# Life-history insights into the lives of women who have experienced intimate partner violence: An intersectionality inquiry

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#### **Abstract**

IPV is one of the primary factors contributing towards injury in women worldwide, and is particularly prevalent in South Africa. It is characterised by any physical, emotional, sexual and verbal abuse inflicted on a person by their partner, based on their gender and societal position. Although we may hear many stories of IPV experienced by women, we do not always hear about their life histories. This research aimed at exploring the life histories of South African women who have experienced IPV by their male partners. The life-history method was employed to gain insights into the life stories of women who have experienced IPV, from childhood up until adulthood, in order to contextualise their experiences of IPV. Six participants were recruited using purposive sampling who a) were 18 years or older, b) had previously experienced or are currently experiencing any form of IPV by their male partner(s) and, c) were living in a shelter for abused women. Participants were interviewed twice through semi-structured, life-history interviews, with the first interview focusing on their experiences of IPV, and the second interview focusing on their life stories from childhood to adulthood. A thematic narrative analysis informed data analysis. The following narratives emerged: 1) Narratives of captivity and economic control, 2) Narratives of masculinity and violence, and 3) Narratives of strength and resilience. The findings suggest that policy makers should prioritise addressing the interconnected systems of oppression in South Africa that result in racial, gender and economic inequalities.

**Key words**: Intimate partner violence; intersectionality theory; life-history methods; thematic narrative; South Africa

Intimate partner violence (IPV) is a broad concept encompassing any physical, emotional, sexual and verbal abuse inflicted on a person by their partner, based on their gender and societal position (Dunkle et al., 2004). IPV is one of the primary factors contributing towards injury in women worldwide, and stems from unequal power dynamics between men and women (Dunkle et al., 2004; García-Moreno et al., 2013; Hague & Malos, 2005; Odero et al., 2013). Although there are few nationally representative studies on rates of IPV against women in South Africa, there is a consensus that South Africa has an alarmingly high prevalence (Centre for the Study of Violence and Reconciliation [CSVR], 2016; Gibbs, Corboz, & Jewkes, 2018; Gibbs, Dunkle, & Jewkes, 2018; Groves et al., 2015; Pöllänen, de Vries, Mathews, Schneider, & de Vries, 2018). Prevalence rates of IPV against women in South Africa are often presented in terms of femicide, showing that South Africa has a murder rate by intimate partners (24.7 per 100 000 population) that is over six times higher than the worldwide average (4.0 per 100 000 population) (Seedat, van Niekerk, Jewkes, Suffla, & Ratele, 2009). Recently, the South African Police Service reported a 2.7% increase in the number of reported violent crimes against women (including sexual offences, physical assault, murder and attempted murder) from 171 591 in 2014 to 177 620 in 2018 (South African Police Service [SAPS], 2018). These rates most likely do not reflect the actual prevalence of IPV against women, as many cases go unreported. These studies raise complex questions about the social conditions in South Africa that contribute to its ongoing prevalence, and reveal the urgent need for studies that unpack women's experiences of IPV.

The above studies are useful for recognising the extent of IPV in South Africa, and are by no means straightforward in their approaches; however, they do not reflect the full stories of women who have experienced IPV (Boonzaier & van Schalkwyk, 2011). Although we may hear many about the prevalence of IPV experienced by women in South Africa, we do not always hear their life stories, including the complex dynamics of their relationships

and the broader social, political and economic conditions within which they reside.

Therefore, this project aims to gain insight into the life histories of women who have experienced IPV, from childhood to adulthood, in order to situate their experiences of IPV within the context of their lives. The life-history approach involves the recording of an individual's memories and experiences from childhood, adolescence and adulthood<sup>1</sup>, providing context for the individual's life (White, Uzzell, Räthzel, & Gatersleben, 2010). As will be discussed in the next section, IPV against women is complicated by South Africa's difficult history of violence, which has dictated the political, economic and social conditions within which these women's lives are situated in.

## Contextualising women's experiences of IPV

Although currently a democratic country, South Africa is still recovering from a dark, violent history of colonialism and apartheid, both of which oppressed the lives of black<sup>2</sup>
South Africans (Biko, 1996). The apartheid regime was characterised by white supremacy and patriarchal attitudes, and became a system of institutionalised racism that advocated for racial segregation and gender discrimination (Jewkes, Levin, & Penn-Kekana, 2002; van der Westhuizen, 2013; Vetten & Ratele, 2013). Importantly, as the literature has found, the violence inflicted during apartheid has profoundly contributed to the normalisation of violence against women, as it has been governed by deep-seated patriarchal attitudes towards the gender and social roles of women in society (CSVR, 2016; Jewkes, 2002; Sibanda-Moyo, Khonje, & Brobbey, 2017). Traditional gender roles position women in reproductive roles, as caregivers, and men in more productive roles, as providers and protectors, and IPV has become a mechanism through which men assert their dominance over women (Boonzaier,

<sup>&</sup>lt;sup>1</sup> Childhood ranges from birth to 12 years; adolescence ranges from 13-18 years; adulthood ranges from 19 years-present.

<sup>&</sup>lt;sup>2</sup> In discussions on political oppression, the term 'black' will be used as a political, unifying term to refer to all oppressed racial groups in South Africa (Biko, 1996).

2014; CSVR, 2016; Mathews, Jewkes, & Abrahams, 2015; Morrell, Jewkes, & Lindegger, 2012; Sibanda-Moyo et al., 2017; van Niekerk & Boonzaier, 2015).

Apartheid also informed the educational and employment opportunities of black South Africans and black women in particular, who continue to represent the poorest sectors of the country (Boonzaier & van Schalkwyk, 2011). From the literature, many studies have found that race, class and gender are closely tied with poverty in South Africa, and these inequalities remain at the centre of IPV against women in South Africa (Boonzaier, 2008; Boonzaier & van Schalkwyk, 2011; CSVR, 2016; Jewkes, 2002; Jewkes et al., 2002; Sigsworth, 2009; van der Westhuizen, 2013). It is apparent here that a contextualised understanding of IPV is necessary, and therefore, research that unpacks the role of power in contributing to women's experiences of IPV is of paramount importance. Although there appears to be a shift away from studying the individual risk factors of IPV against women, and towards a context-driven approach, few qualitative studies have considered the life-history method to study IPV.

