty, staff and counselors to understand. Falling grades, missing classes, and lack of focus could be an indicator for college staff, faculty, and counselors that a woman may be in an abusive relationship. Most of these women spoke about being good students prior to becoming involved with their boyfriend and the rapid decline of grades once the relationship became abusive. In terms of prevention, all of those in the college environment should be educated and encouraged to see falling grades and lack of focus as an a potential indicator and something that should be addressed immediately. Prevention efforts aimed at college men and women should include information about this potential indicator. While there is some research in this

area, additional information about what this experience is like for women would be beneficial.

The women in this study also spoke about the impact of the abuse on their *overall college experience* specifically about not being able to have a “normal” college experience. Several of them expressed regrets about not being able to be involved in extracurricular activities on campus. One woman stated that she was not known on her campus because she was not able to be involved on campus or in campus activities despite the fact that it was a small campus. The isolation and control that was a part of the abuse these women were living with kept them from engaging in social activities. It made meeting new people and making new friends difficult as they were required to account for their time. Another woman talked about how the abuse impacted what activities she could engage in on campus; making her feel unsafe and fearful. There is very little information in the literature on this aspect of intimate partner violence in college. The results of this study indicate that college faculty and staff, as well as helping professionals, should be looking for women who appear to be isolated and distracted, who are not able to do anything outside of class, or who generally shy away from engaging with new people. Reaching out to these women is imperative.

The women interviewed saw the *distress* caused by the abusive relationship take a toll on their educational experience. College students are particularly sensitive to stressful situations as they are generally separated from their support structures (D’Zurilla & Sheedy, 1991). They are subjected to evaluation such as tests and papers on a weekly basis that is unique to the college environment (Ross, Neibling, & Heckert, 1999; Wright, 1964). Another unique aspect of college life is the fact that it is a closed environment

where a woman who has been victimized could potentially run in to an assailant or be found by her abuser (Rickgarn, 1989; Fisher, Sloan, Cullen & Lu, 1998). This setting can be especially problematic as they may encounter their assailants on campus. For one of the women in this study, the environment was particularly concerning because she was afraid that her abusive former boyfriend could find her on campus. He had made threats that he would transfer just so that he could reestablish their relationship just as she was trying to separate herself from him. Because she was an athlete, she felt that she was exposed and she feared all the males with whom she had contact, including her coaches. For other women, it was more about the added stress and pressure they felt in trying to manage both an abusive relationship and the obligations of their education. Because of the abuse, these women had few supports and felt alone in their struggle. They often had to put their own desires and efforts to better themselves aside so that they could deal with and manage the relationship. One woman was able to articulate her experience with this balancing act as always having to worry about how her school obligations would affect her relationship. The added stress and pressure added to the distress that these women felt. This is something that is important for college faculty, staff, and helping professionals to keep in mind. The college setting can become a stressful and dangerous place for women in an abusive relationship. If allowed to continue these stressors could eventually lead these young women to dropout to relieve the stress they are feeling or to protect themselves from further violence.

A prevention theme focusing on both men and women emerged when women were asked *what they would tell college administrators*. One woman in particular suggested focusing on masculinity. She suggested that male faculty members should act

as role models and provide a male image based on the fair and equal treatment of women. Feminist scholars who believe that violence is based in gender and power and represents men's attempts to maintain dominance and control over women would agree with this focus (Walker, 1984; Yllo, 1993). Another woman suggested focusing prevention efforts on both men and women. Gender theory posits that the construction of masculinity and the meaning of violence for men and women facilitate the high prevalence of intimate partner violence (Connell, 1987; Ferree, 1990; West & Fenstermaker, 1995). In this view, issues of gender and power are seen as an important part of prevention efforts.

Researchers suggest that the social and cultural factors that underlie IPV need to be addressed in prevention efforts (Hage, 2000; Schwartz, Magee, Griffin, & Dupuis, 2004; Walker, 1989). Women in this study also talked about what they would want to see as part of prevention efforts. They stated that men and women should be made aware of what intimate partner violence is and how a healthy relationship should look. Fostering the skills for the development of strong and healthy relationships has been identified as a key target for dating violence prevention (Schewe, 2002). Chung (2007) suggested that education efforts must center on raising awareness that dating violence is prevalent, on explaining why it occurs, and on emphasizing that it is not the fault of individual women who are victims. Focus should be on how women can live free of violence while highlighting the fact that men who are violent should be held responsible for this choice. The focus should also include the examination of attitudes and beliefs regarding dating violence (Schwartz, Griffin, Russell, & Frontaura-Duck, 2006). The women in this study suggested specifically that prevention efforts should be mandatory. One woman stated that programs and even residence halls should require students to attend talks about what

abuse can look like, what one can do to keep themselves free of this kind of abuse, and what resources are available if they find themselves or realize that a friend is in this kind of situation.

Much of what these women said was validation of what others in the field of intimate partner violence have found and theorized. There are several unique aspects of what these women experienced and voiced that will serve as contributions to the literature and understanding of those who work with this population. One of the aspects of the abuse that was highlighted by all of the women in this study was the isolation. While this can be found in the literature, it is not a central focus. The women in this study found themselves alone, combating a stressful situation. This was highlighted by the fact that they were students, away from home and on their own for the first time. The intersection between being a student and in an abusive relationship sets up a scenario that may serve as one explanation for why many of these women do not seek help. They do not have good support systems and are not sure how to utilize the resources. They feel like they can handle things on their own, and in some cases must because there is no one else in their life but their abuser. Another important contribution is the toll that the abusive relationship took on the academic, social and campus life of these women. These women experienced significant difficulties with the everyday tasks of being a college student. It is a testament to their strength and their ability to seek help that they were able to maintain their grades enough so that they were not dismissed; however, in some cases this was not easy. It can be hypothesized that many women are not able to salvage their academic career and instead must give up on this dream. If these women are to be successful it is important to find ways to get them connected, get them resources and

have an environment that is understanding and willing to assist these women in “getting their lives back.” More research in this area is needed to gain further information.

Psychologists who practice in college counseling centers or in the community can play an integral role not only in treating women affected by abuse in relationships, but also in educating women about this often neglected issue (Berkel, Furlong, Hickman, & Blue, 2005). Prevalence rates show that practitioners will come in contact with victims of intimate partner violence and that this type of violence is a significant problem on college campuses. An abused woman’s first contact with an agency is a pivotal experience as it may be the first time she links action to the insight that she is abused. Thus, it is also her first step toward establishing trust and the foundation of a network that consists of helping professionals (Larance & Porter, 2004). The women interviewed in this study were able to speak about the experience of intimate partner violence in college and the process of seeking counseling. These women shared information that was consistent with the literature in the area but also added some specific insight as to what it is like to be a college student in an abusive relationship. They also talked about what was helpful for them in counseling and what was not. College professionals and helping professionals can use this information to do prevention work and to educate those on college campuses on what to look for to potentially intervene with women who find themselves in abusive relationships.

Limitations

The initial aim for this study was to interview 10 women with representation from each year of college. This did not happen even with aggressive recruitment. Most of the women who did interview were seniors. The information that the women gave in terms of

how they came to counseling shed some light on why this is such a hard population to reach. Many of the women stated that they did not define the relationship as abuse until they went to counseling and gained some insight. This suggests that there are women on campus who are in or have been in an abusive relationship and are not defining it as such. It also seems like the process of getting out of the relationship, realizing that they need help and then seeking help takes time and for some may take years. The women in this study also talked about the toll that this relationship took on their academic efforts. It is possible and even probable that some women are not able to stay in school because of these difficulties. Thus, this study was not able to tap into the experiences of those women. The information gathered here should serve as an impetus to gather more information about what it is like for college women in abusive relationships and how these women can be reached by helping professionals.

Implications for Clinical Practice

The women who shared their stories were willing to talk about their own process of deciding to seek out professional help and trying to find the right counselor for them. While there is still no answer as to exactly what to do to encourage help seeking or to facilitate change in these women's lives, there are some valuable lessons to be learned. It is important for practitioners to understand that many women who are in or have been in an abusive relationship will not talk about that as their presenting problem. Therefore, it is important for helping professionals to ask questions and provide opportunities for women to talk about what is causing the distress they are experiencing. The women in this study discussed specifically what worked for them and what did not. They were looking for a counselor who was knowledgeable, willing to give them space and

opportunity to tell their story, and had a good balance of support and challenges. Several of the women stated that they did not want to focus on the solution but rather wanted to understand what had happened in their relationship and spend time processing their response. Many of the women came in to relieve the distress they were feeling and were looking for a counselor who they felt understood their situation. Therefore, it follows that agencies should make an initial effort to portray practitioners as knowledgeable and empathetic of issues surrounding intimate partner violence. In order to do this, counselors must be trained to work with this population.

These women also wanted to work on identifying and building upon their strengths. They wanted to make changes to better themselves, enhance their self esteem and make healthy choices for themselves. They stated that they were in need of a place to talk about what had happened and to consider what they can do to make changes. Several of the women acknowledged the importance of talking about all of the violence that they had endured in their lives and thinking about what they could do to keep themselves safe in the future. This included issues of self esteem and self concept. The women in this study were able to get past the barriers and make the courageous step to talk to a professional about the abuse. Their insights about the counseling process lend a unique perspective to those who provide services to this population.

The role of prevention is also an important point for clinicians. Many of the women talked about the importance of informing students about the potential for this kind of experience and the difference between a healthy and unhealthy relationship. This is an important role for mental health professionals. Education and prevention can help individuals to make good decisions for themselves and enable them to stay out of or find

their way around difficult situations. This activity also serves as a connection between mental health professionals and the student population before they are in need of help. This may serve to break down some of the misconceptions about seeing a therapist and facilitate help-seeking in men and women who find themselves in difficult situations.

Recommendations for Future Research

The field would benefit from further research in the area of intimate partner violence and help seeking behaviors in college women. The population of women who experience this type of abuse and go to counseling is tragically low. The more we understand about this group and what they are looking for from counselors the better we can serve this population. Counselors have admittedly received little training in working with this population. The information gathered here could serve as a jumping off point for future research in terms of how to provide services to college women in abusive relationships. Having a better understanding of the women who did get past all of the barriers that stood between them and the help that they needed, will give practitioners information about offering services to these women and how to ask questions, elicit information and provide support in the counseling setting. Providing training to counselors on how to work with women who have been abused is vital. The development of a questionnaire or survey that practitioners could use to gather information about the complex nature of abusive relationships would be a valuable tool and an asset to the field of psychology that should be pursued. Individual variables, such as the significance of past abuse and preferable counselor variables, such as gender should be explored further.

There is little research about the isolation of women in this situation, and the impact of the abuse on their academic, social and campus life. While this may be a

difficult population to reach, the more efforts that are made to identify and provide services to these women -- the better their ability to maintain their academic efforts and get themselves out of the abusive relationship. The literature suggests that social status and income are one reason that women stay in abusive relationships. College can be seen as an important preventative effort to empower women and provide them with the resources to advance and be self sufficient. Understanding this phenomenon better will provide information for prevention for women who are at risk or to intervene with women who are already affected. This information could also be used to educate the general population of men and women on college campuses. Providing this type of information at this developmental phase of their lives could enhance their ability make good choices for themselves within intimate and peer relationships.

