UNDERSTANDING DOMESTIC VIOLENCE AND ABUSE IN THE UK MUSLIM POPULATION

A degree submitted for the Degree of Doctor of Philosophy

Ву

Rahmanara Chowdhury

Department of Life Sciences, Brunel University London

August 2021

بِسْمِ اللَّهِ الرَّحْمَانِ الرَّحِيمِ

Bis-millah-hir Rahman-ir Raheem

In the name of God, the Most Compassionate, the Most Merciful

The Prophet Muhammad (pbuh) said, "Help your brother, whether he is an oppressor or he is an oppressed one. People asked, "O God's Messenger! It is alright to help him if he is oppressed, but how should we help him if he is an oppressor?" The Prophet (pbuh) said, "By preventing him from oppressing others."

(Sahih al-Bukhari, 2444)

Abstract

Domestic violence and abuse (DVA) has been called the hidden pandemic, such is its global reach. It can affect anyone, from any community. Within the UK, current understanding, interventions, and support have been predominantly built upon research with the White Caucasian community. Whilst the UK stands at the forefront of legal recognition of DVA internationally, there remains a lack of understanding in relation to DVA within minority communities. This research seeks to explore how DVA manifests within UK Muslim communities, and how such understanding can inform earlier intervention points. Two qualitative studies were carried out, utilising interpretative phenomenological analysis. Study one involved semi-structured interviews with Muslim female survivors of DVA (N=10). Study two involved semi-structured interviews with healthcare and judicial professionals with extensive experience of working with Muslim communities, within a DVA context (N=9). These studies were then brought together for a multi-perspective interpretative phenomenological analysis of the two datasets. Three empirical chapters present findings in the form of detailed superordinate and subordinate themes for study one and two, with the culmination of a web model of DVA within the third empirical chapter. The findings demonstrate the diffused nature of DVA within UK Muslim communities and therefore the need to consider the wider and more holistic factors integral to DVA experiences. Four specific levels of consideration were identified as the individual psycho-social-spiritual level, the presence of additional stakeholders, the impact of intersectionality, and macro level structures which filtered down to the individual DVA experience. Through understanding the differing nature of DVA within this population group, earlier points of intervention are identified, in addition to how such knowledge can better inform service provision.

Contents

Acknowledgements	7
List of Figures	9
List of Tables	10
Appendices	11
List of Abbreviations	12
Chapter 1: Introduction	13
Researcher Positioning	15
Research Aims and Objectives	16
Guide to Thesis	16
Chapter 2: Perspectives and Approaches to Understanding Domestic Violence and Abuse	18
2.0 Introduction	18
2.1 Understanding DVA Offending Behaviours	18
2.1.1 Physical Abuse	18
2.1.2 Emotional and Psychological Abuse	19
2.1.3 Sexual Abuse	20
2.1.4 Financial Abuse	22
2.1.5 Coercive Control	23
2.1.6 Spiritual Abuse	23
2.1.7 Summary of DVA Offending Behaviours	25
2.2 Theories and Models of DVA	26
2.2.1 Feminist Theory	26
2.2.2 Family Violence Theory	29
2.2.3 Models of DVA	33
2.2.4 Summary of DVA Theories and Models	36
2.3 Limitations within the Literature	38
Chapter 3: The Muslim Community	42
3.0 Introduction	42
3.1 Muslim Communities in the UK	42
3.2 Understanding Muslims within the Context of Islam	45
3.3 Muslim Communities and the Intersection with Cultural identity	46
3.4 Understanding Muslim Families	47
3.5 Muslims within the Education System	49

3.6 Muslims and Gender Roles	51
3.7 Understanding Muslim Identity, Health and Wellbeing	54
3.8 Faith-based Education and the Mudaris System	58
3.9 Additional Challenges facing the UK Muslim Community	60
3.10 Summary	64
Chapter 4: Manifestations of Domestic Violence and Abuse within the UK Muslim Population	65
4.0 Introduction	65
4.1 Physical Abuse	65
4.2 Emotional and Psychological Abuse	69
4.3 Sexual Abuse	70
4.4 Financial Abuse	71
4.5 Coercive Control	73
4.6 Spiritual Abuse	75
4.7 Summary	76
Chapter 5 Methodology	78
5.1 Method	78
5.2 Participants	81
5.3 Materials and Data Collection	86
5.4 Ethical Considerations	88
5.5 Analysis	90
Chapter 6	93
Empirical Study 1: Muslim female Survivors of Domestic Violence and Abuse	93
6.0 Introduction	93
6.2 Findings	94
6.2.1 Superordinate Theme 1: DVA as a Web of Abuse	94
6.2.2 Superordinate Theme 2: Cultural Normative Practices Vs Faith Dichotomy	106
6.2.3 Superordinate Theme 3: Complexity of DVA Dynamics	113
6.2.4 Superordinate Theme 4: "Don't think you don't have anywhere to go": Supportive Mechanisms as Life Changing	125
6.3 Conclusion	135
Chapter 7	140
Empirical Study 2: Experiences of Healthcare and Judicial Professionals working with the UK Mu Population within the context of DVA	
7.1 Introduction	140

7.2: Findings	141	
7.2.1: Superordinate Theme 1: The Muslim Community "Caught in a vortex of change whole world watches"		
7.2.3 Superordinate Theme 2: DVA in close knit communities: "Talking to the whole	tribe".152	
7.3 Conclusion	167	
Chapter 8	172	
Study 3: Web Model of Domestic Violence and Abuse in Muslim Communities – a Multi Per	•	
8.1 Introduction	172	
8.2 Findings	174	
8.2.1 Rebuilding life after DVA: Challenges at every level	174	
8.2.2 DVA as diffused: "How dare heinvite them into my home for them to play judge a	• •	
8.2.3 Denial of Intersectionality: "You're a feminist"	184	
8.2.4 Structural Barriers to addressing DVA: "You're a different colour from everyone he have to work that much harder to be recognised"	•	
8.2.5 Web model of DVA	193	
8.3 Discussion	200	
8.3.1 Limitations	206	
8.3.2 Recommendations	207	
Chapter 9	208	
Conclusion	208	
9.1 Summary of Findings and Discussion	208	
9.2 Original Contribution to Knowledge	214	
9.3 Implications for Practice	218	
9.4 Strengths and Limitations	219	
9.5 Ethical Reflections	224	
9.6 Theoretical Implications	226	
9.7 Research Reflexivity	230	
9.8 Concluding Remarks	239	
References	241	
Appendices	282	

Acknowledgements

This doctorate commenced on very tentative footing. Whilst I was determined to embark upon it, I did not anticipate that I would have the opportunity to undertake it as part of the ESRC Grand Union Doctoral Training Programme (GUDTP). My sincere thanks to Professor Tess Kay who brought the opportunity to my attention. In reality I had no idea what I was getting into, but I have never looked back with regret. I only feel appreciation to have had support from those wishing me well. The ESRC GUDTP opened up doors that would otherwise have been very unlikely. It transformed the future direction of my life and I hope there will be a ripple effect of this with the potential impact of my research.

My sincere thanks to Professor Belinda Winder. I cannot overstate her patience in working with me tirelessly over the past four years. I am certain I must have tested her limits given my struggle back into academia, but she never once faltered. In her support and guidance, I have always known she was encouraging me to push myself that little further every step of the way. Thank you for having faith in me.

My sincere thanks to Professor Louise Mansfield who kindly stepped into my supervision team as natural changes took place. Her expert guidance helped me to navigate the practical intricacies. Equally, she always stepped in at exactly the right moment that my thinking needed stretching that little bit further.

My further thanks to Professor Pam Alldred, who took on the role of my Research

Development Advisor and continues to steer me in the right direction professionally. Many
thanks also to Dr Vassil Girginov who continued to oversee this role and provided the same
level of positive support.

Many sincere thanks to everyone who supported me at Brunel University London within the ESRC GUDTP programme, and equally those at the University of Oxford and the Open University. First and foremost, Emma Smith. Working relentlessly behind the scenes, she made many aspects of my development within the GUDTP come to life. Without this, I would not have had the positive experience that I did. Thank you for all your support. Dr Philippa Waterhouse, your vision along with Professor Tess Kay and Professor Louise Mansfield, to see our cohort come together enhanced the doctorate experience. The peer

learning which was facilitated was priceless. The Graduate School staff at Brunel University, their excellent development programmes, efficiency and unwavering positive support. Every training programme and the consistent positive attitudes helped to build my confidence brick by brick.

My thanks to all those amazing individuals I have met along the way. I learnt something from each and every person I've encountered on this journey. I have further been inspired by the journeys and perseverance I have witnessed.

My thanks and sincere appreciation to Maya Gohil and Olivia Standish-Leigh from Nottingham Trent University, who supported with some of the transcribing for Study 2.

Finally, my thanks to my sizeable family. Without their support, completing a PhD would have been incomprehensible. When I questioned how I could possibly complete a PhD, no barriers were presented, rather I was encouraged to consider that nothing could stop me. The numerous hours of babysitting and school pick-ups on my late days, allowing me to ramble on about my research woes and encouraging me to continue when I thought I would never make it. For me, this was a truly collective effort. To my dear father, who was always striving towards a goal, I would have liked to have shared the achievement with you. Graduation will not be the same.

Maaria, mummy has finally finished my PSHE (a six-year old's confusion with a PhD). I can finally have early nights and more family time.

Most of all, to all those who participated in this study, my sincere thanks for your time and for sharing your pain and your struggles. You all let me into your lives and allowed me to see your vulnerabilities, whether personally or professionally. I hope this work will go some way towards helping in ways that we could not have anticipated.

Declaration: This doctorate was funded by the ESRC Grand Union Doctoral Training programme.

List of Figures

Figure 1 The Duluth Power and Control Wheel (Pence & Paymar, 1993)	27
Figure 2 Ecological model of abuse (Heise, 1998)	30
Figure 3 Islamic Model of the Soul (Rothman & Coyle, 2018)	55
Figure 4 Web model of DVA	194
Figure 5 DVA Cycle of Reinforcement	210
Figure 6 Holistic DVA understanding: empowerment cycle	211

List of Tables

Table 1 Study one (survivors) participant demographics	82
Table 2 Study two participants demographics	942
Table 3 Study one themes	94
Table 4 Study two themes	1411

Appendices

Appendix 1 Study 1 Interview Schedule	28383
Appendix 2 Study 2 Interview Schedule	2844
Appendix 3 Risk Assessment	2855
Appendix 4 MP-IPA Development	289

List of Abbreviations

BEAR Black Emancipatory Action Research

BPS British Psychological Society

CJS Criminal Justice System

DVA Domestic violence and abuse

FGM Female genital mutilation

FM Forced marriage

GLM Good lives model

HBV Honour based violence

HMPPS Her majesty's prison and probation service

MCB Muslim Council of Britain

MDV Multiple perpetrator domestic violence

NES National epidemiology survey

PAR Participatory Action Research

pbuh Peace be upon him

RNR Risk Need Responsivity

Chapter 1: Introduction

Domestic Violence and Abuse (DVA) in the UK prevails across all communities, ages, races and cultures (Mallory et al., 2016). It has been reported that 1.2 million women and just over 700,000 men are affected by DVA every year (ONS, 2017). Understanding cultural differences within DVA behaviours has been noted to be of relevance in how DVA is both understood (Purkayastha, 2000) and experienced (White & Satyen, 2015). This thesis aimed to explore issues surrounding DVA within the UK Muslim population. Broadly, it aimed to identify how DVA manifests within the UK Muslim population and the potential for earlier interventions. The research was partially informed by the author's previous MSc research into the experiences of South-Asian Imams working with Muslim males, within a DVA context. This highlighted a lack of research into the cultural issues specific to Muslim communities.

British legislation in the 1800s unequivocally permitted the husband to 'chastise' his wife, even if that meant physical violence in order to keep her 'under control' (Stedman, 1917). This, Stedman reported, was reflective of the wife being viewed as a representation of the husband. The Domestic Violence and Matrimonial Proceedings Act 1976 initiated discussions regarding prohibition of marital violence. Legislation has since been updated from Part IV of the Family Law Act (1996) to the Domestic Violence Crime and Victims Act (2004). This was in recognition of legislative failures in supporting victims in particular (Graca, 2017). Victims were thereby able to apply for non-molestation and occupation orders, focussing heavily on future prevention of physical violence and harassment.

The law in England and Wales recognises DVA as "any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality" (Gov.uk, 2012). Five types of abuse were specifically identified as physical, psychological, emotional, financial, and sexual. Whilst this recognition did not name a specific DVA offence under English Law, Section 76 of the Serious Crimes Act 2015 introduced a turning point in how DVA was understood and addressed legally. With the

recognition of both coercive and controlling behaviours within the 2012 definition¹, a wide range of subtle, coercive patterns inherent within DVA and as indicated by research (McMahon & McGorrery, 2016), were legally recognised and prosecutable. This further extended to the devolved UK nations. Such legal advancements in addressing DVA across the UK have been regarded as world leading (Candela, 2016).

Whilst the UK government uses the term domestic violence, within this thesis the term domestic violence and abuse (DVA) has been adopted in reflection of the wider literature. Candela (2016) called for the recognition of all forms of abuse, not necessarily limited to physical violence which is often denoted by the term domestic violence.

With the introduction of coercive control as a criminal offence, English Law has set a precedent of defining the coercion and control that can take place at a micro level within DVA relationships (Candela, 2016). Current interventions and treatment programmes for perpetrators have been led by Western countries and remain in development (Arias et al., 2013). Research in understanding perpetrator behaviour has been predominantly conducted by Caucasian researchers with ethnicity demographics visibly lacking in outputs (Walker et al., 2015).

Muslims are known to be from ethnic backgrounds from all over the world (Eaton, 1994). Faith is deemed to be integral to their identity regardless of their individual level of practice (Farooqi, 2006). The intertwining of culture with faith has been known to have a direct impact on the understanding and addressing of DVA within this population (Macey, 1999). The collective nature of communities and resulting impact on DVA recognition, treatment, and prevention has been noted to be of relevance in understanding and addressing the issue (Mallory et al., 2016). It is therefore important to understand the differences within this population, both contextually and culturally. It is recognised that DVA can be

14

2012).

¹ Controlling behaviour is defined as "a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour", whilst coercive behaviour is defined as "an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim" (Gov.uk,

perpetrated by any gender, however within this research the focus is on Muslim males as perpetrators and Muslim females as victims, an area that remains under-represented.

Qualitative research with survivors (N=10) and healthcare and judicial professionals (N=9) has been conducted. Healthcare in this instance refers to broader healthcare professionals, not necessarily limited to the medical/nursing profession. The research sought to explore how DVA is understood both from ethnic cultural practices and a faith perspective. This was firmly embedded within the context of how family and community members responded to DVA. Findings were contrasted with existing DVA theories in order to understand how DVA within UK Muslim communities may differ to the mainstream population. The findings herein contribute to broadening the understanding of DVA for UK Muslim communities. Furthermore, the application and importance of tailored and culturally sensitive DVA interventions for this population group are presented. Potential earlier points of intervention have also been explored.

Researcher Positioning

The researcher holds a specific position in relation to this research. She has prior experience of working in the field of DVA coupled with being a mature female from the UK Muslim population itself. Within a personal capacity she has witnessed first-hand how oppressive expectations may be placed on Muslim women by their spouse and in-laws. As a result, restrictive everyday living conditions would be imposed on women, thereby limiting resources and avenues for seeking help. She observed this as often being justified under the banner of cultural normative practices. Yet Islam she noted strictly forbade such mistreatment and oppressive practices. This she witnessed often led to internal family conflict between long held normative practices and authentic faith-based teachings.

Her aspiration to see women and young girls in particular achieve more in life led her to undertake counselling training. She has previously worked with survivors of DVA providing counselling and holistic support. She developed a faith-informed DVA recovery programme, delivered to over 50 women with positive feedback. She also developed various training courses on the subject of DVA, aimed at community and professional audiences. She has authored two books (Chowdhury, 2016; Chowdhury, 2021) on DVA, aimed at awareness raising within the Muslim community and providing cultural insight for professionals

working with Muslims. Her second book (Chowdhury, 2021) is the written companion to the faith-informed DVA recovery programme she developed.

As an insider to the community, the researcher continues to be exposed to the sensitive and complex nature of DVA related issues. This allows her to gain access to such knowledge and insight that would otherwise be challenging within a close-knit community context.

Furthermore, having experience of working in the field facilitated deeper understanding of the context within which this topic was being researched.

Research Aims and Objectives

This research was designed to understand DVA dynamics in the UK Muslim population. This was used to inform how DVA manifests for this population group.

The research involved Muslim female survivors and professionals working in a DVA capacity. It sought to gain a greater understanding of the following:

- To increase knowledge and understanding of survivor views of the nature, occurrence and impacts of DVA in Muslim communities, and the processes through which these views were formed.
- 2. To increase knowledge and understanding of community views of the nature, occurrence and impacts of DVA in Muslim communities, and the processes through which these views were formed.
- **3.** To understand the barriers experienced in addressing DVA at all levels.
- **4.** To make recommendations for enhancing understanding, preventative, and earlier DVA interventions within Muslim communities.

Guide to Thesis

This thesis is organised as follows:

Chapter 2 explores current perspectives and approaches to DVA within the UK and western world. Chapter 3 provides an overview of the structure of UK Muslim communities, how that structure gradually emerged, and why this is important to understand in relation to DVA. Chapter 4 presents how DVA translates for minority communities, specifically, the UK

Muslim population. Combining chapter 3 and 4 into one chapter was considered. However, upon reflection it was deemed a critical aspect of the research topic to ensure due regard was given to the subtle nuances and cultural differences within the population group in question. Without this, it was considered to be an injustice to the research topic for the population group under question and not providing anything distinctive from current literature. Chapter 5 explores the methodological approach adopted in order to conduct this research, including the importance of decolonial considerations. Chapter 6 puts forward the first empirical chapter relating to the qualitative study with UK Muslim female survivors of DVA. Of the empirical chapters, this is the most substantial in reflection of providing a platform to those who are otherwise unable to access safe spaces within which their voices can be present. Chapter 7 presents the second empirical chapter relating to the qualitative study with healthcare (non-medical) and judicial professionals working within the context of DVA, with the UK Muslim population. Chapter 8 presents the final empirical chapter. This brings together the first and second study in a multi perspective approach and presents the web model of DVA as the outcome of this amalgamation. The Conclusion within Chapter 9 brings together the thesis, inclusive of researcher reflexivity and recommendations. Various study designs required adjusting in light of the challenging research question and the nature of the world post Covid-19. These are also explored within Chapter 9.

The research has been a process of discovery and growth on numerous levels. It is hoped this will be reflected within the Thesis.

Chapter 2: Perspectives and Approaches to Understanding Domestic Violence and Abuse

2.0 Introduction

This chapter is divided into three sections. Section 2.1 focusses on how DVA behaviours are understood within the UK legal framework, and how they transpire within society at large. Section 2.2 explores theories which have underpinned the understanding of DVA behaviours to date. Finally, the areas requiring further consideration in specific regard to UK Muslim communities are discussed in 2.3.

2.1 Understanding DVA Offending Behaviours

DVA as one specific offence is not prosecutable under English law. The law does however prosecute specific behaviours which fall under the legal DVA definition, a key factor being that they are committed within an intimate relationship or by family members. These have been identified under physical, emotional, psychological, sexual and financial categories (CPS Guidelines, 2020). Each of these categories, how they are prosecutable according to the 2020 CPS guidelines and their implications will be explored further here.

2.1.1 Physical Abuse

Offences under physical abuse are usually prosecuted under common assault, actual bodily harm or grievous bodily harm, and serious physical harm or death. Where the physical abuse leads to death, charges of manslaughter or murder can be applied (CPS Guidelines, 2020). Physical abuse has been and remains one of the most recognised forms of DVA (Robinson et al., 2016). This potentially may relate to it being the most reported form of DVA, particularly in reflection of the law comprising a range of actions which fall under this category (CPS Guidelines, 2020). The CPS provide examples that may or may not involve weapons. Physical evidence of the offending behaviour has been known to increase the chances of successful prosecutions (Moore & Singh, 2018). They argue that through the use of visual evidence within court proceedings, the victim themselves can in essence become sidelined. The move towards victimless prosecutions due to the high rate of victim withdrawal, has been known to result in the use of body worn video footage, medical records and witness statements to pursue convictions (Porter, 2019). Once again

demonstrating the wide expanse of the law to capture such offences. However, the emphasis on the visibility of physical harm has resulted in calls to recognise the wider nature of DVA offending behaviours (Day & Gill, 2020; Robinson, et al., 2016). Pence and Paymar's (1993) wheel of power and control however highlighted that not all forms of physical abuse results in visible harm. This raises questions regarding the resulting impact of how physical violence itself is understood within society at large.

2.1.2 Emotional and Psychological Abuse

Emotional and psychological abuse can be more complex to identify and often take numerous forms. Engel (2002) identified emotional abuse as including humiliation, degradation, domination, criticism, unreasonable expectations and being accusatory in nature. Engel (2002) further defined it as being non-physical control, based upon both negative behaviours and attitudes. Follingstad and Hart (2000) asserted practitioner understanding of emotional and psychological abuse as often overlapping. They found Psychologists (n=449) categorised psychological abuse as threats to physical health, including overt and covert threats to self and others, control of physical movements, inclusive of humiliation and imprisonment, and destabilisation using components of emotional abuse. However as 97% of this sample were Caucasian, cultural differences in gender role expectations and what may be perceived as constituting abusive behaviour, may not be accounted for. Although significant time has elapsed since this research was conducted, this type of offence is still recorded by police forces and thereby warrants current consideration (CPS Guidelines, 2017). These offences however can be very subtle or part of cultural normative practices. Hence being able to distinguish these as harmful behaviours may not always be straightforward.

CPS prosecutions within this category include stalking and harassment behaviours, misappropriate use of technology, and criminal damage in various forms. There is no one fixed definition of stalking, however the literature consistently indicates its relation to unwanted repeated attention, which also causes concern for personal safety (Cupach & Spitzberg, 2014). Dixon and Bowen (2012) highlighted the highly subjective nature of stalking, in that the individual experienced it to be harassment in nature. Taylor-Dunn et al. (2017) highlighted that whilst some stalking behaviours may appear insignificant to police

officers, for victims the converse is often true. US studies have noted stalking behaviours being associated with more severe violence, greater levels of fear and distress, and more violations against protective orders (Logan et al., 2007). Flowers et al. (2020) review of the literature drew attention to the significant overlap between DVA and stalking behaviours. The literature consisted of a strong US sample, with some UK and Australian studies, and one Portugal study. The ethnic representation across the studies falls under question. With the Muslim community being inherently more collective in nature (Otters, 2012), contextual factors such as the family and community structures, along with cultural contexts, need to be considered in this regard. There is an expectation that stalking behaviours are inherently carried out by a partner or spouse. However, this does not account for DVA related stalking behaviours carried out by wider family or community members, whether done intentionally or as part of cultural expectations.

2.1.3 Sexual Abuse

The CPS (2020) identify sexual abuse as any type of enforced sexual activity. Prosecutions under this category can fall under rape, sexual assault, and causing or controlling prostitution for gain. Degradation and humiliation have also been associated with sexual abuse within the literature (Ali et al., 2016). The question of marital rape is also of relevance here. Marital rape was formally recognised in the UK as being illegal under the Sexual Offences Act 2003. Historically, the recognition of marital rape was not present under judicial law. This was evidenced in landmark cases in 1736 when Sir Matthew Hale, former Chief Justice of the Court of King's Bench and in 1822, barrister John Frederick Archbold, both published legal texts stating that rape by a husband upon his wife was not legally recognised. This was based on the premise that in entering the marriage contract, the wife gave irrevocable consent for sexual intimacy at all times.

A strong historical presence of marital rape and sexual abuse across British society is evident. A 1989 survey found that from 1,007 women across the ten regions of Great Britain, 13% reported being forced to have non-consensual sexual intercourse with their husband. A further 13% also reported being forced by their husband, against their will, to engage in sexual intercourse with someone other than their husband (Painter & Farrington, 1998). The study found those who had experienced physical abuse (2%) were

disproportionately more likely to have experienced marital rape (35% in comparison to 5.7%). Since this study, the 2003 legislation has expanded the definition of rape to include oral or anal rape with an object, without ascertaining reasonable consent. The ethnicity of participants in this survey is not known, although the authors attempted a representative sample in terms of marital status and social class. However, the demographics of the UK has changed considerably since this study, therefore a more recent representation of UK demographics is required.

Research demonstrates the continued presence of rape or sexual abuse within intimate relationships. Morgan and Gilchrist (2010) highlighted the prevalence of sexual offending behaviours within an DVA context, noting that risk was potentially underestimated in such cases. Their review of the literature demonstrated victims personally knowing the perpetrator more often than not. Similarly, within a survey carried out with 22,000 women living in the UK, it was found that partners or ex-partners were the most common individuals who perpetrated rape or sexual abuse (Taylor& Shrive, 2021). Of this sample, 75% were White British, 10% did not disclose their ethnicity and 15% were from a broad range of ethnic backgrounds. Whilst this provided better representation it did not explore the issue in sufficient depth. Differences between the groups for example are not highlighted, barriers to reporting and what pressures if any, were applied.

In line with this, Waterhouse et al. (2016) highlighted the continued significance of marital rape. They found 70.7% (n= 270) of individuals who reported rape offences, knew the perpetrator. Within this, 40% reported it as domestic rape, thereby indicating being in an intimate relationship with the perpetrator prior to the rape. Although the authors reported 83.3% of their sample as being White, one-tailed binominal tests found the proportions of ethnic mix to be a reflection of the wider population. This however does not account for any under-reporting that may be present within specific population groups. This becomes all the more pertinent when studies such as Painter and Farrington (1998) reported an ingrained culture of silence when it came to marital rape within the UK White British population. They further reported a consensus that all women experienced occasions when they did not wish to engage in sexual intimacy yet did so because it was expected of them, or because it was easier to concede. Muslim communities have further considerations surrounding cultural

customs, expectations, gender roles, interpretations of theology, and taboo around certain social issues such as sexual abuse (Isgandarova, 2019). These potentially hold further nuances regarding how rape is understood which may require consideration. If rape itself is not accepted as being possible within marriage, then that automatically has an impact on both understanding and reporting. These are important considerations which require further understanding.

2.1.4 Financial Abuse

Financial abuse pertains to the victim being forced into financial dependency or deprivation (Conner, 2013). Under the CPS (2020) this can be prosecuted under harassment. Conner (2013) argued that financial dependency of women upon their spouses has a long-standing history in western countries and is further exemplified within the labour market conditions for women. This was particularly so in relation to childcare arrangements. Similarities have been found with types of financial abuse experienced by South Asian women in the UK, Pakistan, and India (Chowbey, 2017). Similitudes included preventing the acquisition or the utilisation of economic resources, the exploitation of resources belonging to women, and refusal towards household contributions. Two further forms specific to this sample involved the exploitation of marriage gifts including the dowry, and the use of transnational investments, thereby placing the women in long-term financial jeopardy. The potential overlap with coercive and controlling behaviours is drawn into question here. The study included both Muslim and Hindu women with visible cultural overlaps and differences. Economic abuse was also found to co-occur with physical abuse (two-thirds) and as a standalone form (Chowbey, 2017).

The differences apparent in this area due to cultural influences and practices which transcend international lines will be explored further in Chapter Four. It is further important to note family structures and gender role expectations within what is subsequently viewed as financial abuse. If it is deemed that all the finances must be run through one designated household head, the husband for example, then this again influences the understanding and reporting of financial abuse. Financial abuse therefore cannot be looked at as a stand alone offence, it would require placing within a contextual framework of the communities being considered.

2.1.5 Coercive Control

Coercive and controlling behaviour has been recognised as a criminal offence since December 2015 (ONS, 2018). Researchers in the field have been advocating this recognition for a significant period of time (McMahon & McGorrery, 2016). Coercive control refers to a pattern of behaviours over a period of time, designed to coerce and control the victim through more covert means. Coercive control can take place in many forms and in respect to diverse issues. However, it has been defined as having one objective; the control and coercion of the victim by the perpetrator towards actions and behaviour that is against their will (CPS guidelines, 2017). The CPS guidelines (2020) make reference to subordination, exploitation, deprivation of independence and regulation of everyday behaviour through assaults, threats and intimidation.

Again, the structure of families and communities, alongside gender role expectations potentially play into this. In cases where traditional gender roles are imposed upon others within heterosexual relationships, this lends added parameters for consideration.

Honour based violence (HBV), forced marriages (FM) and female genital mutilation (FGM) all fall under the CPS category of coercive and controlling behaviour. These offences are known to be particular to specific population groups, both Muslim and otherwise, and will be discussed in Chapter Four.

2.1.6 Spiritual Abuse

The one area lacking presence within the judicial framework and the literature is spiritual abuse within the context of DVA. The APA (2022a) define religion as being related to formal and organized practices of worship, usually in relation to a Deity or deities. Spirituality is defined as being relation to matters of a spiritual nature or in relation to the soul, with focus on concern towards God and religious experiences (APA 2022b). However, within an Islamic framework spirituality forms the essence of religion itself, without a clear demarcation between the two (Eaton, 1994). The very acts of worship considered to be religious in nature by the APA and western tradition, hold spirituality at the core of such practices within an Islamic framework. For such actions to be devoid of spirituality renders such actions hollow from both a religious and spiritual perspective as per western thought. This difference is critical to note in order to avoid superimposing alternative cultural approaches

onto Muslim communities within the context of understanding DVA. The Arabic word 'Deen' is sometimes translated as religion however, the more oft translation denotes an entire way of being (Eaton, 2012). This indicates a spiritual presence and transcendence within the everyday. Therefore, throughout this thesis, spiritual abuse in relation to Muslim communities will be referred to as encompassing what is traditionally understood within western thought as both religious based or spiritual based abuse. It should be noted that the spiritual and religious facets are considered as distinct from culture. Within this research culture is denoted as the normative practices associated with ethnic groups and furthermore, within individual families (Gill, 2021).

Within the context of abuse, the literature demonstrates the use of the terms spiritual and church synonymously (Oakley & Kinmond, 2013). Cashwell and Swindle (2018) put forward spiritual abuse as being applicable to all faith groups, therefore the need for appropriate recognition from therapeutic interventions. However, by their own admittance, they relied heavily on research conducted within the Church setting due to the lack of research within other faith groups. What is not recognised within the DVA context is spiritual abuse that takes place within a marital context and is perpetrated by the spouse as part of wider DVA behaviours. Attention is drawn to this very perspective within project dldl, a decolonial approach to understanding DVA within orthodox Täwahədo Church communities in Ethiopia and Eritrea. Within this, Istratii (2021) highlighted the significance of the interplay of religious beliefs within DVA manifestations, particularly in relation to the role of religious leaders.

Although Chowdhury (2016) does not provide a definition of spiritual abuse, examples are provided of what it may entail within UK Muslim communities. These include dictating theological interpretations, preventing or limiting level of practice and/or prayer, making demands which perceptibly limit time for faith practices, preventing faith-based learning, removal of personal autonomy in faith practice, and limiting sources of faith-based knowledge.

Elements of coercion and control are apparent both within the work of Oakley and Kinmond (2013) and in the examples presented by Chowdhury (2016). However, within a DVA context

further exploration and understanding remains. Questions are also raised regarding whether spiritual abuse can be recognised as a category of abuse in its own right, or whether it can be classified under coercive control. With the Muslim population identifying closely with their faith in diverse ways, regardless of levels of practice (Al-Karam, 2018), the role of identifying spiritual abuse as a separate category in order to understand the significance of it is raised. The recognition of applicability to different faiths within legislation and CPS guidelines would therefore be required.

2.1.7 Summary of DVA Offending Behaviours

The literature surrounding DVA offences demonstrates a discrepancy in what is legally recognised as a DVA offence and how DVA is experienced. Based on 123 research studies between 1980 and 2015, Ali et al. (2016) identified the core categorisation of offences as physical, psychological and sexual. The authors argued insufficient evidence to support financial and emotional abuse as individual entities. They argued these as being incorporated within other forms such as psychological abuse. English Law has categorised potential offences in a bid towards easier identification, the emphasis within the judicial system focusses on evidence based, specific criminal acts. This discrepancy potentially contributes to the gaps found within literature reviews such as that of Ali et al. (2016). Furthermore, would be understanding of such offences within communities themselves and therefore potential for under reporting.

A crucial element to the current understanding of DVA has been the literature focus on Caucasian US and UK population groups, and further conducted predominantly by Caucasian researchers (Walker et al., 2015). This presents a void in our understanding of how DVA is understood and experienced by other population groups. Whilst there have been some studies exploring the experiences of UK South-Asians with uncertain immigration status (Anitha, 2011) UK South Asian women more generally (Gill, 2004; Thiara & Gill, 2010), and UK Black and minority women (Burman & Chantler, 2005; Burman et al., 2004; Wellock, 2010), these remain scarce. Furthermore, the homogenisation of different ethnic groups remains problematic. Such research is limited in scope comparatively against the ethnic diversity within UK Muslim communities. This is further exemplified within a review

conducted by Femi-Ajao et al. (2020). Out of a potential 562 papers, only eight papers from four studies met the inclusion criteria of a qualitative, UK based study, with minority adult women with lived DVA experience. This raises a stark level of under representation within the literature. This is particularly relevant when considering cultural differences in relation to prosecutable offences. Where certain offences may be open to interpretation particularly surrounding coercive control, cultural differences may demonstrate a different understanding of certain behaviours. This brings into question cultural competence in relation to understanding differences between different population groups and what they would deem them as abusive or controlling. This is explored further in Chapter 4.

2.2 Theories and Models of DVA

Theoretical approaches and models explaining DVA behaviours have varied over time and remain under development. The main constituents of socio-cultural theories of DVA have centred on feminist theory and family violence theories. Model approaches to understanding DVA behaviours have focussed on psychological factors, typologies, and biopsychosocial models. To date, both theories and models have predominantly adopted a singular approach explaining certain aspects of DVA relationships and behaviours. Some attempt towards combining theories and different models have been embarked upon. These will be discussed further herein.

2.2.1 Feminist Theory

Feminist Theory stipulates patriarchal values underpinning DVA behaviour as an assertion of male dominance and control over the female partner (Dobash & Dobash, 1979). Significant contributions relating to this have included the cycle of violence (Walker, 1979), and the Power and Control wheel (Pence & Paymar, 1993) see figure 1.



Figure 1 The Duluth Power and Control Wheel (Pence & Paymar, 1993)

The Duluth Model of power and control is a US based community coordinated development. It has long underpinned the CBT basis for interventions with DVA perpetrators (Pence & Paymar, 1993). The model focusses on various elements of power and control tactics used in creating a power dynamic based on gender. This is typically in favour of the perpetrator, and includes subordination, domination and control of the victim. The power and control wheel has further been used as a basis for helping victims understand the ontology of male abuse against females. Most famously this transpired through initiatives such as the Freedom Programme, founded by Pat Craven and adopted by Women's Aid with a heavy focus on power imbalance between males and females, thereby the increased risk to female victims of male DVA perpetration.

Criticisms of the Duluth Model surround its exclusion of psychological factors. This was argued to have subsequent consequences in the treatment of DVA offending (Dutton &

Corvo, 2006). Equally support exists for the continued use of the model on the basis of both criminological research and psychological based theories supporting the model (Gondolf, 2007). Various developments within the model itself have also attempted to address some of the lacking elements such as psychological factors and cultural nuances (Duluth Model, 2011). The increased number of models however can make this complex for practical application.

Alkhateeb (2011) put forward the importance of understanding the cultural context through a Muslim version of the wheel. Rather than providing an alternative theory, this version demonstrated how power and control may play out in the everyday lives of Muslim families. Of particular note was how faith can often be intertwined or used as a justification within the DVA process. This is crucial to understanding cultural differences in the manifestations of DVA behaviours. However, it lacked sufficient depth and clarity for a more nuanced understanding of DVA within UK Muslims communities to be ascertained.

Johnson (1995) argued that the feminist perspective is by default based upon patriarchal terrorism. This was argued to be a result of sampling methods relying heavily on female victims residing in shelters and from police reports. Shelters as an intervention, by their nature draw in victims who have been subject to extreme levels of domination and violence, argued to be patriarchal in nature by feminist theory. Johnson put forward perpetrator assessment and treatment programmes therefore being skewed towards this theory. The wider context of those perpetrating abuse in relation to the source of patriarchal values, also comes into question. Houston (2014) presented feminist theory as having informed the very foundations upon which UK DVA law has been developed. With DVA previously viewed as a private domestic affair (Eigenberg et al., 2012), it was deemed to be a criminal offence requiring state intervention as a result of feminist theory proponents (Houston, 2014). Mills (1998) argued that post-colonialism feminist theory focussed on western concepts of how women are perceived, with western women viewed as being more educated and independent. In contrast, women from eastern regions were often viewed as uneducated and submissive. This is pertinent when considering that much of feminist theories have been developed in the US, including the work of Walker and the Duluth model. Furthermore, they have been adopted by the various constituents of the UK government

and their respective legal systems. In line with this, Narayan (2013) argued for the consideration of the wider context. This included geography, cultural practices and faith beliefs as a means of obtaining a more holistic understanding of factors specific to different population groups. This further included social norms surrounding how women are perceived and gender role expectations. Foa et al. (2000) argued for the consideration of both psychological and environmental factors within their multifactor model. Psychological factors were stipulated as being shaped by resilience, partner violence, previous trauma and the presence of negative or positive schemas. However, a stark absence of cultural or identity related factors is evident within this. Day and Gill (2002) add that intersectionality, particularly those relating to gender, class, race, and immigration status, comprised further dynamics requiring consideration. With many Muslim women in the UK having eastern roots yet raised or born in the west, the intersection of the potentially yield further pertinent deliberations.

2.2.2 Family Violence Theory

The importance of the wider context was put forward through the Ecological Framework theory (Bronfenbrenner, 1977). Also known as the Nested Ecological model, it focused on human development according to the contexts and environments experienced over the lifespan. Within the context of DVA behaviours, Heise (1998) put forward particular risk factors as outlined in Figure 2 below.

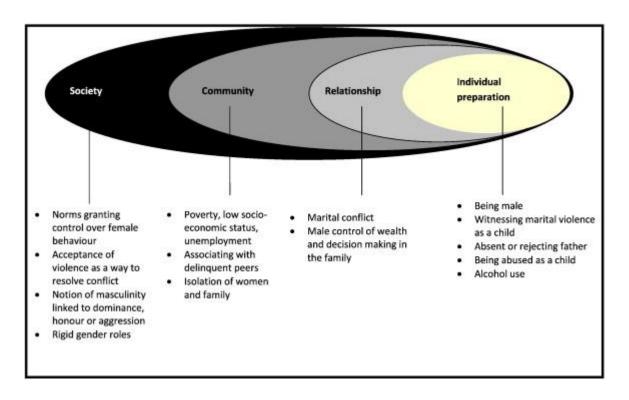


Figure 2 Ecological model of abuse (Heise, 1998)

Factors at the individual ontogenetic level, within the context of the relationship, the broader context of the individuals' community and further extended to the societal factors, were given precedence. Heise (1998) referred to these different levels as individual experience inclusive of biological and psychological factors. The author identified three systems: micro-system (relationship context), exosystem (community context), and macrosystem (wider society context). These systems were identified as having both formal and informal structures. These were further informed by cultures and subcultures consisting of meanings and motivations. Bringing together systems encompassing the individual over the course of their life, facilitated identification of interdependent factors possessing potential influence relating to DVA behaviours (Ali & Naylor, 2013a). Hence areas missing within other sociocultural perspectives were accounted for. By attempting to integrate all areas evident within the literature, a broader and more comprehensive understanding of potential influential DVA factors within a given context, was facilitated. An overlap with the multifactor model put forward by Foa et al. (2000) transpired within this. Whilst the psychological factors have been discussed above, the second element of their model focused on social or environmental factors. Identified within this was contact with the

abusive partner, access to various resources including legal, socio-economic related, institutional, and social support. This demonstrated a clear indication towards the role of social and environmental factors within DVA help seeking ability, as per the ecological model. However, both the multifactor model and the ecological model omit identity related factors at the level of the individual and wider macro level. They further lack consideration of the interconnected nature of close knit communities and potential implications on the DVA itself. Both of these elements are crucial to Muslim and other close knit communities. Whilst there is mention of various elements such as social and macro considerations, the interconnections and thereby the resulting lived experience of DVA becomes discounted.

Family violence theories were founded upon environmental structural inequities and therefore remain lacking in recognition of the gendered power dynamics involved within DVA. Environmental structural inequities were considered to have a significant impact upon the propensity towards DVA behaviours (Gelles, 1974) and ability to seek help (Foa et al., 2000). Of significance were younger age groups, higher levels of unemployment, and lower socio-economic status all considered as having positive associations with DVA behaviours. Research further identified the link between structural inequalities between the spouses leading to DVA behaviours (Ali & Naylor, 2013a). One particular meta-analysis identified unemployment, low income and low education levels as having only weak links to male DVA perpetration (Stith et al., 2004), although the individual studies themselves varied in their findings. Potential methodological differences and contextual factors could help explain this disparity. The methods adopted by family violence theorists have come under heavy scrutiny by proponents of feminist theory (Johnson, 1995). They argue that large scale quantitative data provides no reflection of the role of gender and power within relationships, having disregarded the wider relationship context. Furthermore, general criticisms of family violence theory have noted a potential bias in reporting as a result of relying on one partner or a family member. Family violence theory further fails to reflect victim experiences, particularly in relation to gendered power dynamics and the impact of gendered abuse. Such considerations are critical to DVA dynamics.

In an attempt to bridge the gap, Johnson (1995) differentiated between two distinct forms of abuse referred to as patriarchal terrorism in line with feminist theories, and couples

violence more strongly aligned with family violence theories. Johnson argued that family violence was an indicator of more reciprocal violence across the couple and focused on the individual's dysfunctional response to conflict. Resulting lower levels of violence were anticipated in such cases. This, the author stated was distinctly different to patriarchal terrorism wherein the emphasis was on male power and control within the relationship. Johnson's differentiation however could be said to be less about structural inequities put forward by family violence theorists and more about individual inability to deal with conflict. In line with this, Anderson (1997) argued the benefits of incorporating feminist theory with family violence theory. Anderson linked structural inequities, as opposed to failed conflict resolution approaches, with socially prescribed norms surrounding gender roles and ideas pertaining to masculinity and femininity. The author presented structural inequities could thereby lead onto the social constructions of power according to gender, as proposed by feminist theory. This supported bridging the gap between the two theories and accounting for more than one narrative of DVA behaviours. Family violence theory has also been termed as resource theory by Blood and Wolfe (1960). This was indicative of those having lower social and economic resources asserting their masculinity through the use of force, thereby supporting the amalgamation of the two theories.

Muslim communities are known to be more collective in nature, which often directly impacts decisions made at a family and individual level (Otters, 2012). Faith identities are known to play a significant role at all levels of life (Eaton, 2000). Afrouz et al. (2020) highlighted the significant role of cultural barriers to DVA reporting whilst being purported as having a faith basis. This was particularly in relation to family members and religious leaders. With family structures often extended and varied in nature, the impact on relationships at the individual level was asserted by Alghafli et al. (2014). This will be explored further in chapter four. The inclusion of broader contextual aspects in the ecological model provides a potential platform for reflecting on differences within Muslim communities. This potentially facilitates increased identification of DVA behaviours through the application of such approaches and will be considered throughout this research, whilst also recognising the current limitations outlined. Further discussion in relation to the

applicability of such theories to Muslim communities will be discussed in the limitations section within 2.4.

2.2.3 Models of DVA

Models of DVA behaviours range from being psychological based, typology-based, to biopsychosocial based. These will be explored further.

Psychological Models

Psychological based models focus on risk factors which may predispose an individual towards carrying out DVA behaviours. Holtzworth-Munroe and Stuart (1994) identified certain risk factors based on childhood experiences including violence in the family of origin and association with deviant peers. Later adulthood-based risk factors were identified as attachment issues, high levels of impulsivity, poor social skills and attitudinal propensities towards violence. These they named as proximal and distal correlates respectively. These factors have also been put forward by Dutton and White (2012), who found insecure attachment to be consistently related to perpetration of DVA. Taking further the findings of Holtzworth-Munroe and Stuart (1994), Dixon and Browne (2003) highlighted psychological and ontogenetic characteristics held by DVA perpetrators, as opposed to non-abusive males. These they labelled as low assertiveness and self-esteem, poor social skills, abuse of alcohol and drugs, cognitive distortions, inappropriate dependencies, having come from violent backgrounds and a history of violent behaviour / general antisocial personality. Their objective within this was to demonstrate the heterogeneous nature of perpetrators, noting that not all of these characteristics were required simultaneously or to the same extent. Such studies overlap with findings from a meta-analysis of 85 studies (Stith et al., 2004). Identified factors included anger/hostility, psychological distortions, use of violence for conflict resolution, holding more traditional ideologies surrounding gender roles, poor levels of marital satisfaction and the presence of career or life stress. With physical violence being a core component of the studies included, caution regarding accuracy and broad representation would need to be exercised.

Mental health in relation to DVA behaviours has featured consistently throughout the literature. High rates of mental health issues for US DVA perpetrators were identified in a

National Epidemiology Survey (NES) (Okuda et al., 2015). In comparison to 42% of their non-abusive counterpart, 67.7% of those perpetrating DVA were likely to have psychiatric disorders. A separate US NES based study found males with a lifetime report of PTSD demonstrating higher risk of DVA perpetration (Hahn et al., 2015). The authors in both studies called for more mental health screening of those perpetrating DVA in order for more effective prevention and desistance interventions.

Further US support for high presence of PTSD, depression, alcohol and drug dependencies, higher levels of panic disorders, social phobias and generalised anxiety disorders were found in 308 males arrested for DVA related offences (Shorey et al., 2012). The sample had an ethnic make-up of 71.8% Caucasian, 12.6% African American, 8.1% Hispanic, 2.3% Native, 1.3% Asian and 3.9% other. Therefore, the need for better representation of minority ethnic groups remains. It is known that there are cultural stigmas and taboo associated with both DVA reporting (Kim & Hogge, 2015) and reporting of mental health issues within minority communities, including Muslim communities (Ciftci et al., 2013). This demonstrates the need for wider research within different population groups for increased understanding.

The convened literature surrounding individual psychological factors in DVA perpetration support mutual findings. Though the literature does not imply causation, the presence of risk may be elevated with certain factors. Hence the authors suggest such findings show potential points of earlier interventions in order for long term prevention and desistance strategies.

Typology Models

Typology based models have typically targeted identifying the pattern of abuse that takes place. A literature review of 15 existing classifications studies were used to propose a threefold typology of DVA perpetration (Holtzworth-Munroe & Stuart, 1994). Dimensions included the severity of the violence, the generality of the violence, and the presence of a psychopathological disorder. These were correlated with three distinct perpetrator types: family only, generally violent, and dysphoric or borderline with associations. The authors further correlated their findings to more low violence risk, high risk and medium risk respectively. These concepts were supported by Cavannaugh and Gelles (2005) across

further classification studies, although questions have been raised regarding the clarity between dysphoric/borderline to generally violent and high risk (Ali, Dhingra & McGarry, 2016).

Extending the work on typologies, Chiffriller et al. (2006) identified five clusters: pathologically violent, sexually violent, generally violent, psychologically violent and violent towards family only. The generally violent category was also identified as those who may be sexually violent both within and outside the family spectrum. The authors further highlight a significant number of studies relating to the misuse of alcohol and substances to DVA. Although alcohol is forbidden within the Islamic faith, individuals retain autonomy over whether they adopt this principle. Therefore, there is potential for misunderstanding and misrepresentations to be made in this regard. Hence this relationship requires further exploration.

Typology theories, although accounting for the nature of the abuse and where and how it might occur, are essentially limited to that. They do not fully explore beyond the nature of the abuse itself. The literature however demonstrates some commonality with elements of both feminist and family violence theories. This approach towards understanding DVA provides useful information on how and where the abuse may occur, however requires incorporation with wider knowledge for broader holistic understanding. This is particularly pertinent in informing effective interventions.

Biopsychosocial Model

The Biopsychosocial model of DVA recognised no singular ontogenetic factor as causally attributed to DVA behaviours. A key aspect of the model was in exploring the interaction of elements across the three areas which increase the risk propensity towards carrying out DVA behaviours (Ali & Naylor, 2013b). Psychological factors already have support within the literature as a stand-alone issue. Fishbein (2001) argued that biological theories in explaining violent behaviours need to be thoroughly explored and tested in order to ensure its reliability and validity. Fishbein (2001) raised questions surrounding whether biological factors are part of causality or effect of DVA behaviours.

The sociological element within the biopsychosocial model focused predominantly on the social learning environment surrounding individuals. Emphasis was placed on the learning of societal norms and attitudes. Within the literature a heavy emphasis was placed on social learning theory put forward by Bandura (1977). The focus of social learning theory is on children learning behaviour from what they witness around them. This is especially significant when socially inappropriate conduct is witnessed as having no social ramifications (Cunningham et al., 1998) and furthermore, when conflict resolution skills are not taught (Ali & Naylor, 2013a). Although there was a strong push towards this approach within the literature, there was also general consensus that learnt behaviour alone is not a universal rule within the context of DVA. Review of the literature highlights the focus of impact of abuse on children, many of which relate to coping mechanisms as opposed to children perpetrating abuse later in life (Kimball, 2016). As most of the research is generally relational and retrospective, issues surrounding accuracy and bias in recall have been brought into question (Holtzworth-Munroe et al., 1997). Furthermore, shifting away from what children have witnessed, emphasis has been placed on the neglect and maltreatment children have experienced and the increased level of partner violence associated with this (Bevan & Higgins, 2002). This links into attachment theories over learnt behaviours.

Despite considerable evidence for individual areas within the biopsychosocial model, the interaction of the three areas has been found to be insignificant (McKenry et al., 1995). Additional research has focused on the importance of biopsychosocial considerations in DVA cases both from the perspectives of perpetration (Steinert & Whittington, 2013) and impact on victims and children (Posick et al., 2018), rather than the interaction of the three areas within DVA perpetration. Small sample sizes and numerous methodological considerations potentially contribute to this finding. Given the significant findings for each area respectively, this theory requires further exploration through a variety of methodological approaches.

2.2.4 Summary of DVA Theories and Models

This section explored the sociocultural theories and psychological based models which have dominated the literature regarding perpetration of DVA behaviours. Although much support exists for the different approaches, their singular viewpoints has also been noted.

Simultaneously, the overlap in some of the theories and the commonalities across the models within the broader sociocultural framework was also evident.

Houston (2014) put forward Feminist Theory as being the most influential theory in terms of changing laws and bringing about social consequences within law and society. Proponents of Feminist Theory were actively engaged in steering the legal framework towards recognising its evidence base. Their perseverance was effective. The Ecological Framework theory sought to bring the various strands of research areas within the literature under one roof within a more contextual framework. It furthermore potentially provided the required flexibility for accommodating differences both at an individual and society wide level. In relation to models which have sought to understand DVA perpetration, both psychological and ontogenetic approaches have been supported (Ali & Naylor, 2013a; Ali & Naylor, 2013b). In recognition of no one singular cause, the Biopsychosocial model worked towards combining these areas.

The most pertinent issue surrounding existing theories and models concern the predominantly Caucasian and US based samples within the research. Both perpetrator treatment programmes and support programmes for survivors have been based upon these foundations (Cantos & O'Leary, 2014). The assumption has been that one rule applies to all, yet the literature demonstrated consistency in the heterogeneous nature of DVA within the mainstream population (Cavannaugh & Gelles, 2005). This therefore raises questions regarding differences within specific population groups. Gender role expectations within South Asian communities have been found to influence how DVA is understood and approached (Purkayastha, 2000). Stigma in relation to mental health issues has been found to be prevalent within Muslim communities, and furthermore manifest in ways that are culturally nuanced (Ciftci et al., 2013). Exploring this population group in relation to demographics, mental health, social customs, family structures, gender role expectations expect to yield further differences.

Furthermore, existing theories and models focus heavily on the perpetration of DVA. Whilst victim/survivor perspectives have been required in order to gain this understanding, the perpetration of DVA behaviours have taken precedence. Therefore, the understanding of

factors contributing to DVA perpetration heavily feature in the aforementioned. The voice of the victims/survivors hence have less prominence.

2.3 Limitations within the Literature

The current research in the UK focusses on the Caucasian male. However, a WHO multi country study demonstrated that DVA affected women from all backgrounds (Abramsky et al., 2011). Over 24,000 women were interviewed from countries such as Bangladesh, Japan, Serbia, Thailand, Brazil and Ethiopia amongst others. It was found that risk of IPV increased with alcohol abuse, cohabitation, being of young age, attitudes which endorsed wife beating, having external partners, prior experience of childhood abuse or violence, and having witnessed DVA as a child. The strongest risk manifested when both partners had experience of such risk factors. Protective factors were found to be presence of education to secondary level or higher, having a higher socio-economic status, and being in a formal marriage. Specific research pertaining to Muslim female victim experiences demonstrated the significant role of others, including family and religious leaders (Afrouz et al., 2020). Barriers to accessing services were identified at the family, social and individual level, with accessing of external support being a last resort across UK and international samples. Idriss (2020) identified Muslim female victims as facing a third level of victimisation in the form of barriers posed by religious institutions, namely mosques. He identified this as taking place through male control over the interpretation of religion. This was deemed as causing further DVA conflation through expectations of marital relations being driven by cultural norms via the misapplication of religious guidance. This was in line with Afrouz et al. (2020) who stipulated cultural differences being intertwined with perceptions of DVA. These were found to be guided by patriarchal and traditional cultural norms within both family and social contexts, inclusive of religious leaders. Additional barriers to seeking help included the consideration of family honour, loyalty and reputation within international samples (Andersson et al., 2010; Eisikovits et al., 2008). However, Ayyub (2000) highlighted similar concerns within US samples and Idriss (2020) with UK samples, further to the work of Gill (2004; 2008). Gill (2021) distinguishes considerations relating to honour being in line with both ethnic backgrounds as well as normative cultures and practices within families which intersect with other forms of violence against women. This is distinct to the faith based

understanding. Palacio (2021) refers to the notions of real Islam and cultural Islam, depicting a conflation of the two within the literature. Such nuances are critical to the understanding of DVA and thereby the subsequent interventions. In summary, existing research demonstrates a paucity of understanding in relation to the extended and collective nature of Muslim communities and the subsequent impact this has on DVA manifestations. Furthermore, the role of religion and faith practices and the conflation of religion with culture with its relationships to the perpetuation of DVA in Muslim communities is yet to be clearly ascertained.

White and Satyen (2015) proposed the presence of cross-cultural differences in DVA victimisation and depression levels. Mediating factors were identified as cultural values, whether assistance was sought, coping strategies, racism, and whether they were a wife or partner. The authors called for more research into the implications of such findings across cultures. At present, the majority of the existing research has been carried out in western countries with predominantly Caucasian samples (Walker et al., 2015). In light of this, White et al. (2013) called for the greater need to adopt a community based participatory research method in order to fully understand the issues faced by women within ethnic minority communities. They argued that without knowing what questions to ask, a comprehensive understanding of the specific issues could not be gained. This was in line with previous studies calling for front line staff to have greater cultural awareness training in identifying DVA within ethnic minority groups (Wellock, 2010). Some of the cultural specific issues faced by such communities were identified by Milani et al. (2018) as being related to patriarchy, honour and shame, faith, collectivist and authoritarian cultures, and immigration. These were identified through the experiences of service providers however, understanding these issues from those directly affected by them, including survivors and those perpetrating abuse, become imperative to greater clarity. Day and Gill (2020) also highlighted the importance of front-line services being aware of the implications of intersectionality issues on DVA survivors, and their ability to access support.

The well-established research into typologies has implications when considered in relation to Muslim communities. The level of applicability, particularly within the context of family only violence, can be called into question. Holtzworth-Munroe and Stuart (1994) label family

only violence as being low risk. However, whether they have accounted for the different family structures which exist within various cultures, and the resulting impact, remains in question. The extended nature of Muslim families and the collective nature of communities by extension are relevant to this. The issue of abuse from the in-laws also becomes discounted if family violence is not understood within the cultural perspective (Lee, 2014). UK South Asians, currently in their third generation, have expressed challenges relating to the balance of gender expectations stemming from ethnic and cultural expectations. This is known to directly influence their very definition and experience of DVA (Purkayastha, 2000). Such distinctions therefore become important in the understanding of DVA typologies within Muslim communities.