Life-history approaches are not commonly used in qualitative research, especially in South Africa, however, reviewing their use in previous research has yielded some important strengths. Sosulski, Buchanan & Donnell (2010) found that the life-history approach allowed for a holistic exploration of one African American woman's experiences of mental illness, as it allowed for the participant to recall early childhood, adolescent and adulthood experiences. The life-history approach contextualised the perspectives and experiences of African American women living with mental illness, thereby going beyond pathologizing their identities or characterizing them in confined ways (Sosulski et al., 2010). Another life-history study argued the importance of focusing on women's experiences growing up, and revealed the political, economic and cultural contexts that influence their daily experiences (Gubrium,

2006). Therefore, the life-history approach can be useful for providing comprehensive accounts of women's lives (Sosulski et al., 2010).

In South Africa, one life-history study found that women experienced IPV in nearly every stage of their lives, such as childhood exposure to IPV, or adolescent and adulthood experiences of IPV as a result of discrimination based on race, gender, sexuality, socioeconomic status and disability (Sibanda-Moyo et al., 2017). Furthermore, this study found many women referred to their own family and childhood backgrounds as well as the backgrounds of their partners to explain the cycle of IPV that occurs in their lives (Sibanda-Moyo et al., 2017). Importantly, these experiences of IPV were strongly tied to their identities as women, partners and mothers and the societal expectations connected to these identities (Sibanda-Moyo et al., 2017). Other studies in South Africa adopt narrative approaches to studying IPV, which are important in terms of placing women at the forefront of their stories, thereby giving them the opportunity of exerting agency (Boonzaier, 2008; Boonzaier, 2014; Boonzaier & de la Rey, 2003; Boonzaier & van Schalkwyk, 2011; Gordon, 2017; van Niekerk & Boonzaier, 2015). This achieves a similar goal to the life-history approach, which shifts away from the tendency of defining women only by their experiences of IPV and decontextualizing their experiences of abuse. However, the life-history approach goes one step further in reflecting on experiences throughout the life-course.

## Rationale for using a Life-history Approach to studying IPV

Although many of the aforementioned studies have adopted an in-depth approach to studying IPV against women, there are still a dearth of studies which focus on the life history of women who have experienced IPV in South Africa, from childhood to adulthood. The life-history approach provides a detailed, real-life account of the participant's story, which is often left out of quantitative methods, and is not covered entirely by other qualitative methods (White et al., 2010). This approach aids in shifting understandings of IPV as an

individual issue to a problem within broader socio-historical, political contexts (Crenshaw, 1991; Sosulski et al., 2010). Furthermore, the life-history approach is useful for finding commonalities and differences in the lives of women who have experienced IPV (Sosulski et al., 2010). Through actively listening and engaging with these stories, this project aimed to gain deeper theoretical insights into the lives of women who have experienced IPV, including the various social, political and economic structures that exist in their lives. This approach creates the opportunity for women to tell their own subjective stories and to make meaning of their identities as women, partners and mothers, potentially empowering them by giving them voice.

#### **Research Aims**

The aim of this research was to explore the life history of South African women who have experienced various forms of IPV by their male partners. Specifically, this project aimed to reveal the ways in which these women make meaning of their identities in relation to their experiences of IPV and their intimate relationships. It also aimed to contextualise the women's stories to get a clearer sense of how the social, political and economic conditions within which they reside have shaped their experiences of IPV. This research is part of a larger study which seeks to uncover community responses to IPV against women, including responses of women, men, children and social workers. Importantly, this particular study focused *only* on women's responses to IPV.

# **Main Research Question**

How do women who have experienced IPV narrate their life stories?

# **Secondary Questions**

How do women who have experienced IPV negotiate their identities as women, partners and mothers through their life stories?

Which social, political and economic power-dynamics emerge through the life stories of women who have experienced IPV?

#### **Methods**

#### **Theoretical Framework**

This project draws on Crenshaw's (1991) theory of intersectionality, which recognises the interconnectedness of identities of race, gender, socioeconomic status and class, and how they influence women's experiences of IPV. Intersectionality also recognises that an individual's knowledge of the world is situated within that individual's social identities, which have their own collective history and representations of meaning (Sosulski et al., 2010). Furthermore, intersectionality asserts that IPV against women not only an individual, family matter but also a product of broader systems of power (Crenshaw, 1991).

Intersectionality provides a feminist framework that recognises women as the experts of their own life stories, and has the potential of giving women the freedom and agency to authentically express their subjectivity (Collins, 2000; Crenshaw, 1991; Sosulski et al., 2010). Therefore, it is useful for exploring how intersecting identities throughout the participants' life histories shape manifestations of IPV and influence how women respond to and resist IPV.

### **Research Design**

This project recognises the need for a qualitative research method that finds significance in using the richness of data to contextualise real-life settings and represent the experiences, narratives and perspectives of women holistically (Flick, 2013; Langdridge & Hagger-Johnson, 2009).

**Life-history method.** The life-history method is most suitable for this project because it focuses on the life stories of individuals from childhood to adulthood (Goodson & Sikes, 2001). Examining South African women's life histories from their own perspectives captures

distinguishing features, similarities and differences within and across their stories (Sosulski et al., 2010). It also allows us to recognise the significant life events that contribute to resiliency, or that further exacerbate the problem of IPV (Sosulski et al., 2010). The decision of what constitutes a significant life event was left to the participant to define to myself as the researcher, making them the active expert of their own lives and creating a more equally balanced power relationship between the researcher and the participant (Corbin, 2003; Fraser, 2004). This method enabled women to provide holistic descriptions of their experiences and to contextualise their narratives (Goodson & Sikes, 2001; Sosulski et al., 2010; White et al., 2010).

Combining the life-history method with intersectionality theory allows us to gain a fuller picture of these women's lives, as defined by their socio-political histories and unique intersections of identity. Furthermore, it can address key individual, political, economic forms of oppression that women experience in their daily lives, which facilitates culturally-sensitive knowledge on the issue of IPV (Crenshaw, 1991; Sosulski et al., 2010). Having a multi-layered awareness results in a more accurate and rigorous interpretation of their social worlds (Collins, 2000; Gubrium, 2006). Intersectionality and life-history methods have a political purpose. They serve to expose dominant power structures that exist in women's lives, as well as negotiate openness and resistance by allowing previously marginalised voices to tell their stories. Thus, this study privileges the participants' point of view by examining the language and symbols of meaning they use to construct their holistic narratives.

# Sample

Importantly, when referring to the women who participated in the study and their male partners, this project chose not to use terms like 'victim', 'survivor' or 'perpetrator' as these potentially limit their sense of agency and identity (Fulu, Warner, Miedema, & Liou,

2013, p. 49). Preferable phrases such as 'women who have experienced IPV' or 'men who have perpetrated IPV against women' are used instead. Access to the sample was obtained through St. Anne's Home, a shelter that offers safe accommodation and 24-hour services to women who have experienced IPV. During the process of recruitment, social workers at St. Anne's Home gathered women living at the shelter into a communal space, which allowed me to provide an in-person information session describing the nature of the study. They were then invited to participate and given the opportunity to sign up for the study if they were willing to participate. A sample of six (n=6) women were recruited who a) were aged 18 years and older, b) had previously experienced or are currently experiencing any form of IPV from their male partner(s) and, c) were living in a shelter. Purposive sampling, a technique whereby participants are recruited based on the specific research aims (Riessman, 2008), was employed to recruit women in the study.