Closing Comments

The process that I have undergone to plan this study, recruit participants, elicit these stories and analyze the data has been a powerful one. The most impressive part of the whole process was the group of women who were willing to share their stories and experiences with me. Several of the women indicated that they were hopeful that their participation could lead to prevention efforts and the education of others. They have been through so much and were still willing and able to be altruistic. These women put themselves in a situation where they would have to relive a difficult time in their lives. I now have a better understanding of the importance of the reflexive process. It was, at times, difficult to separate myself as a counselor from my role as a researcher. As the women talked about the difficulties that they experienced I found it difficult not to move in to the role of empowerment and the facilitation of change. For some, I could see their

continued struggle and wanted to be in a position to help with those difficulties. I hope that as I use what I have learned to inform not only my practice but the field of psychology, I can honor what these women have been through and what they were willing to do to help others in similar situations. I will also share this information with those at local colleges so that they can have a better idea of what this phenomena looks like. I believe what I have learned from these women and this process has made me a better counselor and researcher. I have appreciated and been amazed by the unfolding of the qualitative process. The reflexive and active nature of this research allowed me to do what I enjoy, spend time listening to people's stories and sharing in their experiences. I enjoyed spending time with the data and watching as the themes emerged much more clearly than I had anticipated. This has been an educational and emotional experience that I am grateful for.

References

- Abbott, J. (1997). Injuries and illnesses of domestic violence. *Annals of Emergency Medicine, 29*, 781-785
- Ackerman, M. J., & Ackerman, M. C. (1996). Child custody evaluation practices: A 1996 survey of psychologists. *Family Law Quarterly, 30*, 565-586.
- Aguilar, R. J., & Nightingale, N. N. (1994). The impact of specific experiences on the self esteem of abused women. *Journal of Family Violence, 9*, 35-45.
- Aizenman, M., & Kelley, G. (1988). The incidence of violence and acquaintance rape in dating relationships among college men and women. *Journal of College Student Development, 29*, 305-311.
- Albaugh, L. M., & Nauta, M. M. (2005). Career decision self-efficacy, career barriers, and college women's experiences of intimate partner violence. *Journal of Career Assessment, 13*, 288-306.
- Aldarondo, E., & Straus, M. A. (1994). Screening for physical violence in couple therapy: Methodological, practical, and ethical considerations. *Family Process, 33*, 425-437.
- Alpert, E. J. (1995). Violence in intimate relationships and the practicing internist: new disease or new agenda? *Annals of Internal Medicine, 123*, 774-781.
- Alsdurf, J. M., & Alsdurf, P. (1988). A pastoral response. In A. L. Horton & J. A. Williamson (Eds.), *Abuse and religion: When praying isn't enough* (pp. 165-171). Lexington, MA: Lexington Books.

- American Psychological Association. (1996). *American Psychological Association Presidential Task Force on Violence and the Family: Final Report*. Washington, DC: Author.
- Anderson, D. J. (2000). The impact of subsequent violence of returning to an abusive partner. *Journal of Comparative Family Studies*, 3, 93-112.
- Anderson, K. L. (August, 1997). Gender, status, and, domestic violence: An integration of feminist and family violence approaches. *Journal of Marriage and the Family*, 59, 655-669.
- Anderson, M. A., Gillig, P. A., Sitaker, M., McCloskey, K., Malloy, K., & Grigsby, N. (2003). "Why doesn't she just leave?": A descriptive study of victim reported impediments to her safety. *Journal of Family Violence*, 18(3), 151-155.
- Astin, M. C., Lawrence, K. J., & Foy, D. W. (1993). Post-traumatic stress disorder among battered women: Risk and resiliency factors. *Violence and Victims*, 8, 17-28.
- Avis, J. M. (1992). Where are all the family therapists? Abuse and violence within families and family therapy's response. *Journal of Marital and Family Therapy*, 18, 225-232.
- Bacchus, L., Mezey, G., & Bewley, S. (2006). A qualitative exploration of the nature of domestic violence in pregnancy. *Violence Against Women*, 12, 588-604.
- Bachman, R., & Coker, A. L. (1995). Police involvement in domestic violence: The interactive effects of victim injury, offender's history of violence, and race. *Violence and Victims*, 10, 91-106.

- Banks, M. E., & Ackerman, R. J. (2002). Head and brain injuries experienced by African American women victims of intimate partner violence. *Women & Therapy, 25*, 133-143.
- Barnett, O. W. (2001). Why battered women do not leave, part 2. External inhibiting factors-social support and internal inhibiting factors. *Trauma, Violence, & Abuse, 2*, 3-35.
- Behrens, J. T., & Smith, M. L. (1996). Data and data analysis. In D. C. Berliner & R. C. Calfee (Eds.), *Handbook of educational psychology* (pp. 945-989). New York: Simon & Schuster.
- Bennett, L., & Fineran, S. (1998). Sexual and severe physical violence among high school students: Power beliefs, gender, and relationships. *American Journal of Orthopsychiatry, 68*, 645-652.
- Bennett, L., Riger, S., Schewe, P., Howard, A., Wasco, S. (2004). Effectiveness of hotline, advocacy, counseling, and shelter services for victims of domestic violence: A statewide evaluation. *Journal of Interpersonal Violence, 19*, 815-829.
- Berk, R., & Newton, P. (1985). Does arrest really reduce wife battery? *American Sociological Review, 50*, 253-262.
- Berkel, L. A., Furlong, A. N., Hickman, A. A., & Blue, E. L. (2005). A qualitative examination of Black college women's beliefs about abuse in relationships. *Professional Psychology: Research and Practice, 36*, 283-290.
- Bogal-Allbritten, R. B., & Allbritten, W. L. (1985). The hidden victims: Courtship violence among college students. *Journal of College Student Personnel, 26*, 201-204.

- Bograd, M., & Mederos, F. (1999). Battering and couples therapy: Universal screening and selection of treatment modality. *Journal of Marital and Family Therapy, 25*, 291-312.
- Bornstein, R. F. (2006). The complex relationship between dependency and domestic violence: Converging psychological factors and social forces. *American Psychologist, 61*, 595-606.
- Bowker, L., & Maurer, L. (1986). The effectiveness of counseling services utilized by battered women. *Woman and Therapy, 5*, 65-82.
- Bowman, R. L., & Morgan, H. M. (1998). A comparison of rates of verbal and physical abuse on campus by gender and sexual orientation. *College Student Journal, 32*, 43-52.
- Brandwein, R. A. (1999). *Battered women, children and welfare reform: The ties that bind*. Thousand Oaks, CA: Sage.
- Brody, L. R. (1985). Gender differences in emotional development: A review of theories and research. *Journal of Personality, 53*, 102-149.
- Bromley, M. L. (1992). Campus and community crime rate comparisons: A statewide study. *Journal of Security Administration, 15*, 49-64.
- Bromley, M. L. (1994). Correlates of campus crime: A nationwide exploratory study of large universities. *Journal of Security Administration, 17*, 37-52.
- Brown, C., Reedy, D., Fountain, J., Johnson, A., & Dichiser, T. (2000). Battered women's career decision-making self-efficacy: Further insights and contributing factors. *Journal of Career Assessment, 8*, 251-265.

- Brown, L., and Ballou, M. (1992). *Personality and Psychopathology: Feminist Reappraisals*. New York: Guilford Press.
- Browne, A. (1987). *When battered women kill*. New York: Free Press.
- Browne, A. (1991). The victim's experience: Pathways to disclosure. *Psychotherapy, 28*, 150-156.
- Browne, A. (1993). Violence against women by male partners: Prevalence, outcomes, and policy implications. *American Psychologist, 48*, 1077-1087.
- Browne, A., & Williams, K. R. (1989). Exploring the effect of resource availability and the likelihood of female-perpetrated homicides. *Law and Society Review, 23*, 75-94.
- Brush, L. (2000). Battering traumatic stress, and welfare-to-work transition. *Violence Against Women, 6*, 1039-1065.
- Bryant, V., Eliach, J., & Green, S. L. (1991). Adapting the traditional EAP model to effectively serve battered women in the workplace. *Employee Assistance Quarterly, 6*, 1-10.
- Buel, S. M. (1999). Fifty obstacles to leaving, a.k.a., why abuse victims stay. *The Colorado Lawyer, 26*, 19-28.
- Bureau of Justice Statistics (2001, October). *Intimate partner violence and age of victim, 1993-99*. Washington, DC: U.S. Department of Justice, Office of Justice Programs.
- Bureau of Justice Statistics (1998). *Violence by intimates: Analysis of data on crimes by current or former spouses, boyfriends, and girlfriends*. Washington, DC: U.S. Department of Justice. p. 65. NCJ 175503.

- Burke, P. J., Stets, J. E., & Pirog-Good, M. A. (1989). Gender identity, self-esteem and physical and sexual abuse in dating relationships. In M. A. Pirog-Good & J. E. Stets (Eds.), *Violence in dating relationships* (pp. 72-93). New York: Praeger.
- Campbell, J. C. (1986). Nursing assessment for risk of homicide with battered women. *Advances in Nursing Science*, 8, 36-51.
- Campbell, J. C. (2004). Helping women understand their risk in situations of intimate partner violence. *Journal of Interpersonal Violence*, 19, 1464-1477.
- Campbell, J. C., & Lewandowski, L. A. (1997). Mental and physical health effects of intimate partner violence on women and children. *Psychiatric Clinics of North American*, 20, 353-374.
- Campbell, J. C., Oliver, C., & Bullock, L. (1993). Why battering during pregnancy? *AWHONN'S Clinical Issues in Perinatal and Women's Health Nursing*, 4, 343-349.
- Campbell, R., Raja, S., & Grining, P. L. (1999). Training mental health professionals on violence against women. *Journal of Interpersonal Violence*, 14, 1003-1013.
- Carlson, B. E. (1984). Causes and maintenance of domestic violence: An ecological analysis. *Social Service Review*, 58, 569-587.
- Carlson, B. E., McNutt, L., Choi, D. Y. (2003). Childhood and adult abuse among women in primary health care: Effects on mental health. *Journal of Interpersonal Violence*, 18, 924-941.
- Carlson, B. E., Worden, A. P., van Ryne, M., & Bachman, R. (2003). *Violence against women: Synthesis of research for practitioners*. National Institute of Justice.

Retrieved August 17, 2007, from

<http://www.ncjrs.org/pdffiles1/nij/grants/199577>.