The role of faith within DVA in Muslim communities is further critical to understand. The current research surrounding the role of faith and spirituality is deeply embedded within the Church, with the terms almost synonymous within the literature. Yet it is known that Muslims view faith as more than a religion, rather embodying it as a complete way of life encompassing all aspects of daily life (Alghafli et al., 2014). This raises the level of its significance.

Proponents of family violence theory and model approaches to understanding DVA have long argued that patriarchy alone cannot be the exclusive factor in DVA perpetration (Fleming et al., 2015; Johnson, 1995; Pinto et al., 2010; Stith et al., 2004). This implies the importance of the wider context. Within Muslim communities, consideration is required regarding how patriarchal values potentially inform gender role expectations. Additional considerations include ethnic cultural traditions and norms, family structures, and the role of faith, all of which have significant influence on DVA interpretations and outcomes (Choi et al., 2016). Fleming et al. (2015) further postulated influences from society, interpersonal and intrapersonal factors, including identity and gender role expectations as a historical influence. Fleming and colleagues further argued the role of norms surrounding masculinity as having been excluded from the discussion. These they put forward as requiring precedence in exploring root influences within DVA. Therefore, by extension, consideration of broader contextual factors for those perpetrating abuse, such as family influences and

faith background, facilitate increased understanding of the pertinent dynamics in the life of that individual. Such insights thereby hold potential to influence intervention outcomes.

The literature surrounding mental health of DVA perpetration points towards potentially earlier intervention points. However, lacking within this literature is whether the same issues apply to Muslim communities and whether there are any additional factors to consider. Mental health is considered a taboo subject within Muslim communities (Ciftci et al., 2013). This is further exacerbated by the lack of cultural competence from mental health providers, where a lack of understanding of the interplay between faith and culture has led to misunderstandings in treatment (Rassool, 2015a). DVA, particularly reporting, has also been considered a taboo subject within Muslim communities (Lee, 2014). The combination of the two implies a more accurate understanding of the reality of these issues within this population group is yet to be ascertained. Service provision being inclusive of faith needs was demonstrated within the Muslim Mental Health Matters report (The Lantern Initiative et al., 2021). It further highlighted the lack of faith and culturally informed services, thereby leaving such needs within UK Muslim communities unrecognised and uncatered for. Furthermore, whilst English law provides flexibility in recognising DVA nuanced behaviours, without adequate cultural competency, missed prosecution opportunities of DVA offences within specific communities become plausible. Westmarland et al. (2014) call for greater academic engagement in relation to innovative practices aimed at the policing of DVA. Such calls become magnified for minority communities.

As is evident, there has been much research into the perpetration of DVA with a need for ongoing research. However, with much of this research being focussed on the Caucasian male, there has to date been the assumption that such findings apply to all. Research advocates the inadequacy of a one size fitting all approach (Cantos & O'Leary, 2014). Furthermore, DVA theories and models predominantly focus on the perpetration of the abuse, with those perpetrating abuse at the centre. Having identified the lack of DVA knowledge relating to Muslim communities, the significance of this PhD research becomes apparent. Furthermore, this research seeks to place the victim/survivor at the core. In developing this knowledge base, the potential for better informed and tailored interventions becomes possible.

Chapter 3: The Muslim Community

3.0 Introduction

Chapter two explored how DVA is understood from a CJS perspective, but also how that translated into lived experience. Chapter two further explored DVA theories and models. It has been established that in relation to Muslim communities, mainstream research findings are assumed to apply to all population groups. Differences, for example relating to culture, have not been taken into account (White & Satyen, 2015).

Islam as a faith translates into various levels of inward belief and outward practices for a Muslim. These have practical implications requiring consideration within this context (Eaton, 2012). Additionally, demographic and generational differences exist within sub-groups of Muslim communities. This has been found to impact the understanding and practice of the faith and thereby understanding of DVA (Qureshi et al., 2014).

Chapter three seeks to explore this diversity within Muslim communities. This will be undertaken in relation to the changing dynamics of population demographics. Nuances between cultural practices and faith-based practices will also be explored. Implications of structural changes at a community and family level over time will also be considered. Understanding the context within which DVA takes places, the historical trajectory, and the resulting impact upon DVA behaviours, understanding and interventions is critical. Without correct contextual knowledge, the potential for appropriate interventions becomes limited. Hence understanding Muslim communities is explored singularly within this chapter rather than in combination with DVA manifestations presented within Chapter 4.

3.1 Muslim Communities in the UK

Although the presence of Muslims in the UK can be dated back to the early 17th century, the most significant migration occurred post war, during the 1950s and 1960s when UK labour needs arose (Weller & Cheruvallil-Contractor, 2015). Present day Muslims are in their third generation with marked differences visible across these generations. This is particularly so in respect to identity and attitudes towards education (Ijaz & Abbas, 2010).

The 2011 census identified 2.71 million UK Muslims (4.8% of the UK population), a rise from 1.55million in 2001 (ONS Census, 2011). This population group have a younger mean age of

25 in comparison to 40 for the general population. This has further implications for differences across generations. It can be argued that the UK Muslim population is not one entity; rather they consist of numerous sub-groups across many facets. Within the 2011 census 68% identified as Asian, 32% identified as non-Asian and 8% identified as white (MBC, 2015). Within each of these three broad ethnic categories, further diversity can be expected, including in languages spoken, cultural customs, family structures, and understanding and practice of Islam. The five pillars of Islam do not necessitate that Muslims need to be one homogenous group. Rather the Qur'an states the deliberate nature of diversity for the purposes of mutual learning and growth², whilst maintaining core belief in One God and a final Prophet. This encouragement in diversity is important when considering interventions.

Research regarding the Muslim community is minimal, however ongoing initiatives remain in continuous development. The Muslim Council of Britain (MCB) report (2015) is one of the first national attempts at providing demographics relating to the UK Muslim population. From this report, based on the 2011 census, demographics play a central role in the reflection of factors which build identity. For instance, 47% of UK Muslims have been born in the UK, with nearly 1 in 3 members of minority communities being Muslim. They are however only 1 in 20 of the overall population. This will have direct implications for what the third-generation view as being integral to their identity in comparison to the first generation.

The socio-economic indicators for the Muslim population are generally lower than the rest of the population. This is of particular concern in relation to DVA as lower socio-economic status has generally been linked to higher rates of violence including DVA (Costa et al., 2016). These indicators have implications for factors such as healthcare, education and employment access, clearly reflected in the demographic information. The index of multiple deprivation measure showed that from 2001 to 2011 there was a 10% increase (46%) of the number of Muslims living in 10% of the most deprived local districts. Of these, 28% resided

_

² 'O mankind, indeed We have created you from male and female and made you peoples and tribes that you may know one another. Indeed, the most noble of you in the sight of Allah is the most righteous of you. Indeed Allah is Knowing and Acquainted.' (Qur'an, Chapter 49, verse 13, Saheeh International Translation).

in social housing. In comparison, only 1.7% lived in the least deprived areas. The concentration of Muslims can be seen in areas such as Greater London, the West Midlands, the Northwest, Yorkshire and Humberside, where 76% live. However, the report highlights that despite this, there exists evidence for wider resettlement and less residential segregation when moving beyond inner-city areas. In relation to economic activity, whereas 34.9% of the UK population were in full-time employment, this was only 19.8% for the Muslim population. The gap is marginally lower for unemployment rates with 4.0% in the general population in comparison to 7.2% for the Muslim population. Evidence of strong entrepreneurial skills was identified with self-employment levels of 9.7%, being close to the national 9.3%. Education levels on the whole were also seen to be improving. Between 2001 and 2011 levels of no qualifications went down from 39% to 26% within the Muslim population. Within the national population, 27% were classified as having qualifications at degree level or above. For the Muslim community this figure stood at 24%. This raises questions in relation to if attainment levels are similar, why this is not being reflected in other areas such as full time employment.

Narrowing down further into Muslim households, differences as well as similarities to the wider UK population were evident. Muslim married households were 35% in comparison to 15% for the general population. This the report stated reflected the younger age bands of the Muslim population and the faith values which promote marriage and discourage co-habitation. Despite this, the changing status of the family structure is also evident. Single parent families inclusive of dependent children were at 77,000. Traditionally Muslim communities were known to be more collective in nature (Halstead, 2004) although further change is evident here with 135,000 one person households being noted.

The collective nature of communities is however still evident. Within the UK population 6% were classified as either looking after the home or family in comparison to 18% of Muslim women aged 16-74. Amidst the younger generation however, increasing numbers of nuclear families are setting up smaller households, reflecting decreased family sizes and changes within living arrangements (MCB, 2015). However, the sense of a collective community ethos remains evident and directly influences how DVA is perceived and addressed within communities (Choi et al., 2016).

3.2 Understanding Muslims within the Context of Islam

In order to understand what it means to be a Muslim, the definition of Islam must first be considered. Both the word Islam and Muslim share three root letters in the Arabic language, seen, laam and meem. The closest English counterparts for these could be said to be s, I and m. These form the verb salima which means to be safe or secure, usually understood in the context of safety from harm. The verbal noun of these root letters is aslama or sallama which means to submit or surrender oneself (Wehr, 1979). Hence to be considered a Muslim one must submit themselves to the teachings of God which come in the form of the Qur'an and Sunnah³. By implication, this submission means removing oneself from all that harms the belief and worship of One God. By its very definition, Islam as a faith means that it encompasses all aspects of the life of an individual as opposed to being restricted to certain acts of worship (Eaton, 2012). Hence literature reflects Muslims viewing faith as a complete way of life encompassing all aspects of everyday life, devoid of purely ritualistic worship (Alghafli et al., 2014). This is important in relation to relationships and families being viewed as integral to a life reflective of the faith.

This is further reflected within this way of life being considered on three levels: intrapersonal, between an individual and all other human beings⁴, and between an individual and God (Eaton, 2000). Hence when an individual is eating healthy, looking after themselves and ensuring their physical and spiritual needs are being met, they are considered to be submitting to God (Khan, 2016). This is important in relation to interventions with victims/survivors. Equally, when a Muslim adopts the guidance within the Qur'an, whether that is looking after their family or refraining from harming others, they are submitting to God (Eaton, 2012). From this stems the notion of being a brotherhood⁵ or a family and presents the idea of unity. The foundations of this unity stem in supporting one

_

³ Saying and actions of the Prophet Muhammad (pbuh).

⁴ By extension this also means all other creations including everything that lives on the earth and the earth itself.

⁵ Generic term used interchangeably with family, to denote Muslims as being one family.

another towards good and advising one another against wrongdoing⁶. These concepts form the foundations of individual and collective wellbeing and become important for understanding DVA within cultural parameters.

In light of this, Islam teaches that being a Muslim is all encompassing and surpasses languages, nationalities and ethnic cultures. Humanity is thereby considered to be central with ultimate accountability being with God⁷.

3.3 Muslim Communities and the Intersection with Cultural identity

Cultural psychology and the corresponding relationship this has in shaping thoughts, emotions and behaviours within different communities has been a more recent endeavour within the field of psychology. To date, the prominent view holds that cultures can be divided into western individualistic societies and eastern collective societies (Triandis, 1996). Whilst Triandis argued this as an oversimplification of nuances within cultures, it provided some broad initial guidelines for the novice. Personal independent decision-making and choice have often been associated with western cultures. In contrast, eastern societies have often been associated with more collective, interdependent decision-making processes, taking into account wider society and the community in which one operates (Triandis, 2001).

Triandis (1996) postulated more of a continuum between the individualistic and collective cultures and further argued accounting for psychological cultural differences. This is of particular relevance given that over 70% of the world's population live in non–Western cultures (Henrich et al., 2010; Triandis, 1996). Henrich et al. (2010) stated that despite this, most psychological theories have been developed in the west and collectively assumed to be universal. They propose that most of the world's population do not fall into the WEIRD category dominated within the field of psychological research. WEIRD being western,

⁶ 'The believing men and believing women are allies of one another. They enjoin what is right and forbid what is wrong and establish prayer and give zakah and obey Allah and His Messenger. Those - Allah will have mercy upon them. Indeed, Allah is Exalted in Might and Wise.' (Qur'an, Chapter 9, verse 71, Saheeh International Translation).

⁷ Muslims believe that there is an eternal afterlife where everyone will be held to account for their deeds done in the world by God alone.

educated, industrialised, rich and democratic. Hence, they caution the assumed broad representation. Within research on positive psychological interventions alone, randomised control trials on WEIRD population groups accounted for 78.2% of all studies (Hendriks et al., 2019). The critical nature of understanding DVA specifically within its cultural context is put forward through meta-analysis (Mallory et al., 2016). Within this the universal applicability of western theories is questioned through comparison of collectivist and individualist studies.

In line with the continuum perspective, Gregg (2007) presented individuals as adopting a set of identities within which they interchange, influenced by the wider environmental and geographical context. Evidence for this was explored with four diverse Muslim narratives in Southern Morocco. The significance of this adjustment lay in how individuals navigated between the traditional Islamic upbringing they were raised within, in contrast to the demands of modern everyday western lifestyles. Although theories cannot be built solely upon such a small sample, the method can provide strong foundations upon which wider theories on culture and identity can be further explored. This is particularly so for Muslims living and growing up in the West, but with Eastern heritage and therefore requiring a careful navigation of their ethnic cultural identity alongside the duality of their faith identity and national identity.

The accepted universality of western psychological theories appears contradictory to the diversity present within the UK Muslim communities. This is reflected in differences in food, dress, language, faith interpretations and attitudes from a small sample of 25 Muslim families in Scotland (Seith, 2013). Furthermore, young Muslims were found to negotiate their identities through different environments. Adjustments were made as required, based upon the cultural understanding of those being interacted with. This potentially aligns with the concept of having a set of identities as proposed by Gregg (2007). Such concepts raise questions regarding how different communities operate, and how deeper identity issues are negotiated and formed according to contexts and life span.

3.4 Understanding Muslim Families

The family unit being the cornerstone of a balanced, healthy and well-functioning society is understood to be a core foundation of Islam and Muslims (Dhami & Sheikh, 2000). This the

authors remark is in direct contrast to the underpinnings of a society based on individualism. Muslim families living with three generations within one household is not uncommon, although a gradual shift in younger couples opting for a nuclear living arrangement is evident (MCB, 2015). Dhami and Sheikh (2000) pointed out that the younger generation however, were not accustomed to the advantages of living within an extended family household. This they found to be both advantageous and harmful. Within a DVA context, wider family endorsement of DVA behaviours proved potentially problematic. Equally, opposition of DVA behaviours by wider family networks provided avenues for support. Dhami and Sheikh (2000) drew attention to the need for culturally sensitive services for meeting the needs of clients, whatever the service may be.

Bourdieu's (1998) theory of family and cultural capital put forward the idea of social capital being passed down the generations through family and education. Franceschelli and O'Brien (2014) added a further category referred to as Islamic Capital. In line with Islam being all encompassing to everyday life (Otters, 2012), qualitative findings with 15 South Asian Muslim families were used to exemplify how parents utilise faith-based resources within their parenting. Examples included the drive for excelling. This study illustrated several problematic areas within current psychological research. Firstly, Franceschelli and O'Brien (2014) interpreted this use of Islam as being a form of control over children without having placed their findings within the cultural context. Furthermore, the data itself demonstrated parental control within the context of ethnic cultural expectations being confused with faith-based teachings. This was overlooked by the authors yet the young people who participated in the research clearly distinguished a difference between faith and ethnic cultural normative behaviours. The study also found that young people in particular viewed faith as transcending national and ethnic identity and further viewed the combination of faith and ethnicity as contributing to the understanding of traditional gender roles. Hence Islamic Capital was interpreted as a means of social control in raising children, differing from the nuanced perspectives provided by the participants themselves.

This signifies the importance of understanding the nuanced underpinnings of the Muslim family and how they can vary according to ethnicities. This is particularly important within research and applies more broadly to the topic of decolonisation within academia. In

relation to South-Asians, Becher (2008) stated a clear negotiating process occurring between the opportunities and challenges of British society, whilst simultaneously holding onto faith-based traditions and practices. As the UK demographics is experiencing a current period of change, the wider literature regarding different ethnic groups remains work in progress. Data surrounding the longer standing and majority group of South-Asians within the UK Muslim population is more widely available than for other groups. Hence the need for ongoing research with specific population groups.

The idea of a careful balance being required, rather than the label of segregation, was touched upon by Iqbal and Gombolok (2018). This related to Muslim communities in particular being aware of the security of their children. A higher level of protectiveness over associating with only known individuals and families was demonstrated. Furthermore, a significant relationship between strong ethnic identity, parental stress levels, and children reported as having greater difficulties was identified. Though the authors struggled to name potential causes to this, one potential source of explanation may rest with the negotiation of British culture to faith-based identity outlined by Bechner (2008). This can be further coupled with the reported experiences of young people regarding a conflict between ethnic culture, to faith principles as found within Franceschelli and O'Brien's (2014) study. These concepts thus begin to resonate with the idea of negotiating a set of identities put forward by Gregg (2007). How such identities are developed and navigated requires due consideration in relation to the understanding and addressing of DVA.

3.5 Muslims within the Education System

Educational attainment demonstrated gradual emerging changes. In 1999 then Prime Minister, Tony Blair, pledged 50% of all young people would go to university by the time they were 30. By 2001-2002, 38% of the target had been reached for White young people, whilst for all other ethnic minority groups combined, it exceeded at 56% (Modood, 2006). Of note was Pakistani's being at 49% whilst Bangladeshi's were at 39%. Yet Pakistani families have the lowest parental education attainment levels, the largest family sizes, and highest unemployment rate for mothers (Iqbal & Golombok, 2018). These factors, the authors noted, have often been associated with the presence of more complex behavioural issues.

A converging pattern within economic indicators for ethnic minorities and the mainstream population has been noted to be occurring. This was found to be not only at the level of education, but also in regard to female employment, marriage patterns, and fertility rates (Georgiadis & Manning, 2011).

These changes were further exemplified in education attainment levels of Muslim and Christian White-British males and females. Progression was followed from the UK National Pupil database, from key stage 2 through to attending a Russell Group University. The results highlighted that not only were the Muslim girls outperforming the boys, but they were also achieving a comparatively similar level to their Christian White-British counterparts (Khattab & Modood, 2018). The study identified the significant role of individual expectations as a contributory factor. Parental expectations were deemed to play a less significant role at later stages of education, although the authors noted a possible priming effect at a younger age.

Khattab and Modood (2018) put forward the high educational attainment of Muslim females potentially being attributed to two factors. Firstly, was the need for developing a robust faith-based identity within their communities. This was crucial to being able to navigate through family and community contextual barriers. The second they presented as the double workplace discrimination challenges Muslim women faced; being Muslim and being from a minority group. Evidence of disparities resulting from intersectionality was further asserted by Tariq and Sayid (2018).

Integral to Islam is that seeking knowledge (i.e., education) is viewed as being incumbent upon every male and female⁸. Knowledge within Islam is defined as that which is beneficial to humans, without specifically restricted to faith-based knowledge (Lamrabet, 2016). South-Asian women have been found to utilise this faith-based resource as a means of gaining support from more traditional parents within their own educational pursuits (Modood, 2006).

50

⁸ "The seeking of knowledge is obligatory for every Muslim." - Al-Tirmidhi, Hadeeth 74.

The higher attainment levels of Muslim females, in comparison to their male counterparts signifies a shift in the structure of Muslim families and potential gender roles. This is particularly so in comparison to the first generation of UK Muslims. This was of note within the findings of Georgiadis and Manning (2011). The implications of this across the three generations and impact at a community, family, and individual identity level require further exploration.

3.6 Muslims and Gender Roles

The issue of gender roles is significant, particularly within the context of faith, culture, and society at large. Muslim women are often associated with larger family sizes. Though historically evident, Georgiadis and Manning (2011) note the generational decreasing family sizes more in line with the mainstream population. From a faith perspective physically bearing children is seen as primarily within the female remit. Religious guidance touches upon weaning children up to the age of two years (Altalib et al., 2013) but does not specify this as the mother's role. Within Arab society, children were often sent to wet nurses outside of the main cities in order to build the immune system of the child (Altalib et al., 2013).

With the advent of Islam, women were granted rights of inheritance, full participation in society, were entitled to be supported by their spouses and not required to support the family financially if they chose not to (Lamrabet, 2016). Furthermore, upon marriage women were not required to take on the surname of their spouse, in recognition of their family heritage. This was further indicative of marriage not being deemed transactional. This was at a time when prior to Islam the Pagan Arabs would discuss whether women had souls and were marrying an unlimited number of women as desired. Female infanticide was also common practice, Giladi (1992) traced this back to prehistoric times wherein birth control was not understood. Despite such religious freedoms Lamrabet (2016) and Ayubi (2019) demonstrate that male patriarchy has since stifled the religious freedoms of women. Lamrabet (2019) further elucidated on classical works being written for a male audience, the female having been relegated to the domestic sphere. With the public acknowledgement of women being disregarded, women became invisible members of society.

In stark contrast to faith-based principles of gender equity, ethnic cultural and patriarchal practices, have all had significant influence on the traditional roles allocated to men and women. Within south-Asian families men were seen as the chief of the family, the ones who inherited and who carried the family name forward (Ballard, 1982). Women on the other hand were allocated domestic roles based on child rearing responsibilities and were often required to navigate their way through the maze of family members. This would commonly extend to parents' in-laws, sister and brother in-laws and their children. Ballard noted that mother in-laws in particular were seen as the overriding household member who had the most power, into which daughter in-laws would be expected to conform. Gill (2004) argued that therefore, the context of DVA for South-Asian women, the role of ethnic culture, and family power dynamics beyond that of the spouse is significant. Evidence of increasing instability within marriages, particularly within Pakistani communities has been identified (Qureshi et al., 2014). This they argued as illustrating distancing from more traditional family expectations, particularly relating to younger generations born in and growing up in the UK.

Such demographic and generational differences demonstrate the diversity of ethnic cultures and the intertwining nature between faith and ethnic cultures. These are therefore integral to understanding Muslim communities. Cultural practices though celebrated within Islam, were argued as not taking precedence over faith principles wherein the cultural practice brought harm to the self or others (Kamali, 2002). As such, within the context of DVA, mistreatment of and violence towards the spouse would not be acceptable under Islam (Salahi, 2019) and opposed the very essence of marriage within Islam (Isgandarova, 2018). However, certain ethnic cultural practices including historically British culture, permitted the use of violence against the wife (Stedman, 1917). Isgandarova argued that patriarchal cultural values coupled with traditional interpretations of the Qur'an has resulted in confusion surrounding issues such as DVA. It is known that Muslim males have used faith intertwined with culture for controlling purposes (Macey, 1999). Muslims who adopted a more holistic understanding of faith were argued as having a better understanding of the protection it afforded to women in particular (Alghafli et al., 2014). Thereby the intersection of gender role expectations, ethnic culture, and faith within the context of DVA becomes significant.

Beyond this, western discourses surrounding Muslim women must also be considered. Lamrabet (2016) elucidated on colonialist and orientalist narratives being primarily focused on Muslim women as oppressed, uneducated, and in need of liberation from oppressive Muslim male patriarchy. Kahf (2010) detailed a much more complex trajectory, with subtle acceptance of Muslim cultures over the centuries, alongside the increasing need to rescue Muslim women. Kahf put forward a gradual process of exclusion. Where veils, modest clothing and domestic spheres were common to both European and Muslim women, as European identities shifted so too did the narrative surrounding the oppressiveness of previously shared commonalities (Kahf, 2010). Alongside this, Malik (2016) put forward education in the Muslim world as being based on the principles of developing good humans. Female education was viewed as integral to this, with education commanded by Divine injunction⁹¹⁰. With the advent of colonialism however, not only did the epistemology of education itself change from God-centred to Humanism and later, secularism, this had further complex socio-economic impacts (Malik, 2016). Rahman et al. (2018) detailed how British divide and rule colonial policy resulted in a once united India being divided into three distinct countries. These remain as India, Pakistan, and Bangladesh. With in-fighting and suspicion having been established, a British education system was further introduced. Those who could partake of British education were actively selected, whilst others were excluded. Muslims in particular Rahman et al. (2018) outlined as being primarily excluded on all fronts. The impact on women and education within this was felt to have suffered significant detriment, allowing for patriarchy and cultural normative practices to take precedence. The influence of such historical contexts upon present day Muslims living in the west cannot be overlooked, particularly in relation to DVA. It is not possible however to do justice to this subject matter herein. This is a topic to be considered in its own right.

⁹ 'Read in the name of your Lord Who created. He created man from a clot. Read and your Lord is the Most Honorable. Who taught by the pen. Taught man what he knew not.' (Qur'an, Chapter 96, verses 1-5).

¹⁰ The Messenger of God (pbuh) said, "Seeking knowledge is an obligation upon every Muslim." (Sunan Ibn Mājah 224).

3.7 Understanding Muslim Identity, Health and Wellbeing

Identity within the Muslim population consists of numerous layers. Maranci (2011) presented that the remnants of post-colonialism remain visible in terms of how British South Asian, Pakistani in particular, Muslims were classified into labelled groups by the majority population. Maranci argued that minority groups were required to adopt the ways of the majority group via a process whereby individual identities were forgotten or even eradicated due to being the other. A clear distinction was put forward between what was termed as the Autobiographical self by Damasio (2000) and identity. Identity, Maranci (2011) strongly associated as stemming from within the community to which one belongs. The self however was identified as having clear demarcations from identity within the neurocognitive self and defined as stemming from feelings of belonging and identifying with a certain group. In this case Muslims and / or Islam. The external abidance of religious practices as such Maranci argued, did not automatically make one part of that group. Rather it was the personal identification and feelings associated with belonging to that group which formed part of identity.

This resonated with Muslims reporting faith as being an all-encompassing identity relating to everyday life (Otters, 2012), which could include visible markers such as the hijab or the beard. Levels of practice have often been recorded in terms of whether an individual adopted the five daily prayers regularly or not (Franceschelli & O'Brien, 2014). The significance of the prayers is that after the declaration of faith, they are regarded as the pinnacle of faith and ones' connection to God (al-'Awaayishah, 1995; Eaton, 2012). In considering the identity of Muslims therefore, it is necessary to go back to the belief system upon which such an identity is based and examine the relationship therein.

Historically, the relationship between identity and wellbeing was based on holistic approaches, accounting for spiritual, psychological, and physical aspects of the individual (Rizvi, 1989). The first mental health hospital can be traced back to Cairo in 872 AD and was commissioned by the Egyptian Governor. The most famous hospital however was built in 1283 AD, also in Cairo. Crucially, it was freely accessible to all, had dedicated mental health wards, interventions included a library, guest speakers, social events and extensive green

grounds, and a dedicated hakim¹¹. It furthermore had both a Chapel and a Mosque (Awaad et al., 2020). The inextricable link between identity and wellbeing thereby was depicted within such models of care (Keshavarzi et al., 2020).

Rothman and Coyle (2018) reached a consensus regarding Islamic Psychology as per the two respective fields, noting that psychology formed an inherent part of Islamic traditions and teachings. Their conclusions were drawn from interview data with 18 academic and/or religious experts within the Psychology and Islamic Philosophy or Spirituality fields. From this data the authors derived an Islamic model of the soul, copied here with permission.

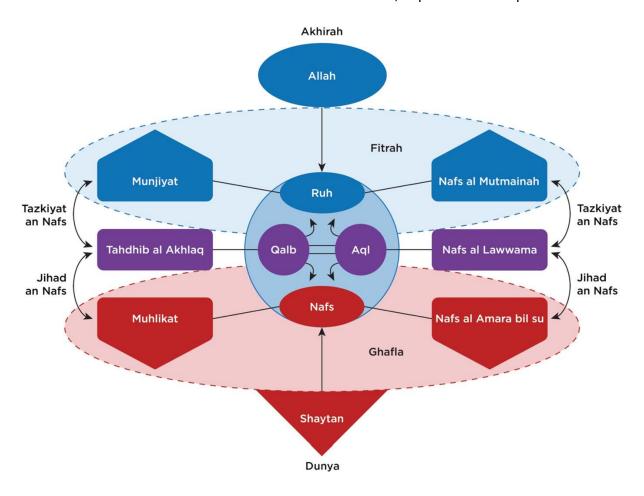


Figure 3 Islamic Model of the Soul (Rothman & Coyle, 2018)

¹¹ All learned individuals were considered hakims, they would often consist of philosophers, medical experts and scientists. Very often they were experts in all of these fields.

The central spiritual component of this model focussed on four primary areas of the soul: qalb (heart), aql (intellect), ruh (spirit) and nafs (lower self). Linguistically qalb means 'to turn'. This was deemed as indicating the potential for the heart to turn towards a higher calling, in this instance God (Allah) and the life in the Hereafter (akhirah). Within Islam, the heart is considered to be the focal point of the soul. In responding to this higher calling, one is said to be exercising the intellect (aql) of the heart and hence the connection illustrated between these two elements. The intellect noted here, with its direct link to the heart, differs vastly from western concepts of intellect and thereby requires understanding within its own epistemological and theological roots. Above all of these is considered the spirit (ruh), a direct imprint of God which resides within each being. Its manifestation has often been referred to as the fitrah; or natural inclination a person has within themselves towards recognising a higher power and calling, and towards doing good. Understanding this is critical to understanding the Muslim identity. It demonstrates the natural potential considered to be inherent within all, in relation to treating others well. The heart being central to this and thereby a potential point of intervention via faith identity.

The soul as the focal point of the model therefore becomes integral to Muslim identity. This is largely unexplored within western psychology. Underpinning the model is what Muslims consider to be the purpose of life, the opportunity to re-align the soul with the higher calling. This process is known as tazkiyah or self-development. The soul within Islam is considered to be of an unseen nature. However, the combination of the heart, intellect, spirit and lower-self and how these fluctuate are considered to be indicators of the psychology and well-being of an individual (Ibn-Taymiyyah, 2010). Whereas within modern western psychology the self is considered to be an immaterial concept, within Islam the self (nafs) is considered a spiritually tangible being present within the human body, but invisible to the human eye (Haeri, 1989). These concepts form the foundation of how every human is understood within Islam. This is thereby considered an integral part of what constitutes deeper levels of Muslim identity and wellbeing as outlined by Rothman and Coyle (2018). Haeri (1989) similarly explored this concept in great detail and identified its roots back to the advent of Islam itself. This indicated towards the importance of DVA interventions being actively inclusive of identity as recognised within the model.

Rothman and Coyle (2018) drew attention to each individual, according to this model, having the potential for internal positive change. These are indicated through the levels on the right and the methods outlined on the left. This applies both in terms of helping victims/survivors to understand that DVA behaviour does not need to be tolerated, and furthermore, providing those perpetrating DVA behaviours with an opportunity towards change. It further applies to challenging acceptance of DVA behaviours within communities. In each case, by framing it within identity parameters that are familiar and known to those concerned, potentially increases their viability.

Although this model focussed on the individual, by default it exists within the context of the wider family, community, and society. Though addressing the process for individual change, this is then assumed to have a ripple effect outward. Hence understanding identity and wellbeing concepts, at both the individual and collective level for Muslim communities, must be done within its own cultural parameters. Without understanding or accommodating these foundations, the Muslim identity is diminished. By default, so too are DVA issues which could otherwise be approached and addressed in a culturally relevant manner. The model further takes the understanding of the human to a deeper level that is not explored within the secular sciences. However, such depth would be considered integral to understanding Muslim identity and holistic wellbeing. Some parallels can be seen with the field of Positive Psychology and the Good Lives Model (Ward & Brown, 2004) relating to rehabilitation work. Thereby within the context of DVA, the application of the Islamic model of the soul in self-transformation would not only be familiar to the Muslim population but, would also be culturally and contextually appropriate.

On this very basis, an Islamic approach to the rehabilitation of imprisoned Muslim males was developed by Awan (2014) and successfully delivered in a high secure UK prison. Empirical evaluation of the programme found positive changes within the lives of Muslim participants. Awan (2014) stressed the importance of collaborative working between the CJS and qualified members of the population group. Critical to this was deemed knowledge and expertise of working in a culturally relevant manner.

3.8 Faith-based Education and the Mudaris System

A further component of understanding DVA within Muslim communities lies within the routes adopted for gaining faith-based knowledge. In line with the discussion above, Muslims are known to adopt ongoing education as a means to maintain their faith-based identity, and for personal holistic development purposes (Shah, 2014). The routes adopted for this may differ however, a common pattern included the traditional Mudaris system which travelled with migration. Shah (2014) distinguished the UK Mudaris system as being twofold. One was described as running in place of full-time secular education with a combination of secular and religious subjects. The second can be compared to an afterschool club whereby children of all ages attend for the purposes of learning how to read Qur'anic Arabic or memorise the Qur'an. These are distinct from the Higher Education Mudaris commonly found in Eastern countries and designed for more advanced faith-based scholarly education (Sabki & Hardaker, 2013).

With the system being predominantly imported from the East (Sidat, 2018), the first generation of UK Imams trained within such institutions and according to their cultural customs. Following the events of 9/11, a public discussion of whether this global system was breeding terrorism came under the spotlight (Buang & Ismail, 2007). Internally pockets of dialogue commenced identifying the need to transform this education system to facilitate young Muslims gaining a more holistic picture of their faith and education as a whole (Buang & Ismail, 2007). This included concerns around the effects of post-colonialism imposition of homogenised education system which disregarded local customs and traditions.

Shah (2014) highlighted how the experiences of Muslims in the UK, particularly in light of the Islamophobia they started to face following the Rushdie affair¹², shaped and pushed forward their needs to maintain their faith-based identity. Since then, the second generation of Imams and community activists have set up more modern establishments. These have been designed to cater to the faith education and identity needs of busy British

¹² Salman Rushdie authored Satanic Verses, which led to the Iranian Government decreeing that he should be killed due to the maligning nature and level of insult he presented of the Prophet Muhammed and Islam. Under a political backdrop which supported this book, Islamophobia arose in the British press and public which led to UK Muslims feeling they were being disrespected based on their faith and began questioning their rights as British Muslims (Shah, 2013).

Muslims within a UK context (Shah, 2012). However, parallel to this, Shah identified that the traditional Mudaris system continued to run and has continued to be an active part of UK Muslim communities. The intersection of this system with faith-based identity and its subsequent impact on the understanding and attitudes towards DVA become important. The significance of this is further magnified when considering traditional foundations of the Mudaris curriculum which has broadly remained unchanged over time (Sidat, 2018).

The impact of this on everyday Muslims becomes relevant when the role of the Imam is explored. Ali et al. (2005) identified that since 9/11, the expectations of Imams from the everyday congregation and community had rapidly expanded within the US. From being one of primarily leadership of the five daily prayers and potentially some teaching duties, the Imam was now being called upon to provide a variety of counselling and support services. This was particularly in relation to dealing with discrimination in various forms, yet Imams were not qualified or trained to execute such roles under their traditional Imam training.

In the context of DVA, direct communication (2016-2018) with numerous Imams has revealed that women in particular will seek assistance from an Imam. This commonly related to mediation and working with abusive spouses, in order to facilitate divorce proceedings. Hence the wider role expectations of Imams continued to exist. Rigid gender roles and cultural expectations of marital obligations have been found to be core reasons regarding why south Asian women will stay in an abusive marriage (Ahmad et al., 2009). Furthermore, many first-generation Imams have been found to hold traditional views in relation to issues surrounding DVA, as per the Mudaris system they have been trained within (Chaudhry, 2013). The power held by Imams within communities thereby becomes significant in how DVA is approached and understood internally.

Within the context of the CJS, Imams within Chaplaincy roles are known to hold greater responsibilities than community-based Imams. These include being an educator, working on personal development, providing religious teaching and guidance, and providing professional duty of care both within the system and in the personal vocational context of their congregation members (Hafiz, 2015). Hafiz called upon this model of Chaplaincy Imamate being more of what is required within the community context, due to the changing

needs of the UK Muslim population mentioned above. The potential for creating change at the grassroots level in relation to DVA is thereby raised.

The inextricable link to the Mudaris system is paramount on two levels. Firstly, regarding how UK Muslims are understood and their needs catered for in a holistic and culturally appropriate manner. Secondly, in respect of how social issues such as DVA are understood and approached internally. In order for Imams to effectively cater to the dynamic needs of their communities and congregations, the Mudaris system must recognise those needs and provide the adequate training required. Geaves (2008) identified this very point and proposed that the effectiveness of this rested upon religious Institutes training Imams by working in collaboration with Higher Education Institutes. This kind of cooperation and partnership Geaves argued would facilitate reciprocal understanding of the specific needs of Muslim communities, whilst also incorporating national standards that would benefit all. The advantage of such an approach has been experienced first-hand through a lecturing post at the Markfield Institute of Higher Education. Teaching both BA and MA Islam and Pastoral care has resulted in having direct teaching opportunities with Imams on contemporary issues. DVA has been one of the subjects covered in depth. Imams reported their previous lack of awareness of the intricacies involved. They informally reported their increased knowledge base, as a result of their academic studies, equipping them to better understand and assist in DVA cases. This demonstrated a potential means towards creating change at a community level.

3.9 Additional Challenges facing the UK Muslim Community

Considering the UK Muslim population in relation to wider societal issues, including at a national and international level, is important to understanding the full context of UK Muslim communities. This extends to UK anti-terror legislation and narratives and how these have impacted UK Muslim communities. Although this topic is beyond the scope of this thesis, it is important to note the direct bearing on UK Muslims. Particularly in respect of how they are perceived, how they themselves navigate their identities within mainstream UK society, and how this then filters down into the individual home.

Abbas (2007) highlighted four areas of significance in this regard. Firstly, was the altered perceptions between Muslims and non-Muslims predominantly due to media influences,

resulting in the Muslim community being viewed as the outgroup. Secondly, legal rhetoric calling for better integration of Muslims within mainstream UK society was deemed as further emphasising this. This was a significant shift from the positive language used around embracing cultural and racial diversity previously adopted within the UK (Abbas, 2004). The strong focus on religion as being the cause of division was noted. The conflicting demands placed on UK Muslim communities Abbas identified as being the third crucial factor in how Muslims negotiated their identities. They were required to demonstrate their Britishness and loyalty through the adoption of secular and liberal societal norms, yet they were also held accountable for international extremist views and actions. The final external factor identified by Abbas was the increasing presence of far-right ideologies and aggression directed at Muslim communities as one homogenous group. Abbas argued these factors resulted in Muslim communities retreating rather than taking up the banner of externally enforced measures of community cohesion.

Such narratives regarding Muslim communities motivated the study conducted by Georgiadis and Manning (2011). Their findings demonstrated fears around segregation and division instigated by Muslim communities to be unfounded. This was further exemplified in the MCB Report (2015). The MCB reported on average, ethnic minority groups were less than 10% of the residents in their respective districts, whereas White British residents consisted of 85% on average. This refuted the ghetto claims. A further example was noted in regard to the contribution of Muslims to the labour market and economy. Small to medium business enterprises were identified as being 33.6% Muslim owned, hence creating over 70,000 jobs. Academic performance as discussed also highlighted similar levels to the mainstream population, including in attending Russell group universities, although Muslim girls were out-performing Muslim boys (Khattab & Modood, 2018). However, such data Abbas argued did not remove the alienation caused by the wider rhetoric surrounding the UK Muslim population. This lends credence to theories regarding the negotiation of a set of identities (Gregg, 2007) as a form of negotiating the isolation caused through such labelling.

This was further exemplified in developments within anti-Muslim sentiments. The UK government was called upon to formally recognise the term Islamophobia as a type of racism targeted at perceived / Muslimness (Allen, 2018). The author drew attention to the

array of debate surrounding the appropriateness of the term. Some being politically based, and others wanting more focus on the people under target in a manner which every day individuals could understand, rather than being ascribed to the faith. Sadek (2017) asserted Islamophobia as being less regarding Islam and more focused on race, ethnicity, culture and differences in socio-economic levels. However, Islamophobic crimes against Muslims where faith has been known to be a factor, have been reported by the Metropolitan Police to be on the increase, with a 13.3% rise between 2015/16 and 2016/17 (1,264) (Mend, 2019). The Home Office (2019) reported an increase in hate crime after terrorist attacks such as the Manchester Arena bombing in 2017, however, they do not specify the faith of victims. Coupled with this has been the visible labelling of Muslims as being a security threat by politicians and the media alike, particularly after 9/11, and 7/7 bombings in London (Abbas, 2004; Abbas, 2007). Field (2007) ascribed this as having a direct influence on the increased hostility of non-Muslim populations towards Muslims. Qualitative interviews with a broad sample of Muslims and non-Muslims in the North Yorkshire area following 7/7, found that Islam and mosques were associated with breeding terrorism by non-Muslims. In turn Muslims reported feelings of being labelled as the other and being associated with extremists (Hussain & Bagguley, 2012). International prominent attacks against Muslims also further reflect increase hostilities. In 2019, the New Zealand Christchurch attacks on Muslim worshippers during Friday prayers left 51 dead and many more injured (BBC, 2020). In June 2021, four members of a family were deliberately run over and killed in Ontaria, Canada, due to their visible Muslim identity (BBC, 2021). In 2017 six congregation members were gunned down in Quebec Mosque and forty more injured (Reuters, 2019). Given the collective nature of Muslim communities, the international impact of such atrocities is raised.

The importance of this came to light in how Muslims perceived their own identity as Muslims coming under attack. Consequentially, this impacted both how they viewed themselves and interacted with wider society (Abbas, 2004; Abbas, 2007; Hussain & Bagguley, 2012). This exuded symbolic interaction whereby individuals internalised how others saw them (Mead, 1934). Social identity theory (Tajfel & Turner, 1979) would argue that Muslims have become part of the 'outgroup', with animosity and hostility expressed by

the 'ingroup' or sections of the majority population. The theory proposed that this leads to intergroup comparisons which hold the potential to lead to conflict between groups, as was evidenced by the findings of Hussain and Bagguley (2012). The idea of individuals being interconnected within the collective was put forward by Norbert Elias (Crow & Laidlaw, 2019). In his groundbreaking work The Established and The Outsiders, Elias identified adjustment being required by both the established and those new to the city, in a rapidly changing demographic study in Leicester, UK. Elias noted the established community had access to increased social resources in comparison to those new to the city. Such resources included established social networks, a sense of belonging, and thereby a sense of ownership. Elias asserted that in order to both retain and assert their power, established groups used various methods to denigrate the other whilst idealising their own sense of identity. At the time of Elias, community gossip was employed to achieve this. In 2021, the media and political narratives could be stipulated as alternatives. Being in their third generation, it could be argued that present day UK Muslim communities now have access to such social resources. However, as demonstrated within the literature, these very resources were often and increasingly challenged by the mainstream, with British media playing a significant role within this (Bleiche et al., 2015; Moore et al., 2008). In keeping with Elias and opposing Tajfel and Turner, the argument that the minority were always viewed as the outsiders and therefore never accepted as part of the established ingroup, holds ground. Furthermore, attacks on Muslim communities take this segregation to a new level and scale. Ali and Awaad (2019) note the detrimental mental health impacts of Islamophobia, stereotypes, and discrimination on US Muslims.

Sadek (2017) argued that Islamophobia in its broadest application, resulted in shame causing the collapse of Muslim identities. Navigation of identities is evident as per the series of identities put forward by Gregg (2007) however, whether or not it can be attributed to a collapse of a complete identity requires further exploration. Overlap with a potential fight or flight response mechanism may also need to be considered within this. How issues such as DVA are then addressed become paramount. Given the wider context of external issues facing the UK Muslim community, the perceived repercussions of drawing further negative attention particularly in relation to all forms of violence and hostility, becomes relevant.

Hence drawing parallels with the findings of Abbas, was the pressure to be seen to be distancing oneself from anything associated with violent ideologies (2007).

3.10 Summary

The literature demonstrated that UK Muslim communities are not one homogenous group. There has been a long historical trajectory leading to the current position of UK Muslims. The literature demonstrated the range of social issues Muslim communities have been contending. Clear differences across generations have been emerging, in terms of family structures, nature of households, and education and attainment levels. Whilst Muslim communities have undergone internal changes, they simultaneously experienced increased external pressures. Within all of this, faith as a powerful source of identification and all that it brings with it such as collectivism, shared goals, community, and identity, provided valuable resources for continued internal growth. Ensuring such growth is within the identity parameters of Muslim communities, as opposed to externally enforced, is a distinct need. Hence, understanding Muslim communities from their frames of reference is critical to working effectively to alleviate DVA related issues. This includes commencing from a foundation which seeks to understand DVA as per the lived reality within UK Muslim communities. This has been explored within this chapter and will be explored further in specific relation to DVA manifestation within the next chapter.

Chapter 4: Manifestations of Domestic Violence and Abuse within the UK Muslim Population

4.0 Introduction

Chapter Two explored perspectives of DVA within the mainstream UK population, definitions, approaches and legal perspectives. Chapter three went on to explore Muslim communities specifically, their demographics and social contexts. The nuances and historical trajectories were highlighted as critical to accurate understanding and therefore appropriateness of interventions. Following on from this, chapter 4 seeks to examine how manifestations of DVA behaviours may be influenced by faith and/or cultural practices within the UK Muslim population.

It is known that Muslims come from a diverse range of ethnic backgrounds, each of these bringing with it various nuanced cultures and norms (Seith, 2013). With faith playing a central role in the lives of Muslims (Otters, 2012) the importance of understanding how DVA may manifest within specific cultures becomes relevant. Manifestations of DVA behaviours are explored herein in relation to physical abuse, emotional and psychological abuse, sexual abuse, financial abuse, coercive control, and spiritual abuse respectively, within the UK Muslim population context.

4.1 Physical Abuse

Physical abuse being the most visible form of DVA, is easier to evidence and convict (CPS Guidelines, 2020). Much of the UK law, historically and to the present day, emphasises this category of abuse.

Within the Muslim population physical violence has been a much-contested subject (Chaudhry, 2013). Chaudhry demonstrated extensive scholarly discussions regarding specific verses of the Qur'an¹³. She stipulated that these verses have traditionally been translated as

¹³ Predominantly Qur'an Chapter 4, verse 34 – "Men are in charge of women by [right of] what Allah has given one over the other and what they spend [for maintenance] from their wealth. So righteous women are devoutly obedient, guarding in [the husband's] absence what Allah would have them guard. But those [wives]

indicating the permissibility of using violence against the wife. In summary, the contention lay with scholars arguing for or against hitting one's wife, and whether this was permissible or not under religious law. Chaudhry (2013) demonstrated varied differences in scholarly understanding and definitions of specific terminology. Whilst not investigating semantics here due to the theological complexities involved, it is worth noting that this has been a long-standing area of contention within religious discourse. What is evident within Chaudhry's extensive work, is the highly patriarchal nature of society at the time of such interpretations, the removal of women's voices from the public sphere, and indeed the removal of women themselves from public life. Similar findings were further elaborated on by Al-Hibri (2000). This raises questions relating to what extent faith was being represented in such interpretations, and to what extent cultural normative practices were being used to uphold established norms within communities. These were the very questions raised by Ayubi (2019) in her comprehensive work relating to morality becoming a gendered issue through religious male scholarly interpretations. Al-Hibri (2000) stipulated this to have occurred through scholarly jurisprudence being based upon the prevailing patriarchal nature of societies at their time. This, Al-Hibri argued, has remained the case since.

Such discussions are an area of classical Qur'anic and theological interpretation which is beyond the scope of this thesis and its author. However, certain key points require consideration due the purported overlap with DVA. The relevance of the verse being discussed herein relates to the understanding at the level of the general population. Within some segments of Muslim communities, the verse has been adopted as religious sanctification for the use of physical violence against the wife (personal observation). Such perspectives are visible in the extensive treatise carried out by Chaudhry (2013) wherein the issue was explored according to interpretations passed down through numerous scholarly generations. Historically this has often been within strong patriarchal contexts. An association whether intentional or not, has been created between the historical interpretation of the verse by scholars denoting to strike the wife, and the consenting of

from whom you fear arrogance - [first] advise them; [then if they persist], forsake them in bed; and [finally], strike them. But if they obey you [once more], seek no means against them. Indeed, Allah is ever Exalted and Grand". [Saheeh International Translation]

DVA behaviours. This misunderstanding amongst the everyday Muslim was also presented by Isgandarova (2018). It therefore becomes imperative to note that the issue of physical violence cannot be separated out from theological based understanding, where theology may be used to justify physical abuse within Muslim communities.

In his translation of the Qur'an Salahi (2019) proposed that the common translation of beating in Chapter 4, verse 34 defied the logical sequence mentioned in the Qur'anic verse when dealing with marital conflict. Furthermore, the author pointed towards seventeen different Qur'anic meanings for the Arabic word commonly translated as strike or hit/beat, with the most prominent being to separate. He therefore concluded that physical abuse negated the ethos of marriage and the example set by the Prophet Muhammad (pbuh) and further, contradicted the recommended conflict resolution steps put forward in the verse itself. Critical to this was that the resolution steps discussed were specific to the context of conflict resolution. This was thereby distinct from the issue of DVA. Lending support to this has been the religious guidelines in relation to divorce outlined in chapter 65 (Talaq: Divorce) of the Qur'an. The stipulations of kindness, compassion and care within divorce proceedings are firmly established through every step of the process within this chapter. Hammer (2019) expanded upon US Muslims reflecting that if this was the case relating to divorce, then how could it be that within marriage itself, abuse would be permitted. Abugideiri (2012) further outlined the extensive Divine prohibition against abuse and oppression within the Qur'an.

In exploring psychotherapeutic and theological issues relating to DVA behaviours, Isgandarova (2018) highlighted the discrepancies between traditional scholarly interpretations, and the harm caused by DVA behaviours. DVA behaviours she outlined as being in stark contrast to the objectives of marriage within Islam. She advocated the need for culturally sensitive support services, both internal and external to Muslim communities, in order to accommodate such intricacies. In addressing the topic of marital discord Tofte (2011) outlined the sunnah procedures for working towards reconciliation, concluding that when all else fails divorce can be obligatory or recommended in some cases. He made no mention of the lightly striking interpretation deliberated by others. DVA being contrary to Islamic principles and the misconstruing of this verse as referencing DVA is further

exemplified by the sunnah (Salahi, 2019). The sunnah consists of the speech and actions of the Prophet Muhammad (pbuh), whereby heavy emphasis is placed on good treatment of one's spouse consistently¹⁴. This was further endorsed in his own marital conduct. The Qur'an further emphasised the nature of marriage as being a place of refuge and tranquility¹⁵. Such Qur'anic verses and traditions from the sunnah are numerous and directly conflict with DVA behaviours. Collectively, according to theological approaches to interpretation through deduction, it can be concluded that if violence is not permitted within conflict resolution, and if the purposes of marriage include peace and harmony, then DVA would be contrary to such an ethos. This is significant when considering interventions with both victims/survivors and those perpetrating DVA behaviours.

Conflating factors potentially relate to ethnic cultural practices. Inequality between men and women is still applicable to much of society (Wilson, 2011). This has been further compounded by traditional patriarchal views towards women within certain ethnic cultures (Choi et al., 2016). The South Asian population in particular, 60% of UK Muslims being South Asian (MCB, 2011), have been known to hold very traditional views surrounding gender roles and expectations (Khan & Hussain, 2008). Palacio (2021) highlights narratives of cultural Islam versus what has been termed real Islam by Muslim South-Asian survivors. Where cultural Islam was identified as being in conflation with notions surrounding honour and shame reinforcing DVA behaviours, the real Islam was deemed as a being a solution to the issue of DVA. Arab women were often viewed as representing the honour and reputation of a family, therefore any perceived socially inappropriate conduct has been known to result in honour-based violence (HBV) (Abu-Ras, 2007). Concepts of honour held within the South Asian community can manifest in extreme control through not only the husband, but also by his wider family (Taher & Jamaluddin, 2015). The objective of this has been outlined as maintaining one's social standing and position within the community. This

_

¹⁴ "The best of you is the one who is best towards his wife, and I am the best towards my wives." (Tirmidhi, 3895).

¹⁵ 'And of his signs is that He created for you from yourselves mates that you may find tranquility in them; and He placed between you affection and mercy. Indeed in that are signs for a people who reflect.' (Qur'an Chapter 30, verse 21).

occurred through control of the female members of the family, particularly the daughter in law and daughter. Whilst HBV is not being included within the DVA parameters being explored herein, due to the underlying differences in the nature and occurrence, similarities in how extended members of families and communities can be involved within DVA do require consideration.

A clear conflict and source of confusion between faith principles, interpretation of religious text, and ethnic cultural practices is presented within the literature. The outcomes hold potential for significant impact on the daily lives of women in particular, as outlined above.

4.2 Emotional and Psychological Abuse

Emotional and psychological abuse is often more difficult to identify (Bancroft, 2002). In Chapter Two the relationship of this type of abuse to stalking and harassment behaviours was presented. Stalking and harassment, through technology is not uncommon, with an increase in cybercrimes of this nature expected in future (Paat & Markham, 2021). In consideration of a close-knit community where community ties may still be maintained without strictly relying on technology, stalking and harassment behaviours become significant. In particular, physical locality may potentially prevent an individual from being able to leave their own home. Leaving in such cases may risk movements being monitored and reported back to the spouse perpetrating the abuse (Payton, 2011). Where there is greater familiarity within communities, anonymity becomes restricted. Hence, if victims are able to leave, then safety is potentially jeopardised whereby no familiar place or the communities within them, are safe. Taylor-Dunn et al. (2017) reported stalking as all pervasive. Within close-knit communities, this becomes all the more paramount.

The intertwining of faith as part of emotional and psychological abuse is a sensitive area presenting complex issues in reporting. Particularly within a system not fully conversant of the impact of spiritual based abuse (Isgandarova, 2018). In previous work with survivors, being told that that they were "bad Muslims" and would be "cursed for being disobedient" was often reported (personal communication, 2013). The negative impact intensified for those who were either reverts or not very learned about their faith. Such psychological and emotional abuse is difficult to prove and potentially more complex to report. Yet the

negative impact can be long lasting. This was illustrated by one survivor reporting using specialist mainstream services for fifteen years, yet never having her faith-based needs addressed. She reported this as hindering her recovery process (personal communication, 2013). Spiritual abuse will be explored further in section 4.6.

4.3 Sexual Abuse

Shame in relation to sexual abuse has been found with native Pakistani women (Hussain & Khan, 2008), Muslim women in New Zealand (Begum & Rahman, 2016), and British South Asian communities (Cowburn et al., 2015). Kennedy and Prock (2016) placed shame as falling between the internalisation of stigma and self-blame. Cowburn et al. (2015) defined the taboo as relating to Izzat (honour) within British South Asian communities. Within this they identified the conduct of females as representing the status of the family, with the male head of the family being responsible for maintaining this status. Fontes and Plummer (2010) outlined similarities for other ethnic groups. Within Arab culture they identified the emphasis being placed on having haya (modesty) and shame. Therefore, speaking of issues relating to sexual matters was deemed as going against this. With women from Black communities it went further, with the very expectation that abuse should be tolerated, denoting abuse should be expected. This demonstrated nuances between ethnic cultural practices which become important in addressing DVA.

From a religious perspective discussing matters of a sexual nature was originally not considered taboo within Islam. Addressing the female sexual drive in particular, Tofte (2011) presented how religiously this was considered a natural human need and should not be denigrated. Both the Qur'an and sunnah provide multitude examples concerning etiquettes of conjugal relations between the spouses. An example demonstrating that sexual force should not be used and has no basis within the faith comes from verse 187 in Chapter 2 of the Qur'an¹⁶. Herein two words are used to describe approaching sexual intimacy between the spouses, 'rafa'a' and 'baasharah'. The first distinguished as intimate and soft speech and

_

¹⁶ 'It has been made permissible for you the night preceding fasting to go to your wives [for sexual relations]. They are clothing for you and you are clothing for them. Allah knows that you used to deceive yourselves, so He accepted your repentance and forgave you. So now, have relations with them and seek that which Allah has decreed for you....' (Qur'an Chapter 2, verse 187, Saheeh International Translation).

the second meaning actual intimacy once the wife is ready, indicative of the husband preparing his wife for sexual intimacy through foreplay. This has been further exemplified in the sunnah whereby healthy sexual intimacy within marriage was described as something to strive towards, good for the body, and a means of increasing intimacy between the spouses (al-Suyuti, 1994). Imam al-Ghazali (2016), a 15th century prominent jurist, further detailed the importance of foreplay within healthy sexual marital intimacy, denoting the need to consider the needs of one's spouse. Such detailed examples provide a religious framework wherein the permissibility and importance of discussing these matters were illustrated (Al-Hibri, 2000). The imposition of related taboo ascribed to the faith, rather than ethnic cultural sources, thereby became apparent (Fontes & Plummer, 2010).