All women who participated were given a demographic form to fill in information about their age, race, socioeconomic status, educational level, relationship status and dependants prior to the interviews (Appendix A). Their demographic details were then presented in table form, using pseudonyms to ensure anonymity (the importance of which will be discussed under ethical considerations) (Appendix B). Their ages ranged between 23 and 46 years, and they identified themselves racially as African (1)<sup>3</sup>, Coloured (4) and White (1). Their relationship status ranged from being married and in the process of getting a divorce (1), being in a relationship but not living together (3), being single (2). Educational levels ranged from Grade 10 (2), Grade 11 (1), Grade 12 (2), and university degree (1). All six participants reported not having enough money for basics like food and clothes and all had at least one child from their partner who was abusive.

<sup>&</sup>lt;sup>3</sup> Round brackets surrounding a number refers to the number of participants who fall under each demographic category.

#### **Data Collection**

I collected data through life-history face-to-face interviews, which were semi-structured, meaning the interview was guided by a predetermined interview schedule (Appendix C). A semi-structured approach allows the researcher to keep the focus of the interview in line with research aims, whilst simultaneously allowing participants freedom to share their stories using their own words and timelines (White, et al., 2010). The interview schedule contained mostly open-ended questions. Each woman who participated was interviewed twice and each interview was audio-taped for transcribing purposes. Thus, 12 interviews were conducted altogether. The first interview focused on women's experiences of IPV, and the second interview focused on women's life history from childhood to adulthood.

## Data analysis

I employed thematic narrative analysis (TNA) to analyse participants' life histories. TNA explores the content of the interviews, analysing *what* is said in each life story, with less focus on *how* it is said (Riessman, 2008). It explores common themes within and across the participants' life histories, providing rich descriptions of each theme whilst also attempting to keep the story intact (Riessman, 2008). These themes are layered with meaning, and will be evaluated within participants' contexts (Riessman, 2008). TNA combined with intersectionality theory considers the participants' context, establishing links between the participant's life stories during each phase from childhood to adulthood, and the broader social inequalities that exist in their lives.

In combination with Riessman (2008)'s TNA, this project followed Fraser's (2004) seven phases for analysing the participants' life histories, as follows: 1) *Hearing the stories*, and taking note of the emotional state of the participant and researcher, 2) *Transcribing the interviews*, enabling the researcher to analyse material line by line, 3) *Interpreting each transcript*, by identifying and analysing the main points and themes that emerge within

stories, 4) Scanning across different domains of experience, to identify how people interact with intrapersonal, social, political and cultural aspects of their environment, 5) Linking the personal with the political, adapting intersectionality theory to understand how dominant discourses provide a framework for understanding stories, 6) Looking for commonalities and differences among participants, to reveal novel, inconsistent or surprising findings, and 7) Writing academic narratives about personal stories.

Riessman's (2008) TNA approach was employed to analyse the content of participant's life stories, and Fraser's (2004) framework was used as a step-by-step guide for undergoing such an analysis.

#### **Ethical considerations**

Ethical approval for the larger study was granted by the ethics committee at the University of Cape Town (Appendix D).

# **Informed consent for participants**

Consent from St. Anne's Home was granted prior to recruiting the participants.

Women who signed up for the study were provided with an information sheet (Appendix E) and a consent form outlining the nature and purpose of the research, potential risks and benefits, permission to audio-record the interviews and assurance of confidentiality (Appendix F). Each participant was made aware that their participation was voluntary and that termination of interviews at any time was possible without any negative consequences.

# **Protecting Privacy and Confidentiality**

Ensuring the participants' right to privacy involves creating a safe environment by giving them the right to decide which personal aspects of their lives will be disclosed (Ellsberg & Heise, 2005; White et al., 2010). Individual interviews were conducted in a private room at the shelter to ensure confidentiality, and interview questions were mostly open-ended to allow participants to negotiate how much information they were willing to

share. Pseudonyms were used when writing up the research report to protect the participants' anonymity. As this proposed project is part of a larger study, this information is accessible to the team of researchers involved, as well as a professional transcriber who transcribed two of the 12 interviews. Transcriptions from audio-recordings have been secured and password-protected, and are only accessible to myself and the research team.

## Risks and benefits of the study

Risks to participants. Given the sensitive nature of the research topic, there was a possibility of participants experiencing psychological distress (Hennink, Bailey, & Hutter, 2011). However, the interviews were semi-structured and in-depth to allow the women to be flexible and in control of what information was shared during the interview (Corbin, 2003). Furthermore, previous training and practical experience in both therapeutic and academic interviews meant that I could respond to the emotional state of the participant appropriately, if necessary. Each woman was provided with a list of accessible counselling services or organisations after the interview (Appendix G). Additionally, the women were debriefed at the end of each interview, to give them the opportunity to raise concerns and questions about the research process (Hennink et al., 2011). Risk to physical harm was minimal, given that the interviews took place at St. Anne's Home, which is a secure location. The women did not incur transportation costs as they were already residing at the shelter.

**Risks to researchers.** To reduce the emotional impact of listening to stories of distress and vulnerability (Ellsberg & Heise, 2005), I attended individual counselling with a counselling psychologist at the University of Cape Town and debriefed with my supervisors.

Benefits to participants. Participants were able to share their stories and perspectives on IPV, which can be an emotionally healing and empowering process when dealing with trauma (White et al., 2010). Moreover, given that the research took place through an already established organisation, there is a higher possibility that the research findings may influence

policy makers. Each participant was given a R100 grocery voucher per interview as a token of gratitude at the end of the interviews.

#### Limitations

# Language barriers

The study was limited by the researcher's inability to communicate fluently in the mother-tongue languages of the participants (Five spoke Afrikaans and one spoke isiXhosa as their mother-tongue). This potentially resulted in meanings being misinterpreted by the researcher, or participants being unable to fully express their narratives in English.

