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Editorial

Heather Gridley
Victoria University, Melbourne, Australia

I want to tell everybody that family violence happens to everybody. No matter how nice your house is, how intelligent you are. It happens to anyone and everyone. (Rosie Batty, February 2014).

The first issue of the *Australian Community Psychologist* for 2016 is a special issue devoted to violence and gender. Contributions by practitioners and community activists as well as academics and researchers were invited. The major focus would be on feminist and/or community psychology frameworks relating to male violence against women in intimate relationships; however it was made clear that submissions on other aspects of gender and violence would be considered.

My offer to edit a special issue dedicated to gender and violence (or should that be violence and gender? – I was never quite sure) had two key motivations. First, there had never been a gender-focussed issue of ACP or of its parent publication *Network*, which dates back to 1984. Second, in 2015 it seemed that all Australia was talking about Domestic/Family Violence, a national conversation that had been triggered in part by the heroic work of Rosie Batty since her son Luke had been killed by his father when the boy was supposed to be safe in a public place at cricket practice. Less than twelve months later, Batty was named Australian of the Year and the momentum that had been accelerated, if not created, by her response to such horror was unstoppable.

Batty's words in the immediate aftermath of Luke's murder were gender neutral, but she has never left any doubt that family violence is primarily a problem of male violence against their female partners and children. And Batty has also been very clear that her voice is being heard because she's white, middle class and educated – and still alive. While it is certainly the case that "*family violence happens to everybody*", the perpetrator and victim statistics locally and globally are so disproportionate that it must be considered a gendered crime, and one that is supported by a range of historical and

cultural facilitators that play out in different ways across the world.

So how do community psychologists approach issues of violence and gender? How do our theoretical frameworks contribute to understanding gendered patterns of violence? In what ways are these frameworks informed by (or divergent from) feminist understandings of these phenomena? There are many directions that this special issue might have taken, in terms of the definitions of both gender (binary, non-binary or fluid?) and violence (individual, relational, structural, state-sanctioned...), and in terms of the chosen lens (theoretical, cultural, empirical, practice-based, lived experience, public policy ...).

The eight papers that have been recommended by the panel of reviewers for inclusion cannot address all possible aspects of gender and violence. But taken together, they draw attention to particularly salient issues for men who use violence, children whose mothers have experienced intimate partner violence, and women recovering from such violence. They also highlight the responsibility for, collusion in, and sometimes perpetration of, gender-based violence by nation states and governments, predominantly in Australian and Aotearoa/New Zealand contexts, but also in places like Palestine and Italy.

The special issue begins with two papers that examine problematic constructions of masculinity from the perspectives of three men with histories of violent behaviour. In the first paper (Lorigan, Snell & Robertson, 2016), a photo and three autoethnographic narratives are analysed in terms of the first author's first-time experiences with violence, drugs, and sex as part of his initiation over several years into a hyper-masculine motorcycle gang culture. In the second paper (Mowat, Coombes & Busch, 2016), interviews with two men convicted of child sexual offences focus on their experiences of power and powerlessness, and the discursive resources available to them that influenced their masculine identities, practices, and subsequent offending. In interrogating masculinity as a set

of socially determined practices, both of these papers illustrate possibilities for prevention of future violence in the ways they foreground men who have previously used violence reflecting on how their community contexts confirmed and constrained their understandings of what it means to 'be a man'.

The next three papers turn attention to women's experiences of intimate partner violence, and the implications of those experiences for their children. O'Brien (2016) reports on an in-house evaluation of a community program designed to assist women in recovery from domestic violence using volunteer mentoring as a model of support. The program discussed is an innovative and direct response to largely unmet community need, and the internal evaluation goes beyond what most community programs would undertake without an external or funded evaluation.

The two papers that focus on the needs and rights of children impacted by family violence complement each other in several ways. The paper by Morgan and Coombes (2016) draws on findings from a wider research project in Aotearoa/New Zealand to highlight some of the tensions and contradictions that confront mothers navigating the legal system in their efforts to escape intimate partner violence and protect their children from its effects. Their focus is on how the women made sense of their responsibilities for protecting their children at different times during their relationship, and how the meaning of protecting their children changed as they engaged with court processes and advocacy services. Stainton (2016) observes that children have not always been seen as direct victims of violence perpetrated against their mothers, nor have they typically been treated as refuge clients in their own right. Stainton draws on this practice-based evidence to document the development of a set of Good Practice Guidelines aimed at cultural change to ensure that children's needs are met while residing in Western Australian refuges.

The last three papers in this special issue each take a particular meta perspective on gender and violence. Hayes (2016) positions state-sanctioned reproductive coercion as a gendered form of violence, and reviews the historical role of the Australian state in seeking

to limit the reproductive autonomy of Aboriginal and Torres Strait Islander women, women with disabilities, and young women in state care. She presents a powerful argument that Australia's policies of offshore detention severely constrain the reproductive 'choices' of asylum seeker women detained, and as such, now represent the next chapter in this shameful history of gender-based violence at a nation state level.

Guidi, Magnatta, Guazzini and Meringolo (2016) provide an overview of prevalence and patterns of intimate partner sexual violence (IPSV) in Italy, as compared with findings from other European countries and elsewhere in the world. IPSV appears to 'fall between two stools', receiving less attention than either sexual violence perpetrated by non-partners, or intimate partner violence of other kinds, such as physical and emotional abuse – despite evidence that intimate partners are responsible for a third of sexual assaults, and that sexual assault is both physical and emotional violence. Particular cultural risk factors for IPSV in Italy appear to include enduring gender stereotypes that induce women to accept a certain degree of violence and unwanted sex as 'a wife's duty'.

Similar cultural constraints in a very different context are cited by Saredidine (2016), who draws on Foucault's theory of Panopticism as a way of conceptualising the oppression and self-surveillance of Palestinian women through the narratives and oral history that emerged in the aftermath of the 1948 Nakba as a form of resistance to the dominant narratives of the imposed state of Israel. A consequence of this idealisation of pre-Nakba Palestinian society has been the actual and metaphorical confinement of women to the traditional roles of peasant women that operated seventy years ago, and the suppression of their voices to such an extent that external surveillance and active regulation on the part of the state are not required.

Each of these last three papers bears witness in its own way to aspects of Saredidine's (2016) conclusion that:

... violence and discrimination against women are not always personal (i.e. inflicted on a single woman at a point in time), but can

be applicable to an entire class or community of women; that violence against women is not always physical or psychological, but can be subtle and inflicted as a lack of right and privilege; and that such subtle violence against women can be so ingrained in a specific culture that it is hardly recognised as such. (p. 124)

Violence against women is as public as the policing of women's swimwear on a French beach and as private as the family home. As such it is one of the most pervasive yet least acknowledged human rights abuses throughout the world. The aim of this special issue was to trouble some of the gendered operations of power that lead to such disproportionate patterns in the use and experience of violence. There could have been considerations of violence in same-sex relationships, abuses of power by women, a stronger focus on policy and prevention, or of cultural-historical alternatives to gendered practices that have become almost universally normalised and reified, as Dobash and Dobash (1979) observed:

It was impossible to find any historical period in which there were no formulae ... specifying the conditions under which a wife was deserving of a good clout. (p. 31)

But, in the words of Judy Small's poignant anthem to the victims of the 1989 Montreal massacre,

And all those other times came
flooding back to me again
A hundred news reports of men
killing family, strangers, friends
And yes I can remember one or two
where a woman's hand held the gun
But exceptions only prove the rule
and the questions still remain.

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Sex, drugs and smashing skulls: Violence, gender, and hyper-masculinity in a gang community of practice

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We examine how masculinity, specifically hyper-masculinity, is constructed from the perspective of a boy growing up within a white power motorcycle gang environment. One photo and three narratives are employed as the empirical material for analysis. The autoethnographic narratives are written in chronological order from ages 10-13 focusing on the first author's first time experiences with violence, drugs, and sex respectively. The gang is conceptualised as a community of practice. A thematic analysis identified three key themes: the importance of hyper-masculine rites of passage in this gang community of practice; violence and intimidation as a means to an end; and the objectification of women and their positioning as inferior to men and the use of sexual coercion. Taken together, these themes illustrate how a hyper-masculine identity is developed within this context. This study contributes to research and knowledge on hyper-masculinity in the specific context of motorcycle gangs in Aotearoa New Zealand.

It's the Sunday morning after a large gang party that has raged all weekend. A disoriented twelve year old boy slowly walks out into the dining area to the wide eyed amazement of the two men seated there. The men have scruffy hair and goatee beards and sport tattoos. They are dressed in black and display gang insignia, including swastikas. One, a renowned womaniser, wears a shirt bearing the slogan "Lust Never Sleeps" (see Figure 1.) He is astonished that the boy is still standing and awake after two solid days of drinking large amounts of alcohol and smoking marijuana. Despite being heavily intoxicated and extremely tired, the boy has passed a test. As a result, he has moved from doing the 'women's work' of looking after gang members, to being able to take part in the festivities like a real man.



Figure 1: Tony age 12 the morning after the party.

Gangs are a worldwide phenomenon (Gilbert, 2013; Grennan, 2000). In Aotearoa New Zealand they became particularly prevalent in the 1960s, having developed out of subcultural groupings inspired by American popular culture and social identities during the preceding decade. In particular, the formation of an Auckland Chapter of the Hells Angels, a notorious American motorcycle gang, marked the formation of gangs as distinct entities within the country and introduced key gang practices (such as back patches, to be explained later in this article) and hierarchical systems of power within gangs. Through these structures gangs maintained their longevity, with many gangs becoming particularly embedded in Aotearoa New Zealand towns and cities in the 1980s through collective enterprises, both legal and illegal, recreational and financial (Gilbert, 2003).

The photograph in Figure 1, along with narratives to be discussed later, illustrate a complex set of processes that revolve around hyper-masculinity, violence, drugs, and gender within a white power motorcycle gang. These are processes that Tony (the first author and the subject of Figure 1 above) experienced in his early years. Through his familial connections to a particular gang,

Tony grew up in a gang environment where violence brought status, power and access to resources. It was also an environment in which any expression of tender feelings or displays of vulnerability by either gender were deemed feminine and were therefore despised.

Eventually, Tony became a patched member of the gang. That is, through an extended initiation process as a 'prospect' (a prospective member) he was recognised as worthy of 'full' membership, a status communicated by wearing the gang's 'colours' or 'patch' (Fleischhaker, 2011; Gilbert, 2013). Tony is no longer a gang member and no longer shares this particular gang's antisocial views. However, having grown up in a gang environment and having been a patched member of the gang, Tony possesses a rare insider's perspective on these processes. The current article aims to draw upon this insider's perspective to investigate the development of a hyper-masculine identity within a particular community context. It investigates three significant experiences from Tony's early life (10-13 years of age) that he has selected due to their role in shaping his previously held hyper-masculine identity. These experiences are analysed and discussed to provide insight into issues of violence, drug abuse, and gender – with a particular focus on hyper-masculinity. *What Does It Take To Be A Hyper-masculine Man?*

The term masculinity is common in everyday language. However, individual and collective understandings of 'what it means to be a man' and how this is enacted in everyday life can vary (*cf.* Paechter, 2003). Rather than being determined by biological factors, masculinity is heavily influenced by culture and is intricately involved in the reproduction of power relations between men and between men and women (Connell, 2005; Edwards, 2006). Connell (2005) defines masculinity as arising through the enactment of certain cultural values such as being competent, being strong and standing up for one's beliefs. These values, which are commonly valorised in society, are associated with traditional notions of masculinity which dominate in many parts of the world

(Connell, 1998). Masculinity evolves from the relationship between men and the social and physical settings in which they engage (Bowker, 1998). The contemporary concept of masculinity reflects the fluidity of constantly changing and developing enactments in response to the situation in which a man finds himself (Paechter, 2003). Enactments of masculinity can include particular actions, decisions about appearance (such as clothing), and language (Silva, Botelho-Gomes, & Goellner, 2011).

Masculinity can be pro-social, with the bonds men make with other men providing a sense of support, recognition and reinforcement of familial obligations, and feeling part of a community (Hodgetts & Rua, 2010). However it is more commonly linked in literature to antisocial beliefs and actions such as aggression, extreme competitiveness, and sexual promiscuity (Roberts, 2012). This is referred to as hyper-masculinity or, in more everyday interactions, as 'macho'. Hyper-masculinity is "a gender-based ideology of exaggerated beliefs about what it is to be a man" (Voker, Tefft, & Tysiaczny, 2013, p. 562). In other words it is an extreme form of masculine identity consisting of beliefs and actions related to toughness, violence, risk-taking, and sexist attitudes toward women and physical intimacy (Zaitchik & Mosher, 1993). According to Zaitchik and Mosher (1993), hyper-masculinity is comprised of four inter-related components: (1) a callous attitude towards women and heterosexuality such that sex equates with male dominance over women; (2) a belief that violence is an acceptable expression of dominance over other men; (3) a belief that danger is exciting and survival in its presence is manly; and (4), a particular set of emotional practices such that self-control is to be prized, that anger is regarded as the most legitimate male emotion, and that other emotions such as sensitivity and empathy are seen as feminine and therefore to be treated with disdain. Combining these elements "reflect a [hyper-masculine] man's desire to appear powerful and to be dominant in interactions with men, women, and the environment" (Vokey, Tefft, & Tysiaczny, 2013, p.563). The enactment of such an ideology can have detrimental consequences

for women such as defined and rigid gender roles and the male's expectations regarding sex. Hyper-masculinity has been found to be directly related to increased violence against women (Parrot & Zeichner, 2003).

There are many practices that can be described as hyper-masculine (Vokey et al., 2013). The present study seeks to focus on three practices that were chosen due to their relationship with Zaitchik and Mosher's (1993) elements of hyper-masculinity. These are violence (as an acceptable expression of dominance over other men), drug use (a belief that danger is exciting and survival in its presence is manly), and sex (a callous attitude towards women where sex equates with male dominance). The fourth element (sensitivity is to be avoided) is threaded throughout the narratives, as young Tony attempts to make sense of the experiences as they are occurring when he is 10-13 years old. These practices are not solely enacted in gang communities. However, when combined, these elements represent men's desire to appear in control, powerful, and to be dominant in all social interactions with both genders, and also their environment (Mosher & Tomkins, 1988). These three practices were powerful contributors to Tony's early understanding of masculinity in a gang environment. Therefore, these specific choices of narrative topics are useful in examining the formation of a hyper-masculine identity. These understandings were subsequently challenged by Tony, and eventually led to him leaving the gang environment.

Gangs as Communities of Practice

Gangs can be conceptualised as communities of practice, in which people learn what it means to be a member through participating in communal activities. Communities of practice are those groupings where potential members learn the established rules or, in other words, the acceptable ways of knowing and performing specific tasks, duties, and other actions through observation and participation (Wenger, 1999). Through the process of becoming patched, gang members learn how to use intimidation and violence through what was done to them by others. They learn how other members expect

them to act in order to represent the gang. Members do this through acting aggressively, and symbolically represent this through embodied enactments of gang identity, for example through the patch on their backs, and some display tattoos with controversial symbols (e.g. swastikas). These symbols serve as a means to visually represent the hyper-masculine gang identity consisting of the four elements Zaitchik and Mosher (1993) identified. There are other groups and communities that can be defined as hyper-masculine. However, given the importance of representing the gang through symbolism via the patch and being able to deliver and sustain often vicious physical attacks, gangs provide particularly visible and violent manifestations of hyper-masculinity.

Gangs also consist of various levels of membership and acceptance, with a corresponding level of power and access to resources that other communities of practice often exhibit (*cf.* Merriam et al., 2003). For example a Chapter President has more power and benefits than a regular member. While there is a hierarchy for women, this operates more for them to differentiate themselves from one and another, and establishes who gang members can have sex with (for example a gang member cannot have sex with a woman who is a committed partner of another gang member). There is little opportunity for social mobility for a woman other than moving from 'hanger-on' to partner, at which point her partner's status may give her limited power in relation to other women. Gender roles are very clearly defined and enforced. Patched gang members attain status, power and access to resources unattainable by female associates. While this is not necessarily the case in all motorcycle gangs (see van den Eynde & Veno, 2007), in Tony's experience of this gang women, whether single or not, were always subservient to the men and used as cooks and cleaners, or if not with a gang member, used for sex.

In this article we examine the early experiences of a boy raised in a gang environment, in order to identify how his community membership led to a hyper-masculine identity. The article focuses on Tony as a young boy growing up in a white power motorcycle gang environment and his hyper-

masculine experiences of sex, drugs, and violence. Growing up in this environment, Tony learnt what the expectations of the gang were in relation to his gender identity within the gang, an identity that the gang expected him to maintain in order to represent the group. As a young man Tony learned this through observing others and through his interactions with existing patched members. Once he had successfully completed the initiation rituals of prospecting, Tony was guided by other gang members, albeit through violence, when he was 'corrected' (e.g. punched) by those higher in the hierarchy if he conducted himself incorrectly. Through participating in such practices in a communal environment, Tony developed a hyper-masculine identity. Although he has since distanced himself from such practices and reassessed his identity, the experiences mentioned above and elaborated below shed light on the development and characteristics of hyper-masculinity.

Method

This research is a selective auto-biography written retrospectively as an adult from the insider perspective of a boy who grew up in a motorcycle gang environment. We draw on aspects and techniques of auto-ethnography in order to provide insight into how a boy growing up in such an environment can come to consider hyper-masculinity as the preferred and acceptable identity to adopt within society.

In order to do this, three narratives, along with the photograph presented as Figure 1, are analysed to provide insight and context. These narratives are based on three critical incidents in Tony's life that are 'flashbulb' memories: first time experiences with violence against a person outside of Tony's family in a new town and school, unrestricted use of drugs and alcohol, and having sex. In each case, Tony has employed the 'heartful auto-ethnography' techniques described by Ellis (1999). This technique provided a way for him to describe and analyse the emotions, feelings, bodies, and spirits that these evocative stories created. Through this process Tony examined incidents from the perspective of personally lived experiences, as well as applying the auto-ethnographer's gaze

to theorise these experiences. Heartful auto-ethnography is described as a fusion between social science, literature, and the "living of life" (Ellis, 1999, p. 669). It provides a means to reveal social and cultural structures and influences from an authentic insider perspective. It also encourages compassion and empathy in the reader by providing a way of explaining concrete experiences and intimate details. While being a gang member does give access to resources such as alcohol, drugs, and money, as well as some level of social support or kinship (Gilbert, 2013), it is also a hard life that can take a serious toll on members. It can affect future relationships with other people that a gang member has even after leaving the gang.

Common criticisms of autoethnographic approaches focus on issues of generalisability from a single case. Concerns can also be raised in regards to the process of narrative selection – if the researcher is the topic of the narrative, there is the potential for the moments that have been selected to not have had the actual influence that they claim it to have. It may not be the first instance of that behaviour. However the use of the single case, or a limited number of cases, can be a valuable approach to research such as this. Individuals co-construct meaning with others and no single voice is completely isolated from the environments and people that surround them (Bochner, 2001). Drawing upon in-depth cases of everyday life, particularly through insider perspectives, ensures that academic knowledge is practically orientated (Hodgetts & Stolte, 2012; Philaretou & Allen, 2006). Examining the processes on a deeper level than broader, experimental methods can encompass helps to illuminate how such processes shape people's lives (Hodgetts & Stolte, 2012).

This is particularly the case when researching sensitive topics such as gangs and gender (*cf.* Philaretou & Allen, 2006). As Philaretou and Allen (2006) explain, autoethnography allows the researcher to provide valuable academic knowledge on topics that may not otherwise be addressed. Such approaches offer detailed evidence of how individuals make sense of personal events through reflections of the co-construction of life worlds – in this instance the development

of a gang community of practice shaped by the gang's development and processes that are illustrated in the narratives in the following section. Narratives were selected by Tony not necessarily because they were the first instances, although some were, but because upon reflection these exemplars provide insights into the development of a hyper-masculine identity.

In the process of communicating and analysing these narratives, we hope to provide a deeper understanding of what occurs within the context of gang life in order to contribute to addressing practices that damage people's lives. The first step is to understand how such identities are formed which is the scope of the present article.

The second and third authors, Dave and Neville, add a further layer of analysis to the three narratives. Their outsider positioning, as neither have been members of a patched gang, allows a particular level of critical distance. This further layer of analysis aims to capture those practices or insights that can be potentially overlooked by an insider perspective. Each additional author also brings his own area of expertise and experience in the areas of community psychology, communities of practice, gender, and violence. The present article represents our attempt to analyse empirical materials that were produced through Tony's account of his past experiences (*cf.* Davis & Ellis, 2008). The resulting interpretation encompasses both etic and emic approaches. As an insider, Tony is able to provide specific examples to include in the study, while also having other insights and personal reflections that guide the analysis and writing that may not be immediately evident within the narratives. As outsiders, Dave and Neville are able to situate these insider perspectives in the wider context that includes other world views and academic perspectives.

Findings

The three narratives explore the role of violence, substance abuse, and sex in the development of a hyper-masculinity identity. Each is preceded by contextual information to help the reader understand the narrative. The qualitative analysis of these narratives was used to identify emergent themes which

contribute to a more nuanced understanding of the role that context plays in the development of hyper-masculinity.

Narrative One: Violence

In this narrative Tony is ten years old and in his last year of primary school. The event takes place midway through a lunch recess on a typical Aotearoa New Zealand day at the school. His family had moved towns at the end of the previous year and so he was a new student at this primary school, which was very different to his previous one. Violence in Tony's family was considered normal, acceptable behaviour. He had witnessed and participated in violence his whole life and it was considered by his family and the wider gang community as an acceptable and legitimate means of resolving any form of conflict.

We're on the lower school field and I'm playing a game of volley ball with a bunch of kids I have recently come to know. I am feeling very proud of myself and happy that I had got up, off my ass, and was playing sports. The opposition serves the ball and it goes flying past me. I turn and run and catch up with the ball. As I am running towards where the ball is rolling, I see the 'cool' kids approaching. The ball is too fast for me, and it reaches the crowd of cool kids first. The leader scoops up the ball and he is just standing there waiting for me to arrive in front of him. I run right up to him, face to face. Without saying a word he starts moving the ball around, constantly keeping it out of my reach in a way that makes me furious. Out of breath from running and playing, I know that what he is doing is a deliberate attempt at mocking and belittling me. I am so offended and angry, I punch him in the face as hard as I can, and knock him to the ground.

After picking the ball back up, I think to myself "now who's funny?". He finally gets to his feet, and I watch the group quickly run to the office. I turn around to go back to the game to continue playing where we had left off. I look at the other players and I am met with shocked looks on their faces. I assumed we would all just carry on

playing volleyball. As I stand on the edge of the court, most of the players are silently walking away. I ask everyone "what is happening?" No one replies. My name comes over the loud school speaker in an angry tone.

I listen while the Principal calls my mother and informs her I am suspended. What they are saying is not very comforting. I know I am in trouble. "But I only punched him?"

Walking home, there really doesn't seem too much to be worried about. It was just a punch. As I come through the ranch slider at home, I feel a sting on my ass. I turn around and see Mum about to land a second blow with a length of bamboo and she continues beating me with it. "Shit this hurts and sucks. What am I getting such a beating for?" I wonder. I feverishly rub the parts of my body that have the welts from the bamboo after the sixth and final strike.

After the beating I manage to control the pain, hold back my tears, and stand upright. Several men around me pull money out of their jeans and vests and walk over towards me smiling. They shake my hand and hand me the money with comments such as "That's how real men handle their business Tony" and "You'll have your patch in no time!" Why am I getting a hiding and money for the same thing? Feeling embarrassed but also accepted and encouraged at the same time, I just shake hands and thank them.

Narrative Two: Drugs

The party this drugs narrative describes was the birthday party of one of Tony's family members. Figure 1 is a photograph taken the day that the party concluded. Like violence, alcohol and marijuana had always been a part of Tony's family and home life. Alcohol was viewed as normal and freely available to anyone, rather than only being a drink for adults. For example, Tony had been able to have drinks at parties, Christmas, and family occasions since being a very young boy. Smoking cigarettes or marijuana had been actively discouraged by his mother until this

weekend. There were times when family and gang members would discretely share a joint or cigarette with him or would give him a bud of marijuana. However this was not the norm and was frowned upon by his mother.

The goal of this weekend, from his family's perspective, was to teach 12 year old Tony a lesson. Up until this point he was considered disrespectful and opinionated, speaking about things he had yet to do. Tony thought he was already a man and could handle more than he was given credit for. His family and the wider gang community decided to teach him a lesson by giving him unlimited access to both alcohol and marijuana in an attempt to make him more humble and less boastful. The adults found it easy to stay awake from Friday to Sunday as they all were using amphetamines (speed), but none of them believed Tony would be able to last Saturday until Sunday without such help: nevertheless, he did. From this night on everyone conceded that he could consume as much alcohol and marijuana as he liked, anywhere, anytime. It therefore marked a rite of passage for Tony.

What a day! Don't have to go to school this Friday and we'll be partying all weekend. My brothers and I spend all Friday moving tables, chairs, glasses, everything needed for the huge celebration. I find myself all over town getting the things needed to the farm house for the birthday party. This sure beats sitting in class being bored, wasting time at school. My brothers and I sweat in the blistering heat moving all the equipment, working all day and getting very excited in anticipation of the weekend to come. Tomorrow will be so much fun. I wish someone else had to go home and do the mundane chores.

Saturday morning, after completing my chores, my brother and I drive out to the party very excited about the thought of having unlimited access to the kegs and also marijuana for the first time. I cannot believe mum agreed with the members and gave me permission to smoke as much as I like! I saved money and have a small bag of

marijuana to smoke with the boys. No one turns up to party with nothing. I hope it is good enough smoke for them. I know that everyone will have heaps of dope at this time of the year, and probably better than mine. I eagerly look forward to getting as smashed as I can.

When we arrive there are a lot of people. I walk in with my brother thinking 'I cannot wait until I am old enough to have my own party'. I see Mum and her husband: they had been partying all night and they look good. I do my best to avoid eye contact with them both, knowing there is always a job to be done. I really would just like to party with the boys.

As I walk up to the kegs to grab myself a handle, one of the members calls me over to him with a job to do. After completing the work I sit down to enjoy what I believe to be a well-earned drink and smoke with some members. They have big bags of dope and give me some buds for the work I have put in, and tell me I am doing a good job as usual. Throughout the afternoon and evening I never really get a chance to party. Someone always wants me to do cleaning, lifting or get something. Knowing my place, I jump to attention every time, without question.

I think to myself I cannot complain too much, as all evening and night members and family are passing me a smoke or giving me a shot of whiskey. I should just be happy as I know my classmates at school think I am the man. I also can help myself to the kegs when I am not on bar duty, which I am enjoying very much. By late Saturday night I am feeling very jaded and intoxicated. I sit on a bale of hay and the world starts spinning. After a couple of minutes of this I feel the distinctive feeling of needing to throw up. I struggle to put one foot in front of the other and slowly walk out of sight to be sick. I would hate to be caught throwing up like a girl. Looking at the men around me they are all laughing, standing upright and appear to be

handling things far better than I am. I try to hide that I am very wasted and feeling like I need a sleep. I will prove I can party like a man.

As always there is something to do, and during the early hours of Sunday morning I am feeling tired and very cut, but damn it I am going to keep up with the men. I am receiving a lot of banter and comments from the older people referring to the state I am in, but I am also dishing out my fair share of comments and jokes. At times I am inappropriate and loud because of being so drunk and wasted. I try to be respectful, but at this stage of the party, respect and knowing my place have become blurred.

I wish these guys would find someone else to stoke the fires and do the bitch work, but I do get to walk around smoking and drinking. Life is not all bad.

Well after midnight and into the early morning I am very inebriated. My work is still being done, I am still holding coherent conversations and I appear to be on top of everything. People start to say comments like "You really are the man!" and "I have seen hard men fold with less than that Tony". My thoughts have not changed all night; "I will show you guys I can make it until the morning, because yes I am the man." As the morning progresses I start feeling light-headed and exhausted, but see the sun start to rise. For the last few weeks and especially today, I have been shooting my mouth off and telling everyone I can handle drugs. As Saturday turns into Sunday, it becomes harder and harder to stay awake and I start to doubt my capabilities as a man. I become excited as the sun breaks through the darkness and things transform from night into daytime. I really am going to make it. "Ha ha told you all!" I feel like I get a second wind as I jump back into action and start cleaning things up. This constant moving helps me stay focused, though I cannot

help but stumble around.

After daybreak some of the men call me over to the house. As I walk over to the house I notice many of the people present at the party are still drinking and smoking, and not looking a single bit tired. I wish I felt that way: they must be hard men. As I walk through the ranch slider I am greeted with applause! Why? I hear again "You're the man!" and they make me stand for a picture, and then one of the members orders me to go crash out in the back of a car. I just agree. I stumble to the car to collapse thinking "I did it! I can party like a man. I am the man. I just think I am going to have to party as much as I can, to get as good as the other guys".

Narrative Three: Sex

By age 13 Tony had graduated beyond alcohol and marijuana, and had become a regular user of speed and hallucinogens such as acid and magic mushrooms. Drug use assisted his energy levels when working very hard for long periods of time but although hard physical work was not uncommon for him, this week's work was particularly back breaking. The party mentioned in this narrative was the first party Tony had attended where he was recognised as one of the men and was treated like an equal, not a boy or prospect. As a 13-year-old Tony had the appearance and demeanour of someone a lot older and was often mistaken for someone old enough to buy alcohol. This was also the age that he became interested in the opposite sex. Within gang culture women are not considered equal: instead they are viewed as possessions or servants. In the narrative below, a woman who frequented the clubrooms who the gang members nick-named "Gumboot", was also at the party. She had been objectified and coerced into a particular gender role over a number of years. In this role, she was expected to cook, clean, and have sex with whomever a patched gang member told her to, but was not actually in a relationship with any gang member or considered anyone's partner. It is important to note here that while we use this alias to refer to her within this article, this is not meant to dehumanise or for us to participate in her degradation. Readers may feel that we

should have used a different alias. However, we use this term here to illustrate how these women are treated and to emphasise how a hyper-masculine identity functions within this context. Given the narrative is from Tony's experiences at the time, to change the name would be to alter the experience. Further, while autoethnographic approaches on sensitive topics do require a duty of care to those represented in personal reflections (Philaretou & Allen, 2006), in this case we felt that to censor the self-reflection would be to minimise the plight of women in roles such as this. This is particularly relevant given the other characters in this narrative were making light of the disturbing situation related by Tony.

What a hard week's work! I cannot believe how many wheelbarrows of concrete I pushed across the yard or how many shovels full of concrete powder and metal I loaded into the concrete mixer constructing the piggery this past week. Even after all the speed we snorted this week, I still feel shattered and cannot wait for the party tonight to relax and celebrate.

After we finish cleaning the tools and make sure everything has gone back to where it lives, we all walk up as a group to the main house, which we could not see from where we were working. As we all walk around the side of the house we are all greeted with a poured handle of beer and one member has a CD cover full of lines for us. I am wrapt as I am feeling very tired, sore, and worn out from working so hard. After I have a few lines, beers, and a joint I am back to feeling full of energy, on top of the world, and invincible.

I walk around the party and ask if anyone is in need of help like usual. I am told by a member "Sit down boy! We have the prospects and bitches taking care of everything. Go have a drink with the men". I sit down with the members and other men and I feel a sense of achievement and status. I think to myself "I have made it to the men's table".

I spend the night drinking,

smoking, snorting and eating. While all this is happening, the women are taking care of everything. I am happy about this, but also feeling like I should help. I attempt to help and several times I am told "work like a man Tony and we will treat you like a man, leave it to them". I cannot take my eyes off this girl known as 'Gumboot'. It does not matter what she is doing, she captures my undivided attention throughout the night. Often she comes and asks me if I need anything and I find myself constantly tongue-tied and stumbling through whatever answer I am trying to give her. I am infatuated with her.

Before nightfall several of the people I am drinking with notice my attraction to Gumboot. One member says "Tony just go and grab her ass and take her out the back and give her one!" I feel very embarrassed and unsure about what exactly is going on. I desperately want to be viewed and treated as a man, but to be known as a man you have to have had sex. I am starting to feel like a fake and not worthy of sitting at the table, being a virgin. The whole group at the table decide to join in and tease me for what feels like forever with questions like "Have you had a root Tony? When was your last root?" I feel very uncomfortable, so lie and make up stories. I have seen many movies and books, so attempt to bluff my way through the questioning. Desperately trying not to lose any of my newly acquired status, I wish they would just drop this subject and leave me alone.

As we sit there as a group drinking and laughing, mainly at me, a senior member calls Gumboot over and whispers something in her ear as I sit across the table watching. I watch Gumboot listen for a few seconds and then look my way smiling. As the member continues whispering in her ear, she maintains eye contact with me. Immediately Gumboot walks over to me and asks me to come and help her with one of the kegs out of the truck. I was wishing I could fuck her, but have no idea this is about to become a reality. I get up and follow her to the car

park. When we are out of sight of everyone, she grabs me, kisses me and immediately proceeds to unbutton my fly to give me a blow job. I feel a raft of emotions. Am I doing it right? What comes next? Is there an order? Will she tell everyone how bad I am? Is my dick big enough? Luckily Gumboot is very experienced and is a very good teacher. I am a little overwhelmed at her actions thinking "aren't men supposed to be in charge? Why would sex be different?". Still enjoying it regardless, we carry on to the point of having sex.

After Gumboot and I re-emerge, we are met with applause. I am so embarrassed, never having dealt with this situation, and feeling like the men can just see right through all the lies I have told. I feel a sense of achievement also; I have taken the final step and am being recognised as a man. Gumboot is not fazed at all and just goes back to her duties. I get myself a beer and sit back at the table. I cannot believe how amusing everyone finds the situation. I constantly hear comments for the next little while "Was it good?" "That didn't take long" and "What does it feel like to be a real man?" I find all these questions uncomfortable, as I cannot truthfully answer them without exposing my deception. I am sure they all know this, which as usual encourages them to carry on mocking me.

I excuse myself to go to the toilet with the goal of them leaving me alone. I return, and thankfully they have found someone else to pick on. I just sit there thinking. Under the influence of several drugs, having just lost my virginity, and combined with all the hard work we had done this week and the results we achieved, I feel proud. Tonight, throughout the party, I was not expected to lift a finger. I feel on a par with the men around me. I sit there knowing I am a man.

Discussion

This section represents our critical examination of Tony's narratives through the combination of insider and outsider

perspectives of all three authors. We explore the events and processes that are a part of everyday life in a gang and which helped to form the hyper-masculine identity that has shaped Tony's life (*cf.* Hodgetts & Stolte, 2012). Three themes emerged during our analysis: the role of rites of passage, the use of violence and intimidation as a means to an end, and sex and gender roles. Each played an important role in the development of Tony's previously-held hyper-masculine identity, an identity, it is important to note, that can be, and in Tony's case was, reshaped later on in life.

Rites of Passage and the Hyper-masculine Man

Interconnected throughout the three narratives outlined previously are the levels of acceptance within the gang community. Actions that result in social mobility within groups such as gangs are often conceptualised as rites of passages (Irwin, 2003). This can be seen within the drugs and sex narratives. In the drugs narrative, 12-year old Tony was given access to drugs and as a result consumed a large quantity. The next morning he was still awake and mobile, and this drew admiration from the gang members. Being able to consume copious amounts of drugs at a young age was viewed as particularly impressive by the gang, an element of risk-taking that Tony survived. This risk taking is a component of Zaitchik and Mosher's (1993) conceptualisation of hyper-masculinity. In this narrative, while Tony is probably too young to be exposed to other more dangerous forms of risk-taking such as inter-gang violence, this drug-taking is still a form of risk. It provided a rite of passage into a hyper-masculine identity that Tony passed. The gang community of practice recognised this by acknowledging him with exclamations of "you're the man" and by taking a photograph. This in turn reaffirms to Tony that this hyper-masculine identity is something he wishes to attain in order to further connect to this community - young Tony feels that he is "the man" and that he wants to "party like those guys". This experience, and subsequent others throughout Tony's life, represent a graduation to full acceptance of a range of drugs by the age of 13 when the events described in the sex narrative took place, where Tony was an accepted member of the gang despite his

relative youth. Since the event discussed in the narrative Tony had continued to use the hardest drugs available to him at the time, which reaffirmed his hyper-masculine identity as a 'hard man' through continued risk taking.

