

The Lifeworld of Married Filipino Women Survivors of Intimate Partner Violence

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Abstract - Yearly, intimate partner violence affects women in intimate relationships worldwide. Survivors of intimate partner violence suffer from physical, emotional, and psychological distress. The frequency of marital violence suggests that hundreds of women who are married or have been married at least once were abused by their husbands. Four (4) IPV survivors from the Philippine province of Pangasinan participated in the research. After completing a qualitative analysis of participant interview transcripts and conducting the research, this phenomenological study identified thirteen (13) key themes: subjected to different forms of cyclical abuse, decreased self-image, distorted view of reality, learning to fight back, the experience of initial struggles, taking on a new character/personality, feeling relieved, economic concerns, suffering psychological difficulties, adapting to new life, seeking advice from loved ones, taking comfort in prayers and in joining the church and religious activities, and recreation, hobby, and fitness activities. The lifeworld of participants was ideographically presented.

Keywords – *Intimate Partner Violence, Abuse, IPV, Lifeworld, Recovery*

INTRODUCTION

Intimate partner violence, generally known as marital violence, is still a primary issue for human rights and international health (Gulina, Tikhomandritskaya, & Burelomova, 2018). It is a problem that affects individuals of all social, ethnic, religious, and cultural backgrounds (Marquez, 2018). According to WHO (2012), intimate partner violence (IPV) occurs when a current or former partner engages in behavior that causes the victim to experience sexual, bodily, or psychological damage. This encompasses behaviors like being dominating, psychologically abusive, sexually coercive, and physically aggressive.

The most prevalent expressions of violence directed at women are sexual, physical, emotional, and manipulative behaviors by a romantic partner. It can live through and persist for extended terms or be perfunctory but severe (Zara & Gino, 2018). The Presidential Task Force on Violence and the Family and the American Psychological Association (1996, as cited in Troisi, 2018) describe IPV as physical, psychological, sexual, and economic abuse, either actual or enduring, prolonged by current or former partners. It significantly and negatively impacts women's capacity to happily and productively live (Kilpatrick, 2004; Karakurt, Smith, and Whiting, 2014).

Violence committed by a spouse has instant and enduring health, economic, and social consequences (Overview of Intimate Partner Violence, 2007).

Despite the continuously increasing number of cases, most violence against women goes unreported. Santos (2009, as cited in Garcia, 2020), Filipino women chose to keep abuse a secret for several reasons like fear of the perpetrator, shame, self-blame, inaccessible reporting facilities, inadequate resources to seek legal action, and being persuaded by others to settle problems and reconcile with abusive partners. According to the research, participants only disclosed abuse when their children or their lives were in danger.

While this literature reinforced our comprehension of the characteristics of intimate partner violence (IPV) and their aftermaths on mental and physical well-being, they failed to include non-health correlates with IPV such as changes in victim's behavior or style of living during and after abuse. Hence, this study focused on understanding the lifeworld (conscious experiences) of abused married Filipino women and their adjustment or recovery process through their IPV lived experiences by exploring their lived space, time, body, material, and relations in the phenomenon. This study could accelerate awareness and understanding of the deleterious nature of women's problems in marriage, cultivating ideas on how to help them cope with the experienced trauma.

From these presented facts about IPV, the researchers explored the lived experiences of married Filipino women subjected to intimate partner violence as to what life was like for married Filipino women who experienced intimate partner violence. What is the current lifeworld of married Filipino women whom their

intimate partners abused? How did these married Filipino women transition from living in IPV to recovering from it?

OBJECTIVES OF THE STUDY

The current study aimed to provide valuable information to educators, psychology professionals, government agencies fostering safety and security, and care provider agencies about the nature of IPV and the experiences of abused women caused by intimate partner violence for future psychological well-being advocacy and prevention campaigns.