# Memory

A limitation of using the life-history approach is its reliance on memory. Memory cannot be seen as a factual account of an event in time, but rather a representation of an event from the participant's perspective (White et al., 2010). The retelling of stories stems from memories that are affected by beliefs and values of the present, and how women share their past stories will undoubtedly change as time passes (Uzzell, 2009). It is also impossible to interview all of those who have experienced an event, or to weed out all of the women's memories of a certain period (Portelli, 1997). Although the lack of reliability of memory and storytelling may be seen as an issue, the life-history approach does not view memory as an objective, passive representation of facts, but an active process of generating meanings (Portelli, 1997). The strength of the life-history approach is therefore in its focus on how memory has been constructed in a specific way (White et al., 2010). It is important to consider that the life stories of women in this study may not represent all life stories of women who have experienced IPV in South Africa. However, the aim of the study is not to generalise the findings to a broader population (White et al., 2010).

## Subjectivity, power dynamics and the need for reflexivity

It is crucial for myself, as the researcher, to recognise that I played an active role in each women's experience of storytelling, as my presence may have shaped what was shared during the interviews (Ackerly & True, 2010; Palaganas, Sanchez, Molintas, & Caricativo, 2017). Firstly, I entered the interview space with an intersectional feminist understanding that IPV stems from interconnecting social, political oppressions, and thus my position was not neutral. Although I did not disclose my position in the research, the women who took part in the study knew that I was interested in their life stories in relation to IPV. This may explain why many of their stories contained accounts of exploitation and violence.

Secondly, my societal position as a white, middle-class researcher potentially created a power imbalance between myself and the women, influencing how much was shared during the interview. To minimise this, I emphasised that my role was to learn from them, and that the information shared is decided upon by the women, to enable them to exercise power in their own way (Riessman, 2008; White et al., 2010). However, there was still evidence of power imbalances affecting what was shared. For example, although most of the women were marginalised by race, class and gender, the topic of race in particular was seldom brought up in the interviews. The only time it was brought up explicitly was when one woman, Nina, was describing the area that St. Anne's Home was situated: "This is the white people's area, you know. I don't want to offend you". My response to this was to quickly interject and make clear that I was not offended by her statement, however, Nina moved on abruptly and continued with her story. This reflected that Nina may have potentially felt uncomfortable discussing the topic of race during the interviews. My societal position also meant that I had a lack of shared experiences with the women, which would have affected my ability to fully understand their experiences. The fact that I could not put myself fully in their shoes does not mean that the researcher should forfeit the research process, but rather means that the researcher should be reflexive throughout in order to be aware of the above concerns.

# Life-history biographical sketch

Given the limited scope of this project, a full and comprehensive biography of each woman's life history is not possible. However, a brief biographical sketch of all of the women preceding the analysis will at least provide an idea of their life history. The first woman I interviewed was Caliene, who identified herself as white, aged 39, and shared that she grew up in a privileged, middle-class home with two older brothers. Her parents remained together throughout her life; however, she often described the atmosphere in her house as tense during childhood and adolescence, due to her parents frequently fighting and her mother being addicted to alcohol. She married a man with whom she had one child, but divorced him and then entered into a relationship with her current partner who became abusive towards her. Caliene disclosed that she has suffered from mental illness throughout her life, but is determined to write a book about her story to inspire others.

Thembi, who identified as African, aged 26, shared that most of her childhood and adolescence was spent in boarding school, which she enjoyed as the school gave her more freedom than her parents. Her biological parents separated when she was young, and both remarried soon after. She often felt neglected by her biological parents while at boarding school, because they were not present during important school moments. Furthermore, because she was not given money to spend with her school friends during weekends, she felt the need to pretend that she was wealthy in order to be accepted. She also described various experiences with teachers, some of whom provided support and others who abused their power in order to convince her to sleep with them. In her adulthood, she became a sex worker and was financially and emotionally abused by her partner whose role at the time (as she described) involved managing her sex work. Thembi has future aspirations of inspiring other women in her situation through creative means.

Maria, who identified as coloured, aged 46, grew up in on a rural farm, and described financial difficulties throughout her life. She has been married to her partner for 22 years, who she described as frequently abusive towards her throughout the marriage. She has five biological children. Although Maria grew up without parents and was raised by her grandparents, she describes her childhood fondly, particularly when describing her relationship with nature. She attended school up until Grade 4, and was forced to skip Grades 5-8 due to her grandparents passing away. Determinedly, she moved straight into grade 9 and eventually matriculated, despite having to spend most of her schooling years working and moving from home to home. Maria presented herself as zealous and described life goals of helping other women who have experienced IPV and possibly opening up a restaurant.

Nina identified herself as coloured, aged 26, and shared that she grew up in a township. From childhood to adulthood, Nina experienced financial hardship. She was particularly emotional when describing her childhood, sharing that she grew up with foster parents who were pleasant to her, but did not feel like a real family. Nina has never met her biological father but said that she knew her biological mother, who often neglected her and made her feel unwanted as a child. She disclosed that her biological mother was often in abusive relationships. Although she has two siblings, she describes her relationship with her older brother particularly fondly, as he played a role in looking after her during difficult times in her childhood. Despite her hardships, Nina presented herself as a strong woman and often mentioned that she was determined to move on from her past struggles.

Sadie identified as a coloured woman aged 23, who has two children whom she has been raising without the support of her partner. Sadie described that her relationship with her partner went well up until he became involved in drugs and gangsterism, which resulted in his imprisonment while she was pregnant with their first child. Sadie's biological mother has been addicted to drugs throughout her life, although Sadie often shared having a close

relationship with her. She grew up with three siblings whom she is still close with, was mostly raised by her grandmother and only met her biological father on a few occasions. She felt mixed emotions when describing her schooling years, which involved receiving awards that empowered her and being bullied by other children.

Finally, Isabelle identified herself as coloured, aged 34, and experienced financial hardship throughout her life. She was raised by her biological mother, and had a stepfather who was physically abusive towards her during her childhood. She disliked school because she could not afford the school uniform, and felt ashamed at having to arrive at school with bruises from her stepfather. She often ran away from home to live with friends, and became addicted to drugs during adulthood. For some years, she worked as a sex worker and was abused by her partner, who was initially one of her clients. She was forced to live on the street during her pregnancy, as her partner refused to support her. She has since attended drug rehabilitation, works full-time to support her child and is positive about her future.

#### **Analysis and Discussion**

Politicising IPV against women is a crucial intersectional approach for transforming the way we understand women's experiences, and this involves recognising the broader domains that discriminate and oppress women as a class (Crenshaw, 1991). This project focused on how women narrate their life stories, which includes the various forms of IPV they experience, and their life experiences from childhood to adulthood. These narratives helped uncover how these women negotiate their identities as women, partners and mothers, as well as the social, political and economic power-dynamics that emerge through their life stories. Three main themes emerged from the women's life stories, which included narratives of captivity and the economic control that male partners had over them, narratives of masculinity, power and violence, and narratives of strength and resilience. These themes

were evident, not only in the life stories of women in this study, but also in the way they narrated their experiences of IPV.