Successfully navigating a rite of passage is also represented in the sex narrative, and as a result of this achievement, Tony was promoted from doing menial tasks to being served by others. Through the third narrative, his experiences of manual labour, aggression, drug use, and then losing his virginity convinced Tony at the time that he had made it as a man. Experiences like sitting with the men, being treated as an equal, and not having to be a servant reinforced those beliefs. To 13-year old Tony, having sex was the final stage of acceptance as a man in the gang. Having lived through many stages or levels of acceptance, young Tony felt there was no further experience to have to make him 'more of a man'. In his mind at that time, and with limited life experience, Tony compared himself with the men he observed and interacted with and convinced himself that he had imitated them correctly and had indeed achieved full manhood. Readers of this may question young Tony's view of his 'full manhood' given that he was only thirteen years of age. However, successfully passing these rites of passage and engaging in hyper-masculine practices had accelerated his maturity in the eyes of his peers: that is, other patched members. Tony's peers during this time were always a minimum of ten years his senior, and trying to imitate these men resulted in Tony missing other important social interactions that could have led to a more pro-social identity developing (for example in school). He had very quickly, in the space of thirteen years, become a member of this community of practice and thought of himself as a man in its terms.

Each narrative constitutes a rite of passage into a hyper-masculine identity that Tony successfully accomplished through his actions. While Tony was not aware of them as such at the time, reflecting upon his experiences allowed him to identify them as formative to his identity. Part of his reason

for identifying them as such was due to the acknowledgement given to him by the gang community of practice through the appreciation shown by Tony's role models, all of whom were men with hyper-masculine identities. These experiences were how Tony learned how to 'be a man' in the way that the gang required in order to be a member.

Violence and Intimidation as a Means to an End

Through examining these three narratives, status and power emerged as dominant themes. These dominant themes are heavily implicated in the development of a hyper-masculine identity. Status and power are achieved and a reputation is established through successful use of violence in order to reach goals. Violence, or the threat of violence, is interwoven amongst many of the gang's community practices. In the school playground, at age 10, Tony thought "now who's funny?" after knocking the boy to the ground. The act of violence gave him a sense of power and superiority that he enjoyed. It positioned him as physically superior to the more popular boy. Violence helped him attain a form of status that, in comparison, the other boy could not access as successfully. At home, at this time of his life, Tony was regularly beaten by older brothers and gang members, with no chance of winning the conflict. At home, violence was a key tool in establishing hierarchies and maintaining status. It was a community practice with which Tony was very familiar.

The incident with the ball in the first narrative was the first time he had used physical violence outside of his gang community. While violence was officially frowned upon at school, within the gang, it was a common practice, especially when issues of dominance or submission within a hierarchy were at stake. The 'cool kid' was 'mocking' and 'belittling' Tony, in an obvious attempt at asserting a higher position in the hierarchy. In the gang ethos, the punch in the face was the only way to maintain credibility as being 'staunch': that is, aggressive and physically dominating.

Tony could conform to some aspects of the school community, but proving to himself and other that he was tough enough to be a gang member was paramount to him. Doing well and fitting in at school was very much a secondary consideration.

As noted, violence was a way of maintaining hierarchies: a means for those higher in the ranking to remind others of 'their place.' For example when Tony talked back to the gang member who gave him alcohol, the gang member hit him: this was necessary to keep a prospect in his place. However, Tony's reaction shows that hierarchies are often contested. In this instance, the gang member's punch did not hurt Tony and instead helped reinforce his view of himself as being sufficiently staunch to absorb a full force punch to the face from a much older experienced man. While Tony kept to himself the thought "Is that all you have?", the incident served to diminish the respect he had for the older man. Through this experience, Tony learned that power and status meant being able to do things your own way because other people feared you. This association between being feared and being respected characterises the hyper-masculine identity common in Tony's gang community.

Actual violence is a common tool for disciplining and resolving disagreements in the gang community. But even the threat of violence can be used in order to establish and maintain status and power. Intimidation is an underlying theme that appears throughout all three narratives. Hyper-masculine men seem to use intimidation as a way of taking control and acquiring a position of power and superiority over others. In all three narratives Tony recalls an aura of superiority emanating from the patched gang members. They were 'real men' due to their physical superiority, their ability to consume more drugs than Tony and their sexual conquests. Once Tony believed he was able to keep up with the men, he modelled his behaviour on theirs. He no longer felt inferior but considered himself to be an equal. Similarly, at school, Tony attempted to use physical intimidation, as learned in the gang environment, when he ran straight up to the other boy 'face to face' as

described in the first narrative.

Often intimidation is very blunt and obvious; at other times, it can be established by more subtle manipulation. The gang member with the moonshine in the second narrative attempted to intimidate Tony by offering it to him, and when Tony 'took it like a man' and spoke back, the gang member had to resort to physical violence to re-establish order. Tony also felt intimidated in the third narrative when being mocked about being a virgin and attracted to the woman called Gumboot. In a gang environment, making people feel uncomfortable can lead to them feeling inferior. This in turn gives the hyper-masculine gang member who is intimidating a feeling of superiority, higher status, and a sense of having a greater level of knowledge and experience. From Tony's perspective as a young boy, people who became intimidated were viewed as weak, soft, or even feminine. This made intimidation a valued skill within the gang community. Without the ability to intimidate others, full acceptance within the gang would be almost impossible to achieve. The ability to intimidate is an important component of a hyper-masculine identity within the context of a white power motorcycle club in Aotearoa New Zealand. This is something Tony developed at an early age due to his physical size and early success in physical confrontations with his peers, and his ability to deal with substantial drug use.

These three narratives show that status and power, along with violence and intimidation, were interwoven throughout this stage of Tony's life. Tony recognised at a very young age that attaining status and power resulted in substantial tangible, and in many cases immediate, benefits. Upon acquiring a certain level of power or status, Tony would always try extremely hard to make it to the next level on the hierarchy within his community. Tony's desire for status is reflected in his ambition to be able to drink and smoke all night and to be able to sit at the table where the men sat. Having sex added to his feelings of attaining power and status. Tony could feel that he was moving through various levels of what he perceived

as manhood. Within Tony's gang community there were limited acceptable male identities that he could adopt or develop. Tony, from a young age, recognised that if he did not conform to the gang's established rules and ways of knowing, he would not be a desirable member and becoming accepted would become a much harder process.

Sex and Gender Roles

Sex is not necessarily a hyper-masculine activity. It is hyper-masculine when men coerce women into performing sexual acts, perhaps conditioning them to think that this type of behaviour is kind and caring, when in reality it could be thought to be more like rape than consensual sex. This is what occurred in the third narrative, with 'Gumboot' being told to have sex with the then 13-year old Tony.

The inferior status of women is an expected and reoccurring theme in gang narratives (Grennan, 2000). In naming her Gumboot, gang members were making a statement about the status of this woman. She was as an item of clothing, whose purpose was to provide comfort for the male "wearer" – and as clothing goes, there are few items which could be thought of as of lower status than the humble gumboot, exposed to mud and fit for only for that part of the body which is furthest from the head.

Hyper-masculine practices are enacted in ways that ensure gang members benefit from positioning women in a sub-ordinate role. Women are used by the gang as a resource that can be accessed when gang members prove themselves as 'real men'. If the genders were equal, the gang members would lose power over the women, and would no longer benefit from the tasks women do in relation to cooking, cleaning and sex. In particular, sex between gang members and unattached women is frequently an enforced transaction, devoid of intimacy and romance. A gang member's power and status is expressed through his deciding when and how sex occurs. In this regard it might be noted that Tony, while being interested in a particular woman, had only a limited say as to whether sex should or was going to occur. While he had attained a

certain level of power, Tony was not of the same level as the senior gang member who gave the woman the order. Tony was unsure and scared. His agency was also compromised, albeit in a different way to hers.

The practice of hyper-masculinity involves constructions of femininity with which masculine actions and identities are contrasted. From a hyper-masculine man's perspective in this culture, as discussed in the narratives, cooking, cleaning and other household chores are referred to as 'bitch work'. This suggests that these types of jobs are suitable for women and boys who are not yet men: they are not jobs for men who have acquired status in the gang. This type of thinking places women on a par with children, except that boys are given the chance to rise up and gain greater status by proving themselves and making the transition from boy to man, something which is unattainable for girls.

Within the gang environment any duty or action perceived as feminine is considered too embarrassing or degrading for a hyper-masculine man to engage with. This is similar to the embarrassment Tony felt after being hit by his mother with bamboo. In Tony's mind as a boy, real men are not physically hurt by women. Though he had received many beatings prior to this incident, Tony had never been beaten in front of men he respected and admired, and for him this was a greater punishment than suspension, pain or his mother's disapproval. This first narrative then was not just about violence but was also about gender roles. Tony was beaten by his mother, a woman, but the potential for him to gain status as a result of his gender was still recognised by the men present, who gave him money and words of encouragement after the beating.

To the hyper-masculine male within a motorcycle gang community, engaging in challenging physical labour or 'working hard' is man's work. Tony's family and gang placed little importance on academic achievements and, as a result, neither did Tony. Academic work was viewed on a par with household chores and as a result deemed

feminine and thus unworthy of the hyper-masculine man. In the gang community of practice, physical labour was valued whereas academic labour was not. This can be seen in the drugs narrative as Tony was granted a day off school by the family to set up a party. Wanting very much to be a full and accepted member of this community, Tony worked extra hard to attain a higher status by proving his physical worth to the gang members, to the detriment of attending school and gaining an education. The identity Tony saw as desirable was modelled on hyper-masculine men around him, all of whom had been previously convicted of at least one crime.

Conclusion

Discussions of how identities and beliefs are formed can assist in challenging and changing antisocial identities such as those that are hyper-masculine – a need that Tony is intimately connected to as he hopes to continue research in this area to assist others. Tony developed a hyper-masculine identity through his membership of a gang community of practice. He was born into it through his family and was immediately surrounded by hyper-masculine men, who reaffirmed his developing gang identity through financial reward and praise. As we have shown, early exposure to violence, drug use and sex was particularly important. The development of a hyper-masculine identity in this case was primarily the result of Tony not knowing any other way. The men he admired were the men he modelled himself after, in this case violent, drug using, hyper-masculine men. However this identity was not fixed as socialisation plays a significant and ongoing role in identity development (*cf.* Paechter, 2003).

Often people will reassess their lives with further life experiences and maturity. While Tony acquired a hyper-masculine identity at an early age, he later rejected this identity due to wider exposure to other belief systems. Through his experiences, he now believes that hyper-masculine men may desire to change once they realise that these identities are restrictive and destructive. Often men in gangs can struggle with such

conclusions and view change as a process that conflicts with their constructions of masculinity, identity and worth. Tony had to undergo a huge paradigm shift, a change of beliefs as well as a cultural transformation, to construct his current identity. Tony considers himself an outlier in this respect and has plans to do further auto-ethnographic studies through his academic career to explain in greater detail the joys and trials of such a commitment. Such experiences can impact people's understanding of their identity, allowing positive changes to occur (Hodgetts et al., 2010).

This article contributes to research and knowledge on hyper-masculinity in the specific context of motorcycle gangs in Aotearoa New Zealand. The present study also illustrates the importance of auto-ethnographic work in the area of gang communities and culture. Gang culture consists of a complex web of interactions and practices. While we have touched on broader themes of violence and gender that underscore many specific practices of hyper-masculinity, these practices themselves need further investigation. Finding healthier alternatives to these destructive practices aided Tony in developing a more positive masculine identity, more analogous to Hodgetts and Rua's (2010) discussion of working class men.

Although this study focused on the rites of passage associated with Tony's development of a hyper-masculine identity, both men and women within gangs are offered only a limited range of acceptable identities within this community of practice. While adopting a hyper-masculine identity and entering the criminal world may have been fairly predictable given Tony's early childhood experiences, his identity could be, and indeed was, later challenged and as a result changed. There is a need for those working in these areas to understand how anti-social identities are constructed, so that gang affiliated gender identities can be deconstructed and reconstructed to enable positive change and growth to occur.

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Resituating masculinity and power in preventing child sexual abuse

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While attempts to address the perpetration of child sexual abuse often reduce focus to individual, psychopathological and actuarial levels of analysis in psychology, contextual understandings of gendered power relations are largely unexamined. A statistical focus on the prevalence and risk of sex offenders to the community excludes critical, contextual and discursive understandings of how masculinity is practised and how it contributes to men's sexual offending. Through locating issues of child sexual abuse within hegemonic institutional and social power relations of masculinity, we challenge dominant reductionist positionings of the offender to simplified constructs of deviancy and abnormality. We present two case studies of the experiences of men who were child sex offenders, interviewed as part of a wider study. In investigating their narratives, we examine their experiences of power and powerlessness, and the discursive resources available to them, determined through their socio-political contexts, which influenced their masculine identities, practices, and subsequent offending. Questioning masculinity as a socially determined practice of power and powerlessness opened a space for the men to become reflective of how their community contexts confirmed their gendered practices that led to sexual offending. Such insights could create transformative possibilities and interventions that could prevent child sex offending.

Gender based violence has been widely recognised to be one of the most serious threats to the wellbeing of women and children worldwide. In the United Nations Report on the Status of Women published in 2011, Aotearoa/New Zealand was ranked worst of all OECD countries in rates of sexual violence. New Zealand has an alarmingly high rate of reported child sexual abuse, although variations in definition and methods make it difficult to ascertain the prevalence. A review of the international literature suggests that approximately 10% of men and 20% of women experience some form of sexual abuse during their childhood (Seto, 2008). New Zealand studies have suggested rates of childhood sexual abuse as high as 32% (Anderson et al., 1993). This early study has been supported by longitudinal research that indicates between 13.9% and 30.4% of girls and 2.7% - 6.1% of boys have experienced sexual victimisation prior to the age of sixteen (Fergusson et al.,

1996; 1997; Fergusson et al., 2000). Other New Zealand research has found that between 23.5% and 28.2% of girls are subject to unwanted and distressing sexual contact or are forced to participate in sexual acts before they reach the age of fifteen (Fanslow et al., 2007; Fanslow et al., 2008).

Prevalence studies may provide useful information to draw attention to the problem of sexual violence in the population, and to access resources to reduce it and its effects. However, the problem with using prevalence data is that it excludes how experiences of sexual abuse might be understood and reported. For example, victimisation studies such as the New Zealand Crime and Safety Survey exclude children under the age of 15 from participation, and only ask participants to report their experience over the last 12 months (Mayhew & Reilly, 2008). Despite methodological issues, it is clear that girls are more frequently abused than boys, and that the actual incidence of victimisation is

much higher than reported. Most acts of sexual abuse against children are unreported with only an estimated 9% of incidents reported to police (Ministry of Women's Affairs, 2009). Prevalence studies also raise questions as to how much is 'enough'; whether it is 1 in 3, or 1 in 7, it is a problem that warrants further resources for change.

The problem of child sex offending is not gender neutral. A key feature of official data that has been consistent over time is that the majority of those who sexually offend against children are men (Cowburn, 2010; Finkelhor, 1984; Seto, 2009) and that most do not encounter the criminal justice system. International studies suggest that between 0.95% and 5% of all sexual offences against children are perpetrated by women (Cortini & Gannon, 2011), which is reflected in New Zealand Police apprehension data (NZFVC, 2015). According to Ranger (2014), less than 2% of those arrested for child sexual abuse are women and 0.63% of incarcerated child sex offenders in New Zealand are women.

Most of our attempts to address the perpetration of child sexual abuse relates to community safety, based on what we know about sex offenders. According to Cowburn (2010), the focus on known offenders is misguided, given that most acts of sexual abuse are unreported and even where incidences of child sexual abuse are reported, difficulties in reaching conviction are entrenched (Butler, Goodman-Delahunty, & Lulham, 2012). Similar to international studies, Butler et al. (2012) estimate that 15% of all child sex offences reported in Australia result in criminal proceedings and these do not necessarily translate into convictions. Given the relatively few convictions, alleviating the harms caused by sexual abuse must surely go beyond interventions based on forensic knowledge of convicted offenders. Furthermore, understandings of gender are largely absent from criminological and psychological discourses that tend to focus on how to correct and manage deviance through the development of theories that explain offending and their application to the treatment of individuals. Despite the history of feminist and critical inquiry into sexual

violence, there remains a persistent ideology that aims to reduce this phenomenon to an individual level of analysis in psychology (Lea & Auburn, 2001).

Much of the literature focuses on treatment interventions or rehabilitation programmes that seek to control the deviant behaviour of particular 'risky' men, with varying degrees of success. This is especially the case within forensic settings, where the main focus is on reducing an offender's risk of reoffending (Woldgebreel, Day & Ward, 2014) based on cognitive behavioural and psychiatric approaches that locate 'deviancy' within the individual and neglect sociocultural resources that mitigate or normalise sexually harmful behaviour (Rickard, 2015). Despite the inconsistent results of rehabilitation programme effectiveness, in Australia and New Zealand they continue to operate in prisons and within the community. There has been international recognition that cognitive-behavioural treatments targeting the links between offence cognitions, emotions, and behaviour to address maladaptive processes within individuals have the *potential* to enable offenders to manage the risk factors that are attributed to re-offending. There appears to be some consensus that treatment following a cognitive behavioural (CBT) approach through the risk-need-responsivity model (Andrews & Bonta, 2010) is effective in reducing the likelihood of recidivism. The Good Lives Model (Ward, 2002; Ward & Marshall, 2004) of offender treatment has gained momentum in the last decade. It assumes that offending is a maladaptive attempt to meet an individual's self-determined needs, and treatment focuses upon creating the conditions required (both individual and social) to achieve human 'goods' in prosocial ways. These models both focus on individual factors that lead to an offender's decision to offend and therefore target the reduction of risk or the opportunity to lead a prosocial life. The success of treatment is assessed through recidivism data. For example, Lambie and Stewart (2012) evaluated community based sex offender programmes in New Zealand

and found offence recidivism for completers to be 8.1% compared with 21% non-completers. However, offence recidivism is a measure that depends on offences being reported and recorded as offences.

Additionally, rehabilitating men in the community depends on access to programme providers and has a high drop-out rate (45%) when compared to prison programmes (15%), especially when the duration of the community programme exceeds probation supervision (Lambie & Stewart, 2012).

There have been two recent systematic reviews of the efficacy of treatment and rehabilitation interventions that have the prevention of reoffending as their focus (Långström, et al., 2013; Walton & Chou, 2015). While there is some support for reduced recidivism following treatment “the effectiveness of these treatments remains neither clearly nor convincingly demonstrated” (Walton & Chou, 2015, p. 402). Furthermore, sexual offenders have been found to have no unique psychosocial or psychopathological characteristics (Rickard, 2015) suggesting that influences beyond the individual are at play.

The focus on the assessment and treatment of offenders, often categorised by an index offence, is misleading, especially given underreporting even of recidivism of those who have come to the attention of the criminal justice system. Despite the underreporting of child sexual abuse, community responses to the release of known sex offenders is often fuelled by fear of risk (Willis, Malinen & Johnston, 2013). This has implications for our communities, where media reports represent child sexual abuse as perpetrated by a few deviant, sick men rather than as a socio-cultural problem that pervades society (Mowat, 2012).

Media representations of child sex offenders reproduce the fear of the dangerous and deviant other so much so that in our social imagination, communities become dangerous places where child molesters and paedophiles lurk as “signifiers of legal discourse on sex offending” (Mowlabocus, 2015, p. 2). While we continue to focus our attention on the psychological narrative of

deviant individuals and media representations of child sex offenders as the monstrous other (Lewis & Mega, 2009; Simon, 1998; Young-Hauser, 2010) we also continue to understand child sex offending as the individual behaviour of strangers.

Contrary to what is portrayed in the media, the academic literature reports that the majority of child sex offenders are not strangers to their victims (Lambie, 2007). It is difficult to accept that a family member can also be a child sex offender. However, by ignoring familial child sex offences, media representations provide a false sense of security (Cowburn & Dominelli, 2001) and reproduce the notion that the nuclear family is a safe haven for children, free from the threat of being sexually abused (Young-Hauser, 2010). The complex relationship between the monstrous and the deviant other, the blurring of the boundaries between the media representation of the other and the psychological production of the subject (Mowat, 2012), is a necessary site for transforming our understanding of child sex offending.

One problematic in the statistical narrative of deviant individuals is that the measures embody a hegemonic understanding of sexual violence and offenders (Cowburn, 2005); the meaning is limited to legal definitions and embedded within a framework of legal and forensic institutional knowledge, ignoring the gendered power relations in the sociocultural construction of masculinity. In developing strategies for community safety, criminological and psychological discourse of assessment and risk management is predicated on knowledge of convicted sex offenders of whom the majority are men. Yet, in the research and literature on the management and treatment of child sex offenders there is “no mention of ‘men’ or ‘masculinity’ or ‘masculinities’ or ‘gender’ in their indexes” (Cowburn, 2010, p. 229). If the assumption of the Good Lives Model (Ward, Mann, & Gannon, 2006) is that individual and social goods are likely to increase various measures of well-being, then *surely* gender identity is a necessary site

of interest and masculinity/masculinities is/are relevant to facilitating personal change. As Cowburn (2010, p. 230) argues, “identities are a complex area that underpin attitudes and are embodied in behaviours. This would involve exploring how convicted offenders behave as *men* and could change as *men*”. Where the hegemony of men and practices of masculinity delimit research through the authority of science, the knowledge produced is a hegemonic discourse, and psychological discourse is implicated in its perpetuation.

This paper attends to the omission of masculinity as a construct which, by virtue of its privileged status, has been awarded exemption from scrutiny (McCarry, 2007), and to how this exemption has limited our opportunities for understanding child sex offending and therefore the prevention child sex abuse. To engage with the problem of child sex offending, attention to how men exercise and maintain their individual and collective power requires an interrogation of the hegemony of men – the different ways of being men in relation to women and children (Cowburn, 2005). Connell and Messerschmidt (2005) argue that men position themselves in and through discursive practices of gendered power relations of domination and subordination according to normative sociocultural understandings of masculinity and femininity (and ‘other’ subordinate masculinities). Masculinity, therefore, “does not represent a certain type of man, but, rather, a way that men position themselves through discursive practices” (Connell & Messerschmidt, 2005, p. 841). Normative understandings of gender operate within a hierarchy of masculinities “as a pattern of hegemony” (p. 844) that is contextually legitimated and associated with authority and social power within which hegemonic masculinity emerges as a material practice of authority, control, independence, competitive individualism, aggressiveness, heterosexualism, and the capacity for violence, including sexual violence (Gough, 2006; Messerschmidt, 2000b). It is through these socially available resources that men can demonstrate to others the

accomplishment of a masculine construction of ‘manliness’. Hegemonic masculinity is, therefore, not a static characteristic of individual men or a gender identity. Rather, it is dynamic, subject to change and contested (Connell, 2008). It is through the performance of gendered social power relations that hegemonic masculinity is rendered meaningful (Messerschmidt, 2012), where performativity is constituted “by the very expressions that are said to be its results” (Butler, 2006, p. 34).

Hegemonic masculinity therefore is not the expression of real men, but constitutes real men as its subject. Where there is an embedded assumption of the unquestionable right for men to have heterosex (Gavey, 2005), the meaning of hegemonic masculinity is intensified in men’s struggles to enact meaningful masculine performances of doing sex (Messerschmidt, 2000b). Hegemonic masculinity can thus be understood as a system of power that serves to justify the order of things institutionalised through gender relationships, including men’s heterosexual privilege.

Discourses of normative heterosexuality that assume men’s ‘natural urge’ for sex, position women as justifiable objects of sexual abuse (Gavey, 2005), normalising men’s sexual violence as ‘boys being boys’ (Messerschmidt, 2012). Heteronormative discourses produce and reproduce men’s sexuality as active and women’s sexuality as passive. Within this discursive context, women are responsible for male desire, for meeting or refusing his sexual pleasure. Cossins (2000) argues that the relationship of sexuality to the construction of masculinity is where relations of power are established among men and between men and women. Heteronormative discourses therefore limit men’s accountability for aggressive, abusive and criminal sexual behaviour, and at the same time, are implicated within the ever-present risk of failure to be a real man (Connell & Messerschmidt, 2005; Cossins, 2000). Cossins (2000) argues men’s position in the social hierarchy is achieved through

exploitative masculine sexuality. It is the prevailing discourses of desire structured within hegemonic masculinity and participation in the sets of gendered social power relations, that we argue, provide the conditions for child sexual abuse.

The institutionalisation of socially dominant masculinities that legitimate the meaning of 'manliness' through the marginalisation or delegitimisation of alternative forms of masculinity, are embedded in everyday socio-political contexts. Hegemonic masculinity is structurally produced and reproduced across historical and local socio-political contexts embedded in intimate relations of globalisation: institutional practices of neoliberalism, western hegemony and everyday practices of normalisation (Coombes & Morgan, 2015). In turn, they are reproduced in families, communities, political, social and economic institutions.

With a focus on critical analysis of the institutionalisation of heterosexuality, Flood (2008) located the meaning of masculinity in the homosocial organisation of men's heterosexual relationships and found men's sexual relations with women were "strongly organised by their relationships with other men", (p. 340), including homophobic violence. Homosociality within the culture of the military, for example, includes the ritualised sexual abuse of women to enhance the relationship between men. Langa (2008) found that rape in the context of the military is a legitimated expression of masculinity. It is the institutionalised gendered social power relations in the military, sports, social spaces, academic institutions and so on that bring hyper-masculinity, predicated on coercion and violence, into view in significant ways.

School is a particular site of producing and reproducing the gender hierarchy. Gilbert and Gilbert (1998) argue that structural and cultural mechanisms, such as the rules that govern behaviour and disciplinary practices, the allocation of space, the composition of curriculum, participation in sport, and the way authority is exercised, are all technologies of gendered power. These technologies of power constitute the social

and political space to actively influence all its inhabitants as to how gender is performed (Connell, 1996) and they are implicated in the production of gendered violence (Renold, 2007).

The focus on gender in educational institutions has most often been directed to the construction of violent and hyper-masculinities in school settings (Connell, 2000). An example of the performance of the normalisation of sexual violence is Messerschmidt's (2000b) study of sexually offending boys. He found adherence to a hegemonic masculine ideal was aggressively and violently policed in schools through a "culture of cruelty", whereby those who did not meet the socially specified standards were frequently rejected, ridiculed, physically abused and given derogatory and emasculating labels, such as "wimp" and "mama's boy" (Messerschmidt, 2000b, p. 27). The threat of being feminised represents a failure of achieving 'manliness', and simultaneously reproduces the inferiority of women. To achieve social status, adherence to this highly seductive, largely unobtainable world of masculine power influenced Messerschmidt's participants to the point where they sexually abused other children.

Messerschmidt (2000a) locates child sexual abuse in the tension between hegemonic and subordinate masculinities where, in the absence of a competing discourse, participants' masculinity was resolved through the enactment of sexual violence as a masculine rite of passage. What emerged from Messerschmidt's study is that hegemonic masculinity is both institutionalised and enacted, and for these boys there was limited space for subversive performances. Without access to other forms of available masculinities for men and boys who may be marginalised, the failure to "be a real man" has serious consequences. The failure to perform as a real man intensifies hyper-masculinity as the only meaningful masculinity for self-performance.

The discursive constitution of hegemonic masculinity provides the socio-political conditions for the performance of masculinities and gender negotiations,

including the conditions for child sex offending (Messerschmidt, 2000b) and sexual offending in general (Flood, 2008; Turckik & Edwards, 2010). Where masculinity and femininity are institutionalised as a relationship of domination and subordination and reproduced as timeless and indisputable, discourses of masculinity both enable and constrain sexually harmful behaviour, including child sexual abuse. Our efforts to eliminate child sexual abuse therefore require attention to the social and cultural conditions that enable sexual abuse to emerge (Flood, 2002).

The Study

The purpose of this research was to gather novel insights into the lives of child sex offenders, providing possible points of intervention that could prevent child sexual abuse from occurring. In particular, this study aimed to challenge the dominant understandings of child sex offending that produce the offender as a deviant 'other' to the norm. In addition, this study aimed to locate the problem of child sexual abuse within hegemonic institutional and social power relations of masculinity. The practices of masculinity were also examined as sites of transformation. Questioning masculinity opens space where men can talk, as men, about the effects of masculinity for men and speak to the silent privilege of gendered social power. In doing so, we open up possibilities for transforming performances of masculinity that are pre-emptive.

This research takes masculinity as the site of inquiry in two ways. The first was through listening to the narratives of child sex offenders as they made sense of critical periods and influences in their lives and negotiated the meaning of masculinity in conversational interviews with the first author, often for the first time. The second was an analysis of the discursive constitution of masculinity in the men's accounts. The narrative approach to the interviews was necessary to the project to avoid positioning the men as subjects of the psychological production or media representation of the deviant/monstrous other. The narrative-discursive analysis enabled the interrogation

of the institutional and social power relations that produce masculinities in particular ways rather than individualising the problem to the 'known' offender.

Hearing the silenced. Hearing the narrative accounts of child sex offenders is likely to meet with resistance and/or raise anxiety for some researchers and practitioners. Giving a voice to the most abhorrent elements of child sexual abuse and offending can be anxiety provoking. Child sex offenders are routinely positioned outside of the discursive rules of normativity, and are simultaneously subject to the governance and control from within. Once branded a child sex offender, men are silenced by the discourses that produce 'him' as deviant other: a subject with no right to a compassionate hearing. Indeed, perhaps it is intelligible to exclude and dehumanise individual child sex offenders rather than confront the notion that somebody who has committed a crime so 'monstrous' could be like 'us' (Cossins, 2000). We understand the anxiety. However, hearing the voice of the other of normative discourse is an opportunity to negotiate multiple meanings by locating our research and practices in ethically responsive methodologies. Listening to the voice of the other enables us to attend to the constitution of meaning in the narratives of everyday lives, in the complexities and multiplicities that cannot be reduced to individual risk (Coombes, Denne, & Rangiwanga, 2016) so as to produce change in gendered social power relationships.

In the following sections, we present two case studies of child sex offenders who were part of a larger study, investigating how the narratives of men who had sexually abused children provide an opportunity to examine specific productions of socially and culturally meaningful masculinities, and the relationship between these constructed meanings and the discursive resources available to the men in their particular socio-political contexts. The material social conditions, discourses and practices that informed their masculine identities across time were of interest; not an account of their offending. This distinction is important as we

were focused on the resources available to these men, as men, and Auburn and Lea (2003) have found that men who have completed treatment programmes speak about their offending through a culturally constructed narrative consistent with the narrative of the programme.

Method

Informed consent

The research gained ethical approval from Massey University Human Ethics Committee (MUHEC, Southern A 09/85). The information sheet provided to participants reflected the tensions between confidentiality and the requirement to report any potential risk of reoffending being disclosed. Participants were informed that the research focused on their understandings and experiences of masculinity and not their offending histories. The men were also informed that the first author, and interviewer, was a trainee psychologist interested in the prevention of child sex abuse.

Recruitment

The criteria for participation were men who had been convicted of sexual offences against children, had completed a 12-month mandatory treatment programme in the community, and were willing to engage in a conversational interview about their life experiences of masculinity. This history provides a context for the conduct of the interviews.

Interviews

All of the interviews were conducted at the location where the men completed their treatment programmes, as required by the ethical protocol, and specified in the information sheet. This is significant in the production of the narratives that were generated, as the storying in the present is constrained by institutional, social and cultural discourses, and the setting for interviews was the organisation that served as the gatekeeper of the participants' freedom previously.

The interviews were conversational so that both the interviewer and the participants could meaningfully explore masculinity in the to-and-fro of talk between men, in a

particular social relationship. The men were encouraged to begin their stories from their earliest childhood memories and, from there, their narratives were loosely structured in a temporal ordering of key events including parental and familial relationships, school, intimate relationships, occupations, offending and how they understood masculinity through these events. Particular attention was paid to moments of special meaning in the men's lives, regardless of whether these moments seemed to be especially relevant to masculinity. For example, where the interviewer noticed naturalised constructions in the men's language such as, "that's just the way it is", he responded with questions such as "where do you think that [feeling/belief] comes from?" .

Gender specific language was explicitly used, and masculinity became realised in the conversations when talking about key moments and turning points in the men's lives. For example, the question "you described your father as a 'manly man'; what was a manly man?" was asked to investigate a paternal performance of masculinity that was being discussed. Often the conversations would lead to how particular discourses of masculinity had transformed through their lives. Further questions were asked concerning the implications of adhering to a certain type of masculinity, for example, "what would it mean if you did cry in front of your [male] friends?" or "how is it the men at school had more authority?". Such questions often developed insight for both the interviewer and the men in the flow of the conversation as to the implications of particular constructions of masculinity and the subject positions that were enabled and constrained through them. The conversations lasted between 1 ¾ and 2 ¾ hours.

Process of Analysis

The analysis of the men's narratives sought to identify the discursive positioning performed by the men in storying their negotiations with masculinities, and their implications for understanding masculinity as a site for pre-emptive intervention. As researchers, we are very aware that in doing so, the analysis runs the risk of minimising

the effects that child sexual abuse has on victims. On many occasions, it would have been easier to talk about researcher anxiety over some of what we heard in terms of ‘disgust’ or ‘revulsion’. We deeply acknowledge the harm the children suffered, although the stories of those harmed remain obscured. We are committed to the *prevention* of child sexual abuse, not a reduction in the ‘risk’ of re-offending. Applying such a methodology to the problem of child sexual abuse, and questioning the most taken-for-granted assumptions, allows us the opportunity to examine the problem and find new and useful ways to influence interventions.

The following analysis is organised around two case studies from the larger study. The two cases were selected to enrich Cossins’ (2000) theorisation of masculinity with specific instances of the way that men’s position in the social hierarchy implicates experiences of dynamic power relations involving both domination and subordination. While there is diversity of experience among men and masculinities, the centrality of sexuality to the construction of masculinity locates sexuality as the site where masculinity and power are intimately connected.

The case studies presented are organised through a narrative analysis to construct and present moments of Chris and Josh’s life stories with particular attention paid to key relationships and events that informed their positioning and the performance of their masculine identities. Each case study is organised chronologically to form a pattern of meaning that represented how masculinity was negotiated from their childhood through to their offending and beyond. They are represented through the storylines that emerged in the narrative (re) construction of masculine identities to make visible the ways in which masculinities were produced, and resisted.

We then consider how the men’s discursive positioning reproduced relationships of domination and subordination of normative heterosexuality, specifically how they enabled and

constrained gendered experiences across time and context. Language that adheres to the rules of the permanency of gender indicates a naturalisation of the discourse (Hook, 2001). For example, comments such as, “that’s just what men do” or, “it’s just the way it is” suggest that performances of masculinity are embedded in the social and cultural imaginary of men. This dimension of the analysis also considers taken-for-granted assumptions about heteronormativity that might condone, or mitigate the subordination of women and children. For example, the discursive construction of the right for men to have sex, to dominate, or to use violence as a means of control is analysed. It is precisely where dominant discourses are produced as stable in their adherence to hegemonic masculinity that the conditions for child sex offending are produced (Messerschmidt, 2000b). Normalised discursive practices of gendered social power relations that legitimate exploitation and oppression in the performance of masculinity are the focus of this analysis.