Simultaneously, discussions surrounding marital rape from a religious perspective have become a growing area of discourse. A scholarly narrative exists wherein the wife is not permitted to refuse the husband sexual intimacy whenever he requests it. Accompanying commentary often plays on fear to elicit compliance no matter what the circumstances. However, many scholars have refuted this with the etiquettes and wider understanding regarding the spirit of marriage outlined above (al-Ghazali, 2016; as-Suyuti, 1994; Ayubi, 2019). This is in addition to the clear guidance pertaining to refraining from using force within sexual intimacy. Emphasis was placed on the centrality of the role of mothers and the requirement for husbands to follow the sunnah in being mindful of the needs of their spouse (Lamrabet, 2016). Where religious texts have been used without wider contextual referencing, it becomes apparent how misinterpretations can occur, and religious sources can be mis-used for abusive and coercive control purposes (Ayubi, 2019). Coupled with long established ethnic cultural norms, the potential for abuse can become compounded with some abusive Muslim husbands potentially purporting sexual intimacy as their God-given right (Desai & Haffajee, 2011).

4.4 Financial Abuse

Religious guidance in regard to family finances, obligations and responsibilities are prominent within the Islamic faith. Men were traditionally seen as the breadwinners with little responsibility placed upon women to provide for families, though they were not religiously restricted from working if they chose to (Fiazi, 2001). This was contextually

defined with cultural norms and society circumstances considered. Flexibility within individual families was left for spouses to negotiate and decide. Demonstrating this flexibility was the Prophetic example whereby the first wife of the Prophet (pbuh) was a wealthy and successful businesswoman who employed the Prophet (pbuh), prior to his Prophethood (Lings, 2007). She continued running her business after their marriage.

Religious directives can influence approaches to finances within Muslim families. This thereby can directly impact what constitutes financial abuse within this context. Islam stipulated a woman's wealth as her own, therefore this prohibited the spouse from accessing her finances or using it without her explicit consent (Al-Hibri, 2000). Upon marriage a Muslim woman is to be gifted with a dowry from the husband for her personal disposal. Al-Hibri (2000) stipulated this to be in recognition of the sacrifices that come with having a family, including the loss of external opportunities that may be related to this, such as when having children. Women had rights of inheritance, and were entitled to earn a living, each of which were considered their own. Women were granted religious autonomy to decide if they wished to voluntarily give up these rights, or channel them towards areas that may not according to religious regulations, be considered their direct responsibility (Al-Hibri, 2000). Integral to this was personal and financial autonomy endowed under religious guidance. The direct impact on how financial abuse translates within Muslim communities therefore comes into question. For example, having inheritance withdrawn and used elsewhere, being forced to work, being expected to contribute to the household if not mutually agreed, would all potentially constitute financial abuse from a religious perspective. These however, may not always align with UK legal perspectives on financial abuse.

Ethnic cultural perspectives on financial matters however can be in direct contrast to religious stipulations. Examples from the South Asian tradition include the marriage dowry gifted to the groom by the brides' family instead, women being unable to inherit until 1956, and women being disinherited within wills under Hindu law (Yousuf, 2012). This becomes relevant to UK Muslims from a South Asian background, where ethnic practices became blurred by a shared historical geography and culture. These have been carried forward, assumed to have a religious basis. Pressure, often abusive in nature, is then applied in order

to obtain these financial privileges, leaving women in financial vulnerability. This has been explored in detail by Anitha et al. (2018) in a growing phenomenon they term as transnational abuse and abandonment, particularly in relation to dowry abuse. Though their study focused on the Indian Hindu population, they identified cultural overlap with other faith groups including Muslims. Of significance, their research identified that males who went on to abandon their wives came from countries including the UK (28 out of 57), Italy (eight), Australia and the USA with four each respectively. Their research further highlighted the wider networks involved in close knit families wherein in-laws were commonly actively involved in coercive control and other DVA behaviours. This wider family abuse often extended into financial control and exploitation. Women in particular were found to be exercising power dynamics over the wife/daughter in law. Such abuse remained undetected by UK laws. This was due to the wife being abandoned in her home country, thereby having no access to UK judicial representation. This was assuming she was aware of her legal rights for more often than not, ignorance of Muslim women's rights has been found to prevail across many ethnic groups (Al-Hibri, 2000).

British Muslim girls have been found to be outperforming Muslim boys academically (Khattab & Modood, 2018). Khattab et al. (2018) outlined the link between higher education attainment and increased labour market participation for Muslim women. Family structures and dependent children in particular presented as some of the barriers to employment. They further noted the larger economic inactivity rates for Muslim women upon marriage. Khattab et al. (2018) identified this being an indicator of the ongoing presence of traditional views around gender roles. Hence higher levels of unemployment amongst Muslim women coupled with historical cultural roots, maintained the potential for financial abuse within some families (Choi et al., 2016). It should be noted that many Muslim women choose not to work, as many Muslim women also choose to work. Those situations would be distinct from the context of DVA.

4.5 Coercive Control

Chapter Two has demonstrated that coercive control often occurs in subtle forms. Given the discrepancies between religious based teachings and ethnic cultural practices, coercive control within a cultural perspective of both faith and ethnicity, can become highly complex.

This is in addition to the lack of adequate training in understanding and deciphering coercive control already present within police forces (Butterworth & Westmarland, 2015).

UK Muslims have identified the confusion present between ethnic and religious practices, with many members, particularly of the first generation, unable to distinguish between the two (Franceschelli & O'Brien, 2014). This has often led to ethnic cultural practices being assumed to have a valid religious basis. In traditional patriarchal societies where women were viewed as being under the ownership of men, this has led to abuse in various forms (Choi et al., 2016).

Women in Bangladesh reported social norms and expectations decreeing them to be the property of their husbands. Inclusive within this was the expectation of DVA behaviours towards them after marriage (Taher & Jamaluddin, 2015). Such social integration of DVA within marriage reduces avenues for seeking support or reporting DVA. This becomes relevant where pockets of first-generation UK Muslims of South Asian origin, continue to uphold and enforce these beliefs within their UK based family and social circles. In such circumstances there is a risk of coercive control being adopted as the norm.

In extension to discussions in 4.1, cultural expectations of Arab women have been known to be very traditional and similar to those held by traditional South Asian cultures (Haj-Yahia, 2000). Women were seen as being responsible for the honour and reputation of the family, even if that meant putting their spouse and children first, at the expense of their own autonomy. Within the context of reporting DVA this can result in the community turning against them, and potentially more than one person inflicting coercive control. This was particularly so should the husband claim she was not fulfilling her spousal obligations, even where such obligations were culturally initiated rather than faith-based. Although Haj-Yahia (2000) presented this within the context of Israeli Arab women, the similarities are shared with other Middle Eastern countries and by virtue of migration, sections of the UK Muslim population. The additional risks posed therefore are forced marriages and honour-based violence. These differ from DVA in that they usually involve unmarried females and their fathers, or other male family members. Idriss (2017) thereby argued that these hold distinct entities and are therefore different to DVA.

In direct relation to this and discussions in 4.2, is the concept of multiple perpetrator domestic violence (MDV). Salter (2014) expounded upon this phenomenon as being common to ethnic minority populations for several reasons, often relating to concepts surrounding masculinity. Salter further identified the common link of lower socioeconomic conditions and state marginalisation between different groups wherein MDV occurred. However, integral to this would be considerations surrounding family and community structures. For Muslim communities in particular, with its close-knit structures, the role of wider family and community members in the continuation of coercive control becomes imperative. Without this, DVA understanding itself would be limited, as would the understanding of how DVA is addressed internally within Muslim communities. This is an under-represented area within the literature requiring further exploration. Both Haj-Yahia (2000) and Salter (2014) argued the need for increased cultural awareness and incorporation of cultural factors into understanding, assessing, and supporting DVA survivors, and those who perpetrate DVA behaviours.

4.6 Spiritual Abuse

From the above discussions it is apparent there is potential for abuse to take place using spiritual and faith-based sources. This does not necessarily imply that the faith endorses such abuse. The majority of examples discussed contradicted faith teachings, as demonstrated within the previous sections. In Chapter Three the concept of celebrating and encouraging ethnic cultural diversity within Islam was explored. The demarcation point was also stated as being when the ethnic cultural practice harms an individual. In this instance Kamali (2002) stipulated that the faith principle must supersede it, in order to stop oppressive and harmful practices. When considering Muslim communities, spiritual abuse refers to the notion of abuse within a religious context whilst recognising that both religion and spirituality are interwoven within Islam, as opposed to being upheld as two parallel concepts. Currently without a definition, strong elements of coercion and control have been identified by Oakley and Kinmond (2013) within the church context, and Chowdhury (2016) within Muslim communities. The majority of current research surrounding spiritual abuse has focused on the Church as the spiritual context (Cashwell & Swindle, 2018; Istratii, 2021;

Oakley and Kinmond, 2013). Therefore, additional research within Muslim communities in relation to this is required.

Misinterpretations and patriarchal interpretations of specific verses have created a vacuum wherein DVA behaviours can flourish. This is usually under the misconceptions of faith-based permissibility (Isgandarova 2018). This is further exacerbated by incongruity at a scholarly level (Chaudhry, 2013). Simultaneously, a broader exploration of the contextual basis within the sunnah demonstrates condemnation of abusive behaviours (Salahi, 2019). The lack of clarity regarding understanding and dissemination of faith-based sources is an area that requires development in order to address abuse justified under the banner of faith.

Concepts based on faith teachings can and have been used as part of the DVA process. Alkhateeb et al. (2001) identified four such concepts used to keep women from reporting the abuse and/or walking away. These included justifications using the faith, victim blaming, reiteration towards exercising patience, and forgiveness towards abusers. These were identified as being purported as the characteristics of a good wife who does not break the family unit. When faith forms an integral part of one's identity, but is used as part of the abuse, the impact can permeate all aspects of a victim's life and the communities they belong to (Isgandarova, 2018). This is another aspect which requires further exploration.

4.7 Summary

The literature discussed herein indicated Muslim communities as having additional and nuanced factors requiring consideration, when addressing DVA. Barnes (2001) highlighted DVA clearly spanning across all cultural boundaries. Correctly contextualising such differences within communities and their cultural frameworks became imperative. The objective therefore is to find ways to work with those different cultures in order to address DVA and prevent future victims. Increased discourses relating to DVA within Muslim communities (International Domestic Violence Symposium London, March 2019; Hammer, 2019), does not eradicate the presence of DVA within Muslim communities. Further work is required to change perceptions around acceptability, whether based on religious grounds, ethnic cultural grounds or societal factors. The importance of cultural competency when

addressing sensitive DVA social concerns was further emphasized by US based research (Jayasundara et al., 2017). Isgandarova (2018) advocated the need for culturally sensitive solutions and methods of addressing DVA, with specific focus on the importance of understanding different population groups. Without these, DVA behaviours within the UK Muslim population risk being misinterpreted and overlooked, and thereby remaining unaddressed. This extends to service provision and statutory services such as the CPS where some forms of DVA may be misunderstood as being minor or major, yet within this cultural context the opposite may hold true.

Chapter 5 Methodology

5.1 Method

Critical to this research was ensuring the voice of participants were brought to the forefront. Hussein (2006) argued that in order to truly understand communities, knowledge generation must commence from their points of reference. He explicated that, for Muslim communities, particularly in relation to the social sciences, the notion of the self itself differs from western concepts. Elmessiri (2006) argued that western paradigms have been applied to not only minority communities in the west, but countries and communities across the globe through colonialism. Cultural frames of references therefore Elmessiri further stated, have become entrenched in western understanding of culture and custom. These by default are considered to inhibit indigenous customs and cultures. The implication for social sciences research therefore must consider the accuracy by which social phenomenon is understood for minority communities. The question arises whether the research is a realistic reflection of communities represented within the research. Or whether the research becomes an interpretation according to social customs and norms other than those of the communities in question. Alvessnon and Skoldberg (2000) argued the goal of phenomenology as reaching the essence of the lived experience. Moe (2007) asserted this as being ever more imperative in the case of marginalised groups.

In this regard, qualitative research holds a unique position. It facilitates focus on those at the centre of the lived experience. However, interpretation of that data also requires consideration. Hegazy (2006) maintained that curriculum is necessarily based on the dominant ideologies held within a society. This implied that in attempting to understand primary data from participants, the researcher's own epistemological training is likely to introduce bias into the interpretation. Even with an insider researcher, as was the case within this research, such a risk remained. A mitigating factor would be the researcher having insider experience of the cultural norms and customs within which participants operate, and thereby bring out any nuances within the interpretation. Critical to this was ensuring the participant frames of reference formed the baseline. Hegazy (2006) explicated that freedom from bias did not necessarily prevent researchers who would consider themselves as outside of their sample from conducting research. Rather stress was placed

on ensuring interpretation took place from the viewpoint of the participant, as opposed to the researcher's social perspective.

In light of this, an interpretative research paradigm was considered the most suitable to providing a platform for the voice of the participant. Where a positivist paradigm would argue for researcher detachment from quantifiable data, interpretative paradigms allow for the utilisation of the researcher insider positioning in order to elicit meaning (Rehman & Alharthi, 2016). The importance of multiple social realities is highlighted within this. Elias (1956) put forward that all researchers are involved with the object of their study by default. He termed this as involvement - detachment. However, he argued that these degrees vary. Mansfield (2007) advocated the need for careful balance in the involvement – detachment equation. Within the context of this research, the researcher is from the UK Muslim population, born in the UK and educated through the British education system. Equally the researcher is from a South-Asian heritage, with her family members actively maintaining family links overseas. The researcher's faith identity is very visible given her adoption of the hijab¹⁷ since a young age. Her background in working with survivors of DVA informed the research directly. In particular, was the articulation of concerns regarding having no safe spaces in which survivors could voice their faith related DVA queries. Therefore, the insider perspective manifested in both a personal and professional capacity and furthermore, facilitated an insider perspective on numerous levels. This directly informed the interpretative qualitative approach.

Qualitative research further offers six interpretative paradigms. Creswell (2007) outlined five as narrative, phenomenology, grounded theory, ethnography, and case studies. Boyatzis (1998) additionally outlined thematic approaches. Phenomenology, at the heart of this research, moves beyond the narrative of single individuals to shared commonalities across the lived reality for numerous individuals (Creswell, 2007). The objective of this Creswell further identified as reaching the core of the lived experiences and sharing this with others. Reid et al. (2005) put forward the participant as the expert. This was further supported

_

¹⁷ From a religious perspective this is traditionally known as outer loose and non-transparent garments however, it is more often depicted as the headscarf in most western countries. In its original context, hijab applies to both males and females and regards both internal states, external conduct, and external clothing.

within leading literature on the approach (Flowers et al., 1997; Larking et al., 2006). Moustakas (1994), having set the foundations for structured phenomenological analysis, established phenomenology as relating to gaining a deeper understanding of a specified phenomenon. The voice of the participant remained central to this. This approach was therefore ideal for this research and will be explored further in section 5.5 below.

The research consisted of the following three qualitative studies:

Study 1 - Understanding community attitudes towards female survivors of DVA from Muslim communities (n=10).

Study 2 - Understanding the experiences of healthcare (non-medical) and judicial professionals working with DVA in Muslim communities (n=9).

Study 3 - Multi perspective IPA analysis of DVA within UK Muslim communities, based upon the above two studies (total n=19 from study one and two).

The cumulative aims of these studies were:

- To increase knowledge and understanding of survivor views of the nature, occurrence and impacts of DVA in Muslim communities, and the processes through which these views were formed.
- 2. To increase knowledge and understanding of community views of the nature, occurrence and impacts of DVA in Muslim communities, and the processes through which these views were formed.
- 3. To understand the barriers experienced in addressing DVA at all levels.
- **4.** To make recommendations for enhancing understanding, preventative, and earlier points of intervention within Muslim communities.

Study one and study two were analysed using interpretative phenomenological analysis (IPA) for a rich in-depth understanding of DVA manifestation, its occurrence, and impacts. IPA as a methodological approach has strong roots within the field of Psychology (Smith, 2004). The strongest has been within healthcare research, allowing for the distinct

opportunity to gain insight into the patient or service user perspective (Charles Hendry & Dip, 2011). This has gradually developed over time with increasing fields in Psychology utilising the method (Smith, 2011). The nature of IPA focusses on bringing out the expertise of the participant based upon their individual lived experiences, and how they make sense of them (Smith, 2004). The hermeneutics element Smith argues is derived from the interaction required between the researcher and the dataset in order to bring out that interpretation.

The data within study one and study two were then amalgamated using multi perspective IPA (MP-IPA) within the third study. This facilitated a broader understanding of the interactions which led to individual and collective DVA understanding, responses, and potential points of intervention.

In the multi-perspective IPA (MP-IPA) approach within the third study, both an interpretative and a critical approach facilitated maximising the data potential. Rehman and Alharthi (2016) asserted combining research paradigms in order to best reflect the research question, as adding authenticity and avoiding over zealousness towards one research paradigm. Through an added critical lens, the researcher was able to stand back from the data and understand the broader systemic patterns and structures which played a crucial role in the experiences at the micro and macro level. Moe (2007) emphasised the importance of marginalised groups being regarded as experts of their lived experiences. This very principle formed the foundation of feminist theories. Mansfield (2007) argued that challenging gender-based social injustices have been at the forefront of feminist theorists. To date, the dominant theoretical understanding of DVA has been based upon a feminist theoretical perspective. Whilst there exists a danger of transposing dominant definitions of feminism onto minority communities and cultures, the foundational principles of giving voice to those without a voice, in the context of gendered social injustice (Elias, 1956), remained applicable.

5.2 Participants

Participants for each study are outlined below.

Table 1 Study one (survivors) participant demographics

Participant No.	Age	Ethnicity	Number of years since leaving
S01	35	Bangladeshi	10*
S02	41	Indian	20
S03	45	Bangladeshi	9
S04	35	Irish	9
S05	34	Indian	1
S06	34	Pakistani	3
S07	39	Pakistani	1
S08	30	Bangladeshi	2
S09	26	Indian	1
S10	40	Pakistani	9

^{*}Only participant to remain within relationship as abuse stopped.

Participant ages in study one ranged from 26 to 45 years (M = 35.9, SD = 5.55). All participants had remained in the marriage for 2 plus years, up to a maximum of 20 years, after marriage. Eight participants (80%) had children within the abusive relationship and nine (90%) had left the relationship. In the one case where the participant remained in the relationship, she did so as the abuse stopped. Only one participant (10%) had since remarried and gone on to have children at the time of conducting interviews. Two participants (20%) considered themselves reverts (embraced Islam as adults); eight participants (80%) were born into Muslim families.

Table 2 Study two participant demographics

Р	Sex	Age	Religion	No. years'	Ethnicity	Occupation
P1	F	38	Muslim	6	Chinese	Integrative Counsellor

P2	F	40	Muslim	10	East African Asian	Integrative and Psychodynamic Counsellor
Р3	М	50	Muslim	17	Pakistani	Prison Chaplain and Imam
P4	F	53	Muslim	32	Indian/Pakistani	Head of Women's Centre
P5	М	45+	Unspecified (not Muslim)	21	English	Social Worker
Р6	F	40	Muslim	14	Pakistani	District Crown Prosecutor
P7	М	50's	Muslim	20	Arab	Imam and Psychotherapist
P8	M	60	Muslim	30	Indian	Hospital Chaplain and Head of Social Enterprise
Р9	F	43	Muslim	7	Pakistani	Psychotherapist

Within study two there were nine participants from Healthcare (non-medical) and Judicial backgrounds, between the ages of 38 to 60 years (M = 46, SD 8.22). All participants were Muslim, except for one individual who did not specify his faith but who was included in the study due to the extensive years of experience working within various Muslim communities, nationally and internationally. Participants worked with a wide variety of Muslim communities including South-Asian, European, Arab, and African ethnic groups. This provided a broader representation of the diversity within the UK Muslim population. Participants were uniquely placed to work with individuals and their families, thereby having insight into a more holistic view of DVA dynamics.

All participants across both studies were recruited via convenience and snowballing sampling thereafter. Details of the studies were sent out to known community contacts and organisations, and then circulated further afield. These included grassroots mental health organisations, prominent members of Muslim communities, Imams who were known to work with DVA cases, and professionals working with DVA victims in therapeutic capacity. All were asked to share details of the research with their own contacts where they felt comfortable. Participants were able to contact the researcher directly to volunteer to partake. A purposive sampling technique allows for the representation of a small group for whom the research question is applicable and relevant (Smith & Osborne, 2003). This facilitates richness within the data set and direct relevance to the research question.

Participants in study one were Muslim female survivors of DVA. No further exclusion criteria was stipulated. Within this group, the researcher had some prior contact with four participants. One was unrelated community initiatives where contact was minimal and hence the DVA experience was not known to the researcher. Two were within a DVA capacity wherein the participants had revealed that they were survivors of DVA to larger groups, with little more of the detail being disclosed to the researcher. In the last case, the participant was a former group participant of work-related activities in a previous position held by the researcher, but not known individually to the researcher. This had been over ten years prior to this research with no interim contact. She had heard about the research through snowballing and decided to partake because of knowing who the researcher was. In all four cases the researcher was not aware of their full DVA history until the research interview. The call for participants was shared generically with the request to share with contacts. The remaining six participants were previously unknown to the researcher and came forward through snowballing methods.

Participants in study two were required to have significant experience, either in breadth or number of years, in working with DVA cases in Muslim communities. Their professional background was required to be of a non-medical healthcare nature, working within a community or professional social support capacity. They were further required to be from within Muslim communities in order to have that nuanced understanding of the cultural context. The only exception was if they held significant years of professional experiencing warranting cultural insights and understanding. Within this sample there were two participants who were previously known to the researcher within a professional capacity, in relation to previous DVA work. This contact had been over five years prior to the research interviews therefore it was deemed that this would not have a substantial impact on the data due to the lack of interim contact. One other participant was known of by the researcher due to their work, but no actual prior contact existed. The remaining participants were not previously known to the researcher in any capacity. Again, a generic call for participants was sent out with participants being able to contact the researcher directly to participate.

All participants who came forward for both studies met the inclusion criteria and hence their participation. Within the survivors study, there was one additional query from a female representing a group of revert females who had left Islam due to their DVA experience and hence wanted to check if they would qualify for the research. They were reassured that they could participate as their experiences had been whilst they identified as Muslims. However, they declined to part in the end despite the assurances. This raises an important strand of future research in this area.

As highlighted, a number of the study one (survivor) participants were already aware of the researcher. This was within the context of DVA awareness raising work the researcher was involved in at a community level. Survivors were more cautious of partaking due to the sensitive and personal nature of the research topic. Therefore, this prior knowledge and exposure to the researcher facilitated increased trust. Several survivors requested an informal discussion after reading the research information, prior to agreeing to partake. This allowed them to gain an understanding of whether the research was right for them, and indeed whether there was rapport with the researcher. Building this trust and rapport was critical to ensuring survivors felt at ease in participating. Greene (2014) outlined the importance of establishing boundaries and confidentiality reassurances when conducting insider research. The idea of impression management as a means of restoring power balances was proposed as a central component. This, Greene (2014) argued, establishes a neutral and safe platform from which research can be conducted.

Small sample sizes have been contentious within literature (Wagstaf et al., 2014) however, Smith (2004) argued that smaller sample sizes allowed for deeper exploration into the themes. This included a sample size of one being utilised for an exceptionally in-depth understanding. Reid et al. (2005) argued the concept of less being more within the context of qualitative research and IPA in particular. Accordingly, Wagstaf et al. (2014) found larger sample sizes produced data with the same richness as smaller sample sizes, without the problematic nature of data overload. Within qualitative research, saturation point is considered to be reached within six to eight interviews (Reid et al., 2005). Wagstaf et al. (2014) present richness in a sample size of four up to thirteen, with some risk of data overload in larger samples. Within this research saturation was experienced at the expected

seven to eight interviews, with additional interviews conducted in order to add strength through increased representation, without the risk of data overload.

5.3 Materials and Data Collection

Semi-structured interviews were conducted for study one and two. All participants took part in one interview each. Interview schedules were informed by the research question, in addition to the literature review. Current research demonstrated a concentration of DV to the two individuals within the relationship (Dobash & Dobash, 1979; Walker, 1979). Within this research however the role of family, community, and cultural influences were central as per both the literature review and the research question. Hence, interview schedules focused on these perspectives.

Study one interviews with survivors lasted from 45 minutes to three hours (M = 94 minutes, SD 30.6). Questions were centred on:

- Brief details of DVA experience, specifically avoiding asking intrusive and in-depth questions in order to avoid causing re-trauma.
- Family reactions and attitudes.
- Community reactions and attitudes.
- Changes desired at a community level.

See appendix 1 for study one interview schedule.

Study two interviews with professionals lasted between thirty minutes and one hour (M = 42, SD 14.03). Questions were based on the three broad areas:

- DVA manifestations within Muslim communities, how these are formed and their impacts.
- Role of faith and cultural norms.
- Suggestions for creating change at a community level.

See appendix 2 for study two interview schedule.

Interviews took place prior to Covid-19. Some interviews were conducted in person in a location comfortable to the participant. This included home environments, workplace offices, university interview rooms, and coffee shops (latter for study two only). Numerous survivors (n=7) preferred to participate via telephone interviews, whilst two were conducted in person and one via video call. Within study two, five participants were interviewed via telephone, with four conducted in person. Telephone interviews traditionally broaden the research to a wider population base and harder to reach groups. This also includes sensitive topics that individuals may not necessarily wish to discuss in person, as well as being beneficial for those who are uncomfortable in face-to-face settings (Opdennaker, 2006). This extends to online video calls hence this advantage reflected a broader subject insight provided through this method. Within this research, telephone interviews served these purposes effectively. A majority of the participants were only available at certain times or were located at a significant distance, thereby making telephone interviews convenient and preferred. The added anonymity of a telephone interview was reassuring for survivors in particular.

Interviews have been known to be advantageous over other forms of qualitative data collection. The synchronised timing of communication between the interviewer and participant facilitates a natural conversation flow, helping to elucidate deeper insight. Opdennaker (2006) attributed this spontaneity with a more accurate reflection of the expertise of the participant, as answers are not carefully formulated. Consideration is also given to the effect of the interviewer upon the participant. Not only can the interviewer create a greater ambience, but non-verbal communication can also lead to the participant being influenced in their responses, both positively and negatively. A semi-structured format facilitated the researcher to provide prompts then subsequently stand back and allow the participant to contribute according to their expertise and experience (Loaring et al., 2015). Such insider expertise was critical to this research topic.

Participants were provided with detailed information regarding the study prior to consenting to participate. All interviews were recorded on a passcode protected dictaphone. At the point of transcription all identifying details were removed, and

participant transcripts allocated a participant number. Interviews were stored on a secure university drive, with consent forms stored in separate locked files.

5.4 Ethical Considerations

The British Psychological Society (BPS) code of Human Research Ethics was adhered to within this research. In line with funder requirements, the ESRC Framework for Research Ethics and the ESRC Research Data Policy were also adhered. Thereby, ethical approval was obtained from Brunel University London Research Ethics Committee (reference 12519-MHR-Nov/2018- 14813-2).

A critical element of the ethical considerations, and as raised by the ethics board, included ensuring survivors were not asked details about their DVA experiences. This was in order to avoid re-traumatising survivors. However, participants demonstrated a desire to utilise the research as a platform to voice their experiences. A majority of the participants went into details regarding their experiences, and whilst some questions were adopted to guide the conversation, interviews predominantly consisted of participants narrating their stories. The need for excessive questions within IPA research has been highlighted by Hefferon and Gil-Rodriquez (2011) as being a common misconception. This they identified as hindering the phenomenological process and natural flow of the data. Therefore, the researcher did not intervene with this natural process in order to avoid disrupting the authenticity of the narrations. Guiding questions were provided when a natural pause occurred. Survivors were keen to reassure others through their own stories and provide insight into the complexities of the abuse for greater understanding. Survivors did become emotional during their interviews and were offered time out and an opportunity to have a beverage. Despite this, they were keen to get their voices heard. The researcher facilitated this by ensuring survivors could continue at their own pace. For some, this resulted in the interviews being conducted over 2 or 3 sessions. For others, a short break was sufficient.

A further ethical consideration related to the potential impact on the researcher should DVA details be disclosed. A previous practitioner background however helped to mitigate this. The researcher had already worked closely with survivors of DVA and therefore previous exposure to hearing a range of detailed traumatic narratives. Having worked in the capacity of facilitating recovery resulted in knowing that survivors would be able to move forward in

their lives and work towards recovery. As such, survivors were signposted to numerous culturally relevant organisations who could provide further support if required. The researcher also followed up interviews with a courtesy check-in several days post-interview, to ensure survivors well-being. Furthermore, it was standard practice for the researcher to check-in with one supervisor post interviews, to ensure her own well-being. The researcher noted that more of an impact was felt when transcription took place, as the researcher had more time to reflect upon what participants had expressed. At this point, the researcher utilised supervision to express her own reflections in relation to this and to ensure continued well-being. Such reflections were also used to contribute towards the analysis development.

Participants within the professional study (study two) did not require the same level of aftercare as survivors. Within study two, more guided questions were required however, professionals also had various narratives they wished to share. Therefore, where these narratives were being explored, the researcher again facilitated this process. Participants within this study did require some reassurance that their views would not be denigrated and that it was safe for them to speak out. This was particularly in relation to societal structural concerns. Assurance was provided through non-verbal communication and additional questions which expressed interest rather than inquisition. Some participants wished to know more about the researcher ethnic background in order to understand whether certain cultural narratives would be understood. Others needed to know what contextual understanding was already present through knowing which generation of South Asians the researcher belonged to. The positioning of the researcher within the community and cultural frames of reference therefore became integral to the level of depth participants felt they could express. Bonner and Tolhurst (2002) drew attention to this insider advantage. They noted the insider cultural understanding eliminating the need for explaining generic social norms, the reduction in unnatural interruptions within the interview process, and having insider intimacy allowing for the elucidation of a more realistic dataset. Such advantages were confirmed through the data collection. Participants were very open and conversed freely regarding cultural norms and customs, having ascertained that the researcher already had insider knowledge pertaining to these.

Survivors were deliberately not offered any financial compensation for their time, as suggested by the ethics board. After deliberation, it was felt that the small potential amounts which may have been offered as a token of appreciation would have been disrespectful of the levels of trauma experienced. It further exuded feelings of placing a monetary value on the DVA experience. As survivors in study one were not offered any financial recompense, it was deemed inappropriate to offer participants from study two any financial recompense. Survivors however were gifted with a copy of the researcher's first book on the topic of DVA. This was not mentioned at any stage prior to carrying out the interviews and was offered as a gift if survivors wished to accept, after the interview. It was made clear there was no obligation to accept however, all survivors accepted the offer. It was felt that this gift would act as a small token of appreciation whilst hopefully being of some positive benefit to survivors, and a further reassurance that the topic was taken seriously by the researcher.

The ESRC Research Data Policy stipulates raw data to be made available where possible. However, in the case of qualitative studies such as this one, making raw data open access is not possible. Due to the level of detail provided by participants, to do so would risk loss of anonymity.

5.5 Analysis

The analysis was conducted in two stages.

Stage One

IPA methodologies disclose the expertise of the participant and place it within the foreground, in a manner suited to them (Smith, 2004; Smith & Osborne, 2003). This is in line with placing participants at the focal point of knowledge generation, put forward by White et al. (2013) as critical to research methodologies. Central to DVA is the victim/survivor and their lived experience and hence the idiographic nature of IPA research. IPA permits a direct insight into such experiences (Charles Hendry & Dip, 2011), whilst making it possible for this to be placed within the wider context through the hermeneutic involvement of the researcher (Smith, 2011). IPA is therefore substantially idiographic in nature. It is best

conducted utilising semi-structured interviews which allow for the participant to focus on areas that are of importance to them (Reid et al., 2005), whilst being gently guided by the researcher (Smith & Osborne, 2003). Interviews were recorded and transcribed verbatim, often reviewed several times in order to become familiar with the dataset. Stage one of the analysis involved detailed idiographic exploration of single data sets for both study one and two individually. The process was repeated with further single datasets and then compared and connected across the dataset within each study (Smith & Osborne, 2003). This resulted in identifying subordinate themes within the datasets. The subordinate themes were then amalgamated across the datasets in each study, facilitating the identification of superordinate themes across each study respectively. The findings for each are presented in Chapter 7 and 8.

Wagstaf et al. (2014) found researchers struggled with obtaining a balance with the double hermeneutics of the participant making sense of their world, against the researchers making sense of the participant perspective. There existed the potential risk of loss of idiographic elements at the level of the individual. However, adopting both subordinate themes and well as superordinate themes provided a way through. Therefore, reflexivity within the research process was critical to mapping theme derivation.

Stage Two

Stage two of the analysis involved the multi-perspective approach to the IPA data from stage one. Themes from stage one were analysed and contrasted to elicit overarching themes, inclusive of similarities and differences, across both studies. This allowed for identifying trajectories of meaning from the combined data as outlined by Larkin et al. (2019). Such trajectories and key themes were further mapped out visually as with McInally and Gray-Bunton (2021), before being supported with specific extracts from across the data. The visual mapping took several forms prior to the first of the final version being established. This mapping out process can be viewed in Appendix 4. By utilising a taxonomy of families, teams, and other cohorts (Larking et al., 2019), IPA was applied to data from individuals sharing experiences from different perspectives through the MP-IPA method.

Risk of participants recognising extracts from other participants was limited in this study due to the individual nature of the interviews, and recruitment taking place nationally.

The term victim is used to describe experiences of DVA whilst still in the relationship. The term survivor is adopted to describe experiences of individuals post leaving abusive relationships.

Geertz (1973) argued qualitative research as being associated with richness in the dataset not necessarily provided by other methods. The verbal nature of qualitative research requires a different approach to its analysis. With technological advancements allowing for varied forms of qualitative data collection, and the onset of Covid-19 changing the nature of research, this is an area which continues to grow.

Small sample sizes could be argued as not holding capacity to generalise to the wider population. Carradice et al. (2002) argue that qualitative research can be used to demonstrate application of the concepts, rather than limited to the ideographical experience. Equally, Larkin et al. (2011) postulated the increased role of phenomenological research in supporting empirical date. They further proposed that it is not individual experiences per se that was being sought, but rather the interaction of individuals with their environments and therefore considered the broader applicability of this.

The following chapters will focus on the findings for each study individually before exploring the outcomes of the third multi-perspective IPA study.

Chapter 6

Empirical Study 1: Muslim female Survivors of Domestic Violence and Abuse

6.0 Introduction

Research relating to survivor experiences of DVA have inevitably focused on mental health outcomes such as post-traumatic stress disorder (PTSD), depression and anxiety Ferrari et al. (2016). Given the necessity to understand needs at a service provision level, this focus is to be expected. Short-term and long-term mental health issues have also been raised (Astbury et al., 2000; Ellsberg et al., 2008; Ferrari et al., 2016) as have the high prevalence of adverse impacts on both physical and mental health (Laskey et al., 2019) within a systematic review. Recovery from DVA has been noted as a possibility, with Anderson et al. (2012) postulating social and spiritual support as being key to recovery and resilience. Kelly et al. (2014) however drew attention to the challenges accompanying the recovery process for both survivors and their children. Ghafournia (2017) highlighted the positive role of faith for Australian Muslim female survivors of DVA and further emphasised the lack of research in this area.

This study aimed to address this void by exploring the role of community in the lives of Muslim female survivors of DVA. It further sought to identify any potential earlier intervention points within this context. This chapter presents the analysis of qualitative data from ten Muslim female survivors of DVA with a focus on the role of the community within their DVA experiences. Semi-structured interviews were analysed using Interpretative Phenomenological Analysis (IPA). Four superordinate themes emerged; i DVA as a Web of Abuse, ii Cultural Normative Practices Vs Faith Dichotomy, iii Complexity of DVA Dynamics, iv "Don't think you don't have anywhere to go": Supportive Mechanisms as Life Changing.

The criticality of understanding DVA in direct relation to specific communities, according to their own social structures and relational dynamics, is highlighted. To do so under any other social structures rendered missed opportunities for interventions. This is demonstrated within the findings in relation to the extended nature of DVA for those within close knit

communities, the layers of complexities due to cultural nuances, and the meticulous planning and additional considerations involved in leaving DVA. The superordinate themes are explored both in relation to overlaps with existing literature, and in relation to broader theoretical considerations specific to this population group. Findings contribute to an original investigation into the role of community within DVA in the UK Muslim population.

6.2 Findings

Four superordinate themes were identified with a number of subordinate themes under each. These are outlined in table 2.

Table 3 Study one themes

Superordinate Theme	Subordinate Themes
DVA as a Web of Abuse	1.1 Normalisation of DVA
	1.2 Layered Gatekeeping
	1.3 Perpetrator immunity: "Perpetrators are
	glorified"
Cultural Normative Practices Vs	2.1 Conformity Expectations: not being the "bad
Faith Dichotomy	grape on the vine"
	2.2 Ownership attitudes
Complexity of DVA Dynamics	3.1 Underestimating abuse: "I'd forgotten how to
	cross the road"
	3.2 Victim Isolation: "I always wanted to get out, but
	I had nowhere to go"
	3.3 Children as Hidden Victims
"Don't think you don't have	4.1 Faith as Empowerment
anywhere to go": Supportive	4.2 Strength in Support Networks
Mechanisms as Life Changing	4.3 "Exit Strategy"

6.2.1 Superordinate Theme 1: DVA as a Web of Abuse

The idea of DVA being dispersed within the community, and not confined to two individuals within the relationship, was consistent throughout the data. DVA was described as occurring

in a web-like manner, with numerous stakeholders playing a critical role within the DVA process. Intersecting with stakeholders were factors relating to understanding of DVA, normative cultural practices, and faith beliefs/religious practices. Hence, though DVA was directed from a spouse, it was framed within a wider network of interactions.

6.2.1.1 Normalisation of DVA

Meyer (2015) depicted the public stigma that victims carried with them by virtue of remaining within an abusive relationship, prior to being able to leave on a permanent basis. In contrast, the idea of DVA being normalised within UK Muslim communities was prominent throughout the data. This manifested in different forms.

Extract 1

For a long time I never really understood, I just thought that this is how marriages are and how marriages are supposed to be. (Survivor 9, Lines 13 - 14)

In extract one, survivor 9 spoke of not knowing how to recognise the abuse within her marriage. Having grown up in a violent household, she assumed abusive behaviours to be a normal part of relationships. Kimball's (2016) review of DVA literature highlighted the cumulative negative impact of witnessing DVA as a child, including the increased presence of DVA experiences in later life. McCarry and Lombard (2016) presented the normalisation of male upon female violence within wider society at large, as being absorbed by children of different ages and across time. Survivor 9 demonstrated elements of this in not recognising the abuse as abuse and not questioning the legitimacy of it. Furthermore, was a delay in recognising that abuse did not need to be tolerated. Oyewuwo-Gassikia (2016) raised change occurring at the point at which external support was sought. The wider contextual background serving to normalise abuse and therefore rendering it unchallenged was raised by numerous participants.

Extract 2

... I thought surely as he's from Pakistan he should know what a Islamic husband, a Muslim husband should be like, so yeah I think, was it (*month*) when he came (*to the UK*), he was a bit pushy and shovey, sort of pushing, sort of pushing hands into my

face and grabbing my chin, and at that time because I'd seen so much abuse already and I knew that you know my sisters had been through a lot in their lives, and it was almost as though an expectation that you just ride as normal, it was normalised and because it was so normalised I just got on with it and I just thought choloh (okay / whatever) yeah this is part and parcel of it. (Survivor 6, Lines 162 – 168)

Survivor 6 spoke of having witnessed DVA behaviours throughout her life, so much so that it was considered 'part and parcel' of married life. Despite this, she expressed not anticipating experiencing abuse herself as her spouse was from a traditional Muslim background. Implied within this was the expectation of respect and honour of the wife, as stipulated within Islam (Isgandarova, 2019). However, prior experiences within her own family led to an overlooking of the abuse, instead replacing it with an expectation that such behaviour was to be tolerated. To speak out when others in her family had not, did not appear to be an option. Abuse was seen as a normalised part of married life regardless of what her faith-based expectations had been. Therefore, the only option was to treat it as integral to married life. The role of wider examples within the community was similarly raised by survivor 3.

Extract 3

I don't know whether it's still the same now (.) and I contemplated divorce then and I was thinking 'I can't do it, I can't do it', I didn't know *anybody* in our community in the (*place name*) who'd got divorced. (Survivor 3, Lines 409-410)

The uncommon nature of divorce played a significant role for victims and created a great sense of isolation. Abugideiri (2007) drew attention to the stigma surrounding divorce within cultural normative practices. This she presented against the backdrop of abuse being legitimate grounds for divorce within a faith context. She also pointed to feelings of guilt and entrapment, often unknowingly carried by victims. Without having any other examples to use as encouragement, victims struggled to leave. Underlying this was the sense that where abuse was taking place, women were not leaving those relationships, therefore others were expected to conform to the same behaviour patterns. Uddin (2020) highlighted the continued stigma surrounding divorce within Muslim communities, particularly for

women leaving abusive relationships. The role of the wider community was viewed as central to the normalisation process.

Extract 4

... but when I told my story of what happened, I didn't even go into details like I have with you, I just said that you know, I don't even think I used that word (*rape*) but I just said I'm being forced or whatever

RC: Yeah

And she's (community member) like but you can't say no to your husband you know.

(Survivor 4, Lines 1211 – 1215)

Survivor 4 presented how community platforms imposed further control and silencing within the process of normalising DVA. The idea of marriage involving the surrendering of all personal autonomy and rights was raised, particularly in relation to marital intimacy. Hence the subject of rape was surrounded in taboo, restricting opportunities to speak openly in this regard. Abraham (1999) raised attitudes of unequivocal sexual access to wives existing within South-Asian communities. Awan (2014) however, noted Islam instilling personal tranquility, growth and development as being integral to healthy marriages and family life. This was in stark contrast with victims being confined to accept abuse as part of marital life. Furthermore, tolerating abuse was portrayed as a means of spiritual elevation, "They say by putting up with a violent relationship is your form of sabr (patience)" (Survivor 1, Line 315). This once again indicated towards the normalisation of DVA within marriage. Such attitudes facilitated the perpetuation and condoning of abuse and created spaces within which victim blaming could occur.

DVA normalisation within marriages in Muslim communities was prevalent. Such normalisation occurred through a number of means, including various stakeholders. Intersectionality factors further intertwined with the DVA and served to reinforce the normalisation.

6.2.1.2 Layered Gatekeeping

Victims who attempted to remove themselves from abusive marriages faced numerous obstacles. These often occurred internally within communities, such as families and community leaders, and extended out into wider societal factors such as structural barriers. Such obstructions were often underpinned by victim blaming attitudes.

Gracia (2014) outlined global victim blaming attitudes amongst the public as underpinning secondary victimisation. These were identified as having a detrimental impact on help seeking behaviours. Gracia (2014) elucidated on how such secondary victimisation contributed to how victims were treated by law enforcement and other public sector institutions. The idea of victim blaming occurring through a process of layered gatekeeping was raised within the data. Central to this was the control of victim autonomy. This ensued in various forms and came from all sections of society. Survivor 2 provided an example at the family level, wherein she spoke about her father arranging family meetings to discuss her request for divorce.

Extract 5

Everything was being aired in public, as far as I could tell, everybody was just listening to my story on why I wanted to divorce him and obviously him forcing himself upon me came out as well when I said you know, I hated him, I couldn't stand the sight of him and erm they weren't really, what I was told was "that's not, that's not enough reason to (.) erm (.) get divorced, not strong enough, not, you know unless he's beating you up or doing anything really awful" I can't get a divorce, so that was basically their, we had several meetings but that was always their bottom line, was that "you haven't given us sufficient reasons for why you want a divorce so you know you can't do this". (Survivor 2, Lines 458-464)

The wider family, being relatives of her then-spouse, formed the gatekeepers as to whether survivor 2 was justified and permitted to pursue a divorce. Personal decisions could only be sanctioned through the wider collective. With only certain forms of abuse recognised as being unacceptable, rape was viewed as groundless and insufficient. Rape being described as not "strong enough" of a reason for divorce, implied this being viewed as a normal part of

marital life. Hence the presence of secondary victimisation in addition to the abuse itself. Not only was the victim required to publicly present and justify her case to such gatekeepers as arranged by her father, she further had the rape/sexual abuse disregarded. With such views relating to rape, all other concerns she voiced were treated as inconsequential. The implication was that abuse was part of marital life, with the quality of her relationship to her spouse being irrelevant. Therefore, she had no grounds for divorce. The underlying message was that unless she could convince the gatekeepers of her cause, then she would have to remain in the abusive marriage. That essentially was the "bottom line", indicating victim autonomy as irrelevant. Historically, marriage was deemed consent for sexual relations regardless of consent within British law and culture (Williamson, 2017). Awan (2014) drew attention to the purpose of marriage as being one of harmony and tranquility. This he noted as inherent to the Islamic faith¹⁸. Within an analysis of classical Islamic approaches however, Azam (2015) elucidated upon a similar historical trajectory whereby the marriage contract was viewed as being akin to consent to sexual access, with a dearth of discussion surrounding the issue of marital rape itself. The unacceptability of making disclosures related to sexual abuse was reflected in research by Hussain and Khan (2008). They presented the negative impact of sexual abuse disclosures, due to social norms and taboo surrounding the subject within Pakistani communities. This was akin to British historical perspectives put forward by Williamson (2017). Gill and Harrison (2019) noted the same strong presence of taboo and shame surrounding discussing issues pertaining to sex within British South-Asian communities. Consideration of this background context lends greater understanding to attitudes and approaches to DVA demonstrated within this data, particularly those relating to sexual abuse.

Extract 6

... there was one point where in front of my aunts and uncles I mentioned how he's been violent towards me and surprisingly enough they, instead of being upset at

¹⁸ 'And of His signs is that He created for you from yourselves mates that you may find tranquility in them; and He placed between you affection and mercy. Indeed in that are signs for a people who give thought'. (Qur'an Chapter 30, verse 21).

him, they questioned what I did to make him be violent towards me. (Survivor 8, Lines 472 - 474)

Survivor 8 recounted a similar narrative with her wider family. In trying to explain the abuse, the spotlight was placed on her behaviour rather than the abuse. Such abuse was deemed as being warranted due to potential victim conduct. Again, the idea of victim accountability to wider family transpired. Blame and questioning was transposed onto the victim, thereby exonerating her then husband. Gracia's (2014) comparative study of victim blaming attitudes across high income Western and EU countries revealed international consistency in victim blaming. Such public attitudes have been known to create a distance between bystanders and victims, thereby trivialising DVA. Gracia (2014) noted this as impeding help-seeking behaviours.

Extending into the community context, survivor 3 described how upon applying for divorce, the community were involved. Her then-spouse invited several male members of the community for a meeting to discuss the issue, without her consent. Such individuals were strategically targeted to take on a mediation role. Whilst her then husband was familiar with them, the same did not apply to the victim. Despite this, once again the focus was on the victim being required to justify her reasons for pursuing divorce.

Extract 7

And he (*community member*) was saying yeah "you need to provide for my sister¹⁹ and what not but you (*victim*), you need to be a bit more understanding with him, he's not as educated as you so you need to…" and I was quite, I was gonna, more than happy to put him through education before (*child*) arrived (.)… (Survivor 3, Lines 743-745)

Whilst the community member attempted to put forward the rights of the victim, there was scarce demonstration of understanding abuse for what it was. Rather the focus was placed on the perceived victim's lack of understanding. It implied that it was the victim's responsibility to change her abusive spouse. Therefore, her inferred failures did not warrant

¹⁹ Sister in faith as opposed to relation.

her the right to seek divorce according to the community member. Such gatekeepers were appointed without the victim's consent and denied her personal autonomy. The implication was that she could only pursue divorce if the community members approved. Within this, the victim absorbing responsibility for the abuse was both externally enforced as well as denoted by the victim herself. Such self-blame has been explored in relation to appraisal distortion. Appraisal distortion has been noted as one outcome of victim blaming attitudes within the public (Gracia, 2014). Such appraisal distortions have been identified as being distinct for victims in comparison to those perpetrating abuse. Perpetrators were found to use appraisal distortion for justification, denial, and increased control. Victims however were identified as using it to feel responsible for the abuse (Whiting et al., 2012).

Further secondary victimisation and gatekeeping was present at the level of the Imams.

Extract 8

So there's that too, but I also think that religion can be used in erm a bit of a negative way as well, some, you get some Imams who advise the sister to stick with this relationship to the point that they can actually be dead by the end of the relationship. (Survivor 1, Lines 293-295)

Some religious leaders providing unsafe advice to victims was raised as a serious concern. Misunderstanding DVA and misapplication of the faith, in order to apply pressure on the victim to remain within an abusive relationship, was indicated as using faith for negative gatekeeping purposes. The presence of underestimating the consequences of abusive relationships was alluded to. Furthermore, was an inference that victims heeded the advice of religious leaders regardless of concerns over personal safety. Either way, loss of life was known to have occurred as a direct result. Hammer (2019) expanded on research with US Muslim communities wherein Imams were identified as being central to addressing DVA. Equally their lack of training in the field was raised as posing serious concerns, sometimes resulting in the denial of DVA altogether. This Hammer (2019) raised as being in stark contrast to those Imams who were trained and equipped to deal with DVA cases.

Extending out further, gatekeeping at the level of the authorities and legal system was also raised as problematic.

Extract 9

I didn't consent to what happened to me (*rape*) and I objected strongly to having, to take that stance, you know like that side of the debate. It (*CPS prosecution*) wasn't an accurate representation of what my experience was and I'd rather not go to court and maintain my integrity than go to court and be forced to say something that wasn't even true. (Survivor 4, Lines 1673 – 1676)

Finally, the perceived failure of the legal system to recognise and label rape for what it was, acted as a gatekeeper to the victim being accurately represented within the justice system. This forced the victim into choosing a misrepresentation of the rape she experienced or removing her voice altogether. Survivor 4 preferred to not be publicly re-victimised than to uphold the systemic misrepresentation of her experience. The need to be heard accurately was expressed, as was the refusal to be re-victimised by the very system she thought would be protecting her. Moe (2007) argued social entrapment occurred when structural inequities entrapped victims in abusive relationships. Such inequities Moe expounded as including poverty, patriarchy, racism, or ethnic bias. In line with this, a systematic review conducted by Pokharel et al. (2020) found macro level factors silencing victims on an international scale.

The presence of layered gatekeeping at every level of the family, community and wider society was described as preventing victims from accessing support and leaving abusive relationships. This predominantly occurred through victim blaming and the silencing of victim voices. The idea of victims encountering successive barriers was thereby apparent.

6.2.1.3 Perpetrator immunity: 'Perpetrators are glorified'

Within this study, male perpetrators being immune to accountability was raised throughout the data. This was often imposed upon victims directly through both family and the wider community. Furthermore, it occurred in subtle ways, often embedded into social norms. This made identifying it more complicated both for victims and those upholding such invisible barriers. Devaney (2014) argued that whilst criminalisation assists in recidivism of DVA, it does not go far enough. Devaney concluded that perpetrators of abuse essentially had to take responsibility for their own actions, in order for long term change. The role of

wider societal accountability of perpetrators was raised within this, particularly for closeknit communities.

Extract 10

I do, I do feel like the community look at me like I've wronged my husband because I'm divorcing him and I'm wrong because I'm breaking up my family, whereas when he's the one whose made the mistakes, when he's the one whose damaged the marriage and the relationship erm they don't look at him the same way, they just say oh you know, they just look at him like he's a man and he's right no matter what you do, I feel like they look at him like that. (Survivor 7, Lines 596 – 600)

Survivor 7 raised how regardless of what the perpetrator did, the community would never view him as being in the wrong. Patriarchal values entitled him to unaccountability and immunity. As a female however, the indication was that accountability was inevitable. By virtue of gender, going against societal norms meant shouldering all the blame, despite the evidence being on the contrary. Both Herman (2015) and Kelly (1996) referred to perpetrators of DVA being afforded greater importance and standing by communities. Whilst the female voice remained disregarded, the responsibility for keeping the family together was imposed upon the female victim. With the reason for seeking divorce treated as irrelevant, divorce was held as the reason for families breaking up. Hence the female victim seeking divorce became the one with the offending behaviour. In contrast, the male perpetrating the abuse was seen as the victim.

Extract 11

S6: ...so really nothing happens to them, they're not shunned away and so on, they're just you know back in there, perpetrator, if it's a man. Women, women committing adultery, women going off the rails, that's it, she's not going to be touched ever for the rest of her life.

RC: Mmm

S6: Man, he does it once he can do it again and again.

RC: Mmm

103

S6: So yeah I think for me, my personal opinion I would say well perpetrators get away with it, legally, morally, ethically, they're getting away with it. (Survivor 6, Lines 731 – 739)

Survivor 6 expanded on this further, describing the discrepancy in how males were treated in comparison to females. Male perpetrators having the physical and societal freedom to commit repeated abusive behaviours was seen as the norm. For females however, to be seen to be "going off the rails" or "committing adultery" was viewed as a life sentence. She would never be accepted back into the community. She would be viewed as having crossed a line that existed for females but did not apply to males who exhibited the same behaviours, even if carried out repeatedly. In contrast, males were viewed as being granted immunity from all perspectives. Therefore, there were seen to be no repercussions within both the community and society at large, for male perpetrators. The presence of an androcentric milieu going unchallenged, was inferred.

Extract 12

... I remember walking home from (*place*) and just getting a call from him (*her husband's work colleague*) asking me would I please ring (*husband*) and check-in on him every now and then because "he's really not doing so well"

RC: Ok

And I said to him, "if someone in the street did to me what he did to me, would you ask me to ring in on them and check in on them to make sure that they were doing ok?" (Survivor 4, Lines 1494 - 1498)

Within this, the idea of victims being responsible for ensuring the well-being of the perpetrator was described. The victim's own well-being was disregarded. By occurring within a marital context, the offence was portrayed as being less criminal. Focus was placed on consideration towards the individual perpetrating the offence. Abuse, and in this case crimes of sexual assault and rape, were viewed as more serious when committed by a stranger. Such crimes were not viewed with the same level of seriousness when having occurred within a marital context, if viewed as crimes at all. Perpetrators were granted

greater liberty indicating a general acceptance of such behaviours. By virtue of being married to their victims, male perpetrators were not seen as perpetrators. Therefore, it was expected that the victim would give precedence to how the individual perpetrating the abuse was feeling. Her own feelings and the impact of the trauma became irrelevant. The underlying implication was that males had the prerogative to behave as they wished within marriage. Research indicates most crimes of a sexual nature as occurring between adults who are known to each other (Fields, 2017). Between January 2010 and December 2011, Waterhouse et al. (2016) asserted that 70% of rape cases reported to British police involved someone known to the victim.

Extract 13

But you know it's (*divorce*) done and dusted, how my family reacted I don't really know because to be honest, one moment they're like "yep you should get remarried because he's looking to get remarried", then they're telling me that actually he's been telling people in (*South-Asian Country*), because he's in (*South-Asian Country*) at the minute, "he said to people 'oh (*victim*) and I are still married, I'm looking, we're going to reconcile soon'"... (Survivor 6, Lines 223 – 226)

Victims being required to live their lives, post-separation, by navigating around the perpetrator was raised. This was seen as another means by which perpetrators were granted immunity to continue with their lives unimpeded. Victims however could only move forward in their own lives if it seemed the perpetrator was doing the same. Individual autonomy and choice were immaterial and remained bound to the perpetrator. The victims voice within this also became silenced, with the perpetrators voice not only dominating the platform, but further being amplified by wider family. Chaudhry (2013) postulated patriarchal interpretations of religious text as providing a platform for the domination of male voices, particularly within the context of DVA. Furthermore, was the denial of divorce. Divorce was only granted legitimacy if it was acknowledged by the male. The victim declaring divorce as having taken place held no authority with wider family. Therefore, moving forward with life became restricted.

Herman (2015) presented the idea of women and children being held captive by invisible barriers within DVA situations. She included economic, social, legal, and psychological barriers. This was demonstrated within all of the extracts of this sub-ordinate theme. Such invisible barriers resulted in victims becoming imperceptible, with those perpetrating abuse being granted free reign to continue as they were. Being granted immunity on all levels resulted in the perpetuation of DVA. With abuse deemed part of marital life, a stark absence of regard for victims and potential future victims was present.