- Carlson, C. N. (2003). Focus section: Violence against women: Invisible victims: Holding the educational system liable for teen dating violence at school. *Harvard Women's Law Journal*, 26, 351-393.
- Cascardi, M. Langhinrichsen, J., & Vivian, D. (1992). Marital aggression: Impact, injuries, and health correlates for husbands and wives. *Archives of Internal Medicine*, 152, 1178-1184.
- Cate, R. M., Henton, J. M., Koval, J., Christopher, F. S., & Lloyd, S. (1982). Premarital abuse: A social psychological perspective. *Journal of Family Issues*, 3, 79-91.
- Center for Disease Control and Prevention. (2000). Dating violence. Retrieved September 1, 2007, from www.cdc.gov/ncipc/factsheets/datviol.htm.
- Chronister, K. M., & McWhirter, E. H. (2003). Applying Social Cognitive Career Theory to the empowerment of battered women. *Journal of Counseling & Development*, 81, 418-425.
- Chronister, K. M., & McWhirter, E. H. (2004). Ethnic differences in career supports and barriers for battered women: A pilot study. *Journal of Career Assessment*, 12, 169-187.
- Chronister, K. M., Wettersten, K. B., & Brown, C. (2004). Vocational research for the liberation of battered women. *The Counseling Psychologist*, 32, 900-922.
- Chung, D. (2007). Making meaning of relationships: Young women's experiences and understanding of dating violence. *Violence Against Women*, 13, 1274-1295.

- Coffey, P., Leitenberg, H., Henning, K., Bennett, R. T., & Jankowski, M. K. (1996). Dating violence: The association between methods of coping and women's psychological adjustment. *Violence and Victims, 11*, 227-238.
- Coker, A. L., Smith, P., Bethea, L., King, M. J., & McKeown, R. E. (2000). Physical health consequences of physical and psychological intimate partner violence. *Archives of Family Violence, 9*, 451-457.
- Coker, A. L., Smith, P. H., Thompson, M. P., McKeown, R. E., Bethea, L., & Davis, K. E. (2002). Social support protects against the negative effects of partner violence on mental health. *Journal of Women's Health & Gender-Based Medicine, 11*, 465-476.
- Connell, R. W. (1987). *Gender and power: Society, the person, and sexual politics*. Stanford, CA: Stanford University Press.
- Cox, J. W., & Stoltenberg, C. D. (1991). Evaluation of a treatment program for battered wives. *Journal of Family Violence, 6*, 395-413.
- Crane, P. A. & Constantino, R. E. (2003). Use of the interpersonal support evaluation list (ISEL) to guide intervention development with women experiencing abuse. *Issues in Mental Health Nursing, 24*, 523-541.
- Creswell, J. W. (2007). *Qualitative inquiry & research design: Choosing among the five approaches, 2nd edition*. Thousand Oaks, CA: Sage Publications.
- Crowell, N. A., & Burgess, A. W. (Eds.). (1996). *Understanding violence against women*. Washington, DC: American Psychological Association.
- Davis, R. (1997). Trauma and addiction experiences of African American women. *Western Journal of Nursing Research, 19*, 442-465.

- Davis, T. (2000). Programming for men to reduce sexual violence. *New Directions for Student Services, 90*, 79-89.
- Deal, J. E., & Wampler, K. S. (1986). Dating violence: The primacy of previous experience. *Journal of Social and Personal Relationships, 3*, 457-471.
- Debold, E., Wilson, M., & Malave, I. (1993). *Mother-daughter revolution: From good girls to great women*. New York: Bantam.
- Deering, C., Templer, D. I., Keller, J., & Canfield, M. (2001). Neuropsychological assessment of battered women: A pilot study. *Perceptual and Motor Skills, 92*, 682-686.
- DeKeseredy, W. S. (1995). Enhancing the quality of survey data on woman abuse: Examples from a national Canadian study. *Violence Against Women, 1*, 158-173.
- DeKeseredy, W. S., & Schwartz, M. D. (2001). Definitional issues. In C. M. Renzetti, J. L. Edleson, & R. K. Bergen (Eds.), *Sourcebook on violence against women* (pp. 23-34). Thousand Oaks, CA: Sage.
- Dersch, C. A., Harris, S. M., & Rappleyea, D. L. (2006). Recognizing and responding to partner violence: An analog study. *The American Journal of Family Therapy, 34*, 317-331.
- Dobash, R. P., & Dobash, R. E. (1979). *Violence against wives: A case against the patriarchy*. New York: Free Press.
- Douglas, H. (1991). Assessing violent couples. *Families in Society, 72*, 525-535.
- Douglas, M. A., & Strom, J. (1988). Cognitive therapy with battered women. *Journal of Rational-Emotive and Cognitive-Behavior Therapy, 6(1-2)*, 33-49.

- Durst, M. (1987). Perceived peer abuse among college students: A research note. *National Association of Student Personnel Administrators Journal*, 24, 42-47.
- Dutton, D. G. (1987). The criminal justice response to wife assault. *Law and Human Behavior*, 11, 189-206.
- Dutton, M. A. (1992). *Empowering and healing the battered woman: A model for assessment and intervention*. New York: Springer Publishing Co.
- D’Zurilla, T. J., & Sheedy, C. F. (1991). Relation between social problem-solving ability and subsequent level of psychological stress in college students. *Journal of Personality and Social Psychology*, 61, 841-846.
- Ehrensaft, M., & Vivian, D. (1996). Spouses’ reasons for not reporting existing physical aggression as a marital problem. *Journal of Family Psychology*, 10, 443-453.
- Eisikovits, Z., & Buchbinder, E. (1996). Pathways to disenchantment: Battered women’s views of their social workers. *Journal of Interpersonal Violence*, 11, 425-440.
- Eisner, E. W. (1998). *The enlightened eye: Qualitative inquiry and the enhancement of educational practice*. Upper Saddle River, NJ: Merrill/Prentice-Hall.
- Ellis, E. (1983). A review of empirical rape research: Victim reactions and response to treatment. *Clinical Psychology Review*, 3, 473-490.
- Enns, C. Z., Campbell, J., & Courtois, C. A. (1997). Recommendations for working with domestic violence survivors, with special attention to memory issues and posttraumatic processes. *Psychotherapy*, 34, 459-477.
- Epstein, D. (1999). Effective intervention in domestic violence cases: Rethinking the roles of prosecutors, judges, and the court system. *Yale Journal of Law and Feminism*, 11, 3-50.

- Erikson, E. H. (1950). *Childhood and society*. New York, NY: W. W. Norton.
- Erickson, F. (1986). Qualitative methods in research on teaching. In M. Wittrock (Ed.), *Handbook of research on teaching* (3rd ed., pp. 119-161). New York: Macmillan.
- Farrell, M. (1996). The sense of relationship in women who have encountered abuse. *Journal of the American Psychiatric Nurses Association*, 2, 46-53.
- Fass, D. F., Benson, R. I., & Leggett, D. G. (2008). Assessing prevalence and awareness of violent behaviors in the intimate partner relationships of college students using internet sampling. *Journal of College Student Psychotherapy*, 22, 66-75.
- Feder, L. (1997). Domestic violence and police response in a pro-arrest jurisdiction. *Women & Criminal Justice*, 8, 79-98.
- Ferraro, K., & Johnson, J. (1983). How women experience battering: The process of victimization. *Social Problems*, 30, 325-339.
- Ferree, M. (1990). Beyond separate spheres: Feminism and family research. *Journal of Marriage and the Family*, 52, 866-884.
- Figley, C. R. (1986). *Trauma and its wake. (Vol 2): Traumatic stress theory, research, and intervention*. New York: Brunner/Mazel.
- Fisher, B. A., Cullen, F. T., & Turner, M. G. (2000). *The sexual victimization of college women* (NCJ 182369). Washington, DC: U.S. Department of Justice, Office of Justice Programs.
- Fisher, B., Sloan, J. J., III, & Cullen, F. T. (1995). *Final report: Understanding crime victimization among college students: Implications for crime prevention*. Washington, DC: U.S. Department of Justice. p. 65. NCJ 175503.

- Fisher, B., Sloan, J., Cullen, F., & Lu, C. (1998). Crime in the ivory tower: The level and sources of student victimization. *Criminology, 36*, 671-710.
- Fleury, R. E., Sullivan, C. M., Bybee, D. I., & Davidson, W. S. (1998). "Why don't they just call the cops?": Reasons for differential police contact among women with abusive partners. *Violence and Victims, 13*, 333-346.
- Gamache, D. (1998). Domination and control: The social context of dating violence. In B. Levy (Ed.), *Dating violence: Young women in danger* (pp. 69-83). Seattle, WA: Seal Press.
- Ganley, A. (1989). Integrating feminist and social learning analyses of aggression: Creating multiple models for intervention with men who battered. In P. Caesar & L. Hamberger (Eds.), *Treating men who batter*. New York: Springer Publishing Co.
- Gelles, R. J. (1987). *Family violence*. Thousand Oaks, CA: Sage Publications, Inc.
- Gelles, R. J. (1993). Through a sociological lens: Social structure and family violence. In R. J. Gelles & D. R. Loseke (Eds.), *Current controversies on family violence* (pp. 31-46). Newbury Park, CA: Sage.
- Gerbert, B., Johnston, K., Caspers, N., Bleecker, T., Woods, A., & Rosenbaum, A. (1996). Experiences of battered women in health care settings: A qualitative study. *Women & Health, 24*, 1-17.
- Gerlock, A. (1999). Health impact of domestic violence. *Issues in Mental Health Nursing, 20*, 373-385.
- Gianakos, I. (1999). Career counseling with battered women. *Journal of Mental Health Counseling, 21*, 1-13.

- Giorgi, A. (1989). One type of analysis of descriptive data: Procedures involved in following a phenomenological psychological method. *Methods, 1*, 39-61.
- Giorgi, A. (1997). The theory, practice, and evaluation of the phenomenological method as a qualitative research procedure. *Journal of Phenomenological Psychology, 28*, 235-260.
- Gleason, W. J. (1993). Mental disorders in battered women: An empirical study. *Violence & Victims, 8*, 53-68.
- Gondolf, E. (1998). The victims of court ordered batterers: Their victimization, helpseeking, and perceptions. *Violence Against Women, 4*, 659-676.
- Gondolf, E., & Fisher, E. (1988). *Battered women as survivors*. Lexington, MA: Lexington Books.
- Goode, W. (1971). Force and violence in the family. *Journal of Marriage and the Family, 33*, 624-636.
- Goodstein, R. K., & Page, A. W. (1981). Battered wife syndrome: Overview of dynamics and treatment. *American Journal of Psychiatry, 139*, 1036-1044.
- Gorde, M. W., Helfrich, C. A., & Finlayson, M. L. (2004). Trauma symptoms and life skill needs of domestic violence victims. *Journal of Interpersonal Violence, 19(6)*, 691-708.
- Gordon, J. (1996). Community services or abused women: A review of perceived usefulness and efficacy. *Journal of Family Violence, 11*, 315-329.
- Green, A. H. (1998). Factors contributing to the generational transmission of child maltreatment. *Journal of the American Academy of Child and Adolescent Psychiatry, 37*, 1334-1336.