The men drew on dominant discourses of masculinity as they reflected on their own position in the gender hierarchy. Such discourses consisted of clusters of terms, networks of meanings or systems of statements that provided content to their understanding of masculinity as an ‘object’, in this case to their position as a man. The most salient discourse produced by the men in this study was the ‘manly man’. As a network of meaning, this discourse resonated with discourses that reproduce traditional masculinity (Flood, 2010), where manly men are constituted as stoic, emotionally restricted, independent, powerfully present, heterosexually virile, physically competent and the protector and provider to the family.

Analysis – Case Studies

Both participants (Chris and Josh) were men in their thirties who had served a prison sentence for sexual crimes against children. Josh could be considered privileged (in an economic sense) and Chris located himself as “working class”. Chris had a career in the armed forces and Josh had pursued a specialist position in medicine.

Josh

Josh came from a two parent, seemingly supportive, middle class conservative family. In the interview, he constructed his identity through his difference to their values, positioning himself as a risk taker.

I guess they're kind of 'one job for life', the white picket fence, 'you've got to have good savings', quite sort of conservative, quite middle-class; whereas I think I'm a lot more adventurous, a lot more risk taking. I'm a bit more kind of 'a sensualist', like I'll spend my money on rich foods and drinks or travel or experiences like bungee jumping, whereas they'll be like 'buy a new carpet for the lounge'.

Within his narrative, Josh's mother is mostly absent and he attributed this to the culture of the military where the homosocial organisation of men's heterosexual relationships formed the familial structure. Josh positions his mother in a relationship of domination and subordination through his grandfather's powerful masculine presence that not only subdued his mother, but also any feminine expression of emotion.

Mum came from a family, which was, although it was four daughters, utterly, utterly dominated by my grandfather, the father figure. He was a military guy, in the air force. I think mum, compared to a lot of other mums, was quite subdued. So even she doesn't kind of show her emotions that much in public, I get the feeling that she thinks if she does it's a bad thing it's not something she is supposed to be doing.

Competition was encouraged between Josh and his brother and he felt that he failed to achieve the success expected of him. His brother was more accomplished in "popular" sports such as rugby and cricket, and earned his masculine position alongside his father.

Josh positioned himself as less effective than his brother in attracting women, another form of successful masculinity. Positioning his brother as "manly" like his father signified his failure. His brother thrived in traditional masculine pursuits but achieved "average" grades at school. Josh, on the other hand, achieved excellence academically and was an athletics champion, lower on the masculine hierarchy, including in his physical presentation. He understood himself as failing at both masculinity and as a son. He resisted the homosocial bond shared by his father and brother to produce an identity as an intellectual. While this may constitute a subordinate position in the social hierarchy of masculinity, a lack of physical and sexual power is juxtaposed with a gain in intelligence aligned with economic power.

I always felt that my brother had the closest relationship with dad than I did...I always saw [my brother] as a better athlete. He had more girlfriends, he was just more the sort of 'jock' kind of guy and I was more the academic, sort of booky, crafty or whatever; whereas he was more kind of physical. But, I don't know, I think we are very, very different people, I mean he's more like my parents.

Josh positioned his father in the gendered social hierarchy through features of masculinity that are authoritarian, physically imposing, and emotionally restricted.

He's like sort of an authority figure type of a man, so both in a hierarchical sense and in physical capability. He was like, I guess what you'd call, a stereotypically manly man. He's kind of fairly unemotional just gets things done. If there's a tragedy, 'ok we'll deal with it -no point getting upset about it'.

Josh reflected that discipline and boundaries were not a prominent part of his childhood. Both he and his brother were generally obedient, and as such, their parents adopted a "permissive" approach to

parenting that offered little in the way of structured rules and guidance. Josh recalled that at school, discipline and guidance was similarly vague and seemingly unnecessary. His academic achievements and his allegiance to the 'academic'/'geeks' group meant that he rarely resisted the schools boundaries or behaved inappropriately.

During his primary school years, Josh was typically reserved and withdrawn. He described himself as "invisible" within the school culture. However, in his narrative (re) telling he drew on examples of using threats of violence when he felt criticised. Within the social spaces of school, institutionalised forms of masculine violence were brought into view.

When I was 8 or 9, [I'd do] things like picking a chair up and threatening to throw it at one of the kids in the class because they'd said something that had pissed me off. I got in a fight in form 3 at high school with, again it was a really good mate of mine, and again I can't remember what set it off - which shows how trivial it probably was. I got really angry, then the 2 of us were rolling around the floor knocking over desks in the class room; pulling each other's ties and trying to like push each other into the floor. I had lots of examples...I'd take things really personally or whatever and eventually I guess I kind of learned to deal with that and you know by the time I was 16 or 17 it kind of all stopped.

Technologies of power that structure school life, including the hierarchical organisation of space and the authority to enact power relations between men impacted on Josh's narrative of masculine identity.

Every form was expected to hassle the form below. There was very much division at school into juniors and seniors. The assembly hall was set up with Form 7 down the front and all

the juniors are like around the outside and the back. It was all just structured around moving to the next level.

Josh discussed how the rules that govern masculine performance in the social hierarchy are maintained and consolidated through participation in the violent subordination of non-masculine boys. Participation in the violent subordination of less 'manly' groups or individuals is necessary to the construction of relations of masculinity and power. In the relationship of power and powerlessness, proficiency in sport is a way authority is exercised and gender is performed.

We had a guy in our class and we used to have this game where we were standing around the hallway waiting for the class to be open and we'd bounce him around. He was on the chess team so it was like 'ah that's not very manly thing to be so we're allowed to pick on you because you're on the chess team'. I would have got bullied like that had I not been [an accomplished athlete], I'm almost certain of it because I would have just been this chess playing geek.

The rights associated within a masculine identity of athleticism enabled Josh to enact violence in the subordination of other boys, and simultaneously protect himself from his own vulnerable location in the social hierarchy. Reflecting on his participation in hegemonic relations of domination and subordination at school, Josh observed that he had enacted violence to confirm his masculinity and maintaining silence confirmed his position in the social hierarchy. To take up a position of resistance would represent a failure and a loss of protection.

I don't think anyone would have listened [if I tried to stop the bullying]; it's just one guy saying. Maybe that's what I felt sometimes, but I joined in

because that was going to be more in my self-interest.

As Josh repeatedly engaged in certain social practices that confirmed his masculinity, adolescence heightened sexuality as the site through which masculinity and power produced and reproduced power relations between men and men between men and women. In his (re)telling, Josh remembers being attracted to girls as an adolescent, but was too “afraid” to approach them. Indeed, the masculine hierarchy at Josh’s school extended to expectations of sexual adventurousness, with those in their senior years expected to be more sexually experienced. The school culture sexualised girls through stories of sexual exploits, pornographic playing cards and biology lessons that objectified girls and women. Without access to alternative representations of women, his adherence to heterosexual normativity confirmed his masculinity and continued to dominate his sexual relationships into adulthood.

I couldn’t really have girlfriends at school because it was all boys. I just remember conversations like this one guy going on about ‘oh in 3rd form you’re supposed to kiss and in 4th form you’re supposed to have a bit of a feel and in 5th form you’re supposed to have sex’ and this is just the way it is...it’s the older brother introducing the younger brother. Certainly in early uni’, most of uni’ actually, girls were seen as a way to get a bit of action.

As Josh negotiated his masculine identity both in resistance to his father and through relations of power and powerlessness among boys at school, he began to test “boundaries and their consequences” especially in relation to heterosex.

I used to be extremely moral about the whole faithfulness thing. When I was with [my first girlfriend] I was at a party and basically there were these drunk fifth formers who were throwing themselves at everyone. I was

like whoa! What are you doing sitting on me? Get off I’ve got a girlfriend!...More recently, I’ve been very bad at being faithful - something changed around Form 7. I think it was, basically, that when I did cheat on someone it was like ‘oh is that all it was?’ I didn’t get struck down by karma or anything. I think the wrong thing to do was to start because then it became easier to do - like drinking and drugs.... It’s almost like there was this barrier in my mind that was just this illusion or I felt was just an illusion.

Josh recognised heterosexual power as a turning point in the narrative of his masculine identity. He recognised he had the authority to break monogamy rules without consequence; shifting his moral boundaries confirmed his masculinity. Josh reflected on the tension between the relations of power in sexual relationships (dominant) and work (subordinate) where he experienced a contradiction between agreement and entitlement. The experience of power and powerlessness dominated Josh’s moral positioning by his failure to meet the contractual obligations of heterosexuality.

I’m almost a bit obsessive because even if it’s going to be really inconvenient for me to carry on doing this thing, even if it’s something like meeting someone for coffee, but suddenly my day is really busy and I can’t really fit it in, I’ll still do it but then I’ll be pissed off doing my other stuff later on because I’ll have to stay late. When I feel that I’m fairly entitled to something you know, that’s put in a contract or something like that, and someone’s not giving it to me then I’d be really pissed off.

He also described being in a constant tension between inside and outside a heterosexual relationship, losing his self-

interested focus when in a relationship.

Actually, I tend to go too far when I'm in a relationship. Maybe I spend too much time with them and don't give myself enough chance to do what I want to do. When I'm out of one I spend a lot of time of my own and suddenly crave for it again.

Yet, through this tension, Josh also felt a sense of freedom at the end of a relationship. Sex had become a key experience through which power was derived and his masculinity was accomplished. This signalled the beginning of a trajectory in which moral boundaries were repeatedly broken, re-established and broken again.

I thought, 'man, I just fucked up in the biggest possible way but it's done now, the relationship's over, now I can do whatever I like' and so there was this sense of freedom as well, and so I went through a sort of reckless sort of period.

In the accomplishment of his masculinity, the competing experiences of success and failure continued to plague his narrative of identity.

I guess it's a fear of not being respected or recognised as someone significant. I guess I have this fear of being the guy in the corner that no-one wants to talk to because no-one's interested so I don't even start. I always like to be seen as someone who is successful or someone who is an achiever, and people who know me maybe see that but people who don't know me don't like [the] first impression and [may] not realise this kind of stuff about me. I don't like giving the wrong impression so I'd rather give no impression.

Within the competing experiences of power and powerlessness, Josh performed his masculine identity through its relation with sex. In the following extract, he reflects on how he confirmed his masculinity through a narrative trajectory that brings into view his

experiences of losing both social and personal power, including his professional identity as subordinate in the social hierarchy at work, in relation to his understanding of the order of masculinity and his masculine identity.

Effectively what happened was that there was a progression - again it's one of those barrier kind of breaking things. I was 24 at the time and so I started talking to people [on a social networking website] who were 20 -24. I mean why would you want to talk to someone who was 18 or something - that's a first year student, you want nothing to do with them? But then, sometimes at night there weren't many people online it was like 'oh ok I'll talk to this person they're only 19 or whatever' you know?...Once the barriers are broken then it's not a barrier anymore, 'oh 17 that's not big deal'...A lot of it was this desire to just defer work for as long as possible, um through going out, through drinking, through chatting online, like chatting online until 3 in the morning...So they just got younger and younger until it eventually got to the point where I met up with someone who was 15 via this process of chatting. I mean eventually that's when the offending began. Never in a million years would I ever imagine myself talking to someone who was 15...I think it was basically the availability and ease, [with younger girls] it was easier to get what I was after because they were much less guarded and cautious, they were more reckless than grown up girls. There were two 15 year old girls. Then at this party up here [there were] a couple of [underage] girls who I hadn't

had sex with but who I kissed and stuff...[and we'd] just lie on the bed and talk or whatever and then have sex and then she'd go home...I think a relationship is the wrong word because it was just meeting up for sex.

The narrative of offending here reflects the tensions of power and powerless, both social and personal that produce a vulnerability to masculinity in relations among men. Cossins (2000) argues the pattern produces exploitative masculinity as a response to heteronormative failure, where masculinity can confirm gendered identity through endless conquests, reproduced and affirmed through the social and cultural conditions of hegemony “where the characteristics of less powerful objects of desire include willingness, compliance, petiteness, submissiveness – in short, the characteristics of children” (p.115).

Chris

Chris came from a two-parent working class family that was organised around gender difference and maintained through physical violence against his mother and in the discipline of Chris and his sister. When considering his position in the family, he clearly understood that his gender necessarily meant disproportionate physical punishment.

I always felt sort of second best to my sister - with regards to my dad anyway, I always felt that things were a bit harder, and a bit rougher on me than her. He was always a very manly man.

Within his narrative, it was the normality of violence both against women and as a form of discipline, that signified manliness. Positioning his father as manly, through his expression of violence, maintained a hierarchy of masculinities, which consolidated Chris's heterosexual identity at an early age. The intergenerational narrative affirms violent masculinity in a relation of domination and subordination between men; male homosociality is necessary to the use of interpersonal violence and maintains a gendered hierarchy of power

and powerlessness.

[Dad] had a very rough upbringing, his father used to beat him and burn him with cigarettes. He's one of these guys where you hear stories about; 'Oh I used to ride a horse to the school and keep my feet warm in cow pats'... Dad was the youngest so he was the one doing all the work as the youngest child. I mean, if he got it wrong he'd get a whack. His dad used to cut his hair with sheep clippers – the old hand sheep clippers - and if he moved while he was getting his hair cut it would be whack across the head with the sheep clippers. Dad's got scars across his head where his head's been ripped open, so yeh it was pretty rough for him.

Through a narrative of heterosexual violence, Chris's father dominated his childhood memories to the point where he found it difficult to recall his mother. He understood the positioning of his mother as subordinate to his father's powerful performance of masculinity.

Mum was very quiet, I can't pick any particular memories [of her], I mean mum's always been there but always sort of quiet and in the background. I suppose that's from being suppressed by dad.

Chris experienced his father's disciplinary practices as a requirement of masculinity that is emotionally restricted, where feelings were not an available resource for being 'manly'. Even experiences of anger were produced as authorising discipline, and therefore involving maintenance of a physical (dominant) rather than an emotional (subordinate) relationship.

We'd get pulled around and yelled at. [Dad's] temper was on a very short wick so if things weren't going right he'd get angry pretty quick...he never really explained why he did [discipline us]. I suppose it was

part of him as well - you don't talk about that sort of thing, you don't talk about feelings, you don't talk about all that sort of stuff.

Chris found it difficult to consolidate his understanding of his father as 'manly' through the position of protector, especially where he experienced harsh discipline enacted through violence.

I don't exactly understand it myself but um manly man, the way I saw it was, the protector [of the family] - which doesn't make sense either - being the protector and then beating up on the family.

The contradiction between protection and violence affirmed for Chris that expression of emotion within the social hierarchy of masculinity was a weakness, and opened up a vulnerability that could be exploited by other men.

[Dad] didn't get taught how to teach me properly. He's always been a 'manly man' and 'don't cry' and, the 'man of the house' and 'you've got to be strong'. Being brought up not to talk about things - about feelings and um yeh how we're feeling and stuff like that, you just didn't talk about it.

In resistance to his subordinate position at home, Chris manufactured a "macho" identity that served to protect him from physical threat and elevate his masculine status at school. He engaged in violence to gain power and demonstrate his masculinity.

It was something to hide behind, so no-one sort of knew what was really going on [at home]... I was just real confident, cocky um probably [portrayed being] bigger and tougher than I really was. It sort of helped a wee bit that I got into a lot of fights and I very rarely lost, so the tough side of the whole image sat quite well.

As he gained status through repeated performances of 'winning fights', he began to confirm his masculinity; in control, strong,

respected and dangerous. Approaching adolescence, the affirmation of his masculinity became entwined with a growing sexual interest in girls and women. During his adolescence and early adulthood, and to not expose his vulnerability, his masculine identity was affirmed through competing experiences of success and failure at sex. Chris was initially fearful of rejection when negotiating sex. He had a long history of casual sexual relationships before his first serious relationship, when he was 22 years old.

I certainly didn't think much of them [girls]. If I didn't sort of like a girl, I didn't think much of her at all, you know?... I suppose it was a bit more of a personal build up but again or a like a reassurance thing, if I can get back a second time then I've obviously done something right the first time so yeh I think that is more what it was about as well - personal reassurance.

Chris constructed a set of rules to his engagement with sexual relationships; casual relationships were privileged over one-night stands. In this way his success at sex, confirmed his masculinity. Chris resisted controlling girls through violence, stating he "didn't really hit girls", resisting the form of masculinity taken up by his father. The experience of power and powerlessness dominated his sexual relationships.

Chris's chosen career was in the armed forces, an institution that is overtly masculinised and stressful, particularly during deployment. The legitimate form of masculinity that is constructed through homosocial bonds between men in the armed forces is constituted through the perpetuation of physical toughness, endurance, aggression, heterosexuality and unemotional logic (Flood, 2008). The construction of a masculine soldier identity therefore, is affirmed through relations of homosociability. Voicing emotional distress following his deployment was understood by Chris to breach the homosocial bond and threaten his masculine identity. Chris

described the events of his deployment that overwhelmed him.

The hardest thing about dealing with mass graves was [the] women and children. A lot of the women were the same age as [my wife] and a lot of the children were the same age as my kids. I just had a baby three months before I left and one of the bodies I picked up was a baby about the same age as [my baby]. I picked up this [baby's] body and it basically disintegrated. I came home and would go to pick up my own children and that's the first image that flicks through my head, and that's why I started to detach myself which was the start of my problems.

However, it was a failure of masculinity that was a turning point in his masculine identity, where the expression of emotional sensitivity was understood as unmanly, and risked a loss of masculine status. Chris had no means to produce an account of his experiences and maintain his masculine identity. Effectively, his adherence to manly masculinity produced a vulnerability that could not be articulated.

If I have to talk about it then I'm going to break down and being the manly man that I was I couldn't break down in front of my family and friends. I suppose I thought I was too much of a man to be able to break down in front of my family. Every time I want to talk to someone about it, the emotion came up and I just wanted to break down and I couldn't let that happen. Then I started having sexual issues...

Within the competing experiences of power and powerlessness, where Chris's masculine identity was deeply embedded in a desire to be manly, he also confirmed his masculine identity through its relation with sex. In the extract below, he reflects on how he confirmed his masculinity through a telling that brings into view the experiences

of emotional powerlessness that threatened his masculine identity as structured through homosocial relations of power.

Chris sexually assaulted his 13-year-old stepdaughter.

I started looking at porn on the computer. I was using that as an escape and the lack of sex that I was having at home and because of my own issues that I was having with detaching myself from everyone and everything...I wasn't coping with the fact that [my wife] had medical issues that meant she couldn't have sex. We'd plan to have sex like a week in advance and then the kids would do something and that would just screw the whole thing up so I was getting real angry with the kids and with [my wife] and then I'd get angry at myself because I was getting angry at them. Everything just sort of built up and built up, and um yeh, the opportunity basically arose and I took that opportunity. I was um basically I was just being selfish, I saw what I wanted and I went for it...I didn't sort of realise I was doing it until it was done and I sort of sat back down and went 'shit what have I just done?'

Chris's narrative of sexual offending emerges in "circumstances where there are real or perceived challenges to their masculine power" (Cossins, 2000, p. 126), in this case, vulnerability to his emotional response to trauma.

Masculinity as a Site of Intervention

The interviews with Chris and Josh, provided an opportunity to reflect on masculinity and their experiences of the hegemony of men and opened up spaces for them to discuss how pre-emptive interventions might have been effective for preventing their sexual victimisation of girls. Both men reflected on the lack of available resources to warrant breaching the socio-cultural norms that held their masculine identities in place.

Both participants made explicit the need for men to change their relationships, to shift from constructing their identities through practices of masculinity that produce independence and competitive individualism and particularly the feminisation of emotion as markers of success. They wanted a shift to a more communicative recognition of interdependence, empathy and awareness of each other.

Drawing on his experience of treatment, learning to communicate with other men opened the possibility for Josh to understand that homosocial relations could provide the context for changing relations between men. Treatment provided a context where men were encouraged or, arguably, forced to express emotion, discuss failures and expose vulnerabilities; not just in private sessions but in front of other men.

In the [treatment] programme it [communication] was a lot easier to do once I could see other people doing it in the group. So I think maybe at school, or [other institutions], small group work [would be helpful] where you are encouraged to share that sort of stuff. I could see it working...let's just get together and share concerns. (Josh)

I think that as a society we'd do well to do more of that rather than just let people cope on their own. That never really went on at my school...no-one really took a deep interest in [me]. [It was the] same in [postgraduate study where junior staff] were expected to be these robots that could do everything. I think I have accepted that it's a really stressful job and that maybe people have poor coping strategies and even if they are coping, just checking up on people you know - 'what's going on?', 'how's your relationship?' Things like that - more communication. (Josh)

Chris advocates for compulsory education and counselling support across the

armed forces, especially for recognising signs of un-wellness and wishes he "had someone to talk to" prior to his offending, calling for a cultural level change that challenges masculine practices that inhibit help-seeking behaviour.

I think not only the army but everyone [would benefit from a] greater awareness of depression. I suppose at the end of the day greater awareness from commanders looking at their soldiers, or friends looking at their friends and saying 'look hey you need help, something's going on, speak to someone'. I suppose in the army's case they need to order their soldiers to have counselling. If something happens that going to adversely affect their soldiers, get some counselling because their soldiers are going to be better for it. (Chris)

Josh's masculine identity depended on his academic success and independence. When facing failure the possibility of asking for help was incomprehensible to him.

In our family we never, asked each other those sorts of questions...I never wanted to ask my parents for help because I was supposed to be this successful independent son who'd achieved this, this, and this. I knew that things were going badly and I could have rung up mum and dad and said 'look I'm really unhappy at the moment, can I come and live at home for a few months?' but it never crossed my mind to do that because that's not the done thing. (Josh)

For Josh, establishing networks of open communication for men is vital in preventing child sex abuse. He reflected that changing the culture of heteronormativity where people both recognise and feel they can intervene and offer support when they notice a friend is struggling, or acting harmfully to others, would go some way to preventing

child sex abuse.

I think that people should take a deeper interest in the lives of the people around them. When I was [offending] I was living in a flat with 4 others and there were people coming and going in my room and no one said anything. It's me that was doing it, I'm not blaming them or anything, but things could have been completely different if one of my flatmates had said 'oh who was that girl she looked kind of young what's going on'? It has made me think a bit about the people around me, is there anyone around me in trouble? (Josh)

More specifically, exposing heterosexual normativity by challenging the representations of child sex offenders as the other was a site for intervention for Chris.

Sexual offending is a huge thing and it's happening all the time and in places that you wouldn't expect it to be happening and yet it's probably the least talked about thing in the world. (Chris)

Chris was unable to recognise the grooming that preceded his offending as his understanding of child sex offending was through the representation of the monstrous other. Not recognising himself in that representation at the time of his offending, during the interview, he was able to reflect on the moments in the process where he might have been able to stop the trajectory of grooming he was undertaking.

I suppose for me being on the outside seeing that sort of thing happen to someone else then I could step in and say 'hey you know this is what's happening? You've got to be careful, you might need to go and see someone, do talk to someone because this is what's going on' ... I think it would [help] but I also think that a lot of people would sort of brush it off 'oh it won't happen to me, I'd never do

that sort of thing you know' I used to say that all the time 'I'd never do that I hate people that do that' but yet that's exactly what I did because all you really see is that end effect of the end offending, you don't see what's gone on before. Had I known about the build up to [offending] then I could have gone 'hold on whoa this is what I'm doing'. So I suppose the awareness of how it builds up and what leads up to it [would be helpful]. (Chris)

The purpose of this research was to gain insight into the lives of child sex offenders to provide possible points of intervention that could prevent child sex offending. The analysis of the men's narratives identified the relations of power and powerless between men and between men and women as they negotiated their masculinity. The narrative analysis articulates the relationship between hegemonic masculinity and child sex offending, where exploitative masculine sexuality confirmed their gendered identity. The examination of child sex offending in terms of what it tells us about masculine social practices brought into view the normative sexual elements that are affirmed through child sex abuse. Listening to the stories of Josh and Chris provides an insight into pre-emptive strategies that locate the possibility for transformation in changing relations in the homosocial bond.

Discussion

The two case studies, drawn from a larger study and analysed in this paper aimed to extend our understanding of preventing child sex offending by attending to masculinity in the context of the hegemony of men that enables men to exercise individual and collective power in relation to women and children. Omitted as a construct from the predominantly clinical and forensic investigations of child sex offending, masculinity provided a site for interrogating

the homosocial bonds that bind men in relationships of power and powerlessness through the dominance of a form of hegemonic masculinity and the subordination of alternative masculinities. Engaging with the case studies of Josh's and Chris's experiences of masculinity provided insights into the trajectories of their sex offending against children that began in their own childhoods, families of origin that were steeped in the privilege and dominance of men, the valuing of manly masculinity, and the dominance and subordination of women and children. Throughout their childhoods and into adulthood, Josh and Chris repeatedly encountered the dominance of manly men and sanctions, often violent, against alternative masculinities within their families and other social spaces and institutions.

Although there are distinct differences between the two cases, they come together through the operation of hegemonic masculinity and heterosexual relations. As a system of social power relations among men, hegemonic masculinity is enacted to produce the characteristics of the manly man as a figure of the successful achievement of masculinity (Gough, 2006; Messerschmidt, 2000b). For Josh and Chris, the location of the manly man within the homosocial organisation of men's heterosexual relationships was disciplined through a regime of violence against alternative masculinities. The institutionalisation of gendered social power relations limited space for subversive performances of masculinity where the failure to perform as a manly man within the social hierarchy was sanctioned by physical punishment or emotional abuse. Real or perceived failure intensified the relationship of sexuality to masculinity through relations of power among men and between men and women.

Significant to their narratives was the irrelevance of their mothers, except as subordinate to the manly men in their families. The prevailing figure of the manly man excluded an account of women other than as inferior and as men's subordinate. The feminisation of emotional expression and the subordination of women converged to

threaten successful masculinity if emotional connectedness was felt or enacted. Unable to access compassion for the subordination of women in their lives, women were positioned within the homosocial bond as objects of desire and sexual exploitation in the men's self-performance of sexual gratification.

What emerged through the analysis of the men's narratives was a distinctive set of gendered social power relations; when their power was compromised because of their relationships with other men, child sex offending became a particular practice to achieve the successful performance of a manly man for themselves. Within the narrow confines of the manly man, the men deteriorated to a point where they committed offences that had previously been unthinkable or abhorrent to them.

We recognise the limitations of analysing only two case studies of experiences of masculinity in the lives of child sex offenders. Nonetheless, this study indicates that the absence of gender analysis from criminological and psychological approaches limits opportunities to deepen our understanding of the ways in which gendered power relations and the sociocultural construction of masculinity are implicated in child sex offending. By enabling Josh and Chris to engage in reflective conversations about their experiences of masculinity, and the development of their identities as men, this study draws attention to the crucial importance of sociocultural phenomena that is often ignored when criminological and psychological research and interventions focus on treating deviance and constructing child sex offenders as monstrous others (Cowburn, 2005; Flood, 2002; Messerschmidt, 2000b).

Despite differences in their life-stories of masculinity, Josh and Chris exemplify normative understandings of gender and tell of how they specifically operated in their lives to produce material practices of authority, control, independence, competitive individualism, aggressiveness, heterosexualism, and the capacity for violence, including sexual violence. The interplay of power and powerlessness in their

social and familial relationships with other men produced the accomplishment of a masculine construction of 'manliness' as an imperative for them. They recognised the serious consequences of failing as a 'manly man,' intensifying their self-performance of hypermasculinity and enabling the conditions under which they sexually offended against children.

Through storying their experiences of masculinity in the interview context, Josh and Chris' reflections and our analysis of their cases provide insights into the kinds of services that could be provided in communities, to provide pre-emptive interventions through transforming the meanings of masculinity and opening spaces for social acceptance, among men, of alternative masculinities. Rather than the reactive, individualistic approach offered within psychological treatments of men who have already offended, psychologists and other providers have the opportunity to initiate sites, such as group programmes (including clinical interventions) or community conversations, where men are able to reflect on their relationships with each other, with hegemonic masculinity, and with the effects of power and powerlessness in their relationships with other men, as well as with women and children. Community education and mobilisation to transform the meanings of masculinity alongside services that allow men to seek help before they sexually offend, without fear of the stereotype of the monstrous other, could enable men like Josh and Chris to shift the imperative to perform themselves as 'manly men' and pre-empt their offences against children.

As researchers and practitioners located variously within community and clinical fields, we argue that it is the ethical responsibility for all psychologists to be critically reflexive of the dominant practices of masculinity to transform understandings, minimise harm and maximise protective aspects/strengths of men as a responsible response to the prevention of child sex abuse.

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An Angel at Your Table: Mentoring and domestic violence recovery

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There are many services that assist women in recovery from domestic violence. This can be a lengthy process and requires sensitive and skilled interventions. This article describes an internal evaluation of an initiative that uses mentoring as a model of support, the Doncare Angel for Women Network (DAWN). DAWN trains and utilises volunteers to support women in recovery, as mentors or 'personal champions'. This program has been operating since mid 2007 and clients are asked to complete mental health inventories before and after their DAWN experience. Entry and exit interviews are also conducted with clients and volunteer 'Angels'. Indications are that support from this program assists women to remain safe and to regain mental health, confidence and hopefulness. The DAWN Program emerges as a cost-efficient, practical, and manifestly positive means of assisting recovery for women from domestic violence.

The support helped me hold myself and my children up without falling apart. (Client: Vivien, Post-DAWN Questionnaire)

Recovery from domestic violence can be a long and troubled journey; it is a journey back to self after trauma has stripped you of safety and confidence. Each woman's journey is unique to her situation, affected by the availability of suitable support and resources, and by individual experiences and resilience. Such recovery is a long process for most.

Those who have worked with survivors of domestic violence, in a supportive or therapeutic role, know that the effects are dire, diverse and persistent. Whether the abuse includes physical or sexual assault, the psychological impact stems not from bruises and broken bones, but from broken hearts. It stems from humiliation, manipulation, betrayal, shaming and constant disparagement. The effects are similar to brain-washing. Contrary to common belief, there is evidence that women resent and fear psychological abuse and its effects more than physical abuse (Follingstad et al., 1990). And any kind of violence has a psychological impact, whether the abuse is physical, emotional, verbal, or some other manifestation of abusive and controlling behaviour.

While women may need medical attention, usually for a number of days or weeks, the psychological healing can take many years. This is one of the reasons that domestic

violence is the largest contributor to death, disease and disability in Victoria (VicHealth, 2004). Much of the support funding goes to short-term and crisis services, and many studies have recommended more long-term support services, including Patton (2003) and O'Brien (2006).

In 2007, a recovery initiative committed to the long term recovery process that many women require commenced in Melbourne's eastern suburbs, called the Doncare Angels for Women Network, or DAWN. This article describes this mentoring model and presents the outcomes of a five-year internal evaluation from the perspective of the women assisted by the program, and feedback from the volunteers.

The DAWN Program

In late 2001, I took a position at Doncare, a community welfare organisation, managing a Counselling Program that offered over 3000 appointments per year. At that time there were no programs specifically for women or children who had lived with violence at home, and with CEO support, we set out to remedy this, finally securing funding for support groups in 2004. From my involvement in Doncare's counselling services, I had observed how well women recovered once they were safe and re-connected to the community through counselling and support groups. A common thread in the lives of these women was the lack of social support.

Domestic violence is an alienating experience in so many ways, cutting victims

off not only from the people who might support them, but also from their faith in themselves. There is only so much a worker can do to reconnect people positively with their community, and usually workers are more likely to connect clients with other services. What it seemed these women needed was a way to reconnect with other people, other mothers, to make new friends, to take up or renew their interests and to find ways to once again live fulfilling lives. Antidotes to misery (depression) and worry (anxiety), such as the capacity to find joy and to remain hopeful, are important, and in the case of those who live with abuse, the other vital factor is the attainment of safety. A long-standing awareness amongst clinicians of the complex recovery process for women and children after domestic violence, together with the desire to create opportunities for women and their children to be supported along this path, was thus the progenitor for the Doncare Angels for Women Network Project (DAWN).

This paper documents an evaluation of the DAWN Program after the first five years of client service. A further evaluation of the most recent three years of the program is about to be undertaken.

The DAWN program sits within a suite of supports that Doncare offers to women who have experienced the impact of domestic violence, including support groups, counselling and practical and financial assistance. Many women who are trying to regain their mental and/or physical health are also living in reduced financial circumstances. They often cannot afford services or goods that most families take for granted. Small grants have been made available to women for such expenses as computer training, self-esteem courses, driving lessons, necessary medical expenses and essential bills, moving costs and short term respite.

DAWN provides long-term support to women who have experienced domestic violence with the primary intention of speeding the process of recovery. The aim is to improve the safety, confidence, and community connectedness of abused women

(and their children), thus improving their mental health and their ability to manage their lives, their children and their capacity to contribute to the community. This is done through a mentoring process, where volunteers ('Angels') are matched with a client to provide in-home social support, assistance with practical issues, and companionship. The program works to combat feelings of shame, anxiety and isolation that are common in women after leaving a relationship with an abusive man, especially given that most clients have been forced to relocate and to live in reduced circumstances.

Clients are referred from other Doncare programs, women's refuges, welfare services and police. Most clients have dependent children, and many therefore still have contact with the man who has abused them. Women need to be safe in order to be matched with a volunteer, although many still have concerns about child contact handovers and continued harassment of some sort. Women do not receive home visits unless staff are comfortable that it is safe to do so. Staff discuss safety concerns with clients at assessment, including current intervention orders and access arrangements. One client had a 'phone Angel' for some months until she was safe to receive home visits.

The program received 72 referrals in the first five years, and about one quarter of those were deemed not suitable for the program, or did not go through to matching. This could be due to simple reasons such as a client moving out of area soon after referral, but sometimes decisions are made that a woman is perhaps not yet safe enough to be home visited by a volunteer. Other reasons include a client having serious immediate mental health issues, or the referral being more suitable for another program. Clients not accepted into the program are referred to alternative services. Some DAWN clients are also accessing other services, such as counselling. Angels often alert the Co-ordinator of the need for other services, and facilitate linkages, some attending case conferences as a support person for the

client. Clients remain in the program from 10 to 24 months, with most being in the program for between 12 and 15 months.

Doncare recruits women as volunteer mentors ('Angels') to provide weekly domiciliary support to women clients for a twelve-month period. Angels are recruited through brochures distributed to local services and notices and articles in the local paper. These women come from a wide variety of backgrounds, and the program looks for women who are practical, non-judgemental and have good boundaries so they can maintain a semi-professional relationship with their client and the agency. Over the years the program has been operating, more than half these women have themselves had experience of domestic violence, either directly or through friends or family members. They need to be well recovered themselves if they are to support someone else, and to tolerate the pressures of dealing with the stressors being experienced by their client. Not all volunteer applicants have been accepted into the program. The most common reasons for this are that some are still too close to their own experience of domestic violence, or they are not deemed to meet the selection criteria to perform the role. Monthly Team Meetings for the Angels include some aspect of professional development as well as time for debriefing. Individual telephone and email support is always available.

The volunteers usually meet with clients weekly, either at the client's home or they go out together, such as to a park or coffee lounge. Their role is promoted as 'skilled companionship' and can include advocacy, personal support and attendance as a support person at meetings and appointments. Angels help clients to access services such as financial counselling, women's support groups, and children's services. They advocate for their clients with the Department of Housing, Centrelink, legal services and in locating services for their children. They may attend court with clients, as well as parent-teacher interviews, case conferences, Victorian Civil and Administrative Tribunal hearings and

medical appointments for issues ranging from tooth extractions to chemotherapy.

