

Text Presented at World Meeting of Families 2018 Pastoral Congress, RDS,  
Dublin, 24th August 2018



***Insights from Victims On The Impact and Implications of Domestic Violence.  
Breaking the Silence: Dealing with Domestic Violence***

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In using a longitudinal approach with data from two separate periods – one during and the other post-conflict – this presentation will report on research undertaken with women victims/survivors of domestic violence. It highlights the level of power and control that is exercised over victims and shows how their experiences are shaped by culture and religion. Leaders and members of faith communities need to break the silence on such abusive relationships and be enabled to provide effective support.

Interviews with women victims of domestic violence, or Intimate Partner Violence (IPV), were conducted at two junctures: first in 1992 with over 60 women and more recently in 2016, with 63 women. It shows the multi-dimensional nature of IPV and the changes that have taken place over the past two decades. It draws attention to the severity of the abuse showing how lives were threatened, physically and sexually; how injuries were inflicted and how pregnant women were beaten and suffered miscarriages. At both junctures of the study, participants saw no alternative to the violence except by trying to end their own lives. Most participants reported loss of self-esteem and social isolation that impacted on their capacity to engage in society. A religious/cultural emphasis on treating domestic violence as a private matter rather than a public harm or a focus on ‘keeping the family together at all costs’ has serious implications on decisions to leave.

The 2016 study shows the changes in religious attitudes with fewer participants showing concern about the reaction from clergy compared to 1992 when this was a significant factor in their decision-making. In the first study, victims reported that they frequently went to the clergy for advice on how to cope with their abusive partner. Clergy at that time were not trained in what guidance should be offered and some cautioned the women from leaving whilst others visited refuges/shelters to counsel the women to return home to their husbands. In telling the women that their partners were remorseful, the priests and ministers would not have been aware that words spoken by partners were not followed by deeds of remission, such as a change in behavior. One woman in 1992 was informed that her sacrifice was to tolerate the abuse as her reward would be found in heaven. Counseling women in such ways or advising women who were living in safe houses to return home is dangerous as it can put a woman’s life at risk. The most dangerous time for women can be when they start to make decisions to leave or to end an abusive relationship. Members of the faith community need to be aware of the precarious situation in which victims find themselves and to be able to offer the appropriate support at such times. Following the publication of the first study, Women’s Aid produced a pamphlet “Where Home Is Where The Hurt Is’ offering guidance to the faith community on how to raise awareness to prevent domestic violence.

By 2016 there had been a change to the earlier response to victims who were told: “You have made your bed, so you will have to lie in it” with women feeling much less dependent on what religious or cultural customs dictated. However, participants in 2016, like those in the 1992, also reported that they felt stigmatized for getting divorced/separated or a sense of shame for becoming a single parent. Such attitudes were reported by almost half (24/53; 45%) of participants in 2016 who stated that these attitudes prevented them from disclosing IPV and/or leaving IPV relationships.

Participants raised concerns regarding a lack of response to psychological and sexual violence compared to physical violence: 'Those providing help really do need to understand that it's not all about the physical...that you don't need to have blood running out of you or physical scars for them to do something'. (Interview, April 2016). Sexual violence in intimate partner relationships was also prevalent with almost half of the women (46% or 29/63 participants) reporting rape by their intimate partner.



The impact of control and abuse also has serious negative effects on physical and psychological wellbeing. As the following comment reveals, the abuse can be persistent: 'Even when I wasn't with him, from eight o'clock in the morning to twelve o'clock at night my phone would have beeped constantly with messages like "where are you, what are you doing?" or "who are you with?"'(Interview, May 2016). A substantial link exists between IPV and poor mental health with three quarters of participants in the 2016 study (47/63; 75%) reporting that they had become depressed as a direct result of IPV with 39 (62%) on long-term prescribed medication. The impact on self-esteem is also noticeable with comments such as: 'He would always put me down with comments like "you can't do this", "you don't know how to do that", "that's not done right" (Interview, April 2016). The impact of abuse and control meant that three quarters of those participating in the 2016 study (48 in total) had suicidal thoughts as a result of IPV with 15 women (24%) reporting that they had attempted suicide.

Psychological and financial forms of abuse were also typical as exemplified by the following comment: 'If I went on a night out with my friends, which was only twice a year, when I would come home, he would have put the keys in the other side of the door and I'd be locked out. It was my punishment you see for still having friends' (Interview, March 2016). Participants in both studies - almost half (30/63; 48%) for the 2016 study – also reported that they had been followed or stalked by their partner on at least one occasion. Where a difference was observed between the studies was in the use of mobile phones and/or social media. Thirty-five participants (56%) in the 2016 study reported that they had their mobile calls, text messages and/or online activity checked or restricted by their partner who controlled who they called or who they had sent messages to. Other forms of coercive control include forcing a partner to pray or preventing them from practicing their religion.

A high degree of control exerted in IPV relationships is linked to social isolation. For 2016 where prevalence was recorded, 54 of the 63 study participants (86%) reported that their partner had prevented them from seeing or contacting their families and friends. Forty-eight participants (of 63; 76%) reported that their partner needed to know their whereabouts at all times. More than three quarters of participants in the 2016 study (49/63; 78%) reported that IPV had disrupted their income-generating activities such as employment and education, as well as their leisure activities. Given the lack of access to family, friends and other potential help providers within the local community, the faith community becomes even more relevant as it may be one of the few resources that the victim has in relation to receiving support.

The report shows the need for additional training to enhance skills and support as well as increasing awareness of the multi-dimensional nature of IPV amongst members of the faith community. The Irish aid organization Trocaire and Raising Voices have produced "SASA! Faith" which is an excellent guide to preventing violence against women in faith based communities. It outlines the importance of pastoral and spiritual support alongside practical steps in facilitating responses to safety and welfare concerns. The awareness raising posters that accompanied the guide in Uganda, for example, were co-designed with members of the faith community. The newsletters, posters and other literature that accompanied the campaign, chosen during particular liturgical periods, were used throughout the country with Catholic and Muslim faith leaders speaking directly to their congregations in ways that helped local people to challenge domestic violence. Members of the faith community were also

trained in leading these discussions and in facilitating other trainers so that the campaign became a countrywide effort. This is an example of good practice and one that could easily be adapted to the Irish context.



Where faith workers provide facilities for access to children where IPV is known to exist, they need to be aware that perpetrators attempt to turn the children against the victim/former partner and that this is part of a pattern of coercive control. Once decisions are made to leave, ways have to be found to support victims through this process. Control does not stop after the participant leaves an abusive relationship but continues through child custody and separation proceedings. Safe guarding arrangements should also apply to children and vulnerable adults affected by IPV.

Societal or religious attitudes that tolerate and support (rather than condemn) IPV need to be challenged using education, broadcasting, print and social media. Consistency of non-judgmental responses and the maintenance of dignity should be central to the support provided by the faith community. Given the extent and seriousness of domestic violence, and its impact on women and children, what is needed is a transformation in relation to gender equality both within the church and wider society.