"That is the hold they have over you": Narrating captivity and economic control
In women's narratives about IPV in their relationships, the issue of economic power and
control played a crucial role in defining their narratives, and emerged as stories of 'captivity'
and 'dependence':

Maria: So, he was like, abusing me and all of that with his friends. He was abusing me financially, physically, verbally. So then at that stage I decided, okay, I am gonna go, I am gonna leave him, (...)<sup>4</sup> then I didn't really want to go back, but because he had a house, he worked, he was giving me money for my groceries and stuff like that. I feel secure in that. (Interview 1)<sup>5</sup>

Lauren (Interviewer): So this is your husband who is still providing?

Maria: Mm. This is my husband. (...) That is the hold that they [men]<sup>6</sup> have over you.

Because you will have to go back and ask for money for the children (...)

money for this and I don't want to do that anymore (...) I hate money. Because why, money is keeping me captive. I can't break away from you [Maria's husband] because of my children. I need you in my life to support my kids. (...)

I really, really hate money (...) because that is another way of keeping us captive, in our situations. (Interview 1)

Maria's narrative of captivity reveals that despite her desire to leave the abusive relationship; her socioeconomic status and lack of access to material resources hindered her ability to do so. She portrays her dependence on her partner as a consequence of the

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<sup>&</sup>lt;sup>4</sup> Rounded brackets enclosing an ellipsis indicates that text has been omitted in order to keep the meaning of the extract clear.

<sup>&</sup>lt;sup>5</sup> Round brackets enclosing 'Interview 1' indicates that the extract was taken from the first interview, which focused on the women's experiences of IPV.

<sup>&</sup>lt;sup>6</sup> Speech in square brackets following a pronoun specifies whom the participant is referring to.

economic, symbolic and institutional power her partner has over her, and sees it as a form of degradation (Sibanda-Moyo et al., 2017). When articulating her frustration at having financial dependence on her partner, she is reflecting the narrative of psychological captivity, where women feel trapped because of feelings of powerlessness (Boonzaier, 2014). The life-history approach was useful in revealing how economic barriers affect women's identity constructions, as Maria described that her partner's economic power hindered her ability to be a supportive mother to her children. When reflecting on her identity as a mother, Maria later says later in the interview that "the one thing that fails me, that I didn't do right, was to protect my children" (Interview 1), which again shows the internal, psychological consequences of external barriers for mothers. Maria's situation reflects the economic barriers that hinder many South African black women's ability to seek alternatives to abusive relationships and supports the notion that women's subordinate role and identity is maintained and reinforced by the unequal distributions of power and material wealth in South Africa (Sibanda-Moyo et al., 2017). (Boonzaier & van Schalkwyk, 2011; Crenshaw, 1991). Poverty, especially when tied to racial, gender oppression, makes it difficult for black women to create positive social identities, which increases their chances of internalising shame and refusing to seek help (Boonzaier & van Schalkwyk, 2011). In Maria's biography we see that she faced financial hardship throughout her life, thus the life-history method reveals that poverty and marginalisation continues across generations. Therefore, adopting an intersectional, life-history approach reveals the political, economic barriers that exist in women's lives, and allows for the contextualisation of their narratives, identities and experiences of IPV.

In discussions on economic barriers in women's lives, the life-history method allowed for a holistic exploration of women's experiences of IPV, because it allowed each woman to

recall childhood, adolescent and adulthood memories. For example, Nina revealed that poverty was not only pervasive during her adulthood, but from as early as childhood:

Nina: Sometimes we would end up not having any food to eat. And he [Nina's older brother] will be asking people on the street for me to eat. He will make a way, you know. (Interview 2)<sup>7</sup>

Nina then describes how poverty affected her schooling during adolescence:

Nina: I think not getting an education really affected me big time, because I needed to support myself and my family isn't rich. They could not pay for me to go to college or university (...) If you don't work, you cannot go ask "Can I have a cup of sugar?" to your neighbour because they wouldn't have it (...) because those people they are also struggling like you. (Interview 2)

Nina's narrative supports previous life-history studies on IPV, which have found that women often refer to their family and childhood backgrounds in order to explain the cycle of IPV (Sibanda-Moyo et al., 2017). More importantly, however, Nina's life story again reveals how poverty and marginalisation in South Africa continues across generations, and that the oppressions experienced during apartheid have ongoing effects into the present (Jewkes, 2002). South African literature supports the finding that the repercussions of IPV are suffered the most by poor, black women, who are also affected disproportionately by IPV (Boonzaier & van Schalkwyk, 2011; Slabbert, 2016). This is because poverty affects a host of other experiences such as access to quality education, healthcare, ability to provide for children and access to alternative housing, all of which contribute to women feeling captive in their situations (Jewkes, 2002; Slabbert, 2016). Nina reveals later that her partner relieved her of poverty "because he was always providing, he would always make sure that I ate" (Interview

<sup>&</sup>lt;sup>7</sup> Round brackets enclosing 'Interview 2' indicates that the extract was taken from the second interview, which focused on the life history of women from childhood to adulthood.

1), which again reveals the economic power that male partners sometimes have in abusive relationships. Additionally, as Nina's second extract reveals, black women are less able to rely on community members, friends and family for support in seeking alternatives to abusive relationships when their communities are poor (Boonzaier, 2014; Boonzaier & de la Rey, 2003). Thus, intersectional and life-history approaches play important roles in recognising that these imbalances in economic control between men and women are at a societal level, and are reinforced when these political factors prevent women's equal participation in social, economic systems (Sibanda-Moyo et al., 2017).

# "As a woman, you must know your place": Narrating masculinity and violence

As a result of South Africa's history of apartheid, violence has become widely tolerated and normalised as a means of communication and conflict resolution (Jewkes, 2002; Kehler, 2001). This is combined with the entrenched beliefs that people hold about masculinity and femininity, particularly in intimate relationships (Sibanda-Moyo et al., 2017). In South Africa, as has been found in the literature, masculinity is often associated with authority and violence, while femininity is associated with subordination (Boonzaier, 2008; Boonzaier, 2014; Jewkes, Sikweyiya, Morrell, & Dunkle, 2011; Kehler, 2001; van Niekerk & Boonzaier, 2015). Many of the women's narratives reflected this by speaking to the issue of masculinity, power and violence in their lives:

Maria: When you have a relationship okay, it becomes a normal society for a man to beat up a woman (...) because while we were growing up we had seen all of this which was happening. We take it at face value that it should just be like that. (...) We become so dependent that abuse make us think it is the right thing to do for man to treat us that way (...) because why, we have this thing, "Oh but he is my man." No man, God did not make us that way. (Interview 1)