In carrying out this role, the Angels use a great deal of creativity and compassion. For example, one Angel was very concerned about her client who had signs of having an eating disorder, and would not eat when stressed. The Angel began taking home-made soup with her to visit this client. This assisted the Angel to feel she was being useful, made it more likely that the client would share the food, and most importantly led them both to being able to discuss this issue. Some join a community activity with their clients in order to encourage a return to participation in social activities and to improve mood and anxiety levels. Over the last few years Angels have participated with clients in dancing classes, visiting art galleries, and exercise programs. Some Angels assist those who have young children by going to parks or helping with household routines and management. One Angel, who was supporting her client in her studies to be a qualified beautician, was the client's first model for a facial. Many clients liken the relationship to their 'Angel' to a mothering relationship.

It was so reassuring to have (my Angel) to visit. She is like a mother figure. The mother I have always wanted and needed.

(Client: Grace, Post-DAWN Questionnaire)

Five-year Evaluation of the DAWN Program

The rationale for the evaluation of this program was to provide the agency with information about the effectiveness of the program, and provide learnings about future directions. It specifically aimed to capture preliminary outcomes for participants and mentors and to identify areas for improvement in program design and implementation. Funding did not permit a formal external evaluation, but the agency was strongly committed to tracking outcomes where possible in as rigorous a way as could be managed despite staffing constraints.

A number of processes are incorporated into the DAWN program's

procedures to assist in evaluating the program's effectiveness. Clients are asked during the assessment interview what are their hopes from the program, and also complete questionnaires at that point. Exit interviews are held where possible and 'Angels' are also asked for verbal and written feedback. For the purposes of the evaluation, interviews were also conducted with the DAWN Coordinator, to gain a fuller picture of the successes and challenges that arose in the program. This data was used in the evaluation discussed here. Names have been changed, as well as identifying details from client stories to protect anonymity.

Clients are asked to complete two standard inventories at the beginning and the end of their involvement with the program: the Depression, Anxiety and Stress Scale (DASS21) (Psychology Foundation of Australia, <http://www2.psy.unsw.edu.au/dass/>) and the Impact of Events Scale (Weiss, 2007). These inventories are designed to assess levels of anxiety, stress, depression and trauma symptoms.

During the first five years of the program, 32 clients completed the inventories at the beginning of their DAWN experience (at assessment). Twenty-eight clients completed the inventories at the end of their DAWN experience (at closure). Combined pre and post DAWN data thus reflect the responses of 28 of these 32 clients. Not all clients completed the evaluation forms, for a number of reasons. Some had to move out of area with short notice, if public housing became available or they were located by an ex-partner; some were not sufficiently literate in English to be able to complete the evaluation forms; some declined because they were too busy with court or children; and in some cases the clients lost contact for other reasons.

Before commencing with their volunteer Angel, clients are also asked to complete a third questionnaire developed for the program that asks clients to rate themselves on a 5 point scale according to the following continua:

- Calm ----- Agitated/Angry
- Happy ----- Sad

- Safe ----- Fearful
- Ability to manage their problems (Excellent – Poor)
- Hopefulness (Excellent – Poor)

This questionnaire also asks clients how and when they would like to be supported by their 'Angel'. Some clients prefer weekly contact, some more or less often, some want to pursue interests, some want support for court or children. Both client and volunteer need to have compatible availability, such as whether evening or weekend support and/or email or phone support is required. Other matching criteria include shared interests and client requests regarding age or activities.

At the end of their time in the program, clients are asked to rate themselves according to the same continua as the pre-DAWN Questionnaire. This questionnaire then asks clients to comment on what they have gained from the program, and whether they have any suggestions to improve the program.

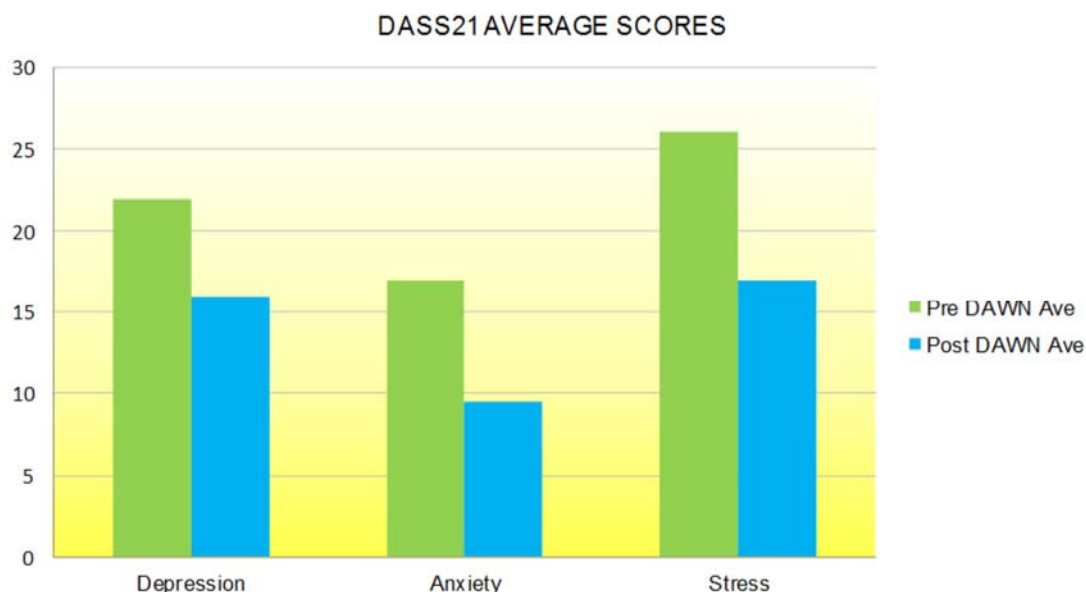
Evaluation Findings

Much of this report is told in the words of clients and volunteers taken from evaluation forms and interviews, as this provides a powerful and authentic first hand account of their experience.

Depression, Anxiety and Stress Scale (DASS21). The Pre-DAWN scores for most clients fell within the Severe or Extremely Severe range on one or more of the three scales (i.e. Depression, Anxiety and Stress), each scored from 1-30. High scores on the DASS21 alert the clinician to a high level of distress in clients and warrant further exploration. The overall average (the average of the average scores on the three scales) was 21.6. The comparative data in Table 1 show that the average scores on all scales had reduced considerably during the DAWN involvement of these clients, with the overall average having dropped from 21.6 to 14.1.

Depression: Average reduction from 22 to 16, or Severe to Moderate.

Pre-DAWN, only 7 out of 32 women scored in the normal or mild range on this scale, and 8 scored in the moderate range. Seventeen women had depression scores that

Table 1: *DASS21 Results, Pre and Post DAWN Averages*

indicated severe or extremely severe depression. Post-DAWN, of the 28 that returned data, 11 women scored in the normal or mild range on this scale; and 9 scored in the moderate range. Only three women remained in the Extremely Severe range. The three women whose depression scores worsened had life stresses that were clearly contributing to their depression.

Anxiety: Average score Pre-DAWN was 17, with 8 clients reporting scores in the Normal to Mild range in their Pre-DAWN assessment and 14 clients scoring in the Extremely Severe Range. The average score on this scale Post-DAWN, was 11 (in the low moderate range), with only four clients still reporting Extremely Severe Anxiety scores and 15 clients now in the Normal to Mild range. Only one woman's score had risen from a lower category to Severe. This woman was in the midst of a protracted property battle in the Family Court. This indicates a significant reduction in anxiety scores Post-DAWN.

Stress: The average score on this scale Pre-DAWN was 26 (Severe range). The average score on this scale Post-DAWN was 19 (Mild range). Pre-DAWN, only 8 out of 32 women (28%) scored in the Normal or Mild range on this scale; while Post DAWN this had increased to 17 out of 28 women

(61%). The Stress Scale tends to reflect life stressors, the most common faced by DAWN clients being Family Court processes, stalking and housing stress.

Someone is hanging in there with you so you keep hanging in there.
(Client: Patricia, Post-DAWN Questionnaire)

Impact of Events Scale. The Impact of Events Scale (IES) measures subjective distress caused by traumatic events. It also has three sub-scales to measure three clusters of common trauma symptoms. These are:

- Intrusion: e.g., nightmares and intrusive thoughts and feelings
- Avoidance: e.g., emotional numbing, avoiding thoughts or feelings about the event
- Hyperarousal: e.g., anger, irritability, jumpiness, startle responses.

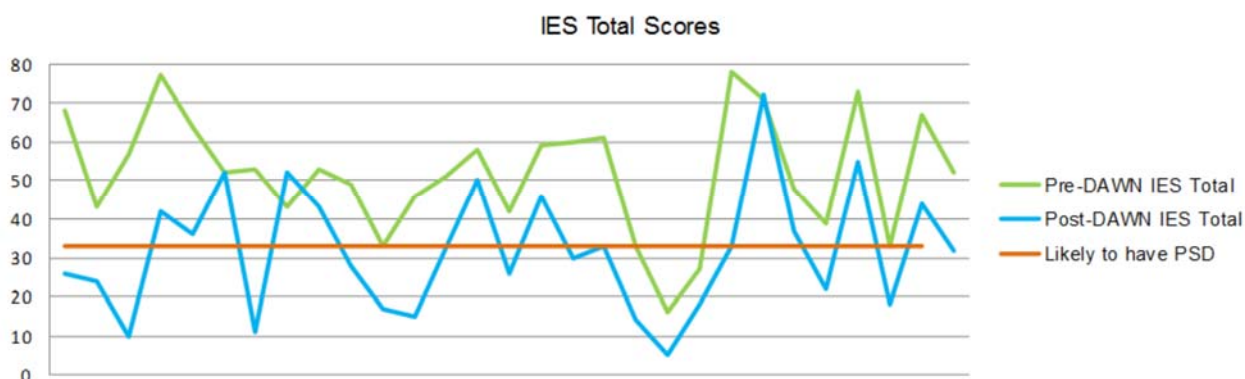
A total score above 33 indicates a likelihood of Post-Traumatic Stress Disorder (PTSD). Table 2 presents the Pre- and Post-Dawn scores for the 28 clients who completed the IES both times.

One of the most positive outcomes of the DAWN Program is that most women reported significant improvement in their post-trauma symptoms following their experience with the DAWN program. Only one woman reported an increase in trauma

symptoms and one woman’s scores did not change. Most significant is that when originally assessed, 30 of 32 clients had scores above the point which indicates a likelihood of Post-Traumatic Stress Disorder

warranting further investigation. These women were offered individual psychological support. The average Pre-DAWN Score was 52, and the average Post-DAWN score was 31.8, below the clinical

Table 2: IES Totals Pre-DAWN and Post-DAWN



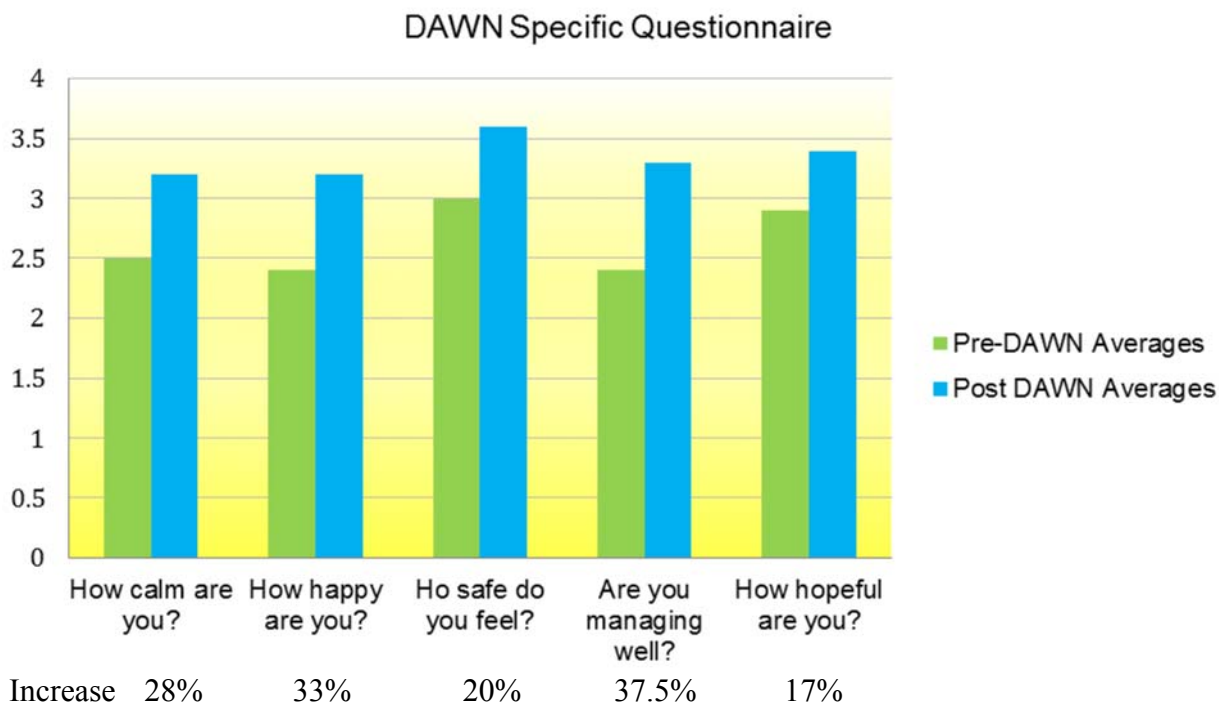
Shirley’s story¹

Shirley did not leave her husband, he left her. She had presented at Doncare long before this happened, weeping bitterly and saying “I hate my life. I hate myself. I hate my home.” In her counselling sessions she revealed a long history of anxiety and depression, and told tales of her husband’s controlling behaviour. He allowed her no say in decisions, even taking her inheritance when her mother passed away and not allowing her access to it. He criticized her cooking, her hair, her mothering and also for shaking when he shouted at her, which to him proved her inherent weakness. He regarded her as completely inadequate, and she seemed to believe him. However, when he left, she was clear that she wanted to live a very different life without him, although she did not know how. She was so fearful of his presence even after he left that she slept on the living room floor rather than in the marital bed.

Before being matched to her Angel, Shirley said “I had a very difficult time with my husband because he was head of everything. I couldn’t make even a simple decision.” Shirley’s Angel found this to be absolutely true. When they went shopping, Shirley could not choose which tea towels to buy. She was 61 years old.

Post DAWN, Shirley’s scores on all scales had improved. Responding to patient encouragement, she took to independence with enthusiasm. When asked about a ‘turning point’ for her, she recalled a particularly important day when she realised she could choose herself what she would buy her grandson for his birthday. With her ‘Angel’ Shirley opened her first bank account, learned to drive, and began to cook and eat what she wished. Six months later she travelled overseas to visit relatives, and a year later sold her house to buy a home where she felt no fear.

Table 3: DAWN-Specific Questionnaire: Averages



cut-off point, although still significant. All Doncare’s Domestic Violence, Advocacy and Support team (DVAS) workers have come to expect high degrees of post-traumatic stress in clients, many of whom are referred to counselling and other services as part of the assessment process. The Post-DAWN scores indicated improvements in 26 out of 28 women. Post DAWN, the percentage of women whose scores indicated PTSD had dropped from 94% (30 out of 32) to 31% (11 out of 28). Reduction in symptoms occurred across all three sub-scales to a similar degree.

I feel perfectly comfortable with her – there is no-one else in my life where I feel like this. (Client: Sarah, Post-DAWN Questionnaire)

DAWN-specific Questionnaire. The DAWN-specific pre-and post-program questionnaire asked women to rate themselves on five continua along a scale of 0 to 5, as shown above in Table 3.

Women reported feeling calmer, happier, that they were managing better and were more hopeful. The most marked average increase (37.5 per cent) was in the self-reported confidence in their ability to

manage their problems. Some women reported lower scores on their Post DAWN Questionnaire, but most reported improved functioning and mood.

- 25 women (90%) reported being more calm,
- 24 women (87%) reported feeling happier,
- 22 women (78%) reported feeling safer,
- 23 women (83%) reported feeling more confident, and
- 23 women (83%) reported feeling more hopeful.

However nearly one quarter of women in the program reported feeling less safe Post-DAWN, and this was usually due to continued harassment from their former partner, and in one case was due to a recent assault by the woman’s former partner. Although a thorough assessment of physical safety is part of the assessment, many clients are mothers of dependent children and still have some degree of contact with their former partners in relation to child contact arrangements.

Table 4: *Pre and Post-DAWN results for Client: Louise*

DASS21	PRE-DAWN	POST-DAWN
Depression	Severe	Severe
Anxiety	Severe	Mild
Stress	Severe	Normal
IES	46 (indicating PTSD)	15 (with a marked reduction in all categories of symptoms)
Hopefulness	0/5	3/5

I'm safe, my children are safe. The only thing we have to escape from these days is the past. (Client: Kerry, Post-DAWN Questionnaire)

Qualitative data. As well as seeking scored responses, the evaluation questionnaire included open questions that gave clients an opportunity to describe their experience both before and after DAWN, and to make suggestions about the program. One before-and-after example is that of Betsy, who before the program said "I have never felt safe." In her post-DAWN questionnaire she wrote "I am learning to believe in myself and my thoughts."

Individual Case: "Louise". Louise entered the program as a depressed and anxious young woman, who was receiving threatening text messages many times per week from her ex-partner. So far, the police had failed to act on these, despite the fact they were breaches of an Intervention Order.

I don't really see any future for myself. I'm just going through the motions of staying alive, largely.... It all seems too big and I lack confidence in the police and legal system to bring the promised freedom. (Client: Louise, Pre-DAWN Questionnaire)

After 14 months in the program, Louise had forged a new path that included returning to study and moving to better accommodation. Her 'Angel' had accompanied her to both

magistrates Court and Family Court, and described Louise as being calmer and stronger. While Louise still scored high on the Depression scale, and complained of being 'lonely', all other domains showed marked improvement.

The support that (my Angel) gives me, encouragement, practical, fun, caring, is a light in my dark tunnel that is getting bigger and stronger daily.

(Client: Louise, Post-DAWN Questionnaire)

Perspectives from the Angels

I have had a temporary daughter and 3 temporary grandchildren. (Stella, Angel)

A major key to the success of the DAWN Program seems to be the unique relationship between the mentor and the client, sitting somewhere between a paid worker and a friend, with all the safety and respect of both. The 'Angels' were asked for feedback about their experience as volunteer mentors in the Program. Some of this was through face-to-face interviews, and some through written feedback forms and volunteer group discussions. They commented on many aspects of the program and illustrative comments are grouped below into themes.

Observations about the mentoring process.

Staff are accustomed to some anxiety on the part of both the client and their 'Angel' prior to the matching meeting, and

they are sometimes anxious themselves about whether they have chosen the best mentor for the client. They are often amused by the frequency of later responses such as ‘How did you know?’ and ‘She’s the perfect match for me’.

“I feel that I have been perfectly matched with my client. I really love her personality and her strength and character.”

“Looking back, I believe that I transitioned from an ‘occasional support mate’ to being a coach or facilitator, to a full on case worker. Now, as we wind down, the transition is reversing.”

“It was interesting forming a relationship with a stranger that sat somewhere between professional and personal.”

“I think she trusted me to listen and understand and accept her reality without trying to offer solutions, and that was very important to her.”

“The simplicity of the program is what works – it leaves you to be flexible and work in with your clients.”

Observations about clients and their progress. Most Angels commented on their clients’ improved confidence and self-esteem, and their ability to manage, be a better parent, and cope with less support. Many also commented on problems their clients were having with practical day-to-day issues, such as parenting, housing, social isolation and financial issues.

A few clients commenced new relationships during their time in the program, and in some cases this proved problematic with the new partners abusing the clients. One was assisted to get an Intervention Order; another successfully broke off the relationship. Although these relationships were unhelpful, the learning for these women was profound.

“I haven’t always been able to respond/visit when (the client) wanted me to – I think this has been beneficial for her, reducing

her dependence on me and maybe helping her to realise that she can cope herself.”

“Her ability to manage daily life has definitely improved although she still struggles with issues of establishing routines... “

“She is more hopeful about the future and her plans are more realistic, therefore less subject to deflation.”

“I believe this relationship has led her to ‘give myself permission’ to care about herself.”

“(My client) is studying and looking for a job. She dresses much nicer and laughs more often.”

Observations about clients and their children. The DAWN program is always mindful of the care of children, and their recovery and progress delights their mothers and their ‘Angels’. One common challenge is that volunteers may work with a much younger mother who has different views or expectations about parenting from their own. They have to support without judging, and are often asked for advice when in fact the volunteer training encourages them not to give advice. Staff members support the ‘Angels’ to offer suggestions or ideas and watch the outcome. One example was an ‘Angel’ who was a kindergarten teacher and was concerned about the amount of time her client’s children spent watching television. In this case, staff helped the ‘Angel’ work with the children to each create a scrapbook about themselves, which they compiled beautifully despite the ever-present television backdrop. Usually, despite their differences, the ‘Angels’ are impressed with the clients’ efforts to mother well in the midst of their experiences, and find ways to gently support and encourage.

“She does really well as a mum. Her daughter still struggles with not being able to see her Dad.” (contact disallowed due to child abuse)

“Manages well, has some

difficulty imposing boundaries for children's behaviour due to disparity in father and mother's expectations."

"My client has taken on board many of the parenting issues we have discussed and has emulated some of the ways I interact with her children. All the children now attend appropriate school regularly."

"My client frequently demonstrates a more positive and loving attitude towards her children."

"All the children appear happier now that they are developing more age-appropriately."

Observations in relation to those still struggling. Not all of the women were ready to finish at the end of the 12-month period, and about one in five matches were extended for a further 3 to 12 months. This is advised and facilitated according to individual circumstances, such as reduced safety, or mental or physical health issues, as in Jessica's case. Some of the comments from these Angels were:

"I know at times she would have a glimmer of insight into how much she was abused by both her husband and her parents and then it would all disappear again ... so maybe it was the planting of a seed that will eventually grow."

"I found the debrief last week extremely beneficial... It left me feeling that maybe I had supported her through the worst and therefore given her a bit more strength to move on."

"At times it was exhausting, emotionally draining and left me feeling totally inadequate – but the support from DAWN and my family (plus a scotch) always got me back on my feet."

Observations about the Angel team.

Volunteers in the DAWN Program receive a three-day training program, which covers information about domestic violence and its impact, the role of an 'Angel', and the way the program works. They also attend a monthly meeting which allows time for debriefing and also for professional development, often with a guest speaker. Angels are encouraged to call the coordinator at any time, and they complete a short report after each client visit. Contact sheets completed by volunteers are a good way for the co-ordinator to be made aware of issues that need attention and other supports that may need to be put in place. The evaluation incorporated reflections from some Angels on the support they received from Doncare and their fellow Angels.

"Networking with the other Angels is a very special privilege. I am learning so much from them, especially those who have survived domestic violence."

"My experience of being in that team of women with (the Doncare staff) offering so much support and appreciation is quite amazing."

"I enjoy being an Angel so that I can be there for someone who knows that I will not judge them and will be a listening ear and a shoulder for them to cry on."

Discussion

The differences that occur in many women's lives during their DAWN experience can be significant. There are existential improvements in functioning, and in women's core beliefs about themselves. These seem to free women up to make decisions they could not have imagined making only a year or two earlier. Some take on employment and study opportunities they never imagined themselves being able to achieve. One woman bought a small farm in another state, something she had always wanted to do. Many attend courses such as skills development or parenting classes, and change patterns that have seemed intractable. There is something peculiarly heart-

warming, if not wonderful about the impact for these clients of having this very special relationship in their lives, and it often comes when they have lost hope in relationships altogether.

Of course, the encouraging outcomes for women in the DAWN Program may have occurred for these women without the assistance of the program, but the Doncare team has noticed faster and greater improvements in mood and functioning for those in the program than among many women who only access support groups or counselling. This evaluation in no way definitive proof of the effectiveness of this type of mentoring; it is offered as a promising cost-effective recovery alternative, and the responses from both clients and 'Angels' shows why the team has such faith in this initiative.

This program can only be effective if it is well resourced by experienced, professional staff. The complexities of the work involve assessment of safety, mental health, and sometimes child protection issues, involving a wide array of services from police to legal and allied health professionals. The assessment of referrals to this program is both highly sensitive and highly complex, and needs to be in the hands of staff who are very experienced in the field of domestic violence recovery. The evaluation measures outlined in this report leave no doubt that DAWN staff assess and assist women with alarming levels of depression, anxiety and trauma symptoms. Some have long standing mental health issues and many are still living in fear of their former partners. Linking clients to other services is important throughout the life of the Program. These links need to be active and timely.

Home visits to clients, and the personalised matching of needs and interests, as well as the flexibility of the nature and timing of support seems to be a vital factor in the enthusiasm of clients to participate. Volunteers engage very well with their clients and demonstrate a strong commitment to the program. They seek support when needed and demonstrate appropriate support to each other with enthusiasm and

compassion. Volunteers can identify changes in client attitudes and behaviour. Some of the changes have been significant and volunteers notice a clear and positive impact on the children of DAWN clients.

The feedback received from the Angels shows what a tremendous commitment they make as volunteers with DAWN. The experience for them, while enjoyable, can be demanding, challenging, and at times, they can be genuinely worried about their clients. The feedback confirms how important the training is, and how well supported they need to be, so that volunteers do not feel over-responsible or become distressed by the mentoring experience.

Conclusion

The DAWN program has proven to be one of the most cost-efficient forms of support that can be offered to women who have experienced violence. Up to twenty volunteers and clients can be supported through weekly home visits from a volunteer, supported by a part-time skilled worker with agency and supervisory support. Staff, volunteers and clients were universal in stating their belief that the program should be ongoing and more broadly available. The effectiveness of DAWN seems to lie in the following factors:

- careful selection of support staff, who need a background in domestic violence work and good counselling and case management skills
- mindful selection of volunteers and provision of ongoing regular support and professional development for this group. Regular meetings that bond the volunteers are part of this support process
- attention to safety and suitability when assessing clients referred to the program. Clients must be safe to visit and able to understand the nature and limits of a mentoring relationship
- a non-judgemental, client-directed and positive approach to recovery
- referral to other suitable support services as necessary, so that the volunteer knows that particular difficulties or issues are being dealt

with

- timely and sensitive responding to client needs, and to the termination process.

This evaluation has shown the DAWN Program to be efficient, practical, and manifestly powerful in an overwhelmingly positive way. Clients reported, through formal questionnaires and informal interviews, that they saw DAWN as an important factor in their recovery, and the program also provides an immensely rewarding experience for the volunteers.

Along the way we have heard terrifying accounts of women's and children's experiences, and inspiring stories of survival and growth. All clients have expressed immense gratitude to the service and some clients have expressed a desire to become an 'Angel' for DAWN in the future. The volunteers' endless patience and creativity, and staff members' level of expertise are both key to the program's success. Doncare is immensely proud of DAWN.

I miss my Angel – the title is 100% accurate. (Client: Kerry, Post-DAWN Questionnaire)

Jessica's story¹

The worker who referred Jessica regarded her as one of her 'most difficult' clients. Both Jessica's childhood and adulthood were full of abuse, and she was seriously and chronically depressed. She sometimes stayed in bed for days, relying on her older children to look after the younger ones. She had a history of difficulties with workers, who were often the target of her anger. Because she was abrasive, conversations often escalated to the point where Jessica would either hang up or refuse to return workers' calls. She was in hiding from her ex-partner, who had been extremely violent.

After a few months, Jessica's Angel described her as identifying "intense feelings of long-standing wounding, betrayal and disappointment", and being in a continual state of crisis. The 'Angel' assigned to Jessica was a practical, positive woman and a good problem solver, with plenty of patience and humour. The effect on Jessica was amazing. After several months, Jessica told the DAWN Co-ordinator "I have done more in the last four weeks than I have in the last four years!" This relationship was extended for a further nine months, in order for progress to be maintained and to ensure that Jessica could really manage on her own, as well as use her improved ability to engage with services to seek help in the future.

NOTE: Jessica's 'Angel' discovered early in the relationship that Jessica had long-standing dental problems and was often in pain, but had no money to seek the help she needed, and was terrified of dentists. The 'Angel' set about helping to find the funding and eventually accompanied Jessica to have her dental work done over a series of sessions. The 'Angel' told workers this was the 'door through which Jessica let (her) in' – into her life and into a life-changing experience. The trust that was built through this process led to Jessica finding the courage and hopefulness to make a different life for herself and for her children.

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related issues, as well in general counselling practice. Carmel was for many years the Director of Clinical Services at a Melbourne welfare agency, managing a large counselling program and developing a suite of domestic violence support programs for women and children. Carmel is the recipient of a Menzies Award (2009) and the APS Women & Psychology Elaine Dignan Award (2010), and is a Fellow of both the Australian Psychological Society and the Cairnmillar Institute.

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Note

¹ Case examples are in the writer's words. The writer was involved directly in assessing and supporting all clients in the program over the first five years and interviewed each of the women in these case examples as part of the closure process.

Author Biography

Carmel O'Brien is a Counselling Psychologist. After initially working in the rehabilitation sector, she has spent the last 23 years working with individuals and families who have experienced trauma, violence and

Protective mothers: Women's understandings of protecting children in the context of legal interventions into intimate partner violence

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There has been increasing recognition that children are harmed by witnessing assaults or abuse that their mothers experience as victims of intimate partner violence (IPV). At the same time, an expectation that mothers can and will protect their children from harm is widespread. This paper discusses how mothers' understandings of protecting their children are intertwined with the complexities of IPV in the context of legal interventions. We draw on accounts by mothers and advocates who participated in two qualitative studies evaluating of the kinds of services provided for them after criminal justice interventions brought their partners before a specialist family violence court in Aotearoa/New Zealand. Although we did not specifically ask about protection of children, crucial issues around their children's safety were frequently addressed by the women and their advocates during the interviews. We discuss how the women made sense of their responsibilities for protecting their children at different times during their relationship and how the meaning of protecting their children changed as they engaged with court processes and advocacy services.

In the literature on child abuse and neglect, protective mothers proactively safeguard their children from harm (Salter, 2014). Yet in the context of intimate partner violence (IPV), protective mothers are simultaneously subjected to an ongoing pattern of emotional, psychological, physical, sexual, and financial abuse: victimised themselves by their partners who are frequently their children's fathers or father figures in their children's lives. Violence and abuse often continue even if, or when victimised mothers separate from their partners, with child custody and access issues providing a context in which abusive ex-partners can use tactics such as abduction threats, child neglect or manipulation of access arrangements in attempts to regain control of the children's mothers (Elizabeth, 2015; Morrison, 2015; Toews & Bermea, 2015; Zeoli, Rivera, Sullivan, & Kubiak, 2013).

Intimate partner violence (IPV) is now also widely recognised as harmful to children (Coulter & Mercado-Crespo, 2015; Powell & Murray, 2008). Not only is there broader recognition of the co-occurrence of intimate partner and child abuse within households (Jeffries, 2016), legislation in Aotearoa/New Zealand, as in Australia and other western nations, defines child abuse so as to include

witnessing violence perpetrated by one adult against another within the household (New Zealand Domestic Violence Amendment Act, 2013; Banner, 2015; Hart, 2013). As Hart (2013) argues, this is a significant legislative change that has potential to recognise how coercion and control is experienced by children as abuse. Yet it also poses a further complication for protective mothers to safeguard their children from harm.

Legal and community interventions to protect women and children constitute a complex network of different legal jurisdictions, such as criminal and family law, as well as public policy settings that understand the problems of IPV differently (Powell & Murray, 2008). For example, while domestic violence legislation may provide for mothers to apply for orders of protection for themselves and their children, common law may also provide for them to be charged with failing to protect their children from their partners' violence, without recourse to defences that take account of her victimisation (Midson, 2014). Failure to protect laws are child-centred, while domestic violence legislation is victim-centred (Lindauer, 2012) and evidence from the United States (U.S.), Aotearoa/New Zealand and the United Kingdom (U.K.)

shows that mothers are increasingly subject to failure to protect laws in the context of IPV (Banner, 2015; Lindauer, 2012; Midson, 2014). Reviewing several cases across these jurisdictions, Midson connects the predominance of victimized mothers charged with failure to protect their children with social expectations that “a mother will go further in order to protect her child” (2014, p. 304).

In this paper, our concern with how mothers understand their experiences of protecting their children in the context of legal interventions into IPV arises from growing disquiet in the research literature with various tensions that arise at the intersections of social expectations and stereotypes with the approaches of disparate jurisdictions, statutory and community organisations involved in interventions to protect victims of intimate abuse and hold offenders accountable for perpetrating violence.

That mothers are widely expected to be able to protect their children from the harms of witnessing violence perpetrated against them is evidenced through Weisz and Wiersma’s (2011) U.S. study showing a broad consensus that mothers should be held accountable for not protecting their children from witnessing their abuse even when they cannot stop their partners from abusing them. These expectations are framed by social stigma associated with IPV victimisation where there is a public perception that victims of IPV are complicit with their perpetrator and stereotypes of victims as failing to protect themselves by staying with or returning to their relationship with their abuser (Meyer, 2015). Blaming victims for complicity with their abuser and the stigma of IPV victimisation have been associated with women and children’s reluctance to disclose IPV (Stanley, Miller & Foster, 2012), further entrenching the perception that women fail to protect their children by refusing to proactively seek help to end violence against them. In this context, the implication for mothers is that they might best prevent the harms of IPV by separating from their violent partner, seeking out the

help that might be needed to do so from the community agencies, like women’s refuges and advocacy services that can provide specialised support, or engaging with criminal justice or family court systems.

While not specific to the context of IPV, the common law duties of mothers to protect their children from harm in Aotearoa/ New Zealand largely involve notifying authorities, such as police or child protection services, removing the child from the situation in which they are at risk, or seeking help (Midson, 2014): those same proactive steps that the stigma of IPV makes difficult for women to take. In other jurisdictions, in Australia, Canada and the United States, children’s exposure to IPV is specifically included in definitions of abuse and neglect that are mandatory to report to authorities, with one U.S. state including the failure of a parent to apply for legal protection from violence within the family in their definition of child neglect (Mathews & Kenny, 2008). Perhaps paradoxically with the intent of the legislated definitions, disclosure of IPV is thus inhibited by mothers’ fears that their children will be removed from their care by statutory agencies for child protection (Keeling & van Wormer, 2012). Such agencies may also require mothers to undertake “self-improvement” programmes such as parenting training, or counselling that affirms a woman’s responsibility for any re-victimisation she experiences from her (ex)partner (Meyer, 2015) and re-asserts the victim-blaming social stigma of IPV.

Although the widespread expectations that mothers experiencing IPV can and should protect their children by separating from their violent partners, disclosing intimate violence and abuse within family court systems dealing with child custody after separation does not ensure that mothers’ proactive strategies to protect their children are recognised and supported. Family courts are reportedly lacking in lawyers, child advocates, mental health professionals, court appointed guardians and mediators who have specialised training in, or experience working with, the dynamics and patterns of IPV (Fields, 2008; Jeffries,

2016). Despite increasing numbers of custody disputes involving allegations of intimate partner and child abuse, as well as contemporary directives for family court professionals to consider the impact of IPV and child abuse in custody determinations, research across jurisdictions in Australia, New Zealand, the U.K. and the U.S. demonstrates an overriding assumption that children's best interests are served by ongoing relationships with both parents (Elizabeth, 2010; Flood, 2010; Jeffries, 2016). In Ireland, Naughton, O'Donnell, Greenwood and Muldoon (2015) found evidence that judges trivialised women's allegations of IPV and drew on idealised versions of nuclear families to support pro-access decisions.