MATERIALS AND METHOD

The hermeneutic phenomenological research design based on van Manen (1997) was utilized to describe and interpret the participant's intimate partner violence experiences, beliefs, and viewpoints. Phenomenology's emphasis on lived experience makes it ideal for investigating an individual's experience of violence, as van Manen (1997) said. This research strategy offers detailed narrative descriptions of people's encounters with selected happenings in their lifeworld that may be connected to collective experience (Smith, 1997). The interpretation is taken forward through a hermeneutic circle in which domains of understanding between the proponents and participants are synthesized to comprehensively grasp a particular phenomenon being explored (Mwase, 2020).

Phenomenology requires at least 3 – 10 participants (Cresswell & Creswell, 2018). Hence, the researchers chose four (4) women from Pangasinan to participate in the study. Participants were selected based on the following inclusion criteria: she is currently married or has been married once, 35-45 years old, has experienced intimate

partner violence, she passed the Recovery Assessment Scale – Domain and Stages (RAS-DS) to be administered before the interview to determine her level of recovery and has moved on from the abuse based on the RAS-DS result.

Snowball sampling was used due to its reliability in concealing participants' identities (Glen, 2020). Participants were invited through phone, email, or Facebook Messenger coupled with an informed consent form that outlined the study's goal, ethics, and data-gathering techniques to participants. Participants received individual face-to-face interviews guided by semi-structured questions and a psychology professional was present throughout the debriefing since the interview involved painful and critical events. Interviews were place between October 1 and 31, 2022.

After interview transcription, the data was coded through the existential lifeworld, which included five components: spatiality, materiality, corporeality, temporality, and relationality. The coding protocol identified texts and phrases in the transcripts that expressed existence, whether literal or intangible like the inner space, such as feelings, emotions, reactions, gestures, moods, thoughts (spatiality), an economic aspect described from the participants' experiences (materiality), such as finances, jobs, expenses, and other related texts, all phenomena experienced by the body by transforming the way the body feels and sees it (Corporeality), how time was perceived or experienced about the past, present and future (temporality), and how individual's relationships with people giving impact on the perception of the phenomenon (relationality). After that, the identified sentences and phrases were categorized and grouped to produce themes and sub-themes.

After the above procedure, Van Manen (2014) six-step technique was used to interpret the data: 1) gathering, 2) contemplation, 3) reading and rereading interviews, 4) recovering the semantic language inside the text, 5) detection of emergent concerns, 6) writing and rewriting the lived experience. After these methods, the processed data were ideographically presented through the participants' lifeworld to emphasize their distinct abuse, transition, and recovery experiences.

The Evaluative Criteria for Quality (credibility, transferability, dependability, confirmability) by Lincoln and Guba (1985) were adopted by the researchers to establish trustworthiness in this study. These were operationalized through thorough saturation of data by sending the manuscript to the participants for validation of their lived experiences' descriptions and interpretations, excerpts of participants' raw statements about their experiences of abuse presented in every lifeworld, employment of two (2) practicing professional co-raters to code and analyze the raw data, and controlled possible biases regarding the study by establishing reflexivity where the researchers' preconceived ideas, beliefs, and experiences about the nature of IPV were responsibly enumerated to ensure that the data was not manipulated.

Ethical practices were highly observed by the researchers based on Andur and Bankert (2011 as cited in Wassenaar, 2013) where respect for all persons, beneficence, and justice were employed such as informing the participants about their right to withdraw, solicitation of informed consent, use of safety measures, and extraction of data that was relevant only to the study. The presence of a psychologist during the entire data collection to intervene immediately if danger or injury occurred

was also observed. Pseudonyms are applied to guarantee that no critical data gathered

would compromise the identity or privacy of the participants.

RESULTS AND DISCUSSION

There are several themes materialized in the experiences of the participants. Under the spatiality, the themes included the *decreased self-image, distorted view of reality, taking on a new character or personality, and feeling relieved/safe/free and at peace*. On the materiality, there was just one main concern which is the *economic concerns*. Four other themes emerged in the corporeality which include: *subjected to different forms of cyclical abuse, learning to fight back, experience of initial struggles, and suffering psychological difficulties*. Under temporality is *adapting to new life*, and the other three are under relationality which are: *seeking advice from loved ones, taking comfort in prayers and joining church and religious activities, recreation, hobby, and fitness activities*.