6.2.2 Superordinate Theme 2: Cultural Normative Practices Vs Faith Dichotomy

Throughout the data, survivors conveyed accounts relating to cultural normative practices often being imposed upon them. This usually involved other key stakeholders pertinent to their DVA situation. Survivors voiced a recognition of such normative practices at times being in direct contradiction to their faith. These were however upheld over and above faith principles. This increased the complexities involved in speaking out against the abuse for survivors and those attempting to support them. DVA became one of two opposing forces. One of suppression through harmful cultural normative practices. The second; a stark contrast opposing DVA, based upon faith teachings.

6.2.2.1 Conformity Expectations: not being the 'bad grape on the vine'

Pressure to conform to external expectations was prominent throughout the data. Such expectations were usually in accordance with normative social conduct, within the wider community and sometimes immediate families. Isgandarova (2019) outlined Muslim communities as being predominantly collectivist in nature. She described the needs of the collective being given precedence over the needs of the individual. Stepick and Stepick (2002) however, posited for immigrants living in pluralistic societies, balancing cultural identities alongside national identities was often a natural process where multiculturalism was encouraged. Halim (2006) put forward Muslim identity as being a dynamic process that continued to evolve in response to the society surrounding it. This process of engagement and balancing of faith-based identities at the intersection of cultural ethnic norms was

evident within the data. As a result, victims were having to contend with DVA alongside additional layers of patriarchal gender conformity expectations.

Extract 14

Yeah it was in the UK, so they (*prospective partner*) were going to mum's, I would go home in the weekend, whenever she needed me to go (.) and I would have to get dressed up in the traditional garb because they don't wanna see somebody sat in a pair of jeans and a jumper or whatever. (Survivor 3, Lines 183-185)

Survivor 3 raised the issue of having to conform to ethnic-traditional dress codes during potential marriage introductions. Hence conformity to a certain expectation was externally imposed. This suggested that females in particular, were not expected to exercise individual autonomy. Rather, they were expected to conform to patriarchal traditional gender roles both pre- and post-marriage. Whilst Triandis (2001, 2018) put forth collective communities adapting behaviour with the social collective in mind, he also put this collectivism on a continuum. Hence whilst victims conceded to external conformity, equally their determination in not being restricted by such expectations was apparent in superordinate theme four. Matriarchal structures were noted to be significant in how conformity expectations became imposed.

Extract 15

... he (father) was more concerned about my welfare whereas my mum was more concerned about what the relatives were going to say and she did actually say that at the time

RC: Mmm

She goes you chose to get married out the family, that's not something we do, you know, what are the relatives gonna say, you chose this so you know, you kind of live with it ... (Survivor 7, Lines 512 - 516)

Women being the gatekeepers to maintaining the family image was highlighted as having a tangible impact within DVA situations. In this case, the expectation to remain in the relationship originated from the victim's mother. Isgandarova (2019) posited honour and

shame in maintaining public image as being critical to why some women remain in abusive relationships. Gill (2008) presented how both male and female members of the family were often associated with the maintenance of family honour in honour-based violence, through controlling female private and public conduct. The overarching need to maintain public standing through conformity was raised as taking precedence over individual needs. Within a predominantly African-American sample, Rose and Campbell (2000) found victims gravitated towards social support from friends more than family. The theme of conformity patterns across generations was highlighted as contributing to this, in addition to numerous social and structural factors. The exploration of the role of matriarchal structures in the upholding and maintenance of social conformity, regardless of consequences for DVA victims, requires consideration. This was illustrated further in the following extract.

Extract 16

Whereas I had my mum saying to me well what did you do, and you know maybe if you did this and maybe if you did that, so I think my mum had (.) been conditioning me my whole life to just conform, just conform, and actually, my whole life, because I had my dad you know telling me to spread my wings and championing. (Survivor 10, Lines 278 – 281)

For survivor 10, physically and psychologically extricating herself from the abuse was possible due to having had her father's encouragement. This provided her with the awareness of alternative options and that not everyone expected conformity, regardless of how strong the matriarchal structure within her own family was. This was in complete contrast to the victim blaming and enforcement of conformity experienced throughout her life, via her mother. By broadening her world, her father made it possible for her to see that there were alternative choices she could make in life.

In summary, conformity was often externally imposed. At times it emanated from unlikely sources, such as women in the family and community. Such conformity was deemed to stem from cultural normative practices which secured social inclusion. Survivors were acutely aware that such expectations were in direct contrast to faith teachings. This will be explored further in superordinate theme 4, within section 6.2.4.1 of this chapter.

6.2.2.2 Ownership attitudes

The data presented a clear narrative in relation to ownership attitudes towards victims and women in general. This was upheld by both males and females at a family and community level. The prominence of patriarchy underlying DVA has been highlighted within feminist theory (Dobash & Dobash, 1979). Pence and Paymar (1993) put forward various forms of abuse as being employed as a means of coercing and controlling victims. Dobash and Dobash (1979) proposed coercion and control to maintain power as being the ultimate goal of DVA within feminist theory. Proponents of integrative theories acknowledged the importance of recognising this power dynamic within integrated DVA theories (Lawson, 2012). Such patriarchy was also evident within this data at the intersection of cultural normative practices and androcentric faith interpretations. Where mainstream literature focused on the control over victims predominantly by perpetrators (Pence & Paymar, 1993), this data highlighted how additional stakeholders were often inherent within this process.

Extract 17

I'd heard someone say that erm (.) "well when he (husband) comes (.) does she really think we're gonna let her get divorced, we'll erm we'll beat her if we have to, to make her (.) stay in this marriage", this was coming from his (husband's) side of the family. (Survivor 2, Lines 598-600)

Survivor 2 was related to her then husband. Hence, the interconnected nature of communities resulted in survivor 2's extended family being heavily involved in her personal decision-making process. The sense that the extended family felt entitled to not only coerce any decisions she made but moreover, force her to stay in the relationship against her will was apparent. The idea of victims being blamed and therefore stripped of personal autonomy was present. This gave the impression that she was expected to make the marriage work regardless of what it entailed. Bishop (2016) outlined the deprivation of personal autonomy as being the fundamental damage caused by DVA. The absence of any negative repercussions for extended family members imposing themselves upon victims was alluded to. Gracia (2014) put forward victim blaming attitudes as being common on an international scale. A European Commission (2010) study found 69% of a UK and Swedish sample as holding victim blaming attitudes. Such attitudes in other Nordic countries

including Denmark and Finland were over 70%. The Commission's study focused on the attitudes of the general population. The data within this study demonstrated how such attitudes filtering down to the extended family level, had a direct impact on victim experiences of DVA.

Extract 18

So I think, for her (*victim's mother*), I think the reason she didn't really back me up was because she, there was this whole system that she was living in and there was no way, that she didn't have any control, because it, as far as she was concerned, it was my dad and my grandmother and his side of the family that made all the decisions. (Survivor 2, Lines 370-373)

In extract 18 above, survivor 2 refers to her mother similarly having no autonomy to exercise independence. Through marriage, the indication was that the victim's mother's personal autonomy had transferred to her husband and his family. This further limited her ability to support her own daughter, demonstrating the emergence of a cyclic pattern across generations. Ahmad-Stout et al. (2018) found in-laws as playing a critical role in the ability of South Asian US women to leave abusive relationships. Lawson (2012) outlined social structures which facilitated violence against women by men, as being intrinsic to sociological perspectives of DVA. There was an implicit understanding that males held a position of ownership over their wife, which was furthermore upheld by community members around them. Victim views on this became irrelevant as following established norms took precedence.

Extract 19

... I remember my dad asked him permission in front of everyone, can I take (*victim*) home for a little while, and (*husband*) agreed ... (Survivor 9, Lines 717 – 718)

Survivor 9 explained how on one occasion she had called her father for help, yet within this he was required to acquiesce to normative cultural practices and request permission to take her home. This was in line with Isgandarova's (2019) observations on collectivist communities whereby male members were given open priority over females. Furthermore, was the element of maintaining honour and shame through controlling the movements of

female members of the family. The silencing of victims was evident within this, whilst equally affirming the concept of male ownership. Moe (2007) argued that victim silencing occurred through social and structural failures, leaving victims socially entrapped within abusive relationships. As a result of ownership attitudes remaining unchallenged, the victim having to sacrifice her own family relationships was captured distinctly in the following extract.

Extract 20

... there was a huge like double standard, like "you're married now, my family is your family, your family don't matter anymore, your priority is with your husband and his family", and I just saw that as so unfair and that's not even from the teachings of Islam, like I know that's not from the teachings of Islam. (Survivor 9, Lines 768 – 771)

Survivor 9 expressed the presence of "double standards" in there being one set of social rules for males and another for females. Whilst the victim recognised that there was no presence of such values from a faith perspective, equally she was held hostage by these being the normative beliefs held by her then husband and his family. Hence, her voice became suppressed and ownership became enforced, with elements of learned helplessness and profound isolation exhibited. This was more pronounced given the context of one voice against the collective. In a review conducted by Pokharel et al. (2020), social expectations and the normalisation of DVA were identified as two prominent factors leading to victim silencing. Collectively such factors illustrate why ownership attitudes went unchallenged.

Victims who were either learning about the faith or new to the faith exhibited extra layers of vulnerability.

Extract 21

It's still no matter what, but I suppose for me as a New Muslim being told by him that I was contracted to him to basically do whatever whenever he wanted, you know, you don't know what you've, what you're supposed to do and it's always the thing of not wanting to displease Allah (*God*). (Survivor 4, Lines 1181 – 1183)

The internal dichotomy between wanting to "please Allah" (God) and being told that noncompliance and disobedience to the husband would go against this, created faith-based conflict for victims. Being new to the faith and having limited recourse to alternative sources of theological knowledge, created the opportunity for exploitation and enforcing authority under the guise of faith. This type of spiritual-based abuse through coercive control further entrapped victims. By undermining the victim's knowledge of the faith, it led to victims selfdoubting and having no choice but to place their trust in their abusive spouse. Oakley and Humphreys (2019) outlined the difficulties in identifying spiritual-based abuse as contributing to DVA and furthermore going undetected and unchallenged within Christian communities. Similar research relating to DVA in Muslim communities remains scarce, with a stronger focus on ethnic groups such as South Asians (Ahmad et al., 2009; Ahmad-Stout et al., 2018; Gill, 2004). Rasool and Suleman (2016) asserted both cultural and structural barriers exploited misrepresentations of the faith to detain victims within abusive marriages in South African Muslim communities. Specifically, they identified religious leaders as contributing to this. Project dldl (Istratii, 2021) identified the importance of having a theologically framed understanding of DVA within the Orthodox Täwahedo Church in Ethiopia. Whilst Isgandarova (2019) and Chaudhry (2013) explored DVA from a Muslim theological perspective, the lived reality in relation to theological overlap remains absent.

Accounts of sexual abuse and rape were recounted by some participants, as discussed within several subordinate themes. Whilst participants were not expected to discuss their specific DVA experiences, many touched upon their experiences of sexual abuse. These were often framed within the context of being under the ownership and therefore command, of their abusive spouse. Of significance, several were hesitant about using the term rape, particularly after having been told by various community members that there was no such thing as marital rape from a faith perspective. This implied that if the faith did not recognise rape then the fault must lie with the victim, thereby imposing blame and guilt onto the victim. The vulnerability in being sexually assaulted significantly impacted how victims perceived themselves, with one participant referring to feeling like she had to be his "sex slave". Fields (2017) detailed how the common myths surrounding rape by strangers as putting victims, and potential victims, at further risk by reducing perceptions of what

constituted consent and rape. Lawson (2012) expounded upon feminist theories of DVA being entrenched within legally sanctioned ownership and subordination of women. There was a clear indication within the data that discussing issues relating to sexual intimacy was generally felt to be taboo. Reavey et al. (2006) highlighted how taboo surrounding discussing sexual abuse for British South-Asian women often transpired at the intersection of gender norms, patriarchy, and cultural normative practices. A pertinent need to create safe spaces for raising this topic was apparent.

This subordinate theme brought to light strong patriarchal values. These were upheld by those perpetrating abuse, families, and communities, and intensified the DVA experience. It resulted in constricting the avenues through which victims could seek support. It further prevented victims from raising issues which were deemed contentious due to enforced cultural norms. The intersection with faith was raised as creating a dichotomy, with victims either being aware of their faith rights or being less aware, and therefore experiencing increased faith-based apprehension.

6.2.3 Superordinate Theme 3: Complexity of DVA Dynamics

The impact of DVA is known to have serious short and long-term consequences on victims (Anderson & Kras, 2005) and any children (Astbury et al., 2000). Within this data, survivors described how the DVA engulfed every aspect of their life and well-being. Yet, only after leaving were they able to reflect upon the severity of the abuse they underwent and the extent of the impact. Compounding this was the isolation enforced both by the perpetrator and/or wider family, and/or community. Hence DVA became complex and cumulative. Additionally, evidence of children being witness to various aspects of the abuse was raised. Whilst this was not discussed in detail, it became apparent that children were very much hidden victims of DVA.

6.2.3.1 Underestimating abuse: "I'd forgotten how to cross the road"

The profound impact of the abuse, both during and after leaving the relationship was described by participants. Participants spoke of the way in which the coercion and control gradually engulfed them. It left no part of their life spared.

Extract 22

And erm (0.3) I can only describe as though someone takes like (.) a roller blind and slowly, you know that blind comes down and it cuts down all of the light and you're in such darkness that you can't see your way out, you honestly can't ... (Survivor 3, Lines 1465 - 1467)

Survivor 3 described the darkness of the abuse as progressively blocking out the light from her life. This left her trapped and unable to see any way out. The idea of losing all hope and feelings of helplessness were alluded to, with victims observing their lives being gradually constricted but being powerless to stop it. Carlson et al. (2002) put forward the high association of depression and anxiety to all forms of abuse for US women within primary care settings. Ferrari et al. (2016) noted the increased prevalence of mental health concerns for British women presenting at DVA services. In line with the feelings of darkness, Islamic tradition puts forward injustice committed against others as being darkness²⁰. Shaaraoui (2006) elucidated on injustice and oppression inflicted upon others as emanating from a place of darkness within those who perpetrate it. Theologically, Shaaraoui further explicated oppression as being a source of darkness for the one perpetrating it, until put right. However, it was clear that abuse also caused darkness for victims and placed unviable restrictions upon their lives. This was a concept discussed by majority of the survivors.

Extract 23

Even something simple like re-telling a news story that I've read, if I didn't say it properly, he'd tell me off, you know once I put the beans on top of his toast and he chucked it all in the bin and told me I'm an incapable bitch or something, if the fries weren't with the burger on time I get told off, if I come home late, I get told off, if I forget something off the shopping list I get told off and when I say get told off, I'm not saying comments, it was two hours straight where I couldn't even go to the toilet. (Survivor 5, Lines 316-322)

-

²⁰ The Prophet Muhammad (pbuh) said, "Verily, oppression will be darkness on the Day of Resurrection." Ṣaḥīḥ al-Bukhārī 2315, Ṣaḥīḥ Muslim 2579.

The idea of micro-management of personal autonomy and freedom through coercive control was presented by survivor 5. Her life became severely restricted whereby every action became a potential interrogation point. This related to basic daily activities that would normally consist of spontaneity and automated behaviours. The resulting abuse would involve being 'told off', implying being treated like a child, being undermined as an adult, and being deprived of both self-governance and independence. The status of such punitive prolonged abusive behaviours is drawn into question. Stark (2007) posited the micromanagement of everyday living as being a human rights violation and akin to torture. Equally, Sussman (2005) raised the ambiguity of whether coercive actions under duress such as prolonged questioning or sleep deprivation, as experienced by one participant within this study, would constitute torture. Bishop (2016) noted the extensive harm caused by deliberate governance of personal autonomy within DVA.

Extract 24

You, you stop talking to people, you become (.) my mental health was awful, absolutely hideous, awful, my anxiety was high erm I wouldn't make eye contact with *anyone*, in the playground talking to other mums, I wouldn't make eye contact with anyone, I wouldn't speak to no one ... (Survivor 3, Lines 415-417)

With victims in survival mode, isolation became self-enforced as a means of protecting oneself from further intrusion. By cutting off from potential social contacts victims could avoid questions that they did not have the psychological capacity to deal with. This was an essential survival mechanism, particularly within the context of the impact the DVA was having on their mental health. Astbury et al. (2000) drew attention to feelings of shame, self-blame, and low self-esteem as being common to DVA victims. The Reva Briefing Paper 1 (Scott et al., 2015) conducted on behalf of the England Department of Health brought to light the high presence of common mental disorders for female victims of DVA. It called on service providers to not overlook this group.

Extract 25

... he just made me feel like so worthless in that moment and I was just like, there've been so many points in our marriage where I've just been so low and so suicidal and I never saw the point in anything and I just, I really, I know it sounds horrible, it breaks me to say it, but I really wanted to die, I really wanted to. (Survivor 9, Lines 600 – 603)

Elements of self-remorse and guilt were present within feelings of suicidal ideation. Williamson (2010) posited such remorse as resulting from self-loathing due to DVA victimisation. The psychological and emotional damage caused by the abuse resulted in survivor 9 seeing no other way out than to die. The abuse had eliminated all feelings of hope, visible within her psychosomatic symptoms. Herman (2015) distinguished between losing the will to live and suicide ideation. The latter she defines as a form of resistance and outlines as being reversible. Across a WHO multi-country study, comparatively against a non-abused sample, an increase of suicidal thoughts and attempts, and emotional distress amongst DVA female survivors was found (Ellsberg, 2008). Boyle et al. (2006) endorsed the importance of screening for suicide ideation of DVA victims presenting in emergency departments. They noted the increased prevalence of self-harm for victims of DVA, with moderate correlation to the number of DVA related assaults.

Victims making excuses in relation to the extent of the abuse was common across the data. Whilst victims displayed a recognition of physical abuse as being unacceptable, other types of abuse were viewed as being less severe and therefore not something to draw attention to. Potentially, other forms of abuse were not considered as abuse. Maruna and Mann (2006) posited the importance of understanding the function of excuse making rather than labelling them as cognitive distortions. Auburn (2005) drew on the potential for excuses to serve as social resources as a means of navigating the social world.

Extract 26

He never hit me, erm he threatened, you know one time there was an argument going on, he threatened me, get out of the room, yeah that's a threat, you know. Erm but he never actually physically had his hands on me in that respect. (Survivor 4, Lines 679 - 781)

Where only physical abuse was recognised and accepted as abuse, excusing the abuse therefore became easier, particularly when this was being reinforced externally. Other types

of abuse were viewed in a diminished manner thereby reducing their perceived severity. Such excuse making mirrored the normalisation of DVA presented by family and community within section 6.2.1.1. Thereby reinforcement of DVA became cyclic, with those perpetrating abuse often denying it outright, wider family and community often minimising abuse, resulting in victims also minimising the abuse. In light of this, victims making excuses became more comprehensible.

Post leaving the relationship, participants spoke of the long-term impact of the abuse. These included anxiety, low mood, and PTSD. Anderson and Kras (2005) put forward the long-term psychological and physical detrimental impact of DVA.

Extract 27

No sorry that's wrong, I did do it (*prayers*) for a couple of years after (*child*) was born and ever since I was attacked by my ex-husband, erm I've been checked out medically and medically they've said no there's nothing there, erm so it's a psychological thing, erm I can't put my head down for sajdah (*prostration*). (Survivor 10, Lines 791 – 794)

Survivor 10 spoke of not being able to physically perform a core aspect of the daily prayers. This consisted of the prostration wherein an individual's forehead and nose (plus palms, knees, and toes) would make contact with the ground during the prayer. This was despite no underlying medical reason having been identified. The long-term impact therefore further intersected with individual identity, independence, and autonomy. Additional spiritual harms continued to be felt by the survivor.

In summary, DVA had a profound impact of the health and well-being of survivors. These included both short-term and long-term harms. Where it hindered faith practices, an integral part of victim's identities, it then compounded the psychological, emotional, and spiritual harm.

6.2.3.2 Victim Isolation: 'I always wanted to get out, but I had nowhere to go'

The presence of acute isolation at various levels was depicted throughout the data. This ranged from within the relationship, post leaving, and in relation to external stakeholders.

Within the relationship itself, victims described feeling alone, with the abuse creating distance between them and their spouse.

Extract 28

...and again it was that control, conforming to what his demands were, to what he wanted from a wife and as much as I felt I was giving (.) a hundred and ten percent of me really, you know working full-time, coming home and doing the things I was needing to do at home (.) but still just desperately unhappy because actually the man that I married, I wanted him to make me feel like I was the centre of his world

RC: Yeah

And actually, I was so far away from that centre, it was unreal, I was in a different stratosphere somewhere (.) and it just didn't, didn't matter to him. (Survivor 3, Lines 354-361)

The realisation that victims were essentially alone in the relationship brought about feelings of loss and mourning. The degree of this isolation within the relationship was felt to be profound. This was regardless of the amount of extra effort the victim put into maintaining the relationship and conforming to abusive expectations. The idea of victims being the ones to keep the relationship going, and genuinely wanting to make it work despite the abuse, was put forward. However, this was viewed as not being a shared common goal within the couple. Within a systematic review Pereira et al. (2020) concluded certain personality characteristics as being associated with higher likelihood of DVA victimisation. These characteristics were outlined as low self-esteem, social isolation, and insecurity. However, they neglect to account for whether these characteristics were present prior to the abuse or were a consequence of the abuse. Added to this dynamic was religiously endorsed pressure not to speak of certain personal issues.

Extract 29

You know there's that other thing of you're not allowed to speak of other people's sins, like when you're new to the religion there's so much of that stuff going around

in your head, you're thinking am I going to be at fault if I divulge this about this other person. (Survivor 4, Lines 1283 – 1285)

Having been given the impression that speaking of injustice would constitute speaking ill of others created complex dynamics. Survivor 4 described feeling guilty and at fault from a religious perspective. This resulted in hesitancy in speaking out and seeking help. It further created a vacuum within which perpetrators could continue abusive behaviours free from accountability. Additional vulnerabilities associated with those who were new to the faith and implications for DVA risk and interventions were indicated. Isgandarova (2019) postulated historic patriarchal interpretations of religious text as imposing silence on females in relation to DVA. Going against androcentrism, Isgandarova argued female victims who speak out about DVA were labelled as not being God-fearing. Further labelling of having a deficiency within their faith was then ensued. Not only did such attitudes alienate victims within their communities, they additionally held potential to alienate them from their own faith. Isolation further permeated at the level of the family.

Extract 30

... for so long I felt like a child stomping my feet saying listen to me, listen to me, and being listened to even when you're using the domestic abuse, it is sad that it's not like a massive, like whoa what is this, like oh my God, this needs to be addressed, it's not like that. (Survivor 8, Lines 655 – 657)

Victim voices being suppressed and disregarded was highlighted. The impression given was one of victims being treated like children who should not be taken seriously and were only "stomping" their feet to gain attention. This undermining of victims recurs across the data. Underlying this was a communal attitude of DVA being negligeable. The excuse-making often carried out by victims presented in section 6.2.3.1 whereby DVA became underestimated, reinforced by the normalisation of DVA enforced upon victims in section 6.2.1.1, potentially underpin some of this damaging cycle. Ahmad et al. (2009) identified enforced silence and loss of social support as being key factors to why South-Asian Canadian immigrant women delayed seeking help. Raj et al. (2006) noted social isolation by wider family as being particular to South-Asian DVA victims.

Extract 31

I, I would just cry, I would feel so helpless, so lost and so alone, I would just sit there the whole evening and cry, it was like I was just bullied into a corner, they'd all gang up on me and I'd sit there just crying. (Survivor 2, Lines 484-486)

The overwhelming nature of trying to get victim voices heard was expressed by survivor 2. Victims were bullied into further silence. This compounded the isolation and feelings of helplessness. Whilst the application of Learned Helplessness theory has been argued to place further blame upon victims (Peterson and Seligman, 1983), Survivor Theory (Gondolf & Fisher, 1988) was argued to recognise the active efforts made by victims in trying to protect themselves and seek help through various means. It further purported the suppression of victim voices within this process as often mistaken for apathy and learned helplessness behaviour.

Victims not being heard at the level of statutory agencies was raised as an additional layer contributing to further isolation. This added to the silencing already experienced within the relationship and family/community context.

Extract 32

And you know that was, if I'd known what was involved in going to the police, like if I'd *really* known I don't know whether I would have done it, but I like to think that I would have anyway just on principle. (Survivor 4, Lines 1397 – 1399)

Survivor 4 expressed being ill-informed of the exact processes involved in seeking statutory and judicial support. This only served to add further layers of isolation and secondary victimisation. The indication of additional trauma was alluded to, prompting survivor 4 to reconsider whether seeking support would have been viable had she fully known the processes involved. Stark (2012) argued that criminal proceedings focused on frequency and duration of offences as opposed to severity, thereby condensing the true experiences of victims.

Isolation continuing beyond the relationship was also expressed by participants. Numerous participants raised the issue of loneliness post-separation. This increased their vulnerability

of repeat victimisation by the same or new partner. Equally were the complexities in relation to actively avoiding encountering the perpetrator in public spaces.

Extract 33

Because I couldn't go to the masjid (*mosque*), I couldn't go to the mosque at all partly because there was restraining orders in place and I was really fearful that you know, that somebody will spot me or go back to my ex-in laws and then they will be there the next time I want to do that, in fact I nearly stopped going to the halal butchers, everything.

RC: Oh gosh

Erm but what I did is, because I still wanted to pray, and I wanted to be able to pray in the house of God, this is the bit that makes me sad, I started to go to their (*support volunteers*) Church. (Survivor 10, Lines 2168 – 2174)

Having to avoid perpetrators post leaving resulted in continued constraining of the victim's world. It dictated certain spaces as being out of bounds in order to maintain personal safety and well-being. The magnitude of this was felt on a personal and spiritual level when it resulted in survivor 10 being unable to go to the Mosque. Faith being imperative to her well-being and identity, resulted in her seeking out an alternative place of worship. In this case the Church belonging to volunteers at a DVA service who had been supporting her. Only then could she perform her prayers, though not with complete peace of mind. Whilst this allowed for her to continue seeking a spiritual connection, it also served to replace the exclusion she felt within her own community. Equally, signs of continued guilt were exhibited, alluding to the long-lasting consequential impacts of abusive relationships despite having left.

To summarise, survivors voiced stark levels of isolation experienced both within their relationships and as a result of the abuse. Wherever they turned, they were met with barriers that exacerbated the remoteness they experienced. Hence the continued isolation impinged on their ability to continue leading a normal life post leaving.

6.2.3.3 Children as Hidden Victims

Children as hidden victims of DVA has been noted within the literature (Peled, 1997). Katz (2016) drew attention to the detrimental impact of both physical violence and coercive control upon the development and well-being of children. Kelly et al. (2014) drew on the wide range of factors involved in addressing the impact of DVA on children, including parenting, specialist support, and the rebuilding required. This study further lends to the impact of DVA on children from the perspective of children as hidden or secondary victims. Children were either direct or indirect witnesses to the abuse within the household. At times children were directly involved and required to intervene. Survivors dealt with this in different ways and expressed the concern they had for what children were being exposed to. Whilst they wanted to prevent them from harm, equally survivors expressed feeling trapped in between the abusive relationship and wanting to be a good parent. Impact on children was present from pregnancy onwards.

Extract 34

So it was all about keeping the peace in the house when my (child) was born you know, I remember him (spouse) like strangling me, having me against the wall when I was pregnant, I remember him beating me up when (child) was born, I remember even after the third child, he threw a plate at me three days after (child) was born. (Survivor 5, Lines 110-113)

The continuation of DVA during pregnancy is well known, with evidence of both increase and decrease in all forms of abuse (Finnbogadóttir & Dykes, 2016). This was outlined as posing significant harm to both the victim and the unborn child. Survivor 5 described severe levels of physical violence during and post pregnancy. Significant levels of anxiety were implied within this. The fact that such patterns of abusive behaviour continued throughout her pregnancies indicated the level and ongoing nature of the abuse. It was further indicative of the potential cyclic entrapment through regular pregnancies. Within a New-Zealand sample Burry et al. (2020) found a high prevalence of control over reproductive autonomy of victims. This included pregnancy coercion, sabotage of contraception, and control of pregnancy outcomes. In line with the findings of Kelly et al. (2014), the short and long-term negative impact of DVA on children was alluded to.

Extract 35

...you know because he'd been, he'd been pinning me down by the throat and my (*child*) said to me you know "why did he have his hand on your neck?", you know. (Survivor 4, Lines 709 – 710)

Children witnessing severe levels of violence, enough to be able to question it, was raised by several of the participants. In extract 35, survivor 4 describes the point at which she realised things had gone too far. It however took her child witnessing her then spouse with his hands pinned on her throat, for that comprehension to transpire. The victim's child identifying the situation as anomalous and thereby questioning it, played a critical role in creating a cognitive shift towards her situation. Victims wanting to protect their children from both short and long-term harm was evident.

Extract 36

Erm so even though we had a trip to the beach and he started hitting me in the car, I turned around and I smiled at the kids, I told them I'm fine, that's it ok because I didn't want them to be scared. (Survivor 5, Lines 128 – 129)

Survivor 5 spoke of trying to be there to reassure her children whilst simultaneously experiencing physical violence from her then spouse. In attempting to reassure her children, her recognition of the impact on the children was demonstrated. Equally, the discrepancy between her reassurances and the physical violence they were witnessing potentially created space for cognitive conflict. Whilst feminist models of DVA often present victims as being helpless within abusive relationships, the Nested Ecological Model (Heise, 1998) presented the importance of context on victim responses. Within this process Dutton (1996) outlined victims as actively navigating the abusive relationship for self-preservation and protection of children. This process was further outlined by Gondolf and Fisher (1988) within Survivor Theory. Dutton (1996) noted such self-preservation attempts as often being misunderstood as passive behaviours due to the disregard of contextual factors.

Extract 37

... he was outside my bedroom so that's where he broke my phone, erm he started being abusive, shouting, swearing, comes downstairs, starts trashing the house downstairs, erm my (*child 1*) called the police, my (*child 2*) I sat (*child 2*) down, I go "look please tell him to stop it, he's trashing our home", and my (*child 2*) came down, he threatened my (*child 2*), "I'm gonna beat you up and I'm gonna, I'm gonna, you know, I'm gonna destroy you and I'm gonna have you on the floor, I'm gonna batter you", all this nastiness ... (Survivor 7, Lines 370 – 376)

Children being directly involved within the abuse was raised by several participants. Survivor 7 described her then husband as becoming aggressive in front of their teenage children. Due to the levels of aggression, there was recognition that external intervention was required. Hence children inevitably became drawn into the process, needing to stand up for their mother and take an active stance against their abusive father. This did not come without consequences. Children then became the direct targets of abusive behaviours and threats. Katz (2015) highlighted how behaviours from abusive fathers isolate, disempower, and confine the world of children. She further noted the long-term negative consequences of this on children. Kelly et al. (2014) further exemplified this by drawing attention to the burden children feel when living within a DVA household. Children being at the forefront of concern was raised across the data.

Extract 38

Thinking how would (*child*) deal with knowing that (*child's*) mum had (*child's*) dad arrested (.) how would (*child*) deal with that (.) and I couldn't do it. (Survivor 3, Lines 514-515)

Survivor 3 raised the conflict she felt in considering going to the police. Being aware that it placed her child in the middle and the potential harms this would create, thereby prevented her from reporting her husband to the police. She felt going to the police would inevitably place her child in a greater predicament. Either way the sense of being trapped by the consequential impact on children was exhibited. Kelly et al. (2014) noted that whilst there were positive opportunities for growth, resilience and recovery for victims and their children

post DVA, it did not come without its challenges. These included anger and anxieties relating to the future.

To summarise, children were very real hidden victims within the DVA. The nature of the abuse meant even if they were not directly targeted or witnessing the abuse, they were still living within highly stressful environments. Equally, due to the confined nature of family households, witnessing the abuse was inevitable. Sometimes extreme levels of abuse were witnessed. The correlating short-term and long-term negative harms has been well recorded within the literature.

6.2.4 Superordinate Theme 4: "Don't think you don't have anywhere to go": Supportive Mechanisms as Life Changing

Victim isolation has been consistently raised as core to DVA experiences (Ahmad et al., 2009; Katerndahl, 2013; Raj et al., 2006). Counteracting this was the notion of social support. Survivors spoke about the considerable impact social support had on their ability to regain autonomy and steer the future direction of their lives. Whilst such support manifested from all sections of their social circles, it also presented itself within their faith principles. Through an active process of reconnecting back to their faith, this further facilitated the ability of victims to reclaim independence, autonomy, and freedom from a life of DVA.

6.2.4.1 Faith as Empowerment

The strength victims gained from their faith was distinct throughout the data. Faith provided victims with direction, motivation, and legitimacy for pursuing a life free of abuse. This was crucial to removing themselves from their abusive relationship. The positive role of faith has been similarly observed with Christian female survivors of DVA (Drumm et al., 2014; Wang et al., 2009).

Extract 39

Very important, I think it (*Islamic resources*) meant a lot to me and I think actually (.) it was probably the one (.) consistent and strong thing that kept me going through the whole thing

RC: Ok

Because without that everything else was just (.) changing and shifting and the goal posts were always moving. (Survivor 2, Lines 797-801)

Survivor 2 gave the example of everything in her life constantly moving, the impression being the more she tried, the more the goalposts would shift. Thereby rendering her to continuously chase after something which became inaccessible. The only constancy was her faith-based resources, consisting of scripture and examples from the sunnah²¹. As a result, this became the tool by which she navigated her situation. It further equipped her with the direction and impetus she required to pursue seeking change. Crucially, it facilitated a legitimacy with which to argue her case, posing challenges that made it problematic for family and wider community to counteract.

Extract 40

... I was getting my comfort from the Qur'an again because I started to read erm the chapter on Women and the chapter on Divorce, and that actually was again you know what helped me to, to even come to a decision, because actually culturally I was being told I was breaking up the family

RC: Mmm

That's what I was being told culturally, you know if I walked away it was all my fault, but when I was reading the Qur'an it was telling me that you know it's not ok to be abused. (Survivor 10, Lines 1700 - 1706)

Differentiating between normative cultural behaviours and faith-based teachings, provided direct clarity that helped facilitate leaving an abusive relationship. Survivor 10 presented the level of confusion experienced by the mixed messaging which existed. Where family and normative practices consistently pointed the finger of blame at her, within scripture she found the opposite. Firstly, it provided a place of solace and safety during turbulent times.

²¹ Practices or saying of the Prophet Muhammad (pbuh).

Secondly, it provided clarity that was lacking from anywhere else and directly condemned abuse. By extension, it provided a legitimate way out. Survivor 6 expanded on this further.

Extract 41

It was a misunderstood element of my own lack of knowledge and understanding of the deen (*Islam as a way of life*), that's what it boils down to, the more I, I now associate myself with educated Muslims, *practising* Muslims, I realise Subhan'Allah (*Glory be to God*) how Merciful Allah is, how easy the path of Islam is actually, we complicated it and that's my shortcoming, it's not the faith, so answering your question has the faith, that was my interpretation. (Survivor 6, Lines 324 – 328)

Victims increasing their own understanding of their faith tradition was described as empowering. Survivor 6 raised distinguishing between a misunderstood version of the faith with an understanding based on holistic knowledge as being critical to creating personal change. Being able to self-examine and implement the changes this brought with it, allowed her to flourish. Not only did it grant her freedom from the abuse, but it further facilitated a clear direction and identity in life free from the oppressiveness of DVA. Understanding where such misunderstandings of the faith originated from was also highlighted as being crucial to this journey of discovery, empowerment and reclaiming of one's heritage.

Anderson et al. (2012) found both faith and spiritual support critical to resilience and growth in the aftermath of DVA.

Extract 42

I think you know historically when Islam was you know first, it was established and over the years that it was being established, there were many female scholars and that, that tradition has died out and because there's hardly any female scholars anymore, it's a very male perspective, for a long time there hasn't been, it's a very male perspective of Islam and it's quite misogynistic in its approach at times and it's always about male rights, men's rights, not women's rights, not how you should treat women, and there's not much of that going on and I think the men need to be educated. (Survivor 7, Lines 535 – 540)

Tracing back one's faith heritage to the science of scriptural interpretation within a system underpinned by androcentrism, permitted victims to appreciate the potential bias they were living under. Approaching faith in a more balanced context allowed victims to place the abuse within a larger system that inherently disregarded women from mainstream society. This provided clarity to thought and validation of their rights as equal citizens within society and the family unit. Ayubi (2019) elucidated on the intricate historical processes involved in how androcentrism dominated religious discourse within the Muslim faith. The resulting impact Ayubi (2019) depicted as the general dismissive attitude towards women and the removal of emotion and compassion within marital relations. This Awan (2014) highlights as being the very opposite of the tranquility and refuge considered to be foundational to marriage and family life in Islam. Alkhateeb (2017) further outlined how remote this was from the core Prophetic teachings of social justice and equity. To then have such perspectives externally validated provided further strength and proved to be a source of hope for victims.

Extract 43

So initially he'd (*Imam*) asked a few questions and then he said "if you're unhappy then you don't have to stay in the marriage at all, Islam does not, you know Islam does not say you need to stay in this marriage and erm you know there are shari'ah councils (*family advisory bodies*) that will help you, there are people here that will help you to, to dissolve the marriage and you don't have to stay with him", and that gave me a lot of hope. (Survivor 2, Lines 283-286)

The role of Imams in providing a holistic perspective was viewed as being critical to victims finding strength in their own voices. This external validation confirmed what victims came to know from their own journey of self-discovery of their faith. Furthermore, it provided external strength in that the voice of the Imam as an impartial outsider with religious authority, could not be discounted by family or wider community. Knowing that victims had a source of tangible support and that there was a way out established within their faith, provided hope for a better future and motivation to work towards that. It opened new doors which previously had been firmly shut by others.

Faith as a source of support held a position unlike any other resource. It superseded any other narrative and paved the way for victims to leave abusive relationships. It did however require victims to return to their faith teachings and impart that knowledge to family and community members. This was not always a smooth process and indicated a deep sense of distance from core faith teachings at a collective level. The supportive role of Imams within this was highlighted as critical.

6.2.4.2 Strength in Support Networks

Participants expressed social support as having a direct impact on both how the abuse was viewed, and in the facilitation of victims leaving abusive relationships. Moe (2007) outlined social support as a common help seeking avenue for victims of DVA. Such support within this data emanated from family, friends, prominent community members, and colleagues. Such individuals transpired as active stakeholders within the DVA. Their presence was dynamic and shaped how the DVA was experienced and how and to what capacity helped could be accessed.

Extract 44

And er my mum was yelling and shouting at him saying "I've never, in all of these years I've raised her single-handedly I've never raised a single hand at her, who are you to raise a hand to her". (Survivor 3, Lines 619 – 620)

Support in the form of providing clarity regarding the abuse was mentioned by several participants. Despite on previous occasions having encouraged her to make the marriage work, when directly witnessing abuse, the victims' mother in the extract above was firm in establishing abuse as wrong. By directly questioning the presumed authority and entitlement to the physical violence being displayed by her daughter's husband, the victim's mother challenged him directly. Through this she established a non-negotiable unacceptability of abusive behaviours. This was beyond the level of condemnation. For victims, this form of outright reinforcement of abuse as wrong provided a stable foundation towards understanding abuse as abuse.

Extract 45

And he (family member) said, "you need to think very carefully", he said "you've got a child, you know you have to think about what you want for your life and whether this is what you want for your life" and he said "no one member of my family would hold it against you, we all know what he's like and none of us would think ill of you if you ended the relationship and I just want to put that out, out there". (Survivor 4, Lines 1145 – 1148)

Survivor 4 spoke about her then in-laws showing her support even though it was against their own family member. Demonstrating an understanding of the abuse, and the fact that they held no expectations of her to remain in the marriage, facilitated the knowledge that leaving was a viable option. This was in stark contrast to the normalisation and covering up of abuse discussed within superordinate theme one. This polar contrast, although potentially confusing for victims, equally implied that wider support was possible and did exist. The high correlation between social support and positive psychological well-being for victims of DVA have been well-documented (Constantino et al., 2005; Tan et al., 1995). Ahmad et al. (2009) specified loss of social support and expected silence as being two key factors why women from minority communities delayed seeking help. For survivor 4 social support provided the reassurance that if she chose to leave, then she could do so with the knowledge that she would be supported by the wider family and would not bear any blame. This direct and explicit form of support was echoed by other survivors.

Extract 46

I remember when I left my partner last year my mum actually said to me "Don't go back, I don't want you to have the kind of life that I've had". (Survivor 9, Lines 19 – 20)

Survivor 9 recalled the distinct message given by her own mother in not wanting to see the same cycle repeat itself. Furthermore, was the genuine expression of wanting to see her happy and not suffer in silence. The potential for breaking the silence and generational patterns was alluded to. Similar life experience in this case led to wanting change for the future generation. Speaking out was potentially risky yet the victim's mother still chose to

speak out. Equally it provided reassurance to the victim regarding freedom for selfdetermination and that an abusive life did not need to be tolerated. This reassurance, even if family members could not always understand the intricacies of the details, was critical to victims feeling supported enough to make life-changing decisions.

Extract 47

Alhamdulillah (*praise be to God*) and he (*survivor's father*) was the one that actually said to me that you know these will be the consequences if you return to the marriage and actually in a stereotypical sort of scenario you wouldn't expect the dad to say that (*laughs*), you'd expect the dad to say you need to get back but actually in my situation it was my dad that said you know, he had more, I think I saw more compassion from him and you know not even one percent of my mum's compassion could compare to. (Survivor 10, Lines 259 – 264)

Such support, even if only from one family member and in direct contrast to messages being given by other family members, nevertheless provided sufficient encouragement for victims to leave. Survivor 10 spoke of her father imparting the opposite message to that from her mother. The unexpected nature of this in light of expected norms surrounding gender roles was raised. In line with such perceived expectancies, Rai and Choi (2018) included lack of social support, patriarchal views, and traditional gender role expectations as being DVA risk factors across empirical studies. The knowledge that family members did not wish to see victims suffering and being harmed, or living an unfulfilling life, facilitated a realisation that they did not necessarily need to put up with abuse. Speaking out against tolerating DVA therefore converged on what was morally unacceptable, rather than what was culturally acceptable as part of normative behaviours. Being presented with supportive options hence became key to empowering victims and facilitating a break within the abusive cycle.

Extract 48

So I have a lot of female friends masha'Allah (*denoting appreciation of God*) around me and they've been supporting me for a year and intensely, not just a phone call here and there, intensely supporting me. (Survivor 5, Lines 463 – 464)

The type of support victims required were described as labour intensive, particularly after leaving the relationship. Having a strong supportive network who were prepared to recognise and provide this support, especially where children were involved, made a critical difference to being able to sustain leaving. Having continuous reliable support was also touched upon by other survivors. Such support provided stability in the face of uncertainty and reduced victim isolation. It also recognised the needs of children within this and as highlighted by Kelly et al. (2014) as being critical to the recovery process, within the aftermath of leaving DVA. The magnitude of the impact of social support was described by one survivor in the following extract.

Extract 49

...the best way to describe it is I felt angels had swooped in, into the house and just fixed everything and then just swooped out and they didn't want anything in return. (Survivor 10, Lines 2159 – 2160).

The safety of support from strangers outside to the community was alluded to. The faith element became increasingly pertinent in bringing spiritual comfort as this particular support came from a group of Church volunteers. Not only was there a reassurance that they would not be reporting anything back to the victim's community, but furthermore there were no expectations placed on the victim in return. Implied within this was a level of expectations being externally enforced onto victims within their own communities, as per the findings of Ahmad et al. (2009).

Social support as a resource was described as critical to understanding abuse as wrong, leaving abusive relationships, and acquiring stability post leaving. It was therefore at times labour intensive. Sources of social support came from numerous stakeholders including family, friends, work colleagues, community members and society at large. Significantly, it did not always emanate from expected sources. Without such social support victims would have struggled to leave. Socia support therefore became a lifeline.

6.2.4.3 "Exit Strategy"

Walker's cycle of violence (1979) demonstrated leaving abusive relationships as being surrounded in complexities. These often related to false hopes, psychological distress, and

confusion as part of the ongoing abuse. Within this study, leaving abusive relationships occurred after cognitive reframing of the relationship, targeted planning, and an expectation that leaving was necessary. In situations where there was a danger to life, external intervention through the police was required, enforcing a clear break to the relationship. Hence in considering leaving, participants raised how they developed an "exit strategy" through various means.

Several participants alluded to and explicitly stated, preparing their abusive spouse for the inevitable separation which was to come. The gradual psychological preparation served as a means to forewarning their spouse and trying to ease the process. By victims taking control, it exemplified attempts at actively managing any potential backlash. Victims taking this on their shoulders exhibited signs of both self-preservation from further harm, in addition to controlling this process to the best of their ability. A number of participants spoke of having a step-by-step plan of how exiting the relationship would take place.

Extract 50

... like I say, had I not been pregnant I wouldn't have possibly gone just then, but becoming pregnant kind of put everything into perspective. It was like now or never, that's what it felt like and so I decided that I was going to come home, I was going to finish my (*education*), so I go back to (*city*), finish my (*education*) then I was going home. (Survivor 4, Lines 1032 – 1036)

For survivor 4, falling pregnant created a cognitive shift which facilitated a more holistic perspective of her situation. Knowing that the future mapped out for her under abusive circumstances were intolerable, resulted in an action plan. Integral to this, and also raised within the previous subordinate theme, was knowing that she had somewhere to go. The cognitive shift in combination with social support facilitated determination to see the exit plan through. Central to this was the presence of a cut-off point regarding tolerating any further abuse. Herman (2015) put forward both establishment of a plan and access to a safe environment as being key to recovery for victims of trauma. Control being within the domain of the victim Herman (2015) further advocated as being critical to the recovery process.

Extract 51

So on the (*date*) I think it was, yes, he was extremely violent and I promised myself next time "you touch me ever again, I'm going to end this, the world can turn upside down, I don't care". (Survivor 6, Lines 370 - 371)

Having been pushed beyond limits repeatedly, survivor 6 experienced a cognitive shift after a very violent episode. Knowing that she could not continue in this way, setting herself a deadline for initiating an exit plan on a cognitive and emotional level ensued. Having created a tangible goal, it now made following through with it more plausible. The need to leave took precedence over any potential consequences. Williamson (2010) put forth challenging the unrealistic world created by an abusive partner as being a highly complex process. Therefore, whilst such exit plans seem well-defined on the surface, Williamson highlighted the profound emotional and psychological confusion and trauma they conceal.

The role of the wider community in decisions surrounding leaving was raised as being of significance.

Extract 52

I think they (*parents*) just thought if I leave on an argument it looks worse, it was coming from both, my family as well as my ex, if you leave on an argument it becomes a thing where people will talk, again the community comes into it where people will talk, "they had an argument and the daughter in law left", where as if I leave on the excuse of going to look after my younger (*sibling*) it doesn't sound as bad to people, even though we all knew I would never go back to the house. (Survivor 8, Lines 279 – 284)

Survivor 8 spoke of the manner in which leaving took place being determined by what the wider consequences to this would be. A carefully constructed public image was maintained in the process of leaving, despite it being common knowledge that the victim was essentially leaving the marital home. In this case and at that stage, wider abuse from in-laws dominated over abuse from her then spouse. Hence leaving was facilitated by both her parents and spouse. Abugideiri (2007) postulated individual actions as being reflective of the family as a whole within collective communities. Within the context of DVA she specified

how women in particular were often associated with notions surrounding shame and honour. DeWall and Bushman (2011) outlined the need for social acceptance as driving behaviours perceived more favourably, thereby reducing the risk of social rejection. In leaving abusive relationships, victims therefore faced numerous levels of considerations which required careful navigation.

In summary, exiting the relationship had to be conducted in a carefully constructed manner. Intending to leave and having a plan of action made leaving more plausible. This however required careful navigation around various considerations. These included their abusive spouse, families, and communities. Victim autonomy over this process was essential, particularly given the level of complexities involved. Social support aided the process and increased the possibility of positive outcomes.

6.3 Conclusion

This study sought to explore the role of community within DVA, from the lived perspective of Muslim female survivors. The findings demonstrated the broader network of considerations when understanding DVA within the UK Muslim population. Mainstream literature predominantly focused on the dynamics between the two individuals within an abusive relationship (Dobash & Dobash, 1979; Walker 1979), with some deliberation extending to meso and macro level factors (Heise, 1998). However, such factors were usually considered within the context of how they impact the DVA dynamics. They did not consider their role integral to the DVA dynamics itself. The data within this study firstly highlighted the element of there being additional stakeholders involved within the DVA. Stakeholders included victim immediate and wider family, family of the perpetrator, community members and religious leaders. Stakeholder involvement was identified as occurring at the intersection of several factors including understanding of DVA, normative practices, and faith. Whilst for some situations the various stakeholders and intersections provided protective factors, for others, the very same factors contributed directly to the DVA. Intersectionality theory proposes that not only do we need to consider the intersect of race, but further attention needs to extend to additional intersections such as gender, patriarchy, and other social and structural factors (Crenshaw, 1990). Crenshaw (1990) noted

the potential for these factors to lend added levels of disadvantage for already marginalised groups.

Within superordinate theme one this manifested in how DVA was viewed as a normal part of married life. This in turn directly contributed to victim's ability to understand their DVA experiences, how they sought help and the levels of autonomy they had over their future. The idea of stakeholders acting as gatekeepers to decisions survivors tried to pursue was put forward. Additionally, community attitudes towards perpetrators further shaped survivor experiences and available opportunities to take action. Tolerating abuse became embedded within marital life as a normative practice under the guise of religious obligation, with significant stigma attached to divorce (Uddin, 2020). Hence for Muslim female survivors, both the pressure to stay and the decision to leave an abusive relationship was inherently intertwined with the stakeholders involved and the impact of intersections.

Within superordinate theme two the distinctness of cultural normative practices against authentic faith principles, was proposed as increasing the complexities faced by Muslim female victims of DVA. Cultural normative practices were described as being imposed upon victims by the various stakeholders, despite at times being in direct opposition to faith-based principles. As a result, social conformity of females was expected, overarched by an understanding that women were the property of males. The historical universal patriarchal nature of societies has been argued to have paved the way for social and societal structures which have facilitated the perpetuation of DVA against women (Lawson, 2012). Isgandarova (2019) postulated a combination of collectivists principles whereby the needs of the collective were put before the individual, combined with androcentric based hermeneutics as directly contributing to this. In combination, a form of social entrapment ensued, enforcing victim silencing, and thereby increased complexities in seeking help (Moe, 2007).

The level of difficulties involved within DVA dynamics was raised by victims as being all encompassing within superordinate theme three. Whilst some areas drew parallels with mainstream literature, additional considerations were also highlighted. The negative impact of DVA particularly on mental health is well recorded (Ferrari et al., 2016). Stark (2007) went as far as describing the micromanagement present within coercive control as being akin to torture. In addition, the detrimental spiritual impact was voiced by victims. Reflecting the

darkness emanating from acts of oppression, defined as taking away the rights of others (Shaaraoui, 2006), DVA was expressed as causing darkness for victims. The extensive isolation faced by victims was described as occurring on numerous levels. These included within the relationship, at a family level, within communities, at a statutory agency level, and on a spiritual dimension. The challenges in navigating such layered intricacies became all engulfing. Gondolf and Fisher (1988) proposed through Survivor Theory that many of the efforts made by victims within this navigation were often misplaced as learned helplessness. Such theoretical approaches further highlight the extent and lived reality of victim isolation. The issue of children as hidden victims was further raised as compounding the complexities faced by victims. The detrimental impact of DVA on children is well-established (Peled, 1997, Katz, 2016). Children were either directly witnessing DVA or being required to intervene. There existed an underlying reference to the continued presence of children within the household during the abuse. Whilst lengthy details were not explored by participants, some of the examples provided and the very presence of this subordinate theme highlighted the importance of not overlooking this issue. Protecting children was at the forefront of victims concerns however, they were often restricted in how they could support and protect children due to the dynamics of the abusive relationship.

The possibility of victims living transformed lives, free from abuse was presented within superordinate theme four. Victims referenced faith and social support as being key components which facilitated empowerment, autonomy, and independence. Whilst some consideration has been given to the role of faith and spiritual support in developing resilience within the aftermath of abusive relationships (Anderson, 2012), the literature heavily focusses on the Christian faith (Drumm et al., 2014; Wang et al., 2009). Emphasis is also present on the experiences of South-Asian survivors (Lee, 2014; Raj & Choi, 2018), with very scarce exploration of the role of faith within the DVA experience itself. This study highlighted the importance of exploring those elements of an individuals' identity which they consider integral to their being. Hence the exploration of how such facets can hold the capacity for creating considerable change. Hussein (2006) drew attention to the importance of not defaulting to secular approaches of understanding individuals and their communities when their origins stem from different social systems. Victims described a process of active

re-engagement with their faith in order to reclaim their rights to a life free from abuse. Furthermore, this protective factor proved to be a tool that stakeholders could only challenge to a limited degree, due to the integral nature it held to their collective identities. Rather, stakeholders were bound by the religious evidence, even when it opposed cultural normative practices. This distinction is critical for considering interventions and preventative measures. The categories of stakeholders who proved to reinforce the abuse and the normative expectations that victims must remain within abusive marriages, were also the same stakeholder categories that enabled and facilitated victims being able to leave abusive relationships. This was guided by the intersection of DVA understanding, the role of normative practices, and holistic approaches to faith. Within this the opportunity to break the cycle manifested. Victims being able to manage and control this process Herman (2015) postulated as key to recovery post-trauma. Hence carefully devised exit strategies based upon faith and social support as protective factors, provided this very avenue.

Limitations

This study consisted of a 90% South-Asian sample. Whilst 68% of UK Muslims are Asian (MCB, 2015), this does not reflect the broader range of ethnicities present within Muslim communities. Therefore, further research with a wider representation of Muslim communities is recommended, particularly in consideration of ongoing changing demographics. The sample further does not reflect the experiences of those who were unable to seek help or had no recourse to public funds. It is anticipated that these groups may present different or additional layers of considerations. This also applies to those with limited or no English language skills. The study could also benefit from deeper research into the experiences of reverts²². Whilst this study included two reverts, this highlighted increased levels of isolation and dynamics surrounding power structures which requires further investigation.

The researcher's previous background as a practitioner working with survivors provided valuable experience in the handling of sensitive information. However, it was imperative to ensure such previous experience did not impact on the data. This was mitigated by the focus

²² Those new to the faith.

of the research being on the role of the community. Previous practitioner work focused on psychological support towards recovery. The analysis was regularly checked by supervisors to ensure it reflected the data, thereby facilitating rigour and integrity (Noble & Smith, 2015). The researcher's insider role as a member of the UK Muslim population further facilitated an understanding of the varying dynamics within close-knit communities. Participants were thereby able to express concepts already known to the researcher without the need for lengthy explanations. This facilitated the opportunity for participants to focus on the topics they wished to raise, rather than lengthy explanations of customs and practices.

Implications

By overlooking the wider network within which female survivors from the UK Muslim population operate, the full lived experiences of DVA becomes discounted for this demographic group. Furthermore, the potential for relevant and tailored interventions becomes restricted. This study demonstrates the need to adopt a more holistic approach to understanding the DVA dynamics for UK Muslim populations. A particular emphasis is placed on wider stakeholders directly involved within the DVA process, and the resulting consequences of intersections upon DVA understanding, normative practices, and faith. This is an area that has remained largely unexplored within the literature. Such knowledge indicates potential opportunities for interventions which support victims/survivors and facilitate long term change. This knowledge development and capacity for interventions further requires an understanding of challenges faced by external agencies, working to support and create change within communities. This is explored in Chapter 7.