The increased risk of violence to women who end relationships with abusive partners and the ways that controlling abusers use custody or access of children to continue abusing the child's mother are not considerations in many judicial decisions or in the evaluations of professionals whose expert advice informs those decisions (Fleury-Steiner et al., 2014; Elizabeth, Gavey & Tolmie, 2010, 2012; Harrison, 2008; Jeffries, 2016; Watson & Ansis, 2012). Research with mothers who have been involved with family court matters in the context of IPV has found cases where the court system explicitly failed to protect them from experiencing re-victimisation from their (ex)partner during court required mediation processes (Rivera, Zeoli & Sullivan, 2012).

Arguably, women who disclose their victimisation and the risks that their children face to the professionals and officers of family court are often those who meet the social expectations of protective mothers, since they are compliant with expectations that they will notify authorities and seek assistance to proactively safeguard their children. Yet most judges in the Naughton et al. (2015) study and in cases discussed by Salter (2014), pathologised or problematised women who were proactive for long-term protection of their children. In these cases, mothers had disputed decisions to allow contact between their children and their (ex)

partners, or removed their children from the country in which their (ex)partner resided when it became impossible to protect their children from further harm without doing so. A particular form of pathologising mothers who respond to fear and concern for their children's safety by challenging custody and access is the use of the construct of 'parental alienation' by many court evaluators, including psychologists, psychiatrists and social workers despite the American Psychological Association disallowing it as a psychological diagnosis and it being inadmissible in court (Davis, O'Sullivan, Susser & Fields, 2010). Mothers involved in cases where professionals working in the courts have minimised, trivialised or pathologised their accounts of victimisation by their partner and their concerns for their own and children's safety, may be understood as experiencing secondary victimisation through the victim-blaming, disempowering processes to which they are subjected as they take proactive steps to protect their children from further harm (Rivera, Sullivan, & Zeoli, 2012).

Researchers have also considered how professionals working with mothers in community and statutory agencies understand protection of children by women who are experiencing IPV. In an Israeli study using focus group methodology to investigate shelter/refuge workers perceptions of mothering by women in shelters, Peled and Dekel (2010) identified a deficit perspective of victimised women's mothering skills in the discussions with the participants. Although the shelter workers understood that any deficiency in maternal skills was excusable given their clients' victimisation by partners and the significance of the problems they were facing in their lives, little attention was paid to the women's strengths and competencies. The researchers also found evidence that a binary choice between 'staying' or 'leaving' their relationship operated with regard to women's responsibilities for protecting themselves and their children from their partners' violence. Leaving their partner was emphasised by the shelter workers as the

most appropriate response to abuse to enable to women and their children to live more safely.

In Australia, Douglas and Walsh (2010) investigated advocates' experiences of the way that child protection workers perceived the mothers they were working with. Participants identified victim-blaming and mother-blaming as key issues in their dealings with child protection workers, with the complementary concern that a double standard operated for mothers and fathers in cases where the women were victimised by their partners: perpetrators were perceived as 'good fathers' yet victimised mothers were held responsible for the safety of their children.

From research in community and courts, recent evidence provides support for Lapierre's (2008) description of a pervasive model of maternal failure and deficit influencing social policy and shifting focus away from perpetrators of violence. Mothers experiencing IPV potentially risk diverse sanctions relating to their children's experiences of their victimisation, as broadly as victim-blaming social stigma and as specifically as trivialising post-separation re-victimisation within court systems or punitive requirements from child protection authorities.

In the complexities of legislative, community and policy arenas where interventions to protect women and children from the harms of IPV are differently focused and co-occur with victim- and mother-blaming social expectations of violence prevention, literature arguing for better understanding of the dynamics and effects of IPV on victimised mothers has proliferated. For example, Stanley et al. (2012) highlight the dangers of assuming that separation from a violent partner reduces risk of harms from IPV since violence often continues after separation, and appeal to social workers to refrain from setting separation as a goal of intervention. Jeffries (2016) draws the legal profession's attention to research evidence on post-separation violence, including incidents where the severity of assault is lethal. Lindauer (2012) argues that it is unrealistic

for social workers and courts to have the expectation that victims will obtain orders of protection or separate from their partners, without accounting for the complexities of financial abuse and social isolation associated with IPV.

There have also been calls for understanding that IPV has negative impacts such as anxiety or depression arising from inequality of power and affecting mothers' parenting capabilities (see for example, Craigie, 2011). Midson (2014) argues for the legal creation of an 'affirmative defence' for mothers charged with failure to protect their child, taking account of the circumstances of her victimization when considering whether or not she could reasonably be expected to have taken the kind of proactive steps assumed to be protective, such as notifying authorities or removing the child from the risk of violence or abuse. In each case, the call for increased understanding of the way in which protective mothers' strategies for protecting their children are impacted by the dynamics of power and control in IPV seeks to re-dress a context in which social expectations and social stigma related to intimate victimisation compromise women's and children's ongoing safety in the context of complex legal interventions.

Increasingly in the past decade, there has also been more research attention paid to the meaning of protection of children in the context of IPV for those most personally affected (Lapierre, 2010; Nixon, Bonnycastle & Ens, 2015; Wendt, Buchanan, & Moulding, 2015). In a study involving adults who had witnessed IPV in their homes as they were growing up Buchanan, Wendt and Moulding (2014) found that participants did not expect their abusive fathers to protect them, and while some held their mothers responsible for their victimisation, many were ambivalent, sympathetic towards or puzzled by their mothers' repeated victimisation. While the researchers discussed the connection between the pervasiveness of mother-blame in social attitudes to IPV and the adult children's expectations that their mothers would protect them from their fathers' abuse

by leaving, they also found evidence of diverse and responsive strategies that the children recognised their mothers had used to protect them. Nonetheless, the mother-child relationships reported from these adult children's perspectives were intertwined in complex ways with the children's perspectives and expectations of their mothers' protection. For instance, women were more likely than men to report changes in how they understood their mother over time, and understanding of the complex implications of her victimisation, yet neither women nor men reported changes in their lack of expectation of protection from their fathers.

There has also been increasing research attention paid to addressing the perspectives and understandings of mothers with regard to their protection of children in the context of their own victimization. Two projects with women in the U.K. (Lapierre 2010; Radford & Hester, 2006) found that participants prioritised their children's protection and safety, providing and caring for them in ways they understood 'good mothers' would do, even while living in the threatening context of partner violence. Lapierre (2010) identified a lack of social recognition of the complexities of intimate partner violence that affected mothers' proactive strategies for protecting their children. Peled and Gil (2011) found that mothers were primarily concerned with creating a buffer between the children's lives and the violence that they themselves experienced. It was as if the women 'split' the two dimensions of their home-life in an effort to ensure their mothering was as unaffected by their victimisation as possible, and their children protected from the effects of witnessing violence. Such a difficult separation required the women to engage in multiple strategies aimed at keeping their experiences of emotional and physical pain from impacting on their mothering, by minimising the violence they experienced, being compliant to avoid arguments, remaining silent about their victimisation, and presenting themselves as optimistic and positive role models for their children. The success of the women's

attempts to keep the world of mothering separate from the world of victimisation is questionable, yet their strategies appeared to maintain their confidence in their mothering skills and preserve their dignity as good mothers who prioritise their children.

Similar protective strategies were identified earlier by Radford and Hester (2006) and more recently by Nixon et al. (2015). Among the additional strategies reported in these studies were the efforts of mothers to sustain the social perception of their family's stability and normality; their choices to leave the family home to prevent further violence or stay because their children needed a father (Radford & Hester, 2006); their attempts to seek help and support (Nixon et al., 2015; Radford & Hester, 2006); and their efforts to educate their children on IPV dynamics to prevent them from experiencing violence in their own relationships (Nixon et al., 2015).

Wendt et al. (2015) described the strategies identified in their study with mothers experiences of IPV as a 'continuum' that involved both acts to prevent physical violence and verbal abuse of the children, and constant processes of providing stability, normality and a sense that the children's environment was violence-free. Participants also spoke of their compliance with controlling partners to preserve the image of a 'good father' and loving family for their children. Yet there were limitations to how well they could protect their children. At times, they were feeling so overwhelmed by hopelessness and fear that their strategies failed. Feelings of shame and guilt emerged when their fears, anxieties or hopelessness affected how they treated their children. Efforts to sustain their families for the sake of their children conflicted with the realisation that eventually no matter what strategies they used, they could not protect their children as well as they wanted to. The researchers argued that maternal protectiveness in the context of domestic violence cannot be well understood without an analysis of the complexities of gender power relations, and attending to these complexities also requires noticing when the

focus of attention for protection remains on mothers so that fathers who perpetrate violence appear to have less responsibility for protection (Wendt et al., 2015).

While there are now more studies focusing on mothers' perspectives on proactively protecting their children in the context of IPV, and considerable consensus on the complicating social expectations of mothers and their influence in different legal interventions, our concern is specifically with how mothers *understand* protecting their children within these complex contexts. The strategies that mothers use to protect their children have been categorised as short and long term and characterised as creative, flexible, organised and variable according to children's everyday "physical and emotional wellbeing" (Nixon et al., 2015, p.4). To extend these analyses, in the following sections we report on a study attending to the ways in which women who are embedded in the legal system as a means of intervention for their safety from IPV make sense of proactively protecting their children.

The current study

Protective mothering in the context of IPV is one aspect of a larger study investigating women's experiences of the coordinated community and criminal justice response that formed the specialised Family Violence Court established in Waitakere, New Zealand (WFVC). While the larger study focused on the services provided for women, and how their safety was enhanced or compromised through their engagement with court processes and community services involved with the court, issues concerning their children's safety were crucial for the mothers in our studies, the women's advocates and for ourselves (Coombes, Morgan, Blake, & McGray, 2009; Morgan, Coombes, Te Hiwi, & McGray, 2008). In this particular location, more than half the women who sought the services of the refuge advocacy services were mothers (Coombes, Morgan, & McGray, 2007). From the WFVC studies, we became aware of the importance of understanding how the women made sense of protecting their children and the difficulties they faced in the context of legal

intervention into their intimate relationships. The women's advocates also raised issues that they faced when children were involved in their clients' cases, and we included their experiences within our analysis to enhance appreciation of the complexity and challenges that protective mothers face as they engage with services explicitly aiming to enhance their safety and that of their children.

Method

Participants

Collaborating with advocates at the refuge service formed part of our ethical protocol to ensure the safety of potential participants. As part of routine follow-up practices, the refuge conducted safety assessments of clients who were no longer involved in their partners' court proceedings and invited those women who were assessed as not currently at risk of harm to participate in the larger study. This approach meant that both current safety assessments and follow-up support were available to potential participants. While we interviewed 24 participants from a potential pool of 1464 clients whose partners' cases had been disposed, the protocol identified ongoing safety concerns for more than 50% of the service's former clients. Of those who declined to take part in the research, many did not want to revisit the time when they needed advocacy services, or did not want to talk about the court process because they had not wanted legal intervention into their relationship. Others had separated from their partners and while they appreciated the services, they didn't want to be reminded of their previous relationship. Some were unwell, either physically or psychologically. Some declined because their lives were too full managing childcare and work responsibilities. Others showed an initial interest in participating but cancelled scheduled interviews due to changes in circumstances.

Many of the former clients who declined to take part in the research re-engaged with services because of their ongoing safety concerns or because they were now involved with Family Court and

needed support. Twenty-one of the 24 women who participated in the larger study reengaged with advocacy services following their interviews. Reengagement with services supported the purpose of ensuring a safe recruitment strategy, but at the same time, put considerable pressure on the advocacy resources available to women in the area. Twenty-three of the twenty-four participants in the broader study were mothers who had primary responsibility for the care of their children.

Recruitment of advocates was purposeful, and we selected 3 advocates from the refuge service and 2 from separate organisations that were part of the community collaboration with the WFVC. All participants in the advocate group had been working with women engaged in the legal system and had between 5 and 15 years' experience in the sector, and together provided insight into the issues facing the many women who declined to, or were not in a position to participate.¹

Data generation.

All participants took part in conversational interviews with either Māori or Pākehā interviewers depending on their preference. Interviews were conducted privately at either the participant's home or a local community service office depending on convenience and safety for the participant. Conversational interviews allowed participants to guide the conversation while also ensuring that it was relevant to the research goals. In the larger study, the community collaboration agreed to using Interpretive Phenomenological Analysis (IPA) (Smith, Jarman & Osborne, 1999; Smith & Osborn, 2003) and narrative analysis (Riessman, 1993; Polkinghorne, 1988, 1995) as these methods enable a participant-led idiographic focus in the data collection and analysis, as well as a focus on the meaning of key events and relationships for participants. IPA and narrative analysis also provide ethical advantages for researchers where participant safety is a concern, since there are opportunities for safety assessment through the process of arranging interviews, and their ideographic focus enables the identification of on-going

safety concerns throughout the phases of interview, transcript release and analysis. Interviewers were also able to identify unanticipated, significant information about specific instances of IPV and the complexities of legal processes as the women talked about their experiences.

As a result, we were able to gather detailed accounts to analyse the meanings of safety, protection, harm and violence from the participants' points of view as they talked about the key moments and relationships that were part of their engagement with the advocacy services in the context of the legal system. Interviews ranged between 40 minutes and 4 hours. All were digitally recorded and transcribed word for word, and returned to the participants in another face to face meeting for any amendments before the analysis stage. All identifying information was removed to protect confidentiality.

Analysis.

This paper reports the narrative analysis of themes relating to children through a temporal sequence that represents the links between the participants' experiences of protecting their children and their experiences of key events related to IPV and legal intervention: the history of violence in their relationship; their partner's arrest and their first contact with advocacy services; and their engagement with advocacy services. The narrative analysis of the themes aims to situate the women's proactive strategies for protecting their children in the context of their understanding of *harm at that time*, and the advocates' collective knowledge of maternal protection embedded in the complex relationships involved in negotiating safety.

Analysis: Women's understandings of protecting their children through the process of legal interventions into Intimate Partner Violence

The women who participated in our studies had been involved with the WFVC because their partner had been arrested for physical violence against them. It is rare for perpetrators to be arrested for psychological or emotional abuse, and although some offenders are prosecuted through the court

system for breaching protection orders, few of the women had been granted orders by the Family Court when their partner was arrested, and none of their partners had been arrested for breaching a protection order. The women's encounter with the criminal justice system, as victims of physical violence, was most commonly their first involvement with any legal intervention related to IPV.

After their partner's arrest, women participants had been provided with advocacy services available for victims through the WFVC's collaboration with community organisations. One of the court's goals was to improve safety for victims, and advocates from community services were granted speaking rights in the court so that the judges were made aware of safety concerns (Morgan, Coombes, & McGray, 2007). All the women participating in our studies received a range of services from victim advocates, including help to develop safety plans and prepare victim statements for court proceedings as well as referrals to other community services that could assist them with various needs, such as housing, finance or health services. By the time we conducted the interviews, all of the women had separated from their partners and had become involved with other agencies and legal interventions.

In the following sections we discuss the ways in which participants made sense of proactive strategies for protecting their children in three specific contexts: Before their partner's arrest; as they engaged with advocacy services provided as their partners were prosecuted in the criminal justice system; and after the disposal of their partner's criminal case, when they separated from their partners and became involved with Family Court matters related to their children's custody and access arrangements. We begin each section with an overview that locates the women's understandings of protecting their children in the context of their involvement with legal interventions into IPV and the processes through which they engaged to move towards living more safely with their children.²

Before his arrest: A history of violence. Participants' experiences of violence in their relationships varied, but each described a history of physical violence by their partner, in some cases going back many years. We were not surprised by this, since it is widely understood that incidents of intimate partner violence are rarely reported to police, and that there are even fewer arrests than reported incidents (see for example, Burton, 2008; Garner & Maxwell, 2009; Groves, & Thomas, 2013; Hester, 2005). In our analysis of women's accounts of the violence they experienced prior to their partner's arrest, we identified a number of stereotypes that influenced participants' understandings of IPV, including in relation to the protection of their children.

When they spoke of their experiences of protecting their children during the pre-arrest period of violence in their relationship, the participants recalled that physical harm was the focus of their attention, which fits with a stereotype of violence as physical assault. Some spoke with us about making decisions to protect their children from possible physical harm by putting themselves at risk.

I actually stepped in, like one [verbal] incident... [I said something] and I was standing sideways at the bench and he kicked me... . (WP)

Others told us that their partners did not physically hurt the children.

He wouldn't attack [the kids]But he didn't mind doing it [to me] in front of them. (WP)

You know, and the last thing in the world is that I would want him to hurt my [child] and he never ever did. He was always lovely, you know, which was hard.... (WP)

For these women at these times, protecting their children meant ensuring their partner did not physically assault the children. Their understanding of violence as physical assault was also influenced by

stereotypes of IPV as battering that involves frequent and extreme physical violence, and some participants told us they had not recognised that their partner was violent because they compared their situation to this stereotype. We noticed that when participants understood IPV in relation to a stereotype of physical battering, they minimised the seriousness of assaults they experienced, and spoke of them as occurring relatively infrequently.

At the time I didn't even recognise it as violence to be honest, I just thought, 'it's normal, just a couple's tiff', I thought. (WP)

... over the years there was a bit of violence, the odd punch or the slap, that sort of thing. (WP)

Associated with the stereotype of physical battering was an image of perpetrators as cruel individuals, who habitually resorted to violence,

... it was hard to actually tell the doctor he had done that to me because [partner]'s such a nice person. (WP)

Understanding their partners through such a stereotype of batterers also meant that the women regarded them as good fathers, so long as they did not assault their children.

There were times when you couldn't have asked for a better dad as a kid. (WP)

We interpret the women's accounts of their concern to protect their children throughout the history of physical violence against them in their relationships, as confirming other researchers' conclusions that mothers usually prioritise protecting children (Peled & Gill, 2014; Radford & Hester, 2006), even while they are being attacked. Women rarely fail to protect and shield their children in these circumstances (Radford & Hester, 2006). At these times, participants understood that keeping their children from witnessing assaults against

them was another proactive strategy they needed to protect their children.

My son has never witnessed like any of it, he's a heavy sleeper and he never ever witnessed any of it. (WP)

In a social context where they could not identify their experience within stereotypes of battering, they took responsibility for managing their partner's physical violence against them, engaging strategies to placate him and accepting blame for their victimisation.

I looked at him and I thought something isn't sitting right and I thought, "oh god", I automatically thought of the [other] incident and thought, "oh cripes", so keeping things very low key, like he's big and could hurt me, really badly and also the kids were there. (WP)

And all the time all the family members used to come over, relatives from [geographical location]. I had hid the truth from everybody because I kept thinking it's probably me, it's probably me. (WP)

The processes involved with participants' comparisons of their situations with stereotypes of IPV as physical assault and battering not only involved minimising violence and blaming themselves for their victimisation, but also keeping their partner's assaults hidden from others as a strategy to protect themselves, their children, and their partner from the social stigma of IPV.

I felt a lot of shame as well. I was really, really ashamed and embarrassed. (WP)

A few months down the track I started noticing little things about him... and I just kind of let it go, and once he started hitting

me and stuff like that I didn't tell anyone. (WP)

In the women's accounts of the history of IPV they had experienced, we identified many of the strategies that other researchers have associated with proactively protecting children: minimising violence, avoiding arguments, keeping their victimisation hidden (Nixon et al., 2015; Peled & Gil, 2011; Radford & Hester, 2006). Like Lapierre (2010), we also found that participants' accounts gave testimony to the ways in which the stereotypes and stigma of a social context in which the dynamics and complexities of IPV are not well recognised directly affected the proactive strategies that participants used to protect their children. Understanding IPV as battering and violence as physical assault meant that mothers focused their protective strategies on preventing physical harm, not always recognising that they were victimised if their experiences didn't conform to such stereotypes.

The social stigma of IPV meant that mothers also understood that their children should also be protected from the shame of their mother's victimisation or recognition of their father as a perpetrator. Stereotypes and stigma constrained the women's awareness of the harms to which their children were exposed, both in the more complex context of patterns of abuse in their relationships, and during specific incidents of physical violence against them. The arrest of their partner for a particular incident of violence precipitated a crisis in their relationship, and the criminal justice intervention confronted them with the extent of the harm they were experiencing and the dangers they and their children faced.

After his arrest: Engaging with advocacy services. For many participants, the arrest that brought them into contact with the WFVC was the first time police had been involved in a violent incident perpetrated by their partner. It was often neighbours or other witnesses, rather than victims themselves, who called police. As participants explained, it was often not possible for them to call police during an assault, or unsafe for them to do so afterwards. Two participants reported

calling the police themselves over an incident that involved directly protecting a child. In both cases, although their partners had assaulted them previously, this was the first time a child had been put at risk and so they decided to initiate police intervention for the first time. The mothers' interventions prevented their children coming to physical harm:

All participants reported that their first engagement with advocacy services came from information sharing about their cases within the co-ordinated network of police and community organisations collaborating with the WFVC. Arresting police passed victims' details to the advocacy services. Advocates responded quickly, and in some cases women engaged immediately, while for others the time of their partner's arrest was chaotic and frightening. They were unsure who they could trust and were more tentative in their first contacts with advocates.

Whether they engaged quickly or took longer to trust advocates, the participants recalled that the advocates' help to understand the scope and the dynamics of IPV significantly changed the ways in which they understood their partners' violence, and the ways in which they understood harm for themselves and for their children. Although some women had become sufficiently aware of the risks they were facing in their relationships and could acknowledge to themselves that they were being victimised before engaging with advocacy, most participants only began to recognise patterns of psychological, emotional, economic and physical abuse in their experiences of IPV after advocates started working with them.

[They] helped me to see some patterns... they taught me, about how they, you know, there's like a plateau of it and it's like a cycle and they start off, you get the aggressive and cool down, the loving period and that's where they woo you back. And then, the yelling starts and then bang! They explode again, and it

starts again, and you forgive them and it's so true. You wake up and they'd be crying and just horrified at what they'd done to you, and they'd be so lovely. And the moment your bruises were healed it'd start again. (WP)

In this context, advocates recognised that their clients' focus on protecting their children from physical violence and threats of physical violence, their sensitivity to victim blaming and social stigma could make it particularly difficult to help them come to terms with the kind of psycho-social and developmental harms that children may experience when their mother is abused.

It's trying to explain to them their children don't actually need to be in the room to be affected by what's actually happening. That is a really tough point with me. That's really hard to do that. They might say he's a good father, it's really hard to talk to them about, trying to get them to see it does actually hurt your children, it does affect them, it affects their development, and it affects the way they are themselves. That's really hard sometimes. (KI)

Since the advocates' clients did not always understand patterns and cycles of emotional abuse and control in their relationship, it was not surprising to find that they often didn't recognise the psychological and developmental harms of IPV on their children. Some women who believed that their children didn't know about the violence they experienced hadn't realised that their children had been affected, or that they had been witnesses to the violence against their mother even if they were not present and did not let their mother know about what they had heard or understood.

'Cause my sister didn't think it had affected the kids because "the kids didn't know". And [advocate] gave me all this

information on how it actually does, which is huge and my sister is like "oh my god!" (WP)

Participants also talked with us about learning of another cycle of violence in which their partner becomes a role model for exercising control over others, and using violence instrumentally. The women came to understand that through this transgenerational cycle, their children could learn to accept and potentially perpetrate violence themselves. Protecting them included breaking this cycle.

[Child] cannot be like his dad. I think that was a huge thing as well, and [advocate] has pointed it out, that too, that it does, the cycle can be broken. (WP)

In some cases, clients also learnt that it was not beneficial to their children for them to be silent about their partners' abuse, or excuse his actions and represent him as a loving father.

I wouldn't say anything and that's why I've had to go to the [trauma] counselling with them because what I was doing was wrong. I kept telling them that "daddy loves you. You'll see daddy again one day." Everything, making excuses for him whereas I made a false plateau for them not realising it. I put him up 'there' whereas I should have said, "yes he did do that, and that's not okay" whereas I kept shutting it out and not talking about it. (WP)

In this situation, trauma counselling for the participants' children provided them with a context for safely discussing their father's violence and abuse, their mother's victimisation and their responses to it. Mothers often continued to defend their children's fathers, believing that it was in the children's best interests to preserve the image of their father as a 'good father', even after they had begun to understand more of

the dynamics and patterns of their own victimisation.

Participants also learned that despite trying to keep their victimisation hidden from their children, they had not succeeded, and their children had been exposed to emotional and psychological abuse. The mothers in our study recognised their social responsibility to protect their children from harm. They accepted that in the terms of that social responsibility they had failed to understand that their children were also being abused when their partner was abusing them. They accepted blame for not adequately protecting their children from psychological and emotional harm.

I lost my pride, I had to go in and admit I didn't know what to do. You've got to admit, the hardest thing for me was admitting what I let my kids see and I suppose I felt so, I had to admit that I was a bad mother. That was really hard. Well I didn't have to admit it but that's what it felt like. I've had too many nights when my kids have had nightmares but that's myself too. I'm to blame for that, I didn't leave sooner. (WP)

For some participants, the risk of being viewed as 'bad mothers' became a fear and a risk of losing custody of their children because of notifications to Child, Youth and Family services that were made on the basis of their victimisation.

And then there's still that underlying fear that someone's going to read this [victim] impact statement and maybe I'll say something like he used to use my kids against me...and I was always worried that if I did say this and it was written down somewhere I'd have CYPs on my front door saying why didn't you protect your kids and that's not the way it was. (WP)

Advocates are ethically bound to notify child protection services if they have

evidence that children are abused, or at risk of abuse. They understand the difficulty of this situation, given that some women will become more protective of their partner and less likely to report incidents of violence when they know that someone associated with the services designed to support them could make child protection notifications.

...it's really hard to monitor the children's safety as well if she is protective of him and you don't get the full story of what is actually happening. Because once they click on to [notifications to] Child Youth and Family, because they might come and take the children away, they can get protective of him. (KI)

Although they are working for the safety and protection of women victims and their children, advocates are also bound by the requirements of institutions, like the criminal justice and social welfare systems that often assume the choices facing victimised women are relatively straightforward.

The other main thing they all say is, "we'll take your kids while you sort yourself out and then you can apply for your kids back"... they said that's what would happen if I couldn't find a safe place to go to get away from him because he had been let out on bail... back to my house. (WP)

Advocates are caught between their understanding of mothers' victimisation and the contradictory social and institutionalised expectations that mothers can and should separate from violent partners for the protection of their children, even though they are also responsible for keeping the family together for the children's benefit. This often means working with women to ensure that they understand that their partners' violence, not a deficit in their care, puts them at risk of losing their children to child services, while also making it clear that child

services will be notified of child abuse if there is sufficient evidence. Advocates then support their clients to keep the care of their children in the longer term.

[Child protection] became involved with the kids. Me and [advocate] talked about it and basically I agreed for the kids into care. Told my ex-partner, I had to when [child protection] turned up. I was looking like there was really something I wanted to say, but after twenty years how to do you say it and mean it? It's kind of like, oh my god, and I had nowhere else to go... So it was like, "say it, and get the hell out of here to [refuge]."(WP)

While it was relatively uncommon for the women in our studies to be in situations where their children were removed from their care even temporarily, the risks of losing custody and care of their children were clear. The likelihood of being regarded as 'bad mothers' and the recognition that care of their children was at risk among participants in our studies gave testimony to arguments in the literature that mothers' fears of the requirements of statutory child protection agencies affirm the victim-blaming social expectations of mothers who are experiencing IPV (Meyer, 2015).

Participants commonly reported feeling guilty because they did not realise the risks posed to their children earlier. They also spoke of accepting responsibility for repeatedly putting their children at risk when they reconciled with their partners after violent incidents, even though they also believed that their children were entitled to relationships with their fathers and it was their maternal responsibility to keep the family together for the sake of the children. When they became increasingly aware that repeated reconciliations with their partners were implicated in the patterns of violence through which they were victimised, they continued to accept responsibility for harming their children, based on the commonly held view that 'good mothers'

will separate from violent partners as soon as they realise that their children are at risk. We recognise a contradiction in this situation: the women had believed they were protecting their children at the time when their understanding of protection was focused on the stereotypical meaning of violence as physical assault, yet challenging those stereotypes and learning the extent of harms they and their children were facing undermined rather than supported their sense of worth as mothers.

After his criminal case: Separation and family court. By the time their partners' cases had been disposed in the criminal court and participants had come to understand that protecting their children meant more than attempting to prevent them from being physically assaulted, they were also clear that the social expectation for them to separate from their partners to protect their children left them with few options. They had repeatedly been advised by others to end their relationship, and they felt a burden of responsibility to leave themselves, despite their partner's responsibility for the violence and abuse.

That was everybody's answer; everywhere I went. Everybody just said: "oh just pack up, get in your car, and run." (WP)

Although 'leaving' may be commonly regarded as more protective of children than 'staying', since it is assumed to remove the immediate threats of physical harm and the emotional and psychological harms of witnessing violence against their mothers, participants gave testimony to continuing threats, intimidation and emotional harm from their (ex)partners. Separation did not ensure their safety, though their engagement with advocates meant that they had learned safety planning and, where appropriate, their children had also been involved in safety plans.

One time [ex-partner] came over and he started throwing me around. [My daughter] followed [the advocate's] safety plan, she,

to the point she grabbed my keys from my handbag, she got in the car...she just ran, got in the car, locked the doors and sat there beeping the horn and ringing on the cell phone. And she was sitting in the car beeping the horn. All the neighbours came over and... . (WP)

As is the case in previous research (Wendt et al., 2015), participants in our study were also aware of their responsibilities for protecting children from instability and social stigma. Often these responsibilities meant that safety from post-separation violence was complicated by the risk of consequences for children and other members of the women's families.

Yeah for me to clear the slate I'd have to move, I'd have to move... away, but then I feel for my family because he knows where they are you know, it makes it kind of hard. But he knows where I work, he knows everything about my life which is hard to break free of...he knows where son goes to school; he knows where I live and where my parents live and where my sister lives. And they are the main people in my life and he knows everything about it. To get a clean slate I'd have to move. (WP4)

Re-location, however, does become necessary for safety for some women and their children. Participants in our studies who re-located gave similar accounts of significant losses to those who participated in Thomas et al.'s (2015) research.

I had to give up our home because we certainly couldn't live there because it wasn't a safe place and because there was no one close. So we had all that upheaval, the kids had to change schools and like we were [temporarily living with relatives and] we couldn't stay there. (WP)

In the context of continuing violence and abuse post-separation, it is evident that the binary choice between 'leaving' and 'staying' in a relationship with their partner (Peled & Dekel, 2010; Peled, Davidson-Arad, & Perel, 2010) does not take account of the consequences of either choice for the women and their children. Some of the women in our study explained that the process of deciding to separate took time, and was far from a simple choice. They needed to be supported and in a position to meet their own and their children's needs.

I hit that point...and thinking back I, that point of getting myself into a position where I could take the kids and go, just took me a while to do it but that's where I was heading. I was getting [advocacy] support, I was getting, had a good job, earning my own money. (WP)

The support of advocates was vital for the safety of the women and their children during the process of their partners' prosecution through the WFVC. Post-separation though, the advocates' clients sought legal interventions for issues of child custody and their ex-partners' access to their children through the Family Court. Along with separation, mothers' applications for orders of protection are cited as evidence that they are adequately seeking help to protect their children in the context of IPV, even though this is an unrealistic expectation in many cases (Lindauer, 2012).

I was advised to apply for the protection and all these things, safety things for children and for families, and I haven't. I don't know. I went to a lawyer once, but [they] just listed all the risks and all the costs I'd have to pay if I want to get some protection against those things and I just couldn't. (WP)

Advocates were not provided with the same rights to support their clients in relation to the Family Court as was the case with the WFVC. The different jurisdictions of the

courts mean that it has not been possible for Judges in the Criminal Court jurisdiction to recommend that the Family Court issue orders of protection for victims of those convicted of family violence offences. Advocates continued to support clients with legal proceedings in the Family Court, and in some cases were able to assist with access to temporary protection orders quickly.

The kids just wanted to go home and they [advocates] managed to get the kids and me back in the house. I got occupation orders, protection order, furniture order, interim custody, and they got me all of those temporary ones within 24 hours. And then they got, within three months, they were finalised. (WP)

However, the women's experiences of Family Court were noticeably different from those of the Family Violence Court. Without their advocate's representation in Family Court, some participants could not convince the Court that there was a legitimate need for their legal protection, and that the risks to their children were also significant.

It's all, everything's manipulated and misconstrued so it looks like you know, like this whole, this serious thing - where in front of his children - he said he was getting his knife and killing me. "Oh, they should have got over that by now and probably it never happened because you just imagined it, why don't the children want to see their father?" Oh because I was poisoning their minds and making them think that he's a bad man, so this is the, so this is, this mental pressure I've been under. (WP)

Participants gave testimony to the kind of concerns raised by Davis et al. (2011), when assessments provided to Family Court by professionals report victimised women's attempts to protect their children as alienating

the children from their fathers. The assumption that children's best interests are served by ongoing contact with fathers who perpetrate IPV, regardless of the wishes of the child or their mother, was apparent to the women in the proceedings of the Family Court.

The Family Court, they seem to keep saying the children need both mother and father. They need to see everything, all of the effects. They need to see what happens to these children, and I really want [child] to see [child's] father but... [child's] still saying [child] doesn't want, doesn't want visitation. (WP)

By the time the women whose partners have been convicted of violence against them in the WFVC encounter the challenges of disbelief, mistrust and misunderstanding of the Family Court, they have learned to question the stereotypes that limited their understanding of IPV and enabled them to accept responsibility for his actions. They have shifted the meaning of harm to encompass psychological, emotional, financial and spiritual abuse. Protecting their children has come to mean more than diverting physical assault to themselves, complying to keep the peace or ensuring their children are not present during an assault against them. In this context, they experienced Family Court as obstructing them in their attempts to protect their children and reproducing stereotypes of victim-blame and mother-blame that burdened them with responsibility for their partners' violence. They had taken responsibility for the safety of themselves and their children, separated, endured the social stigma of victimisation as well as ongoing post-separation abuse from their partners.

The paradox that emerges for the participants in relation to the Family Court is not only a matter of the obvious contradiction between the legislative intent of the Domestic Violence Act (1995/2013) to protect victims of family violence and the

failure of the Court to take their victimisation seriously. The ongoing complexities of IPV that were essential for the women in our study to understand so that they could better protect their children were not understood in the family justice system. While the criminal justice intervention brought participants into contact with advocacy services that supported them to enhance their own and their children's safety, the family justice system became a site where their partners' ongoing abuse was not recognised and their children's safety was compromised.

Discussion

When the mothers participating in our studies spoke with us about their experiences of harm, safety and protecting their children, their stories of significant relationships and events involved complex intersections between the responses of police, the Family Violence Court, the Family Court, advocates, neighbours, friends and families with their own responses and those of their children. Through analysing the women's stories, we came to understand harm, safety and protecting their children as situated in a complex of social relationships, where unpredictable responses by others, including their ex-partners, created contingencies that complicated the women's pathways to safety for themselves and their children.

The women understood harm, protection and safety in relation to specific events where their immediate and long-term risks and needs varied according to their circumstances and contingencies beyond their control. The meaning of violence, abuse, safety or protection shifted and changed as the women's experiences and understandings unfolded throughout the process of their partner's arrest and prosecution, their engagement with advocacy services, their decisions to leave their partner and their involvement with community services, professionals and family court proceedings.