Participants' Lifeworld

Spatiality

As elements of spatiality, the participants recognized the changes in how they viewed themselves. They acknowledged decreased self-image, distorted view of reality and taking on a new character or personality. Most importantly, they realized the feeling of relief after separation from their spouses.

Decreased self-image

The IPV experiences of the participants revealed that living with an abusive partner does not end with physical assault alone. As they endured the pain, injuries, and other manifestations of physical and verbal abuse repetitively, they felt their

resolve and self-assurance diminishing. They admitted that their perspective about "self" gradually changed because of the suffered abuse.

"The most difficult part I've encountered during the abuse was when my husband degraded my profession as an educator. The abuse completely changed my perspective about myself as an individual." (Mia)

"I was afraid...I felt like I was a prisoner. I lost my confidence, was hollowed, and felt like I didn't have hope, that I was so stupid." (Rose)

"It reached to an extent that I lost my self-confidence and blamed myself, saying that I was so stupid why I fell for him." (Jamie)

"I perceived myself as very small. Then I developed stage fright, and he told me I was worthless and felt like I was. I lost my confidence." (Olive)

Distorted view of reality

While the participants conditioned their minds to remain strong and live a normal life, the repercussions of the abusive relationship brought them unhealthy feelings. They experienced intense struggles with their daily life because of discouragement, disappointment, upset, and low self-esteem, which defocused and slowed their progress in all spheres of growth. They did not only experience physical bruises but also suffered from a

bruised inner-self as unnecessary feelings developed that impacted their occupational and social functions.

“I felt discouraged, upset, embarrassed, disappointed and had a feeling of low self-esteem during that time.” (Mia)

“I felt like I was already an animal. He viewed me as an animal. I could see his reactions and his face when he was hitting me. His face was trembling, gritting his teeth...” (Rose)

“I became overly tough and rebellious towards men. I generalized my perspective and viewed all men were abusive. I had trust issues that I couldn’t just trust people. I am so tough that sometimes it goes out of context that if people don’t like me, I don’t care.” (Jamie)

“All that he told me I was, that I was worthless felt like it was really am.” (Olive)

Taking on a new character/personality

The endured abuse elicited different reactions from the participants. The initial corollaries manifested adverse effects, devitalizing their confidence and dispositions. They recognized that as the abuse became cyclical, they eventually learned to deal with the threat each day. Some participants became tougher to outlast their detrimental fate from their spouses. Some responded diversely and developed negative perspectives about themselves.

“I set my mind that even without the presence of my husband, I can stand on my own.” (Mia)

“I focused on the needs of my family as I was finally able to decide on my own; I didn’t need to ask permission from him anymore.” (Olive)

“I felt like I did not have a future anymore if I would leave.” (Rose)

Trust issues were intense. Paranoia and my temper were already up. I have become ill-tempered and felt like I was always being deceived and violated even in petty things.” (Jamie)

Feeling safe, at peace, relieved, and free

The participants expressed their achieved feeling of safety, and relief, developing autonomy and disposition to end their suffering. They recognized that they began to feel at ease, secure, and safe from their abusive spouses.

“I can see myself more peaceful. I feel safe because I can no longer experience abuse from my husband, and he can’t hurt me anymore.” (Mia)

“My burden was lessened because I no longer worry about having a strict husband around giving me orders. My confidence was restored since we broke up.” (Rose)

“I was utterly relieved. I achieved freedom, safety, and security. All of these emerged when he was gone.” (Jamie)

“It was so peaceful! I didn’t know it was possible to sleep without being worried. I feel safe now!” (Olive)

Materiality

One of the most common characteristics of materiality was economic concerns which all the participants expressed their insights according to their experience during the abuse.

Economic concerns

The participants expressed diverse experiences and insights vis-à-vis financial stability and how this affected their adjustment to living separately from their spouses. Two of them acknowledged the financial burden after the break-up, while the other two recognized that being financially independent is a huge factor that enables courage in women to get rid of abusive marriages.