- Greenfield, L. (1998). *Violence by intimates: Analysis of data on crimes by current or former spouses, boyfriends, and girlfriends*. Bureau of Justice Statistics Factbook. Washington, DC: Department of Justice NCJ-167237.
- Guba, E. (1990). *The paradigm dialogue*. Newbury Park, CA: Sage Publications.
- Hage, S. M. (2000). The role of counseling psychology in preventing male violence against female intimates. *The Counseling Psychologist, 28*, 797-828.
- Hamilton, B., & Coates, J. (1993). Perceived helpfulness and use of professional services by abused women. *Journal of Family Violence, 8*, 313-324.
- Hansen, M., Harway, M. & Cervantes, N. (1991). Therapists' perceptions of severity in cases of family violence. *Violence and Victims, 6*, 225-235.
- Harway, M., & O'Neil, J. M. (1999). *What causes men's violence against women?* Thousand Oaks, CA: Sage.
- Haverkamp, B. E., & Young, R. A. (2007). Paradigms, purpose, and the role of the literature: Formulating a rationale for qualitative investigations. *The Counseling Psychologist, 35*, 265-294.
- Henning, K. R., & Klesges, L. M. (2002). Utilization of counseling and supportive services by female victims of domestic violence. *Violence and Victims, 17*, 623-636.
- Henton, J., Cate, R., Koval, J., Lloyd, S. & Christopher, S. (1983). Romance and violence in dating relationships. *Journal of Family Issues, 4*, 467-482.
- Heshusius, L. (1994). Freeing ourselves from objectivity: Managing subjectivity or turning toward a participatory mode of consciousness? *Educational Researcher, 23*, 15-22.

- Hilberman, E. (1976). *The rape victim*. New York, NY: Basic Books.
- Hilberman, E., & Munson, K. (1978). Sixty battered women. *Victimology*, 2, 460-470.
- Hill, C. E., Thompson, B. J., & Williams, E. N. (1997). A guide to conducting consensual qualitative research. *The Counseling Psychologist*, 25, 517-572.
- Hirsch, J. K., & Ellis, J. B. (1996). Differences in life stress and reasons for living among college suicide ideators and non-ideators. *College Student Journal*, 30, 377-384.
- Hirschel, J. D., Hutchison, I. W., & Dean, C. W. (1992). The failure of arrest to deter spouse abuse. *Journal of Research in Crime and Delinquency*, 29, 7-33.
- Holtzworth-Munroe, A., & Stuart, G. L. (1994). Typologies of male batterer: Three subtypes and the differences among them. *Psychological Bulletin*, 116, 476-497.
- Hong, L. (2000). Toward a transformed approach to prevention: Breaking the link between masculinity and violence. *Journal of American College Health*, 48, 269-279.
- Horn, P. (1992). Beating back the revolution: Domestic violence's economic toll on women. *Dollars & Sense*, 192, 21-22.
- Horton, A. L., & Johnson, B. L. (1993). Profile and strategies of women who have ended abuse. *Families in Society: The Journal of Contemporary Human Services*, 74, 481-492.
- Hotaling, G. T., & Sugarman, D. B. (1986). An analysis of risk markers in husband to wife violence: The current state of knowledge. *Violence and Victims*, 1, 101-115.
- Husserl, E. (1954). *The crisis of European sciences and transcendental phenomenology*. Evanston, IL: Northwestern University Press.

- Husserl, E. (1962). *Ideas: General introduction to pure phenomenology*. New York: Collier Books.
- Hutchison, I., & Hirschel, J. (1998). Abused women: Help-seeking strategies and police utilization. *Violence Against Women, 4*, 436-456.
- Huth-Bocks, A. C., Levendosky, A. A., & Bogat, G. A. (2002). The effects of domestic violence during pregnancy and maternal and infant health. *Violence and Victims, 17*, 169-185.
- Jackson, S. M. (1999). Issues in the dating violence research: A review of the literature. *Aggression and Violent Behavior, 4*, 233-247.
- Jackson, H., Philp, E., Nuttall, R. L., & Diller, L. (2002). Traumatic brain injury: A hidden consequence for battered women. *Professional Psychology: Research and Practice, 33*, 39-45.
- Johnson, M. P. (1995). Patriarchal terrorism and common couple violence: Two forms of violence against women. *Journal of Marriage and the Family, 57*, 283-294.
- Johnson, J. K., Haider, F., Ellis, K., Hay, D. M., & Lindow, S. W. (2003). The prevalence of domestic violence in pregnant women. *British Journal of Obstetrics and Gynaecology, 110*, 272-275.
- Karjane, H. M., Fisher, B. S., & Cullen, F. T. (2002). *Executive summary. Campus sexual assault: How America's institutions of higher education respond. Final Report, NIJ Grant # 1999-WA-VX-0008*. Newton, MA: Education Development Center, Inc.
- Kasian, M., & Painter, S. L. (1992). Frequency and severity of psychological abuse in a dating population. *Journal of Interpersonal Violence, 7*, 350-364.

- Kearney, M. H. (2001). Enduring love: A grounded formal theory of women's experience of domestic violence. *Research in Nursing & Health, 24*, 270-282.
- Kessler, R., Davis, C., & Kendler, K. (1997). Childhood adversity and adult psychiatric disorder in the U.S. National Comorbidity Survey. *Psychological Medicine, 27*, 1101-1119.
- Kilpatrick, D. G., Ruggiero, K. J., Acierno, R. E., Saunders, B. E., Resnick, H. S., & Best, C. L. (2003). Violence and risk of PTSD, major depression, substance abuse/dependence, and comorbidity: Results from the National Survey of Adolescents. *Journal of Consulting and Clinical Psychology, 71*, 692-700.
- Kilpatrick, D., Saunders, B., Best, C., & Von, J. (1987). Criminal victimization: Lifetime prevalence, reporting to police, and psychological impact. *Crime and Delinquency, 33*, 479-489.
- Klein, E., Campbell, J. C., Soler, E., & Ghez, M. (1997). *Ending domestic violence: Changing public perception/halting the epidemic*. Thousand Oaks, CA: Sage.
- Klein, J. (2006). An invisible problem: Everyday violence against girls in schools. *Theoretical Criminology, 10*, 147-177
- Koss, M. P. (1990). The women's mental health research agenda: Violence against women. *American Psychologist, 45*, 374-380.
- Koss, M. P., Bailey, J. A., Yuan, N. P., Herrera, V. M., & Lichter, E. L. (2003). Depression and PTSD in survivors of male violence: Research and training initiatives to facilitate recovery. *Psychology of Women Quarterly, 27*, 130-142.

- Koss, M. P., Gidycz, C. A., & Wisniewski, N. (1987). The scope of rape; incidence and prevalence of sexual aggression and victimization in a national sample of higher education students. *Journal of Consulting Clinical Psychology, 55*, 162-170.
- Krishnan, S. P., Hilbert, J. C., & Pase, M. (2001). An examination of intimate partner violence in rural communities: Results from a hospital emergency department study from southwest United States. *Family and Community Health, 24*, 1-24.
- Kvale, S. (1996). *InterViews: An introduction to qualitative research interviewing*. Thousand Oaks, CA: Sage.
- Kyriacou, D. N., Angulin, D., Taliaferro, E., Stone, S., Tubb, T., Linden, J. A., Muelleman, R., Barton, E., & Kraus, J. F. (1999). Risk factors for injury to women from domestic violence. *The New England Journal of Medicine, 341*, 1892-1898.
- Laner, M. R. (1990). Violence or its precipitators: Which is more likely to be identified as a dating problem? *Deviant Behavior, 11*, 319-329.
- Laner, M. R., & Thompson, J. (1982). Abuse and aggression in courting couples. *Deviant Behavior, 3*, 229-244.
- Langan, P. A., & Innes, C. A. (1986). Preventing domestic violence against women. *The Criminal Justice Archive and Information Network, 1-3*.
- Larance, L. Y., Porter, M. L. (2004). Observations from practice: Support group membership as a process of social capital formation among female survivors of domestic violence. *Journal of Interpersonal Violence, 19*, 676-690.
- Lempert, L. (1996). Women's strategies for survival: Developing agency in abusive relationships. *Journal of Family Relations, 11*, 269-289.

- Laner, M. R. (1983). Courtship abuse and aggression: Contextual aspects. *Sociological Spectrum, 3*, 69-83.
- Levant, R. F. (1996). The new psychology of men. *Professional Psychology: Research and Practice, 27*, 259-265.
- LeVasseur, J. J. (2003). The problem of bracketing in phenomenology. *Qualitative Health Research, 13*, 408-420.
- Levy, B. (1998). *Dating violence: Young women in danger*. Seattle, WA: Seal Press.
- Lewinsohn, P. M. (1975). The behavioral study and treatment of depression. In M. Hersen, R. Eisler, & P. Miller (Eds.), *Progress in behavior modification*. New York: Academic Press.
- Lewis, S. F., & Fremouw, W. (2001). Dating violence: A critical review of the literature. *Clinical Psychology Review, 21*, 105-127.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.
- Lincoln, Y. S., & Guba, E. G. (2000). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 163-188). Thousand Oaks, CA: Sage.
- Lisak, D., Hopper, J., & Song, P. (1996). Factors in the cycle of violence: Gender rigidity and emotional constrictions. *Journal of Traumatic Stress, 9*, 721-741.
- Mahlstedt, D. L., & Welsh, L. A. (2005). Perceived causes of physical assault in heterosexual dating relationships. *Violence Against Women, 11*, 447-472.
- Mahoney, M. J. (1991). *Human change processes*. New York: Basic Books.
- Makepeace, J. M. (1986). Gender differences in courtship violence victimization. *Family relations: Journal of Applied Family and Child Studies, 35*, 383-388.

- Makepeace, J. M. (1981). Courtship violence among college students. *Family Relations*, 30, 97-102.
- Mancoske, R. J., Standifer, D., & Cauley, C. (1994). The effectiveness of brief counseling services for battered women. *Research on Social Work Practice*, 4, 53-63.
- Marshall, C., & Rossman, G. B. (2006). *Designing qualitative research*, 4th edition. Thousand Oaks, CA: Sage Publications, Inc.
- Marshall, L. L., & Rose, P. (1987). Gender, stress and violence in the adult relationships of a sample of college students. *Journal of Social and Personal Relationships*, 4, 299-316.
- Martin, D. (1981). *Battered wives*. Volcano, CA: Volcano Press.
- Matthews, W. J. (1984). Violence in college couples. *College Student Journal*, 18, 150-158.
- McCloskey, K., & Grigsby, N. (2005). The ubiquitous clinical problem of adult intimate partner violence: The need for routine assessment. *Professional Psychology: Research and Practice*, 36, 264-275.
- McFarlane, J., Willson, P., Malecha, A., & Lemmey, D. (2000). Intimate partner violence: A gender comparison. *Journal of Interpersonal Violence*, 15, 158-169.
- McKenzie, K. C., Burns, R. B., McCarthy, E. P., & Freund, K. M. (1998). Prevalence of domestic violence in an inpatient female population. *Journal of General Internal Medicine*, 13, 277-279.
- McMurray, A., & Moore, K. (1994). Domestic violence: Are we listening? Do we see? *Journal of Advanced Nursing*, 12, 23-28.