Chapter 7

Empirical Study 2: Experiences of Healthcare and Judicial Professionals working with the UK Muslim Population within the context of DVA

7.1 Introduction

DVA is known to have a significant negative impact upon mental health and well-being across all members of families (Astbury et al., 2000). These include long term consequences on emotional, psychological, and physical health. Despite this, a meta-synthesis analysis demonstrated the identification of DVA within mainstream mental health services as lacking (Trevillion et al., 2014). Approaches to mental health further impact on how DVA is considered. Faroogi (2006) observed the rich contributions by Muslim Philosophers within the field of mental health and wellbeing. Farooqi highlighted the historical importance placed on seeking mental health support for collective and individual holistic wellbeing within Muslim communities. However, help seeking behaviours in practice are known to vary within communities. Ciftci et al. (2013) noted that within the context of mental health, minority communities faced stigma within their own communities, in addition to external stigma. These included the intersection of race, religion and age. Within British Pakistani communities izzat (defined as honour and self-respect), has been identified as negatively influencing help seeking behaviours (Gunasinghe et al., 2019). In seeking individual support, women were expected to conform to rules surrounding social conduct and manage community-based conflict arising from their help seeking. This included social consequences of breaking expected behavioural norms, indicating the difficulties in reaching out for support at a community level. At the level of religious leaders, Tobah (2018) observed US religious leaders as actively promoting community members to uphold a collective supportive approach to those requiring mental health support, as an alternative model. This was found to be in direct contrast to the emphasis placed on individual action within biomedical models. Despite emphasis on help seeking, Samari et al. (2018) concluded Islamophobia as an additional factor within US populations as preventing health equity through resulting systemic discrimination.

Understanding the disparity between help-seeking at a community level in contrast to service provision is critical to improved DVA support. Whilst some research with front line service providers working with US Muslim women is available (Milani et al., 2018), similar UK data is scarce. The purpose of this study was to explore issues surrounding DVA within the UK Muslim population from the perspective of Healthcare and Judicial professionals. As such the focus was to explore the wider community issues professionals encountered. Healthcare in this context is used to refer to broader supportive healthcare professionals, not limited to the medical/nursing field. Such professionals are often exposed to detailed accounts of individual cases within their wider community context, over a longer duration, and to more intimate depths. Two superordinate themes emerged from this data: (i) The Muslim Community: "Caught in a vortex of change whilst the whole world watches" and (ii) DVA in close knit communities: "...Talking to the whole tribe". Central to the findings was implications felt at the individual level in relation to how the collective community was purported. This had a direct impact on both individual and collective identity and therefore how DVA was approached internally. This is an area that has to date, remained absent within the DVA literature.

7.2: Findings

Two superordinate themes were identified. Three subordinate themes were identified within superordinate theme one, and four subordinate themes within superordinate theme two. Please refer to Table 4.

Table 2 Study two themes

Superordinate Theme	Subordinate Theme
1: The Muslim Community: "Caught in a vortex of change whilst the whole world watches"	1a. Navigating Internal Pressures
	1b. External Pressures: "From being South-Asian to being Muslim"
	1c. Identity Struggle
	2a. Community responses: "Stoking the fire"
	2b. The complex and all permeating nature of DVA

2: DVA in close knit	2c. Collectivism Dynamics - Impact on addressing DVA
communities: "Talking to the whole tribe"	2d. Breaking the mould to create change

7.2.1: Superordinate Theme 1: The Muslim Community "Caught in a vortex of change whilst the whole world watches"

Superordinate theme one focussed on internal and external challenges experienced by Muslim communities. The intersection of such pressures upon identity was raised. Participants felt the Muslim community to be "caught in a vortex", implying chaos and confusion and being pulled in different directions. This was depicted as occurring simultaneously to being under a worldwide lens, whereby it was felt the "whole world" was observing Muslim communities. Participants described how the combination of internal and external pressures impacted identity formation, both at an individual and group level. This was further perceived as having a direct impact on how DVA was addressed within Muslim communities. The manifestation of such internal and external pressures and the resulting impact on identity, will be discussed in the following three subordinate themes.

7.2.1.1 Subordinate Theme 1a: Navigating Internal Pressures

Internal pressures were felt to manifest at several levels. Firstly, in relation to denial of DVA held at a community level.

Extract 53

"Uh I think it's acknowledging you know if there is to be any change in uhm attitude then we have to acknowledge that we have a problem, if we don't acknowledge it as a problem then we are never going to address it". (Professional 8, Lines 375-378)

Participants expressed that DVA could not be addressed as the problem was not being acknowledged collectively within the community. This led to attitudes which permitted the continuation of DVA without any accountability. Such denial was felt to be particularly pertinent to creating a culture of silence, preventing the possibility of any long term, tangible, change.

An added layer of internal pressure related to the role of Imams within the context of DVA. Participants spoke about the power held by Imams; the conduit for this power was sometimes through the pastoral care which Imams provided. The role of Imams has been traditionally associated with the leading of prayers (Maqsood, 2005); however, Kamp (2008) outlined the role of the Imam as shifting to more social orientated responsibilities. The broader role, encompassing both religious and social/pastoral duties, was brought up as an area of concern by participants, who did not think that all Imams would have had appropriate training or skills to manage this broader role.

Extract 54

"Misunderstanding of their faith. These imams and these scholars don't have any academic backgrounds in the field at all. They've just been appointed that role by the community. And then they've been given this title and they feel that they have the right to actually say these things. And some of these people can be perpetrators themselves and they have misogynistic views that they instill and promote in the community." (Professional 1, Lines 208-212)

Although the above extract indicated communities holding power in appointing Imams, equally, it pointed to the weight of the authority granted to Imams once they were appointed. Participants expressed concern at some Imams who, once within that position of religious authority, did not fully understand the repercussions of promoting misogynistic views. This was seen to be compounded in cases where Imams held views which promoted DVA behaviours and felt entitled to be vocalising them under the banner of the religious title they held. This not only legitimised such views (and behaviour) within the community, but furthermore indicated the lack of awareness surrounding the appropriateness of endorsing such views. Such complexities intensified if the Imam himself was perceived as a potential perpetrator; being granted authority by the community resulted in immunity from accountability. The importance of tailored training of Imams to the UK context was highlighted by Geaves (2008). He outlined the need for a careful balance between traditional Imam training routes being aligned with the needs of the UK Muslim population. Geaves (2008) drew particular attention to making distinctions between UK and international cultural differences and societal norms. Equally, Kamp (2008) drew attention

to the wide remit expected of Imams within communities, raising question relating to those put forward by Geaves (2008).

The intersection of the power held by Imams and the power held by communities was put forward as intensifying the internal pressures. In particular, the challenges this presented for the effective utilisation of Imams as a conduit for change.

Extract 55

"......the topics that they touch on are safe topics that they feel they can quite easily talk about and this uh gets brushed under the carpet, so what I've suggested is that maybe an idea would be for them to invite ulama (scholars) and speakers from other towns who could come in as a guest and as a guest they would have the license to raise kind of uncomfortable topics and uhm they - the local imams could reciprocate if they went as speakers to those places so that way the topic is raised, uhm but despite that it's an area that people (the community) don't want to talk about and it's only when it gets to crisis point that people enlist outside help and sometimes it's too late". (Professional 8, Lines 89-96)

The power held by community reinforcement of taboo subjects was viewed as being interwoven with the importance of the Imam. This taboo was raised as a potential source of conflict between the Imam and the community, thereby becoming a means of imposing restrictions upon the Imam's role. A tangible impact of this was DVA being 'brushed under the carpet', implying it being left unaddressed and not to be raised in public spaces. To address the topic would be to break unspoken rules and create internal conflict between the Imam and the congregation. Speaking out potentially risked one's position within the group. Denial has been known to serve as a self-protective mechanism (Freud, 1937), thereby facilitating the avoidance of discomfort within social contexts. Baumeister et al (1998) note the use of denial as a protection of self-esteem. Whether it can be restricted to strictly self-esteem or more closely related to preservation of the group however is drawn into question. Social identity theory upholds increased negativity towards deviating in-group members as a means of group preservation (Marques et al., 1988). Equally, Korte (2007) put forward group preservation occurring through well-established processes relating to

pressures around conformity. By inviting external Imams, it indicated the creation of a safe entrance and exit within which "uncomfortable" and sensitive issues could be addressed by someone outside the immediate community. This served to prevent creating upset within one's immediate community whilst still addressing sensitive topics. Furthermore, Imams would be afforded protection from any potential conflict due to their external role as a visitor to a congregation other than their own. Eaton (2012) outlined the very purpose of the prayer as being rooted in reminding the congregation about belief and the markers of faith, good treatment of others being central to this²³. Hence, cycles of avoidance on the Mosque platform as a result of unspoken rules, not only resulted in creating a lack of understanding of DVA issues, but further delayed help seeking behaviours. Such avoidance is in conformity with the Theory of Planned Behaviour (Ajzen, 1988) whereby one or more unfavourable constructs are likely to result in inaction. In this case unfavourable constructs included negative community attitudes towards the subject of DVA, a social expectation of avoiding taboo subjects and an expectation that raising such subjects would be met with hostility. Such factors not only potentially explain the reluctance on behalf of Imams to speak about DVA on public platforms but equally may contribute to the reluctance of victims seeking help.

Understanding the wider and nuanced structures within which communities operate therefore become critical to understanding how DVA is understood and addressed.

7.2.1.2 Subordinate Theme 1b: External Pressures: "From being South-Asian to being Muslim"

Pressures externally imposed upon Muslim communities as one collective, were raised as being critical to identity and the addressing of sensitive issues. These were deemed as emanating from various constituents of the macro level structures. Participants expressed a gradual shift from being recognised as a minority community by virtue of ethnicity, to being identified within a faith lens through a process of labelling, stigmatisation, and

²³ The Prophet Muhammad (pbuh) said: "I have only been sent to perfect good character." Narrated by al-Bukhari in al-Adab al-Mufrad (273).

discrimination. Participants spoke about this labelling being applied to all, whilst being based on the actions of individuals.

Extract 56

"I don't know if it's any different to how it's always been as immigrants. Because if one of us does something wrong, apparently, we represent entire communities. Just in case you hadn't noticed. Whereas if a white person does something wrong, it's just that white individual, white person. So, I think that burden is something that we all carry". (Professional 4, Lines 1055-1058)

The stigmatisation of all within the group due to the actions of individuals was seen as a collective burden, externally enforced. This was viewed as a great injustice in comparison to how the majority population group was treated. Such group labelling was felt to have produced a collective burden, felt and carried by everyone associated with that group. Goffman (1968) explained stigma as being related to physical, personal or social differences, by virtue of which individuals or groups were seen as being 'different'. This difference rendered social rejection plausible through the implication of inferiority and danger associated with the stigmatised group. Metzl (2009) put forward the exclusion of structural bias and stigma from Goffman's theory, which further isolated groups of people. Elias (1956) focused on a community approach, with emphasis on the more salient group projecting and idealizing their power whilst simultaneously denigrating the outgroup. This served to emanate perceptions of distance between the two and so reinforce processes of stigmatization of the outgroup, with emphasis on being the other. Howarth (2003) drew attention to the discrimination experienced as a result of stigma, explaining it as being actively employed and contributing to the reduction of life opportunities. The feelings expressed in the above extract drew parallels with the Social Curse phenomenon proposed by Kellezi and Reicher (2012). In direct contrast to Social Cure, whereby social processes related to group identification facilitated improved health and well-being, Social Curse pointed to these very processes being detrimental. Where normally social group processes provide positive social identification and meaningful life experiences, within the Social Curse phenomenon, such affiliations and processes lead to negative and damaging experiences and identification. Major and O'Brien (2005) presented this as particularly prominent when group

stigmatisation, discrimination and inequalities were present. This was exemplified in the following extract:

Extract 57

'And then I think the representations of us, 'all the time'. And even though if I never grew up seeing women from my background in the public eye, look at the world of the politics, of sport, of drama, we've got women who look like us at every level and in every profession. But what you hear and what you see all the time is the Shamima Begum's, the Asian taxi, the Muslim taxi drivers. That's what you see and that's what you hear. I think that defensive position is quite a natural position. And I have to constantly pull myself out of that when I hear people criticizing Muslims or criticizing Islam. I have to go 'do you know what? This actually isn't about me. This is about those people as individuals. And I, what I need to challenge is the whole community label'. (Professional 4, Lines 1059-1067)

The pressure of external stigma in the form of negative media narratives was expressed as not only intense, but furthermore continuous. Despite a strong presence of diverse role models from minority communities in a range of public arenas, a skewed version of Muslims was seen to be presented on media platforms. The frequent negative media examples (such as 'Shamima Begum'), was raised as a point of contention, creating increased animosity and division. Stereotypes were seen to be perpetuated by such coverage, which negatively focused on individuals or groups of individuals. The implied message was that all Muslims were the same. This was seen as further contributing to the Social Curse narrative, portraying Muslims as different and not having the same level of humanity as the wider population. This was in line with Goffman's (1968) theory of stigma whereby social discreditation occurs on the basis of identity. It thereby became an everyday challenge which was being grappled with, within the daily lives of ordinary Muslims. The challenge further extended to professionals, thereby raising questions regarding how those from the Muslim population with more challenging socio-economic conditions were managing this.

Similar issues in relation to Muslim men specifically were raised.

"... well lots of Muslim men think there's a stigma against them because when they go to family court, sometimes they are seen as you know, someone's got a beard, someone looks a bit threatening you know, er and sometimes the media kind of plays a part and they think, obviously the media kind of projects Muslim men as dominating, these people who don't have any feelings, these people who are kind of you know they don't have no respect for women, and because also the media thinks that Islam doesn't respect women, you know Islam kind of make women sub, to be subjects and to be objectified and this and this and that's not what Islam says but then I guess that plays a part in sometimes in how people are perceived as well". (Professional 7, Lines 578-585)

Media stereotyping was raised as contributing to common misconceptions surrounding public perception of Muslim men. Such misconceptions included mistreating and having a derogatory attitude towards Muslim women, being aggressive, dominating, disrespectful, cold and emotionally detached. Such stereotypes were further projected onto the faith itself. The prevalence of media stereotyping was felt to have a direct impact on individuals when attempting to engage with services, in this case the family courts. Jaspal and Cinnirella (2010) asserted that the presentation of Muslims in the media as a hybridised threat have contributed to negative social representations. Moscovici (1971) first discussed the idea of social representations in line with values, ideas and practices. Howarth (2003) expanded upon the idea of social representations of specific features of communities being used for limiting power, in this case the beard as a representative feature of Muslim males. By differentiating Muslim men and their faith, it facilitated the legitimacy afforded to the projection of stereotypes. In line with extract 6 above, Good et al. (2007) proposed stereotyped individuals feeling less valued as a result of the social categorisation and related stereotypes they were associated with. Howard (2000) placed emphasis on the recognition of identities being established within sociopolitical contexts. Within this Howard (2000) drew attention to the structural inequities resulting from intersectionality and thereby the multiple disadvantages pertaining to specific, usually minority, groups.

Therefore, external structures could not be divorced from internal community cultures and norms. DVA in particular required placing within this broader context for a more holistic understanding.

7.2.1.3 Subordinate Theme 1c: Identity Struggle

A clear theme within the data was confusion surrounding the intersection between ethnic cultural normative practices and faith, coupled with a reductionist approach to faith. Siddiqui (2012) postulated the rigid and one-dimensional manner adopted towards interpretation of scripture as resulting in a deep fragmentation of faith from its intended purpose. Ayubi (2019) further elucidated on androcentric interpretations resulting in stringent restrictions being placed upon both females and communities at large. This presented a range of dilemmas regarding collective identity development and maintenance, with a further ripple effect on how DVA was approached internally within Muslim communities. Identity thereby became centred on upholding cultural normative practices in the guise of upholding faith principles.

Extract 59

"It is, it is, what we have in Islam is, sometimes Islam is misunderstood by people, even the people who practice, because what we tend to do, we inherit cultural practice, and then we grow up with it and then we think that's Islamic" (Professional 7, Lines 400-02)

The presence of an underlying misunderstanding of the faith was expressed, extending to both those who practiced faith and those with lower levels of practice²⁴. Upbringing and cultural practices were viewed as key contributors whereby individuals and potentially entire communities remained unaware of the impact of their normative practices upon their understanding of faith. This was deemed problematic due to the resulting incorrect or misplaced attributions with faith. Isgandarova (2019) postulated the importance of

²⁴ Practice of the five pillars of Islam is generally associated with being practicing. These are testimony of faith, five daily prayers, fasting during Ramadhan, paying zakat whereby 2.5% of one's annual wealth is given in charity, and hajj (pilgrimage) once in a lifetime if one has the means.

distinguishing between the faith and ethnic cultures, especially when considering the manifestation and addressing of DVA. She expounded upon Muslim women being most suppressed within societies where a high presence of patriarchy and male hierarchies was present. This she traced back to being representative of historical precedents and norms in ethnic culture, as opposed to being based on faith principles.

Extract 60

"Erm but also I think sometimes what is, Islam sometimes is conflated with people's culture, sometimes they confuse that with their cultural values, so often it's a lot easier for people to accept culture when it's given Islamic tag, but also women can accept it more readily especially if the women doesn't know their rights."

(Professional 7, Lines 102-5)

A complex lack of clarity between faith and cultural norms emerged, with culturally framed reference points being used to address complex and sensitive social issues. The most problematic element within this was deemed to be actions carried out under the assumption of it being faith-based. This was felt to be further exacerbated by the general lack of knowledge regarding faith principles, particularly on issues such as women's rights and hence gave credibility to the repetition of specific narratives such as the permissibility of DVA under a faith banner. This not only perpetuated misunderstandings, but further deepened the conflation of cultural normative practices with faith through misleading labelling. This was deemed as creating legitimacy for oppressive cultural practices. With this basic level of misunderstanding surrounding faith, cultural normative practices became the avenue by which standards of behaviour could be filtered through, despite any detrimental consequences.

Extract 9

"From home. Yeah. They come from home. I think that misogynistic views have come in over the years. So, I, I. From what I think and feel is that Islam came and it was to give women their rights. And that was achieved. Yeah. So you got some feisty women in Islam and there were mothers of you know Islam and they would, you know, give a good two pennies worth going towards the necessary for their views. But they were

still always respected for those views. And over the centuries over the centuries it's just (.) misogynistic views have just started to integrate and assimilate into the faith. And people held on to them." (Professional 1, Lines 304-10)

The core of the issue was deemed to be the transposing of systems and social frames of reference from countries of origin, onto the UK context. This resulted in the undisputed acceptance of certain behaviours within everyday life, regardless of their appropriateness and without due consideration for the specific UK context and the potential ensuing problems. This was seen as having a direct relationship to the move away from core faith principles. The idea of gradual dilution of the faith via misogyny was presented. Current practices and levels of understanding were considered far removed from the original faith ethics and principles. This was particularly within social issues pertaining to women's rights. Women's voices being central to society within Muslim communities were compared against current day discrepancies, their absence considered stifling to discourse. Damaging views, particularly misogynistic narratives, replacing faith principles altogether was deemed as highly problematic within this process. This exacerbated the levels of confusion surrounding the distinction between faith and cultural norms. Isgandarova (2019) and Ayubi (2019) postulated androcentric interpretations as having played a key role in this gradual dilution, with ethics overlooked and culturally based patriarchal norms influencing interpretation. This they argued resulted in the female voice being significantly removed from society and as a result, faith being approached in a reductionist manner.

Extract 10

"Because we are so self-centered, and the religion is only limited to some rituals. Which (*it*) is not. I think, this is one of the major aspects. Spirituality is missing." (Professional 3, Lines 148-9)

The deeper spiritual aspects of the faith, which traditionally underlined all external practices, were deemed to be absent. This implied the practice of faith as being hollow and empty, devoid of its foundational substance. Central to this was reductionism as a direct result of self-absorption. This was further seen as resulting in a loss of collectivism principles of care and concern for the wider community and society.

The integration of identity both at an individual and collective level therefore was not only directly related to how DVA was understood, but was further deemed to be integral to how DVA could then potentially be addressed. Identity in this instance required understanding from the cultural frames of reference as per lived reality for Muslim individuals and communities.

7.2.3 Superordinate Theme 2: DVA in close knit communities: "...Talking to the whole tribe" Superordinate theme two highlighted further complexities relating to DVA in the UK Muslim population. The idea of DVA not being confined to two individuals, but inextricably linked to the family context and the broader Muslim community was consistently expressed.

7.2.3.1 Subordinate Theme 2a: Community responses: "Stoking the fire"

Negative community responses were deemed as having a direct impact on how victims, survivors and perpetrators of DVA were treated.

Extract 611

"So I've come across a few where they have this idea that the, once you've got married you're a daughter-in-law and so you're no longer part of the other, your family, and so you need to seek permission in order to go and visit them and you're not supposed to visit them very much. Erm, and yet their daughter, will be in and out all the time, of the family home, her home. And it's, there's a lot of you know contradiction and double standards in the treatments. Yeah." (Professional 1, Lines 416-420)

Controlling expectations placed upon married women resulted in isolation from family and support networks, creating a web of wider coercion and control. This resulted in an environment in which mistreatment and control of females could flourish, and where victims had restricted means of accessing support. This was reflected in findings by Raj et al. (2006) who reported abuse by in-laws as significantly correlated to intimate partner violence for South-Asian US women. Social isolation, control and expectations of domestic servitude enforced upon females were all mentioned by participants.

Extract 12

"Extended family members. So, if she was to share you know her concern it might be the case that uh the external family or even her, in her own family would say well you just get on with it." (Professional 1, Lines 86-88)

The barriers encountered if women did try to speak up were seen as permeating from the wider family structure, including the victim's own family. Abuse was considered a normal part of married life and therefore an expectation for females to accept it and get on with life prevailed. By speaking out, victims became the ones who were causing the problem, rather than the abuse being the issue.

Extract 1362

"Well again this absolutely sits within culture, to separate, to get divorced is a huge no, you don't do it, erm, or that you know, the stigma and the taboos about being divorced, or people's, again (inaudible) projection that once I'm divorced I'm gonna be on my own and I'm gonna struggle to get re-married or I'm gonna be shunned or disowned by my family, or I'll have nowhere to go because my parents won't take me back, there are so many reasons unfortunately why people can't leave bad marriages." (Professional 2, Lines 133-138)

In instances where divorce was sought, the barriers and challenges increased manifold. The isolation experienced in pursuing autonomy and personal rights filtered down to everyday functioning and acceptance within the community. Participants spoke about victims being rejected both by their own families and the wider community, non-conformity resulting in becoming the 'black sheep' of the group. A sense of being viewed as both a private and public failure was alluded to. Lofland (1969) proposed social categorisation leading to the association of specific dimensions with specific social categories. This, Lofland stated, included the expectation of certain behaviours which if broken, could be met with punishment by wider society. This was exemplified in extract 13 whereby Professional 2 stated such punishments included being shunned or disowned, reduced future marital prospects, and being excluded from the community. Goffman (1963) put forward the notion that once an individual was marked, they become stigmatised and dehumanised

through being labelled as different, in this case via divorce. Campbell and Deacon (2006) argued that, once marked, their position became devalued by the wider group. Divorce was not considered an option and careful navigation of daily life ensued, stipulated by the internal rules of stigma. Such consequences of non-conformity were deemed overwhelming for the majority, resulting in non-reporting and the perpetuation of DVA cycles. Campbell and Deacon (2006) draw attention to the increased complexities in challenging stigma when multiple layers of stigma were experienced. This they argued was particularly applicable to minority communities. Within this data various intersections added to multiple layers of potential stigma. These included gender, minority communities, faith and cultural normative practices. Each brought with it a distinct layer of interwoven complexities. The damaging impact of multidimensional intersects across race and gender in particular, within the lives of marginalised groups have been well established within intersectionality theory (Crenshaw, 1989). In light of such intersections, an attitude of general acceptance of DVA behaviours was felt to be present at a community level.

Extract 14

"...there's a kind of, you know, the generation certainly before mine, of this is my fate. This is my kismet. This is what I must accept, you know this is Allah's Will. And almost like, you know, that constrained approach to life of, you know, we're taught as women from a really young age, that one of the things that Allah really hates is divorce. And then our families add all that sort of cultural pressure on top of the religious pressure. So, I think that generation stayed put." (Professional 4, Lines 170-174)

The idea of acceptance of "kismet"; of DVA being part of one's destiny and therefore left unchallenged, was put forward. This depicted apathy towards the existence of DVA within the lives of women, something accepted and normalised. Added to this was the misuse of religious teachings to apply further pressure for conformity. Religion therefore became a tool with which to enforce culture and continue coercion and control by the wider family and community. Though expressed as being more common to previous generations, participants viewed the after-effects as having filtered down the generations. Isgandarova (2019) set out how such cultural normative behaviours and attitudes continue to exist under the banner of faith. These issues were further compounded by a widespread nature of silence.

"Uhmm... victim women I'd say are normally ... ignored first of all, uhm I think people sort of pretend they can't see it happening in people's homes. Um I've had incidences where, you know, even people I've known that have said 'oh I could hear the banging going on next door, but I just didn't want to get involved' um, you know we sort of asked the husband if everything is okay but then if he says yes we just sort of shied away from it uhm." (Professional 9, Lines 142-146)

Female victims being invisible within communities was expressed as a concern. The suppression of victim voices, particularly within South-Asian communities is known to be a prominent barrier to disclosure (Latif, 2010). This is reflective of the victim silencing predominantly due to micro-level factors, present across western and other countries (Pokharel et al., 2020). By having invisibility imposed upon them, it facilitated disregarding and overlooking of DVA issues. This remained the case even in instances with more apparent evidence. Bystander apathy was raised as a means of further denial of the problem. Social influence and inhibition have been noted as contributors to bystander apathy (Hoefnagels & Zwikker, 2001). By creating distance, DVA was treated as someone else's business and therefore did not warrant intervention. Equally was the inhibition related to breaking social norms around acceptable levels of intrusion into the lives of others. Latane and Darley (1970) specified the five-step cognitive processes which motivate individuals to help, with perceived successful intervention dictating bystander intervention. If the risks involved were deemed too great, this resulted in no intervention. In this context, intervening in the case of a neighbour, within a close-knit community that shuns DVA as taboo, was potentially viewed as posing numerous wider risks with no positive outcome.

Ahmad at al. (2009) and Wellock (2010) presented the role of the wider family and community views as preventing DVA reporting. Wellock (2010) identified that preservation of family honour for social conformity purposes played a critical role for UK South-Asian women within this. Ahmad et al. (2009) traced the roots of such views further, highlighting that significant decrease in literacy levels under British rule within South-Asian countries resulted in women being relegated from leadership roles to the domestic sphere. This they argue culminated in facilitating patriarchal cultures. The consequential impacts on present day Muslim

communities therefore must be considered in understanding DVA manifestations and responses.

7.2.3.2 Subordinate Theme 2b: The Complex and all Permeating Nature of DVA

Current research within the DVA field is synonymous with intimate partner violence (IPV) and focuses on there being a sole perpetrator (Chester & DeWall, 2018). Close knit communities rest upon wider interconnected social structures (Triandis, 2001, 2018). This was seen to impact manifestations of DVA within this population group. Participants raised the issue of DVA stretching beyond the couple, to the extended family and community members.

Extract 16

"Um (.) some were physical um but there was a lot of emotional psychological domestic abuse. And it wasn't particularly just come from their partner. It could come from a number of family members. And then they would do it collectively. (*I: That's interesting*) So they would be you know uhh they would coerce together." (Professional 1, Lines 75-78)

The idea of numerous perpetrators and DVA being a collective process was put forward. More subtle and difficult to detect forms of abuse factored more widely than physical abuse. This implied increased difficulty in identifying DVA for what it was, with additional layers of complexities in addressing and disclosing DVA. DVA being systemic within families was implied for some cases, highlighting the wider struggle and isolation faced by victims.

Extract 1763

"Yeah. I'll lose everything, I'll literally lose not just my family, but my respect, my honour, and my community, because everyone talks in the community. They say that the community talks a lot and they backbite a lot. Um so there's not any support around them." (Professional 1, Lines 520-522)

The interconnected nature of the community was seen as preventing victims from speaking out. Risks pertained to losing an individual sense of being, identity, and belonging. A general lack of awareness, understanding and support for victims was presented as stripping victims

of any sense of safety within the community. Instead, victims would be exposed to greater vulnerability from community judgement, shunning and exclusion if they were to speak out and seek help. Elias (1956) put forward females within communities seemingly holding power through the ability to enforce collectivism. This Crow and Laidlaw (2019) elucidated as being achieved through female networks within the community which carried both praise and blameworthy news regarding its members. Through this process, individuals thereby became pressured into conformity targeted at group preservation.

Extract 18

"You rejected their daughter or you rejected the husband, so that means that families fall out, you know like aunties and uncles, and then people take sides and...(laughs) quite a lot of it is hectic because sometimes when I give couples counselling then kind of people come to see me and I'm like look I'm only going to talk to you both as a couple, but then after that I feel like I'm talking to the whole tribe because everybody is like, all the uncles and the aunties...and everybody (laughs) and they're not talking about themselves, they're talking about you know people in Pakistan, people in Canada, people in America, (inaudible) making phone calls." (Professional 7, Lines 425-431)

Divorce was viewed as acting against entire families. A sense of there being no distinct boundary between the couple, the immediate family and wider community became apparent, with decisions made at a personal level having far-reaching consequences. This resulted in both victims and professionals needing to consider the wider context. Dhami and Sheikh (2000) referred to consanguinity as traditionally providing a safety net, ensuring marriage partners could be fully vetted for their ability to be stable partners and members of the family. Within abusive relationships, the consequences of this on extended relational contexts increased complexities in dealing with DVA cases.

Extract 19

"I think the main patterns I, that that the silence, the silence and the patriarchy being stronger, more powerful, erm I think you might find and there might be something about if indigenous, indigenous White British women are more empowered to speak out potentially, they are more in touch with the benefits, they, justice system erm maybe less fear for the police, I don't know but I definitely think that, I mean not all" (Professional 5, Lines 75-79)

Extract 19 put forth the idea of a powerful patriarchal force being at play, a factor put forward by Dobash and Dobash (1979) as fundamentally underlying DVA. The idea of Muslim women being less empowered to access rights and services was raised, with a wider collective fear of the system hindering access to support. Ahmad et al. (2009) found limited knowledge regarding resources and services as one reason preventing South-Asian US women from accessing help or leaving abusive relationships. This was in addition to the heavy presence of patriarchal social norms. Such continued patriarchy was seen to dominate and exacerbate the silencing of victims. Walby (1989) put forward the idea of a private and public patriarchy, in addition to a system of social structures impacted by time and space. Where private patriarchy was defined as being central to the home to the exclusion of participation within social arenas, public patriarchy she identified as being collective and systemic. Walby (1989) further outlined male violence against females as being rooted in such systematic structures, further reinforced by the generic state silence. Hence within this data, being let down systemically was seen as reinforcement of staying within abusive relationships.

Extract 20

"...so you know I think what is needed is you need to have the resources in place and interventions in place and then raise expectations because by raising expectations for victims and those expectations not materialising gives the opposite signal, because then she'll go back and tell other women 'look you know I tried, look where I am, I'm back at home', now I can't say anything to him because he'll say well if you want to go you can go, you've come back without me". (Professional 8, Lines 336-367)

Having gone against all the challenges and barriers, a victim who was finally able to leave an abusive relationship was seen as being destined for failure if adequate service provisions were not in place. Baker et al. (2010) highlighted the need for better housing provision for

victims of DVA across society. Deficiencies in service provision was deemed as resulting in power being handed back to the perpetrator, providing further leverage and resources with which to continue DVA behaviours. This was viewed as reinforcing the message that seeking help only resulted in more damaging outcomes.

Participants expressed Muslim women as being trapped in an endless cycle, with additional layers of complexity and subsequent isolation. Factors ranging from a personal, community and wider society and systemic level were considered to be failing Muslim female victims.

Rose (2015) put forth IPV as being a state crime by virtue of the systemic harms against specific social groups. Such systemic harms she argued were evident within policies, practice and ideologies. The potential relation to DVA within Muslim communities is highlighted within this research.

7.2.3.3 Subordinate Theme 2c: Collectivism Dynamics - Impact on Addressing DVA

The interconnection of nexus accumulation relating to community responses and the all-permeating nature of DVA was felt to have a direct impact on how DVA was understood and addressed. This was further amplified in relation to superordinate theme one, whereby the perception of being watched whilst the community struggled with internal and external challenges, was expressed.

Extract 21

"Or even, you know, how bad it is, more awareness about things happening you know in the, within the family, that it does happen, and if it does we need to talk about it, I think it's still a bit hush hush, things are kept under the carpet or brushed under the carpet." (Professional 6, Lines 302-304)

In line with superordinate theme one, participants expressed the existence of denial within certain pockets of the community. By brushing DVA under the carpet it permitted denial of DVA and thereby continued negative attitudes towards victims. Denial also resulted in a lack of understanding, subsequently impacting potential community interventions. This was in line with the various potential purposes denial served, as discussed within superordinate theme one.

Extract 21

"That for some people they go to an Imam or a shaykh and they get told just be patient, that's classic, have sabr (patience), that's a classic one and then they go in an abusive relationship for the next thirty years, or erm they're told oh just wait it out or it'll get better, these things get taken so lightly that victims don't get heard or people that are in difficult marriages just, that somebody, the imam or shaykh is so almost hell-bent on making sure the marriages survives, that they are so influential and persuasive in making those people stay together but not taking into consideration that these are two people that are, that are hurting, that are in pain, that are not happy." (Professional 2, Lines 401-407)

Participants spoke about how women's concerns were dismissed. They were told to be 'patient', implying they were currently being 'impatient', an adjective with negative connotations. The impression given by such advice is that being patient is a means of elevating spiritual hierarchy, if endured. This transferred the problem back to the women, indicating it was their inability to cope rather than the abuse being wrong. The reason for this was given as the need to maintain social stability, as this was more important than individual pain and suffering. Maintaining social order superseded the need for individual protection from harm.

Sylaska and Edwards (2014) review of the literature highlight negative reactions often manifesting in a variety of forms including victim blaming, minimisation, and pressure to behave in a certain way. Awan (2014) presented that domestic life from a holistic faith perspective originated under the ethos of tranquillity and being conducive to nurturing human growth and development. Participants demonstrated that this understanding was not shared by all and became problematic when those of religious authority upheld views in opposition to this. Being seen as representatives of faith, the views held by those with religious authority had the power to tangibly influence personal decisions as outlined above.

Extract 22

"I think it silences women. If they do speak up or they move away, I think they become really, really isolated, really isolated." (Professional 4, 823-824)

Victim silencing and significant isolation as a result of how DVA was approached internally was raised as being highly problematic. Victims were seen to be on their own, with no avenues of support, therefore forced to remain in abusive relationships. Those who did speak out risked losing everything.

Extract 64

"When, you know, when you hear Muslim women talked about it's only in the context of honour base violence, forced marriage, FGM, and, you know, 'no actually we also have domestic violence and child abuse and all of those other things'. But you're reluctant to say that because it kind of makes it feel like we've got everything". (Professional 4, Lines 1075-1078)

Attention was drawn to the negative public narrative surrounding Muslim women. With a considerable list of social issues already deemed to be plaguing Muslim communities, professionals expressed a reluctance to draw further negative attention to an already marginalised group, within a marginalised population. The implication was a danger of DVA not being adequately addressed and raised within public settings. This inevitably impacted the visibility of the needs of Muslim female victims of DVA and risked DVA being further pushed to the background.

An added layer to the interconnection of nexus was raised as external systemic bias. The perpetuation of negative stereotypes was viewed as having the potential to exacerbate the complexities involved. The concern this time focused on specific negative narratives concerning Muslim men and the resulting impact on addressing DVA.

Extract 24

"That's got to influence, you know I think there's more prejudice now than erm than previously, certainly when I was at (*place name*) which was 2001, 2002, there just wasn't that prejudice that there is now"

I: Mmm, so how does that then play out in your, in the cases you deal with?

"Er well I think it plays in, in amongst the multi-agencies particularly, so you'll have police who will be driving a real agenda about Channel panel, erm why are we not intervening, why are we not moving, really pushing our agenda, and trying to influence our intervention, erm and then a lot of fear in schools, from schools, there's a lot of fear from other agencies." (Professional 5, Lines 336-339)

The issue of Muslim men being treated in a distinctly negative manner in comparison to White Caucasian males more broadly within society was raised by participants. Participants identified Muslim families as facing multiple layers of marginalisation and discrimination in how they were viewed and treated within the wider population. This was viewed as having progressively worsened. Pressure to intervene based on national security drives, such as the Channel²⁵ programme, was seen as interfering with the provision of family services. Muslim men being pathologised under one homogenous group was alluded to, with the worst being assumed to apply to all. Aked (2020) reported the subversive mechanisms through which secretive counterterrorism measures were being introduced into medical care, under the guise of mental health services. Entitled as vulnerability support hubs, it was found that NHS medical professionals, were being encouraged to report patients deemed to be at risk of radicalisation, under Prevent. In line with the broader narrative at the macro level, it was found that Asians were being reported four times more than non-Asians, and Muslims being reported eight times more than non-Muslims. This suggested a wider pattern of systemic profiling, discrimination, and labelling as was evident within this doctoral research. The impact on help seeking behaviours within this cannot be disregarded. Campbell and Deacon (2006) identified the concept of 'layered stigma', whereby the categories of marginalisation and stigma overlap. Such layered stigma was reported as having a direct impact on DVA

-

²⁵ The Channel Programme forms part of the UK Government Prevent Strategy, targeted at countering terrorism and radicalisation. It has been running since 2007 and draws in the use of educational institutions to demonstrate due regard for potential vulnerable individuals at risk of being radicalised (Thornton & Bouhana, 2019). Thomas (2016) draws attention to the counter productiveness of the programme, arguing that rather than build relations with Muslim communities, it has served to cause further divisions through its surveillance approach. Similar damaging impact has been found within the NHS whereby the duty to report concerns has led to predominantly Muslim referrals based on religion, as opposed to clear cause (Aked, 2020). The author raised concerns in relation to any referral being automatically entered onto police databases, regardless of the outcome, hence the report title of False Positives. The further alienation of UK Muslim communities when trying to access basic human rights was also raised.

disclosures, "I think it comes back to women not wanting to phone the police" (Professional 5). Knowledge of the wider systemic discrimination and prejudice faced by Muslim males was seen as directly impeding the reporting of DVA. In line with this, Rose (2015) elucidated on policy and practice as contributing directly to the occurrence of DVA and hindering of service provision.

Extract 25

"Mmm (.) yeah I think they're going to blame the mother, the female even more so for the violence because it's inevitable isn't it, he's gonna be even more oppressed, a Muslim man in the UK and so yeah, he's gonna blame her for calling the police, and I think potentially the wider family as well". (Professional 5, Lines 351-353)

In disclosing abuse, Muslim women were seen as contributing to the wider narrative of Muslim men being portrayed as violent in nature and derogatory towards Muslim women. This was felt to have a potential ripple effect into the family and wider community. Therefore, this was viewed as having serious negative repercussions on DVA reporting. Disclosures thereby became inadvertently connected to the wider stereotypes and narratives circulated within society in addition to national policies and practice. Of direct relevance to this was that P5 was not a Muslim, thereby could not be said to have a vested interest with this population group.

7.2.3.4 Subordinate Theme 2d: Breaking the Mould to Create Change

Participants were unanimous in their views that social change was possible. The role of communities as powerful agents of change within this was raised. Several perspectives as to how this could be achieved was put forward. The first included combatting stigma, and the second developing better understanding of healthy relationships as an integral element.

Extract 26

"Well I think it, I'm...I think there's two sides to it, on the one side there's something around trying to beat the stigmas and taboos around it which I think is a good thing, but on the other side what that's actually highlighting then is there is something then going wrong, fundamentally in people's understanding of what a healthy

relationship is then. Divorce is a consequence of an unhealthy relationship (.) what is the source of divorce, it's an unhealthy relationship, and where does an unhealthy relationship then come in from? It is from families and communities who teach what a relationship is." (Professional 2, Lines 316-322)

Changing negative perceptions and judgements regarding DVA within Muslim communities was raised as being critical to the change process. Within chapter 6 it has been seen how such views kept victims entrapped within DVA. Furthermore, after leaving it further shaped their freedoms and autonomy. Narratives surrounding the understanding of healthy relationships formulated within families and communities was further felt to be the missing element in understanding DVA at its core. Providing alternative healthy relationships scripts within families and communities was thereby deemed essential to creating positive change. This was expressed as being core to addressing DVA and by extension, addressing the related taboo and stigma. Without focus on root causes, tangible and long-term change was perceived as being limited and superficial. The idea of people as powerful agents of change was presented. Similarly, Isgandarova (2019) presented the importance of a balanced theological understanding of suffering as being integral to addressing DVA. She noted that a distinction between human actions that lead to unnecessary suffering, as opposed to believing suffering to be divine tests, within relationships was required. The need for a fundamental cultural shift within communities was indicated. With such cultural perspectives being integral to Muslim identity, any positive changes were deemed to hold potential for creating tangible internal change. The inference within this signified that once internal change occurred, the potential for external services and provision to be more effective forms of support was potentially possible.

Extract 27

"Er on a family level they've got to (.) they've got to hear it, that this isn't acceptable. That this part, this part of, this part of their culture isn't acceptable from our faith perspective and remove those misconceptions of what they mean. Ummm (0.3) so, it has to be a social change." (Professional 1, Lines 376-378)

Part of removing the stigma whilst changing the conceptual understanding of healthy relationships was expressed as being in how DVA was responded to. Outright intolerance of DVA was felt to be required. Addressing misconceptions between cultural normative practices and faith, was deemed central to this and potential DVA contributors. Clearly defined alternative public narratives were voiced as being integral to initiating widespread social change. This included returning to foundational faith principles of safeguarding the family unit from harm. Asamarai (2018) highlighted the role of negative cultural normative practices in impeding access to mental health services. Such culturally informed perspectives on DVA and mental health were seen as being contradictory to faith principles as exemplified in extract 27. As with DVA, the resulting harms were significant.

Extract 28

"...So I think in order to ensure that we don't stray from the orthodox position we've held onto concepts er and we've held onto context er, they expressed it within their understanding and their language that was involved at that time, and we need to look at the wider context er that if you look at the body of the Qur'an and Sunnah on matrimonial matters or discord between husband and wife, then what are the guiding principles, right? So it has to be in line with that, that you understand it." (Professional 8, Lines 203-209)

A fear of being seen to stray away from authentic faith teachings was put forward as being one contributor to DVA. This created a superimposition of faith understanding whereby interpretations developed under alternative contexts were being transposed onto present day practices. In line with Siddiqui (2012), this implied the suppression of protective faith factors which had the potential to both alleviate and transform DVA issues. The need to move away from a reductionist approach to faith was viewed as a means through which faith, in its more holistic adoption, could facilitate addressing and alleviating DVA. A return to core faith principles, in spite of cultural customs was promulgated as a tangible way forward. Faith as a protective factor was mentioned throughout the data. Positive utilisation of faith-based resources within marital counselling was emphasised by Asamarai (2018) and Abugideiri (2012), particularly as being a distinct entity from cultural normative practices.

The role of Imams in harnessing this protective factor was expressed as being fundamental to this process.

Extract 29

"Oh huge, huge, a huge role to play. You know these are people that erm, people in the community will take their word as gospel literally, or that they hold such a status in their view that they are very influential and powerful in their communities, so they have a *huge* responsibility to talk about these issues so that the community that they serve, they can start to be the antidote for it." (Professional 2, Lines 387-90)

The wider role expectations of Imams as outlined by Kamp (2008) was raised in extract 29. Imams were seen as being highly critical to initiating and maintaining long-term change. Imams, held in great reverence by ordinary Muslims, were viewed as the antidote to DVA by virtue of holding such power. Equally the recognition of fulfilling this immense responsibility was highlighted. By combining this power with being actively vocal, participants viewed Imams as being imperative to the process of creating positive change. Such internal narratives were in direct contrast to the external pressures around anti-Muslim sentiments participants expressed in superordinate theme one. Whilst participants recognised the negative impact of such sentiments, equally they held conviction in the power of the collective to create change through utilisation of holistic faith-based protective factors.

Community, and by extension social capital, has been put forward as a prerequisite for structural change. Homan (2015) proposed such change as facilitating the path for greater effectiveness of public services. Homan further specified that community change entailed five constituents; the power to move individuals towards the desired outcome, community organisation in order to facilitate reaching the end goal, the sustained drive for action, the inclusiveness of cultural parameters, and suitable receptiveness permitting change to occur. Informed by classical works, Keshavarzi and Khan (2018) explicated upon constituents of change at an individual level as having three stages. The first being introspective self-awareness, the second psychosocial equilibrium, and the third integrative wholeness. Whilst their discussions were within the context of therapeutic interventions, their arguments support the Islamic principle of change needing to occur at the individual level in order for

greater social change to occur²⁶. This holistic approach towards creating change, within cultural frameworks relevant to Muslim communities is a unique perspective of this research. It demonstrates the potential for utilising and building upon existing community and faith-based resources for creating sustained change, meaningful to the individuals and communities concerned.

7.3 Conclusion

This study sought to understand how DVA was understood and approached within the UK Muslim population, from the perspective of Healthcare (non-medical) and Judicial professionals. It further sought to identify earlier points of interventions. The data presented a wide spectrum of issues requiring consideration when addressing DVA within this population group.

Superordinate theme one highlighted the pressures in the navigation of Muslim collective identities within a wider sensitive context. Internal and external pressures were being grappled with, whilst a worldwide audience was felt to be scrutinising the Muslim population. Such scrutiny was often perceived to be negative. Internally, denial of DVA at a community level was expressed, rendering it a taboo subject. Community enforced silence hindered the potential for interventions. In particular, the opportunity for Imams to effectively intervene and address DVA from public platforms. Equally the promotion of misogynistic views by some Imams were felt to be endorsing DVA behaviours, raising questions relating to the appropriate training of Imams. Potential contributors to the internal pressures manifested in the form of external pressures. Substantial negative media narratives and stereotypes were deemed as dominating the wider public narrative concerning Muslims. This was viewed as being further exacerbated through national and international security drives, and related legislation and policies. Thereby the systemic pathologising of Muslim males ensued. With the stereotyping and stigmatisation of both Muslim males and females, a reluctance to draw further negative attention to Muslim

-

²⁶ 'Indeed, Allah will not change the condition of a people until they change what is in themselves'. (Qur'an, Chapter 13, verse 11, Saheed International Translation).

communities transpired. This had a detrimental impact upon both DVA reporting and service provision.

A reductionist approach to faith was described as resulting in cultural normative practices superseding faith. Consequentially, emphasis transferred to reputation management over adoption of core faith ethics. The implication being priority was given to maintaining a public group image. This extended to avoiding sensitive and potentially damaging issues which would further perpetuate negative external stereotypes. Hence the facilitation of spaces within which coercion and control, and exploitation of vulnerabilities, could take place. Such image maintenance, Goffman (1963) outlined, as being one response to stigma. Participants expressed that this came at the expense of nurturing and cultivating the deeper transformative and protective elements upon which faith was considered to rest. Otters (2012) outlined the all-encompassing nature of Islam and the transcendence it required from reductionism of any form. Otters (2012) argued this required living by relationships to one another, rather than a set of rules and regulations. The data however highlighted the conflict of this within the everyday lives of Muslims, whereby the collective representation of the community was prioritised over protecting individuals from harm. Returning to the universal principles underlying Islam was raised by participants as a potential protective factor.

Superordinate theme two highlighted issues pertaining to the extended nature of the community and the implications this had on addressing DVA. The idea of DVA not being confined to two individuals was unanimous within the data. DVA was often experienced as a collective process with various stakeholders, and thereby stipulated a wide range of considerations when exploring interventions. The immediate couple was often inextricably intertwined with the wider family. Furthermore, distinguishing between where the family ended, and the community started became a blurred process. The interconnected nature of communities was expressed as having a tangible impact upon reporting and addressing DVA. This consisted of both negative repercussions and protective factors with potential to be harnessed.

The presence of various forms of patriarchal values as outlined by Walby (1989) was raised as being central to permissive attitudes towards DVA. Unequal treatment and gendered

expectations were felt to be direct collusion with perpetrators. An impression that males generally had immunity from judgement, in stark contrast to the labelling and shaming females underwent, was expressed. Additionally, was the idea of males having no restrictions placed on them, whilst females were required to carefully navigate their way through rules pertaining to social acceptability. The impression that women would remain labelled regardless of what they did was given, hence leaving no choice but to remain in abusive relationships. This was particularly so if victims wished to remain part of the community, which sometimes extended to her own family. The bias towards victim blaming was also viewed as contributing to oppressive unspoken patriarchal rules, upheld systemically. This was regarded as being compounded by women themselves, potentially through absorbing harmful attitudes which resulted in creating negative self-narratives, thereby hindering leaving abusive relationships. Internalisation of guilt associated with leaving abusive relationships therefore was not surprising. As such, victims felt compelled to seek out the advice of Imams and religious figures regarding personal decisions. Stigma and taboo surrounding divorce further advocated the need for spiritual guidance in leaving abusive relationships.

Collectively, DVA was accepted as part of married life and therefore victims were also expected to tolerate it. This further facilitated taboo and stigma associated with divorce and disclosing abuse. Shame, and its associated cultural practices, have been found to affect South Asian female victims' ability to leave abusive relationships to varying degrees (Latif, 2010). A continuous perpetuating cycle was expressed as existing, requiring individuals to literally break free. Underlying this was the personal and tangible struggle in opposing longestablished cultural normative practices.

A fundamental imbalance in the understanding of healthy relationships was raised as being core to facilitating and exacerbating DVA. This was therefore deemed integral to creating change. Participants highlighted the potential power held by Imams in creating change. Earlier points of intervention were identified as influencing the public narrative through such power conduits, inclusive of the provision of alternative relationship scripts. Returning to a holistic and all-encompassing conception of faith, devoid of a reductionist approach was asserted as central to implementing sustained positive change. Imams were seen as holding

access to such faith-based protective factors which directly challenged the acceptance of DVA behaviours.

This study has brought to light the complicated and interwoven nature of intersections within UK Muslim communities, and the impact this has on the understanding and addressing of DVA. Whilst some of the details of DVA manifestations overlapped with mainstream literature, the findings highlight the unique and complex array of considerations when addressing DVA within this population group. Where literature on mainstream population groups focus on the abusive dynamics between two individuals within the relationship, this research highlights the extended network of relationships and dynamics present within DVA in UK Muslim communities. Without understanding such nuances, missed opportunities for interventions both internally and externally, are anticipated.

Limitations

In order to elicit cultural nuances which underpin this area, the study design deliberately recruited Muslim participants from healthcare and judicial backgrounds. This could potentially be viewed as a limitation however, May and Pope (1995) elucidate on the importance of theoretical sampling reflective of the research question. The one participant who was not Muslim verified the strength of this design. Whilst he was unable to expand upon specific cultural nuances to the same degree, his broader observations were in keeping with the data based on substantial experience working with the UK Muslim population.

All participants worked with either victims or perpetrators and their families. This necessarily implies a reflection of cases wherein help is either sought or concerns are raised. It therefore does not represent situations where help is not sought or unable to be accessed. Such cases may present further considerations not yet accounted for, which would be important for broadening the understanding of DVA within this population. Whilst this study did not seek to explore the experiences of Muslim male victims of DVA, it highlights the need for research in this area, given the complexities and intersecting nature of the themes arising.

The researcher's own biases, being from the Muslim community, potentially influenced some of the analysis. Berger (2015) emphasised the importance of careful self-monitoring of beliefs, biases and personal experiences for qualitative researchers. The analysis was regularly reviewed by supervisors with a view to staying true to the data and filtering out personal perspectives. This included identifying and removing analysis stemming from the researcher's own constructs and experiences in a bid to maintain the balance referred to by Berger (2015). This also contributed to maintaining rigour and integrity as outlined by Noble and Smith (2015). Equally, the researcher being from the Muslim community itself helped to elicit a deeper understanding of the issues being referred to within the data, particularly in relation to normative practices and cultural nuances.

Implications

This study provides a deeper understanding of the broader factors which require navigating when addressing DVA within the UK Muslim population. It highlights some of the challenges experienced by professionals when working with this population group. A key element being the interconnected nature of communities and external stereotypes and narratives, having a tangible impact on how DVA is approached and addressed. Creating social change through the power of the community and power conduits within this, to harness protective factors is recommended as an earlier intervention point. Service providers being aware of the wider contextual factors impacting access to services is imperative. Whilst this study provides this insight at a service provision level in relation to wider societal and community matters, it does not reflect the direct experiences of victims within the community setting. Such a perspective is important for understanding the context within which victims find themselves, barriers experienced and protective factors prior to accessing services. This has been explored in chapter 6.

Having gained richness in data from this study and the previous study with survivors, it is important to reflect on the collective learning gained from these. This is explored in further chapter 8.

Chapter 8

Study 3: Web Model of Domestic Violence and Abuse in Muslim Communities – a Multi Perspective IPA Approach

8.1 Introduction

Current DVA theories and models therefore are heavily focused on factors relating to risk and propensity towards DVA behaviours. With forensic interventions primarily based upon RNR principles (Andrews & Bonta, 2011; Herzog-Evans, 2017) within the context of the criminal justice system (CJS), this is to be expected. Herzog-Evans (2017) drew attention to the western foundations of RNR and the lack of consideration for diversity. This Herzog-Evans (2017) argued made the RNR a more generalist approach to addressing offending behaviours and furthermore discounted the underlying political and social contexts. This indicated a lack of consideration for minority communities and wider culturally nuanced factors contributing to DVA specific behaviours. Despite increased adoption of the Good Lives Model (GLM) within CJS interventions, the GLM approach presents similar issues as the RNR. Whilst providing greater flexibility to consider broader protective factors, the GLM once again centred around those perpetrating offending behaviours (Ward, 2002). This resulted in a continued lack of representation regarding DVA manifestations as per the victim/survivor experience.

Although feminist theories provide greater consideration of victim experiences through an emphasis on the aetiology of DVA, they are however restricted in terms of their representation of DVA within minority population groups. Some effort to expand DVA understanding was presented within the Nested Ecological model (Heise, 1998). Within this, the importance of lifespan context was considered. These included factors at the level of the microsystem (relationship context), exosystem (community context), and macrosystem (wider society context) as pivotal components. Such an approach provided a broader account of DVA aetiology. By bringing together systems present over the life-course of an individual, identification of interdependent factors potentially influencing DVA behaviours was facilitated (Ali & Naylor, 2013a). Hence considerations missing within other

sociocultural perspectives were accounted for albeit framed from the lens of individuals perpetrating DVA. Despite capturing some of the differences within macro level factors, the ecological model remains largely absent of cultural nuances within DVA manifestations, including impact of varying family structures within other non-Caucasian communities. It further lacks consideration of intersectional factors and the implications of the extended nature of close knit communities within a DVA context. The resulting impact upon victims is therefore discarded. Without accounting for such nuances, a fully comprehensive understanding of DVA manifestation remains obscured.

This chapter brings together the two previous studies through a multi perspective interpretative phenomenological (MP-IPA) lens. The MP-IPA approach as a stage two level of analysis facilitated exploration of the data at a broader level, identified interconnections, and examined subsequent impacts on DVA manifestation, understanding, and barriers to addressing DVA. This provided depth at a macro structural level, whilst simultaneously facilitating individual and meso level depth. Ward et al. (2006) argued that knowledge can be broadened through adopting theories/models focusing on depth or providing alternative branches of learning. Eisikovits and Bailey (2016) argued that multiple models permit better opportunities for appropriate interventions and therefore increased possibility of effective outcomes. Likewise, Ward et al. (2006) argued theory appraisal demonstrated one theory alone as not necessarily constituting holistic evidence. This is particularly relevant when considering minority communities and population groups within the West. In analysing the contributions of Sigmund Koch, Morawski (2001) noted the advocation of relating theory to cultural practices in order to develop theories to their full potential. In this regard Ward et al. (2006) elaborated on the importance of clarity regarding function and scope of theories/models in order to maximise on potential applicability.

The two data sets were analysed for overarching themes. These themes were then used to develop a graphical representation of what the data presented. The resulting outcome was the web model of DVA. It is argued that this model has increased capacity for understanding the extended and nuanced nature of how DVA manifests for UK Muslim communities. Furthermore, the model can be used to identify both victim and perpetrator vulnerabilities and protective factors, thereby facilitating increased support planning between statutory

bodies and community-based resources. The model thereby accommodates elements relating to minority communities not accounted for within existing models and theories, including the ecological model.

8.2 Findings

The MP-IPA approach resulted in the identification of four themes:

- I. Rebuilding life after DVA: Challenges at every level
- II. DVA as diffused: "How dare he ... invite them into my home to play judge and jury"
- III. Denial of Intersectionality: "You're a feminist"
- IV. Structural barriers to addressing DVA: "You're a different colour from everyone here so you have to work that much harder to be recognised"

These themes will be explored below.