Initially, participants were focused on physical safety and protecting their children from assault and witnessing assaults on them. They may have been aware that the children were emotionally harmed by their partner's

violence, but their priority was on managing potentially lethal or systematically controlling physical violence, and preventing their children from being assaulted. As their partners came to have less unimpeded access to them through the interventions of the Family Violence Court, the women had opportunities to learn about and reflect on the psychological and social abuses that their children were experiencing. They held hope for the possibilities of safety with the support of legal interventions that would protect them and their children from physical harm, and longer-term support for recovery and healing the harms they were experiencing. Yet the formal and legislative systems ostensibly created to assist them largely failed to do so. Child protection services held the potential for a threatening intervention that could mean losing custody of their children. Family Court proceedings were fraught with risks of sanctioned, ongoing contact between their children and their abuser. Some professionals in the court held the view that children's best interests are served by relationships with both parents, and there were occasions when access was granted to fathers who had been convicted of violence in the WFVC because women's accounts of violence against them were not believed.

The participants in our study were well aware that mothers who are victimised by their partners are expected to take responsibility for protecting their children, and carry a burden of responsibility for managing or stopping their partners' violence against them. As with other research (Lapierre, 2010; Peled & Gil, 2011; Radford & Hester, 2006; Wendt et al., 2015), we found mothers prioritised protecting their children, even while their understanding of safety, protection and harm shifted and changed. They expected to leave their partner to escape violence, although often leaving increased immediate safety risks for themselves and their children, and it proved impossible for many to 'escape' since they were embedded in family relationships and subject to custody and access arrangements that continued to provide their partners with

opportunities for abuse, intimidation and threats. They also encountered professionals who lacked understanding of intimate partner violence, and who blamed them for their victimisation and ‘failure’ to protect their children.

The complexities of mothering in the context of intimate partner violence are increasingly recognised through studies that prioritise the accounts of women protecting their children while experiencing victimisation. Growing evidence shows that harm to mothers and children were not consequences of discrete events of physical violence that could have been avoided by the victims’ careful management of themselves and their abuser. Safety, harm and protection need to be even more widely understood as ongoing processes whose meanings are embedded in social expectations and stereotypes. Widespread institutional and social responses that reproduce victim-blaming and mother-blaming complicate mothers’ protection of their children, while excusing, justifying or ignoring the violence perpetrated by their partners.

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Notes

¹ There are no comparable statistics available nationally. The National Collective of Independent Women's Refuges (NCIWR) report that in 2014-2015 52% of the 16,507 people using their services were women and 48% were children, but do not report how many of the women were mothers (NCIWR, 2015). New Zealand Police statistics report that there were 101,981 Family Violence investigations in 2014 and 62,923 children under the age of 16 were linked to those investigations (New Zealand Family Violence Clearinghouse, 2015).

² Although we removed all identifying information from transcriptions of interviews prior to analysis, as an additional device to protect confidentiality, we have not followed the usual practice of providing pseudonyms for participants when citing evidence from their transcripts. We were concerned with the possibility that confidentiality could be breached if specific episodes were able to be connected with a particular participant across themes. We have included quotes from women participants who were clients of the advocacy services involved with the WFVC, as well as some quotes from advocates as key informants. To clearly distinguish clients and advocates, the former are indicated by the initials WP and the latter by the initials KI.

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Children as the forgotten victims of domestic and family violence: Time for reform in Western Australian Refuges

Lorren Stainton

Women's Council for Domestic and Family Violence

Domestic and family violence is a crime where the overwhelming majority of victims are women and children and perpetrators are men. While sociopolitical movements in Australia have focused on women, there is a critical need to focus on child victims. The second wave feminist movement strived for the acknowledgement of women as individuals, as opposed to being someone's wife or mother. Children were typically viewed as silent witnesses to violence, unable to comprehend it and therefore, not experience it. This contextualises why historically, Refuges may not have focused on supporting children as much as women. While legislatively children's rights are not protected as such in Australia, non-legal frameworks such as those that promote policy-level reforms can help protect children's rights in Refuges. The Women's Council for Domestic and Family Violence Services (WA) (WCDFVS) developed the Good Practice Guidelines for Working with Children and Young People in Refuges (the Guidelines) to help ensure that children's needs are met while residing in Refuges. The aim of this article is to explain how the Guidelines can support children at individual, relational and collective levels, and create cultural change whereby children are seen as clients in their own right whilst living in Western Australian Refuges.

Feminist researchers have shown for decades that domestic and family violence is a gendered crime that both reflects and reinforces gender inequity (Bagshaw & Chung, 2000). In 2012, it was estimated that of all the women killed during that year, almost half were killed by intimate partners or family members (UN Women, 2014). The United Nations (2005) *State of the World Population* report explains that domestic violence constitutes the single biggest health risk to Australian women of reproductive age. Violence against women has been shown to be more of a risk for women between the ages of 15 and 44 than cancer (UN Women, 2014). However, while a major current focus is on violence against women, addressing violence against children is not gaining enough attention and traction where feminist-based reform is concerned.

The Women's Council for Domestic and Family Violence Services (WA) (WCDFVS) is the peak body in Western Australia (WA) for domestic and family violence. Primarily, it serves the interests of Refuges that accommodate women and their children across the state, and provides advocacy and representation on behalf of its members to government and other stakeholders (WCDFVS, 2015). Recently,

through the Keeping Kids Safe (KKS) project run by the WCDFVS, and funded by the Department for Child Protection and Family Support (DCPFS), the *Good Practice Guidelines for Working with Children and Young People in Refuges* (the Guidelines) were released. In recognising the need to address children's wellbeing at the individual, relational and collective levels, the Guidelines utilise community psychology principles by: providing for strengths-based approaches to practice; promoting empowerment; facilitating healthy mother-child relational bonding after escaping violence and rapport-building with Child Advocate (CA) Refuge staff; and providing a platform for reforming policies in Refuges that relate to the care of children. The Guidelines demonstrate the value of using a community psychology approach in focusing on the child's needs, and offer Response-Based Practice (RBP) as a paradigm that is emerging within child protection practice in several different countries to offer empowerment to victims of interpersonal violence, and to help hold perpetrators accountable for their actions. The Guidelines are intended to be a catalyst for collective level change in the WA Refuge sector and beyond, to ensure that children

are not the forgotten victims of domestic and family violence.

The aim of this article is to explain how the Guidelines can support children at individual, relational and collective levels, and create cultural change whereby children are seen as clients in their own right whilst living in Western Australian Refuges.

Child abuse: A gendered crime

Child abuse is one form of domestic and family violence. Research on identifying perpetrators of child sexual abuse has been extensive and evidence overwhelmingly indicates that the largest cohort of child sexual abusers are male relatives of the child (ABS, 2005; McCloskey & Raphael, 2005; Peter, 2009; Richards, 2011). Men are also more likely to physically abuse children (ABS, 2005).

Research on domestic and family violence and the co-occurrence of child physical abuse shows it is a significant issue, ranging from 40% to 80% (Holt, Buckley & Whelan, 2008). In a study conducted by Mouzos and Makkai (2004), of all the women surveyed about their experiences of violence, over a third (36%) had children in their care who also experienced the violence. Children suffer emotional abuse when they see or sense violence perpetrated against their mothers or other family members. Children are often used as a weapon against their mothers, and they may experience the violence in many ways including: being made to watch or join in the assaults, being told they are to blame for the violence because of their behaviour, forced to spy on a parent, used as a hostage, defending their mother against the violence, and/or intervening to stop it (Edleson, 1999; Humphreys, 2007). Children are also used as a means of communicating to women where perpetrators have violence restraining orders (VROs) against them, can be manipulated into exhibiting abusive behaviours towards their mothers, and can also be used as tools to solicit information about their mother's whereabouts and movements.

Family Violence Movements need to be Child-Focused

Despite the acknowledgement that domestic and family violence goes

underreported (ABS, 2007), and the understanding that one in four children experience family and domestic violence in Australia (Indemauro, 2001), current sociopolitical movements such as the White Ribbon campaign (White Ribbon, 2003), Ending Violence Against Women (UN Women National Committee Australia, 2010), and Stop Violence Against Women (Amnesty International, 2005) tend to focus primarily on violence against women. To some extent, government and other non-government agencies have addressed the need to focus on perpetrators and hold them accountable for their use of violence against women and children by, for example, enforcing harsher penalties for breaching VROs (Council of Australian Governments, 2015) and implementing national accreditation for men's behaviour change programs (Vlais, 2014).

While supporting women and holding men accountable for their actions have been priorities, the focus on children has not been as apparent, either in the literature or in public discourse. Child protection practice has also focused mainly on the woman and her ability to keep her child(ren) safe. Initiatives such as Polished Man (YGAP, 2014) and Never Alone (Luke Batty Foundation, 2015) aimed at addressing violence specifically perpetrated against children have received far less public exposure. The campaigns aimed at addressing violence against children in the context of domestic and family violence are far more recent than the women-focused campaigns, which is indicative of the lack of consideration given to young victims of abuse until recently.

There has been some recent focus on good practice in supporting children who have experienced trauma both nationally (Dwyer, O'Keefe, Scott & Wilson, 2012) and at a state level (e.g., Department of Health & Human Services Victoria, 2012). However, despite these recent publications, there has been no guidance until now specifically on how Refuges in Western Australia should work with children. *Children as 'Accompanying Units'*

The current sociopolitical landscape, quite significantly influenced by 2015 Australian of the Year, Ms. Rosemary Batty, has begun to illuminate the issue of child victims of domestic and family violence. Historically though, children were not considered victims in the sense that they are now viewed. Children were thought to be passive recipients of abuse, they were 'seen but not heard', 'silent witnesses' to violence lacking in their capacity to comprehend and experience abuse (Laing, 2000; Bromfield, Lamont, Parker & Horsfall, 2010; Callaghan & Alexander, 2015). In the context of the WA Refuge sector, children were (and still are) recorded as 'accompanying units' to the 'primary client', which is the woman. Children are often viewed as too young to understand domestic and family violence perpetrated against them and their mother, so typically, Refuge work has centred on women.

During the second wave feminist movement in the 1970s when the Refuge sector gained momentum, women were attempting to delineate themselves from being the 'other' in a relationship: from being a man's wife or a child's mother (Hauge, Kelly, Malos & Mullender, 1996). Therefore, focusing on children in Refuges might have been seen as going against what the movement was trying to assert: women as individuals. As a result, the extent to which Refuge work during this time focused on children is somewhat unclear, as the history of work within WA Refuges in general is particularly hidden. There is little documentation on the history of the Refuge movement in WA, and anecdotally, some of the information that is available is debated. The work done with children is even less readily available, as children's work has typically been given a lower status than Refuge work undertaken with women (Hauge et al., 1996). Unfortunately, this inadvertent legacy has meant that children are still rarely seen as clients in their own right in contemporary Refuge settings. Three current factors highlight this: the low numbers of specific Child Advocate (CA) Refuge staff who undertake case management and work

therapeutically with children in WA Refuges; anecdotal evidence provided by CAs about the perceived status of child advocacy work and the lack of recognition of children as clients; and the fact that many of the Refuges today are still referred to as Women's Refuges, Women's Centres, or Women's Shelters (despite children being the largest cohort of clients).

The CA position is absolutely critical when advocating for the rights of the children in Refuges and ensuring their needs are met. Where no CA is employed at a service, the child-focused work is lost and the service regresses to antiquated practices reminiscent of the 1970s of the kind noted in the UK by Hauge et al. (1996), where children were not a major focus. Humphreys (2014) notes that debates have raged in the refuge system about whether children's workers are child 'minders' or should be considered child advocates, with a more therapeutic-based role. In a study conducted by Stainton (2015a) on the perceived roles and key issues facing CAs in Refuges, just under half (46%) of all surveyed referred to child-minding as one of their key roles. One CA noted that she was not supported to carry out her role and comply with policy:

A key issue I face is treating children as clients in their own right, as required by [my] job role and [Refuge] policy, when this is not reflected in the reality of the daily operations of the Refuge.

Another commented on the restrictions of not being employed full time:

[I have a] limited ability to make an impact on some clients when only working part time, this role needs much more support. It needs 1.5 or 2 full time positions to cope with the work load, e.g., 5 Mothers = 10 – 15 children.

Saunders' (1995) early research highlighted such challenges, stating that insufficient attention had been given to the children who experience domestic and family violence and reside in Refuges. As evidenced in Stainton's study (2015a), two decades later, this is still the case. In 2009,

of the 35 Refuges across WA that support women and children, over a third did not have a designated CA position (Leggett, 2009). In 2014, this number increased to 38%, and of those that did, only 40% worked full time (Stainton, 2015a). The majority of Refuges with no CA position are in regional/remote locations which see the highest number of young clients who potentially face additional compounding disadvantages, for example, living in a remote setting (Hastings & MacLean, 2002), identifying as an Aboriginal or Torres Strait Islander person (Flood & Fergus, 2008), or drug and alcohol issues (Nicholas et al., 2012). The only metropolitan Refuge not to have a CA is an Aboriginal service where Aboriginal children may be in a greater need of support (Stainton, 2015a).

Good Practice Guidelines for Working with Children and Young People in Refuges

Only 41 countries have implemented a comprehensive and explicit legal ban on violence against children, while only 2 per cent of countries report a comprehensive legal framework to prevent violence (Steven, 2015). Although Australia ratified the *United Nations Convention on the Rights of the Child* on 17th December 1990, it does not have a legal framework to prevent violence against children, as children's rights have not been incorporated into Australian law (Unicef, 2011). However, children's rights can still be upheld using non-legal frameworks through documents that guide policy-level reforms. The WA Guidelines provide an opportunity for reform in Refuges across WA that support children by utilising community psychology principles such as empowerment, diversity, inclusion and social justice. Prior to 2015 however, no guidelines for working with children existed. While it has taken over 40 years to develop guidelines since the Refuge movement first began in WA, this recent development is a positive step toward seeing children as *clients in their own right* whilst in the care of Refuges.

Developed as part of the Keeping Kids Safe (KKS) project, and run through the WCDFVS to support CAs and consequently, children living in WA Refuges, the

Guidelines aim to fulfil several goals. Their overarching purpose is to set a benchmark for working with children and young people in WA Refuges and the aim is to achieve this using a variety of measures: ensuring the safety and wellbeing of children and young people in Refuges; providing them with resources and program knowledge (e.g., safety planning and protective behaviours) to maximise safety after leaving the Refuge; teaching children and young people about domestic and family violence and reiterating that the violence is not their fault; acknowledging children and young people as *clients in their own right*; strengthening mother-child bonds; and advancing the role of the CAs in Refuges (Stainton, 2015b, p4). These Guidelines also provide contemporary evidence-based information that challenges the discourses evident in Refuges about the importance of child advocacy work and the need to view the child as a client of the service.

Founded on feminist understandings of domestic and family violence (and taking account of Aboriginal and Torres Strait Islander definitions of family violence), the Guidelines developed by the WCDFVS illustrate the importance of aligning with community psychology principles. The principles of inclusion and empowerment emphasise the need to consider the oppressive contexts in which people live, critically examine those contexts to reveal their illegitimacy, and seek justice to empower those that are oppressed.¹

One of the most significant principles in the Guidelines is that of empowerment. The Guidelines assert that Refuges need to empower and be inclusive of all children (e.g., through utilising independent translators where English may not be their first language, or empowering children of diverse gender clients who may need tailored support). Frameworks such as Reponses-Based Practice (RBP) are consistent with community psychology principles in seeking to challenge dominant discourses in Refuges about children's capacity. RBP also disrupts the status quo in mental health service provision by steering away from

pathologising children with ‘mental health disorders’ where their responses to violence can be viewed as intelligible responses to oppression (Wade, 2013).

Using the traditional medical model of service delivery is problematic as it narrowly focusses on the individual and their biological responses to violence. The Guidelines do consider neurobiological responses to violence and the importance of trauma-informed practice; however this is achieved through the application of the Neurosequential Model of Therapeutics (NMT) (Perry, 2006) in the Refuge setting. NMT is grounded predominantly in neuroscience and offers a framework for addressing work with children who have experienced domestic and family violence. It highlights how violence shapes brain development, therefore offering practitioners treatment options for their young clients. While the NMT is active in maintaining that mothers and practitioners have a significant role to play in ensuring positive outcomes for traumatised children, some trauma-informed practices can tend to over-focus on the victim, and condemn them as neurobiologically and psychosocially damaged. To counter this tendency, the contemporary evidence-based approach RBP is also used in the Guidelines, which views a child’s trauma as a complex issue embedded in a social context that is, in part, resultant from negative social responses by others (Routledge, 2014).

Response-Based Practice

The Guidelines are consistent with what Prilleltensky (2005) suggests are the important community psychology principles of empowerment, prevention, strengths-based practice and taking account of community conditions. These principles are reflected in the adoption of Response-Based Practice (RBP) (Wade, 1997) as a major tenet of the Guidelines; RBP considers the social context in which violence and trauma has occurred, and positions the young victim as an autonomously acting agent who actively responds to and resists violence, instead of being seen as an object that is ‘affected’ or acted upon. Wade (1997) defines resistance as:

any mental or behavioural act through which a person attempts to expose, withstand, repel, stop, prevent, abstain from, strive against, impede, refuse to comply with, or oppose any form of violence or oppression (including any type of disrespect), or the conditions that make such acts possible, may be understood as a form of resistance. (p. 25)

The two critical underpinnings of RBP are: whenever people are oppressed they will always resist, and, language and social responses are powerful tools in shaping outcomes for victims and perpetrators (Wade, 1997). The Guidelines use RBP to promote the idea that children and young people will act to preserve their dignity by resisting violence in a variety of complex ways. Acts as small as avoiding eye contact, orientating their bodies away from the yelling abuser, or thinking of something else while experiencing violence (Stainton, 2015b) can be considered as intelligible forms of resistance in the context of experiencing abuse. RBP explains that children’s unique responses in the context of domestic and family violence can be considered a form of resistance. For example; two young boys are in their shared bedroom getting ready to sleep. Their father regularly rapes them in his bedroom, but never both of them in one night. Sometimes the elder boy enters his father’s room knowing that he may be raped, rather than his younger brother. To a psychologist using a traditional clinical approach, this boy could be negatively labelled, but to a practitioner who is familiar with RBP, the social context would be explored more deeply, and they would discover that the elder boy was self-sacrificing in order to protect his younger brother.

The Guidelines emphasise that empowering children and allowing them to understand their own behaviours in the context of violence is essential to their wellbeing. RBP is a strengths-based framework that posits a link between

psychopathology and the quality of social responses to the abused child. It seems there is an inverse proportionality where the more positive social responses a child receives, the less likelihood there is of them acquiring mental health labelling (such as PTSD) (Ulman & Philipas, 2001) and vice versa. When children receive negative social responses they are: less likely to cooperate with authorities; less likely to disclose violence again; and more likely to receive a diagnosis of a mental disorder (Wade, 2014). However, when they receive positive social responses they: tend to recover more quickly and fully; are more likely to work with authorities; and are more likely to report violence in future (Wade, 2014).

The Guidelines also include case studies and practical tools for practitioners to use in the day-to-day operations of Refuge work, providing a basis to challenge mainstream discourses about child advocacy work and empower children. In the case studies there is an emphasis on the importance of mother-child relational bonding activities and educating children about violence as early intervention and prevention approaches, and on advancing the role of the CA so that children's needs can be met and their rights can be upheld whilst living in Refuges.

Perceived limitations

There are potential limitations in developing Guidelines that focus on the child in the context of family violence. The first is that children's safety is often viewed as being dependent on their mother's actions/lack of action, which has historically led to victim-blaming. The second perceived shortfall could be that Refuge practice neglects working with mother and child together, instead, only working with the child in isolation. However, the Guidelines are very clear about positioning the child(ren) and their mother as victims, and those who *choose* to use violence as the perpetrators. It is also clearly stated that one of the most important messages throughout the Guidelines is the need to facilitate mother-child bonding as it is so often a target of the perpetrator.

Conclusion

There is a multitude of responses to domestic and family violence, from national campaigns to individual Refuge services, and they all have an integral role to play in addressing gendered violence. Refuges in particular are a key response within a holistic strategy to support women and children in crisis. The need for guidelines such as those developed by the WCDFVS has taken a long time to be placed on the agenda. This is probably due to a lack of sociopolitical drive to address gendered violence against children generally in Australia.

The Guidelines endeavour to set a benchmark for responses to children and young people living in Refuges in WA. They represent a drive towards changing cultural attitudes regarding the perception of how children and young people experience domestic and family violence, as well as challenging the historical views that children are 'silent witnesses' to abuse. For the Refuge sector this shift from a traditionally women-focused domain to a client-focused domain where children are also seen as clients, is a significant step in not only providing a better service to young clients, but also acting as a catalyst to create cultural change that will hopefully be reflected in wider policies. Documents such as the WA Guidelines can be influential in policy reform and need to drive strong messages, advocating for the rights of children escaping violence with their mothers. It is essential that protocols such as the Guidelines are produced and implemented widely, so that children are no longer the forgotten victims of domestic and family violence.

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Note

¹ According to Hovane and Cox (2011), Aboriginal and Torres Strait Islander peoples prior to European invasion had no inequality between men and women. Everyone had a place in society and everyone was considered equally valuable. Male power and privilege is a social construct that was introduced to Aboriginal and Torres Strait Islander peoples. To address family violence for Aboriginal Torres Strait Islander people, concepts of violence need to be far broader and encompass the fragmentation of the holistic relationship between spiritual, cultural, and environmental dimensions of Aboriginal and Torres Strait Islander life that has taken place since colonisation.

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Reproductive coercion and the Australian state: A new chapter?

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While the concept of reproductive coercion is most commonly used in understanding tactics employed by some male perpetrators of violence against women, it is also used to identify policy and legislative environments of nation states that may be supportive of reducing women's levels of autonomy and self-determination in relation to their reproductive health and family planning decisions. The offshore detention immigration policies of successive Australian governments have created several cases over the last decade where community workers in Australia have had to identify and understand how best to work with the power relations inherent in counselling work with women as asylum seekers who are making decisions about their pregnancies in the context of state-based reproductive coercion. The answer to working with this complex ethical issue lies beyond the scope of mere interpersonal and intra-psychic counselling interventions.



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Counsellors working in the field of unplanned pregnancy and abortion in Australia often bear witness to women making choices for abortion and/or continuing a pregnancy as choices that can occur along a continuum of consent to coercion. Issues such as domestic violence, homelessness, mental health and poverty all constitute impediments to a free choice for women who of necessity must sort through and consider these imperfect contexts in order to reach their decision. However, for women who are asylum seekers and forced into offshore detention facilities by the Australian Government, the point of difference between their context of 'choice' and 'consent', compared to mainland Australian residents, is

stark. The capacity of women in offshore detention to provide 'free and full consent' to an 'autonomous choice' of either continuing their pregnancy or having an abortion is strongly compromised by their involuntary detention. It is worth remembering that this detention is mandatory and women are detained without proof of a crime being committed, the luxury of a trial or recourse to a timely appeal process, courtesy of the immigration policies of the Australian Government. The power relations inherent within such a relationship prompt the question: Does the phenomenon of women making decisions about their pregnancies in this environment herald a new chapter in a history of reproductive coercion in Australia? As social workers, psychologists, counsellors and health professionals, it also implores us to ask questions about how we make sense of our role in this context.

From interpersonal to state violence: A continuum

The term reproductive coercion has traditionally been used to describe a range of coercive tactics used by intimate partners and others to control a woman's reproductive decisions: a decision to either bear children or to terminate a pregnancy. A recent study by the University of Queensland Pro Bono Centre (Cheung et al., 2014) defined reproductive coercion in domestic violence as occurring where:

The male partner convince[es] the woman that he will leave her if she does not become pregnant;
 The male partner engag[es] in birth control sabotage (such as destroying birth control pills, pulling out vaginal rings etc.);
 The male partner exercis[es] financial control, so as to limit access to birth control;
 The male partner insist[s] on unprotected sex or rape. (p.2)

Central to the idea of reproductive coercion is the deprivation of the conditions that constitute autonomy in women's reproductive decision making. The leading US sexual and reproductive health rights think tank, The Guttmacher Institute, thus defines the idea of reproductive coercion as 'the deprivation of voluntarism and informed consent in relation to family planning' (Barot, 2012a, np).

However, reproductive coercion exists on a continuum. It is perpetrated at one end by an individual or family then continues through to governments and the state. A Guttmacher policy analysis (Barot, 2012b) defined reproductive coercion as including policies, legislations and incentives used by governments to either prevent childbearing or compel it.

This principle applies across national borders and at all levels of government, whether it's local Chinese officials forcing women to terminate a wanted pregnancy or U.S. state legislatures passing increasingly coercive abortion restrictions to keep women from ending an unwanted one. (Barot, 2012a, p.1)

Chapters of reproductive coercion in Australia: a potted history

Women's rights to reproductive autonomy have always existed along a continuum of coercion—often in relation to their socio-economic circumstances, available social supports and exposure to violence, as well as policy and legislative contexts. As a counsellor I've often assisted women to examine what levels of coercion they have to

navigate in relation to decisions about their pregnancies when confronted by individual acts of coercion and threat from intimate partners and family members. However, Australia as a nation also has a long history of dalliances with reproductive coercion, especially when it comes to women on the margins of Australian society. The intersections of ethnicity, class, (dis)ability and gender have proven fertile sites for the State to try to control particular women's reproductive choices.

Aboriginal and Torres Strait Islander Women

Earlier colonial attempts to 'breed out' Aboriginality included notorious miscegenation projects such as those promoted by A.O. Neville in Western Australia (Bashford & Levine, 2010). Up until the mid-1970s Aboriginal and Torres Strait Islander women felt the brutal impact and legacy of forced sterilisation, and historians argue that in many ways, the making and remaking of the Australian nation was founded upon projects of reproductive control in relation to race (Bulbeck, 1998; Grimshaw et al., 1996).

Women with Disabilities

Women with disabilities have also encountered and continue to encounter reproductive coercion. The 2013 Senate inquiry into the sterilisation of women and girls with disabilities in Australia documented a litany of reproductive coercion (manipulation, intimidation) and reproductive force (involuntary sterilisation procedures without any consent) (PWDA, 2013). The inquiry received submissions that detailed histories of women and girls with disabilities in foster care and other community residential settings who were subject to both coercion and force in relation to contraception and sterilization (Frohmader, 2012).

State-based 'Care' Institutions

Recent evidence given by former Victorian wards of state at the Royal Commission into Institutional Responses to Child Sexual Abuse has uncovered examples of coercion by state authorities, including the forced administration of gynaecological

examinations as well as Depo Provera contraceptive injections (Hall, 2015).

Intimate partner violence and reproductive coercion

For social workers and others working in the field of counselling in community services in Australia, and more specifically, women's services, the phenomenon of violence against women is not a new one. Intimate partner violence and family violence has been a perennial and powerful force: the spectre of male violence, coercion and abuse, played out at the interpersonal and social level, has been raised and heard in counselling rooms. Its dramatic impacts on women's physical, emotional and social wellbeing are well documented (VicHealth, 2004; World Health Organisation, 2013).

Similarly, for social workers counselling women in relation to unplanned pregnancy and abortion, the phenomenon of violence against women in the context of their pregnancy decision is also not a new one. As discussed previously, reproductive coercion - constituted by interpersonal threats or acts of violence in relation to women and their pregnancies (becoming a parent or ending a pregnancy) - is also not a new phenomenon; however it is one that is only beginning to be documented in research as well as included in standardised risk framework assessments in community and health services. The phenomenon of reproductive coercion in intimate relationships is beginning to be understood and discussed as a key factor in women's safety and wellbeing (Taft, 2008; Cheung, 2014).

Risk and protective factors for abortion

For the vast majority of women seeking an abortion (outside offshore detention) and who have reproductive autonomy, it is clear that abortion poses no greater risk to their mental health than continuing with the pregnancy. Indeed, in 2008, the American Psychological Association taskforce on mental health and abortion found that:

The best scientific evidence published indicates that among adult women who have an unplanned pregnancy the relative risk of mental health problems is

no greater if they have a single elective first-trimester abortion than if they deliver that pregnancy. (APA, 2008, p.90)

Robust research into protective and risk factors for abortion is gradually emerging, and Australian researchers Taft and Watson (2008) have begun to document the risks of co-occurring factors such as intimate partner violence and its negative effects on women experiencing unplanned pregnancies in this context. Most notably, in relation to reproductive coercion, their research found that there is a link between women who have experienced key aspects of intimate partner violence - such as forced or pressured sex and forced or pressured abortion - and depression. Research in this area is often highly contested due to the influence of anti-choice forces seeking to demonstrate abortion as a universal 'negative' event no matter whether reproductive coercion is present or not.

Research into the area of coercion or force as a risk factor for post-termination psychological distress is a burgeoning area (Chibber et al., 2014). However, anti-choice coalitions seek to argue that distress is caused only by forced abortion, rather than 'forced maternity'. It is vital to remember that reproductive coercion can occur both ways: by coercing or forcing a woman to either continue or terminate her pregnancy. A leading US public health thinktank, Public Health Watch (PHW), argues that state-based restrictive laws that prevent termination access are a prime example of reproductive coercion or violence in relation to continuing a pregnancy:

Many health professionals and legal experts say that forcing a woman to carry an unwanted pregnancy to term is a form of reproductive coercion in itself—and a violation of their human rights. (PHW, 2008, np)

The next chapter: 'choices' in the context of asylum seeker reproductive coercion

The vulnerability of asylum seeker women in offshore detention has meant that the Australian state and its policies of

offshore detention now represent a significant threat to their reproductive choices. As discussed hereafter, the next historical chapter of reproductive coercion to be written must now surely include the spectre of state-based reproductive coercion in offshore detention in the early 21st Century. Women who are held in detention for lengthy periods in conditions of psychological and physical danger have inherently impaired family planning autonomy, given the unsafe conditions in which they exist.

Consider the environment where women are brought to the mainland for pregnancy options and abortion counselling and/or to have an abortion. Health professionals working with women in these situations can encounter women's contradictory consent:

I don't want an abortion. I want to keep my baby. But I can't have a child in detention. I don't know how long I'll be there. I don't know if I'll survive. Why are they doing this to us? Please, please help me.

I write this article as a social worker with many years of experience in women's sexual and reproductive health and I write about the scenarios I have seen and heard in these roles. These include observations of steely, unflinching doctors in women's health clinics who've 'seen it all' over their twenty years in public health, yet who are unnerved and unsure in the presence of the ambivalence so apparent in the women who voice their terror and their ambiguities in their consulting rooms. Vicariously traumatised, their normally steady and authoritative voices trembling with tears, the doctors ring the social workers afterwards, sometimes to consult and sometimes to debrief: *'What can we do?' they ask. 'This isn't right'. 'Surely someone should be speaking out about this?'* Hardy nurses request not to see these patients because it's too upsetting.

Social workers are committed to respecting the dignity, autonomy and self-determination of their clients, and to social justice: we find it hard to define what professional integrity looks like in this

situation. Thoughts and feelings wash through our brains and hearts: reflections on the anguish, hardship and violence that the woman has been exposed to as well as the courage, resilience, survival and the act of protective parenting and preventative harm that the choice of abortion constitutes for her in this context. Professional self-doubt is also present:

Am I an agent of social control here? I'm certainly not an agent of social justice or social change here. Whose advocate am I - the woman's or the state's?

The Australian Association of Social Workers (AASW) requires its members to commit to three core values: respect for persons, social justice and professional integrity. Central to social work theory and practice have been ongoing debates over its ambiguous role as the 'agent of social control' versus 'agent of social change'. It is generally acknowledged that social work is in a state of flux within the current neo-liberal policy environment (Dominelli, 1999; Wallace & Pease, 2011), with increasing emphasis on managerialism (tightly managed organisations with loss of professional autonomy for workers) and risk management, including the use of gag-clauses within a neo-liberal public policy environment which propounds individualisation (social problems being asked to be solved by individuals often at the expense of advocacy or work for social change). The choice to speak up and speak out for both clients and workers is seemingly stifled at every turn, even though our professional body requires a commitment for social workers to work to 'achieve human rights...through social and systemic change' (AASW, 2010, p.7) ...and to raise awareness of 'structural and systemic inequalities' (p.8).

Social workers must reconcile the tension between the rational and the emotional when confronted with the terrors our clients convey. We seek refuge and certainty in a professional identity, including an integrity that compels us to look to the rational to continue on our work with our

clients without becoming overwhelmed ourselves. We ask ourselves ‘Which social work and counselling tools do I use to work with this woman?’

Rights-based frameworks (Ife, 2012; UNFPA, 1994) which emphasise women’s choice and legal rights seem hollow, empty and vacuous and are inoperable in this context: these women are stateless and without rights. Advocacy practices (Baines, 2011; Mullaly, 2010) to remedy or challenge the cause of the injustice are limited, as legal recourse to challenge the detention process is next to impossible to achieve. Across Australia, a woman’s capacity to understand and make an informed decision (in conjunction with the medical professional involved) constitutes a fairly common understanding of women’s consent in relation to termination of pregnancy. However these very conditions are hollow in relation to the reality of women’s arbitrary and indefinite detention. Strengths-based approaches, although generally key in this work, are useful but also have limited application (Saleebey, 2012) due to the overtly oppressive limitations on women’s resources. Anti-oppressive frameworks are laudable (Dominelli & Campling, 2002), but merely decorative in a situation as stark as this, which is imbued with power imbalance and human rights violations. Crisis pregnancy-counselling practice frameworks (Allanson, 2007) within a trauma-informed framework (Rothschild, 2011) are useful given their focus on managing the levels of anxiety that will accompany decisions that often overwhelm clients’ coping mechanisms, but they are also limited in providing answers to the client’s basic needs for seeking safety and certainty in an ongoing context of trauma that includes both physical and psychological danger.

At the other end of the reproductive continuum to women considering termination of pregnancy, women who continue their pregnancy in detention have also spoken of their ambivalence:

“We are very worried about the birth. There are no specialists in the hospital at Nauru. I saw the

hospital, it is very dirty...no hygiene. I can't think about that. I can't," said Fairuza, who has already suffered a miscarriage in detention. "I can't feel happy about this baby. In the tent it's hot, with the mice...how can I look after a small baby?" (Hasham, 2015, np)

Equally, their partners can’t find joy in the idea of another child, having witnessed the impacts of the detention environment on the children they’ve already had:

"We have two kids and the new baby coming also, [they have] no future. My kids have lost their life," he said. My daughter has very bad mental health: she is very depressed and she is very stressed. Always she cries, and asks me 'Why Dad, why are we here?' My son when he wakes up from his sleep in the morning, asks me 'Dad, are we going to Australia today?' Sometimes I ask them please, don't ask me, please leave me alone, because I don't have any answers." (Hasham, 2015, np)

State-based reproductive coercion: we're not really like that, are we?

In the late 1980s in my suburban Catholic school in Melbourne, and courtesy of my Year Ten geography teacher Miss Hockey, I recall learning about the one child policy in China. I remember being thoroughly confused and alarmed about the idea of a nation or ‘the state’ having so much power that it could influence a woman’s life so intimately, to the point of deciding for her if she did or didn’t have any more children. Whilst I’m quite sure that the notion of ‘forced’ or ‘coerced abortions’ probably wasn’t raised directly as a concept at this time—given the unseemly implications of mentioning such a topic in this particular religious context—I’m fairly sure that it sat there as an elephant in the room. It constituted an implied understanding of what could happen when the state over-reached its mandate to intervene in its citizens’ lives.

China, it seemed and I presumed from this education, was the antithesis of a commitment to an exemplary human rights framework: the western liberal-democratic notions of pro-natalist or maternalist reproductive autonomy to which Australian democracy proudly hoisted its flag.

