

Intimate Partner Violence in People with Adverse Childhood Experiences

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ABSTRACT

This study presents a thematic analysis of interview transcripts of nine survivors of adverse childhood experiences and intimate partner violence. The data collected from interviews was divided into three themes and further sub-themes of abuse. It also provided insights into the prevalence of a particular form of abuse in the sample and the emotional and behavioural outcomes of these abusive incidents. The analysis indicated how survivors of childhood abuse, lead their lives after and function on a daily basis by trying to gather information about their personal, social, and professional relationships, along with the way they tend to respond to the varying degree of stimulus they are subjected to, in their lives. It was concluded that the horrible incident(s) of childhood abuse, coupled with lack of awareness about the childhood abuse in society, severe taboo associated with societal stereotypes about the same, and the fear stricken, cold, unquestionable values rooted in Indian family systems that further prohibit self-expression of a child within family in terms personal, emotional, mental and social well-being, such that the lives of childhood sexual abuse survivors get overwhelming and burdening. As a result, they end up trying to do everything by themselves, either to prove something to others, or because they are too afraid to let anyone close to them. The study suggests that these experiences shape the emotional and behavioral patterns to be followed by these survivors and with lack of information and proper intervention in the early years, lead to a vicious cycle of victimization of intimate partner violence in their young adulthood. These findings indicate a need to promote social support, self-esteem, and positive coping styles, and decrease the level of negative coping styles, to markedly reduce the impact of psychological symptoms of childhood abuse and intimate partner violence on the survivors.

Keywords: Abuse, Childhood Trauma, Dating Violence, Domestic Violence, Intimate Partner Violence, Survivors of Abuse, Victims of Abuse

Intimate Partner Violence

Intimate partner violence (IPV) can be understood as any form of abuse such as physical, sexual, emotional or even controlling behavior inside a romantic relationship. According to World Health Organization (2002), it is "behavior within an intimate relationship that causes physical, sexual or psychological harm, including acts of physical aggression, sexual coercion, psychological abuse, and controlling behaviors".

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Intimate Partner Violence in People with Adverse Childhood Experiences

IPV is gaining alarming attention all over the world currently. Although it has been prevalent in society since ages, no research was initiated until five decades back as to how devastating the outcomes of this abuse can be. It was a hushed topic and is still entertained as a private matter between a couple in many cultures. Recent researches have shown that around 41% women and 26% men have experienced sexual and/or physical forms of violence by an intimate partner and reported an IPV-related impact during their lifetime (Breiding et al., 2014).

Factors such as age, sex, educational background, economic status, cultural background have little significance in the different patterns of IPV. It is prevalent across all age groups from adolescence to old age. It is noticed in both heterosexual and homosexual relationships. However, it is observed that females are subjected to IPV more frequently and evidently than males all over the world. Similar patterns are recognized in the Indian subcontinent as shown in various research studies over the decade (Ler et al., 2020).

Other factors that correspond to high risk for IPV in Indian context can be consumption of alcohol, need for establishment of control, gender role expectations, and poverty (Jewkes, 2002). IPV leads to various immediate and long-term health consequences and also pose extended risk of developing other health issues (Sugg, 2015).

Adverse Childhood Experiences

Traditionally, our scientific understanding of the psychiatric and psychological impact of trauma was based on studies conducted on adults and was later generalized to trauma-exposed children with specific differences (Gregorowski, 2013).

While there is no universally accepted definition for explaining Adverse Childhood Experiences (ACEs), they can be defined as potentially traumatic events that a child may experience before attaining the age of 18 years. Unlike developmental psychopathology, which places more emphasis on interpersonal aspects of family malfunction contributing to trauma, the authors of the ACEs study included both: childhood maltreatment (abuse and neglect) and family dysfunctions (termed 'household dysfunctions') to define childhood adversities (Felitti, 1998).

The outcomes of such abusive experiences are multifold. These experiences hinder growth in all spheres of development of the child be it physical, emotional, behavioural or cognitive. Such children are more likely to indulge in risk taking behaviors, have difficulties in being assertive and maintaining social relations, and might even develop mental health issues if the trauma is left unresolved.