- Messerschmidt, J. (1993). *Masculinities and crime: A critique and reconceptualization of theory*. Lanham, MD: Rowman & Littlefield.
- Mezey, G. C. (1997). Domestic violence in pregnancy. In S. Bewley, J. Friend, & G. C. Mezey (Eds.), *Violence against women* (pp. 191-198). London: RCOG Press.
- Miller, T. W., Veltkamp, L. J., & Kraus, R. F. (1997). Clinical pathways for diagnosing and treating victims of domestic violence. *Psychotherapy, 34*, 425-432.
- Mills, L. G. (1998). Mandatory arrest and prosecution policies for domestic violence: A critical literature review and the case for more research to test victim empowerment approaches. *Criminal Justice and Behavior, 25*, 306-318.
- Morrow, S. L., & Smith, M. L. (2000). Qualitative research for counseling psychology. In S. D. Brown & R. W. Lent (Eds.), *Handbook of counseling psychology* (3rd edition) (pp. 199-230). New York, NY: John Wiley & Sons.
- Morton, E., Runyan, C. W., Moracco, K. E., Butts, J. (1998). Partner homicide-suicide involving female homicide victims: A population-based study in North Carolina, 1988-1992. *Violence and Victims, 13*, 91-106.
- Moustakas, C. (1990). *Heuristic research: Design, methodology, and applications*. Newbury Park, CA: Sage.
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Muelleman, R. A., Lenaghan, P. A., & Pakeser, R. A. (1996). Battered women: Injury locations and types. *Annals of Emergency Medicine, 28*, 486-492.
- Mullins, G. P., (1994). The battered woman and homelessness. *Journal of Law and Policy, 3*, 237-255.

- Murphy, C. M., & Cascardi, M. (1993). Psychological abuse and aggression in marriage. In R. Hampton & T. Gulotta (Eds.), *Family violence: Prevention and treatment*. Newbury Park, CA: Sage.
- Nabi, R. L. & Horner, J. R. (2001). Victims with voices: How abused women conceptualize the problem of spousal abuse and implications for intervention and prevention. *Journal of Family Violence, 16*(3), 237-253.
- National Center for Health Statistics. (1997). Vital statistics mortality data, underlying causes of death, 1979-1995. Hyattsville, MD: Centers for Disease Control and Prevention.
- National Center on Domestic and Sexual Violence. (2004). Domestic abuse intervention project. Duluth, MN.
- National Institutes of Health (1999, September). Rehabilitation of persons with traumatic brain injury. *Journal of the American Medical Association, 282*, 974-983.
- National Research Council. (1996). Understanding violence against women. Washington, DC: National Academy of Sciences.
- Neufeld, J., McNamara, J. R., & Ertl, M. (1999). Incidence and prevalence of dating partner abuse and its relationship to dating practices. *Journal of Interpersonal Violence, 14*, 125-137.
- Ogletree, R. (1999). Sexual coercion experience and help-seeking behavior of college women. *Journal of American College Health, 41*, 149-153.
- O'Keefe, M. (1997). Predictors of dating violence among high school students. *Journal of Interpersonal Violence, 12*, 546-568.

- Okun, L. (1986). *Woman abuse: Facts replacing myths*. Albany, NY: State University of New York Press.
- O'Leary, K. D., Barling, J., Arias, I., & Rosenbaum, A. (1989). Prevalence and stability of physical aggression between spouses: A longitudinal analysis. *Journal of Counseling and Clinical Psychology, 57*, 263-268.
- O'Leary, K. D., Vivian, D., & Malone, J. (1992). Assessment of physical aggression in marriage: The need for a multimodal method. *Behavioral Assessment, 14*, 5-14.
- Pagelow, M. D. (1990). Effects of domestic violence on children and their consequences for custody and visitation agreements. *Mediation Quarterly, 7*, 347-363.
- Parker, B., McFarlane, J., Soeken, K., & Torres, S. (1993). Physical and emotional abuse in pregnancy: A comparison of adult and teenage women. *Nursing Research, 42*, 173-178.
- Pataki, G. (2004). *Intimate partner homicide in New York State*. Albany, NY: State of New York.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods (2nd ed.)*. Newbury Park, CA: Sage.
- Pence, E., & Paymar, M. (1986). *Power and control: Tactics of men who batter*. Duluth, MN: Minnesota Program Development, Inc.
- Petretic-Jackson, P. A., & Jackson, T. (1996). Mental health interventions with battered women. In A. R. Roberts (Ed.), *Helping battered women: New perspectives and remedies* (pp. 188-221). New York: Oxford University Press.
- Pirog-Good, M. A., & Stets, J. E. (1989). The help-seeking behavior of physically and sexually abused college students. In M. A. Pirog-Good & J. E. Stets (Eds.),

- Violence in dating relationships: Emerging social issues* (pp. 108-125). New York, NY: Praeger Publishers.
- Polkinghorne, D. E. (1989). Phenomenological research methods. In R. S. Valle & S. Halling (Eds.), *Existential-phenomenological perspectives in psychology* (pp. 41-60). New York: Plenum.
- Pope, K. S., & Feldman-Summers, S. (1992). National survey of psychologist's sexual and physical abuse history and their evaluation of training and competence in these areas. *Professional Psychology: Research and Practice, 23*, 353-361.
- Puzone, C. A., Saltzman, L. E., Kresnow, M. Thompson, M. P., Mercy, J. A. (2000). National trends in intimate partner homicide: United States, 1976-1995. *Violence Against Women, 6*, 409-426.
- Rennison, C. M., & Welchans, S. (2000). *Intimate partner violence*. Washington, DC: U.S. Department of Justice, Office of Justice Programs.
- Richards, L., & Morse, J. M. (2007). *README FIRST for a user's guide to qualitative methods, 2nd edition*. Thousand Oaks, CA: Sage Publications, Inc.
- Rickgarn, R. L. V. (1989). Violence in residence halls: Campus domestic violence. *New Directions for Student Services, 47*, 29-40.
- Riggs, D. S. (1993). Relationship problems and dating aggression: A potential treatment target. *Journal of Interpersonal Violence, 8*, 18-35.
- Roark, M. L. (1987). Preventing violence on college campuses. *Journal of Counseling of Development, 65*, 367-371.
- Roscoe, B., & Benaske, N. (1985). Courtship violence experienced by abused wives: Similarities in patterns of abuse. *Family Relations, 34*, 419-424.

- Roscoe, B. & Callahan, J. E. (1985). Adolescents' self-report of violence in families and dating relationships. *Adolescence, 20*, 545-553.
- Roscoe, B., & Kelsey, T. (1986). Dating violence among high school students. *Psychology, 23*, 53-59.
- Ross, M., & Glisson, C. (1991). Bias in social work intervention with battered women. *Journal of Social Service Research, 14*, 79-105.
- Ross, S. E., Neibling, B. C., & Heckert, T. M. (1999). Sources of stress among college students. *College Student Journal, 33*, 312-317.
- Roy, M. (1977). A research project probing a cross-section of battered women. In *Battered women: A psychosociological study of domestic violence* (pp. 25-44). New York: Van Nostrand Reinhold Co.
- Russell, M. (1995). Piercing the veil of silence: Domestic violence and disability. *New Mobility, 6*, 44-55.
- Salazar, L. F., & Cook, S. L. (2002). Violence against women: Is psychology part of the problem or the solution? A content analysis of psychological research from 1990 through 1999. *Journal of Community & Applied Social Psychology, 12*, 410-421.
- Sales, E. Baum, M., & Shore, B. (1984). Victim readjustment following assault. *Journal of Social Issues, 40*, 117-136.
- Saunders, D. (1990). Post-traumatic stress disorder: A label that does not blame? *Wisconsin Coalition Against Domestic Violence, 9*, 5-6.
- Saunders, D. G., & Hamill, R. (2003). *Violence against women: Synthesis of research on offender intervention*. National Institute of Justice. Retrieved on 8/17/07 from: www.ncjrs.org/pdffiles1/nij/grants/201222

- Scarpa, A. (2001) Community violence exposure in a young adult sample: Lifetime prevalence and socioemotional effects. *Journal of Interpersonal Violence, 1*, 36-53.
- Scarpa, A., Fikretoglu, D., Bowser, F., Hurley, J. D., Pappert, C. A., Romero, N., & Van Voorhees, E. (2002). Community violence exposure in university students: A replication and extension. *Journal of Interpersonal Violence, 17*, 253-272.
- Schewe, P. A. (2002). *Preventing violence in relationships*. Washington, DC: American Psychological Association.
- Schwartz, J. P., Griffin, L. D., Russell, M. M., & Frontaura-Duck, S. (2006). Prevention of dating violence on college campuses: An innovative program. *Journal of College Counseling, 9*, 90-96.
- Schwartz, J. P., Magee, M. M., Griffin, L. D., & Dupuis, C. W. (2004). Effects of a group preventive intervention on risk and protective factors related to dating violence. *Group Dynamics: Theory, Research, and Practice, 8*, 221-231.
- Schwartz, M. (1988). Marital status and women abuse theory. *Journal of Family Violence, 8*, 277-287.
- Scully, E. (2001). Boys, sex, and the social landscape: Normality of harassment and homophobia. *Independent School, 60*, 36-46.
- Sharps, P. W., Koziol-McLain, J., Campbell, J., McFarlane, J., Sachs, C., & Xu, X. (2001). Health care providers' missed opportunities for preventing femicide. *Preventive Medicine, 33*, 373-380.

- Shields, N. M., Resick, P. A., & Hanneke, C. R. (1990). Victims of marital rape. In R. T. Ammerman & M. Hersen (Eds.), *Treatment of family violence: A sourcebook*. New York: Wiley.
- Shook, N. J., Gerrity, D. A., Jurich, J., & Segrist, A. E. (2000). Courtship violence among college students: A comparison of verbally and physically abusive couples. *Journal of Family Violence, 15*, 1-22.
- Silverman, J. G., & Williamson, G. M. (1997). Social ecology and entitlements involved in battering by heterosexual college males: Contributions of family and peers. *Violence and Victims, 12*, 147-164.
- Sloan, J. J., Fisher, B. S., & Cullen, F. T. (1997). Assessing the student right-to-know and campus security act of 1990: An analysis of the victim reporting practices of college and university students. *Crime & Delinquency, 43*, 148-168.
- Sonkin, D. J., Martin, D., & Walker, L. E. A. (1985). *The male batterer: A treatment approach*. New York: Springer.
- Spradley, J. P. (1979). *The ethnographic interview*. New York: Holt, Rinehart & Winston.
- Stark, E. & Flitcraft, A. E. (1988). Violence among intimates: An epidemiological review. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack, and M. Henson (eds.), *Handbook of Family Violence*. New York: Plenum Press.
- Stark, E., & Flitcraft, A. H. (1991). Spouse abuse. In M. L. Rosenberg & M. A. Finley (Eds.), *Violence in America: A public health approach* (pp. 123-157). New York: Oxford University press.