“Regardless of being abusive, he was a good provider. I couldn’t imagine what was life waiting for us after the break up with my husband.” (Mia)

“It was truly hard to establish, I was already dependent on him.” (Rose)

“Everything went well, I focused and indulged myself in schooling until I recovered in 2008.” (Jamie)

“If you know that you are financially independent, that could also be a factor in becoming brave.” (Olive)

Corporeality

The experienced abuse affects the corporeal form in diverse ways that caused collected transitions in participants' lives.

Subjected to different forms of cyclical abuse

The participants’ narratives showed how they were subjected to revictimization

from gaslighting, severe beatings in cyclical incidents, choking, locked in a room, pinned down, dragged by a car, hit with an object, or threatened with a knife and other forms of cruelty. They also recounted that the abuse does not choose a place and they occur at the workplace, public area, or at home.

“I experienced physical and verbal abuse from my husband. In some instances, he punched my thigh so hard that I had bruises.” (Mia)

“He pinned me down on the floor, went on top of me, and pulled my hair. He would pull my hair inside the car while driving. I hopped in the car so he couldn’t take our child, my feet swinging on the ground while holding our child. He started the engine and drove.” (Rose)

“I was being beaten, choked, and threatened with a knife, hit with an electric fan, he would press me with a pillow while sleeping. If I refuse to have sex with him, he would tell me that you are my wife and I will do anything I wanted to do to you, even if I was in the bathroom or elsewhere.” (Jamie)

“He hurt me to the extent that even the neighbors came to rescue us, he leaned me on the wall with my hand raised. On other occasions, he hit me with an electric fan, poked me with a phone, and monobloc.” (Olive)

Learning to fight back

The years of abuse taught the participants how to fight. From being quiet and submissive, they eventually learned to retaliate against the abuse and fight back each time their partners would hurt them.

"I responded through crying, then later on, I fought him back through harsh words. I also reported him to the women's desk in the police station." (Mia)

"I would fight back even if I knew that I would lose." (Rose)

"I retaliate too, but it will lead to a crime if I don't stop. So, I would cry when I got slapped. There was even a time when I ran to the police station bare-footed when he chased me because I wouldn't submit to him (sexually)." (Jamie)

"I fought back too." (Olive)

Experience of initial struggles

The thought of being away from the husband to end the cycle of violence was easier than it seemed. While there was the anticipation of ease and freedom, the participants expressed their fears and agonies about how they would reinvent their lives all by themselves, especially since children were involved.

"It had been a struggle and intense adjustment for us." (Mia)

"It was difficult for me right now regarding the kids, I have not found a proper place to stay, and I am working." (Rose)

"All my illnesses manifested both physically and mentally. I was rehabilitated in Baguio because of the numerous discomforts that I had been feeling." (Jamie)

"Financially, my salary was all out. The only thing that made decision-

making hard for me was my kids. As much as possible, I didn't want them to grow up in a broken home." (Olive)

Suffering psychological difficulties

Though participants had shown great courage and determination while enduring the abuse, as manifested in their grit to fight back, they suffered inside. Dealing with debilitated pride, confidence, and self-worth, the absence of a strong support system or group made them feel alone.

"It affected me mentally and emotionally so much. I became more emotional, loner, sad, and sometimes I do experience anxiety." (Mia)

"I didn't know how to start because I had already been acclimatized at home. I felt like I didn't have a future if I left." (Rose)

"I was given different medicines for depression because I was diagnosed with Generalized Anxiety Disorder." (Jamie)

"There was a time that I wanted to commit suicide." (Olive)

Temporality

For the participants, temporality was unprecedented, especially with the sudden turn of events from living with a husband to the necessity of leaving the abusive marriage. The adaptation period was deemed a crucial challenge for someone who just went through abuse and started a new life independently.

Adapting to new life

For the participants, adapting to their new life was not easy. While they longed for

freedom from the abusive relationship, they were also completely overwhelmed with the thought of how they would start all over again. There was fear for life without their husbands' financial support. With debilitated self-esteem, becoming the sole providers for their children was a tremendous transition they were unprepared for.