8.2.1 Rebuilding life after DVA: Challenges at every level

Throughout the data, both survivors and professionals in the field highlighted the range of challenges that victims were required to navigate. These spanned across the life course of the relationship, to accessing services. Initial challenges were identified as overcoming the first hurdle of accessing support as victims. This, however, was often intertwined with their DVA experiences, with the impact of the abuse itself shaping their ability to engage with meaningful routes to recovery.

Integral to this was the idea of not recognising all forms of abuse as being forms of DVA. Without this recognition there was limited understanding regarding the serious impact of DVA on psychological wellbeing. The data demonstrated that, across family and social networks, there was a consistent narrative of DVA being understood in reference to physical abuse only. Whilst this itself was also overlooked and deemed part of marital life, it further resulted in other forms of DVA going unrecognised.

Extract 65

So, if she (*victim*) was to share you know her concern, it might be the case that uh the external family or even her, in her own family would say "well you just get on with it". (Professional 1, Lines 87-88)

DVA was accepted as inherent to married life, thereby all forms of abuse became minimised and normalised. An indication that victims were absorbing messages of minimisation, through a process of osmosis or direct projection was present across the data. As a result, an inability to comprehend the harmful impact of abuse was present. This led to beliefs surrounding not being entitled to live a life free of abuse. Rather abuse became obligated and something to be endured. Seeking support therefore, was sometimes not even considered a plausible option. Similarly, within US Muslim communities Hammer (2019) outlined an inherent culture of silence. Such silence was asserted as further normalising DVA. Under such conditions, other outlets of psychological relief were adopted.

Extract 66

Yeah for sure, that's one like big thing in my marriage, that the psychological and the emotional abuse was way bigger than the physical abuse but like there's layers. It's quite complex because I, like, we'd have like arguments, he'd say like things to me and it would cause me to self-harm. (Survivor 9, Lines 322-325)

The conflict in experiencing abuse yet feeling that accessing support was not an option was demonstrated throughout the data. Psychological and emotional abuse was often placed comparatively against physical abuse. Absence of, or low levels of, physical abuse were implied as not being serious, regardless of extensive psychological and emotional abuse. This resulted in internal incongruence. The damaging impact of DVA was being felt and expressed where possible, yet the prevailing message was one of DVA being normal. The lived reality of the detrimental impact of other forms of DVA did not however correspond to the minimisation narrative. Therefore, the ability to understand the significant negative impact on mental health and wellbeing became impeded. For survivor nine, coping mechanisms were therefore adopted. In this case this involved self-harming behaviours. Self-harming has been put forward as a method of escapism from the pain in question, allowing the individual to escape from the true cause of the trauma, and focus elsewhere temporarily (Baumeister, 1991). Hence the trauma became diffused and deflected through self-harming as a coping mechanism. Mental health has been outlined as a taboo subject within Muslim communities (Al-Karam, 2018). This was further exacerbated by the lack of cultural competence from mental health providers, where insufficient understanding of the

interplay between faith and culture has led to misunderstandings in treatment provision (Rassool, 2015a). DVA, particularly reporting, has also been found to be a taboo subject within Muslim communities (Lee, 2014). The combination of the two implied that a more accurate understanding of the lived reality of these issues, within this population group, was neglected within existing literature.

Victims facing barriers at every stage which engulfed all aspects of life, was described across the data. DVA experiences were consistently expressed as being negatively linked to victim faith identities. This was often imposed by family and/or community members. Faith within Muslim communities has been outlined as integral to identities (Isgandarova, 2019), with faith forming the foundation of everyday life. Therefore, to negatively link DVA experiences to faith identities amplified the damaging impact of the abuse. This detriment continued into the long term, despite having left the abusive relationship.

Extract 67

S5: You know because, when you say that to a Muslim, like I was questioning my Islam all year thinking am I Muslim, am I not, am I Muslim, is Allah (*God*) going to forgive me, is He not going to forgive me, am I a *really* bad person, I've done and have I sinned you know, and you're at the edge of your deen (*way of life*).

RC: Mmm

S5: And then for someone to come along and just say you've got weak imaan (*faith*), that can just make you, push you over the edge and say well you know what, you're right, sod it, I give up. (Survivor 5, Lines 614 – 619)

The emotional and psychological abuse resulted in substantial internal conflict, with abusive messages often playing on the mind of victims and being narrated to professionals providing support. This internal identity conflict was endured over significant periods of time after having left the abuse and was echoed across survivors and professionals working in the field. The inability to recognise the all-encompassing and long-term impact of abuse was portrayed, both on an individual and collective level. The conflation of faith misunderstanding with lack of DVA understanding, was described as having an additional devastating impact. This was particularly so when it resulted in external labelling. For

survivor five, being described as weak in her faith was almost enough to give up all hope. Across the data, linking the DVA to one's spiritual status resulted in deep distress. It was only in being able to distinguish the abuse for what it was, and the resulting psychological impact of DVA, as being separate to faith identity which provided a platform for increased clarity. Such initial cognitive conflicts however significantly hindered ability to access help and therefore progress towards recovery. El-Khoury et al. (2004) presented the positive utilisation of faith within the recovery process for female victims from minority communities in the West. Chowdhury (2021) further outlined the need for faith informed DVA recovery programmes as a means of catering to the needs of Muslim female survivors. However, very little exists by way of exploring the impact of DVA upon faith itself.

The difficulties encountered in the recovery process, often relating to re-learning basic lifeskills, was also brought to light. In the following extract Survivor five described the lived reality of having to rebuild life after abuse, and the daunting reality of this.

Extract 68

S5: I think that whole concept of having control is really difficult as well

RC: Yeah

S5: Because I literally got the khula (*divorce*) and thought how am I even gonna cross the road, I stopped at the pavement cus I'd forgotten how to cross the road

RC: Mmm

S5: I think even that, having control of your life, it actually causes some major anxiety (Survivor 5, Lines 658 -663)

The anxiety caused by having to relearn normal everyday tasks extended to basic activities such as crossing a road. The need for continued support post abusive relationships was raised across the data. Therefore, the question of broader community DVA understanding coupled with how services holistically engage with such vulnerabilities experienced by victims/survivors was highlighted. It further raised questions in relation to the potential exploitation of victim vulnerabilities and the depth of anxieties experienced upon leaving abusive relationships. This vulnerability was brought to a height during the Covid-19

pandemic. Bradbury-Jones and Isham (2020) reported a global increase in DVA cases, with increased calls to helplines in particular. The ONS (2020) reported a 9% increase in DVA related offences between March and June 2020, in comparison to 2019. Between January and June 2020, sixty-four domestic homicides were recorded, of which thirty occurred during April to June (ONS, 2020). The home environment became a prison overnight during national lockdown. As a result, the vulnerabilities of DVA victims became intensified. Leaving the abusive relationship removed some of those vulnerabilities, but equally presented a new set of challenges to overcome. These challenges were portrayed within this data as often unforeseen and misunderstood.

Intensifying this was the continuation of abuse as normal across generations.

Extract 69

There's something about as a girl in this family, this is your role, responsibility, this is what your mum did, this is what your grandma did, it's what your aunt and your sisters and your cousins all do, this is your place in the world and that gets passed on (.) and no one changes it and no one challenges it, until you have somebody courageous enough, brave enough to go, no this isn't working for me, this doesn't feel good and it needs to change. (Professional 2, Line 220-224)

With DVA embedded within relationships across generations, speaking out against it became highly complex. It involved going against entrenched norms and therefore being seen as the one to break long-held tradition. Overcoming individual challenges within this broader context therefore became psycho-social in nature. Gregg (2007) stipulated that whilst many collectivist Arab Muslim communities were assumed to put the collective before the individual, the lived reality demonstrated that individuals were not immune to putting their own health and wellbeing needs first if required. Catering to individual psychosocial needs was raised as critical to determining the possibility of accessing support. Without this, the fundamental routes out of the abuse became obscured. Ahmad-Stout et al. (2018) found both families of origin and in-laws posed significant barriers to leaving abusive relationships for US South-Asian women. Furthermore, spiritual resources were consistently raised across the data as being critical to help seeking and coping both during

and after the abusive relationship. Spiritual resources provided a form of support which became difficult for additional stakeholders to challenge. Equally it provided opportunities for stakeholders to contribute to and enhance the effectiveness of such resources. This will be explored further below.

The accommodation of such psycho-social-spiritual factors was raised as essential in order to enable victims and survivors to access support, and work towards recovery thereafter. Without this, there remained a stark reality of victims/survivors never being able to access adequate support. Consequentially, the possibility of continuing beyond their DVA experiences in ways that left them intact of their identity and selfhood, became diminished.

8.2.2 DVA as diffused: "How dare he...invite them into my home for them to play judge and jury"

Throughout the data, a strong presence of additional individuals being involved in DVA situations in various ways was consistently raised. These individuals ranged from family members, to friends, to wider community members. The role of such external individuals was described as positing both negative and positive influences. In some cases, such individuals formed secondary perpetrators of the abuse. Bystander theory has been put forth as being inclusive and positive, with powerful potential as an agent of change (Fenton & Mott, 2017). Latane and Darley's (1970) five step process towards bystander intervention proposed that bystanders must recognise the problem in order to intervene. However, within this study bystanders not only failed to identify the problem but, in some cases, they were actively part of the problem. Hence, they became active stakeholders in the DVA. Discussions with a national DVA interventions service further confirmed this in relation to the Muslim female victims who access their services (personal communication, 24.06.2021).

Extract 70

Um (.) some were physical um but there was a lot of emotional psychological domestic abuse. And it wasn't particularly just come from their partner. (RC: Ok) it could come from a number of family members. (RC: Mm hmm) And then they would do it collectively. (RC: That's interesting) So they would be you know uhh they would coerce together. (Professional 1, Lines 75-78)

The role of wider family and community members were sometimes intertwined with the primary abuse and were described as being collective in nature. In other cases, the presence of external individuals was described as being imposed onto victims in various ways. Across the data victims were made to answer to these individuals, usually for seeking a divorce or speaking out against the abuse. For Survivor two such individuals included her extended family members, invited to her family home by her father. Other survivors and professionals working in the field spoke of various extended family and community members as holding this position.

Extract 71

S3: I've lived in the heart of the (*ethnicity*) Muslim community, had nothing to do with them, how dare he go to a community that I barely had anything to do with, to invite them into my home for them to play judge and jury. (Survivor 3, Lines 791 – 794)

For survivor three, whether or not she normally engaged with her local community became irrelevant. Her then husband involved external community members in order to hold her to account. For survivor two, extended family members were permitted by immediate family to question her on more than one occasion. Invisible and powerless victims being put on trial was alluded to. Whilst this held parallels with secondary victimisation (Gracia, 2014), the data demonstrated that it went further than this. Such interactions were inbuilt into the primary DVA experience. Within this, there was consistency in abusive partners being given precedence over victims and their needs. Furthermore, victims were pushed to the background and extended families / communities brought to the foreground.

Extract 72

P7: ...quite a lot of it is hectic because sometimes when I give couples counselling then kind of people come to see me and I'm like look I'm only going to talk to you both as a couple, but then after that I feel like I'm talking to the whole tribe because everybody is like, all the uncles and the aunties...and everybody (*laughs*) and they're not talking about themselves, they're talking about you know people in Pakistan, people in Canada, people in America, (inaudible) making phone calls

RC: It's very complicated!

P7: Yes it is, because there's a hierarchy kind of family set up. (Professional 7, Lines 425-433)

This involvement further extended into having to consider the wider family within therapeutic contexts. The extent of this spanning across continents indicated that physical geography became irrelevant in relation to family and community structures within UK Muslim communities. Within this, the reinforcement that victim voices faded into the background was alluded to. Preference instead was given to the family hierarchical structures over individual victim voices. Triandis (2001) put forward collective wellbeing taking priority over individual wellbeing within collectivist communities. With individual personalities being based on the preservation of the collective, the severing of relationships Triandis (2001) further outlined as being contrary to such values.

The suppression of victim voices through various means conformed to literature. Ballela (2016) put forth the problematic nature of men refusing to take responsibility for their DVA behaviour within UK Arab communities. This Ballela (2016) identified as presenting a tangible barrier to engaging with abusive males. High levels of victim blaming attitudes were found to be common in European countries (Gracia, 2014). Such attitudes often underpinned the resulting victim silencing which occurred. Ahmad et al. (2009) highlighted victim silencing under the banner of cultural practices and traditional gender role expectations, as being present for US South-Asian women.

Extract 73

Well again this absolutely sits within culture, to separate, to get divorced is a huge no, you don't do it, erm, or that you know, the stigma and the taboos about being divorced, or people's, again (inaudible) projection that once I'm divorced I'm gonna be on my own and I'm gonna struggle to get re-married or I'm gonna be shunned or disowned by my family, or I'll have nowhere to go because my parents won't take me back, there are so many reasons unfortunately why people can't leave bad marriages (Professional 2, Lines 133-138)

Victim powerlessness and a succession of impediments was exhibited across the data. Leaving abusive relationships and pursuing divorce was described as being surrounded by numerous invisible barriers. These barriers often related to victims being accepted within their communities, and their ability to overcome challenges in rebuilding their lives. Some of these have been described in theme one, with additional logistical and social challenges raised in extract nine above. The stigma alone was frequently described as holding victims back, by both survivors and professionals. This was in line with precedents such as US South-Asian women (Ahmad et al., 2009) and African-American women (El-Khoury, 2004). Triandis (2001) outlined communal conformity as a means of being accepted within collectivist close-knit cultures. The risk of being outcast from their communities was very real for victims. With the two being intertwined, leaving abusive relationships indicated estrangement from both the relationship and potentially the community. Kennedy and Prock (2016) specified stigma as consisting of both internalised forms and externally imposed forms. These they identified as self-blame, shame, internalised stigma, anticipatory stigma, and negative social reactions from disclosure. All of these forms were exhibited across the data.

Parallel to this, the simultaneous involvement of external individuals in a positive context was relayed within the data. The critical support received from wider community members was a stark divergence to those who presented barriers and impediments. Such support was described as essential to leaving abusive relationships and rebuilding life post-abuse. This support was in direct contrast to the lack of support from elsewhere. Such support also came from a similar range of stakeholder categories including wider family, friends and community members.

Extract 74

S10: Alhamdulillah (*praise be to God*) and he (*survivor's father*) was the one that actually said to me that you know these will be the consequences if you return to the marriage and actually in a stereotypical sort of scenario you wouldn't expect the dad to say that (*laughs*). You'd expect the dad to say you need to get back but actually in my situation it was my dad that said you know, he had more, I think I saw more compassion from him and you know not even one percent of my mum's compassion could compare to (*his*). (Survivor 10, Lines 259 – 264)

In some cases, decisive encouragement came from unexpected sources. By outlining the potential future trajectory of her life if she remained in the abusive relationship, survivor ten's father illustrated a picture demonstrating how challenging her life would become. Whilst refraining from making any decisions for her, he nevertheless made his disapproval clear. Through such support, particularly from males where normative practices often dictated traditional gender roles (Isgandarova, 2019), victims were crucially presented with having a choice and a right to exercise autonomy.

Furthermore, knowledge which provided strength and empowerment, particularly from spiritual sources, were critical to creating change. Such support provided crucial advocacy and protection, particularly in light of other less supportive family and community members. Both social and spiritual support were found by Anderson et al. (2012) and Jacinto et al. (2010) as being critical to resilience and recovery post abuse. Within collective and close-knit communities, the pertinence of such support became even more imperative. This type of comprehensive support provided numerous options out of abusive relationships.

Extract 75

Erm, but also I had a lot of supportive friends at work, so I worked in an Islamic school in (*city name*) and erm I had friends and colleagues who were very knowledgeable, erm I had access to a scholar who was also very knowledgeable. (Survivor 2, Lines 270 -272)

Wide support networks, spanning various elements of victim's lives, were deemed the most effective in providing tangible means out of abusive relationships. Of significance, such support networks commonly utilised individuals who had a firm grounding in faith-based knowledge. Critical to such knowledge was the provision of culturally appropriate tools and leverage for seeking a way out of abusive relationships. This included Imams (religious leaders) who actively supported victims and reassured them of their religious rights to live a life free of abuse. Faith-based knowledge was deemed integral to the subject of DVA and was a running theme throughout the data. With faith being intertwined closely to identity, ensuring actions and advice were in accordance with faith principles became a foundation upon which support was accessed and provided alike. Professionals who had an insider

understanding of their faith and culture were often sought out by victims. Equally, professionals themselves drew on faith-based principles in order to provide holistic support being sought by victims. Faith-based resources thereby became a protective aid with which individuals could safely exit abusive relationships, in addition to utilisation within the recovery process. Supplementing the research by Anderson et al. (2012) and Jacinto et al. (2010), African-American women have been found to utilise faith as a resource for DVA recovery in comparison to their Caucasian counterparts (El-Khoury, 2004). The importance of accommodating this as an integral part of DVA interventions was emphasised across the data.

The need to consider this wider diffused manifestation of DVA within this population group was exhibited. The data demonstrated that DVA was often not limited to two primary individuals within a relationship. Additional individuals were openly involved to different degrees and from across various groups. Their roles were described as being a parallel process. In some cases, extended individuals became an impediment to leaving abuse and exacerbated the trauma. In other cases, they actively facilitated leaving abuse and enabled recovery.

8.2.3 Denial of Intersectionality: "You're a feminist"

Throughout the data there was a common thread of Muslim female victims of DVA facing barriers as a direct result of intersectionality related issues. Crenshaw (1990) posited intersectionality theory within the context of race, gender, socio-economic status, sexuality and disability. The experiences of black women underpin intersectionality as put forward by Crenshaw (1990). Bowleg (2012) expounded upon various social intersections interacting with each other in order to pave the way for disparate outcomes within certain sections of society. Arguing for the theoretical scope to be broadened to capture the lived reality of other minority groups was put forward by Nash (2008). As with Bowleg (2012), a greater emphasis on interactions, particularly relating to social processes was advocated.

In line with the broadening approach put forward by Nash (2008), within this study, there were three distinct social junctions related to core identity. These were faith, cultural normative practices often in line with ethnic backgrounds, and DVA education and

understanding. The impact of the conflation of all three areas was demonstrated within the following extract.

Extract 76

... It's a very male perspective of Islam and it's quite misogynistic in its approach at times and it's always about male rights, men's rights, not women's rights, not how you should treat women, and there's not much of that going on and I think the men need to be educated. Ok, you're claiming you're Muslim but these are the traditions of Islam and how you treat women, this is how you know, these are women's rights. I mean I see it, I've seen it in the community if a woman says this is my right or that's my right, if she stands up for her right she's then called a bit feminist. (Survivor 7, Lines 538 – 544)

Survivor seven raised several trends that were echoed throughout the data. The clear lack of DVA understanding at a community level, within a faith framework, was exemplified in how victims were treated if they sought to stand up for their rights. The recognition of these being basic human rights within an Islamic framework (Rassool, 2015b) appeared to be absent. Rassool (2015b) outlined five universal human rights established under the Islamic faith; the right to be treated respectfully and with dignity, right to life and maintenance of life, right to equity, right to excel, and the right to not cause or reciprocate harm. In place of this faith-centred recognition of human rights, Muslim female victims standing up for their basic rights were labelled by some sections of communities as following feminist principles. Negative connotations were denoted within this, implying that females standing up for their rights amounted to being contrary to the faith. This thereby facilitated room for victim voices to be disregarded.

A lack of understanding in relation to Islamic principles against harm was hence demonstrated. A reductionist approach to faith became the means by which to disregard victim voices. This was irrespective of whether such labelling reflected actual faith principles. To accede to the logic of this type of religious-based argument used to justify such labelling would require looking at basic human rights first and foremost, as per foundational Islamic principles relating to human dignity (Kamali, 2002). This practice

however was excluded and instead replaced with what was felt to be a misogynistic and reductionist approach to faith. Thereby such labelling exhibited as a means by which alternative narratives could be stifled. The superfluous harm and silencing imposed on victims through this religiously incohesive argument was expressed across the data. Both survivors and professionals working in the field expressed the additional challenges and trauma this placed upon victims.

Going one step further, issues surrounding textual interpretation and development of the field of hermeneutics within the Islamic tradition was raised by both survivors and professionals. These were identified as being 'misogynistic' in nature due to the prevalence of male voices with one dominant perspective. Such narratives were distinguished as critical to DVA discourses. Isgandarova (2019) and Ayubi (2019) further elucidated on this issue, raising it as governing how women were viewed and continue to be viewed within some Muslim communities. Cultural normative practices, particularly in relation to gender roles and expectations, were identified as upholding such discourses. This was further exemplified in the following extract.

Extract 77

But sometimes I think people kind of misunderstand culture with Islam and I always say to people separate your culture from your religion and find that which part of your religion you adopt. But er you know, sometimes you confuse it with your culture and it's nothing to do with your culture. You know, your culture says that you're allowed to er hurt your wife, then Islam says no, you can't hurt your wife, Islam says the best of you is the best one, you know the best in men for their wife you know for their spouse. (Professional 7, Lines 167 – 173)

The intersection of faith to cultural normative practices was raised as resulting in tangible harm to women in particular. The implication was that cultural normative behaviours were the dominant narrative in relation to social interaction and gender relations. Collectively, these issues were identified as directing the very narrative of DVA as a non-substantial issue. This was evident both within this study and in previous precedents (Ayubi, 2019; Chaudhry, 2013; Hammer, 2019; Isgandarova, 2019). Survivors and professionals alike

described frequently having to work within wider frameworks dominated by cultural normative narratives that went directly against the faith tradition. The resulting conflict they identified as facilitating the continuation of DVA in some families.

Extract 78

I think it is, er there are several issues, one is that we are so self-focused. Rasulullah²⁷ sallallahu alayhi wa sallam²⁸ said that the person whose neighbour for example is hungry, is in need, and you are fulfilling your need, you are not a true believer if you do not (fades away – *fulfil their need*). So, I think we are as *so* self-focused and busy and, if you like, fulfilling our active natures, desires, that we don't bother sometimes, this is one. And the other is we have very narrow understanding of religion. We feel perhaps you know the worships and prayers and the Hajj (*pilgrimage*) and fasting and these sorts of things, this is not the totality of religion; this is one aspect of religion. The social aspect is totally ignored, I think. (Professional 3, Lines 115 - 122)

In line with Ayubi (2019) and Isgandarova (2019), this reductionist approach was raised throughout the data as being integral to the conflation between faith and cultural normative practices. By deviating from ethical principles of the faith, it was felt that social care and concern towards others had depleted. This created spaces within which abuse could occur and remain uninhibited.

In contrast to this, across the data, a strong presence of the positive consequences arising from informed voices was raised. This related to a holistic understanding of DVA within a faith framework, and through the challenging of harmful cultural normative practices.

Extract 79

You know an Imam who is very well known and very well respected in (*place name*) and often does khutbahs (*sermons*), and I thought Ya Rabbi (*O my Lord*) you know what, this is it and (.) this was it you know, people are educating themselves, people

²⁷ Meaning Messenger of God, in reference to the Prophet Muhammad (pbuh).

²⁸ Arabic for peace and blessings be upon him.

do realise that actually patience isn't persecution, persecuting yourself and depriving yourself of, of what is actually ordained by God to be yours and it's halal (permissible) for you, and you're depriving yourself of sukoon (tranquility), of happiness, of genuine love, of intimacy, of being safe first and foremost, you know even in terms of physical and mental form and spiritual form, then you know, who are you doing it for, so yeah I think it's been an eye opener (Survivor 6, Lines 304 – 310)

Prominent vocal Imams who were able to explain the foundations of DVA as being against core Islamic teachings featured as key influencers. Contextualised furthermore within the purpose of marriage and the family unit as one of attaining tranquility²⁹, served to add further clarity. For all survivors who were able to access such clarity, this was a deeply profound moment. Professionals further demonstrated that it offered an alternative that was consistent with what victims had doubted or been led to doubt, regarding their own faith understanding. There was an indication that such voices were not reaching wider communities, rather they were fewer in number and so their narratives were also obscured from the mainstream. The current research surrounding the role of faith and spirituality within DVA is deeply embedded within the Church, with the terms almost synonymous in the literature. Yet it is known that Muslims view faith as a complete way of life which encompasses all aspects of daily living (Alghafli et al., 2014). In light of this, considering the faith and the lived reality of faith within a DVA context for Muslim communities, became imperative.

The potential for faith-informed interventions to contribute towards radical change for both individuals and communities alike was alluded to. Within their model of the soul, Rothman and Coyle (2018) expound upon the role of spiritual wellbeing as being central to the very identity of Muslims. They argued that balance could only be attained through holistic approaches to wellbeing, which by default required consideration of the spiritual nature of Muslim identity. This was extensively elaborated on within the work of Al-Karam (2018),

_

²⁹ "And of His signs is that He created for you from yourselves mates that you may find tranquility in them; and He placed between you affection and mercy. Indeed, in that are signs for a people who give thought." (Qur'an Chapter 30, verse 21, Saheeh International).

Ahmed and Amer (2012), Keshavarzi et al. (2021), and Rassool (2015), and continues to be a growing field.

The underlying implication across the data was that such sensitive social issues would benefit from being explored within a holistic framework for Muslim communities, inclusive of faith identities. Integral to this was a core focus on the universal human rights in particular (Kamali, 2012; Rassool, 2015b). The potential positive impact of informed narratives, by individuals in positions of religious authority within communities, was magnified within the data. Professionals within this study, some with dual roles of Imams and therapeutic roles, further identified with this.

8.2.4 Structural Barriers to addressing DVA: "You're a different colour from everyone here so you have to work that much harder to be recognised"

The final theme centred around structural barriers encountered by those within minority communities, and the resulting implications this had on addressing DVA. Such barriers were identified as existing in various forms. They further stemmed from both within Muslim communities and extended out to macro level structures within wider society. Examples related to policies, legislation, media narratives, and appropriateness of service provision. These are elaborated upon below.

Extract 80

A lot of women have come forward to say they've had very negative experiences when they went to apply for say khula (*religious divorce*) whatever. I feel that I'm received a lot differently when I go and speak to them, and you know maybe I speak the language and I have an education and I am a professional whatever. But I go to them and say this is my experience, here's my letter that I got from the police, you know and I have all my stuff together. It's very different than a woman who is possibly financially dependent on her husband, possibly has not leave to remain as a result of her husband, goes to try and seek help, if she even has the money to get there. (Survivor 4, lines 2230 – 2237)

The first issue related to recognising culturally tailored services as being fundamental to meeting victim needs. However, these services were deemed as presenting numerous

barriers, despite that sometimes they were provided internally within Muslim communities. Survivor 4 spoke about approaching a religious based service which specialised in religious marriages, mediation, and divorce. Whilst this was a culturally tailored service in that it met her religious needs, the issue of physically accessing such services was raised. This was deemed as the very first hurdle for many victims to overcome, both within this study and existing research (Usher et al., 2020). Accessibility in this case referred to structurally related impediments. Examples included level of education and therefore ability to engage with the service, and socio-economic status and hence ability to afford and physically attend the service provision. Usher at al. (2020) further highlighted national lockdowns as a result of Covid-19 drawing the issue of accessibility to the forefront. Thereafter, issues relating to English fluency, ability to pursue DVA cases with statutory bodies, professional confidence, and ability to represent selves within a formal religious authority setting, were all described as shaping how DVA support was accessed. This linked back to the psycho-social-spiritual factors mentioned within the first theme.

Being able to seek out support and represent oneself in such circumstances was alluded to as being rare, across the data. The indication was that Muslim DVA victims faced additional individual barriers to accessing and engaging in potential support, even within their own communities. The idea of being surrounded by layers of barriers was denoted across the data. Overlap with these barriers was further found by Oyewuwo-Gassikia (2016) within a literature review examining experiences of US Muslim female victims.

At the macro level, the second issue related to Muslim communities being seen as different. This resulted in additional barriers.

Extract 81

You're a different colour from everyone here so you have to work that much harder to be recognised. And she (*mum*) said that to all of us. And my mum has continued to say that you have to constantly prove yourself. So I think that whilst it was true at one level, I think it lays the foundations for a level of insecurity about where your status is....um I think minority communities are more divided than they've ever been. And I think that's a real shame. So that common history that binds our experiences from the

Indian subcontinent are broken, well it's colonialism and it's partition all over again isn't it, basically is partition playing out. (Professional 4, Lines 263-271)

The implication was that being viewed as outsiders resulted in having to work harder in order to be recognised as a legitimate member of society, with legitimate rights. This was perceived as re-enactment of colonial legacies which conquered through a divide and rule method (Rahman et al., 2018). A sense of injustice experienced through systems working against minority communities was alluded to. The perception that Muslims were treated distinctly within society at large was exhibited across the data. Kunst et al. (2012) stated Muslims as becoming suspect communities post 9/11, with Hickman et al. (2011) outlining the role of counter-terrorism measures in exacerbating this. The media narrative of Muslims as hybridised threats was further regarded as contributing to intra and inter-community relations, thereby impacting social issues (Jaspal & Cinnirella, 2010). Lofland (1969) proposed the salient features associated with social identification resulted in labelling groups as embodying those features. Hence, individuals and groups identified as socially deviant were labelled as such an entity for example, a social deviant, or as mentally ill. This mapping of features Lofland stipulated as forming the need to socially identify others, and thereby position one's own personal identification as being distinct to this. The applied negative implications of the amalgamation of these factors were expressed by survivors and professionals alike. This ensued in the third issue, relating to structural discrimination and bias.

Extract 82

Yeah definitely, about radicalisation, so you know the police, if they're looking at every possible way to oppress a family, erm so you'll have a male that might have, not necessarily fought abroad but he would've been involved in something or other abroad and then come back to the UK, erm has been picked up by anti-terrorism or whatever, we had quite a few of these in (*place name*) and they would be referred in and often the children would be police protected. (Professional 5, Lines 311-315)

The interconnected nature of approaches to social issues within domestic policy and practice was evident through the data. As a Caucasian non-Muslim, professional five stated

clearly what the remainder of the data alluded to in more subtle terms. The idea of systemic prejudice being at play was described as first-hand experience across the data. Yet professional five was the only individual to state it in such terms. Having worked with Muslim communities for over twenty years, both nationally and internationally, his lived professional experience identified the presence of structural bias and discrimination. This was not something anyone else stated with the same clarity, though references were made consistently throughout the data. An indication of the suppression of minority voices at a collective level was implied, with externally imposed fear of belonging to Muslim identities denoted. The idea of the social curse phenomenon enacting out in the lived reality of Muslim communities was alluded to. Kellezi and Reicher (2012) put forward group identification and affiliations as normally providing protective elements under a social cure phenomenon. Under social curse however, they identified how these very same elements and processes became a social curse, particularly where stigmatised and marginalised communities were concerned (Major & O'Brien, 2005). Abbas (2004) outlined how externally imposed structures within policies and practices, coupled with politics, have continued to wedge a divide between British Muslim communities and wider societal structures since 9/11. Abbas (2007) further elucidated on the impact of legislation and increasing negative media narratives post 7/7 London bombings as significant to Muslim communities withdrawing from wider societal discourses.

A pervading notion of invisibility resounded throughout the data. Hence by being invisible within society, this resulted in inadequate service provision. With UK Muslim communities often approached as distinct from mainstream society, their needs were indicated as remaining unrecognised.

Extract 83

Erm I think it's with Muslim clients and BME clients, they want somebody who they think is going to understand either their culture, of their faith or a combination of both. And very often with clients it's about, with Muslim clients I think very often it's because they want a counsellor who understands their religion but just as importantly understand the culture and ethnicity as well, so we can understand the relationship between the two. (Professional 2, Lines 22-26)

Coming back full circle, the final issue related to the lack of culturally appropriate services within mainstream service provision. Throughout the data, a clear narrative of wanting to be heard and understood was apparent. This was both in terms of DVA experiences and how needs wanted to be met within a culturally sensitive framework. Survivors frequently referred to seeking out those who held confident Muslim identities and could articulate that across all platforms. Equally professionals spoke about being sought out because of their insider understanding and lived experiences, which overlapped with Muslim clients. This related to both cultural normative practices and faith understanding, indicating further the implications of intersectionality. Implicit within this was the idea of mainstream services lacking in adequate service provision. John et al. (2020) put forward the importance of including victim voices within service provision and interventions. They argued that victim voices were often not represented within the level of service provision.

In summary, the macro level barriers encountered by the UK Muslim population had a direct impact on how DVA was addressed. Due to the lack of adequate provision, services were not being accessed despite the need. The presence of culturally appropriate services as alternative provision emerged within the data. As community led initiatives, they held potential to work successfully as reflected by the navigation towards them by survivors. However, holistic accessibility of all services due to structural barriers at the macro level, required addressing. Such barriers were identified as being intensified by negative media narratives and political landscapes. Further barriers existed at the individual psycho-social-spiritual level as previously discussed.

8.2.5 Web model of DVA

Within this study, the themes derived from the data demonstrated the presence of a network of considerations surrounding victims/survivors. This was unique to this population group and not considered within existing DVA theories and models. This network of broader considerations is presented visually below in the form of a web model of DVA. Four multi-perspective IPA themes were derived from the data sets as follows:

- I. Rebuilding life after DVA: Challenges at every level
- II. DVA as diffused: "How dare he ... invite them into my home to play judge and jury"
- III. Denial of Intersectionality: "You're a feminist"

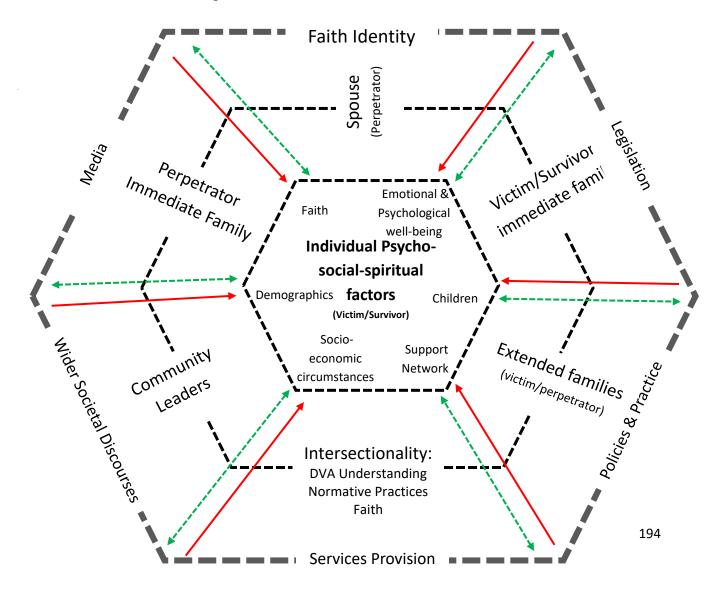
IV. Structural barriers to addressing DVA: "You're a different colour from everyone here so you have to work that much harder to be recognised"

For the purposes of a model, the four above themes were translated into shorter theme titles which they represented. These corresponded as follows:

- I. Individual psycho-social-spiritual factors
- II. Stakeholders
- III. Intersectionality
- IV. Macro level factors

Using these, a visual representation of the themes according to lived experience, and as derived through an MP-IPA methodology, was developed. A Web model of DVA is therefore proposed to demonstrate DVA manifestations within the UK Muslim population.

This can be viewed in Figure 4 Below.



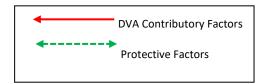


Figure 4 Web model of DVA

The web-model illustrates the four themes derived from the data and further demonstrates their interactions. These present as follows:

- a. Individual psycho-social-spiritual factors: At the centre was the individual victim/survivor, thereby placing the DVA according to their lived experience.
- b. Stakeholders: This referred to additional individuals who played an active role in how the DVA was experienced. By virtue of this, they went from being bystanders to being actively engaged in the DVA, whether positively or negatively. This thereby had a tangible impact on the level and type of support which could be accessed as a result.
- c. Intersectionality: Intersectionality issues present at the bottom of the web-model. Within this study they were identified as relating to DVA understanding, (cultural) normative practices, and faith. These factors further impacted on the experience of DVA by the individual at the centre, potential sources of support and the types of DVA contributory factors experienced.
- d. Macro level factors: These are demonstrated on the outer layer of the model. These related to legislation, policies, practice, services provision, media, and wider society. They further encompassed the issues at the level of the individual psycho-social-spiritual factors, stakeholders and intersectionality. All had a direct or indirect impact on how DVA was experienced and therefore addressed.

A detailed exploration of the themes within the web model of DVA has been provided within the previous sections of this chapter. How they manifest within the web model, particularly in contrast to existing theories and models, are summarised further below.

Individual psycho-social-spiritual factors

Current models and theories place the perpetrator of abuse central to DVA. In contrast, within this research the victim/survivor was placed at the core. Identified as the 'individual' draws attention to the lived experiences of survivors and the impact of this within the DVA context. Furthermore, it serves as a reflection of their individual identity independent to their DVA experience. Such individuals were identified across the data as being surrounded by various challenges in numerous forms. Considerations included individual demographics, presence of any children and related implications, socio-economic factors, faith, psychological and emotional wellbeing, and support networks. Whilst these were the main factors identified at the level of survivors within this study, there remains flexibility to add further factors when exploring different communities. Of significance was the centrality of faith within the DVA process itself, as a resource for victims during their experience, rather than limited to the aftermath as a coping tool.

Individual psycho-social-spiritual factors were alluded to as being governed by how the remainder of the web responded to the DVA situation. Furthermore, how victims/survivors were able to navigate the remainder of the web. As expounded on above, factors at the level of stakeholders ensued as a parallel process. Stakeholders either compounded individual level factors, thereby exacerbating the DVA experience, or facilitated accessing support. Further barriers and protective factors were present at the level of both the macro framework and in relation to intersectionality, demonstrating a continued parallel dynamic throughout. This dual permeation throughout the web is illustrated through the solid red arrows and dotted green arrows and will be expanded upon further below.

Stakeholders

Across the data, key stakeholders were identified as playing an integral role to the DVA and how it was experienced. With Muslim communities often being close knit in nature, the importance of exploring the role of such stakeholders became paramount. Stakeholders included the spouse perpetrating abuse, the families of both the victim and their spouse, extended family members often referring to aunties and uncles on both sides of the family, and community leaders. Such stakeholders played an active role within the DVA and therefore shaped how the DVA was experience. This included both negative and positive influences. Where existing theories and models focused on the primary individuals within

their influence and roles within DVA. Victims/survivors primarily sought support internally within their communities. External intervention was drawn upon in three cases due to necessity and at the point of leaving the relationship. In some cases, external intervention was called upon for individual incidents. These however did not form the primary sources of support. Therefore, the importance of empowering communities to act effectively within DVA situations was highlighted. Where mainstream services were seen as lacking in their ability to cater to the cultural needs of Muslim women, the possibility of collaborative working between macro level service provision in conjunction with community provision was apparent.

Intersectionality

Key intersecting factors which had a direct impact on the manifestation of DVA were visible within the data. These included levels of DVA understanding, normative practices often relating to ethnic cultural norms, and individual understanding and practice of faith. The differentiation between ethnic cultural normative practices and approaches to faith was pivotal within this. Each of these factors were identified as intersecting with the macro level factors and key stakeholders. This had a direct impact on the individual at the core of the DVA experience. In combination, such factors were found to have a tangible influence on DVA, how it was experienced and how it was addressed. DVA contributory factors within these intersections manifested in poor understanding of DVA, patriarchal values, and androcentric and reductionist approaches to faith. In contrast, holistic approaches to faith which moved away from oppressive cultural norms and recognised the sanctity of all life and personal safety and dignity, served as a protective factor. Furthermore, such holistic approaches empowered victims in profound ways which facilitated both leaving abuse and rebuilding lives post-abuse. These are critical considerations often overlooked within existing theoretical understanding and service provision.

Macro level factors

A macro level framework relating to wider societal structures was found to directly influence DVA experiences at the individual level. This then distinctly impacted how DVA

was approached internally within UK Muslim communities. Both victims/survivors and professionals working in the field reported being directly impacted when attempting to engage with the macro framework. The macro framework consisted of six levels as follows:

- Provision of DVA specific services capable of catering to the needs of clients from
 Muslim communities. Due to the interaction and influence from other elements of
 the macro level framework, the need to cater to this population group itself became
 diminished. This is further exemplified below.
- Policies and practices at organisational levels, particularly those related to safeguarding. Such policies and practices were reported as stigmatising Muslim communities. This was further exacerbated through legislation. Examples included within the police and child protection services.
- Legislation relating to national security as opposed to DVA. This facilitated two opposing forces which intersected through the stakeholders and the intersectionality factors. At a community level those perpetrating DVA were felt to be granted immunity from accountability through a misogynistic and reductionist approach to faith. Equally, at a national level, all Muslim men being vilified on account of individuals committing terrorism related offences was felt to play into the lack of community accountability, by pressurising victims into silence. This therefore directly hindered access to DVA service provision.
- Attitudes within wider society which portrayed Muslims as one homogenous group, and the particular influence of media narratives within this. This was found to reinforce barriers experienced within other structures at the macro level, with a ripple effect throughout all levels of the web-model itself.
- Finally, however most crucially, was faith identity. In conjunction with the above factors at the macro level, the notion of faith identity being confounded into stereotypes at the macro level had a direct impact upon individual and collective identity. Faith identity became superimposed onto the individual and Muslim communities collectively through media narratives, policies and practices, and ultimately legislation. This added an additional layer of barriers to reporting and seeking help at a service level. Faith was portrayed at the macro level as being a

cause of DVA yet faith at the individual level was the very factor that facilitated victims being able to leave DVA relationships. As a result, service provision remained incognisant of the needs of Muslim female DVA victims/survivors.

The result was a cumulative negative impact at the macro level. Addressing DVA both internally and externally therefore became redundant. The only exception was when the need to access emergency services became paramount. The overall result was direct impediment on DVA experiences, reporting of DVA, accessing of services, and more acutely on individual and collective identity. The notion of Muslim female DVA victims/survivors facing layers of barriers became evident. Whilst they also had a resource in their faith which could not be challenged internally within their communities, barriers at the macro level impeded the efficacy of help seeking.

To summarise, each of the four themes identified above were found to have varying degrees of protective factors and DVA contributory factors. What transpired as being protective in some cases, manifested as a DVA contributory factor in other cases and vice versa. This is demonstrated by the solid red line and the dotted green line throughout the web model. For example, where the role of women was seen to be confined to specific cultural normative practices by stakeholders, women were often prevented from exercising autonomy in relation to speaking out regarding DVA. Equally, where women were encouraged to thrive and pursue intellectual pursuits and individual autonomy under holistic approaches to faith, they were both encouraged and facilitated to speak out against DVA and to actively take control of individual decision-making processes. This diametric within stakeholders related to the intersecting critical factors of DVA understanding, normative practices and role of faith. These were further compounded by experiences within the macro framework. At a macro level the homogenisation of all Muslims, particularly in relation to national and international narratives and legislation, presented tangible barriers to addressing DVA within communities. Whilst macro level structures contributed additional layers of barriers through negative faith narratives and therefore a lack of adequate provision within mainstream services, individual faith identity and holistic approaches to faith resulted in the utilisation of alternative service provision at the macro level, often internal to communities.

Across all these levels however, holistic faith approaches were viewed and utilised as being a protective factor which both facilitated leaving abusive relationships, and the survivor's ability to regain personal autonomy. This was despite the potential for rejection at both stakeholder and macro level, alongside the intersectional considerations. The central role of faith therefore threaded throughout all levels of the model and underpinned the core processes behind addressing DVA.

8.3 Discussion

Current DVA models and theories focus predominantly on the two individuals at the core of the abusive relationship (Dobash & Dobash, 1979; Walker, 1979). Whilst some effort has been made to consider wider factors and structures (Gelles, 1974; Heise, 1998), these remain largely unrepresentative of minority communities. This research offers two unique contributions to DVA understanding. Firstly, the diffused nature of DVA within UK Muslim communities, and by extension other potential close-knit communities. By diffused, it indicates the extended nature of DVA within UK Muslim communities, with more than two primary individuals involved within the DVA, whether in a positive or negative capacity. Secondly, by considering the diffused nature of DVA within UK Muslim communities with victims at the core, the opportunity for earlier points of intervention became apparent. Whilst the ecological model went some way in identifying broader factors requiring consideration, it limited it to two individuals within one dominant social context. The web model extends beyond this by considering the individuals within the relationship in relation to the network of relationships surrounding them. This included both intra and extra familial roles, in addition to prominent community members. Furthermore, was consideration of how these additional individuals interact with each other and any subsequent DVA implications. By considering the extended and collective nature of the close knit community structures within UK Muslim communities, it facilitated a more accurate understanding of the lived reality of DVA.

The assumption of the nuclear family set-up within existing DVA understanding by default limits a fully comprehensive understanding of DVA for alternative population groups. This is directly relevant when pertaining to comprehension of DVA within UK Muslim communities

as demonstrated within this research. Additionally, by centering the survivor at the core of the model, the web model of DVA facilitates an understanding of the DVA as per the victim/survivor lived experience. Herein presents some overlap with feminist and family violence theory approaches to understanding DVA without their singularity approach. Recognition of the additional layers and interactions within the web model thereby becomes significant. The web model facilitates the coming together of relevant aspects of existing theories and models, whilst supplementing it with additional considerations for this specific population group.

This understanding is then gradually expanded upon whilst maintaining the victim/survivor lived reality within a central position. McLaughlin (2016) advocated for the need to center victim / survivor voices further to considering the tangible impact of intersectionality upon the DVA experience. Intersectionality in particular has remained largely absent within the DVA literature. Yet, both this research and the work of McLaughlin (2016) demonstrate the centrality of such considerations for minority communities.

Furthermore, the model highlighted the pivotal role of faith which has to date been predominantly explored within the context of resilience post leaving DVA. By understanding both the centrality and potential held within faith, as put forward by survivors and practitioners working in a supportive capacity, it provides a clear pathway for suitable interventions and support mechanisms. It furthermore demonstrated how significant empowerment could occur for DVA victims and survivors, through the cultivation of identity and belonging as defined by themselves.

In reflection of the close-knit communities it represents, the web model of DVA illustrates the interconnected nature of relationships and community structures. These were all found to be directly or indirectly related to how DVA manifested for UK Muslim communities. Consequentially, these further impacted how DVA was approached at a community level, with numerous individuals involved in the DVA process rather than just the individual couple. Through this increased representation, the potential for earlier points of intervention was apparent both at the level of various stakeholders involved, and through the accommodation of intersectionality factors. A sense of communities as powerful agents of change arose. In working collaboratively with communities in processes of mutual

knowledge exchange, the potential for increased opportunities in addressing DVA at the macro level was discernible. This included the utilisation of insider expertise in combination with external macro level resources. It further demonstrated the need for wider structural changes at the macro level, in order for the needs of minority communities to be understood and catered to. Whilst the 2021 UK government did not report evidence of structural racism (Commission on Race and Ethnic Disparities, 2021), lived experiences as per Windrush (Hewitt, 2020; Taylor, 2020), minority communities in prison (Mahoney & Chowdhury, 2021; Williams & Durrance, 2018), and data within this research all demonstrate a different lived reality for minority communities. Such research relating to direct lived experience suggest a discrepancy between broader systemic understanding and practice at a service provision level.

Placing the victim at the core through an IPA methodology, facilitated a platform for the voice of the victim (Smith, 2004). This was further strengthened through the multiperspective lens (Larking et al., 2019). The robustness of this methodology highlighted the need for empowerment and autonomy at the level of the individual. The absence of this was raised across the data as a barrier in addressing DVA. Throughout the study, the critical role of faith to this empowerment was distinct. Mills (1998) argued that post-colonialism feminist theory focused on western concepts of how women were perceived, with western women viewed as being more educated and independent. In contrast, women from eastern regions were often viewed as uneducated and submissive. This is pertinent when considering that much of the DVA feminist theories have been developed in the US, including the work of Walker and the Duluth model. Furthermore, they have underpinned UK DVA legislation. Whilst there is evidence to suggest the UK is at the forefront of defining DVA, and thereby putting in place appropriate legislation (Candela, 2016), the lack of representation within existing research suggests further understanding is required. This is particularly so concerning minority communities. Lamrabet (2016) elucidated on patriarchal systems within hermeneutics surrounding scripture, as contributing further levels of suppression for Muslim females. Considerations surrounding cultural traditions and norms, family structures, and the role of faith, have all been found to have a significant influence on DVA interpretations and outcomes (Choi et al., 2016). Fleming et al. (2015) argued that it

cannot just be accepted that men are more violent than women, but rather required the consideration of wider factors as being critical to this. These factors they outlined as including society, and interpersonal and intrapersonal factors in terms of identity and gender role expectations as a historical influence. Fleming and colleagues further argued the absence of narratives regarding masculinity as requiring consideration. Definitions of masculinity according to different population groups are therefore drawn into question.

Through positing the victim centrally, it reflected their lived experiences within cultural frames of reference specific to them. In line with this, Narayan (2013) argued that the wider context required consideration. This included geography, cultural practices, and faith beliefs, as a means of obtaining a more holistic picture of concerns specific to different population groups. In particular, social norms surrounding how women were perceived, and gender role expectations. With many Muslim women in the UK having eastern roots, yet raised or born in the west, the intersection of the two yield further implications, as demonstrated by the web model. Furthermore, is the interplay of faith within this.

The critical role of stakeholders, largely absent in current DVA models and theories, was brought to the forefront within this research. DVA is often associated with other forms of honour-based violence (HBV) (Gill, 2008; Idriss, 2017). HBV has been argued to be predominantly male violence against women who break expected norms in social conduct, particularly related to sexual conduct (Idriss, 2017). Idriss (2017) outlined HBV as thereby being related to male family members maintaining social standing, status and honour within communities. Gill and Brah (2014) argued that intersectionality factors must be considered, and that underpinning all HBV under one umbrella of patriarchy serves as an injustice to the lived reality. In line with this, the stakeholder's element within the web model demonstrated that women also often contributed to the perpetration of DVA and the upholding of invisible structures such as those within HBV. Such structures enforced victim silencing, impeded the ability of victims/survivors to seek wider support, and hindered holistic recovery. Additionally, patriarchal narratives and androcentric approaches to faith upheld the very same invisible structures. Parallel to this however, both males and females held potential to adopt more holistic approaches to faith which actively facilitated victim freedom from abuse. This distinctly overlapped with the intersectionality factors. Such

interventions were seen as critical to both leaving abuse and recovery post-leaving. By default, consideration of wider contextual factors relating to those perpetrating abuse became embedded within this perspective. These included stakeholder influences, faith and cultural backgrounds, and wider macro level factors. This thereby facilitated a broader understanding of the pertinent factors in the life of those perpetrating abuse, not limited to bio-psycho-social factors as per the literature (Chiffriller et al., 2006; Dixon & Browne, 2003; Holtzworth-Munroe & Stuart, 1994). These are areas that have to date, largely remained unexplored, yet hold potential to inform earlier intervention points.

From a methodological perspective, McInally and Gray-Bunton (2021) outlined the positive use of MP-IPA in order to elicit the lived experiences of young adults with malignant melanoma, inclusive of a significant other. By adopting a MP-IPA approach, it facilitated a broader understanding of the impact and care needs of individuals affected, which thereby facilitated the purpose of their research. Of note, was their decision to adopt joint interviews as opposed to individual interviews for the relevant perspectives. Within their study this served to demonstrate the unified lived experience. Such an approach would however need to be adopted with care in order to ensure each perspective was not influenced by the other.

From a systems approach, Seck and Honig (2012) argued that MP-IPA approaches permitted the mapping of natural and formal systems, with potential for identifying bridging mechanisms between the two, whilst demonstrating hierarchies. They further outlined the potential for developing causation and implications. This latter outcome may be less likely within social/healthcare research. MP-IPA approaches have been steadily gaining traction in various aspects of healthcare research. These have included in relation to family dynamics where adults self-harm (Buckmaster et al., 2020), the professional and parental dynamic for children who have learning disabilities and present with challenging behaviours (Howell, 2016), and the various perspectives involved in the breakdown of foster placements (Rostill-Brookes et al., (2011). Such research falls in line with the potential outcomes put forward by Seck and Honig (2012).

For social phenomenon which affect more than one individual it is credible to see the benefits of the MP-IPA approach. Within the case of DVA, exploring victim and children's

experiences for example would provide greater insight into the holistic needs of families living with DVA, leaving DVA, and attempting to rebuild thereafter. Given the level of potential public services involved in the care of all the individuals involved (police, social services, DVA services, family courts, etc), such an approach would be justified. Larkin et al. (2019) and Dennison (2019) argued that the cross-fertilisation of methodological approaches would help assuage some of the concerns raised in relation to IPA, including the narrow focus and singular perspectives which have often led to IPA validity being questioned. Following the rigorous steps in analysis as outlined by Larkin et al. (2019) and McInally and Gray-Bunton (2021) would further ensure robustness, reliability, and transparency. MP-IPA demonstrates its value in mapping out interlinking relationships, consequential impacts, and several initiating points from which various perspectives assist in providing a more holistic understanding. This was demonstrated in the web model developed herein. In line with this, McInally and Gray-Bunton (2021) also presented the use of visual representations to demonstrate the interlinking nature of the data which emerged from their research.

Furthermore, in consideration of research related to minority communities, inclusivity of the voice of participants has been put forward as critical (Gill et al., 2012; McLaughlin, 2021; Mohr, 2020). Where traditionally participatory action research has been used, the use of an MP-IPA approach holds similar benefits as demonstrated herein. Akom (2011) put forward Black Emancipatory Action Research (BEAR) as a way forward to ensuring inclusive methods facilitating collaborative research, as opposed to having research carried out on communities. MP-IPA holds potential to follow BEAR principles and ensure research is truly reflective of those it concerns, rather than those conducting the research. This will be explored further within the next chapter.

In conclusion, placing the individuals directly impacted at the core of the research, within their own cultural frames of reference was critical to this research. Ascertaining several perspectives has ensured a more holistic understanding of DVA within UK Muslim communities. Taking the findings out to the communities in question will help to further ensure robustness and accurate representation.

It is proposed that the web model can be used as a tool to identify vulnerability factors for victims and those perpetrating abuse. Simultaneously, it can facilitate the identification of protective factors. Through placing the victim central to the DVA dynamics and exploring the networks surrounding them in a holistic manner, a more realistic understanding of the lived reality of DVA can be gained. Thereby, a better-informed protection plan, both structurally and culturally, can be devised and implemented. This would serve to enhance contributions from current models and theories and resulting interventions. Discussion with a national DVA training institute for the healthcare sector acknowledged recognition of the model as having these applications (personal communication, 24.06.2021).

The translation of this to other areas of work with minority communities is also possible, as well as with other close-knit communities. At present, the model has been adapted to develop a reintegration framework for former prisoners from minority communities, with potential to be adapted further.

8.3.1 Limitations

Survivors in this study were predominantly from a South Asian heritage. Whilst this is reflective of the majority of UK Muslims, the findings demonstrate the need to ensure all communities are better represented. Counteracting this, professionals involved in the study came from a wider range of ethnic backgrounds and further worked with a broad range of Muslim communities.

With the researcher also being Muslim, there was potential for personal interpretations and influences to emerge in the data analysis. This was overcome through regular revision of the analysis and written material. At this point, any subjective elements were identified and removed. Equally, the researcher being from the Muslim community allowed for the added insight into cultural nuances which would have otherwise been omitted or misunderstood.

It is recognised that this model is based on limited data however, the flexible nature of the model allows for it to be adapted as required. As demonstrated, the literature lends support to individual areas raised within the web model, as does the data within this study. The next stage to further verify this would be to take the model out into community contexts and test its applicability.

8.3.2 Recommendations

Recommendations for Practice within Service Provision

- The web model can be utilised by statutory agencies to assist in mapping out where
 victims face increased vulnerabilities, particularly at the time of leaving abusive
 relationships. This can then be utilised to put into place collaboratively developed
 safeguarding measures, which are better reflective of individual victim
 circumstances.
- Conversely, the model can be utilised to identify protective strengths. Thereby
 mechanisms fully engaging with these can be planned for, in conjunction with
 support services at both a community and statutory level.
- Equally, the model can be used for the identification of protective and vulnerability factors for individuals perpetrating abuse. This could then ensure more holistic approaches to interventions.