- Stark, E., & Flitcraft, A. H. (1996). *Women at risk: Domestic violence and women's health*. Thousand Oaks, CA: Sage Publications.
- Stark, E., & Flitcraft, A. H. (1998). Women and children at risk: A feminist perspective on child abuse. In R. K. Bergen (Ed.), *Issues in intimate violence* (pp.25-41). Thousand Oaks, CA: Sage Publications.
- Stark, E., Flitcraft, A., Zuckerman, D., Grey, A., Robinson, J., & Frazier, W. (1981). Wife abuse in the medical setting: An introduction for health personnel. *Domestic Violence, 7*, 1-54.
- Stets, J. E. (1991). Cohabiting and marital aggression: The role of social isolation. *Journal of Marriage and the Family, 53*, 669-680.
- Stets, J. E., & Straus, M. A. (1989). The marriage license as a hitting licensee: A comparison of assaults in dating, cohabiting, and married couples. In M. A. Pirog-Good & J. E. Stets (Eds.), *Violence in dating relationships: Emerging social issues* (pp. 33-52). New York, NY: Praeger Publishing.
- Straus, M. A., & Gelles, R. J. (1990). *Physical violence in American families: Risk factors and adaptations to violence in 8,145 families*. New Brunswick, NJ: Transaction Publishers.
- Straus, M. A., Gelles, R. J., & Steinmetz, S. K. (1980). *Behind closed doors: Violence in the American family*. Garden City, NY: Anchor.
- Strube, M. A. & Barbour, L. S. (1984). Factors related to the decision to leave an abusive relationship. *Journal of Marriage and the Family, 46*, 837-844.

- Strube, M. A. & Barbour, L. S. (1983). The decision to leave an abusive relationship: Economic dependence and psychological commitment. *Journal of Marriage and the Family*, 45, 785-793.
- Stuart, E. P., & Campbell, J. C. (1989). Assessment of patterns of dangerousness with battered women. *Issues in Mental Health Nursing*, 10, 245-260.
- Sugarman, D. B., & Hotaling, G. T. (1989). Dating violence: Prevalence, context, and risk markers. In M. A. Pirog-Good & J. E. Stets (Eds.), *Violence in dating relationships: Emerging social issues* (pp. 3-32). New York, NY: Praeger Publishers.
- Sugarman, D. B., & Hotaling, G. T. (1998). Dating violence: A review of contextual and risk factors. In B. Levy (Ed.), *Dating violence: Young women in danger* (pp. 100-118). Seattle, WA: Seal Press.
- Sullivan, C. M., Basta, J., Tan, C., & Davidson, W. S. (1992). After the crisis: A needs assessment of women leaving a domestic violence shelter. *Violence and Victims*, 7, 267-275.
- Sullivan, C. M., & Bybee, D. (1999). Reducing violence suing community-based advocacy for women with abusive partners. *Journal of Consulting and Clinical Psychology*, 67, 43-53.
- Sullivan, C. M., Bybee, D. I., & Allen, N. E. (2002). Findings from a community-based program for battered women and their children. *Journal of Interpersonal Violence*, 17, 915-936.

- Sullivan, C. M., Campbell, R., Angelique, H., Eby, K. K., & Davidson, W. S. (1994). An advocacy intervention program for women with abusive partners: Six month follow-up. *American Journal of Community Psychology, 22*, 101-122.
- Sullivan, C. M., Tan, C., Basta, J., Rumptz, M., & Davidson, W. S. (1992). An advocacy intervention project for women with abusive partners: Initial evaluation. *American Journal of Community Psychology, 20*, 309-332.
- Super, D. E. (1990). A life-span, life-space approach to career development. In D. Brown, L. Brooks, & Associates (Eds.), *Career choice and development* (2nd ed., pp. 197-261). San Francisco: Jossey-Bass.
- Suzuki, L. A., Ahluwalia, M. K., Arora, A. K., & Mattis, J. S. (2007). The pond you fish in determines the fish you catch: Exploring strategies for qualitative data collection. *The Counseling Psychologist, 35*, 295-327.
- Taylor, C. A., & Sorenson, S. B. (2005). Community-based norms about intimate partner violence: Putting attributions of fault and responsibility into context. *Sex Roles, 53*, 573-589.
- Thorne-Finch, T. (1992). *Ending the silence: The origins and treatment of male violence against women*. Toronto: University of Toronto Press.
- Tjaden, P., & Thoennes, N. (2000). *Extent, nature and consequences of intimate partner violence: Findings from the national violence Against Women Survey*. Retrieved on 8/7/07 from the Department of Justice, Office of Justice Programs, National Institute of Justice Web site: <http://www.ncjrs.gov/pdffiles1/nij/181867.pdf>.
- Tolman, R. M. (1989). The development of a measure of psychological maltreatment of women by their male partners. *Violence and Victims, 4*, 156-177.

- Torres, S., & Han, H. R. (2000). Psychological distress in non-Hispanic White and Hispanic abused women. *Archives of Psychiatric Nursing, 14*, 19-29.
- Towbes, L. C., & Cohen, L. H. (1996). Chronic stress in the lives of college students: Scale development and prospective prediction of distress. *Journal of Youth and Adolescence, 25*, 199-217.
- Tutty, L. M. (1996). Post-shelter services: The efficacy of follow-up programs for abused women. *Research on Social Work Practice, 6*, 425-444.
- Tutty, L. M., Bidgood, B., & Rothery, M. (1993). Support groups for battered women: Research on their efficacy. *Journal of Family Violence, 8*, 325-343.
- Ullman, S. E. (1999). Social support and recovery from sexual assault: A review. *Aggressive and Violent Behavior, 4*, 343-358.
- van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy*. London, Ontario, Canada: The University of Western Ontario.
- Violence Against Women Grants Office (1998). *Stalking and domestic violence: The third annual report to Congress under the violence against women act*. Washington, DC: U.S. Department of Justice. p. 10. NCJ 172204.
- Walker, E. (1979). *The battered woman*. New York: Harper & Row.
- Walker, L. E. A. (1984). *The battered woman syndrome*. New York: Springer.
- Walker, L. E. A. (1985). Gender and victimization by intimates. *Journal of Personality, 53*, 179-195.
- Walker, L. E. A. (1989). Psychology and violence against women. *American Psychologist, 44*, 695-702.

- Walker, L. E. A. (1994). *Abused women and survivor therapy: A practical guide for the psychotherapist*. Washington, DC: American Psychological Association.
- Watkins, P. (2005). Police perspective: Discovering hidden truths in domestic violence intervention. *Journal of Family Violence, 20*, 47-54.
- Weisz, A. N. (1999). Legal advocacy for domestic violence survivors: The power of an informative relationship. *Families in Society, 80*, 138-147.
- Weisz, A. N., Tolman, R., & Bennett, L. (1998). Effects of services to battered women on completed prosecutions and levels of police intervention. *Journal of Family Violence, 13*, 395-415.
- Wertz, F. J. (2005). Phenomenological research methods for counseling psychology. *Journal of Counseling Psychology, 52*, 167-177.
- West, C., & Fenstermaker, S. (1995). Doing difference. *Gender and Society, 9*, 8-37.
- West, C. M., & Rose, S. (2000). Dating aggression among low income African American youth. *Violence Against Women, 6*, 470-494.
- White, J. W., & Koss, M. P. (1991). Courtship violence: Incidence in a national sample of higher education students. *Violence and Victims, 6*, 247-256.
- Williams, J. G., & Smith, J. P. (1994). Drinking patterns and dating violence among college students. *Psychology of Addictive Behaviors, 8*, 51-53.
- Wolkenstein, B. H., & Sterman, L. (1998). Unmet needs of older women in a clinic population: The discovery of possible long-term sequelae of domestic violence. *Professional Psychology: Research and Practice, 29*, 341-348.
- Woods, S. J. (2000). Prevalence and patterns of posttraumatic stress disorder in abused and post abused women. *Issues in Mental Health Nursing, 21*, 309-324.

Worden, A. P., & Carlson, B. E. (2005). Attitudes and beliefs about domestic violence:

Results of a public opinion survey: II. Beliefs about causes. *Journal of Interpersonal Violence, 20*, 1219-1243.

Wright, J. J. (1964). Environmental stress evaluation in a student community. *The*

Journal of the American College Health Association, 12, 325-336.

Yllo, K. (1993). Through a feminist lens: Gender, power, and violence. In R. J. Gelles &

D. R. Loseke (Eds.), *Current controversies on family violence* (pp. 47-62).

Newbury Park, CA: Sage.

Appendix A

Recruitment Flyer

College Women

Study Participants Wanted

Help mental health professionals and college administrators gain a better understanding of intimate partner violence in college. If you have experienced violence in an intimate relationship while in college and have talked with a mental health professional about the abuse we are looking to talk with you. If you are an unmarried woman, age 19-23, currently enrolled in college courses and willing to talk about your experiences with intimate violence in college and the process of talking with a professional please contact us.

All participants will be entered in a drawing for a 35\$ gift card.

Call the primary investigator: Megan Watson at 472-2918 for an intake interview to see if you qualify.

Appendix B

Phone Interview

Phone Interview

How did you hear about this study? _____

Are you currently enrolled in college classes? _____

How old are you? _____

What is your current relationship status? _____

Have you experienced violence in an intimate heterosexual relationship while in college?

Have you talked with a mental health professional about the violence that you experienced? _____

Would you be willing to discuss these experiences with a researcher and be recorded?

Are you currently in need of a referral for mental health or shelter services?

Interview scheduled? _____

Appendix C

Informed Consent Form

INFORMED CONSENT FORM

IRB# (Labeled by IRB)

Identification of Project:***Beyond barriers: A phenomenological study of women reporting intimate partner violence in college***

Purpose of the Research: You are invited to participate in this research study. You are eligible to participate in this study because you are a traditional-aged college woman who has experience intimate partner violence in college and have discussed this violence with a mental health professional. Participation in this study is not considered a part of any work or professional requirement. You must be 19 years of age or older to participate.

Procedures: Participation in this study will require approximately 60-75 minutes of your time, and is not considered a requirement for any class or academic purpose. The study involves participation in a one time, one-on-one interview conducted by the researcher. The interview will be recorded and will take place in the researcher's office. During the interview you will be asked a series of questions. These questions are designed to allow you to share your experiences as a college woman who has experienced intimate partner violence and has talked with a mental health professional about that violence. You will be given the opportunity to continue in the research process if you would like by looking over your transcribed interview and verifying themes identified. This part of the project will require approximately 30-60 minutes of additional time done on your own.

Risks and/or Discomforts: There are no known risks or discomforts associated with this research. In the event of problems resulting from participation in the study, psychological treatment is available at the UNL Counseling and Psychological Services, telephone (402) 472-7450.

Benefits: You may find that your participation in this research increases your awareness of the experiences you had and counseling process and allows you to inform others of what you have been through to benefit future survivors. The information gained from this study may help us to better understand the experiences of women who have experienced intimate partner violence in college and their process of disclosure.

Confidentiality: Your responses to the interview questions will be tape recorded. Your name will not be attached to the audiotape or demographic information, rather pseudonyms will be used to protect confidentiality and descriptions will be written in a general and unidentifiable manner. Following transcription the audiotapes will be destroyed. The data will be stored in a locked cabinet in the investigators office and will only be seen by the investigators during the study and for five years after the study is complete. The information obtained in this study may be published in scientific journals or presented at scientific meetings but the data will be reported in a way that preserves anonymity.

Compensation: You will receive no compensation for participating in this research.