"No matter how bad I've been treated and I've gone through, I still feel grateful because I have my permanent job, and I have my kid with me as my inspiration to keep me moving forward." (Mia)

"I really pushed through finding a job, my work gave me strength to overcome it." (Rose)

"I told myself to fight for life with the help of significant others so yeah, things went well indeed." (Jamie)

"I am very optimistic about the future now. I perceive the future brighter that it's just fine even if you don't have a life partner." (Olive)

Relationality

As prime characteristics of relationality, participants recognized seeking advice from loved ones, taking comfort in prayers, joining church and religious activities, and recreation, hobbies, and fitness.

Seeking advice from loved ones

On the way to recovery, the participants found comfort in the company of their colleagues, friends, family, and relatives, other people they could trust to help themselves cope with the trauma they went through. One participant sought

professional counseling, and another resorted to legal help.

"With the help and comfort of my family, relatives, and friends, I gradually overcome and cope with the trauma." (Mia)

"I sought counseling." (Rose)

"I would always tell myself that I could do this with the aid of my family." (Jamie)

"I sought legal help in the form of annulment." (Olive)

Taking comfort in prayers and in joining church and religious activities

One of the effective mechanisms the participants employed during the transition and recovery period was dwelling in faith. Most of them confessed that faith is crucial in keeping them alive, apart from the strong support of friends and family. They also joined religious groups and other helping organizations. They confessed that meeting people with the same experience gave them much courage to seek healing. Among the participants, only one participant did not resort to religious practices and activities to cope with the traumatic experiences of abuse.

"With the grace and help of our Lord through prayers, I have overcome it. I only sought moral advice from the leader of our Church and Godparents." (Mia)

"I joined Singles for Christ, and prayers too. Realizing that I was not the only one who was abused enlightened me." (Jamie)

"Regarding help, just our parish priest for counseling." (Olive)

Recreation, hobby, and fitness

To get themselves back in the race, they looked for some activities to divert their agonies that would expedite their recovery. They recognized that allowing themselves to be preoccupied with activities is significantly helpful in sustaining their courage and determination.

“Being alone is not helpful. It can lead to depression. I would go out and have fun with my friends and co-workers.” (Mia)

“I engaged in business. I was an egg retailer. I also tried to sell second-hand clothes and learned to bake.” (Rose)

“I focused on the gym and physical fitness for about 2-3 years then focused on my studies, career, recreation, business, and many more to keep myself busy.” (Jamie)

“I joined volleyball when they organized volleyball teams here. I also trained at different schools. I am inclined to Zumba, singing in the videoke, and personality development and self-improvement.” (Olive)

This study found through the presented lifeworld of the participants that victims of IPV go through extreme difficulty in most areas of their lives such as physical, emotional, mental social, and economic functions. Stubbs & Szoeki (2021) demonstrated that intimate partner violence (IPV) has detrimental impacts on women's physical health outcomes such as exacerbating menopausal symptoms, raising the risk of diabetes, STDs, and risk-taking behaviors like drug and alcohol abuse, as

well as chronic illnesses and pain. Furthermore, IPV, particularly physical and sexual violence, can result in fractures, traumatic brain injuries, skin lacerations, burns, and, in severe cases, death (Antai, 2011; Hewitt et al., 2011; Sugg, 2015; WHO, 2013). Van Manen (2014) explained how the body experiences the phenomenon by transforming it into the way the body feels, sees, and feels it which implies that as the participants felt the pain in their bodies due to constant physical abuse, they began to doubt themselves, wrongly perceiving that they were at fault and responsible for their fate.

The emotional and mental suffering of the participants was also evident and a shared experience of all the participants. This is confirmed by a previous study that abuses severely causes victims to suffer emotionally and psychologically. Psychological violence is a traumatizing event that has a high correlation with post-traumatic stress disorder (PTSD) and other prevalent trauma-related mental health issues. Coercion, slander, verbal abuse, and harassment are a few examples of psychological violence (Dokkedahl et al., 2022). According to van Manen (2011), the emotional and psychological impact of the abuse take place in the inner spaces that contain the feelings, emotions, gestures, moods, responses, and ideas that were experienced throughout the abuse eliciting fear, disappointment, devastation, and other negative emotions that caused the four participants to lose self-worth, self-esteem, hope, and learned helplessness.