In Maria's account, she draws on the identities and roles of men and women, with the term 'man' being associated with socially constructed meanings of violence and authority, and the term 'woman' being construed as subservient. Maria's depiction of her identity as a woman and partner reproduces dominant constructions of masculinity and femininity, particularly in the phrase "Oh but he is my man" (Boonzaier & de la Rey, 2003; van Niekerk & Boonzaier, 2015). These meanings of what it means to be a 'woman' were often enforced during childhood as another woman, Caliene, shared that "they [Caliene's Father and older brothers] abused me in a way as well and it's like, a woman must, you know, you had to know your place" (Interview 2). Importantly, these gender norms are accompanied by the belief that women's roles and identities hold less value than men's, serving to justify IPV against women (Jewkes et al., 2011; Kehler, 2001). Caliene and Maria's accounts reflect relationships embedded with power imbalances, and thus reveal how patriarchal systems of domination work to control and disempower South African women through abuse and violence (Crenshaw, 1991; Jewkes, 2002; CSVR, 2016). This is evident in other literature on gender power relations and IPV (Boonzaier & de la Rey, 2003; Mathews et al., 2015; Stern, Cooper, & Greenbaum, 2014). At the end of Maria's account, she also resists these dominant gender discourses by being conscious of how her childhood experiences led her to believe that it was right for her partner to abuse her, and thus argues that "No man, God did not make us in this way". Through problematizing the issue of IPV against women, we see women adopting a more critical social consciousness of gender inequality (Boonzaier, 2014), which is an important goal of intersectionality.

The life-history method allowed women to reflect on links between the past and present, as they portrayed how these constructions occurred whilst growing up, and influenced the way they narrated their identities and experiences of IPV. Combining the life-history method with an intersectionality framework places women's life histories and

experiences of IPV at the forefront of analysis. By allowing them to share their stories, which involves going through a process of reflecting on past identities, they are given the opportunity to construct familiar or new identities in relation to their experiences of IPV and their relationship to others (Boonzaier, 2014). Sharing their stories also gives them the opportunity to restore their agency which can be empowering (Boonzaier, 2014).

# "You know I am a strong woman": Narrating strength and resilience

While dominant constructions of masculinity and femininity remain evident in these women's life stories, they also narrated their identities as strong, resilient women:

Isabelle: I used to cry, I don't cry anymore because I'm over that stage already. (...) I've learned to live with everything. Ja and move forward and ja, it's a lot that happened.

(Interview 2)

This became especially evident when women were asked how they might help other women in similar situations:

Nina: All the women out there, I need you to be strong. Get your voice back. Don't be so scared of life thinking that you can't make it, because you can. Men think they have control of our lives but they don't. So you as a woman, me myself and I have learnt to stand up on my own feet, you know. I don't want to depend on anyone ever again (...) You know I am strong woman, you know, I am very strong. (Interview 2)

Like Nina and Isabelle, the women in the study often positioned themselves at the centre of their stories of strength and resilience, by using active voice and present tense to empower their identities. Resilience often involves the ability to make subjective meaning out of painful experiences (Gordon, 2017; Kennedy, 2005). In Nina's account of resilience, she emphasises the need to draw on inner strength, whilst also resisting the broader, gendered discourses that enable men to have control over women's lives. Although drawing on

individual strength, Nina also fosters community resilience, by encouraging other women in similar situations to draw on inner strength, like her. The life-history method allowed other women to reflect on the role of resilience in childhood, and how it influenced their ability to foster resilience in adulthood, as Thembi shares "I can manage that pain, I have been through pain since I was young (...) we go through a lot and we manage" (Interview 2). Thembi's account also draws on both individual and community resilience, as she shifts from the pronoun 'I' to 'we', in order to reflect women's pain as a common fate in society rather than a personal struggle (Theron, 2016). Focusing on individual resilience may be problematic because it socialises women to endure and cope through challenges in abusive relationships, rather than complain (Gordon, 2017). However, given the lack of social, political and economic resources available to them, individual resilience becomes a survival mechanism (Gordon, 2017).

While the above narratives involved women centring themselves in their stories of resilience, other women also drew on strength from other female figures, particularly grandmothers:

Sadie: So bless, she [Sadie's grandmother] was a mother. She was the pillar (...) and she was also hurt and broken in her life but she was still standing strong for us (...) and look, she made me a strong woman. (...) For everything I have been through in my childhood as a teenager, as a toddler, everything, I am still standing strong. (Interview 2)

The life-history method allowed Sadie to reflect on important past relationships, and how they have shaped the way she narrates her identity as a 'strong' woman today. Her portrayal of her grandmother as someone who has also been 'broken' in her life but is still strong, reflects the intergenerational resilience that exists in women's lives, and the active role women play in fostering resilience in their children (Gordon, 2017; Theron, 2016).

Sadie's portrayal of her grandmother as a 'mother', reflects patriarchal discourses of motherhood and femininity as selfless nurturance and sacrifice for the sake of the family (Boonzaier, 2014). However, reflecting on the role of the mother as the 'pillar' is a form of resistance, as it subverts the traditional discourse of the father figure being the protector. Additionally, presenting a narrative of 'strong' women and mothers also serves to reduce the shame and stigma associated with the identity of "abused woman" (Boonzaier, 2014, p. 208). It is important for intersectional approaches not to idealise resistance as the dismantling of gender ideologies, but rather to allow women to negotiate their own resistance based on the resources available to them (Boonzaier, 2014). Furthermore, the life-history method allowed women to play an active role in constructing their identities and experiences, which may have prevented them from being confined to the dominant, patriarchal discourses of womanhood and motherhood.

# **Summary and conclusion**

The life-history method combined with intersectionality theory allowed women to provide holistic accounts of their life stories, linking personal, daily experiences with political factors that act against their agency and freedom (Sosulski et al., 2010). Importantly, the findings of this research do not reflect the experiences and life histories of all South African women, however, they do provide more contextualised understandings of women's experiences of IPV. The following narratives emerged in women's life stories about their identities and experiences of IPV: 1) Narratives of captivity and economic control, 2) Narratives of masculinity and violence, and 3) Narratives of strength and resilience. Analysis of these narratives using an intersectional framework and the life-history method demonstrated overlaps with previous literature, and offered new insights in the area.