Twenty-five years ago, I doubt I could have dreamed that, in the second decade of the twenty-first century, this ‘proud Australian democracy’ might have progressed to the point where it could invite a comparison of its own human rights policies and infringements of liberty in any uncomfortable proximity to China’s established record of coercion in relation to reproductive autonomy. However, in the last decade in Australia, successive Australian governments’ commitments to the policies of offshore detention have raised disconcerting questions around the predicaments of women seeking asylum in Australia and the role of the Australian state in relation to reproductive coercion.

From consent to coercion in the offshore detention context

As social workers counselling vulnerable asylum seekers, it seems incumbent upon us to ensure that such uncomfortable questions about women’s experiences in detention—in relation to their experiences of reproductive health and autonomy—see the light of day. For counsellors working with women who are asylum seekers and who have unplanned pregnancies, reproductive coercion is becoming an omnipresent threat due to the compromised level of autonomy and consent available to such women in offshore detention. Such decisions invoke a complex ethical minefield for women, their counsellors and their doctors. Women who are pregnant and do not want to abort, but are only deciding to have an abortion because they fear for safety of their children due to the oppressive environment of detention, are articulating the impact and influence of ‘compromised consent’ or ‘reproductive coercion’ by the Australian state.

A key tenet of immigration policies of successive Australian governments over the

last decade has been to arbitrarily force people who arrive by boat and seek asylum in Australia into offshore detention immigration centres (Fleay & Briskman, 2013). Subsequently, women and men who are detained in immigration detention centres like Manus Island and Nauru live for prolonged periods of involuntary detention in locations that have a range of inherent, well-documented, safety and health risks. The mental, physical, social and emotional illness due to this prolonged detention is well-documented (Silove, Austin & Steel, 2007). Recent case studies of offshore detention arrangements have also highlighted women’s vulnerability to sexual assault, and to pregnancy as a result of such assaults (Doherty, 2016). Such cases have encompassed women seeking abortion and stating they have been denied timely access to the procedure, while other cases have involved women stating they felt unhappy about having to have an abortion but feeling there was no other choice available due to their arbitrary detention (Wordsworth, 2014). This oppressive context of detention is thus a major factor that women consider when deciding whether they might be ready, able and willing to parent a child.

An unplanned pregnancy, of course, will expedite the need for women to consider the vexed question of whether or not to parent in an inherently harmful environment: an environment that is imposed upon them by their involuntary detention according to Australian immigration law. The conditions imposed upon these women thus forms a paradox for asylum seekers who face unplanned pregnancies while in state-imposed detention. The daily deprivation of liberty and autonomy in the detention centres means that the idea of consent is necessarily diminished. To ‘consent’ to continuing a pregnancy in inherently harmful conditions or to terminating an unplanned, but perhaps wanted, pregnancy entails huge psychological, physical and social risks. To ‘consent’ to requesting an abortion of an unplanned, but perhaps wanted, pregnancy is also a huge risk for such women. The factors for reproductive coercion are thus

established, and although this concept is usually applied to threats to safety made by another individual (usually an intimate partner or relative), in this context it is arguable that the immigration detention policies of the Australian state form a threat to a woman's safety, security and autonomy, and indeed to her ability to fully consent. *Neo-liberalism, choice theory and power: why it matters in the case of state-based coercion*

I argue that understanding neo-liberalism is central to understanding how state-based reproductive coercion can exist in this contemporary historical epoch. Issues of state power, its relationship to the idea of 'unfettered choice' and the impact on state subjects are inextricably linked. Indeed, while feminist activists in the area of reproductive rights have long used the term 'choice' as central to campaigns for women's unfettered access to abortion, the concept of choice itself has also been critiqued. In the last decade in Australia and internationally (Baker, 2008; Fraser, 2013), researchers have questioned the neo-liberal individualist notion of choice, arguing that it can obscure the structural and material barriers to a range of choices that marginalised and disadvantaged women may experience:

The lauded concept of choice plays [a role] in overstating women's advancement and disguising socially generated inequality. In particular, young women in this study comprehend domestic violence, unequal parenting and housework as matters of choice, while also implicitly understanding that they do not live up to the imagined unencumbered rational choice individuals of liberalism. (Baker, 2008, p.53)

Political theorist Nancy Fraser has made similar observations about the co-option of feminism by neo-liberalism: 'Neoliberalism turns a sow's ear into a silk purse by elaborating a narrative of female empowerment' (Fraser, 2014).

The rhetoric of power, choice and

control has often been employed disingenuously by the Australian Government when pertaining to women in offshore detention seeking adequate perinatal healthcare for their pregnancies. In a 2015 radio interview, Immigration Minister Dutton described women's apparent power as such:

If people believe that they're going to somehow try and blackmail us into an outcome to come to Australia by saying we're not going to have medical assistance and therefore we put our babies at risk—that's a judgement for people to make... But we're not going to bend to that pressure... I believe very strongly that we need to take a firm stance, provide the medical support that's required, but if people think they're going to force our hand to come to Australia – that is not going to happen. (15 October, 2015, np)

Such a reversal in the description of the actual personal, systemic and structural power available to women and their families in offshore detention serves to obscure the reader's view of the refugee 'other': seeking perhaps to invoke fear, scorn and even jealousy of 'such' women in their ability to command government services at will.

Further to this narrative of the 'power' inherent to women in offshore detention, Minister Dutton discussed the 'generous' provision of government-funded services available to a woman who it seemed was 'supported', at every turn, to make a 'decision': a situation that appeared to concern only her individual inability to make a rational, informed and timely decision:

We provided assistance to airlift this lady which showed our clear intent to provide support... We provided that support, she came to Australia, saw numerous doctors, mental health nurses, and then made a decision... after the health professionals consulted with the lady, the lady

made a decision and was sent back to Nauru. (Moody, 2015, np)

However, we must look more deeply at the language of ‘decisions’ and ‘individual support’ being proffered as proof of women’s autonomy in such government narratives. Indeed the truth of the matter lies in a fuller analysis of the materialist conditions that precisely prevent autonomy in this context.

Such a discussion of power in this context does not seek to deny women’s agency, nor the need for women to make a final decision about their pregnancy no matter what their circumstances. I do not seek to co-opt the critique of ‘choice’ by ‘anti-choice’ abortion activists who seek to situate all women’s choices for abortion as inherently coercive—as ‘non-choices’—yet who simultaneously position continuing a pregnancy as a ‘natural choice’ for women. Indeed I concur with pro-choice ethicist Leslie Cannold (2002), who warned of the dangers of discrediting women’s ability to choose:

By arguing that women are fundamentally incapable of mustering the rationality and autonomy necessary to make decisions about unplanned pregnancies (or presumably anything else) that are worthy of respect, women-centred strategy absolves women of moral responsibility and thus culpability for abortion. (p. 174)

My position is certainly not one where women are incapable of making decisions and where all abortions are automatically considered harmful and fundamentally coerced, such as that of anti-choice activist Melinda Tankard Reist (cited in Baker, 2008), who argued that:

[Those] asserting a woman's ‘right to choose’ have obscured its harmful effects and the constraints and coercion which so commonly characterise the circumstances of pregnancy and subsequent ‘choice’ of abortion. (p.62)

What I do argue for, however, is a fuller analysis of the way the broader structural

conditions of oppression and power inherent in mandatory offshore detention ensure that women’s choice is without doubt impacted by state power. Despite these important cautions on the co-option of the choice critique as used by anti-choice activists, I strongly agree with Baker’s (2008) directive: to implore feminist researchers to consider instead and to scrutinise the neo-liberal co-option of ‘choice’ as a mantra that obscures structural inequality:

[It is] vital that the ways in which women's choices are variously compelled, burdened, impaired and limited in a male dominant culture are acknowledged and challenged. Its function in the masking of unfairness and exploitation when inequality and polarisation are deepening must be exposed. (p. 63)

In addition to Baker’s analysis of male dominant culture in relation to women’s choice and coercion, I argue it is essential to analyse other social and political power relations that affect and constrain women’s choices, such as those constituted by policies of offshore detention orchestrated by successive neo-liberal governments in Australia, both Labor and Coalition. To analyse the socio-political contexts of forced detention and its impacts on women’s reproductive choices is by no means an argument intended to diminish the need for both maternity and abortion facilities to be made available to women in offshore detention. To further restrict women’s control over this ultimate decision, one way or the other, is not the intention of this essay. Women’s ultimate self-determination over these complex decisions must be maximised so that even limited ‘control’ is available in this context.

However, just as paramount is our duty to scrutinise government immigration policies that engender social-political inequity for asylum seekers in detention centres and dictate the very conditions that create such a ‘thin’ reproductive choice context for women who are pregnant. For

women and families, this context means that in relation to family planning decisions they feel they are ‘damned if they do and damned if they don’t’.

What is to be done?

Clearly, a simplistic reliance on individual, interpersonal counselling frameworks will fail to meet the basic needs of asylum seeker women in offshore detention. The indignity and scale of injustice is so great and so powerful that it is painfully clear that a focus on ‘individual agency and choice’ alone only tells part of the story. So what do we, as social, counselling, community workers and academics, do? How do we ensure that a commitment to human rights for all of our clients in relation to sexual and reproductive rights is adhered to, for everyone our government has responsibility for? It is timely to remind ourselves of the human rights context that we must return to:

[There is a] basic right of all couples and individuals to decide freely and responsibly the number and spacing and timing of their children. And to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. (United Nations Family Planning Association, 1994, np)

In addition to our ability to provide (limited and flawed) psycho-social interpersonal support for our clients who experience symptoms of ongoing trauma in the face of their arbitrary detention, I argue that we have an ethical responsibility to speak up and speak out about what our clients are telling us—for the world to hear. When the clients have left our waiting rooms, we must analyse the discourse of choice as co-opted by neo-liberal governments who seek to disavow their human rights responsibilities to asylum seekers.

In the last two years the area of violence against women has commanded hitherto unknown public awareness, media attention and even public policy change on the back of decades of campaigning by feminist services and the feminist movement. Largely,

however, the forms of violence against women exposed have been interpersonal violence and family violence. It is now up to community, counselling and social workers who work with the most marginalised women in our care to now expose the ‘hidden’ state violence that we are witness to. For a truly intersectional feminism to exist in relation to violence against women we must speak out and resist the silence that has been enforced upon our clients and ourselves. We are witness to how the policy of offshore detention compromises women’s health, including their reproductive health and autonomy, in a myriad of ways. We must agitate for change and hold the powerful to account, to the truths of the women who speak so cogently when we choose to listen.

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Disclosures

As a social worker in women's health services for nearly fifteen years I have changed the details in the case examples I refer to in this article to protect the privacy of the women and health professionals involved. Other than the details that are already made publicly available via documented primary sources, such as media reports, narratives included here may involve single or multiple scenarios amalgamated to ensure this anonymity.

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Biography

Patricia Hayes (BSW, MA Community Development) is a social worker who has worked in the areas of pregnancy options and abortion counselling, maternity social work, prevention of violence against women and women's health promotion for over a decade. She is also a founding member of the National Alliance of Abortion and Pregnancy Options Counsellors (NAAPOC) as well as a member of the Australian Association of Social Workers Women's Health Practice Group. She is currently a Lecturer in Social Work at Victoria University, Melbourne and still works in the area of pregnancy and abortion counselling.

Intimate partner sexual violence: An overview of the problem in Italy

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Intimate partner sexual violence (IPSV) is a severe and complex social problem, present all over the world but often overlooked. The aim of this review is to show current knowledge about IPSV, with a particular focus on Italy. Sexual violence involves a large range of negative consequences for mental, physical and sexual health of victims, that increase when violence is committed by a partner because of the daily proximity with the aggressor, the repetitive nature and the association with other forms of violence. Victims often find it difficult to report the sexual violence by their partner both for individual factors, such as guilt, shame or fear, or for social factor like gender stereotypes. In Italy, sexual violence was recognized as a crime in 1996. However, in some contexts, IPSV may be culturally accepted, inducing women to tolerate a certain degree of sexual violence by their partner. Given the seriousness of the consequences, it is important to investigate the wide range of risk factors associated with IPSV in order to create specific prevention programs and guidelines that help practitioners to investigate the phenomenon and to give adequate support to victims.

Intimate partner sexual violence (IPSV) is currently of concern in the public health domain, and it is associated with several negative risks for physical, mental, and sexual health of the victims (Campbell, 2008; Messing, Thaller & Bagwell, 2014; Möller, Bäckström, Söndergaard & Helström, 2012). Contrary to what people usually believe, the consequences of sexual violence (SV) may be more traumatic if the abuser is an intimate partner than a stranger as a result of the constantly proximity with the aggressor (Temple, Weston, Rodriguez & Marshall, 2007; Tiihonen Möller, Bäckström, Söndergaard & Helström, 2014).

IPSV is an important aspect of intimate partner violence (IPV). Although one third of sexual assaults are committed by intimate partners, IPSV is frequently ignored in studies about IPV and SV (Bagwell-Gray, Messing & Baldwin-White, 2015). Usually, IPSV is not an isolated episode but is very likely to be repetitive and associated with different types of violence or threats (Möller et al., 2012). Positive intimate relationships are characterized by respect, trust and security; thus, when women are victims of violence by a partner, these important aspects are missed,

and women can come to feel confused, shameful, betrayed, and guilty, and may show features of post-traumatic stress disorder (Beck, McNiff, Clapp, Olsen, et al., 2011).

So far, IPSV has received limited attention in research (Bagwell-Gray et al., 2015), and, because of its highly personal and private nature, some researchers have affirmed the difficulty to define and consequently measure sexual violence (Cook, Gidycz, Koss & Murphy, 2011). Women are often unwilling to talk about sexual assaults by their partner, particularly in countries where IPSV is more culturally accepted or is not considered a crime (Boughima & Benyaich, 2012). In fact, victims may not report their experience, because of shame or because they believe that it is the “wife’s duty” to satisfy her partner sexually and therefore consider themselves responsible for the partner’s behavior (Carabellese, Tamma, Tegola, Candelli & Catanesi, 2014; Martin, Taft & Resick, 2007).

It is worth mentioning that in Italy, until the 1975 (Law 151/1975), the status of women appeared to be one of extreme

subordination. During the fifties, the judges affirmed the obligation of women to indulge sexually as a “remedy for concupiscence” for the benefit of the other spouse, or as the supreme goal of the continuity of the family. According to the current Article 143 of the Italian Civil Code (i.e. “Common rights and duties of the partners”), the duty of each spouse to maintain a normal sexual activity with each other constitutes an expression of the obligation of moral support, and the requirement of cohabitation, subsisting the mutual duty to meet the needs of others, including those of a sexual nature.

Theoretically, the rejection without justification of sexual activities of a spouse with each other can be evaluated for a responsibility of separation, unless the refusal of sexual relations is a consequence of the failure of the union and not the cause of the relationship crisis. Thus, socio-cultural cofactors may also contribute to explain why many women do not recognize their experience as one of sexual assault and they do not report their violent partners to the authorities (Carabellese et al., 2014).

Recently, Bagwell-Gray and colleagues (2015) conceptualized IPSV as “intimate partner sexual abuse (i.e., the use of manipulative, psychologically abusive tactics to keep a partner in submissive positions of power; strategies include sexual degradation, non-contact unwanted sexual experiences, and reproductive and sexual control)” (p.8), “physically forced sexual activity (i.e., unwanted sexual experiences involving touch but not sexual penetration or having sexual body parts fondled or grabbed)” (p.8; also Black, Basile, Breiding, Smith, et al., 2011, p.17), “intimate partner sexual coercion (i.e., the use of non-physical, controlling, degrading, and manipulative tactics to obtain, or attempt to obtain, unwanted oral, vaginal, or anal intercourse, including forced penetration and sex with objects)” (p.8), and “intimate partner sexual assault (i.e., the use of physical violence or the threat of physical violence to obtain, or attempt to obtain, unwanted oral, vaginal, or anal intercourse, including forced penetration and sex with objects. [This] Also includes unwanted

penetration when a victim/survivor is unable to consent or is ‘unaware’, i.e. asleep or under the influence of drugs and alcohol)” (p.8).

The aim of this review is to show current knowledge regarding the prevalence and incidence of IPVS, to explore possible risk factors, summarize the consequences related to IPVS, the co-occurrence with other types of violence, and the intervention and the treatment of IPVS victims. So far, authors reviewing violence in intimate relationships often incorporate IPSV under a comprehensive definition of IPV and they do not consider the unique features and consequences of IPSV separately from other forms of IPV (Campbell, Dworkin & Cabral, 2009). Moreover, recently some researchers have focused on definitions and measures associated with IPSV (Bagwell-Gray et al., 2015), but research lacks consistency in unique risk factors, consequences and treatments of IPVS victims. The review is mostly focused on the Italian situation, since violence in intimate relationships is an issue that has recently obtained an emerging national attention, even if it is a severe and common phenomenon (ISTAT, 2007; 2015). *Italian legislation in the field of gender-based violence*

Before facing the problem of IPVS, it is useful to have an overview of the legislative measures to combat gender-based violence because the laws are social factors that may influence not only the frequency of the phenomenon, but also the report from a victim (Jewkes, Sen & García-Moreno, 2002). At international level, with the World Conference on Human Rights and the Declaration on the Elimination of Violence against Women in 1993, violence against women was recognized as a significant public health, social policy, and human rights issue (Devries, Mak, García-Moreno, Petzold, et al., 2013). The UN Declaration on the Elimination of Violence against Women states that: “violence against women is a manifestation of historically unequal power relations between men and women” and that “violence against women is one of the crucial social mechanisms by which

women are forced into a subordinate position compared with men” (UN, 1993). So far, there are significant global commitments to deal with gender inequality and violence against women, including IPV (Devries et al., 2013). In particular, since 2008, the United Nations Secretary-General’s UNiTE campaign aimed to create a world free from violence against all women and girls; since 2013, the United Nations Commission on the Status of Women tried to prevent and eliminate all types of violence against women and girls; and, finally, the Millennium Development Goals (MDGs) aimed to promote gender equality and empowerment of women. Similarly, several national governments, including Italy, have laws which expressly criminalise and punish IPV (Devries et al., 2013).

In Italy, the laws in the field of violence against women have had a long and complex process, in which the widespread awareness of the problem, supported by strong civil rights and women’s movements, has often clashed with cultural attitudes related to a stereotypical view of women and gender relations (Corradi, 2008). Moreover, the attention to violence against women has been limited on the side of institutions and political parties (Rosselli, 2014), and for a long time all political sectors, in a parliament where women were just a minority, shared a culture of “familism” which depended on the opinion that traditional family protects social order (Lombardo & De Giorgio, 2013). As a consequence of this idea, until 1996 SV was condemned as a “crime against public morality”. In fact, to reform the Italian penal code about SV, a long debate was needed that led to the confirmation of SV as a “crime against the person” (Law 66/1996).

Five years later, the law on domestic violence was passed (154/2001). It involves all family members (wives, husbands, cohabitant partners, children, parents) who are victims of physical and psychological violence and allows them to request and obtain a “protection order” that forces the abuser to leave home (Rosselli, 2014). Subsequently, law 38/2009 has increased the punishment for SV and submitted stalking as

a type of punishable offence. From 2013, the attention to violence against women increased. A “special bureau” on gender-based violence began working to develop a national statistical Observatory on Gender-Based Violence (Rosselli, 2014). In the same year, the law 93/2013 was approved by the Council of Ministers in order to combat femicide, and the Council of Europe convention on “Preventing and combating violence against women and domestic violence”, called Istanbul Convention, was also ratified and became law (Law 77/2013). Finally, in 2015 the law 80/2015 enshrines the right to take time off work for up to three months, with pay, for women included in protection programs, duly certified by social services, anti-violence centers or shelters.

Nonetheless, it has to be underlined that in Italy the legislation addressing gender-based violence is the result of different reforms, aimed to safeguard the traditional family structure, the public order and the safety of citizens, and it does not derive from a shared public and cultural approach (Rosselli, 2014). A European survey with 42,000 women across 28 Member States of the European Union (Fundamental Rights Agency - FRA, 2014) showed that the majority of women surveyed in Italy (58%) state that they are not aware of any legal or political measures that target the problem of domestic violence. This differs what has been found in other countries as Croatia (70%), Lithuania (66%), Slovenia (62%), Sweden and France (both 61%) where the majority of women are aware of specific laws and political whilst the Italian outcome matches with Estonian (27%) and Bulgarian (28%) women.

In Italy, the attention to violence against women has been peculiar compared to the dominant intervention model used at international level which signifies the development of a wide partnership (i.e., public institutions, civil society) while in the Italian context a comprehensive approach has been lacking, and this has led to a system of services that is very differentiated across the country (Rosselli, 2014). However, the experience of the anti-violence centres and

the civil society organisations linked to the Italian women's movement are an example of best practice because they created a national network in the field to exchange experiences and to interact with the local and national public authorities (Rosselli, 2014).

Prevalence and Incidence of Violence against Women in Italy

The national survey conducted by the Italian National Institute of Statistics (ISTAT) in 2014 reports that violence perpetrated by men against women in Italy is a widespread phenomenon (ISTAT, 2015), even if lightly lower than the average of other countries in the world (García-Moreno, Jansen, Ellsberg, Heise & Watts, 2006). Telephone interviews of 24,761 women (21,044 Italian and 3717 foreign) aged between 16 and 70 years indicate that 31.5% of Italian women suffered at least one episode of physical or sexual violence by a man during their lifetime; in particular 24.7% of violent acts are committed by a non-partner, while 13.6% by an intimate partner or ex-partner (5.2% present partner, 18.9% ex-partner) (ISTAT, 2015).

From the EU-wide survey (FRA, 2014), it appears that Italian women are less likely to have experienced violence than the majority of women from other European countries: the prevalence of physical and/or sexual intimate partner violence in Italy (19%) is higher than or the same as in countries such as Greece and Portugal (19%), (19%), Malta, Cyprus and Ireland (15%), or Austria, Croatia and Slovenia (13%), but lower with respect to such countries as Denmark and Latvia (32%), United Kingdom (29%), France (26%), Belgium and Lithuania (24%), Germany (22%), or Czech Republic and Hungary (21%). The FRA survey results on women's experiences of violence were compared with countries' scores on the Gender Equality Index developed by European Institute for Gender Equality (EIGE, 2015). The comparison showed that Member States scoring higher on the Gender Equality Index also are likely to have a higher prevalence of physical and/or sexual violence against women since the age of fifteen. In part, this is because higher equality between the sexes at

the EU Member State level is reproduced in greater awareness about violence against women and higher enhanced mechanisms to encourage and facilitate reporting of incidents (FRA, 2014).

Such high rates of intimate violence underline the importance of focusing on the complexity and specificity of these forms of victimisation in the intimate relationship: 11.6% of Italian women experienced physical violence, like attacks with kicking and punching, or with sharp objects, or even real weapons or attempted strangulation, smothering or burning; while 5.8% of women suffered SV, like forced humiliating sexual activity, attempted rape, rape and forced sexual intercourse with other people. In particular, the rate of attempted rape or rape by an intimate partner is 2.4%: 0.5% by current partner and 3.8% by ex-partner (ISTAT, 2015). Taking into account the difficulty to compare studies done in different countries and different times, Italian data stand out as relatively low in comparison with the average present in the literature. Lifetime rates of sexual assault by an intimate partner in national random samples have ranged from 7.7% to 13% (Basile, 2002). David Finkelhor & Kersti Yllo's study (1985) estimated that 10% to 14% of all married women have been or will be raped by their spouses. In Australia, it was estimated that 15% of all Australian women aged 18 years and over had experienced SV by a known person since the age of 15 (Tarczon & Quadara, 2012). Rape or attempted rape prevalence are estimated at 9.4% of women in the United States (Black et al., 2011) and 6.8% in Quebec (Rinfret-Raynor, Riou, Cantin, Drouin & Dubé, 2004).

ISTAT data (2015) underline that the most severe forms of violence are carried out by partners, relatives or friends. The rapes were committed by partners in 62.7% of cases, in 3.6% by relatives and 9.4% from friends. This is in line with the results of a British research that shows that the most common rapists are current and ex-husbands or partners, with 45 % of all rapes committed

by present partners, and a further 11% by past partners (Myhill & Allen, 2002).

Compared to the previous and the first Italian survey on violence against women (ISTAT, 2007), rates of physical, sexual and psychological violence committed by partner or ex-partner decreased, but not the most serious type of violence (i.e. rape and attempted rape). The decline in the rate of violence can be explained by more information, the field work of women's refuges but also by improved women's ability to prevent and combat the phenomenon and a social climate of greater condemnation of violence (ISTAT, 2015). However, by analyzing the data that emerged from the survey it must be considered that, despite cultural changes and the profound transformations of Italian habits, the ideologies of male sexual entitlement within a couple relationship are still present in Italian culture (Carabellese et al., 2014).

With regard to immigrant women, the risk of physical or sexual violence is similar to that of Italian women (31.3% versus 31.5%). However, physical violence is more common among foreign women (25.7% compared to 19.6%), while sexual violence is more common among Italians (16.2% against 21.5%), but the most severe forms, such as rape and attempted rapes, are most common among foreigners. Immigrant women, contrary to the Italian experience, especially suffer violence (physical or sexual) by partners or former partners (20.4% vs 12.9%) and less by other men (18.2% versus 25.3%). Considering the place of origin of foreign residents in Italy, women who are more at risk come from Moldavia (37.3%), Romania (33.9%) and Ukraine (33.2%), Morocco (21.7%), Albania (18.8%) and China (16.4%). Moreover, the majority (68.9%) of immigrant women report that violence by partner, current or previous, began in the country of origin (ISTAT, 2015).

Relation between IPSV and other types of violence

The severity of IPSV becomes even more concerning considering that SV committed by a partner is often related to other types of violence (Möller et al., 2012):

the perpetrator of reiterated violence against the same woman is frequently the partner or ex-partner even in cases of homicide (Carabellese et al., 2014). Usually, IPSV is correlated with psychological violence (Alsaker, Morken, Baste, Campos-Serna & Moen, 2012; Marshall & Holtzworth-Munroe, 2002) and stalking (Logan & Cole, 2011). Moreover, victims of physical violence by a partner are more likely to suffer marital rape (Bennice & Resick, 2003). Being victim of IPSV may involve frequent and severe incidents of both physical and psychological violence (Bagwell-Gray et al., 2015). According to Mburia-Mwalili and colleagues (2010), 40% of women with a history of IPV reported both physical and sexual violence, while in the study conducted by Zorrilla and colleagues (2010), 43% victims of sexual violence also reported psychological or physical violence. Alsaker and colleagues (2012) also found a significant association between sexual assault by an intimate partner and particular physical violence acts like hair pulling, arm twisting, biting, and violence against pregnant women's abdomen. Finally, compared with rape by acquaintances, sexual violence by partner implicates more frequent unwanted oral and anal intercourse (Bergen, 2006). In Italy, among victims of abuse by their partner, 26.8% experienced sexual, psychological and physical violence while 13.4% experienced sexual and psychological victimization. Almost all those of women who experienced physical and sexual violence (90.5%), suffered also psychological violence (ISTAT, 2007).

Because of the daily proximity to the aggressor, IPSV is characterized by a repetitive nature (Russell, 1990; Bennice & Resick, 2003). Similarly, Italian data showed that, when rape or attempted rape is committed by a partner, 63.1% of victims report having experienced it more than once (ISTAT, 2007).

Risk factors of IPSV

Few studies have explored risk factors typically associated with sexual violence within intimate relationships (Messing et al.,

2014). Because of geographical or methodological differences, sometimes data from different studies are discordant and have shown a wide range of risk factors that characterize both victims and perpetrators of partner violence (Abramsky, Watts, García-Moreno, Devries, et al., 2011).

Bronfenbrenner's (1979) ecological theory of human development is useful to conceptualize the several risk factors of IPSV within four levels: individual, relational, community and societal level (e.g. Heise, 1998; Tharp et al., 2013). The utility of an ecological framework is that it can suggest multiple strategies, at multiple levels of analysis, for intervening with IPSV victims (Campbell et al., 2009).

Risk factors for IPSV victims

The IPSV risk factors may be, on the one hand, specific for the victim and the aggressor or, on the other, common to both.

Among individual risk factors related to sexual violence experience, studies indicated that younger women were more likely to report being victims of partner sexual abuse (Russell, 1990), as were unemployed women (Black, Heyman & Slep, 2001; Cavanaugh, Messing, Amanor-Boadu, et al., 2014; Johnson, 2003), women with a higher education (Cavanaugh et al., 2014; Johnson, 2003), and drug and alcohol abuse (Boughima & Benyaich, 2012). Other factors include separation or divorce (Johnson, 2003), and having children (Cavanaugh et al., 2014). Moreover, violence in the victim's family of origin, a history of sexual abuse, and early sexualisation were associated with partner sexual abuse (Graham-Bermann, Sularz & Howell, 2011; Martin et al., 2007).

As relational risk factors, the severity of male-to-female partner physical aggression (Martin et al., 2007) and low family support (Djikanovic, Jansen & Otasevic, 2010) were correlated with IPV, including SV.

Concerning the community and societal risk factors, the main factors were: women from low-income households (Black et al., 2001), and traditional gender norms that tolerate violence (Krug, Mercy, Dahlberg & Zwi, 2002).

Analyzing the Italian situation (ISTAT, 2015), the majority of risk factors for male-to-

-female partner sexual abuse are in line with the national survey of other countries (i.e. Black et al., 2011): women who appear to be at greater risk of sexual violence by a partner are younger, separated or divorced, unemployed and have no family support. Moreover, in Italy, women with a high level of education and a work position like managers or entrepreneurs are more likely to report some forms of violence by their partners. Comparing to the past survey (ISTAT, 2007), in 2014 rates of violence against women are slightly higher in the Centre and in the South of Italy. It is also more frequent in the big cities. However these data should be considered with caution, because it could be an expression of the different opportunities for women who have a different education or live in different contexts, to recognize, declare and talk about the suffered experiences (ISTAT, 2007, 2015).

Risk factors for IPSV aggressors

Analyzing the aggressors' individual factors, studies showed that SV perpetration is directly or indirectly related to different variables such as multiple sexual partners, impersonal sex/casual attitudes toward sex, early initiation of sex, experiences of adolescence or adulthood SV victimization, past SV perpetration, exposure to sexually explicit media, and higher sex drive (Martin et al., 2007; Tharp et al., 2013). Furthermore, sex-related cognitions (i.e. sexual fantasies and attitudes that blame the victim or are supportive of sexual violence), attitudes accepting of violence and gender-related cognitions (i.e. rape myth acceptance, hostility toward women, traditional gender role adherence, and hypermasculinity) have been associated with SV perpetration (e.g., Abrahams, Jewkes, Hoffman & Laubsher, 2004; Sears, Byers & Price, 2007).

Several studies have found a significant relation between psychopathology and violence: the oppositional or antisocial disorders are particularly relevant to increase the probability of violent acts (i.e. Boots & Wareham, 2009; Krug et al., 2002). Moreover, research found that alcohol and

drug use was associated with violence, including intimate partner sexual violence (Abbey & McAuslan, 2004; Abrahams et al., 2004; Aguglia, Botter & Riolo, 2011; Djikanovic et al., 2010).

With regard to the relationship factors, partner conflict, physical violence or emotional abuse consistently predicted sexual violence (Abrahams et al., 2004; Tharp et al., 2013). Moreover, family of origin history characterized by conflict and different types of child maltreatment is a significant risk factor for IPSV (Abrahams et al., 2004; Koenig, Stephenson, Ahmed, Jejeebhoy & Campbell, 2006). Other important risk factors concern peer relationships because the latter may develop informal social norms that support sexual violence (Tharp et al., 2013).

Finally concerning community and societal level risk factors, studies found some empirical support for a relationship between community level of violent crime and sexual violence rates (Koenig et al., 2006). Similar to some studies from other countries, Italian women are more at risk of sexual violence if their partner has devaluing attitudes, has some problems with drug and alcohol use, is verbally or physically violent also outside the family, or has problems with police forces (ISTAT, 2015).

Common risk factors for IPSV victims and aggressors

There are some common risk factors both for victims and for aggressors of IPSV such as having a mother victim of physical IPV, having an early sexualisation, being a child victim of sexual or physical abuse, and having a dependency of drug and alcohol (Abrahams et al., 2004; Boughima & Benyaich, 2012; Martin et al., 2007; Tharp et al., 2013). In particular, Díez and colleagues (2009) have found that the proportion of violence between the parents of the victim was significantly higher in abused women (13.8%) than in non-abused women (4.6%). From the Italian survey it appears that women who experienced violence before 16 years old are more likely to suffer in adulthood (ISTAT, 2015). IPV becomes an even more worrying phenomenon when it involves children too: children who witness violence

are more likely to be perpetrators (Abrahams et al., 2004). A man is more likely to be violent if he suffered violence by his parents or if he was present for violence by his father against his mother. An alarming finding shows that the number of violent acts to which children are exposed increased compared to 2006, from 60.3% to 65.2% (ISTAT 2007, 2015). Moreover, living in a country that has traditional gender norms that tolerate violence increases the likelihood to be victim or perpetrator of IPV and SV (Krug et al., 2002).

Consequences of IPSV

Violence in an intimate relationship, compared to violence committed by a stranger, is more likely to be repetitive and more serious (Carabellese et al., 2014). During the episode of violence, victims stated that the injuries were so severe they required medical care, and most of them felt that their lives were in danger (Black et al., 2011). During attacks, 37.8% of Italian women suffered wounds, and 36.1% declared that they had feared for their lives. These rates increase significantly (42.6% and 46.7%) considering only sexual violence committed by partner or ex-partner (ISTAT, 2015). More than half of the women victims of general IPV reported that their health was poor or only fair and the vast majority of them reported at least one form of pain (Kelly, 2010). Moreover, Humphreys, Cooper and Miaskowski (2010) have found that longer abusive relationships are associated with the feeling of moderate or severe chronic pain. Given that sexual aggression is often associated with physical and psychological violence, it is difficult to differentiate the specific consequences of IPSV (Bagwell-Gray et al., 2015). Nonetheless, when IPSV is present with other forms of IPV, consequences appear more severe (Basile, Arias, Desai & Thompson, 2004). In part, this is because IPSV victims deal with particular challenges to recognize a partner's SV as a sexual assault, and they also have strong barriers to seeking help (Fredericton Sexual Assault Crisis Centre, n.d.). Thus, compared to IPV and SV by a stranger, IPSV involves some

unique impacts (McOrmond-Plummer, 2008).

Researchers have found that IPV victims have poorer overall physical health than women who have never experienced IPV (Díez, Escutia, Pacheco, Martínez, et al., 2009). As physical health consequences, the most frequently described were: chronic pain, circulatory disease, arthritis, heart and back problems, nerve system damage, and respiratory illnesses (Coker, Smith & Faden, 2005). Finally, IPV is highly associated with sleeping problems: more than 80% of women reported difficulty falling asleep or staying asleep (Kelly, 2010). Beside these physical injuries typically associated with IPV, some consequences are associated specifically to IPSV (Campbell & Alford, 1989): women report chronic genital pain, vaginal or anal stretching, bladder infections, urine losses, irregular menstruation, miscarriages or stillbirths and unwanted pregnancies. Moreover, victims of IPSV are more at risk to contract sexually transmitted infections, including HIV (Allsworth, Anand, Redding & Peipert, 2009).

Studies have also documented the psychological and behavioural consequences of physical IPV. Among others, these include post-traumatic stress disorder (PTSD) (Basile et al., 2004; Humphreys, Cooper & Miaskowski, 2010), depression (Coker et al., 2005), health risk behaviours (Gass, Stein, Williams & Seedat, 2010), shame and low self-esteem (Díez et al., 2009). Compared to physical abuse alone, women who also experience IPSV reported greater symptoms of PTSD, more severe symptoms of depression and suicidal thought (Mburia-Mwalili, Clements-Nolle, Lee, Shadley & Yang, 2010; Weaver, Allen, Hopper, Maglione, et al., 2007), and they are more at risk to be killed (Campbell & Alford, 1989).