Another highlight is that abuse is prone to be repeated. The victims were assaulted and humiliated by their abusive partners regardless of the location whether at home or in public for repetitive or even cyclical incidents. Over two-thirds of female

victims of domestic abuse were victimized again within a year, according to the British Crime Survey, which revealed significant rates of revictimization for domestic violence (Walby and Allen 2004; Kuijpers et al., 2012).

It is also found that the abuse caused financial hardship, especially during transition. After separation, being the lone provider and seeking treatment for physical and mental health difficulties exhausted them. Depression costs twice as much as physical diseases, according to Duvvury et al. (2013), illustrating the indirect health effects. This shows that participants' financial struggles were crucial challenges they experienced during and after the abuse, especially in addressing their health and psychological well-being.

Findings also show that one of the most often employed tactics for coping is discussing difficulties with family members, close friends, and other significant trusted people. The participants acknowledged that their biggest support system for coping and moving on came from the microsystems - family, friends, and others. This is supported by Yusof et al (2022) in their study stating that one of the most often adopted methods for leading a more satisfying life is to talk about issues with close friends, neighbors, and family members. They also attributed their endurance to the Divine intervention,

praying, and believing in God. Participants' IPV experiences showed how the phenomena changed their lives. Yusof et al. (2022) also highlighted in their study that all victims feel soothed after confessing their grief to God because they believe God can end their agony.

From the overall description of the participants' narratives, this study

recognized that the brutality, not its length, caused them agony. This implies that whether the abuse lasted a month, a year, or more, it had the same impact because the feeling elicited by the violence perceived the abuse, how they felt in their body, felt at the time and place it happened, felt when they were economically affected, and how their relationship with others changed. Each day affected how they saw themselves, others, and their situation. Abuse altered reality, self-image, and other life challenges. Abuse may also help a person to adopt a new personality if they have the strength and fortitude to overcome their pain and regain their self-esteem. In this research, individuals' support groups—family, friends, relatives, and significant others—provided the greatest aid.

Although this research has thoroughly explored both the lived experiences and the existential lifeworld of IPV victims and revealed cycles of abuse, effects, and periods of recovery, the researchers have not addressed the assistance needs of IPV victims, this investigation did not include education or development programs. The limitations of the study will enable future researchers to identify knowledge deficits.

CONCLUSION & RECOMMENDATION

The phenomenological study of the participants' IPV experiences divulges an engrossing journey of how they endured their day-to-day life and how they recovered from it. This study collected extensive information from four women which led to the conclusion that domestic violence can occur anywhere and at any time. Throughout

their marriages, victims are subjected to all forms of violence and are continually re-victimized. Some of the participants observed patterns of verbal, physical, and other forms of abuse, while others reported that it began abruptly.

Participants were subjected to daily harassment and every day was an excruciating anticipation of terror. They endured physical, emotional, and psychological suffering and lived each day with low self-esteem, loss of self-worth, sorrow, financial difficulties, and even mental illnesses such as suicide, depression, and anxiety. The recovery after the abuse is determined to be a holistic process. The measures include a support system (family, friends, and other trusted individuals), spirituality, physical/recreational activity, professional help, and psychopharmacological intervention.

Therefore, there is no singular method for comprehensive recovery. While these measures are available, healing comes from the initiative of the victims to seek help.

This research therefore suggests the need for domestic violence care providers to create programs for early abuse identification to prevent violence ahead of time. Financial help or sustainable livelihood programs for victims who struggle to adjust following separation from abusive spouses should also be addressed.

Restorative measures such as prevention must be imposed through the appropriate professionals and agencies. Although there is no one-size-fits-all recovery tool as it takes a thorough process, it is best to identify what measure would fit the abuse victim for holistic healing: support system, spirituality, physical/recreational activity, professional help, and psychopharmacological intervention.

Victim-survivors should seek help from trustworthy sources such as family, friends, relatives, religious leaders, and professional counselors. Victims-survivors should seek legal help or report abuse to avoid it.

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