India is home to almost 19% of the world's children, and these children and adolescents together form approximately 40% of India's total population (Delhi, 2011). As we explore the pervasiveness of childhood maltreatment across a low-middle income country like India, it becomes easier to establish a link between the disparity in social, economic, and cultural practices and its subsequent role in predicting child abuse.

At the same time, it also provides a motivation and scope to explore the prevalence of abuse and violence cycles across varied cultures and socio-demographic strata. The need for such studies also increases multiple folds due to the sheer lack of awareness and widespread presence of stigma around IPV and childhood maltreatment and abuse amongst the population.

Intimate Partner Violence in People with Adverse Childhood Experiences

The findings of the study will allow the target population and the participants of the study, that is, survivors of childhood abuse and IPV, to better understand and realize the aftermath and related repercussions of the traumatic incident, and the ways childhood experiences shape one's self and identity that might lead to a scope of violence in their relationship, however small or insignificant they may seem. And in turn, they may be better equipped to seek out help and try to improve their quality of life. This study hopes to draw an insight about more prevalent violence styles and motivations in the Indian population of abuse survivors, which would further help in addressing and managing the problems that emerge from the traumatic event. The traumatic events have always been talked about and researched, but certain aspects of trauma have still been left unexplored or unscratched. Aspects such as, victimization being focused on females and perpetration being focused on males, ACEs being called insignificant, labeling the perpetrator as all bad etc. will also be explored. Also then, identifying and understanding the prevalent coping strategies used by survivors of childhood abuse and IPV would help in treatment intervention. It is often observed that in abuse specific intervention, generic intervention strategies are implemented for addressing abuse cases, which possibly can be improved by the contribution of this study.

Research Objective

To analyze the associations between IPV and ACEs in the Indian population through semi structured interview and thematic analysis.

METHODOLOGY

Sample

Sample was sought carefully, through the means of a Google form, which was circulated through various social media platforms, with an aim to collect the contact details of the participants. A total of 28 participants reverted with acknowledgment to the aim of the study. Later, upon contacting them, out of 28, only nine agreed to actively participate in the study. The final sample comprised of nine young adults, seven of which were female and two were male. All the participants have a history of both IPV and ACEs. The sampling was done by purposive sampling technique due to the qualitative nature of the study.

Data Collection

The data was collected through a semi-structured interview, under thematic analysis, which consisted of 33 questions relevant to the topic of study. The aim of those questions was to understand and explore the possible associations between ACEs and IPV in young adulthood. The questions were formulated with such intent that they don't provoke strong emotions related to the traumatic incident, yet, be relevant enough to be able to suggest and draw themes for future research. The items were formed, such that they try to explore the relationships and bonds an individual has or forms, and these statements test those individuals' response to different scenarios where those bonds are tested. These themes were drawn based on the understanding that they had an overlapped existence across the different experiences of these nine participants and that they had a noticeable influence on the existence and being of those individuals.

Procedure

All the participants were contacted, informed and reminded about the study at least twice. They were sent consent forms, through mail, WhatsApp text and SMS. Once they provided consent they were contacted and informed about the process, and what is expected of them. They were informed that an interview will take place and it will be recorded, a total of 33

Intimate Partner Violence in People with Adverse Childhood Experiences

open-ended questions related to the abusive incidents will be asked, and that they can choose not to answer or skip any of them, if they feel uncomfortable. As mentioned before, the interview schedule consisted of a mixture of open-ended and closed-ended questions and was used flexibly to propel the interview toward the primary aim and encourage the participants to share their personal experience of abuse. The interview questions were semi-structured, mix of open and closed ended questions. The qualitative data was collected through interviews which were recorded with due respective consent of each participant, and then the recordings were turned into transcripts carefully. The accumulated data, via transcripts, was used to draw themes through the means of thematic analysis. The findings were used to draw inferences, and support the goals of the study. The result will be used to shed light on the impact of childhood abuse and trauma on intimate relationships and even in general on the self. It will also establish opportunities for future studies.