Recommendations for Academia

- The web model can be further utilised for other close-knit communities, with flexibility in terminology where required. Examples of terminology that can be adapted include what the individual psycho-social factors are, who the stakeholders are, the specific intersectionality factors, and elements at the macro level.
- The web model can be adapted for other areas of research pertaining to minority or close-knit communities. At present it has been adapted to demonstrate a resettlement framework for former prisoners from minority populations.

Chapter 9

Conclusion

9.1 Summary of Findings and Discussion

The aims of this research were to gain a deeper understanding of the following:

- To increase knowledge and understanding of survivor views of the nature, occurrence and impacts of DVA in UK Muslim communities, and the processes through which these views are formed.
- 2. To increase knowledge and understanding of community views of the nature, occurrence and impacts of DVA in UK Muslim communities, and the processes through which these views are formed.
- **3.** To understand the barriers experienced in addressing DVA at all levels, within UK Muslim communities.
- **4.** To make recommendations for enhancing understanding, preventative and earlier DVA interventions within UK Muslim communities.

Key findings of the research included the extended nature of DVA within UK Muslim communities. These were identified as being at four levels:

- 1. Individual psycho-social-spiritual factors These related to the victim at the centre of the DVA experience. The intertwining of these factors with the wider network of interactions at the next three levels had a profound impact on how and when victims could access support. Such interactions shaped the entire DVA lived reality.
- 2. Stakeholders Additional stakeholders often played significant roles within the DVA and became integral to the DVA experience throughout its life course. This is critical to understanding the extensive and all-encompassing negative impact of DVA. Without understanding this, DVA services in particular were identified as being limited in how effectively they could support victims from Muslim communities. Awareness of stakeholders furthermore provided insight into how the very same groups of stakeholders held parallel roles. Such roles resulted in the potential to provide distinctive support. This support provided victims with alternative decisions,

facilitated victims leaving abusive relationships and furthermore, assisted them within the recovery process. Equally understanding how stakeholders presented barriers, facilitated active consideration of how such barriers could be addressed within service provision.

- 3. Intersectionality Factors Key intersectionality factors were brought to light. These included DVA understanding, normative cultural practices often relating to ethnic cultures, and faith. Where each of these areas were deemed to be lacking in holistic understanding and application, the DVA became compounded. However, in stark contrast, where such intersectionality was understood and adopted through a holistic lens, it provided a clear route out of DVA which furthermore, key stakeholders within Muslim communities struggled to challenge.
- 4. Macro level factors At a broader level, the shape and structure of societies and how these filtered down into communities demonstrated that DVA could only be comprehensively addressed when external conditions facilitated this. If external social structures worked against communities, as with UK Muslim communities, this not only hindered help seeking behaviours, but further deterred DVA reporting. Macro level structures identified within this research included legislation (not necessarily DVA related), policies and practices, DVA service provision, media narratives, and wider societal cultures.

At the community level, the impact of community responses to DVA can be summarised via two parallel processes. This conceptual process is illustrated in the two figures below.

Figure 5 below summarises the negative repercussions on how DVA was received within some communities, based on the data within this research.

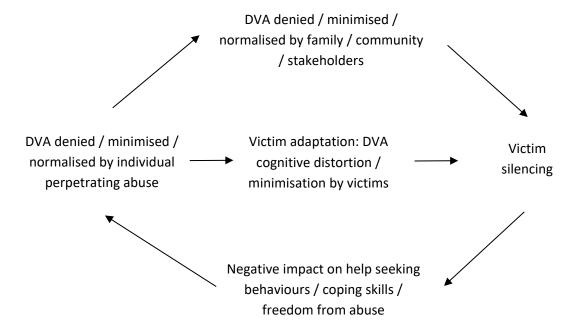


Figure 5 DVA Cycle of Reinforcement

At a conceptual level, a process of denial, minimisation and most importantly, normalisation, initiated the DVA reinforcement cycle. The negative outcomes thereby facilitated an ongoing reinforcement of DVA as normal. This was enforced through stakeholders and thereby resulted in victim silencing. Consequentially, DVA help seeking, coping, and freedom from abuse was limited.

In stark contrast, holistic approaches to understanding DVA, particularly within a faith-based framework, resulted in acknowledging and addressing the abuse. This is summarised in figure 6 below.

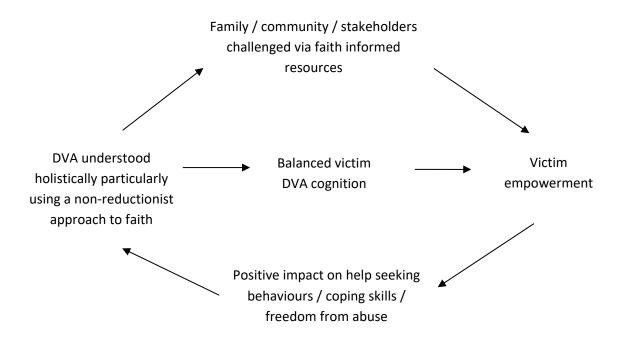


Figure 6 Holistic DVA understanding: empowerment cycle

Through a holistic understanding of DVA, which placed a non-reductionist approach to faith at its core, facilitated the challenging of stakeholders and provided victims with a balanced perspective. This led to victim empowerment which had a positive impact on help seeking behaviours, coping skills, and freedom from abuse.

There are substantial lessons to be taken away from the findings of this research. The first of which relates to the consequences in taking a one size fits all approach. Current DVA interventions, whether at a community level, within the CJS, or within the family courts system, have all been built upon the foundations of long-standing research conducted with a White Caucasian majority sample. Whilst this represents this population group, the systems and structures derived as a result of such research have been applied to all population groups, regardless of differences. This has created a divide in understanding of needs centrally, in addition to the impact on other macro level factors. Coupled with this, some UK Muslim communities have withdrawn into themselves. This has in turn resulted in the invisible imposition of barriers to help seeking behaviours. Hence, the needs of minority communities are going unmet, and suffering continues in silence. By extension, it can be deducted that this would further apply to other UK minority communities.

The strategies used by survivors to cope and leave abusive relationships also significantly differed, with many seeking internal support. In several cases external support was only sought if absolutely necessary. There are notable positives as well as drawbacks to this. However, this does raise the stark question of why this population group was not accessing mainstream services. Whilst some research does exist to shine a light on structural barriers, this demonstrates the very real tangible impact this has on DVA manifestation and continuation. Siddiqui (2018) put forth secular feminism moving toward eradicating religious laws and practices in the consideration of how DVA is dealt with at a statutory level. This ensures human rights are taken forward regardless of background. Equally, it eliminates potential protective mechanisms that may exist within faith communities. Furthermore, as demonstrated within this research, this has not accommodated the needs of those from minority communities, especially where faith is concerned. This has had the opposite desired impact. Whilst it may not be practically reasonable to expect the law to be able to accommodate all religious and ethnic backgrounds beyond a certain capacity, it is however feasible to expect statutory services to ensure their services reflect the needs of the communities they serve.

This feeds back into ensuring minority communities are suitably represented. Equally it points to specialist organisations being adequately funded and supported. Within a collaborative study, researchers found that 69% of respondents (n=139) felt funding to specialist services, and 67% expressed that having culturally sensitive interventions, was critical to community-based responses by minority communities, in relation to harmful DVA related behaviours (Adisa & Allen, 2020). Throughout monthly online meetings held by HOPE consultancy and training (partners in the aforementioned research) during the initial Covid-19 lockdown period, practitioners, academics, and policy makers, consistently raised the issue of allocation of government funding. Practitioners reported how government DVA funds would primarily reach the larger DVA organisations, often run with a White Caucasian majority staff base/lead. Specialist organisations who often held expertise regarding specific population groups however, lacking the structures to secure funding at that level, would often remain excluded. This again reflects insufficient consideration of the differences in how DVA is experienced across different communities, and how current understanding

further feeds into existing inadequacies within the sector. It therefore becomes incumbent on existing larger statutory organisations in particular, to explore ways in which they can improve their service provision and accessibility. One of the ways recommended within this research was through collaborations with organisations internal to communities, allowing for a mutual exchange of knowledge and resources.

There remains a national and international understanding that DVA occurs according to one narrative. However, as this research demonstrated, this is not the case. The dominant recovery support for survivors within the UK is the Freedom Programme followed by the Recovery toolkit. Both of these programmes run over 12 weeks and are based upon the foundational work of the Duluth Power and Control Wheel (Pence & Paymar, 1993). The recovery toolkit further focusses on empowering women within their daily lives. However, the standard programme fails to incorporate additional individuals who may contribute to the DVA, networks of relationships and communities which have a resulting impact on the DVA experience, and structural barriers. Therefore, how individuals can navigate such challenges within their recovery process. Similar patterns emerge when exploring interventions with males convicted of DVA related offences.

Another area of significant consideration relates to the idea of spiritual abuse within DVA. At present, spiritual abuse is synonymous with Christianity within the literature (Cashwell & Swindle, 2018; Istratii, 2021; Oakley and Kinmond, 2013). With UK Muslim communities identifying strongly with their faith, and evidence of misuse of faith for coercive and control purposes, understanding these distinctions becomes essential. With most service provision operating from a secular base, these needs are once again overlooked. If spiritual abuse is discounted at a national level, this provides further impetus for it to be discounted at a community level.

These factors, in conjunction with the findings herein, point towards the need to broader approaches to understanding DVA. At an academic level such an approach would facilitate a more holistic and representative knowledge base. On a practical level, the role of collaborative working in order to best understand and effectively harness nuanced protective resources and social capital within communities is highlighted.

9.2 Original Contribution to Knowledge

This research makes an original contribution to knowledge by unravelling unique aspects of DVA within UK Muslim communities, in a manner previously not explored. In summary, the original contributions to knowledge are:

- A more nuanced understanding of how DVA manifests for UK Muslim communities, inclusive of the additional individuals involved, the role of interconnected networks of relationships and the significant role of faith in facilitating routes out of the abuse.
- A potential toolkit for practitioners to utilise within their services, in order to ensure services can be better informed and individually tailored to the needs of service users.
- A theoretical foundation from which DVA in other close knit communities, whether faith or non-faith, can potentially be better understood and catered for, whilst recognising insider expertise from such communities would be required.

Previous research has been twofold. There has been a strong focus on the DVA dynamics as per the perpetration of abuse, with one victim and one individual perpetrating abuse assumed to be at the core of the abusive relationship (Dobash & Dobash, 1979; Pence & Paymar, 1993). There has also been research looking at victim experiences within the parameters of ethnic cultural identities (Gill, 2004; Kim & Hogge, 2015; St Vil et al., 2017; West, 2004). This research brought to light the manifestation of DVA within UK Muslim communities, placing the victim at the core of their lived reality. It further facilitated this from a multi-perspective approach. This enabled both an in-depth understanding, alongside a broader spectrum of understanding.

In particular, the findings identified the diffused nature of DVA within UK Muslim communities, extending beyond the two individuals within the relationship. This is critical to understanding core DVA dynamics within UK Muslim communities. It is from this knowledge base that appropriate interventions and support mechanisms can be built in. The findings further demonstrated the importance of placing the victim's psycho-social-spiritual context at the core, within their cultural frames of reference, and according to who/what they deemed as being critical to the lived reality of DVA. These factors played a critical role in victims/survivors being able to access support and finding a way out of the abuse. The

interaction with additional elements including stakeholders, intersectionality, and macro level factors were further demonstrated as core components of DVA manifestation. Additional levels within the ecological model (Heise, 1998), have been put forward however, these remain generic across all communities and do not consider the interplay of intersectionality and additional stakeholders. In particular, the network of interconnected relationships. The idea of additional active stakeholders is critical to the findings herein. Such stakeholders were not passive individuals, rather they held considerable power to shape the DVA experience and outcomes. Therefore, to incorporate them into DVA interventions would be essential to addressing DVA within UK Muslim communities. At the macro level, understanding the impact of wider narratives, regardless of whether they were directly linked to DVA, was demonstrated as key to understanding responsiveness within and between communities. Inclusive within this was the interaction of faith identity with other macro level factors. Without accounting for broader macro level factors and their interactions, the issue of DVA would remain partially addressed. Therefore, to place macro level factors within the relevant context permitted the identification of how existing resources could be better utilised.

Critical to this process in its entirety was the consideration of both vulnerabilities/barriers and protective elements across the individual psycho-social-spiritual level, stakeholders, intersectionality factors, and macro level factors. By identifying these, it facilitated the opportunity for developing better informed support and intervention plans, with victims/survivors being placed at the centre. The research thereby facilitated a much deeper understanding of the lived reality of DVA in UK Muslim communities, and corresponding health and wellbeing impacts.

These findings have been demonstrated in a way which facilitates ease of application to real life contexts. Due to the graphical representation within the web model, any service provider, whether statutory or third sector, can visualise placing the victim at the core and considering the web of networks surrounding that individual. This can occur both formally and informally, by those within Muslim communities, and those external to it. It is anticipated that this will support in facilitating enhanced interventions at all levels of society, both in terms of accuracy in meeting needs, and appropriateness. Initial discussion

with the CEO of a national DVA healthcare training provider, found these research outcomes to be in line with their professional experiences in the field. She further reported that the model provided clarity in areas that are often complex to grasp (personal communication, 24.06.2021). In order to do achieve this however, a training toolkit would require development and testing, prior to rolling out.

In respect of adding depth to current DVA understanding, this research has demonstrated critical findings on a more nuanced level. These include:

- The interactions between the different levels involved, as illustrated within the web model. These demonstrated the prerequisite need of understanding the more nuanced dynamics involved in order for interventions to be appropriate. Critical to this was interventions not being one faceted and considering the impact of such interactions. For example, why and how any reluctance to seek support may occur and therefore how this can be gradually addressed. Equally would be cases where help and support are sought out, and how, therefore how these can be better utilised to maximise benefit.
- The implications of recognising the parallel process of barriers/vulnerabilities against protective elements. This was demonstrated through the red solid and green dotted arrows within the web model. These hold potential to highlight the individual differences present across cases. It further contributes to identifying specific areas of increased vulnerability in addition to specific protective elements, thereby providing the opportunity to navigate and harness these as appropriate.
- The profound impact of intersectionality on the lived reality of DVA in UK Muslim communities. The most prominent finding related to the relevance of historical contextual precedents, namely hermeneutics within androcentric societies, resulting in a reductionist approach to faith. This was alongside the interplay of cultural normative practices and DVA related ignorance. Hence providing an acute insight into why DVA can go unchallenged in some sections of Muslim communities. By understanding these dynamics it facilitates the potential for initiating internal and external change and interventions.

- The significance of national and international narratives surrounding Muslims, not always necessarily DVA related. Equally how this translated into the lived reality of DVA for individuals and communities. By prioritising why communities potentially revert into themselves due to existing narratives, provisions at a service level can consider their own structural barriers which may further prevent help seeking behaviours. From this they can then start to address such barriers. It further facilitates opportunities for communities to internally consider their engagement with external agencies, and how they can initiate change from the inside out.
- Recognition of communities as powerful agents of change and the importance of facilitating internal empowerment. Key stakeholders played critical roles within the DVA process. By acknowledging, recognising and facilitating these roles, change is anticipated to have a wider and more effective reach. Communities held considerable social resources to facilitate internal change. With collaborative support, this power could be further enhanced.
- In extension to the above, the potential for collaborative work between grassroot organisations within Muslim communities and the statutory sector was brought to light. Both consisted of specific advantages and resources, hence by pooling such resources, with opportunities for mutual learning and growth, the potential for greater effective outcomes manifested.
- In the same way that victim needs can be assessed via the web model, assessment of those perpetrating DVA can also be conducted. By utilising the web model, statutory and third sector agencies alike can examine the positioning of those perpetrating abuse using the model. From this they can examine the web of networks which need to be considered for intervention purposes in relation to DVA perpetration, inclusive of the victim. This would serve to identify DVA vulnerabilities as well as protective mechanisms that could support towards creating both internal and external change. This would be slightly more complex in that the buy in of the individual perpetrating abuse would be required in order for accurate assessments to take place. However, where interventions are court mandated, this could provide a legitimate way to secure such buy in.

Part of the motivation for this research initiated from work with survivors wherein their cultural needs were not being addressed. Previous exposure to two contrasting narratives in relation to DVA justified under cultural normative practices, against a faith narrative shunning oppression and abuse, further motivated the need to understand the underlying nuances. At the core of this was to explore the potential for increasing health and wellbeing by addressing DVA. The findings above demonstrate progress towards this.

9.3 Implications for Practice

This research offers several potential implications for practice. Firstly, in terms of the depth offered within the first two studies, this permits a greater understanding of the nuances of DVA experiences within Muslim communities. Thereby allowing service level provision to gain an insight into such nuances, which may otherwise be missed. Some of the depth covered are aspects that survivors or professionals would not necessarily discuss within mainstream provision, due to the levels of sensitivities and complexities involved. Therefore, this can provide a level of insight that may not ordinarily be accessed. This is also particularly useful within academia, where current literature regarding Muslim communities in relation to DVA remains limited.

Secondly, the web model can be used by various statutory and third sector bodies as a tool by which they can plan better systems of support. Furthermore, such plans can be individually tailored through use of the model. When working with victims/survivors, the model facilitates a greater understanding of the parameters which need to be considered in a highly visual manner. It is hoped this will provide better informed platforms from which interventions can then be planned and implemented with ease. Crucially, this would be carried out in collaboration with the victim/survivor. Hence facilitating autonomy and control where once these may have been forcibly removed. It is expected that such an approach would assist in developing trust and mutual respect between service provision and service users. The ease of the model additionally allows it to be used across a range of sectors, whether healthcare, social services, emergency services and so forth. The focus throughout would remain on the wellbeing of the victim/client.

Leading on from this, external bodies at a macro level can use the model to consider how their structures impact upon community engagement. By identifying barriers placed upon communities through structure, macro level systems can begin to consider how such barriers can be removed and replaced with enablers. This would not be simplistic and straightforward. Whilst some of this literature already exists (Ahmad et al., 2009; Oyewuwo-Gassikia, 2016), it would require additional exploration by academics and practitioners alike to further pinpoint what the barriers may be, and how these can be overcome. However, the model does provide a broad skeleton that can be used as a foundation to build upon. It further allows the impact of barriers and enablers to be traced through communities, down to the individual level. The potential to achieve this through collaboration with resources already present within Muslim communities is further highlighted. The research demonstrated that at a community level, communities held power to facilitate change. Macro level services working with specialist services already placed within communities, holds potential for exchange of resources and expertise for the purposes of mutual benefit.

Finally, the model can be adapted for application to other close-knit communities and additional research areas. Examples include other faith groups and minority communities, as well as specific research pertaining to close-knit communities. One such example is developing a reintegration framework for former prisoners from minority communities. This has been currently developed as part of part time employment research activities, wherein existing literature has been used to build and support the adaptation of the model. In the same manner, this could be utilised for other areas of research relating to close-knit or minority communities.

9.4 Strengths and Limitations

This research did not transpire in a linear format. As the research developed and various challenges were encountered, adjustments were required along the way. The first of which related to an intended third study with Muslim males currently in prison for DVA related offences. Ethical approval for this study was acquired from HMPPS and Brunel University London. This study was intended to investigate the research subject to a greater degree, permitting additional perspectives and thereby informing interventions from a holistic context. Recruitment was carried out through several means including through the prison chaplain, advertising in the prison newsletter, and through interventions staff. Recruitment was attempted at two secure sites. No direct recruitment however was permitted. Spending

one day a week for a period of a year on a secure site was also intended to ease the process of undertaking forensic research. However, despite all attempts, no participants came forward. It is anticipated that there may have been a number of factors behind this. This included the limited numbers who would have been eligible for the study criteria within the secure sites at the time of recruitment, the sensitivities of the subject itself, and potentially, the research being conducted by a female Muslim researcher. Not being able to directly speak to potential participants may have also contributed to the research objectives not being clearly understood. Posters and information sheets were distributed however, literacy levels may have prevented these being read and properly understood despite use of simplified language. Whilst this study would have been insightful into the perspectives of those who had perpetrated DVA behaviours, conducting research with survivors and professionals with a focus on community responses, provided an insight into how DVA was perpetrated, and in some cases permitted to perpetuate. These have been particularly explored within the first two empirical chapters.

Due to the recruitment struggles this study was reconsidered. The aim had been to utilise the findings to inform interventions for those who had perpetrated DVA related offences, and further gain this perspective on DVA. This would have facilitated a holistic approach to understanding the subject as a whole. After reviewing this it was decided that the next closest option to achieving a similar objective would be to interview interventions staff within secure settings. The primary question was to be based around exploring the cultural barriers interventions staff experienced, when working with Muslim males serving sentences for DVA related offences. This would have provided an insight into the views upheld during DVA perpetration and thereafter. It would have further facilitated a comparative analysis of the understanding of cultural differences between the different studies and participant samples for example, the understanding of interventions staff who predominantly tend to be White Caucasian, in comparison to Muslim participants. An ethical approval amendment was submitted to both HMPPS and Brunel University London, with both granting permission to change the focus and participants. Recruitment for this study commenced and 3 interviews took place. However, the world then faced Covid-19 and lockdown was introduced overnight. No research at secure sites was permitted. Remote

interviews were also not being permitted at this time, particularly in relation to potential security issues. Upon reviewing this with supervisors, it was felt that 3 interviews were not sufficient to complete a full data set. Therefore, these have been placed aside for future continuation. In its place, the two existing studies were explored, further reading conducted, and the development of the model through an MP-IPA approach began to emerge. It had been intended that a comparison across the datasets would be carried out for a discussion within this final Chapter. However, utilising the MP-IPA approach facilitated greater in-depth analysis, which further facilitated the development of the model.

This could be viewed as a drawback to the original study design. However, in reflection it facilitated the development of thinking more broadly in relation to the data that was already gathered and the wealth of depth it provided. This process required flexibility and willingness to see opportunities within the constrictions faced. Equally it facilitated creativity and increased depth of analysis and stimulated understanding which may have otherwise been missed. Research by its nature is often surrounded by challenges. Independent thinking and perseverance in particular have been found to be attributed with successful completion of psychology doctorates in the US (Gardner, 2009). Being dedicated to the topic, persevering through was always going to be the primary option.

The study thereby offers two levels of depth. The first is the web model itself and what it has to offer to individuals, and communities, up to the macro level. Secondly is the first stage of the IPA analysis for each study respectively, allowing for a greater depth of understanding to come to the forefront. Whilst it was not triangulation, this multi perspective level of depth also contributed to ensuring rigour within the research process (Hadi & José Closs, 2016). There has been a recent move towards open access and preregistration of research to facilitate transparency and rigour within research. Preregistration was not possible for this research due to having commenced data collection prior to pre-registration becoming more established within doctoral research. Open access of the raw data was also a limited option predominantly due to the sensitivities of the research. Had transcripts been made open access this would have presented the risk of participant identities becoming known. The ESRC stipulate for open access to data where possible however, raw data not being made available in this manner was established at the

outset. This will continue to be a specific consideration within sensitive qualitative research whereby raw data transparency could pose risks to participants. It could be argued that some elements of the transcripts could be removed before making the data available however, this would require the removal of significant amounts of raw data thereby making the access meaningless. To counter this, the scope of the thesis permitted extensive depth of analysis whereby sufficient extracts of the original data were included at both levels of analysis (May & Pope, 1995). This facilitated the visibility of the relationship between the data and the interpretation to be traceable by external researchers, where full transcripts themselves could not be made available. The methodological approach adopted at each level of analysis was followed in a systematic and coherent manner as outlined within the methodology chapter. In line with Hadi and José Closs (2016), reading of the extracts and their interpretations were also carried out within supervision. Nizza et al. (2021) further identified the presence of a compelling narrative which unfolds, bringing forward depth of experiential narratives, the analysis remaining close to the extracts, and being attentive of both convergence and divergence, as building quality within qualitative research. The two stage analysis of IPA followed by MP-IPA within this research facilitated these processes. Within future research, consent could be gained at the data collection stage for complete transcripts to be shared with external researchers under the same confidentiality conditions as the lead researcher, in order to ensure rigour within doctoral research. When conducting research as part of a larger team, it is expected that all team members would have access to the raw data and therefore building the analysis collectively would be embedded within the methodology. The future testing of the DVA web model will also help to identify whether the data analysis could be further enhanced.

The researcher insider positioning enabled subtle nuances and cultural norms to be brought forth from the data where they may have otherwise been missed. This facilitated a unique perspective to analysing the data that others without that insider understanding may not have grasped. This was particularly so in relation to comments which were of great significance to participants due to the cultural implications. However, researchers without that cultural insight may not have known to draw out such points. This added to ensuring the expertise of the participant was framed within a decolonial approach thereby enhancing

its authenticity (Hegazy, 2006; Hussein, 2006). Greene (2014) highlighted benefits of insider research as prior knowledge, ease of access, and fluidity of interaction. Negatives of insider researcher were outlined as the risk of subjectivity and bias. Equally, Unluer (2012) further stipulated potential risk of bias and loss of objectivity in data interpretation as likely disadvantages. These were mitigated through reading of the analysis numerous times in order to remove any subjective elements, with supervision input at regular intervals. This was a process that required ongoing attention, particularly in the initial stages of analysis. Furthermore, the reflexive process facilitated the acknowledgement that whilst having previous practitioner experience, standing back and examining the data was dissimilar to practitioner engagement. Therefore, specific outcomes were not already anticipated, allowing for the data to guide the analysis. In that regard the third study was both an unexpected outcome of the data analysis, and further supported the credibility of the data analysis within study one and two.

It should be noted that this insider perspective is limited to the Islamic faith. In relation to other faiths, including those of the monotheistic tradition which align with Islam, the same insider perspective would not apply. It is anticipated that additional nuances and dynamics will be present and therefore potentially overlooked by myself as a Muslim researcher. This may extend to specific scriptural significance, religious hierarchical power dynamics within communities, and differences within community structures at the grassroots. It would therefore be important to ensure those with insider knowledge were leading on research with survivors of other faith groups.

Whilst the sample sizes may be considered small in reflection of the potential use of the findings, they are sufficient in relation to qualitative research, where less is considered more (Reid et al., 2005; Smith, 2004). The literature available to date supports the findings thus far, and further demonstrates where continued research is required. Additionally, the web model has been well received by external agencies working in the field, including the Detective Inspectors of the MET police, academic audiences, and practitioners.

The survivor sample consisted of predominantly South Asian Muslims, lending to questions surrounding representation. Whilst the majority of UK Muslims are from a South Asian heritage, there is the need to ensure other ethnic backgrounds are also included within this

research. This was however counterbalanced by the fact that the professionals in study two worked with a broad range of clients, from a much wider cohort of ethnic backgrounds. As much of their professional experience had been over a substantial number of years, this lends credence to the findings and representation.

Finally, is the potential ease and flexibility of application of the model by all sections of society. The visual representation in particular has potential to ensure that within highly stressful environments, practitioners from various fields can apply the model for the protection of vulnerable individuals, without having to recall complex details. However, it is recognised that in order to be able to do this, such practitioners would first require training on the model itself, how they can apply it, and exploration of any problems they may face in its application. Further to that would be how effective a tool it is. Discussions have been initiated on developing this work with a national DVA training organisation, with future developments planned.

9.5 Ethical Reflections

The ethical approval stage required due consideration, particularly in relation to prevention of causing further harm and trauma to participants. Therefore, no specific questions relating to actual DVA incidents were asked. However, when conducting the research, survivors in particular (90%) were keen to talk about their experiences and most wanted to almost narrate their stories. To speak about just the community responses would have decontextualised their experiences. Hence it felt appropriate to allow participants to lead on the interviews, with some interjections in order to ensure the research questions were addressed. Equally, the narrative of personal stories facilitated the development of the web model. As participants spoke it became clear survivors were utilising the research as an opportunity to self-reflect. Hence it is important to ensure as a researcher, whilst allowing the participant to contribute in the manner they wish, equally ensuring they are not being harmed further. This was achieved by checking regularly with participants if they were comfortable to continue, allowing breaks to have a drink, reassuring participants that they do not need to go into any details they do not wish to, and in three cases completing the interviews over 2/3 sessions. With survivors having had limited platforms from which they could voice their experiences, this type of response should be anticipated with future

research. Participants were also contacted several days after the interview to check on their wellbeing. They were also provided with details of support organisations, should they have felt the need to speak to anyone else further.

A similar experience within the second study was also experienced, where participants in the professionals study asked numerous questions of myself as the researcher. For example, they wanted to know which generation of Muslims in the UK I belonged to, what area of South Asia I had roots in, and whether I understood contemporary struggles faced by Muslims. This allowed them to assess the depth and content of their answers and what would be received and understood. Building that trust was crucial for participants to open up and feel like they would be understood. This was particularly when it regarded discussing macro level challenges. Even then participants remained guarded. Again, these are critical considerations for future research in the area, and with minority communities in general. Building trust specifically is crucial, as is participants knowing that they will be understood. This has implications in relation to who carries out such research, particularly when it relates to sensitive issues with communities that are generally under-represented. It further raises questions in relation to analysis and dissemination as elaborated on further below.

As this research has demonstrated, it is important for participants to be represented accurately and sensitively, and for participants to know that the information they provide will not be mis-used in any way. Furthermore, the potential emotional impact of revealing such information also needs to be considered and supportive mechanisms put in place. The information provided within the research process was deeply meaningful to the life of the participant, therefore it required treating with respect and due regard. This also filters into what data is eventually used within dissemination. I intentionally chose not to include specific extracts wherein survivors spoke with graphic details regarding their DVA experiences. Whilst I acknowledge that they were fully informed of the purposes of the research, it may have been that they felt comfortable and hence went into further details than they might otherwise have done. Despite no participants asking to see the transcript or requesting to have anything removed, I made the conscious decision with very explicit DVA incidents that if the information could be represented in a different manner, such as through a summary, then it should be. This was particularly the case wherein survivors

spoke about incidents relating to sexual abuse, sexual assault and rape in particular. The vulnerability in survivors was clear at the time of interviews and it was possible to convey this without further exposing the vulnerability of the survivors. It also meant viewing the information provided as someone's life experience, rather than seeing it as data in a very detached manner. Had the research been specifically in relation to sexual abuse, sexual assault, and rape then that would have changed such parameters and would potentially have necessitated the inclusion of such details. Even then, ensuring that individuals are not viewed as data would still remain imperative. This points towards consideration of terminology itself within academic research. Detached language such as data, participants, data collection, dissemination are all problematic in this regard. At present, it is possible to try and balance the human nature of research, alongside the academic terms. However long term, the use of language to create detachment within research, particularly within minority communities require further development. This will be explored further when considering theoretical implications.

Additionally, the potential impact on the researcher also needs to be considered. Having had a practitioner background, listening to sensitive details is not something new to myself. Nevertheless, it does not mean it will not have an impact. I ensured to utilise supervision for debriefs after conducting interviews. I also utilised my reflective diary for any thoughts that came later. My own spirituality and previous work relating to faith informed recovery from DVA additionally provided me with supportive mechanisms of my own. Such factors would need to be considered in future research, especially wherein researchers may not be accustomed to hearing sensitive and sometimes traumatic details.

9.6 Theoretical Implications

At the focal point of this research was ensuring those who participated were being represented from their cultural frames of reference, as opposed to having frames of reference imposed upon them. An IPA methodology, in combination with the MP-IPA methodology, was felt to be one way in ensuring the voice of the participant could permeate through. This required amalgamation with the cultural frameworks stipulated by participants themselves. However, that too required proceeding with caution.

Istratii (2020) expanded upon 85% of knowledge production initiating from the Global North, according to the Web of Science's SSCI list. Therefore, the impact on methodologies must be accounted for. Hegazy (2006) put forward curricula necessarily being based upon the dominant culture. As a western educated doctoral researcher, trained in western based epistemologies, with insider knowledge of the Muslim faith, it was important to ensure my own epistemological training was not imposed upon the research and participants in particular.

In the same way that Ayubi (2019) provided lengthy treatise on the gendering of moral authority through scriptural interpretations, Megahed and Lack (2011) explored at length the impact of colonialism on Arab women's inequality. Both direct towards the removal of female autonomy, replaced by external concepts of the role of women in society superimposed on them. Ayubi (2019) presented the intersection with cultural patriarchal norms, thereby imposing traditional role expectations upon women, removing them of participation from public spaces. Megahed and Lack (2011) detailed western colonialism superimposing ideas of liberation upon Muslim societies, in particular relation to women. Therefore, religious dress such as the hijab were viewed as oppressive and the process of assimilation became enforced. Under Muslim Ottoman rule, Muslim males and females fully participated in the madrasa education, which consisted of a much more encompassing and holistic syllabus than current day systems. Malik (2016) expounded upon this on a global scale, highlighting the historical true extent of female equal participation in education and knowledge production. However, both Mailk (2016) and Megahed and Lack (2011) detailed how under western colonialism, lands were divided, separating out the expansive education networks created. Indigenous education systems and customs were replaced with colonial speaking syllabus and cultural systems. Education standards began to drop. Coupled with further patriarchal cultures, this eventually led to the decline in education levels for Arab women in the Middle East (Megahed & Lack, 2011) and the Muslim world as a whole (Malik, 2016). Thereby spaces were created within which Muslim identity was grasped at through the increased reductionism approach (Malik, 2016). Megahed and Lack (2011) stipulated that this led to women's rights being governed from three perspectives; the local customs intertwined with the faith, western colonial perspectives, and international policy. The

struggle between the three continue to the present day and has resulted in impacting everyday lives and participation of Muslim women. The filtering down of this in how DVA is internally addressed within Muslim communities has been highlighted within this research.

The relevance of this to research with western minority communities therefore cannot be disregarded. Such minority communities have a historical relationship with the legacies explored above, as expounded upon within this thesis. Collective and individual identities continue to develop as historical roots are explored. The legacy of this history continues to impact present day communities. Gill et al. (2012) stipulated the wounds that continue long after colonialism include epistemological and ontological wounds. Hence the problematic nature of terminology such as data, participants, data collection and the like. Historically, colonised countries and their populations had such research done to them. The reductionist approach to faith, how it originated, and the continued legacy with communities undergoing internal identity struggles, whilst balancing external scrutiny, is one example of the continued impact. Further significance to this was the findings herein, indicating the need to return back to authentic faith roots in particular, in order to challenge and address DVA internally. This would potentially facilitate internal community empowerment and change at a grassroots level, but from a perspective that could be identified with by those concerned. As Istratii (2020) depicted, it must be ensured that well meaning does not facilitate room for continued colonialism under different parameters. She identified this as further contributing to the problem, than helping with resolutions. Istratii (2020) argued that Eurocentric theories accentuate a disconnect between the lived reality of everyday lives and theoretical understanding. This was clearly demonstrated within this research whereby existing DVA theories did not holistically account for DVA within UK Muslim communities. Hence why within this research, including the perspective of the participant, according to their lived reality and cultural parameters took precedence. With their lived reality expressed as having clear differences, the application of theoretical levels being reflective of such differences became even more paramount.

Linking this back to epistemological approaches in line with participant cultures within this research, understanding of Islamic psychology and social processes does not stipulate a binary approach. This concept is visualised within Rothman and Coyle's (2018) model of the

soul, wherein an overlap with secular psychology was also visible. It advocated the consideration of cognitive, emotional, physical, and metaphysical as per the identities of participants. Nasr (2016) promulgated a non-monolithic approach of taking from that which provides benefit as being foundational to the Islamic faith tradition. Therefore, within the analysis of the research data herein, care was taken to adopt a balance between the two. With Islamic Psychology re-emerging after significant inertia (Awaad et al., 2020), it was deemed critical to be inclusive of this field when considering Muslim communities.

The advocation of participatory action research (PAR) as a means of overcoming participants having research done to them, as opposed to being integral to the process, has been put forward (Gill et al., 2012; Mohr, 2020). Akom (2011) further advocated a movement towards new developments in qualitative research, whereby collaborations between academia and communities underpin the foundations of research. To date, such a decolonial approach has heavily focussed on PAR methodologies. However, within this research, the IPA and MP-IPA methods were utilised with the added layer of the researcher also being a member of the communities in question. This facilitated an insider perspective and understanding of cultural frames of reference. This is in contrast to western scientific approaches focussing on impartiality and distance (Akom, 2011). As demonstrated throughout this research, such insider insight was critical to the entire research process, from conception to dissemination and beyond.

Thereby, within theoretical considerations for research with minority communities, it is advocated to ensure participants truly are at the forefront of the research. Akom (2011) presents the use of Black Emancipatory Action Research (BEAR) methodologies drawing on both action research and participatory research. Integral to this approach were five foundational points summarised below:

- 1. Race as a foundational consideration, particularly in relation to intersectionality and interlocking factors which result in systems of oppression.
- 2. Challenging the application of existing research paradigms from one culture to another culture.

- 3. Taking a transformational approach to research whereby internal community resources are utilised for the purposes of both problem identification, but more importantly, dynamic problem solving in a culturally appropriate manner.
- 4. Utilisation of knowledge of those directly concerned with research questions.
- 5. Interdisciplinary foundations to inform understanding of new knowledge generated for both internal and external communities.

Whilst the BEAR method was originally founded upon research with Black communities, its application to other minority groups is clearly identifiable and advocated as such by Akom (2011). As such, the above would be significant theoretical implications from this research, for future research with minority communities. It is recognised that in some cases, due to the sensitivities of the research and those it concerns, the extent to which they are actively involved in the entire research process may need to be limited in order to ensure prevention from further harm. In such cases, due regard should be explored to ensure other means of representation where possible are utilised, for example, through a multiperspective approach.

9.7 Research Reflexivity

Reflexivity as a Foundational Process

Reflexivity is considered integral to the research process (Dodgson, 2019). Whilst it has been described as keeping distinct distance from participants (Dowling, 2006), in other places it is described as critical self-reflection throughout the entire research journey (Dodgson, 2019). Dowling (2006, p8) states reflexivity as 'being aware in the moment of what is influencing the researcher's relationship to the research topic and the participants', therefore conscious of both personal and epistemological influences. Dowling further argued that the researcher can never be fully independent of their participants or research topic. Indeed, most researchers investigate a topic because of their vested interest in the field. I would further argue that reflexivity extends beyond the participants and the research subject. My experiences have demonstrated that it has the ability to strike at the very core of identity, both personally and as a researcher. Further, that it extends out to every step of the

research, from conception to write-up, to dissemination, and beyond. Reflective models such as Kolb's (1984), Gibbs (1988) and Rolfe et al. (2001) framework for reflexive learning, are useful for encouraging deeper reflection throughout the process of conducting research, particularly in relation to exploring enhancing research practice. However, I would argue reflexivity extends much deeper and broader than this. I have thus far experienced it as a dynamic process which does not cease to evolve. I will expand upon this further below.

Utilising an autoethnography approach as outlined by Denzin and Lincoln (2002), where the autobiographic intertwines with narrative, I will proceed to demonstrate my experiences of reflexivity as all-encompassing. Due to thesis constraints, I have selected the most prominent experiences to illustrate this.

In reality, reflexivity for myself originated prior to commencing the doctorate itself. Having returned to University to study my MSc Psychology I came across an internal advert for a doctorate and decided to investigate further. Hence I met Professor Belinda Winder who has been firmly appended with my company since! With one year of my MSc remaining and therefore not yet able to commence a PhD, I was instead introduced to the prison research environment through Professor Winder. From my initial exposure to the potential of embarking upon a doctorate, I already knew this was right for me, despite knowing it would be challenging. I knew my topic would be in the DVA field. My MSc study with Imams working with Muslim males in the community within the context of DVA was already a precursor to the doctoral research. Therefore, my search for funding commenced as did development of my research proposal, CV, and applications. Within this process I contacted Professor Tess Kay whom I had been fortunate to work with some years previously at Loughborough University. She pointed me in the direction of the ESRC GUDTP at Brunel University London. I made my application whilst battling late night studying and toilet training my little one. Walking in to present my proposal to a panel of three turned seven, was incredibly daunting. My conviction deepened, I believed in my research, it was a topic that desperately needed further understanding. At that precise moment I decided I would give the interview my best effort and leave the rest with God. I forgot my words, my brain was still functioning on baby language which I explained to the panel. Their reassurance helped me to persevere and talk about what I knew of the needs from my previous

practitioner work. I did not anticipate just how much my life would change when I received the news that I had been successful. As much as it was daunting, my motivation to achieve only increased. I knew people who had suffered first-hand through my practitioner work and through interaction at a community level. I had not planned this as part of my journey, but clearly it was part of the plan I was destined to travel. My key lesson at this point was to be human. To show our humanity is what connects humans and overrides the differences. The reflexivity became further established, my intentions in wanting to support victims and prevent potential future victims was reconfirmed, and the next chapter of my journey began.

My reflective diary commenced six months after officially starting the doctorate. Journaling has been considered a positive way to adopt reflexivity in phenomenological research through bracketing (Koch & Harrington, 1998). Thereby allowing for biases and preconceived ideas to be placed aside. The first six months were spent on intensive research integrity training, methodological training, reading, completing the HMPPS ethical application, and adjusting to postgraduate study with a small child alongside working part time. I was adeptly plagued with feelings of inadequacy, wondering what I was doing on a doctorate, and questioning how I would ever achieve anything. To say it has been a steep learning curve would be an understatement. My life transformed in huge leaps overnight. From going to wondering how I could possibly undertake such a feat, extending to how I would physically get myself onto campus, to then participating in the 3 Minute Thesis six months later, achieving first place within the school heats and second place at the University level. It pushed my boundaries and experiences in milestones rather than steps. It further re-established why I was undertaking this research, with victims being placed at the core. I knew I had a role to play however, I was not quite sure what that role would be. Even now, as I write this, I am acutely aware that this continues to unfold. The voice in my head wondering what I was doing here remains, albeit not as loud. My commitment to contribute to positive change continues to drive me onwards.

From an Islamic theological perspective, reflexivity could be considered akin to the concept of muraqabah. This is a deep level of introspection (Al-Ghazali, 2016; Awaad, 2020), not limited to specific times, experiences, or places, but rather embodied within the entirety of

a person. I do not put it aside when involved in other work, or when placing the PhD aside to rewind my batteries. Rather it is integral to my identity and underlies every action and every motivation behind each action. It stems from a deep sense of accountability further to underlying all actions with a higher purpose. This of course stems from my own faith identity and hence provided an added layer of depth to the motivation and meaning behind my own doctoral research. It facilitated consistent awareness throughout the doctorate process, helping me to avoid becoming trapped when I struggled to overcome barriers. One example that comes to mind was in developing my academic writing. This has been painful to say the least and I fear potentially more painful for my supervisors at times, Professor Winder in particular. Not only was I still adjusting to academia, but having a young child was always going to take precedence mentally. Therefore, having the mental energy and psychological space to think and develop ideas did not always come so easily. Expressing such ideas academically was further arduous. However, keeping my reflexivity as a grounding foundational process, facilitated continued motivation.

Creating Safe Spaces for Researchers

Towards the end of my first year, I was accepted to deliver a paper at a conference in London. My topic was in relation to my MSc precursor study to the PhD; Experiences of South-Asian Imams in working with Muslim males in light of DVA related issues. The focus of my oral presentation was in relation to scriptural verses being randomly taken out of context, misunderstood and misapplied, and how this contributed to a breakdown in identity and promulgated DVA misunderstanding. Ironically when it came to the Q and A, an older white male stood up and proceeded to tell me how my "Qur'an" and my "religion" allowed "men to hit their wives". He further proceeded to give me a verbatim translation of the specific verses he was referring to. In my naivety I attempted to address his question, whilst the organisers attempted to move onto the next question. They had observed what my naivety took longer to recognise. Whilst I calmly tried to address the question, I later realised it would have been better left unaddressed. Instead, I should have directed the individual to the core message of my presentation which clearly had been disregarded. The very point that when verses of scripture are randomly selected out of context, they can be manipulated by anyone to mean anything, as he had perfectly demonstrated. My poor

attempt at answering, whilst I myself was still at a basic stage of grasping a complex history, was another steep learning curve. My awareness was rudely jolted when my response was promptly discounted and the individual repeated for the third time his first, what I then recognised as statement, rather than question. At which point numerous members of the organising team had stood up to intervene. Realising there was no question, I swiftly moved on in addressing an audience of experienced academics and practitioners. In contrast, after the session, I was greeted with lots of encouragement from the remainder of the audience and distinctly told to ignore such perspectives (to put it politely). A debrief with my supervisors assisted in processing what had occurred. Whilst I appreciated that organisers on the day attempted to intervene, having made contact with the lead conference organiser afterwards, I was disappointed that more action was not taken. The individual concerned was clearly a regular conference attendee, having been addressed by his first name. My understanding at that point was that such delicate work in this field required open mindedness and a capacity or willingness to gage complex cultural nuances. Reflecting back now, the very fact that such views were given a platform exhibited legitimacy to hold such views. The effort made to memorise the translation, could have been channelled into deeper questioning and reflection. However, an open mind and a willingness to ask ourselves difficult questions is a prerequisite for that, and not everyone is comfortable with such introspection. It is also easier to defend our worldview by conceptualising difference as a threatening other, as demonstrated within this research. Butler (2013, p96) identified the preference to 'remain ignorant in the name of unyielding moral principle' as being a form of anti-intellectualism. That to learn would go against one's own moral principles and established norms, therefore a state of ignorance was preferred.

On the opposite end of the spectrum, during the first Covid-19 lockdown, PhD progress halted to a stop. Being in lockdown with a 5-year-old pushed the limits of mental capacity. However, despite the restrictions and challenges, the world suddenly became much more accessible. I was able to listen in on a number of webinars which helped to consolidate some of my earlier and latter thinking. I was also asked to be involved in a number of webinars and discussions in relation to DVA. Lockdown had thrown a spotlight onto the topic in a new manner. It was within one of these discussions with two prominent UK Imams

and a third sector organisation in which the topic of training Imams was raised. Having previously worked in the sector, delivering DVA training to individuals from a wide range of backgrounds, and having developed and ran a faith informed recovery programme, I was thereby asked to contribute. The host commenced the conversation with asking why the wheel needed to be reinvented, as I had already developed training programmes which could potentially be adopted. The question arose however, that for one of the imams to work with others on this sensitive topic, they would "first need to know" that others working in the field were not "man hating feminists". This was supported by the second individual's silence, further accompanied by appreciating the "passion" I exhibited, but that Imams would not appreciate a female trainer over a male Imam "expert". The comparison provided was doctors only take advice from doctors, similarly Imams were the same. Whilst I initially appreciated the potential underlying consideration that some male Imams may have been unlikely to heed training under a female, this soon became hollow. My immediate thought was doctors consult doctors when they need medical expertise, but they are hardly likely to consult a doctor if they need engineering advice, or any other specialism other than their own. The logic did not stand with the example. Particularly when the same Imams upheld that you do not go to medical doctors for theological based advice. The logic was further defied when I was asked to hand over all my training materials so that they could be vetted. Needless to say, that did not happen.

My shock took a significant period of time to settle. Another debrief with supervisors ensued. My immediate thoughts went to this being one of the very reasons why women remain trapped in abusive relationships. Their personal autonomy is taken away from them through the upholding of patriarchy. They must therefore rely on the expertise of those with higher religious authority, even if that put their lives at risk as this research has demonstrated. There was a clear demarcation; a female working in this area could not hold expertise and could only exhibit passion, particularly in comparison to male expertise. By virtue of gender, she could not achieve expertise and by virtue of working on justice and equity for females she posed a risk of being a man hating feminist. Yet it was Islam that established the most revolutionary rights for women over more than 1400 years ago, rights which British women only started to gain in the 20th century. The patriarchal roots behind a

reductionist approach to faith which transpired through my research filtered through. Within this encounter the reductionism outlined by Mahmoud (2021) shone out, whereby the study of the Qur'an itself became categorised into four superficial levels³⁰, all exempt of deeper embodiment. Isgandarova (2019) took this further by presenting the complexities in reductionist terminology describing Islam as a religion. Drawing on the work of Ahmed (2015) she presented Islam as a human phenomenon, underpinned by 'supportive counselling' and 'spiritual guidance' within the psychotherapy context (p18). Mahmoud (2021) specified such an all-encompassing outlook could be possible by virtue of the depth and breadth within the Qur'an³¹. Critically, he pointed out that the prerequisite of studying Qur'anic subjects included ontological, epistemological, environmental, political, economical, spiritual, and psychological relevance to the communities they applied to. Thereby moving away from reductionism and towards contextual depth.

In both of the above examples, the attempt to remove female autonomy was present. Everyone had a voice as long as they were male. As a Muslim female, this was only compounded both internally and externally to Muslim communities. Upon continued reflection, I see how such attitudes have permeated society to such an extent that it has become invisible. Therefore, to point out what is no longer visible results in blank expressions on a good day. Equally I am fully aware that since those incidents I have commenced teaching Pastoral Care at BA and MA level. A significant majority of my students to date have been male Imams. Imams who seek out knowing more, who openly admit they know little about this topic, yet recognise how important it is due to the sheer number of requests for support they receive. Imams who have gone through the same traditional training route yet, are not afraid to ask myself as a female for my advice, based on my professional experience and my research efforts. Some are younger, some are older. I have been asking myself what the difference is? Whilst I would never purport to know the

_

³⁰ Mahmoud outlined these reductionist approaches to the Qur'an as the Qur'an only being viewed in terms of the recitation and oratory benefits, the Qur'an being limited to understanding it at a superficial level of language and text, the Qur'an being viewed under the lens of structure and arrangement, and finally the deduction of meaning and interpretations.

³¹ These he identified as the fields of theology, philosophy, spirituality, jurisprudence, medicine, astronomy, and rhetoric.

inner workings of an individual, what I do see externally is the willingness to push oneself out of comfort zones, being open to new experiences, and being open to looking at things in ways that may feel awkward and uncomfortable at first, until the jigsaw pieces fit together. My students are willing to admit that they do not always know how to apply the theological training they have had. That they do not always have the answers. That they too are trying to find their way through and want to learn from where opportunities arise. What I experienced can only be described as a micro level of what my research has demonstrated. Faith, when explored holistically, opened up doors. Yet the very same faith, when looked at through an androcentric reductionist lens, closed doors with invisible barriers.

Creating safe spaces for researchers, particularly with sensitive research, is therefore critical to researcher wellbeing. Within their literature review, Schmidt and Hansson (2018) outlined the array of stressors placed on doctoral researchers during PhD studies. These were identified as ranging from institutional, including peer pressure, publishing pressures, scholarly pressures, to external responsibilities and roles they may hold in their personal life. Within my own trajectory beyond these, I was conscious that my identity as a Muslim female was always carried with me wherever I went. I remain highly conscious that this identity is not always well represented and therefore not always well received. Therefore, whilst I had safety mechanisms built in through excellent supervision and was aware of the potential sensitivities, such experiences still came as a shock and disappointment. They brought about the realisation that my experience as a researcher was a micro reflection of the very processes described within my research itself. The DVA web model paradoxically applied to myself as a researcher; having to navigate my way through the various levels, both internal to Muslim communities as well as external. Simultaneously I was required to be conscious of the interactions between each, aware that my actions and non-actions would have a ripple effect. Therefore, I required a grounding point, I needed to know my own positionality within academia and research itself. Whilst this is something that may not necessarily remain static in the early career research stage (Bento, 2017), for myself knowing my positionality had been developed through adopting a reflective process at the outset. I had and still continue to hold onto the drive to contribute towards positive change, particularly within the field of DVA. I am acutely aware that the principles of justice, equity

and preventing oppression from within my own faith identity is deeply interwoven with this. This remains my driving force and helped to steer me through the challenges as they arose.

Journey of Two Discoveries

At the outset of this research, I had some prior understanding regarding DVA and some of the contributors. I did not however have a holistic understanding of the mechanisms on a broader and interactive scale. My own life had presented with various challenges wherein I questioned the public version of faith which surrounded me. I found myself unable to truly fit in. Within some circles I was seen as too conservative. Within other circles I was seen as too liberal. It was many years prior to my doctorate where I knew I would need to carve my own path despite how daunting that felt. Yet it was this very quest which facilitated being able to examine DVA within a broader lens.

Brown (2013) explicated upon the mistaken assumption of finding error as being at the heart of critique. A concept often associated with secularism. Therefore, to question faith, as survivors in this research attested to, was viewed as hostile to faith itself. Yet it was not the faith they were questioning, but the interpretation of faith presented to them as absolute. In the same light, this reflected my own journey. I remained confident in my faith, but equally I knew it was being used to keep women trapped in abusive marriages. As with the survivors in my study, faith became the tool by which they gained empowerment, and secured their freedom. Equally it left a daunting realisation of the hollowness of religious narratives frequently circulated within communities. Communities that I was still a part of, even if the exact fit was vague. To discover that an entire way of life had been stripped of its essence and then superimposed onto a superficial idea of faith that many followed unquestionably, was deeply desolate. Yet, simultaneously it was reassuring. As with the participants in my research, it allowed me to gain a better understanding of my faith and where I positioned myself within it. As with my participants, my grounding stemmed from my relationship with God. The doctoral research became a parallel journey. As I worked towards answering my research question, simultaneously I unravelled my comfort with being different, whilst being firm in my faith. This was a key finding within this research. Where faith was utilised as empowerment towards personal, psychological, and spiritual freedom, it was also known that this would result in distancing from some sections of

different communities. Ultimately however, it was the strengthening of the holistic connection with God which permeated through and guided the way forwards.

9.8 Concluding Remarks

This research has contributed towards the increased understanding of the nature, occurrence and health and wellbeing impacts of DVA in UK Muslim communities, and the processes through which these are formed. It has sought to understand these on deeper levels as per the lived reality of those who have experienced DVA and worked in the field. It has further utilised these findings to make recommendations for how such knowledge can be used for enhancing understanding, developing earlier preventative measures, and providing appropriate and comprehensively informed interventions when working with those affected.

This research has further highlighted that there is a need for continuing this work, developing the ideas presented herein, and extending the knowledge base of what has been developed. Further research would need to ensure a wider representation of victim voices in particular were included, as well as other professions, particularly on the front line.

Research is also required with other groups not accounted for herein. This includes those who do not have a settled immigration status, those with no recourse to public funds, and revert Muslims. Furthermore, are those who did not access any forms of external support and potentially remain in the abusive relationship. However, there would be challenging ethical considerations in such a study, in particular relation to risk of potential harm to both the participant and researcher. In addition to this, there is room for developing research on the short term and long term impact on children within Muslim communities, who have lived within abusive households. Again, this would require careful ethical consideration.

There is also scope to consider impacts when those perpetrating abuse are incarcerated for their offences and the impact this has, in addition to what the presence of other socially stigmatised factors such as addictions have on addressing DVA.

The findings of this research can inform academia in terms of knowledge base in relation to this topic and population group. The model can further be utilised by practitioners across various fields in order to support in developing appropriate and personalised support

systems. This would apply to victims in particular, but could also apply to the purposes of encouraging change with those who perpetrate abuse. A further consideration lies in how these findings can be translated at a community level, in order to effect change from the ground up. This is currently being considered, with ideas relating to summary of critical findings being disseminated in different formats, including through the use of multi-media. By demonstrating within Muslim communities that they hold power to create internal change, it is hoped that this will facilitate internal empowerment both individually and collectively. It is not anticipated that survivors would be in a position to utilise the model towards their recovery process. However, the sharing of the data herein via accessible formats will allow victims to see that there have been others in similar situations, facing similar challenges, and have made it to a life free of abuse. It is hoped this will encourage help seeking behaviours.

References

Abbas, T. (2004). After 9/11: British south Asian Muslims, islamophobia, multiculturalism, and the state. *American Journal of Islamic Social Sciences*, *21*(3), 26-38.

Abbas, T. (2007). Muslim minorities in Britain: Integration, multiculturalism and radicalism in the post-7/7 period. *Journal of Intercultural Studies*, *28*(3), 287-300.

Abraham, M. (1999). Sexual abuse in South Asian immigrant marriages. *Violence Against Women*, *5*(6), 591-618.

Abramsky, T., Watts, C. H., Garcia-Moreno, C., Devries, K., Kiss, L., Ellsberg, M., ... & Heise, L. (2011). What factors are associated with recent intimate partner violence? Findings from the WHO multi-country study on women's health and domestic violence. *BMC public health*, *11*(1), 109.

Abugideiri, S. E. (2007). Domestic violence among Muslims seeking mental health counseling. *Change from within: Diverse perspectives on domestic violence in Muslim communities*, 91-116.