The findings suggested that as a result of the patriarchal system of apartheid, men often have economic control over women in abusive relationships, which resulted in literal

captivity, as women did not have the means to seek alternatives, and psychological captivity, due to internalising shame and stigma. The life-history method also revealed that poverty was pervasive throughout the life-course, showing that marginalisation in South Africa continues across generations, and that the oppressions experienced during apartheid have ongoing effects into the present. Furthermore, there appear to be dominant discourses of masculinity and femininity in the narratives of women who have experienced IPV, as the term 'man' was associated with socially constructed meanings of violence and authority, and the term 'woman' with subservience. Importantly, these gender norms are accompanied by the belief that women's roles and identities are hold less value than men's, serving to justify IPV against women (Jewkes et al., 2011; Kehler, 2001). However, by placing women at the forefront of their own narratives, the life-history method allowed women to reflect and problematize these dominant, gender discourses, which enabled them to develop a more critical social consciousness of gender inequality. This is an important goal of intersectionality.

Finally, women also narrated stories of strength and resilience, often positioning themselves at the centre by using active voice and present tense to empower their identities. While emphasising the need to draw on inner strength, women also resisted the broader, gendered discourses that enable men to have control over their lives. They also fostered community resilience, by encouraging strength in other women. Women also reflected on the important relationships from female figures from their past, and how these relationships shaped the way they narrates their identities as mothers and 'pillars'. This reflects the intergenerational resilience that exist in women's lives, and active role women play in fostering resilience in their children. However, despite the benefits of fostering resilience, relying solely on individual strength is not enough without adequate social structures that support long-term recovery and social change (Gordon, 2017).

Intersectionality allows us to recognise that these life histories are not only personal, but political, and thus adopting a political discourse that serves to empower women is necessary. Thus, findings suggest that policies which aim to address the interconnected systems of oppression in South Africa that result in racial, gender and economic inequalities should be prioritised.

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# Appendices

# **Appendix A: Demographic form given to participants**

# PARTICIPANT DEMOGRAPHIC INFORMATION

# A. Basic information

A1. Date of birth					
A.2 Racial group	African	White	Coloured	Indian	Other
	L	l	1	l	
A.3 Area of residence	e				_
A.4 How long have y	ou been at [in.	sert organisa	tion name here	]?	
B. Education a	nd employme	<u>nt</u>			
B.1 The highest level	/grade of educ	ation that you	ı have complet	ed:	
No schooling					
Primary School					
High school (specify	y grade)				
Standard 10/Matric					
	) a compation of C	lantificates/Di	nlomo/Doomoo	<u> </u>	
Higher education (C		ertificates/Di	pioma/Degree)	)	
Other:					
B.2 How would you	describe your	present emplo	oyment situation	on?	
Student					
Unemployed					
Self-employed					

Employed part time (less than 40 hours per week)			
Employed full time (40 hours or more per week)			
Pensioner			
Sick/disabled and unable to work			
No response			
Other, specify:			

# C. Socio-economic status and household composition

# C.1 Which statement best describes your household situation?

a	Not enough money for basics like food and clothes	1
b	Have money for food and clothes, but short on many other things	2
С	We have most of the important things, but few luxury goods	3
d	Some money for extra things such as going away for holidays and luxury goods	4
e	Don't know	5
f	No response	6

# C.2 What is the main source of your household income?

a	Formal salary/earnings	1
b	Contributions by <b>adult</b> family members or relatives	2
С	Contributions by <b>younger</b> family members or relatives (<18 years)	3
d	Government pensions/Grants (e.g. pension, disability grant)	4
e	Grants/Donations by private welfare organizations	5
f	Other (specify main source):	6
g	No income	7

C.3 How many people live in your household?				
D. Relationship status	and family inforn	<u>nation</u>		
D.1. What is your current rel	ationship status?			
Single				
Married				
Cohabiting/living together,	not married			
Partner, not living together,	not married			
Other:				
D.2. If married or in a relat	t <b>ionship</b> , how man	ny <b>months/ye</b>	ars have you been with your	
current partner?				
D.3 <b>In months</b> , what is the le	ongest relationship	o/marriage yo	u have been in?	
D.4 Do you have any childre	n and/or non-biolo	gical childre	n you are caring for?	
Yes	No			
1 2				
D.5 How many children are	you caring for? (en	nter amount w	here relevant)	
a. Biological children				
b. Non-biological children (specify)				
D.6 Do you have any other	er dependents (e.g.	caring for pa	rents)?	

Yes	No
1	2

D.7	If yes, how many other dependants do you have?

Appendix B: Demographic table of women who participated in the study

Participan	Age	Racial	Level of	Employment	Relationshi	Dependent
t	(years	Group	education	status;	p status	S
	)			Socioeconomi	(duration in	
				c status	years)	
Caliene	39	White	University	Unemployed;	Partner, not	1 child
			degree	Not enough	living	
				money for	together,	
				basics	not married	
					(2 years)	
Thembi	26	Black	Grade 11	Employed	Partner, not	1 child
				part-time; Not	living	
				enough money	together,	
				for basics	not married	
					(4 years)	
Maria	46	Coloure	Grade 1-3 +	Unemployed;	Married;	6 children
		d	Grade 9-11	Not enough	getting a	- 5
			+	money for	divorce (22	biological,
			Entrepreneu	basics	years)	1 non-
			r short			biological
			course			
Nina	26	Coloure	Grade 11	Employed	Single;	1 child
		d		part-time; Not	Most recent	

				enough money	relationship	
				for basics	(4 years)	
Sadie	23	Coloure	Grade 12	Unemployed;	Partner, not	2 children
		d		Not enough	living	
				money for	together,	
				basics	not married	
					(6 years)	
Isabelle	34	Coloure	Grade 10 +	Student;	Single;	1 child
		d	Carers	Unemployed;	Most recent	
			course	Not enough	relationship	
				money for	(5 years)	
				basics		

### **Appendix C: Interview schedule**

**First interview:** This interview focused on women's experience(s) of IPV and how they ended up at St. Anne's Home.

- How long have you been staying at St. Anne's Home?
- Can you tell me more about how you ended up at St. Anne's Home?
- Can you tell me about your relationship with your recent/current partner, from when you first met?
- When did things start to change in your relationship?
- What kinds of abuse would you say you experienced at the hands of your partner?
  - Can you tell me more about that?
- How do you generally feel about this relationship?
- Have you been in any other relationships where you had similar experiences of abuse?
  - When?
  - For how long?
  - How did they end?
- Have you ever discussed your problems with anyone (friends, family, anyone else in your community?
  - How did they respond?
- Was there more that you would have liked your community to do?
- Looking back at your situation, what advice would you give to another woman who
  may be faced with similar issues with their partner?
- What has it been like living at the shelter?

**Second Interview:** This interview focused on the life history of women living at St. Anne's Home, from childhood to adulthood. *Note:* Although the interview begins with childhood, the order of questions was determined by the participants' responses.