Variables

- Intimate Partner Violence
- Adverse Childhood Experiences

RESULTS

Table No. 1 *Thematic analysis for data collected from conversation with survivors of IPV, n=9.*

Participants	Type of IPV	Reason of IPV (by perpetrator)	Emotional Outcome	Behavioral Outcome
A (female)	Physical abuse, emotional abuse, sexual abuse	Need for control, fear of rejection and being left out	Self-doubt, feeling unimportant	Alienation, changing habits for the partner
B (male)	Emotional abuse	Difference of expectations and opinions	Frustration, feeling unimportant	Anger outbursts, Avoidance of confrontation
C (female)	Emotional abuse	Insecurities, self-hatred	Helplessness, emotional vulnerability, invalidation	Dependence in hope of fixing the situation
D (female)	Physical abuse	Insecurities, lack of trust	Helplessness, confusion, self-doubt	Alienation, forgiving until the partner cheated
E (female)	Emotional abuse, sexual abuse	Desire for sexual intimacy	Confusion, self-doubt, feeling trapped	Alienation, lack of concentration
F (female)	Emotional abuse, sexual abuse, physical abuse	Neglect from family, bad peer group, anger issues	Guilt, shame, anger, helplessness, fear of relationships	Trust issues, fear of sexual intimacy
G (female)	Sexual abuse, emotional abuse	Desire for financial and sexual advantage	Anger, feeling used, feeling unwanted	Could not retaliate, separated by parents later
H (female)	Physical abuse, emotional abuse	Anger issues, trauma from past relationships	Feeling inadequate, self-doubt, guilt	Tried to change her habits for her partner
I (male)	Emotional abuse	Impulsive dating record	Severe self-doubt, depressed mood, feeling inadequate	Alienation, failed attempts of confrontation

The above-mentioned themes have been narrowed down by isolating general concepts and ideas along with a few technical words that were stated by the subject during the interview process. Those general concepts and ideas were then again grouped together based on few

Intimate Partner Violence in People with Adverse Childhood Experiences

other surface commonalities. Finally, they were grouped together to form the three themes of types and two themes of outcomes.

Table No. 2 *Thematic analysis for data collected from conversation with survivors of ACEs, n=9.*

Participants	Type of IPV	Reason of IPV (by perpetrator)	Emotional Outcome	Behavioral Outcome
A (female)	Physical abuse, emotional abuse, sexual abuse	Need for control, fear of rejection and being left out	Self-doubt, feeling unimportant	Alienation, changing habits for the partner
B (male)	Emotional abuse	Difference of expectations and opinions	Frustration, feeling unimportant	Anger outbursts, Avoidance of confrontation
C (female)	Emotional abuse	Insecurities, self-hatred	Helplessness, emotional vulnerability, invalidation	Dependence in hope of fixing the situation
D (female)	Physical abuse	Insecurities, lack of trust	Helplessness, confusion, self-doubt	Alienation, forgiving until the partner cheated
E (female)	Emotional abuse, sexual abuse	Desire for sexual intimacy	Confusion, self-doubt, feeling trapped	Alienation, lack of concentration
F (female)	Emotional abuse, sexual abuse, physical abuse	Neglect from family, bad peer group, anger issues	Guilt, shame, anger, helplessness, fear of relationships	Trust issues, fear of sexual intimacy
G (female)	Sexual abuse, emotional abuse	Desire for financial and sexual advantage	Anger, feeling used, feeling unwanted	Could not retaliate, separated by parents later
H (female)	Physical abuse, emotional abuse	Anger issues, trauma from past relationships	Feeling inadequate, self-doubt, guilt	Tried to change her habits for her partner
I (male)	Emotional abuse	Impulsive dating record	Severe self-doubt, depressed mood, feeling inadequate	Alienation, failed attempts of confrontation

The above-mentioned themes have been narrowed down by isolating general concepts and ideas along with a few technical words that were stated by the subject during the interview process. Those general concepts and ideas were then again grouped together based on few other surface commonalities. Finally, they were grouped together to form the three themes of types and two themes of outcomes.