Opportunity to Ask Questions: You may ask any questions concerning this research and have those questions answered before agreeing to participate in or during the study. You may also choose to call the principal investigator, Megan Watson, at 472-2918 or the project supervisor, Dr. Oksana Yakushko, at 472-2119. If you have questions concerning your rights as a research subject that have not been answered by the researcher or to report any concerns about the study, you may contact the University of Nebraska-Lincoln Institutional Review Board, telephone (402) 472-6965.

Freedom to Withdraw: You are free to decide not to participate in this study or to withdraw at any time without adversely affecting your relationship with the investigators or the University of Nebraska. Your decision will not result in any loss or benefits to which you are otherwise entitled.

Consent, Right to Receive a Copy: You are voluntarily making a decision whether or not to participate in this research study. Your signature certifies that you have decided to participate having read and understood the information presented. You will be given a copy of this consent form to keep.

Signature of Participant:

Signature of Research Participant

Date

Name and Phone number of investigator(s)

Megan Watson, MA, Principal Investigator
Dr. Oksana Yakushko, Project Supervisor

Office: (402) 472-2918
Office (402) 472-2119

Appendix D

Consent to Record

Consent to Record

**Beyond barriers: A phenomenological study of women reporting intimate partner
violence in college**

To ensure the quality and effectiveness of the study, the interview will be audio-taped. Any identifying information will be kept confidential. Pseudonyms will be used to label the tapes to ensure confidentiality. Following transcription of the interviews, audio-tapes will be destroyed. Transcriptions and analyses will be stored in a locked cabinet in the researcher's office and will only be seen by the researcher during the study and for five years after the study is complete.

I hereby give consent to the University of Nebraska-Lincoln and the researcher of this study to audio-tape my interview. I understand that I may withdraw my consent at any time.

Signature of Research Participant:

Signature of Participant

Date

Name and phone numbers of investigators:

Megan Watson, MA, Principal Investigator

Office: (402) 472-2918

Oksana Yakushko, PhD, Secondary Investigator

Office: (402) 472-2119

Appendix E

Qualitative Interview Protocol

Qualitative Interview Protocol:

Thank you for agreeing to participate in this study. As we have discussed I will be recording your interview and writing a few notes so that I can be sure that I am getting everything you say. As it was stated in the consent form, you can stop at any time. We will begin with some demographic information; the additional questions will focus on your experience with intimate partner violence in college and your decision to talk to a mental health professional.

1. How old are you?
2. What is your ethnicity?
3. How long have you been in college? Are you considered a freshman, sophomore, junior, or senior?
4. Are you currently seeing a mental health professional? How long have you been in therapy? If not currently seeing someone would you like a referral?
5. Tell me about your experience with intimate partner violence in college?
6. Had you experienced this type of violence in your life before college?
7. Did the violence affect your academic life?
8. Did you talk about the violence with someone in your life?
9. When did you decide to talk with a professional about the intimate partner violence?
10. What made you decide to talk with a professional?
11. Did you enter counseling to talk specifically about the violence?
12. Were there things that made it easier for you to talk about the violence with a professional?

13. Were there things that made it more difficult for you to talk about the violence with a professional?
14. What advice would you give to college administrators to keep this type of violence from happening on college campuses?
15. What advice would you give to mental health professionals to help them talk with victims of intimate partner violence?
16. Would you like to have your transcript sent to you to look over?
17. Would you like to participate in the data analysis by looking over the themes that come from your interview? You would have a chance to look over the main themes to ensure that you agree with the main messages that will be shared with the public and mental health and college professionals. If so I will need your address so that I can send this information to you or you could come pick it up from me when it is ready.

Thank you so much for your time!

Appendix F

Resources

Resources

Nebraska Domestic Violence/Sexual Assault Coalition
1000 O' Street Suite 102
476-6256

Friendship Home
Emergency Shelter 437-9302
Office 434-6353

Voices of Hope
2545 N 476-2110
Crisis Line 475-7273

Counseling and School Psychology Clinic
Teachers College Hall
472-1152

Counseling and Psychological Services
University Health Center
472-7450

Appendix G

Transcription Confidentiality Agreement

Beyond barriers: A phenomenological study of women reporting intimate partner violence in college

Transcription Confidentiality Agreement

I, _____, agree to transcribe the data for the “Beyond barriers: A phenomenological study of women reporting intimate partner violence in college” study, conducted by Megan Watson and to keep the records I will receive for transcription in a confidential location. Furthermore, I agree to not disclose any information that can identify any individuals who either participated or were mentioned during the process of the study.

I fully understand these confidentiality requirements and agree to consult with Megan Watson on any matter that will arise in transcribing the data.

Signature: _____ Date: _____

Appendix H

Member Checking Instructions

Member Checking Instructions:

Thank you for agreeing to be a part of the data analysis for this qualitative research study. Validation of the themes is only done with the assistance of you, participants in the project. Enclosed in this envelope you will find a list of themes that have been developed by the researcher after conducting several interviews. Themes are the common factors and important points that stood out within the data. There are two types of themes; first, the textural themes which describe the participants experience. Next are the structural themes, which describe the environment, college. Each theme has a list of meaning units, or descriptions and supportive quotes and comments that have led to that theme. Please follow the directions below and then return your comments and the list of themes to the researcher by placing them in the addressed and postage paid envelope. If you have any questions or concerns, please feel free to call the researcher, Megan Watson, at 472-7450 or email me at mewatson@unlserve.unl.edu.

1. First read through all of the themes, meaning units and supportive quotes and comments.
2. Next, read them over again. This time write any thoughts you have about the themes and quotes in the margin next to the themes. Be sure to include any thoughts you have about whether you think the comments and quotes fit under that theme, or if you think they belong under another theme. Also, be sure to include any additional thoughts you have about a particular quote or theme. Do not add additional personal information. You are a co-researcher at this point so think in terms of data analysis.
3. Next, at the end of the list of themes is a place to write final thoughts. In this space, please write any overall thoughts you have about the themes that have been developed. If you do not agree with a theme please explain why you do not agree. If you think that there is a theme missing or that a theme should be renamed, please explain why you think this.
4. Last, put the list of themes and your comments in the envelope provided and send it back.

Again, your assistance is much appreciated! This valuable information will be used to inform mental health professionals and college administrators and to make a difference in the lives of other women.

Appendix I

List of Initial Themes

List of Initial Themes

Textural

1. Feeling shame and embarrassment.

Meaning units:

- These feelings often caused the participants to keep the abuse to themselves.
- Not wanting to tell family and friends about the abuse.
- Not wanting to admit to themselves and others that this was happening to them.
- Being afraid to say it out loud.
- Feeling like it was their fault.
- Feeling like they should know better.
- Not defining the treatment that they were receiving as abuse.
- Wanting to keep the abuse hidden because they felt bad about it.
- Not wanting to admit that the relationship was not as good as it seemed.
- Thinking they can handle it on their own.
- Not wanting to worry others.

Supportive quotes:

- ... at first I just kept it all hidden, I thought I could deal with it myself.
- At first I didn't want to tell anybody. I was like, I'll just put it in the back of my head and it will go away.
- I knew I was in a bad relationship and I was kind of ashamed of it.
- I was ashamed of it. That it had happened to me at all. The hardest thing for me was to admit that...I was ashamed that it was happening to me but since I was depressed anyway I thought it was me.
- It was hard to realize that someone that I loved so much didn't give a crap about me.
- Cause I felt stupid about it.
- I was talking to my mom about it and she was asking me why I wanted to leave because up until that point I hadn't told her anything, everything was fine, everything was good. I didn't want to worry her. At the time I told her that I would tell her at some point when I'm out of the relationship about all of the stuff. And of course that really worried her.
- I really didn't think about it as an abuse type of thing.
- I think it was one of those like say it out loud things. Where it's like – I would like to have the chance to actually admit that there was something wrong with the relationship
- You don't really want to blemish that [view of the relationship] by actually saying it out loud that “you're a jerk and you're abusive” and that idea.
- At this point, my family knew something was going on but I had been so separated from my family that I felt shame. I felt embarrassed. I didn't want to tell them.

2. Feeling isolated from friends and family.

Meaning units:

- Physically moved away from friends and family to be with boyfriend.
- Discouraged from spending time with friends or family.
- Told that they could not see friends and family.
- Feeling “forced” to spend more time with boyfriend.
- Friends, outside activities, and family are ridiculed.
- Staying away from friends and family so they do not know about the abuse.
- Not spending time with others to avoid having to explain their whereabouts and upsetting their boyfriend.

Supportive quotes:

- ...I was 20 hours from home and I knew nobody and there were like three guys living in the house.
- Basically I avoided other relationships girlfriends/friends. If I wanted to go out and hang out with my friend, just like at her house, watch TV, I would get drilled about it.
- He would usually degrade my friends or degrade the event, he would be like, “That’s stupid.”
- I couldn’t talk to my family about it because I knew better then to stay with him but I didn’t know how to get out.
- We moved away from my family and I felt pretty isolated even from my friends.
- One thing that came out of the counseling was the fact that the reason that I wasn’t happy in the relationship, besides the fact that he is really controlling... was the fact that in the relationship, I wasn’t able to see my family as much as I wanted.
- It was that I was choosing between being with my family and being with him.
- – the friends that I had, he never liked. So, then it got to be that thing where he would plant little notions and ideas in my head about people and slowly I separated from all my friends. I slowly separated from my family. The family absolutely hated him – right off the bat...

3. Feeling controlled.

Meaning units:

- Having to explain their whereabouts.
- Feeling afraid to say anything.
- Dealing with the jealous beliefs and behaviors of boyfriend.
- Being accused of cheating.
- Having to give up on other activities to be with boyfriend.
- Feeling like their boyfriend is playing “mind games.”
- Spending time and energy avoiding fights.
- Being threatened by their boyfriend if they engage in certain behavior.
- Being physically or verbally abused with the express purpose of controlling them.
- Participants change their own behavior to avoid difficulties with their boyfriend.

Supportive quotes:

- ...he scarred me out of saying anything.
- He's just really really controlling basically. He only got violent with me...about...one time he locked me in his basement. One time he pushed me down some stairs. That was probably the most violent he had ever been. A lot of times he would get upset, he wouldn't let me leave.
- He would say that he didn't trust me and told me I couldn't go downtown, which I didn't do anyway. He said, "It makes you a whore."
- He always thought I was cheating on him or something. I mean I didn't know anybody there. ...I felt like I was in jail, controlling everything that I did.
- Right away it was that he was in charge type of establishment.
- ...he is really controlling...
- Just the idea of for three months there, I wasn't working and it was like having to justify all that I did all day while he was at work.
- [He would say] "Are you crazy – you have homework, you have to clean the kitchen? Okay, if you clean the kitchen, then you can go." I'm 19, what are you talking about if I clean the kitchen, I can go.

4. The abusive situation and the ending of that relationship caused psychological distress.

Meaning units:

- The psychological abuse often led the participant to counseling.
- Feeling scared on a daily basis.
- Being fearful of what the boyfriend might do.
- Feeling anxious about what might happen.
- Increased stress and pressure.
- Feeling depressed or sad.
- Not wanting to go back home.
- Not wanting to leave home.
- Feeling confused.
- Low self esteem.
- Feeling angry.
- Symptoms of trauma.
- Not being able to trust.