#### **CHILDHOOD:**

- Can you tell me about your childhood?
  - Where did you grow up?
  - What was it like living there?
- Can you tell me about the family you grew up with?
  - Who did you live with?
  - What was your relationship like with the people you lived with?
- Did you face any abuse/violence in your childhood?
- What can you tell me about your primary school years?

#### **TEENAGE YEARS:**

- Can you tell me about your teenage years, from age 13 until 18?
  - Where did you live?
  - Who did you live with during that time?
  - What was it like living there?
- What was your relationship like with the people you lived with?
- What can you tell me about your high school years?
- What are some key moments in your life when you were a teenager?
- What do you know about your parents' lives?
- What have they told you about their history?

#### **ADULTHOOD:**

- Can you tell me about your adult life, from age 18 up until now?
  - Where did you live?
  - Who do you live with now?
  - What is it like living there?
- What is your relationship like with the people you live with?

- Can you tell me about any other important relationships you have?
- Can you describe a typical day in your life?
- What are some of the most difficult things you can remember from your life?
  - When did they happen?
  - How did they affect your well-being/ that of your family?
- What are some of the best times you can remember from your life?
- How would you describe your life now?

## Appendix D: Ethics letter of approval

UNIVERSITY OF CAPE TOWN



Department of Psychology Research Ethics Committee Rondebosch, 7701 Tel: 27 21 6504607 Fax: 27 21 6504104 E-mail: Lauren.Wild@uct.ac.za

29 July 2016

REFERENCE NUMBER: PSY2016-039

Researcher Name: Floretta Boonzaier and Taryn van Niekerk

Researcher Address: Department of Psychology, University of Cape Town

Dear A/Prof. Boonzaier and Dr van Niekerk

PROJECT TITLE: Mapping community responses to intimate partner violence in South Africa

Thank you for your submission to the Department of Psychology Research Ethics Committee.

It is a pleasure to inform you that the Committee has granted approval for you to conduct the study.

Please note that the ongoing ethical conduct of the study remains the responsibility of the principal investigator.

Please quote your REFERENCE NUMBER in all your correspondence.

Yours sincerely

Lauren Wild

Hould

Acting Chair, Department of Psychology Research Ethics Committee

# Appendix E: Information sheet for women who have experienced intimate partner violence

#### UNIVERSITY OF CAPE TOWN



Department of Psychology

## Stories about your life and violence against women

You are invited to take part in a research study about violence against women.

If you decide to take part in this study, you will be asked to do the following:

- A one-on-one interview about your stories of violence against women.
- A second one-on-one interview about your life stories from childhood to adulthood.

This research will give you an opportunity to share your stories and experiences to improve our understandings of partner violence.

Any questions, concerns or complaints about the study?

#### Please contact:

**Researchers:** Lauren Pechey on <a href="mailto:pchlau003@myuct.ac.za">pchlau003@myuct.ac.za</a> OR Rene Chikwira on <a href="mailto:chkren002@myuct.ac.za">chkren002@myuct.ac.za</a>

OR

Chair of the Ethics Committee: Rosalind Adams on 021 650 3417 or email at Rosalind.Adams@uct.ac.za

# Appendix F: Informed Consent form for women who have experienced partner violence UNIVERSITY OF CAPE TOWN



## Department of Psychology

## Stories about your life and violence against women

#### 1. Invitation and purpose

You are invited to take part in a research study about violence against women. I am a researcher from the Department of Psychology at the University of Cape Town.

#### 2. Procedures

If you decide to take part in this study, I will ask you to do two face-to-face interviews with me. The first interview will focus on your experiences of partner violence. The second interview will focus on your life story from childhood to adulthood. Both interviews will take no longer than 60 minutes each.

#### 3. Inconveniences

The interviews will be conducted at the organisation you attend. The most convenient time for you and the researcher will be arranged. The only inconvenience you may experience is having to give up some of your time.

### 4. Benefits and Risks

You are given an opportunity to share your views and stories and your information will contribute to the larger purpose of understanding violence against women. You may experience feelings of distress during or after the interview, however you will be provided with counselling services should you be in need of them. If at any point of the interview you feel anxious or distressed, you can choose to stop at any point without any negative consequences. You will be given a grocery voucher as a token of gratitude for your time.

## 5. Privacy and confidentiality

The interviews will be tape-recorded. The researcher will take strict precautions to safeguard your personal information throughout the study. Your information will be kept in a locked file cabinet without your name and other personal identifiers. Once the study is complete, your tape-recorded information will be stored for a further 5 years and after this period it will be destroyed.

While this research will be used for educational purposes, there is a chance that this work might be published in an academic journal. In this case, your identity will still be kept anonymous. Interviews will be conducted in a private room to ensure confidentiality.

#### 6. Contact details

If you have questions, concerns or complaints about the study, please contact the Researchers: Lauren Pechey on +27607818159 or email at pchlau003@myuct.ac.za OR Rene Chikwira on chkren002@myuct.ac.za

OR Chair of the Ethics Committee: Rosalind Adams on 021 650 3417 or email at Rosalind.Adams@uct.ac.za

#### 7. Signatures

Researcher's Signature	Date
answered to the best of the researcher's ability	y.
performance. He/she has been given time to a	sk any questions and these questions have been
nature and purpose of the procedures describe	ed above including any risks involved in it
(Participant's name)	has been informed of the

#### Researcher's Signature

I have been informed about this research study and understand its purpose, possible benefits, risks, and inconveniences. I agree to take part in this research as a participant. I know that I

am free to withdraw this consent and quit t	this project at any time, and that doing so will not
cause me any penalty.	
Participant's Signature	Date
PERMISSION TO TA	APE-RECORD INTERVIEWS
I understand that the interview will be tap	pe-recorded and that the researcher will take strict
precautions to safeguard my per	rsonal information throughout the study.
Particip	pant's Signature

## ORGANISATIONS OFFERING HELP FOR WOMEN WHO HAVE EXPERIENCED

#### DOMESTIC VIOLENCE

• Saartjie Baartman Centre for Women and Children:

Manenberg: +27 21 633 5287 or visit <a href="http://www.saartjiebaartmancentre.org.za/">http://www.saartjiebaartmancentre.org.za/</a>

- Lifeline Western Cape crisis line: 021 461 1111 for telephonic counselling
- The National Institute for Crime Prevention and Reintegration of Offenders (NICRO):

Mitchell's Plain: 021 397 3782

Cape Town: 021 422 1690

Bellville: 021 944 3980 or visit their website on: www.nicro.org.za

• Family and Marriage Society of South Africa (FAMSA):

Observatory: 021 447 7951 or visit their website on: www.famsa.org.za

• Mosaic Training, Service and Healing Centre for Women:

Wynberg: 021 761 7585 or visit their website on: www.mosaic.org.za