Similar to other survivors of sexual violence, some of the effects of IPSV include anxiety, shock, strong fear, eating disorders, distorted body image, negative feelings about themselves, disordered sleeping, and sleep problems (Bergen, 2006; Russell, 1990). Some victims report also sexual dysfunction and emotional pain for a long time after the violence ended (Bennice & Resick, 2003;

Finkelhor & Yllo, 1985; Russell, 1990).

With respect to the IPV victims, raped women are more likely to be more physically violent with their children (Finkelhor & Yllo, 1985). In part, this is because in families in which the men engage in severe IPV, as IPSV, parental physical aggression toward children is often present (Jouriles, McDonald, Smith Slep, Heyman & Garrido, 2008).

The research conducted in Italy in 2014 reports that more than half of the victims of physical and/or sexual violence (52.75%) suffer from loss of confidence and self-esteem. Among the consequences are very frequent anxiety, phobia and panic disorder (46.8%), despair and feeling of impotence (46.4%), sleep and nutrition disorder (46.3%), depression (40.3%), and difficulty concentrating and memory loss (24.9%), recurrent pain in the body (21.8%), difficulty in managing the children (14.8%), and self-harm or suicidal ideation (12.1%) (ISTAT, 2015).

Intervention and treatment

As mentioned, despite the severity of the consequences, IPSV is a problem that has received limited attention. Survivors of IPSV have difficulty reporting their experiences and seeking formal or informal help (Russell, 1990). When victims of IPSV try seeking help and support, they may experience the same difficulties as victims of other forms of violence in intimate relationships: women may hesitate to report because of familial loyalty, fear of their abuser's revenge, fear of being negatively judged by others or not believed, fear of losing children, helplessness, shame, or self-blame (Ansara & Hindin, 2010; Bergen, 2006). Moreover, seeking help or leaving the violent relationship can be associated with an increase of violence (Kelly, 2010).

However, some difficulties in reporting are particularly characteristic of the experience of IPSV. Some societal and community factors may bring women and professionals to believe that it is a "wife's duty" with comply to sexual claims and therefore not consider it worth reporting or examining (Bergen, 2006). In Italy, 19.4% of

women consider violence by partner or ex-partner as “only something that happened”, 44% identify it as “something wrong but not a crime”, and only 35.4% of women recognize it as a crime. In the case of sexual violence in general, 51.9% of women recognize it as a crime (ISTAT, 2015).

Despite the seriousness, women tend to hide the violence within intimate relationships, especially when they are victims of IPSV (Bergen, 2006). Given the difficulty of talking about an experience of violence by an intimate partner, women are more likely to confide in a family member or a friend. Only in situations where the violence persists, do women seek formal support (Ansara & Hindin, 2010). Italy is not an exception (ISTAT, 2015): 23.5% of women victims of violence by a previous partner did not speak with anybody about their experience; rates increase to 39.9% for violence by current partner. They confide more with informal support as friends (35%), family member (33.7%), other parents (11.2%) than formal support as police, lawyer or magistrate (6.7%), colleague or superior (1.5%), doctor or nurse (1.4%), emergency assistant (1.2%) and social assistant (1.1%).

IPSV victims have even more difficulty to speak with someone compared to IPV victims; reticence to talk with someone is higher in rape victims (ISTAT, 2015). Only 3.4% of women victims go to shelters. Interestingly, only 12.3% of victims report the violence to the police: in particular 14.5% report their previous partner, but only 6.3% report the current partner. However, if the woman has suffered rapes or attempted rapes by the partners, this increases both the likelihood of complaint (17.5%) and the recourse to anti-violence centres (8%). Moreover, immigrant women are more inclined (17.1% versus 11.4%) to report when compared to Italian women (ISTAT, 2015).

Considering the trend over time, the most recent research shows a greater awareness of suffered violence: about the violence from partners or former partners in the last five years, it is clear that women report more (11.8 versus 6.7%), they talk about it more (the percentage of those who do

not talk to someone has decreased from 32% in 2006 to 22.9% in 2014), they are turning more to the refuge, or services for violence against women (from 2.4% to 4.9%). Moreover, most victims consider it a crime and less like “something that’s just happened” (ISTAT, 2007, 2015).

In Italy in 2006, only 9.9% of women victims of IPV were very satisfied with the police’s treatment; in 2014 rates rose to 28.5%. However, the judgment was negative for 45.8% of women (ISTAT, 2007, 2015). In general, the IPSV victims say that they are more satisfied with the police’s treatment compare to the IPV victims. In fact, despite low denunciation rates, women that are living in Italy report to the police more sexual violence (16%) than physical violence (12.5%) by a partner or ex-partner. However, the perception of satisfaction with the police and reporting of sexual violence are higher for immigrant women than the Italian women (ISTAT, 2015). Given that IPV is a sensitive issue and women are often blamed for the violence they experience (Carabellese et al., 2014), it seems that Italian women compared to immigrant women feel themselves to be more stigmatized to report the sexual violence to the police, and this limits the assistance that the legal system can offer to these women.

It is very important to receive the victim, believe and guarantee the confidentiality of her report (D.i.Re, 2014), and normalize her emotions and her reactions (Campbell & Alford, 1989). Cognitive-behavioral therapies and anxiety management training have shown positive effects in symptom reduction for IPSV victims (Bennice & Resick, 2003). Women should also have an opportunity to be involved in self-help groups, to reduce the isolation of the victims and encouraging the emergence of new social links (D.i.Re, 2014).

Given the more severe consequences that victims experience when they leave their home (Kelly, 2010), and especially the IPSV victims that are more likely to be killed (Campbell & Alford, 1989), it is fundamental to give priority to the safety of

victims, ensuring that they will be hosted by a friend or family member, or providing all the information about the services and the anti-violence centres where victims can find help and support (D.i.Re, 2014; Messing et al., 2014). Shelters often give women practical support like assistance to find a new residence, a new job, receive possible legal procedures and to take care of children (D.i.Re, 2014).

Discussion

Given the IPSV is a serious and preoccupying social problem present all over the world (Messing et al., 2014), a greater focus on prevention is crucially needed in cooperation with different support and help services such as social, health, legal services (Heise, 2011). The significant relationship between history of violence during childhood and later perpetration of IPSV underlines the need for early childhood prevention interventions, especially for children living in violent families (García-Moreno & Watts, 2011), such as parenting interventions (Heise, 2011).

Research has also documented a significant positive association among sex-related cognitions (i.e., sexual fantasies and attitudes that blame the victim or are supportive of sexual violence), attitudes accepting of violence, gender-related cognitions (i.e., rape myth acceptance, hostility toward women, traditional gender role adherence, and hypermasculinity) and SV perpetration among diverse population groups (e.g. Abrahams et al., 2004; Sears et al., 2007). Such research highlights the importance of strategies to change social norms and attitudes supporting SV and IPV, by means of a promotion of more egalitarian gender role attitudes that may decrease violence supporting attitudes (Yoshihama, Blazeviski & Bybee, 2014), and, consequently, help prevent IPSV perpetration. Some authors have identified some effective social change interventions about IPV and SV, such as actions to support enhanced local activism against violence, trying to increase the presence of men in violence prevention, and the media use to spread the promotion of gender equitable and nonviolent relationships

and incite community members to take action when violence occurs in order to be effective bystanders (Devries et al., 2013; Heise, 2011; McMahon, Palmer, Banyard, Murphy & Gidycz, 2015).

Violence is also present among immigrant women (e.g., ISTAT, 2015). To decrease the supporting attitudes of intimate partner violence in immigrant communities, some researchers have found that community-based prevention programs aimed to promote individuals' participation in the activities of the community could be an effective way to prevent partner violence in this specific target group (Yoshihama et al., 2014).

Given that IPSV is more traumatic than SV by a stranger, because of multiple assaults often associated with other forms of violence (Möller et al., 2012; Temple et al., 2007), it is important to deepen prevention and treatment strategies to help IPV victims to overcome this severe experience. To reach this objective, as well as to increase the connection and the trust in the formal services for battered women, the professionals must build effective outreach strategies (Kennedy, Adams, Bybee, Campbell, et al., 2012). Professionals must also operate meticulously in order to keep the peculiar service needs of the victim, which may not prioritize a clinical approach, but material resources and support services that are more women-driven (Sullivan & Bybee, 1999). Moreover, it is important to develop a sense of control because it is a significant aspect for women who have experienced sexual or physical victimization (Zweig & Burt 2007). Finally, women may be not aware of any legal or political measures that target the problem of domestic violence (FRA, 2014). To decrease this critical situation, policies and laws are significant not only to promote the unacceptability of IPV, but also to offer legal actions for protecting the victims (Devries et al., 2013).

Conclusions

Findings from this review demonstrate that IPSV, being at the intersection of SV and IPV, is characterised by not only the

same risks and consequences of both of these types of violence, but also IPSV includes a number of unique effects (McOrmond-Plummer, 2008). Compared to SV perpetrated by a stranger, IPSV usually occurs repetitively in a relationship. Because of the experience of repeated abuse, the likelihood of specific physical injury and trauma increases (e.g., enduring and serious gynecological conditions, cervical cancer, and unwanted pregnancies or sexually transmitted diseases) (Allsworth et al., 2009; Campbell & Alford, 1989). Compared to IPV alone, women who are victims both of SV and physical IPV are at a higher risk for homicide (Campbell & Alford, 1989). In addition, those women carry more severe psychological consequences such as depression, suicide, PTSD, anxiety, fear, self-blame, low self-esteem, guilt, and shame (Bergen, 2006; Mburia-Mwalili et al., 2010; Weaver et al., 2007). Some societal and community factors may explain the more severe IPSV consequences. For example, IPV victims may have difficulty in naming their experience as one of SV because women are socialized to define a rape as non-consensual sex between two strangers (Fredericton Sexual Assault Crisis Centre, n.d.). Moreover, the “wife’s duty” to satisfy their husbands sexually is another societal belief that repetitively refutes IPSV experience as one of sexual violence (Bergen, 2006).

These social attitudes toward IPSV hold a number of repercussions for IPSV survivors who may reach out for help. Informal support may deny IPSV, informing the victim that it is her “wife’s duty” to satisfy her partner sexually (Fredericton Sexual Assault Crisis Centre, n.d.). Similarly, formal support such as police, the legal system or other service providers could have stereotyped ideas, attitudes and beliefs and there they could criticize and judge the IPSV victims (Bennice & Resick, 2003).

The negative consequences for IPSV victims could be more severe in countries like Italy, where IPV is more culturally accepted (Boughima & Benyaich, 2012). In Italy, over the past 20 years, there have been social changes regarding the issue of gender

violence. However, it is possible that in some Italian social contexts gender stereotypes are still present, inducing women to accept a certain degree of violence (Carabellese et al., 2014).

Italian empirical reports showed that immigrant women were slightly less likely to be sexually assaulted by their intimate partners than Italian women (ISTAT, 2015). Moreover, some researchers showed that same-sex relationships may experience IPSV (Messinger, 2011). Further research should explore and analyze the problem of IPSV also within minority groups. In fact, a greater knowledge of the specific characteristics of the possible IPSV victims will allow a better estimate of its prevalence, help the researchers and professionals to understand the specific needs and barriers in seeking support for each of them, and design tailored interventions.

To conclude, IPSV is a problem that cannot be supported by gender stereotypes, but must be recognized as a crime by all social actors that may be involved in it. Community psychology research should be undertaken to identify and share the different community-based interventions able to promote social change in the attitudes supporting intimate partner violence, and therefore having an impact in reducing this phenomenon. Communities have a central role in creating a coordinated response to IPV (Allen, Todd, Anderson, Davis, et al., 2013): they should increase the local conversation within health, social, political organizations, and also within community roundtables and task forces. The aim is to build a competent community that is able to effectively deal with the intimate partner violence, and also IPSV. Only with synergy between health and social services (i.e. local authorities, police, associations and informal networks) and a structured networking between different social actors, can we build real security and an effective way to fight violence against women.

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Women's oppression through narrative: A Foucauldian perspective

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Foucault's theory on Panopticism posits that people who perceive that they are under surveillance act according to the values and rules set forth by the entity that is believed to be watching over them. Consequently, despite not being able to ascertain whether they are indeed being watched, such people continue to act in such manner out of fear of persecution or punishment. This theory is traditionally applied to institutions such as hospitals, prisons, schools, and workplaces. In this paper, I used Foucault's theory to analyse the values, behaviour, and action of Palestinian women and the seemingly invisible entity that encourages them to uphold gender roles, believe in their inferiority as women and the superiority of men, and perpetrate discrimination and violence against women in various aspects and means. I argue that Palestinian women are oppressed and kept under surveillance through the narratives and oral history that emerged in the aftermath of the 1948 Nakba as a form of resistance to the dominant narratives of the Zionist project.

In the past decades and even more so in recent years, there has been much interest and action towards understanding, analysing, and eliminating discrimination and violence against women. Discrimination against women is defined as:

any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field (United Nations General Assembly, 1979, p.2).

Violence against women is a broad term that refers to "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in the public or in the private life" (United Nations General Assembly, 1993, n.p). Violence against women, in its universal form, can be divided into two categories: family or intimate partner violence and community violence. Family or intimate partner violence describes violence directed at a family member that often takes place in the home, while community violence describes violence between people who are

usually unrelated and who may or may not know each other, and it generally takes place outside the home (Miller, Grabell, Thomas, Bermann, & Graham-Bermann, 2012). Gender-based discrimination and violence is rooted in the inequality between men and women.

While the global prevalence of violence against women remained constant between 2013 and 2014, the prevalence of intimate partner violence has increased from 26% in 2013 to 35% in 2014 (World Health Organization, 2014), although this increase might reflect higher reporting rates and/or improved law enforcement and data collection. It is important to understand, address, and eliminate such forms of discrimination and violence against women, but it is equally important to identify other forms of oppression of women that may not be represented in statistics or tried in courts of law. In this paper, I will discuss how women are oppressed through narratives and in the formation of oral history, with particular focus on the narratives of Palestinian women and peasantry. Although the suppression of the voice of women may not leave physical marks or wounds, such discrimination constrains their potential, influences their behaviour, values, and action, and ultimately forces their psyches to conform to the standards and restrictions set forth by the overarching oppressive force in society.

Theoretical Perspective: Foucault's Panopticism

In an analysis of the mechanisms and influences behind the changes in the French (as well as the Western) penal system, Foucault (1977) described a theory he termed Panopticism, which is based on the idea of the Panopticon as defined by Jeremy Bentham. According to Bentham (1791/1995), the Panopticon is a building or structure composed of an outer circular building divided into cells and an inner central tower. Each cell in the peripheral building has a window on the exterior wall that allows light to pass through and another on the interior wall, which corresponds to an equally spaced and evenly situated window in the central tower.

The specific design and architecture of the Panopticon allows a single watchman to see and observe all persons housed in individual cells within the structure, without the latter knowing with absolute certainty whether they are being watched or not at any specific time (Foucault, 1977). While it is impossible for a single watchman to observe all cells at the same time with equal focus, the slightest possibility that an individual is under observation at specific times forces all individuals within the structure to act as though they were being watched at all times (Foucault, 1977). Consequently, the divisions within the structure (i.e. the separated cells) imply a lateral invisibility that guarantees order as individuals are not able to plan and act against the established system. The design of the Panopticon may apply to any space of surveillance and behaviour regulation such as schools, prisons, hospitals, and workplaces. Foucault (1977) described such examples:

If the inmates are convicts, there is no danger of a plot, an attempt at collective escape, the planning of new crimes for the future, bad reciprocal influences; if they are patients, there is no danger of contagion; if they are madmen, there is no risk of their committing violence upon one another; if they are schoolchildren, there is no copying, no noise, no chatter, no waste of time; if they are

workers, there are no disorders, no theft no coalitions, none of those distractions that slow down the rate of work, make it less perfect or cause accidents. (pp. 200-201)

The primary effect of the Panopticon setting is to induce "a state of conscious and permanent visibility that assures the automatic functioning of power" (Foucault, 1977, p. 201). In other words, the individuals in the isolated cells (i.e., the inmates) have a constant sense of being under surveillance and, as such, are forced to behave as expected all the time. Therefore, the power inherent in this setting or architectural apparatus lies in the way that the surveillance is permanent in its effect even though it is discontinuous in action. That is, while the actual act of surveillance is discontinuous and limited, the effect that the idea of surveillance has on the behaviour of the inmates is permanent and continuous.

The effectiveness of this structure as a disciplinary mechanism thus lies in one of the natural psychologies or instincts of human beings - that being watched influences behaviour, or that surveillance induces performativity (Foucault, 1977). Additionally, for this power structure to be effective at all times, it must be visible but yet unverifiable at the same time (Foucault, 1977). Visibility is assured by the mere presence of the central location where the inmate assumes the observer to be, and that presence is unverifiable in that the inmate never knows or is never completely certain whether the observer is in the aforementioned location or not.

While this theoretical perspective has been widely used to ensure surveillance of human behaviour in various settings, there are limited studies that focus on its applicability in examining oppressed minority groups. Specifically, I have drawn on the Panopticon model to deconstruct the marginalisation of Palestinian narratives and sub-narratives. Thus, there is a need to review the Palestinian narrative, which is presented in the following section.

The Birth of the Palestinian Narrative: Oral History and Theatre

The Israeli-Palestinian conflict is the modern world's longest and most intractable conflict (Masalha, 2009). Despite international interventions and a long-term peace process, Israelis and Palestinians have not reached a final peace agreement because of disagreements regarding borders, control of Jerusalem, Israeli settlements, and the freedom and rights of the Palestinians, among other issues (Masalha, 2009). One of the most critical events within the conflict was the Nakba –the catastrophe –in 1948, which resulted in the destruction of a greater part of Palestinian society, the driving out of approximately 90% of Palestinians in the territory occupied by the Israeli State, effectively making them, and their descendants, refugees in neighbouring countries, towns and cities (Masalha, 2009).

As Israeli forces dominated the lands formerly occupied by Palestinians and established what is now called Israel, they also dominated rights and opportunities for writing the history of the region and the Palestinian people (Yehya, 2014). In other words, Israeli narratives simply disregarded Palestinians' presence and life in the region, and denied the oppression and massacres of the Palestinians. Additionally, as streets and places were renamed to represent events and individuals in the Old Testament, and as archaeological efforts were focused on establishing a biblical history, the Zionist project effectively denied any Arab participation and historicity in the land previously occupied by Palestinians (Nassar, 2006).

In response, Palestinians began to record their oral history from their own perspectives and according to the experiences and perceptions of individuals and groups of Palestinians who experienced the Nakba and subsequent events (Yehya, 2014). By gathering testimonies, the Palestinian people would attempt to find out who was killed, how and when, with the purpose of filling in gaps in missing documentation and traditional evidence, usually presented with an apology due to the lack of other available methods for recording history (Yehya, 2014).

When the focus is cast on oral history, narratives previously obscured rise to the fore, indicating a hierarchy within Palestinian narrative itself, and uncovering sub-narratives that themselves have been marginalised. For instance, Palestinian women are one of the minority groups suppressed in the narration of history (Shalhoub-Kevorkian, 2008). According to Shalhoub-Kevorkian (2008), females have had to experience subordination within these narratives, especially those in minority positions.

Yehya (2014) outlines two forms of narrative hegemony that become apparent once oral history is added to the tradition. Firstly, marginalisation from the elite occurred as the cultured middle class recorded their personal histories by completing biographies and memoirs. The peasant class, in comparison, had no biographies and memoirs from the time, so none are found when one searches for the social history of a given region (Yehya, 2014). This represents a marginalisation of the peasant class in favour of the elite.

The second form of narrative hegemony is the marginalisation of the villages in favour of the towns/cities. As the Nakba has been historically framed as a crippling force to Palestinian modernity and urbanity with a focus on the role of the city and its intellectuals, the roles of farmers are marginalised to a great extent (Yehya, 2014). Oral history has uncovered alternative narratives that present the farmers as victors in the 1963 revolution, highlighting their roles in leadership and prolonging the life of the revolution. Foucault (1997) conceptualised such alternative narratives as subjugated knowledge, which can be characterised into two: historical information buried in the formal systemization, and disqualified non-conceptual knowledge.

Another form of response to the Israeli narrative –the re-writing of history to exclude any Arab oppressions, participation, and contribution to Palestinian territories –is the Palestinian theatre (Nassar, 2006). At its core, Palestinian theatre is an endeavour of political empowerment, of finding tools of expression buried deep in its history. Nassar

presents the Palestinian theatrical tradition's embrace of the Hakawati, the village storyteller:

The traditional figure now represents an authenticity of cultural forms in the theatre used to counter foreign domination and to preserve the Arab cultural heritage. Palestinian dramatists employ the figure of the storyteller not only to reflect on past events but also to stimulate the collective memory of the audience as a means of political resistance and empowerment. (p. 16).

The ultimate project of Palestinian theatre is to uncover the marginalised narratives that are buried deep in personal history due to severe cultural erosion. In this way Palestinian theatre gives life to experiences and realities long ignored or hidden. This is similar to the Theater of the Oppressed developed by Brazilian theatre director Augusto Boal in the early 1970s. Inspired largely by Freire's (2000) *Pedagogy of the Oppressed*, the Theater of the Oppressed was designed as a response to social and political problems in Brazil, specifically as a means to give voice to traditionally marginalised and silenced members of society (Boal, 2008). In the theatre of the oppressed, there is no strict division between the actors and the audience (Boal, 2008). This results in the creation of a story that is representative of the perceptions, ideas, and emotions of the collective group, and not only of the perspective of a single or few writers, producers, and directors.

The Palestinian theatre, similar to the theatre of the oppressed, serves as a counter-narrative that eliminates the prejudices and rewriting of history of dominant narratives (in this case, the Israeli narratives) and presents stories and oral histories based on the personal experiences of those people involved (i.e. those who were oppressed, marginalised, and expelled from Palestinian towns and villages). However it does so in a way that continues to uphold the Nakba narrative, placing itself firmly in opposition to Israeli hegemony first and foremost. The Palestinian theatre thus in turn creates its own meta-

narrative, a concept that was challenged by Lyotard (1979), who advocated instead for examining local narratives.

Uncovering Sublevels of Oppression: The Use of Foucault's Panoptic Lens

Oral history and theatre, as alternative forms of Palestinian documentation to traditional history, carry their own methodological burdens in being analysed. Since performativity is an essential part of giving testimony and narrating via dramatic presentation, these Palestinian narratives cannot be examined without recourse to tools for self-reference. The notion of performativity is described by Butler (2000) as the power of discourse to produce phenomena that it also regulates and constrains. Thus, it has been posited that gender is not a stable identity in which various acts proceed but rather an identity constituted in a particular time. As such, Butler (2000) argues that that gender has to be understood as the mundane way in which behaviour of various kinds is just the illusion of an abiding gendered individual.

This argument invites questions on how to account for the effect of the external gaze on Palestinian narratives' power of representation, and the effects of a constant, roving force of separation and surveillance (i.e., the Israeli state). For this, Foucault's panoptic lens serves a crucial purpose. From the seminal notion that being watched influences behaviour, and that surveillance induces performativity, comes a design where the mechanism of surveillance is completely hidden from view—and may not in fact exist—but nonetheless induces performativity through its very concept. This 19th Century conception by Bentham is still so relevant as to be capable of illuminating the function and prevalence of panoptic devices in modern society, from video cameras in stores to government surveillances of our behaviour. This model also serves to help deconstruct the marginalisation of Palestinian narratives. Gaza has not been termed the world's largest open-air prison for nothing. As with everything else under occupation, Palestinian forms of cultural expression must still

perform compliance to the demands and requirements of the Israeli regime and its surveillance apparatus. While surveillance induces performativity, and by proxy burying, hiding, suppressing, it also—as the Nakba narrative itself will bear testament to—inspires resistance, the creation of coded, hidden, or obscure spaces or modes of expression to escape the influence of hegemonic power.

Unfortunately, in the case of Palestinian narratives, in the process of resisting one model of power, another Panopticon is raised, leading to the suppression of Palestinian sub-narratives in the process of bolstering and nurturing the urgent Nakba narrative. Its own performativity hides this well. Just as the Israeli narrative must bury its crimes to bolster its claim to legitimacy, the Nakba narrative must not admit to usurping the legacy of its women and peasants to uphold its own. If narratives are about constructing history, the clash of dominant Israeli and Palestinian narratives end up coinciding to construct a history that ultimately marginalises the buried sub-histories of Palestine. Just like nested Russian dolls, the nature of Palestinian narratives is all hidden beneath the surface, except for some of the obvious signs that are not invisible to the outward eye. Specifically, as Butler (2000) noted, gender is seen in a different perspective in the context of Palestinian narratives.

The Oppression of the Voice of Palestinian Women

As the Palestinian narrative was essentially forwarded as a counter-narrative to the Zionist or Israeli narrative, it presented the life of the Palestinians before the Nakba as being very peaceful and characterised by mutual respect and agreement (Yehya, 2014). The narratives also served to incite feelings of nostalgia by describing in detail specific everyday practices and traditions, especially those that create an ideal image of Palestinian life pre-Nakba (Yehya, 2014). A similar trend was observed by Nassar (2006) in the Palestinian Theatre. As the focus of theatre narratives and presentation, the Hakawati is able to strengthen the collective identity of

the spectators during the performance (Nassar, 2006). Consequently, as the spectators are often male or belonging to higher classes, the lives, perspectives, and difficulties that were faced by women pre-Nakba often go unrecognised and unrepresented in theatre narratives of Palestinian life (Nassar, 2006).

In other words, while Palestinian oral history and theatre appeared to present a unified image and story of Palestinian life before the Nakba, beneath the surface lay another form of suppression—a deep suppression of the voices of a large part of Palestinian history (i.e., women's voices). Specifically, Yehya (2014) noted how oral history narratives or the Palestinian theatre fail to recognise the oppression suffered by women and peasant families under usurping Palestinian families. In the course of collecting testimony from women, Yehya (2014) learned of how women in peasant families were marginalised by larger Palestinian families before the occurrence of Nakba.

Specifically, one woman testified that her family, which used to live on a modest piece of land, was constantly threatened by a larger family (Yehya, 2014). Additionally, this woman testified that such large Palestinian families used to seize women, money, and large tracts of land from peasant Palestinian families to assert their power and reach over such small families (Yehya, 2014). It was also revealed that women were not allowed to inherit land from their ancestors before the day of Nakba. The peasant woman also testified that after the Nakba, the youth from peasant families become more educated and open-minded, which subsequently led to the rise of a class of doctors and lawyers (Yehya, 2014).

On the other hand, Yehya (2014) also found that women from the larger Palestinian families who remained in the lands they owned even after Nakba were said to have regretted not having their children likewise educated. Essentially, larger Palestinian families that used to constantly threaten and seize the women and property of smaller families had in turn lost their own

children and, subsequently, their property. From the perspective of this Palestinian woman and many others, especially those from the lower classes, the Nakba can be viewed as an event that allowed them to realise a specific form of justice in destroying power-privileged structures of usurping families over peasants (Yehya, 2014).

Differences between the dominant Palestinian narratives and the narratives of such peasant women can be explained by inspecting and analysing the origins of the stories. A cursory look at any oral history study would show that the majority of testimonies in the Nakba narratives come from men (Yehya, 2014). Butler (2000) theorizes that in the context of Palestinian narratives of their history, women are devalued. Moreover, in the collection of narratives for studies on the experiences of the Palestinian people, women and those belonging to the lower peasant classes were usually relegated to the back while men, especially those from large and prominent families, were asked to relate their stories (Yehya, 2014).

In case the erasure of the experiences of an entire class and entire gender is difficult to fathom, Foucault's (1977) panopticism helps us understand how a pervasive phenomenon could be so hidden and continue to remain so. If one views the Palestinian peasantry through a panoptic lens, one can see women's silence and submission as self-regulated—that they are effectively controlled to participate in their own erasure.

Samira Haj (1992) explained in detail the mechanics of these gender roles. Initially, a combination of sex-segregated social structures was established. Specifically, gender identity is shaped through the female life cycle, with great value placed on motherhood, and a hierarchy of subordination where young brides submit to all men and senior women. Moreover, women only gain seniority over other women through male proxy. Furthermore, by bearing sons, their only power comes late in life when their sons marry and they finally inherit influence and power over the new bride in the household (Haj, 1992). In a cross-generational cycle of

efficient self-regulation, women must uphold the very hierarchy that disadvantages them in order to possibly raise themselves to a higher status, thereby perpetuating the cycle. Much like how the inmates of the Panopticon need to adhere to their expected roles in order to maintain their own wellbeing and safety, Palestinian women must embrace their roles as mothers for survival and the future prospect of power (Haj, 1992). It is difficult to dissent to the patriarchal patrilineal family structure when it is also the only source of power, protection, and dignity—a woman outside of it has no categorisation, place, nor claim. In a sense, the very segregation and disbursement of roles is a cloak that both brands and protects (Haj, 1992). These findings aligned with what Yehya (2014) found. Haj found that Palestinian women have no choice but to embrace their roles as mothers to survive. Similarly, Yehya found that Palestinian peasant women pre-Nakba had to act in accordance with a patrilineal patriarchal family structure where female sexuality is a commodity and women are bartered like goods at the demand of male family or community members and land-owners.

Nusair (2010), in the fourth chapter of "Displaced at Home: Ethnicity and Gender among Palestinians in Israel," analysed the perceptions and narratives of three generations of Palestinian women living in Israel. She evaluated who has the right to narrate the past and found that the majority of the women, regardless of their generations, understand and identify themselves at their present socio-political reality through the past. Most women, regardless of their generations as well, associated gendered power relations in the family and community to their experiences of the imposition of the Israeli State in Palestinian lives and livelihood (Nusair, 2010). All the participants shared that the third generation women have the most freedom when it comes to pursuing their education and career. The third generation woman also has more access to the public space in general. The analysis led to the affirmation that gender roles among

Palestinian women are spatially and politically constructed. Women's identities and boundaries are all affected by the constraints and opportunities present and afforded by a given locality (Nusair, 2010).

Another important literature that highlighted the oppression felt by Palestinian women from the voices of the women themselves is Fatma Kassem's "Palestinian Women." Kassem wrote the book based on the oral testimonies of 20 ordinary but urban Palestinian women residing in Lyd and Ramleh. These women witnessed the critical events in 1948 that led to the formation of the State of Israel. They were also among those women who remained after the war. According to the author, her book depicts the life stories of women and provides a way to correct women's "ongoing exclusion from historical documents and collective memory" (p. 5).

Kassem started her book by first situating herself. She described herself as a Palestinian woman who was raised in Israel. She shared that her family, her upbringing and early life experiences had all affected her views as a Palestinian and as a woman. Kassem mostly found out about Palestinian history and the 1948 events from her father's storytelling while she was a child. Her father instilled in her stories about courageous Palestinian people. However, as she relayed how her father influenced her views and understanding of Palestinian history, Kassem wrote that she can see how her mother never participated in the discussions, as if her mother's experiences and views did not matter. Kassem argued that her mother's silence was the result of a patriarchal society wherein Palestinian women are considered absent from official Palestinian history. In addition, Palestinian women are also silenced by virtue of them being Palestinians living in Israel. Israel bars Palestinians from narrating or discussing Palestinian history in public arenas. Conversely, while Palestinian men have the ability share their stories in intimate spaces, women cannot do so at all, whether publicly or privately at home. Kassem's work was designed to "create equal spaces for [the] silenced voices not as complementary to

men's stories, but as worthwhile and deserving of visibility in their own right" (p. 39).

In her quest to find out the stories of these 20 women, Kassem observed several things. The participating women themselves were shocked that someone was interested in their stories and not those of their husbands or sons. They were even more shocked that someone wanted to not only hear them out but actually document what they were going to share. Regardless of their surprise, the 20 women were grateful to be afforded a chance to share their version of Palestinian history. In their narratives, the women disclosed how they dealt with daily routine and how they re-established the family life after the 1948 events. Getting their stories was not easy, because some women were reluctant to speak at first. Some were worried about how speaking up could affect their children's places in the Israeli society. When they spoke, some were accompanied by their children. Unmarried women were more enthusiastic about the project than the married women. Because only four out of the 20 women experienced formal schooling, oral data collection was the best method to use.

Kassem (2011) observed that as the women narrated their experiences, their language conveyed both oppression and resistance. She observed that women objected to the delegitimation of their version of Palestinian history and at the same time, resisted the idea that they did not contribute to Palestinian national history or were essentially absent. Their use of certain terms was also very telling of their oppressive experiences. The 20 women mostly utilized sexual metaphors to explain the invasion of the Israelis into their land such as 'entered', 'came in' and 'took us.' Kassem noted that these are common terms used to describe sexual penetration of a woman by a man. With the use of these words, Kassem concluded that women were unprepared for the 1948 events, where Israelis forcefully invaded their homes and land.

Kassem (2011) also found that the theme of home did not mean the same for all the women. Home has different meanings in the Palestinian context and is associated with both personal and collective meanings. Home for the women who narrated their accounts of the 1948 events can be categorized into three meanings: a social organizer, a target for attack, and a burial site. Home according to the women is also commonly viewed as a place to tell forbidden stories. This is the view they hold up to this day. Kassem's work showed that even though more than six decades have passed since the 1948 events, Palestinian women can still remember them like they happened yesterday because the memories were so strong that they have been repeated many times in their minds since they happened and within their families.

All these studies lead to the conclusion that when something happens to a society to disrupt it, women suffer the brunt of the effects but are forced to be silent about their feelings and thoughts. When they will be given the opportunity to narrate these historic and monumental eras of their lives, their accounts of history will always be different to that of the men and are therefore important to be heard.

Conclusion

The past several years have seen an increase in active work towards the recognition of the problem of violence against women and its subsequent eradication. While improvements in how women are treated can be seen across the globe, there remain subtle mechanisms through which women are violated, abused, and oppressed. In this paper, I have discussed how Palestinian refugees created and promoted their own narratives through oral history and Palestinian theatre. As historical accounts by Israelis made Palestinians appear irrelevant in their narratives, Palestinians created and propagated their own narratives to let people know of their stories, their lives before the start of the Israeli-Palestinian conflict, and their continuous oppression since then. However, further analysis showed that even the Palestinian narratives –both in oral history and theatre –also served as tools of

oppression. Specifically, further inquiry showed that Palestinian narratives often only represented the stories and perspectives of men, especially those from larger, influential, and high-class families, and that the stories and perspectives of women were often redacted or unheard. This analysis also showed that while male Palestinians drew a picturesque image of life before the Nakba, Palestinian peasant women would indicate that the Nakba at least allowed them and their children to earn an education and to have the opportunity to become professionals.

This account of the suppression and subversion of women's voice in Palestinian narrative leads to two important realisations. First is that violence and discrimination against women are not always personal (i.e. inflicted on a single woman at a point in time), but can be applicable to an entire class or community of women; that violence against women is not always physical or psychological, but can be subtle and inflicted as a lack of right and privilege; and that such subtle violence against women can be so ingrained in a specific culture that it is hardly recognised as such. Second, when viewed through the lens of Foucault's panopticism theory, violence against women can take the form of an ominous entity that constantly watches and surveys each individual's movement, or at least creates the impression of such continual surveillance. This causes men to continue traditional behaviours and actions that undermine and oppress women in various aspects, and consequently causes women to accept such discrimination and inferiority. With the Panoptic gaze (Foucault, 1977), behaviours can be controlled through bodies of knowledge instilled among the people. Palestinian narratives have been controlled by their unfolding history. Thus, the oppression among women has continued until the present time.

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Author biography

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