Supportive quotes:

- I was just scarred.
- ...cause I'm just full of anger with him.
- I had a really bad breakdown.
- I started having nightmares with all that happening again. I started like things coming in to my head during the day and I just had a major like week long break down and I was like I need to go see somebody.
- Cause I don't trust guys, I don't trust anybody.
- I would just go to sleep because I was so depressed...so I had to get a new therapist to deal with that.

- I didn't want to kill myself but I felt like I was in a bad place and if it progresses I might start thinking that so I checked in to the hospital...
- He would put down things that I actually really loved about myself that were more intrinsic.
- But how he would act he was really cautious about making sure that my self esteem didn't go very high.
- It was very difficult, very emotional.
- I had very little self confidence.
- A lot of times he would tell me that I wasn't worth anything, that my ideas were a fairytale and that I wouldn't find anyone that would give me the type of love I wanted...
- It took a while for me to get out of the relationship. I had to have my family come and get me because it was the most lost I have ever been in my entire life.
- I had lost self esteem and confidence. It was pretty hard.
- There were nights were I would cry myself to sleep. I got very good at crying without him knowing. I hated going home...
- It was hard. I had to rebuild myself completely and that first year was awful.
- Even though I missed school and living independently, I didn't want to be away from my parents again. So my dad suggested that I should go to counseling. They still saw that I was really sad and depressed.
- It was mental mind games – it was manipulation.
- ...he would make me feel guilty for asking where he has been and then I would start to question myself as well.
- I literally just went in and cried for like a week straight and became suicidal. I didn't know who I was. He was so much of my identity and so much of me was wrapped up in him
- I couldn't sleep. I was afraid to sleep at night. Couldn't sleep in my bed. I slept on the couch. I lost weight. I had no appetite. No desire for anything. I was just a shell.

5. Going to see a counselor.

Meaning units:

- Went to counseling because of psychological distress.
- Went to counseling to talk about the relationship or loss of the relationship.
- Feeling stressed and overwhelmed and wanted to talk with someone.
- Feeling like they couldn't take it anymore.

Supportive quotes:

- I kinda fell into this depression I was like - I can't handle this anymore, I can't handle the nightmares anymore.
- I flat out told her [the counselor] – this [the abuse] is what I'm here for and she was like well tell me the story about it and I did.
- So I was just like - give me somebody to talk to that's a female and I'll do it just cause I just can't take it anymore.

- Going to school and this time I was like $\frac{3}{4}$ time and then, cooking and cleaning, family stuff. It was just like ‘are you kidding me.’ So, I started the counseling. And not to address any type of abusive situation. Just to address like everything...
- [I thought] I need help. I need help. This thing is too big for me to handle on my own. I can’t even tell you what spurred it or sparked it in my head. It was when I was driving to work and it was just like I can’t live like this.

6. What works and doesn’t work in counseling.

Meaning units:

- Wanting to see a female counselor.
- Wanting to tell their story.
- Wanting someone to give them space and allow them to go at their own pace.
- Wanting to get feedback.
- Focusing on strengths, building self esteem and empowerment.
- Feeling like their counselor knew a lot about intimate partner violence.
- Feeling like they had a good fit with their counselor.

Supportive quotes:

- ...if they [counselors] like knew a lot of education about it [intimate partner violence] then they know how to talk to you about it. She [the counselor] was really great, she knew everything.
- With her [the counselor], our personalities were really good. She was really perceptive and she could tell if I was trying to avoid something, and she knew when I was sneaking stuff like she was really blunt.
- The strengths finder – that book is amazing. It’s amazing how you can help people see their strengths and help them see how their partner suppressed their strengths.
- So I think that, building self esteem.
- ...some people feel so stupid that that happened to them and then letting them know about a woman, like a powerful woman, that that happened to. Then that takes pressure off, “I let this happen,”
- It was a male counselor and I just didn’t feel comfortable with him. He was very, almost solution focused kind of brief kind of approach and I just didn’t like it. I didn’t feel like I could really express myself. So, I didn’t come back after that first time...
- The other counselor she just kind of let me talk and tell my story and I just felt more comfortable with her. She allowed me to be very vulnerable.
- I would say that with any kind of trauma, I think it’s better to be more...gradually, have a more gradual approach then something’s that going to like pressure them. Cause it took me a while to get to a place where I was really comfortable with myself.
- The counselor was really nice. I didn’t think I would be as comfortable with him because he was a guy but then I was like – hey, it’s free.
- But, psychologists could let each person talk and help them figure out which way they want to go.

- ...I had problems with the therapist. Just because I would go in there and just word vomit. But, I would get no feedback. ...So, now the therapist I see is wonderful. He has given me so much insight.
- ...I needed someone who was more proactive. I needed a counselor who was very insightful and very knowledgeable and the counselor I have now is just fabulous. He gives me so much feedback and that is what I need.
- ...each person in an individual and it takes a good counselor to be able to read a person and see what type of individual they are. If they are a big talker who just wants to talk and you just allow them to talk because that is how they process. Or, if they are a person like myself, who talks but wants feedback.

Structural

1. School work suffered because of the relationship.

Meaning units:

- Not able to go full-time.
- Grades suffered.
- Missed classes.
- Not being able to remember coursework because of relationship concerns.
- Not supported in their school work.
- Not feeling free to be full-time because they have to spend time with boyfriend.
- Getting in to fights with boyfriend before tests or assignments are due.
- Feeling depressed and missing class.
- Focus not on school, it is instead on keeping the relationship or making their boyfriend happy.
- Responsibilities for school and relationship are not compatible.
- Went from being a good student getting good grades to getting bad grades or failing.

Supportive quotes:

- Basically our relationship was so stressful that I couldn't take more than 12 credits each semester which is why I'm doing an extra half.
- [Interview question: Were you going part time at that time because of him?] Yes.
- ...he sidetracked me and distracted me from my goal.
- School doesn't come easily to me and I have to study and work for it but having a job too and just life's responsibilities and when he walked in and school went to the wayside...
- For two or three weeks I fell behind in school and like I couldn't concentrate, I couldn't focus cause I was up with nightmares all night. I wasn't sleeping. My school fell pretty bad for a while.
- I couldn't handle getting my homework done in the time that I wasn't fighting with my boyfriend.

- Sometimes I don't even remember past classes or how they were I just remember what we were fighting about during some of the semesters.
- ...we would always get in a fight on the night before a paper was due or a test. I would spend about two or three hours arguing with him and then I would have to stay up the rest of the night trying to get my studies done.
- He injured his back and I missed lots of classes taking him to the doctor appointment because he didn't have a driver's license...
- So, when he left, I literally stumbled. I collapsed. It was right in the middle of the semester. It definitely affected my grades.
- My grades suffered tremendously...
- But it deeply affected my school. I mean you can see when he entered my life and I was straight A's and the semester I met him, I got straight F's. You can see it. A's, A's, A's, B's, A, A, A, B+. And, boom-boom-boom, straight F's. From the semester I met him.

2: Missing out on the "college experience."

Meaning units:

- Not able to engage in any of the extra curricular activities.
- Feeling pressure to perform in a certain way.
- Having to limit time at group or school activities.
- Being questioned about the new people they meet and the new activities they engage in.
- Not being known on their campus.
- Feeling isolated and unable to participate in school activities.
- Participants felt that they had to explain themselves and defend their whereabouts to their partners.

Supportive quotes:

- I definitely did not have the college experience because I totally avoided it so I wouldn't have to argue with him.
- A lot of people don't know who I am at my school and my campus is really small.
- I didn't go to events, with the student body, things that were free.
- So, now I laugh about it – that some people come to school and get C's and like, hey, I am going to graduate because I don't guess I would have so much pressure on me especially in the beginning and if you are serious about your goals and make sure you are doing well. I would say that really added more pressure.
- I would lie. But, he would be like how did your test go and I would say that I got a blank percentage above what I really got. ...I didn't want to go into it...

3: Feeling added pressure or stress in the college environment.

Meaning units:

- Feeling scared at school.
- Believing that the boyfriend or ex-boyfriend will know where to find them.
- Not able to focus on course work like they would need to if going full-time.

- Too overwhelmed or stressed to take a full course load.
- Feeling pressure to do well.
- Being a student is not valued by boyfriend.
- Desire to be in school or finish school is not respected by boyfriend.
- Not able to concentrate on school work.
- Having to defend time spent on school.

Supportive quotes:

- He told me - I will be going to school there next year, I will be there, I'm coming after you and I'm getting you back in my life. Cause I'm like scarred to death if he comes here.
- I was scarred - like scarred of walking around campus during the day.
- ...if I had to do something that would cut in to our time together he would make me feel bad about it.
- [Now] Everything seems more doable and if, for some reason, things don't work out ...it's like you do the math, you have to have an advisor and in the back of your mind, you are not thinking, "Oh, shit, how this will affect my relationship. Because really, it is just going to affect one more class. Not that big of a deal. A lot of people drop a class; it won't affect your GPA."
- ...it [the abuse] did make it [school] more stressful.
- I had joined some group, some course group and we had practices. A lot of times he acted as if I wasn't really in it and I was really doing something else. I just felt like I had to prove everything to him, that I had to study or had a test or whatever.
- Even using the computer when we lived together was such a burden to him. I'm just thinking about it now how he controlled even just the computer. I couldn't really even get on the internet, oh my gosh.

4: Advice for college administrators.

Meaning units:

- Prevention is important.
- Education about intimate partner violence should be encouraged for everyone.
- Men and women should be the target of preventive work.
- Faculty should be good role models.
- Professors and others should be more understanding of the consequences of intimate partner violence.

Supportive quotes:

- ...promote more safety.
- Like I really don't ever see anything on campus about like things like telling girls to be careful or you never know what's going to happen cause I fully trusted him and I never thought it was going to happen.
- As far as faculty goes they could just be not reinforcing that macho style. It's reinforced all the time. Lay off the, "you're a man, suck it up. You're not supposed to talk about your feelings."

- Maybe male faculty could talk about how they treat their wives and as a man this is how you are supposed to treat your wife and as a man this is how you're not supposed to treat your wife.
- I went to a...I think it was through women's studies, they had a seminar on dating and there was a few people there but it brought forth abusive relationship types and what it looks like and what do you want in a relationship. What is healthy and what is unhealthy. I guess making that more overt. You know, like in the dorms maybe.
- I think that a lot of times those types of situations have to do with just education and self esteem and so forth. So, just making sure that more people learn about it or just like mandatory things that people have to do as a part of their program.
- [A counselor came to talk to a group and said] "hey, we have counseling and he made it seem very like – if you want to talk to somebody, you're not crazy and you can just go" and almost made it seem like it was more of a coaching/mentoring type of thing and not really like you might be schizophrenic or you might be this. Just like the idea that you could talk to somebody and you don't want to talk to anyone that knows you know or that you went to talk to somebody – that type of thing. So, maybe, doing something similar to that. But, maybe more like on a specifically women's.
- I think they could be more understanding to mental health and to circumstances.
- That is just one of the things I have run into is that there is a lot of bias – just preconceived notions and not listening. There is a stigma still...
- There is definitely resources on campus to help students.