DISCUSSION

Some observations of significance are as follows:

All the participants of this study were victims to abusive incidents in childhood and intimate relationships. The most common form of ACEs was emotional abuse followed by sexual and physical abuse. The most common form of IPV was also emotional abuse followed by sexual and physical. Type of abuse in childhood corresponded to the type of abuse in intimate relationships in most cases. Similarly, types of outcome of abusive incidents also corresponded in both categories in most cases. Anger outburst as an outcome of abuse was seen only in males in this study. The perpetrators' reasons varied from case to case for IPV. For some it was a need for control, for others it was difference of expectations and opinions, while some others wanted sexual intimacy from their partners, some were just displacing their past trauma and ongoing family issues onto their partners. In most cases the IPV was

Intimate Partner Violence in People with Adverse Childhood Experiences

very frequent until one of the partners broke ties. As for ACEs, the reasons were not always clear for sexual abuse, for physical and emotional abuse, need for establishing discipline and control and gender role expectations were accounted.

The thematic analysis table includes division of incidents of abuse based on general types and sub-types and outcomes based on emotional and behavioural responses. The type of abuse is divided into physical, sexual and emotional abuse, each of which is further divided into sub categories. Physical abuse consisted of light hitting and severe injuries; sexual abuse included sexual coercion, assault and incest; emotional abuse consisted of strong language, neglect, manipulation, lies and controlling activities.

The types of outcomes are divided into emotional and behavioural respectively. Emotional outcomes include invalidation, confusion, frustration, helplessness, shame, and fear while the behavioural outcomes include anger outburst, alienation, avoidance of building trustworthy relations, and avoidance of sexual contact and relations.

One thing worth noticing in this study is the recurrence of similar types of abuse and outcomes in both experiences. As mentioned above, in most of the cases the type of abuse and outcomes corresponded with one another. This might be prevalent in society because of the traumatic event of childhood being left unresolved or hushed. This hushing leads to suppression of the emotions and events and thus healthy coping mechanisms are not formed. Thus, later when similar situations are encountered in intimate relationships, the individuals find themselves in a confused state and are unable to cope with it in a healthy manner. They think that they can resolve the conflicts that have presented in the relationship but, as the trauma was not resolved properly in the past, they do not possess the resources needed to cope with similar conflicts in the present. And thus a cycle is formed from abuse to abuse if and until the conflict is shed light upon and intervened with proper deliberation and consideration.

This observation leads to the suggestion for increased need for formulation of trauma focused interventions that trace the link between similar past experiences so as to

- find out the resources and awareness that individual possesses to deal with the conflict or abuse,
- acknowledge the emotions associated with the past experiences in order to modify and channelize them better for future encounters, and
- find out the behavior patterns formed as a defensive coping mechanism to deal with the abuse and thus be able to form newer and healthier patterns.

CONCLUSION

This study aimed to explore the link between ACEs and IPV among young adults in India. The results revealed three prevalent forms of abuse – emotional, sexual, and physical – and two common outcomes, namely emotional and behavioral consequences. Notably, emotional abuse was the most frequently encountered form, with the outcomes evenly distributed in the sample. The study also unveiled the pervasive impact of childhood abuse, exacerbated by societal taboos and entrenched family values in India, hindering the expression of personal, emotional, mental, and social well-being. This led survivors to grapple with confusion in differentiating between love and abuse, resulting in difficulties forming and maintaining relationships. These individuals carried profound emotional burdens and struggled with pervasive trauma. The findings underscore the necessity of tailored interventions and

Intimate Partner Violence in People with Adverse Childhood Experiences

awareness initiatives to help survivors acknowledge and cope with their traumas, fostering healthier responses to past experiences and promoting recovery.

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Conflict of Interest

The author declared no conflict of interest.

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