Adisa O., and Allen K. (2020). Increasing safety for those experiencing family and intimate relationship harm within black and minority ethnic communities by responding to those who harm: *Survey findings*. University of Suffolk.

https://www.uos.ac.uk/sites/www.uos.ac.uk/files/Family%20and%20intimate%20relationship%20harm%20within%20black%20and%20minority%20ethnic%20communitiesFINAL%20%281%29.pdf

Afrouz, R., Crisp, B. R., & Taket, A. (2020). Seeking help in domestic violence among Muslim women in Muslim-majority and non-Muslim-majority countries: A literature review. *Trauma, Violence, & Abuse, 21*(3), 551-566.

Ahmad, F., Driver, N., McNally, M. J., & Stewart, D. E. (2009). "Why doesn't she seek help for partner abuse?" An exploratory study with South Asian immigrant women. *Social science & medicine*, *69*(4), 613-622.

Ahmad-Stout, F., Nath, S. R., Khoury, N. M., & Huang, H. (2018). Experiences of intimate partner violence: Findings from interviews with South Asian women in the United States. *Journal of interpersonal violence*, 0886260517753850.

Ahmed, S. (2015). What Is Islam?. Princeton University Press.

Ahmed, S., & Amer, M. M. (Eds.). (2013). *Counseling Muslims: Handbook of mental health issues and interventions*. Routledge.

Ajzen, I. (1988). Attitudes, personality, and behavior. Chicago: Dorsey Press

Akom, A. A. (2011). Black emancipatory action research: integrating a theory of structural racialisation into ethnographic and participatory action research methods. *Ethnography and Education*, *6*(1), 113-131.

Aked, H. (2020) False positives: the Prevent counter-extremism policy in healthcare. *Medact*, London.

Al-'Awaayishah. H., (1995). The Prayer: It's Effect in increasing Eemaan and Purifying the Soul. *Al Hidayah Publishing and Distribution*, Birmingham, UK.

Alghafli, Z., Hatch, T., & Marks, L. (2014). Religion and relationships in Muslim families: A qualitative examination of devout married Muslim couples. *Religions*, *5*(3), 814-833.

Al-Ghazali, A. H. (2016). Discipling the Soul, Refining the Character, and Curing the Sicknesses of the Heart & Breaking the Two Desires, Books XXII and XXIII of the Revival of the Religious Sciences. Islamic Texts Society. Cambridge, UK.

Al-Hibri, A. (2000). An introduction to Muslim women's rights. In Webb, G. (Eds). Windows of faith: Muslim women scholar-activists in North America. Syracuse University Press. New York. 51-71.

Al-Karam, C. Y. (Ed.). (2018). *Islamically integrated psychotherapy: Uniting faith and professional practice* (Vol. 3). Templeton Foundation Press.

Alkhateeb, S., Ellis, S., & Fortune, M. M. (2001). Domestic violence: The responses of Christian and Muslim communities. *Journal of religion & abuse*, *2*(3), 3-24.

Alkhateeb, F. (2017). Lost Islamic history: reclaiming Muslim civilisation from the past. Oxford University Press.

Alkhateeb, S., (2011). From http://projectsakinah.org/Family-Violence/Understanding-Abuse/The-Muslim-Wheel-of-Domestic-Violence Last accessed 19.02.2019

- Ali, O. M., Milstein, G., & Marzuk, P. M. (2005). The Imam's role in meeting the counseling needs of Muslim communities in the United States. *Psychiatric services*, *56*(2), 202-205.
- Ali, P. A., Dhingra, K., & McGarry, J. (2016). A literature review of intimate partner violence and its classifications. *Aggression and violent behavior*, *31*, 16-25.
- Ali, P. A., & Naylor, P. B. (2013a). Intimate partner violence: A narrative review of the feminist, social and ecological explanations for its causation. *Aggression and Violent Behavior*, *18*(6), 611-619.
- Ali, P. A., & Naylor, P. B. (2013b). Intimate partner violence: A narrative review of the biological and psychological explanations for its causation. *Aggression and Violent Behavior*, *18*(3), 373-382.
- Ali, S., & Awaad, R. (2019). Islamophobia and public mental health: Lessons learned from community engagement projects. In *Islamophobia and psychiatry* (pp. 375-390). Springer, Cham.
- Allen, C. (2018). Why UK's working definition of Islamophobia as a 'type of racism' is a historic step. *The Conversation* https://theconversation.com/why-uks-working-definition-of-islamophobia-as-a-type-of-racism-is-a-historic-step-107657 [Last accessed 05.05.2019]

al-Suyuti. (1994). *As-Suyutis Medicine of the Prophet: May Allah Bless Him and Grant Him Peace*. Ta-Ha Publishers.

Altalib, H., AbuSulayman, A., & Altalib, O. (2013). *Parent-child relations: A guide to raising children*. International Institute of Islamic Thought (IIIT).

Alvessnon, M., & Skoldberg, K. (2000). *Reflexive methodology: New vistas for qualitative research*. Sage Publications, London.

Anderson, J. F., & Kras, K. (2005). Revisiting Albert Bandura's social learning theory to better understand and assist victims of intimate personal violence. *Women & Criminal Justice*, *17*(1), 99-124.

Anderson, K. L. (1997). Gender, status, and domestic violence: An integration of feminist and family violence approaches. *Journal of Marriage and the Family*, 655-669.

Anderson, K. M., Renner, L. M., & Danis, F. S. (2012). Recovery: Resilience and growth in the aftermath of domestic violence. *Violence against women*, *18*(11), 1279-1299.

Andersson, N., Cockcroft, A., Ansari, U., Omer, K., Ansari, N. M., Khan, A., & Chaudhry, U. U. (2010). Barriers to disclosing and reporting violence among women in Pakistan: findings from a national household survey and focus group discussions. *Journal of interpersonal violence*, *25*(11), 1965-1985.

Andrews, D. A., & Bonta, J. (2006). The psychology of criminal conduct (4th ed.). Newark, NJ: LexisNexis.

Andrews, D. A., Bonta, J., & Wormith, J. S. (2011). The risk-need-responsivity (RNR) model: Does adding the good lives model contribute to effective crime prevention?. *Criminal Justice and Behavior*, *38*(7), 735-755.

Anitha, S. (2011). Legislating gender inequalities: The nature and patterns of domestic violence experienced by South Asian women with insecure immigration status in the United Kingdom. *Violence Against Women*, *17*(10), 1260-1285.

Anitha, S., Yalamarty, H., & Roy, A. (2018, August). Changing nature and emerging patterns of domestic violence in global contexts: Dowry abuse and the transnational abandonment of wives in India. In *Women's Studies International Forum* (Vol. 69, pp. 67-75). Pergamon.

APA, 2022 (a). https://dictionary.apa.org/religious-faith (last accessed 12.04.2022)

APA 2022 (b). https://dictionary.apa.org/spirituality (last accessed 12.04.2022)

Arias, E., Arce, R., & Vilariño, M. (2013). Batterer intervention programmes: A metaanalytic review of effectiveness. *Psychosocial intervention*, *22*(2), 153-160.

Asamarai, L. (2018). Utilization of Islamic principles in marital counseling. In Al-Karam, C. Y. (Ed.). *Islamically integrated psychotherapy: Uniting faith and professional practice*. Templeton Foundation Press. (57-75.)

Astbury, J., Atkinson, J., Duke, J. E., Easteal, P. L., Kurrle, S. E., Tait, P. R., & Turner, J. (2000). The impact of domestic violence on individuals. *Medical Journal of Australia*, *173*(8), 427-432.

Auburn, T. (2005). Narrative reflexivity as a repair device for discounting 'cognitive distortions' in sex offender treatment. *Discourse & Society*, *16*(5), 697-718.

Awaad, R., Elsayed, D., Ali, S., & Abid, A. (2020). Islamic psychology: A portrait of its historical origins and contributions. In Keshavarzi, H., Khan, F., Ali, B., & Awaad, R. (Eds.). *Applying Islamic principles to clinical mental health care: Introducing traditional Islamically integrated psychotherapy*. Routledge.

Awan, T. M. (2014). *An Islamic approach to rehabilitation of Muslim prisoners: An empirical case study*. Sang-e-Meel Publications.

Ayubi, Z. M. (2019). *Gendered morality: classical Islamic ethics of the self, family, and society*. Columbia University Press.

Ayyub, R. (2000). Domestic violence in the South Asian Muslim immigrant population in the United States. *Journal of Social Distress and the Homeless*, *9*(3), 237-248.

Azam, H. (2015). *Sexual Violation in Islamic law: Substance, evidence, and procedure*. Cambridge University Press.

Ballela, M. A. (2016). Challenging Domestic Abuse in the Arabic Speaking Community: The Experience of Al-Aman. *Moving in the Shadows: Violence in the Lives of Minority Women and Children*, 261.

Baker, C. K., Billhardt, K. A., Warren, J., Rollins, C., & Glass, N. E. (2010). Domestic violence, housing instability, and homelessness: A review of housing policies and program practices for meeting the needs of survivors. *Aggression and Violent Behavior*, *15*(6), 430-439.

Ballard, R. (1982). South Asian Families. In Rapoport, R.N., Fogarty, M.P., and Rapoport, R. (Eds.). *Families In Britain London*. Routledge and Kegan Paul.

Barnes, B. M. (2001). Family violence knows no cultural boundaries. *Journal of Family and Consumer Sciences*, *93*(1), 11.

Bancroft, L. (2003). Why does he do that?: Inside the minds of angry and controlling men. Penguin.

Bandura, A. (1977). Social learning theory. New York: General Learning Press.

Baumeister, R. F. (1991). Escaping the self. New York: Basic Books.

Baumeister, R. F., Dale, K., & Sommer, K. L. (1998). Freudian defense mechanisms and empirical findings in modern social psychology: Reaction formation, projection, displacement, undoing, isolation, sublimation, and denial. *Journal of personality*, *66*(6), 1081-1124.

BBC. 2020. Accessed at: https://www.bbc.co.uk/news/world-asia-47593693

BBC. 2021. Accessed at: https://www.bbc.co.uk/news/world-us-canada-57390398

Becher, H. (2008). Family practices in South Asian Muslim families: parenting in a multi-faith Britain. Springer.

Begum, F., & Rahman, A. (2016). Crisis intervention for Muslim women experiencing sexual violence or assault. *Good Practice Responding to Sexual Violence - Guidelines for mainstream crisis support services for survivors*. Round Two.

Bento, R. F. (2017). Reflexivity in Research: Three Encounters and the 'I'-index. M@ n@ gement, 20(5), 523-528.

Berger, R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative research*, *15*(2), 219-234.

Bevan, E., & Higgins, D. J. (2002). Is domestic violence learned? The contribution of five forms of child maltreatment to men's violence and adjustment. *Journal of family violence*, *17*(3), 223-245.

Bishop, C. (2016). Domestic violence: The limitations of a legal response. In *Domestic violence* (pp. 59-79). Palgrave Macmillan, London.

Bleich, E., Stonebraker, H., Nisar, H., & Abdelhamid, R. (2015). Media portrayals of minorities: Muslims in British newspaper headlines, 2001–2012. *Journal of Ethnic and Migration Studies*, *41*(6), 942-962.

Blood, R. O., & Wolfe, D. M. (1960). Husbands and Wives, Glencoe, Illinois. Free Press.

Bonner, A., & Tolhurst, G. (2002). Insider-outsider perspectives of participant observation. *Nurse Researcher (through 2013)*, *9*(4), 7.

Borg Xuereb, C., Shaw, R. L., & Lane, D. A. (2016). Patients' and physicians' experiences of atrial fibrillation consultations and anticoagulation decision-making: A multiperspective IPA design. *Psychology & Health*, *31*(4), 436-455.

Bourdieu, P. (1986). The forms of capital. In Richardson, J.G. (ed.): *Handbook of Theory and Research for the Sociology of Education*. New York: Greenwood Press. 241-258.

Bowleg, L. (2012). The problem with the phrase women and minorities: intersectionality—an important theoretical framework for public health. *American journal of public health*, *102*(7), 1267-1273.

Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic analysis and code development*. sage.

Boyle, A., Jones, P., & Lloyd, S. (2006). The association between domestic violence and self harm in emergency medicine patients. *Emergency Medicine Journal*, *23*(8), 604-607.

Bradbury-Jones, C., & Isham, L. (2020). The pandemic paradox: The consequences of COVID-19 on domestic violence. *Journal of Clinical Nursing*. 29 2047-2049.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative* research in psychology, 3(2), 77-101.

Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American psychologist*, *32*(7), 513.

Brown., W. (2013). Is Critique Secular Introduction. In Asad, T., Brown, W., Butler, J., & Mahmood, S. *Is Critique Secular?*. Fordham University Press.

Buang, S., & Ismail, M. (2007) The Life and Future of Muslim Education. *Asia Pacific Journal of Education*. 27:1, 1-9, DOI: 10.1080/02188790601145390

Buckmaster, R., Guerin, S., O'Leary, T., & McNulty, M. (2020). Exploration of family dynamics in adults who self-harm: a multi-perspective approach. *Journal of Family Therapy*.

Burman, E., & Chantler, K. (2005). Domestic violence and minoritisation: legal and policy barriers facing minoritized women leaving violent relationships. *International journal of law and psychiatry*, 28(1), 59-74.

Burman, E., Smailes, S. L., & Chantler, K. (2004). 'Culture' as a barrier to service provision and delivery: domestic violence services for minoritized women. *Critical social policy*, *24*(3), 332-357.

Burry, K., Thorburn, N., & Jury, A. (2020). 'I had no control over my body': Women's experiences of reproductive coercion in Aotearoa New Zealand. *Aotearoa New Zealand Social Work*, 32(1), 17.

Butler., J. (2013). The Sensibility of Critique: Responding to Asad and Mahmood. In Asad, T., Brown, W., Butler, J., & Mahmood, S. *Is Critique Secular?*. Fordham University Press.

Butterworth, K., & Westmarland, N. (2015). Victims' views on policing partner violence. *Eur. Police Sci. & Res. Bull.*, 13, 60.

Chester, D. S., & DeWall, C. N. (2018). The roots of intimate partner violence. *Current opinion in psychology*, *19*, 55-59.

Campbell, C., & Deacon, H. (2006). Unravelling the contexts of stigma: from internalisation to resistance to change. *Journal of community & applied social psychology*, *16*(6), 411-417.

Candela, K. (2016). Protecting the Invisible Victim: Incorporating Coercive Control in Domestic Violence Statutes. *Family Court Review*, *54*(1), 112-125.

Cantos, A. L., & O'Leary, K. D. (2014). One size does not fit all in treatment of intimate partner violence. *Partner Abuse*, *5*(2), 204-236.

Carradice, A., Shankland, M. C., & Beail, N. (2002). A qualitative study of the theoretical models used by UK mental health nurses to guide their assessments with family caregivers of people with dementia. *International Journal of Nursing Studies*, 39(1), 17-26.

Carthy, N., & Holt, A. (2016). Domestic abuse and older adults. *British Psychological Society, North East of England Branch Bulletin*.

Carlson, B. E., McNutt, L. A., Choi, D. Y., & Rose, I. M. (2002). Intimate partner abuse and mental health: The role of social support and other protective factors. *Violence against women*, *8*(6), 720-745.

Cashwell, C. S., & Swindle, P. J. (2018). When religion hurts: Supervising cases of religious abuse. *The Clinical Supervisor*, 1-22.

Cavanaugh, M. M., & Gelles, R. J. (2005). The utility of male domestic violence offender typologies: New directions for research, policy, and practice. *Journal of interpersonal violence*, *20*(2), 155-166.

Charles Hendry, B. A., & Dip, N. (2011). Phenomenological approaches: Challenges and choices. *Nurse Researcher (through 2013)*, *18*(2), 7.

Chaudhry, A. S. (2013). Domestic violence and the Islamic tradition. OUP Oxford.

Chiffriller, S. H., Hennessy, J. J., & Zappone, M. (2006). Understanding a new typology of batterers: Implications for treatment. *Victims and Offenders*, *1*(1), 79-97.

Choi, Y. J., Elkins, J., & Disney, L. (2016). A literature review of intimate partner violence among immigrant populations: Engaging the faith community. *Aggression and violent behavior*, *29*, 1-9.

Chowbey, P. (2017). Women's narratives of economic abuse and financial strategies in Britain and South Asia. *Psychology of violence*, 7(3), 459.

Chowdhury, R. (2016). *Qawwamoon: Protectors and Maintainers.* Ta-Ha Publishers Ltd. London, UK.

Chowdhury, R. (2021). *Road to Recovery; Healing from Domestic Violence.* Ta-Ha Publishers Ltd. London, UK.

Ciftci, A., Jones, N., & Corrigan, P. W. (2013). Mental health stigma in the Muslim community. *Journal of Muslim Mental Health*, 7(1).

Clarke, V., & Braun, V. (2014). Thematic analysis. In *Encyclopedia of critical psychology* (pp. 1947-1952). Springer, New York, NY.

Commission on Race and Ethnic Disparities. (2021) Accessed at: https://www.gov.uk/government/publications/the-report-of-the-commission-on-race-and-ethnic-disparities [last accessed 30.07.2021]

Conner, D. H. (2013). Financial freedom: Women, money, and domestic abuse. *Wm.* & Mary J. Women & L., 20, 339.

Constantino, R., Kim, Y., & Crane, P. A. (2005). Effects of a social support intervention on health outcomes in residents of a domestic violence shelter: A pilot study. *Issues in mental health nursing*, *26*(6), 575-590.

Costa, D., Hatzidimitriadou, E., Ioannidi-Kapolou, E., Lindert, J., Soares, J. J., Sundin, Ö., ... & Barros, H. (2016). Male and female physical intimate partner violence and socio-

economic position: a cross-sectional international multicentre study in Europe. *Public health*, 139, 44-52.

Cowburn, M., Gill, A. K., & Harrison, K. (2015). Speaking about sexual abuse in British South Asian communities: offenders, victims and the challenges of shame and reintegration. *Journal of Sexual Aggression*, *21*(1), 4-15.

CPS Guidelines 2020 https://www.cps.gov.uk/legal-guidance/domestic-abuse-guidelines-prosecutors [Last accessed 01 August 2021]

Crenshaw, K. (1989) Demarginalizing the intersection of race and sex: a black feminist critique of antidiscrimination doctrine, feminist theory, and antiracist politics, 1989 University of Chicago Legal Forum, 139.

Crenshaw, K. (1990) 'Mapping the margins: intersectionality, identity politics, and violence against women of color' Stanford Law Review, Vol. 43, No. 6: 1241–1299.

Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches*. Sage publications.

Crow, G., & Laidlaw, M. (2019). Norbert Elias's extended theory of community: From established/outsider relations to the gendered we–I balance. *The Sociological Review, 67*(3), 568-584.

Cunningham, A., Jaffe, P. G., Baker, L., Dick, T., Malla, S., Mazaheri, N., & Poisson, S. (1998). *Theory-derived explanations of male violence against female partners: Literature update and related implications for treatment and evaluation* (pp. 1-10). London: London Family Court Clinic.

Damasio, A. (2000). *The Feeling of what Happens: Body, Emotion and the Making of Consciousness.* London: Vintage

Day, A. S., & Gill, A. K. (2020). Applying intersectionality to partnerships between women's organizations and the criminal justice system in relation to domestic violence. *The British Journal of Criminology*, *60*(4), 830-850.

Dennison M (2019). The black swan of qualitative research. *Qualitative Methods in Psychology Bulletin.* 27: Spring 2019.

Denzin, N. K., & Lincoln, Y. S. (2002). The qualitative inquiry reader. Sage.

Desai, S., & Haffajee, Z. (2011). Breaking the silence: reclaiming Qur'anic interpretations as a tool for empowerment and liberatory praxis for dealing with domestic violence in Canadian Muslim communities. *Canadian Woman Studies*, *29*(1/2), 127.

Devaney, J. (2014). Male perpetrators of domestic violence: How should we hold them to account? *The Political Quarterly*, 85(4), 480-486.

DeWall, C. N., & Bushman, B. J. (2011). Social acceptance and rejection: The sweet and the bitter. *Current Directions in Psychological Science*, *20*(4), 256-260.

Dhami, S., & Sheikh, A. (2000). The Muslim family: predicament and promise. *Western Journal of Medicine*, *173*(5), 352.

Dixon, L., & Browne, K. (2003). The heterogeneity of spouse abuse: A review. *Aggression and violent behavior*, 8(1), 107-130.

Dixon, L., & Bowen, E. (2012). Intimate partner violence and stalking. In G. Davies and A.R. Beech (Eds.), *Forensic Psychology: BPS Textbooks in Psychology* series (2nd ed), p189-205. Chichester: Wiley-Blackwell.

Dobash, R. E., & Dobash, R. (1979). *Violence against wives: A case against the patriarchy* (pp. 179-206). New York: Free Press.

Dodgson, J. E. (2019). Reflexivity in qualitative research. *Journal of Human Lactation*, 35(2), 220-222.

Dowling, M. (2006). Approaches to reflexivity in qualitative research. *Nurse researcher*, 13(3).

Drumm, R., Popescu, M., Cooper, L., Trecartin, S., Seifert, M., Foster, T., & Kilcher, C. (2014). "God just brought me through it": Spiritual coping strategies for resilience among intimate partner violence survivors. *Clinical Social Work Journal*, *42*(4), 385-394.

Dutton, D. G., & Corvo, K. (2006). Transforming a flawed policy: A call to revive psychology and science in domestic violence research and practice. *Aggression and Violent Behavior*, *11*(5), 457-483.

Dutton, D. G., & White, K. R. (2012). Attachment insecurity and intimate partner violence. *Aggression and Violent Behavior*, *17*(5), 475-481.

Dutton, M. A. (1996). Battered women's strategic response to violence: The role of context. In J. L. Edleson & Z. C. Eisikovits (Eds.), Sage series on violence against women, Vol. 3. Future interventions with battered women and their families (p. 105–124). Sage Publications, Inc.

Duluth Model. (2011). Power and control wheels. Retrieved from http://www.theduluthmodel.org [Last accessed 01.07.2021]

Eaton, G. (1994). Islam and the Destiny of Man. SUNY Press.

Eaton, G. (2000). *Remembering God: Reflections on Islam*. Islamic Texts Society. Cambridge, UK.

Eaton, G. (2012). Reflections. Islamic Texts Society. Cambridge, UK.

Eigenberg, H. M., Kappeler, V. E., & McGuffee, K. (2012). Confronting the complexities of domestic violence: A social prescription for rethinking police training. Journal of police crisis negotiations, 12(2), 122-145.

Eisikovits, Z., & Baile, B. (2016). The social construction of roles in intimate partner violence: Is the victim/perpetrator model the only viable one?. *Journal of family violence*, *31*: 995-998.

Eisikovits, Z., Buchbinder, E., & Bshara, A. (2008). Between the person and the culture: Israeli Arab couple's perceptions of police intervention in intimate partner violence. *Journal of Ethnic & Cultural Diversity in Social Work*, *17*(2), 108-129.

Elias, N. (1956). Problems of involvement and detachment. *The British Journal of Sociology*, 7(3), 226-252.

El-Khoury, M. Y., Dutton, M. A., Goodman, L. A., Engel, L., Belamaric, R. J., & Murphy, M. (2004). Ethnic differences in battered women's formal help-seeking strategies: a focus on health, mental health, and spirituality. *Cultural diversity and ethnic minority psychology*, *10*(4), 383.

Elmessiri, A. M. (2006). *Epistemological bias in the physical and social sciences*. International Institute of Islamic Thought (IIIT).

Ellsberg, M., Jansen, H. A., Heise, L., Watts, C. H., & Garcia-Moreno, C. (2008). Intimate partner violence and women's physical and mental health in the WHO multicountry study on women's health and domestic violence: an observational study. *The lancet*, *371*(9619), 1165-1172.

Emery, C. R. (2010). Examining an extension of Johnson's hypothesis: Is male perpetrated intimate partner violence more underreported than female violence?. *Journal of family violence*, *25*(2), 173-181.

Engel, B. (2002). *The emotionally abusive relationship: How to stop being abused and how to stop abusing.* John Wiley & Sons.

European Commission (2010). *Domestic violence against women report. Brussels:*Directorate-General for Justice. Available from: http://ec.europa.eu/ public

opinion/archives/ebs/ebs 344 en.pdf [accessed 30 November 2020].

Faizi, N. (2001). Domestic violence in the Muslim community. *Texas Journal of Women & the Law, 10*(2), 209.

Farooqi, Y. N. (2006). Understanding Islamic perspective of mental health and psychotherapy. *Journal of Psychology in Africa*, *16*(1), 101-111.

Femi-Ajao, O., Kendal, S., & Lovell, K. (2020). A qualitative systematic review of published work on disclosure and help-seeking for domestic violence and abuse among women from ethnic minority populations in the UK. *Ethnicity & health*, *25*(5), 732-746.

Fenton, R. A., & Mott, H. L. (2017). The bystander approach to violence prevention: Considerations for implementation in Europe. *Psychology of violence*, *7*(3), 450.

Ferrari, G., Agnew-Davies, R., Bailey, J., Howard, L., Howarth, E., Peters, T. J., ... & Feder, G. S. (2016). Domestic violence and mental health: a cross-sectional survey of women seeking help from domestic violence support services. *Global health action*, *9*(1), 29890.

Field, C. A., & Caetano, R. (2005). Intimate partner violence in the US general population: Progress and future directions. *Journal of Interpersonal Violence*, *20*(4), 463-469.

Fields, S. E. (2017). Debunking the Stranger-in-the-Bushes Myth: The Case for Sexual Assault Protection Orders. *Wis. L. Rev.*, 429.

Finnbogadóttir, H., & Dykes, A. K. (2016). Increasing prevalence and incidence of domestic violence during the pregnancy and one and a half year postpartum, as well as risk factors:-a longitudinal cohort study in Southern Sweden. *BMC pregnancy and childbirth*, *16*(1), 327.

Fishbein, D. H. (2001). *Biobehavioral perspectives in criminology*. Wadsworth/Thomson Learning.

Fleming, P. J., Gruskin, S., Rojo, F., & Dworkin, S. L. (2015). Men's violence against women and men are inter-related: Recommendations for simultaneous intervention. *Social science & medicine*, *146*, 249-256.

Flowers, P., Smith, J. A., Sheeran, P., & Beail, N. (1997). Health and romance: Understanding unprotected sex in relationships between gay men. *British Journal of Health Psychology*, *2*(1), 73-86.

Flowers, C., Winder, B., & Slade, K. (2020). Identifying the characteristics associated with intimate partner stalking: a mixed methods structured review and narrative synthesis. *The Journal of Forensic Psychiatry & Psychology*, *31*(6), 889-925.

Flyvbjerg, B. (2006). Five misunderstandings about case-study research. *Qualitative* inquiry, 12(2), 219-245.

Foa, E. B., Cascardi, M., Zoellner, L. A., & Feeny, N. C. (2000). Psychological and environmental factors associated with partner violence. *Trauma, Violence, & Abuse, 1*(1), 67-91.

Follingstad, D. R., & Dehart, D. D. (2000). Defining psychological abuse of husbands toward wives: Contexts, behaviors, and typologies. *Journal of interpersonal violence*, *15*(9), 891-920.

Fontes, L. A., & Plummer, C. (2010). Cultural issues in disclosures of child sexual abuse. *Journal of child sexual abuse*, *19*(5), 491-518.

Franceschelli, M., & O'Brien, M. (2014). 'Islamic capital' and family life: The role of Islam in parenting. *Sociology*, *48*(6), 1190-1206.

Freud, A. (1937). The Ego and the mechanisms of defense, London: Hogarth Press and Institute of Psycho-Analysis.

Fugate, M., Landis, L., Riordan, K., Naureckas, S., & Engel, B. (2005). Barriers to domestic violence help seeking: Implications for intervention. *Violence against women*, *11*(3), 290-310.

Gardner, S. K. (2009). Conceptualizing success in doctoral education: Perspectives of faculty in seven disciplines. *The Review of Higher Education*, *32*(3), 383-406.

Geaves, R. (2008). Drawing on the past to transform the present: contemporary challenges for training and preparing British imams. *Journal of Muslim Minority Affairs*, *28*(1), 99-112.

Geertz, C. (1973). The interpretation of cultures (Vol. 5019). Basic books.

Gelles, R. J. (1974). The violent home: A study of physical aggression between husbands and wives. Newbury Park, CA: Sage.

George, E., & Engel, L. (1980). The clinical application of the biopsychosocial model. American journal of Psychiatry, 137(5), 535-544. Georgiadis, A., & Manning, A. (2011). Change and continuity among minority communities in Britain. *Journal of Population Economics*, *24*(2), 541-568.

Gergen, K. J. (2001). Social construction in context. Sage.

Ghafournia, N. (2017). Muslim women and domestic violence: Developing a framework for social work practice. *Journal of Religion & Spirituality in Social Work: Social Thought*, *36*(1-2), 146-163.

Gibbs, G. (1988). Learning by Doing: A guide to teaching and learning methods. *Further Education Unit.* Oxford Polytechnic: Oxford.

Giladi, A. (1992). Infanticide in Medieval Muslim Society. In *Children of Islam* (pp. 101-115). Palgrave Macmillan, London.

Gill, A. (2004). Voicing the silent fear: South Asian women's experiences of domestic violence. *The Howard journal of criminal justice*, *43*(5), 465-483.

Gill, A. (2008). 'Crimes of Honour' and Violence against Women in the UK. *International Journal of Comparative and Applied Criminal Justice*, *32*(2), 243-263.

Gill, A. K. (2021). Murder in the family: Why culture is an insufficient explanation for 'honour'-based violence. In *The Routledge International Handbook of Domestic Violence and Abuse* (pp. 403-414). Routledge.

Gill, A. K., & Brah, A. (2014). Interrogating cultural narratives about 'honour'-based violence. *European Journal of Women's Studies*, *21*(1), 72-86.

Gill, A. K., & Harrison, K. (2019). 'I am talking about it because I want to stop it': child sexual abuse and sexual violence against women in British South Asian communities. *The British Journal of Criminology*, *59*(3), 511-529.

Gill, H., Purru, K., & Lin, G. (2012). In the midst of participatory action research practices: moving towards decolonizing and decolonial praxis. *Reconceptualizing Educational Research Methodology*, *3*(1).

Glaser B. G., & Strauss A, L. (1967). The discovery of grounded theory: strategies for qualitative research. *New York, Adline de Gruyter*.

Goffman, E. (1963). Stigma: Notes on the management of spoiled identity. Englewood Cliffs: Prentice Hall.

Gondolf, E. W. (2007). Theoretical and research support for the Duluth Model: A reply to Dutton and Corvo. *Aggression and Violent Behavior*, *12*(6), 644-657.

Gondolf, E. W., & Fisher, E. R. (1988). *Battered women as survivors: An alternative to treating learned helplessness*. Lexington Books/DC Heath and Com.

Good, C., Dweck, C. S., & Aronson, J. (2007). Social identity, stereotype threat, and self-theories. *Contesting stereotypes and creating identities: Social categories, social identities, and educational participation*, 115-135.

Gov.uk (2012) https://www.gov.uk/government/news/new-definition-of-domestic-violence [last accessed 18.01.2022]

Gracia, E. (2014). Intimate partner violence against women and victim-blaming attitudes among Europeans. *Bulletin of the World Health Organization*, *92*, 380-381.

Graca, S. (2017). Domestic violence policy and legislation in the UK: a discussion of immigrant women's vulnerabilities. *European journal of current legal issues*, *23*(1).

Gregg, G. S. (2007). Culture and identity in a Muslim society. OUP USA.

Greene, M. J. (2014). On the inside looking in: Methodological insights and challenges in conducting qualitative insider research. *The qualitative report*, *19*(29), 1-13.

Gunasinghe, C., Hatch, S. L., & Lawrence, J. (2019). Young Muslim Pakistani Women's Lived Experiences of Izzat, Mental Health, and Well-Being. *Qualitative Health Research*, 29(5), 747-757.

Hadi, M. A., & José Closs, S. (2016). Ensuring rigour and trustworthiness of qualitative research in clinical pharmacy. *International journal of clinical pharmacy*, *38*(3), 641-646.

Haeri, F., (1989). The Journey of the Self: A Sufi Guide to Personality. *Harper SanFrancisco Publishers*. US

Habib, R. (2006). Modernising vs Westernizing the social sciences: The case of psychology. In Elmessiri, A. M. (Eds). *Epistemological bias in the physical and social sciences*. International Institute of Islamic Thought (IIIT).

Hafiz, A. (2015). Muslim chaplaincy in the UK: the chaplaincy approach as a way to a modern imamate. *Religion, State & Society*, *43*(1), 85-99.

Hahn, J. W., Aldarondo, E., Silverman, J. G., McCormick, M. C., & Koenen, K. C. (2015). Examining the association between posttraumatic stress disorder and intimate partner violence perpetration. *Journal of family violence*, *30*(6), 743-752.

Haj-Yahia, M. M. (2000). Wife abuse and battering in the sociocultural context of Arab society. *Family process*, *39*(2), 237-255.

Halim, F. (2006). Pluralism of American Muslims and the challenge of assimilation. Journal of Muslim Minority Affairs, 26(2), 235-244.

Halstead, M. (2004). An Islamic concept of education. *Comparative education*, *40*(4), 517-529.

Hammer, J. (2019). *Peaceful Families: American Muslim Efforts Against Domestic Violence*. Princeton University Press.

Hays., P.A. (2003). Case Study Research. In DeMarrais, K. B., & Lapan, S. D. (Eds). Foundations for research: Methods of inquiry in education and the social sciences.

Routledge.

Hefferon, K., & Gil-Rodriguez, E. (2011). Interpretative phenomenological analysis. *The Psychologist*.

Hegazy, H. (2006). Bias in curricula and course contents. In Elmessiri, A. M. (Ed) *Epistemological Bias in the Physical and Social Sciences*. International Institute of Islamic Thought. London. 145-157.

Heise, L. L. (1998). Violence against women: An integrated, ecological framework. *Violence against women*, *4*(3), 262-290.

Hendriks, T., Warren, M. A., Schotanus-Dijkstra, M., Hassankhan, A., Graafsma, T., Bohlmeijer, E., & de Jong, J. (2019). How WEIRD are positive psychology interventions? A bibliometric analysis of randomized controlled trials on the science of well-being. *The Journal of Positive Psychology*, *14*(4), 489-501.

Henrich, J., Heine, S. J., & Norenzayan, A. (2010). Most people are not WEIRD. *Nature*, 466(7302), 29.

Herman, J. L. (2015). *Trauma and recovery: The aftermath of violence--from domestic abuse to political terror*. Hachette UK.

Herzog-Evans, M. (2017). The Risk-Need-Responsivity model: Evidence diversity and integrative theory. *Evidence-based skills in criminal justice: International research on supporting rehabilitation and desistance*, 99-124.

Hewitt, G. (2020). The Windrush scandal: An insider's reflection. *Caribbean Quarterly*, 66(1), 108-128.

Hickman, M. J., Thomas, L., Silvestri, S., & Nickels, H. (2011). Suspect communities?": counter-terrorism policy, the press, and the impact on Irish and Muslim communities in Britain.

Hoefnagels, C., & Zwikker, M. (2001). The Bystander Dilemma and Child Abuse: Extending the Latane and Darley Model to Domestic Violence 1. *Journal of Applied Social Psychology*, *31*(6), 1158-1183

Holtzworth-Munroe, A., & Stuart, G. L. (1994). Typologies of male batterers: Three subtypes and the differences among them. *Psychological Bulletin*, *116*, 476-497.

Holtzworth-Munroe, A., Smutzler, N., & Bates, L. (1997). A brief review of the research on husband violence Part III: Sociodemographic factors, relationship factors, and differing consequences of husband and wife violence. *Aggression and Violent Behavior*, *2*(3), 285-307.

Homan, M. S. (2015). *Promoting community change: Making it happen in the real world*. Cengage Learning.

Home Office. (2019). Hate Crime: England and Wales 2018/19. Home Office, UK. Accessed at

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/839172/hate-crime-1819-hosb2419.pdf

Houston, C. (2014). How feminist theory became (criminal) law: Tracing the path to mandatory criminal intervention in domestic violence cases. *Mich. J. Gender & L., 21, 217*.

Howard, J. A. (2000). Social psychology of identities. *Annual review of sociology*, *26*(1), 367-393.

Howarth, C. (2001). Towards a social psychology of community: A social representations perspective. *Journal for the theory of social behaviour*, *31*(2), 223-238.

Howell, H. (2016). *Children with Learning Disabilities and Challenging Behaviour: Relationship between Parents and Professionals* (Doctoral dissertation, University of East London).

Hussain, Y., & Bagguley, P. (2012). Securitized citizens: Islamophobia, racism and the 7/7 London bombings. *The Sociological Review*, *60*(4), 715-734.

Hussain, R., & Khan, A. (2008). Women's perceptions and experiences of sexual violence in marital relationships and its effect on reproductive health. *Health care for women international*, *29*(5), 468-483.

Hussein, A. (2006). Bias in Western Schools of Social Thought: Our Heritage as the Starting Point for Development. In Elmessiri, A. M. (Eds). *Epistemological bias in the physical and social sciences*. International Institute of Islamic Thought (IIIT).

Ibn Taymiyyah, A.A., (2010). *Diseases of the Heart and their Cures.* Dar As-Sunnah Publishers. Birmingham, UK.

Idriss, M. M. (2017). Not domestic violence or cultural tradition: is honour-based violence distinct from domestic violence?. *Journal of Social Welfare and Family Law*, *39*(1), 3-21.

Idriss, M. M. (2020). "The mosques are the biggest problem we've got right now": Key agent and survivor accounts of engaging mosques with domestic and honor-based violence in the United Kingdom. *Journal of interpersonal violence*, *35*(13-14), 2464-2491.

Iqbal, H., & Golombok, S. (2018). The Generation Game: Parenting and Child Outcomes in Second-Generation South Asian Immigrant Families in Britain. *Journal of Cross-Cultural Psychology*, 49(1), 25-43.

Isgandarova, N. (2018). *Muslim women, domestic violence, and psychotherapy:*Theological and clinical issues. Routledge.

Istratii, R. (2020). The Long Read on Decolonising Knowledge: How western Eurocentrism is systemically preserved and what we can do to subvert it. *Convivial Thinking*.

Istratii. R. (2021). Discourses and Practices of Ethiopian Orthodox Täwahədo Clergy Regarding Faith, Marriage and Spousal Abuse: The Case of Aksum in Tigray Region. Working Paper 3(English). Project dldl/ድልድል: Bridging religious studies, gender & development and public health to address domestic violence in religious communities. SOAS University of London.

Jacinto, G. A., Turnage, B. F., & Cook, I. (2010). Domestic violence survivors: Spirituality and social support. *Journal of Religion & Spirituality in Social Work: Social Thought*, *29*(2), 109-123.

Jaspal, R., & Cinnirella, M. (2010). Media representations of British Muslims and hybridised threats to identity. *Contemporary Islam*, *4*(3), 289-310.

Jayasundara, D. S., Nedegaard, R. C., Flanagan, K., Phillips, A., & Weeks, A. (2017). Leveraging Faith to Help End Domestic Violence: Perspectives from Five Traditions. *Social Work & Christianity*, *44*(4).

John, N., Casey, S. E., Carino, G., & McGovern, T. (2020). Lessons never learned: crisis and gender-based violence. *Developing world bioethics*, *20*(2), 65-68.

Johnson, M. P. (1995). Patriarchal terrorism and common couple violence: Two forms of violence against women. *Journal of Marriage and the Family*, *57*, 283-294

Jørgensen, U. (2001). Grounded theory: Methodology and theory construction. *International encyclopedia of the social & behavioral sciences*, *1*, 6396-6399.

Kahf, M. (2010). Western representations of the Muslim woman: From termagant to odalisque. University of Texas Press.

Kamali, M.H. (2002). *The Dignity of Man: An Islamic Perspective*. Islamic Texts Society. Cambridge, UK.

Kamp, M. (2008). Prayer leader, counselor, teacher, social worker, and public relations officer-on the roles and functions of imams in Germany. In *Islam and Muslims in Germany* (pp. 133-160). Brill.

Katerndahl, D., Burge, S., Ferrer, R., Becho, J., & Wood, R. (2013). Differences in social network structure and support among women in violent relationships. *Journal of interpersonal violence*, *28*(9), 1948-1964.

Katz, E. (2016). Beyond the physical incident model: How children living with domestic violence are harmed by and resist regimes of coercive control. *Child abuse review*, 25(1), 46-59.

Kellezi, B., & Reicher, S. (2012). Social cure or social curse? The psychological impact of extreme events during the Kosovo conflict.

Kelly, L. (1996). Tensions and possibilities: Enhancing informal responses to domestic violence. In Edleson, J. L. *Future interventions with battered women and their families* (Vol. 3). SAGE Publications, Incorporated.

Kelly, L., Sharp-Jeffs, N., & Klein, R. (2014). *Finding the costs of freedom: How women and children rebuild their lives after domestic violence*. Project Report. Solace Women's Aid, London.

Kennedy, A. C., & Prock, K. A. (2016). "I still feel like I am not normal": A review of the role of stigma and stigmatization among female survivors of child sexual abuse, sexual assault, and intimate partner violence. *Trauma, Violence, & Abuse, 19*(5), 512-527.

Keshavarzi, H. & Khan, F. (2018). Outlining a Case Illustration of Traditionally Integrated Psychotherapy. In Al-Karam, C. Y. (Ed.). *Islamically integrated psychotherapy: Uniting faith and professional practice*. Templeton Foundation Press.

Keshavarzi, H., Khan, F., Ali, B., & Awaad, R. (Eds.). (2020). *Applying Islamic principles to clinical mental health care: Introducing traditional Islamically integrated psychotherapy*. Routledge.

Khan, A., & Hussain, R. (2008). Violence against women in Pakistan: Perceptions and experiences of domestic violence. *Asian Studies Review*, *32*(2), 239-253.

Khan, H.S., (2016). An Introduction to Islamic Medicine. Mohsin Health. UK

Khattab, N., Johnston, R., & Manley, D. (2018). Human capital, family structure and religiosity shaping British Muslim women's labour market participation. *Journal of Ethnic and Migration Studies*, *44*(9), 1541-1559.

Khattab, N., & Modood, T. (2018). Accounting for British Muslim's educational attainment: gender differences and the impact of expectations. *British Journal of Sociology of Education*, *39*(2), 242-259.

Kimball, E. (2016). Edleson revisited: Reviewing children's witnessing of domestic violence 15 years later. *Journal of Family Violence*, *31*(5), 625-637.

Kim, E., & Hogge, I. (2015). Intimate partner violence among Asian indian women in the United States: Recognition of abuse and help-seeking attitudes. *International Journal of Mental Health*, *44*(3), 200-214.

Koch, T., & Harrington, A. (1998). Reconceptualizing rigour: the case for reflexivity. *Journal of advanced nursing*, 28(4), 882-890.

Kolb, D. A. (1984). Experience as the source of learning and development. *Upper Sadle River: Prentice Hall*.

Korte, R. F. (2007). A review of social identity theory with implications for training and development. *Journal of European industrial training*.

Kunst, J. R., Tajamal, H., Sam, D. L., & Ulleberg, P. (2012). Coping with Islamophobia: The effects of religious stigma on Muslim minorities' identity formation. *International Journal of Intercultural Relations*, *36*(4), 518-532.

Lamrabet, A. (2016). Translated by Myriam Francois-Cerrah. *Women in the Qur'an:*An Emancipatory Reading. Square View. Kube Publishing Ltd. UK.

Larkin, M., Eatough, V., & Osborn, M. (2011). Interpretative phenomenological analysis and embodied, active, situated cognition. *Theory & Psychology*, *21*(3), 318-337.

Larkin, M., Shaw, R., & Flowers, P. (2019). Multiperspectival designs and processes in interpretative phenomenological analysis research. *Qualitative Research in Psychology*, *16*(2), 182-198.

Larkin, M., Watts, S., & Clifton, E. (2006). Giving voice and making sense in interpretative phenomenological analysis. *Qualitative research in psychology*, *3*(2), 102-120.

Laskey, P., Bates, E. A., & Taylor, J. C. (2019). A systematic literature review of intimate partner violence victimisation: An inclusive review across gender and sexuality. *Aggression and violent behavior*, *47*, 1-11.

Latané, B., & Darley, J. M. (1970). *The unresponsive bystander: Why doesn't he help?*. Appleton-Century-Crofts.

Latif, Z. (2010). The silencing of women from the Pakistani Muslim Mirpuri community in violent relationships. In *Honour, violence, women and Islam* (pp. 37-49). Routledge-Cavendish.

Lawson, J. (2012). Sociological theories of intimate partner violence. *Journal of Human Behavior in the Social Environment*, *22*(5), 572-590.

Lee, D. H. (2014). Intimate partner violence against Asian American women: Moving from theory to strategy. *Colum. J. Gender & L., 28,* 315.

Lings, M. (2007). Muhammad. Penerbit Serambi.

Loaring, J.M., Larkin, M., Shaw, R. & Flowers, P. (2015). Renegotiating sexual intimacy in the context of altered embodiment: the experiences of women with breast cancer and their male partners following mastectomy and reconstruction. Health Psychology, 34(4), 426-436.

Lofland, J. (1969). Deviance and identity. USA: Prentice Hall

Logan, T. K., Shannon, L., & Cole, J. (2007). Stalking victimization in the context of intimate partner violence. *Violence and victims*, *22*(6), 669.

Macey, M. (1999). Religion, male violence, and the control of women: Pakistani Muslim men in Bradford, UK. *Gender & Development*, 7(1), 48-55.

MacQueen, S., & Norris, P. A. (2016). Police awareness and involvement in cases of domestic and partner abuse. *Policing and society*, *26*(1), 55-76.

Mahmoud, S. (2021). Qur'an: Curriculum Realities and Ideals. In Memon, N. A., Alhashmi, M., & Abdalla, M. (Eds.) *Curriculum Renewal for Islamic Education: Critical Perspectives on Teaching Islam in Primary and Secondary Schools*. Routledge.

Mahoney, I., & Chowdhury, R. (2021). *Criminal justice and inequality: what can be done to reduce inequality?*. Nottingham Trent University.

Mays, N., & Pope, C. (1995). Qualitative research: rigour and qualitative research. *Bmj*, *311*(6997), 109-112.

Morgan, W., & Gilchrist, E. (2010). Risk assessment with intimate partner sex offenders. *Journal of Sexual Aggression*, *16*(3), 361-372.

Major, B., & O'Brien, L. T. (2005). The social psychology of stigma. *Annu. Rev. Psychol.*, *56*, 393-421.

Malik, F. (2016). The Colonized Mind: A Preliminary Look into the Historical Foundations of the Educational Crisis in the Muslim World. *of the Asian Philosophical Association (ICAPA) Universiti Teknologi Malaysia, Kuala Lumpur, Malaysia, 20th-24th July 2016.*, 233.

Mallory, A. B., Dharnidharka, P., Deitz, S. L., Barros-Gomes, P., Cafferky, B., Stith, S. M., & Van, K. (2016). A meta-analysis of cross cultural risk markers for intimate partner violence. *Aggression and violent behavior*, *31*, 116-126.

Mansfield, L. (2007). Involved-detachment: A balance of passion and reason in feminisms and gender-related research in sport, tourism and sports tourism. *Journal of sport & tourism*, *12*(2), 115-141.

Maqsood, R. W. (2005). The role of the mosque in Britain. *London: The Muslim Parliament of Great Britain*.

Marranci, G. (2014). Integration, minorities and the rhetoric of civilization: The case of British Pakistani Muslims in the UK and Malay Muslims in Singapore. In *Ethnic and Racial Minorities in Asia* (pp. 71-89). Routledge.

Marques, J. M., Yzerbyt, V. Y., & Leyens, J. P. (1988). The "black sheep effect": Extremity of judgments towards ingroup members as a function of group identification. *European Journal of Social Psychology*, *18*(1), 1-16.

Maruna, S., & Mann, R. E. (2006). A fundamental attribution error? Rethinking cognitive distortions. *Legal and Criminological Psychology*, *11*(2), 155-177.

Mays, N., & Pope, C. (1995). Qualitative research: rigour and qualitative research. *Bmj*, *311*(6997), 109-112.

McAlpine, L. (2016). Why might you use narrative methodology? A story about narrative. *Eesti Haridusteaduste Ajakiri. Estonian Journal of Education*, *4*(1), 32-57.

MCB (2015). British Muslims in Numbers. *The Muslim Council of Britain Research and Documentation Committee*. London, UK.

McCarry, M., & Lombard, N. (2016). Same old story? Children and young people's continued normalisation of men's violence against women. *Feminist review*, *112*(1), 128-143.

McInally, W., & Gray-Brunton, C. (2021). Research made simple: using multiperspective interpretative phenomenological analysis to explore healthcare phenomena. *Evidence-Based Nursing*, *24*(3), 71-73.

McKenry, P. C., Julian, T. W., & Gavazzi, S. M. (1995). Toward a biopsychosocial model of domestic violence. *Journal of Marriage and the Family*, 307-320.

McLaughlin, E. (2016). South Asian Immigrant Women & Domestic Abuse in Scotland: An uncertain legal status and no recourse to public funds (Doctoral Dissertation, Glasgow Caledonian University).

McMahon, M., & McGorrery, P. (2016). Criminalising Controlling and Coercive Behaviour: The Next Step in the Prosecution of Family Violence?. *Alternative Law Journal*, *41*(2), 98-101.

Mead, G. H. (1934). *Mind, self and society* (Vol. 111). University of Chicago Press.: Chicago.

Megahed, N., & Lack, S. (2011). Colonial legacy, women's rights and gender-educational inequality in the Arab World with particular reference to Egypt and Tunisia. *International review of Education*, *57*(3), 397-418.

Metzl, J. M. (2010). *The protest psychosis: How schizophrenia became a black disease*. Beacon Press.

Mend, 2019. Islamophobia and Hate Crime Factsheet.

https://www.mend.org.uk/wp-content/uploads/2017/10/Islamophobia-and-Hate-Crime.pdf
Last accessed 10 May 2019

Meyer, S. (2016). Still blaming the victim of intimate partner violence? Women's narratives of victim desistance and redemption when seeking support. *Theoretical criminology*, *20*(1), 75-90.

Milani, A., Leschied, A., & Rodger, S. (2018). "Beyond Cultural Sensitivity": Service Providers' Perspectives on Muslim Women Experiences of Intimate Partner Violence. *Journal of Muslim Mental Health*, *12*(1), 49-75.

Mills, S. (1998) Postcolonial feminist theory. In Jones, J., & Jackson, S. (Eds.). (1998). *Contemporary feminist theories*. Edinburgh University Press.

Modood, T. (2006). Ethnicity, Muslims and higher education entry in Britain. *Teaching in Higher Education*, *11*(2), 247-250.

Mohr, S. (2021). Liberatory and Decolonizing Methodological Approaches: Participatory Action Research and Case Reports. *Academia Letters*, Article 1133. https://doi.org/10.20935/AL1133.

Moe, A. M. (2007). Silenced voices and structured survival: Battered women's help seeking. *Violence against women*, *13*(7), 676-699.

Mogahed, D., & Chouhoud, Y. (2017). *American Muslim poll 2017: Muslims at the crossroads*. Available at SSRN 3454205.

Moore, D., & Singh, R. (2018). Seeing crime, feeling crime: Visual evidence, emotions, and the prosecution of domestic violence. *Theoretical Criminology*, *22*(1), 116-132.

Moore, K., Mason, P., & Lewis, J. M. W. (2008). *Images of Islam in the UK: The representation of British Muslims in the national print news media 2000-2008*. Cardiff School of Journalism, Media and Cultural Studies.

Morawski, J. G. (2001). Gifts bestowed, gifts withheld: Assessing psychological theory with a Kochian attitude. *American Psychologist*, *56*(5), 433.

Moscovici, S. (1984). The phenomenon of social representations. In R. Farr & S. Moscovici (Eds.), *Social Representations* (pp. 3 - 69). Cambridge: Cambridge University Press.

Moustakas, C. (1994). Phenomenological research methods. Sage publications.

Narayan, U. (2013). *Dislocating cultures: Identities, traditions, and third world feminism*. Routledge.

Nash, J. C. (2008). Re-thinking intersectionality. *Feminist review*, 89(1), 1-15.

Nasr, S. H. (2016). Philosophical Considerations of Islamic Education—Past and Future: Interview with Professor Seyyed Hossein Nasr. In Zaman, M., & Memon, N. A. (Eds.). *Philosophies of Islamic education: Historical perspectives and emerging discourses*. Routledge. (pp. 29-37)

Nizza, I. E., Farr, J., & Smith, J. A. (2021). Achieving excellence in interpretative phenomenological analysis (IPA): Four markers of high quality. *Qualitative Research in Psychology*, *18*(3), 369-386.

Noble, H., & Smith, J. (2015). Issues of validity and reliability in qualitative research. *Evidence-based nursing*, *18*(2), 34-35.

Oakley, L., & Humphreys, J. (2019). Escaping the Maze of Spiritual Abuse: Creating Healthy Christian Cultures. SPCK.

Oakley, L., & Kinmond, K. (2013), Breaking the Silence on Spiritual Abuse, Palgrave Macmillian, Basingstoke.

Okuda, M., Olfson, M., Wang, S., Rubio, J. M., Xu, Y., & Blanco, C. (2015). Correlates of intimate partner violence perpetration: results from a National Epidemiologic Survey. *Journal of traumatic stress*, *28*(1), 49-56. Opdenakker, R. (2006, September). Advantages and disadvantages of four interview techniques in qualitative research. In *Forum Qualitative Sozialforschung/Forum: Qualitative Sozial Research* (Vol. 7, No. 4).

ONS (2017) Accessed at

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domes ticabuseinenglandandwales/yearendingmarch2017 [Last accessed 18.06.2018]

ONS (2018) Accessed at

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domes ticabuseinenglandandwales/yearendingmarch2018 [Last accessed 01.08.2021]

ONS 2019,

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domes ticabuseinenglandandwalesoverview/november2019 [Last accessed 16.09.2020]

ONS, (2020).

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabuseduringthecoronaviruscovid19pandemicenglandandwales/november2020 [Last accessed 03.05.2020]

ONS Census (2011) Accessed at

https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/religion/articles/religioninenglandandwales2011/2012-12-11 [Last accessed 01.08.2021]

Otters, R. (2012). Learning from the Other Abrahamic Faith: American and Islamic Understanding of Individualism and Community. *International Journal of Interdisciplinary Social Sciences*, *6*(9).

Oyewuwo-Gassikia, O. B. (2016). American Muslim women and domestic violence service seeking: A literature review. *Affilia*, *31*(4), 450-462.

Paat, Y. F., & Markham, C. (2021). Digital crime, trauma, and abuse: Internet safety and cyber risks for adolescents and emerging adults in the 21st century. *Social Work in Mental Health*, *19*(1), 18-40.

Painter, K., & Farrington, D. P. (1998). Marital violence in Great Britain and its relationship to marital and non-marital rape. *International Review of Victimology*, *5*(3-4), 257-276.

Palacio, C. (2021). *Dialogical Narrative analysis on Islam in British Muslim Women's stories of Domestic Abuse* (Doctoral dissertation, University of East London).

Payton, J. (2010). Collective crimes, collective victims: a case study of the murder of Banaz Mahmod. In *Honour, violence, women and Islam* (pp. 75-87). Routledge-Cavendish.

Peled, E. (1997). Intervention with children of battered women: A review of current literature. *Children and Youth Services Review*, *19*(4), 277-299.

Pence, E., & Paymar, M. (1993). *Education groups for men who batter: The Duluth model*. New York: Springer.

Pereira, M. E., Azeredo, A., Moreira, D., Brandão, I., & Almeida, F. (2020). Personality characteristics of victims of intimate partner violence: A systematic review. *Aggression and Violent Behavior*, 101423.

Peterson, C., & Seligman, M. E. (1983). Learned helplessness and victimization. *Journal of Social Issues*, *39*(2), 103-116.

Pinto, L. A., Sullivan, E. L., Rosenbaum, A., Wyngarden, N., Umhau, J. C., Miller, M. W., & Taft, C. T. (2010). Biological correlates of intimate partner violence perpetration.

Aggression and violent behavior, 15(5), 387-398.

Pokharel, B., Hegadoren, K., & Papathanassoglou, E. (2020). Factors influencing silencing of women who experience intimate partner violence: An integrative review. *Aggression and Violent Behavior*, *52*, 101422.

Porter, A. (2019). Prosecuting domestic abuse in England and Wales: Crown Prosecution Service 'working practice' and new public managerialism. *Social & Legal Studies*, *28*(4), 493-516.

Posick, C., Lasko, E., & Tremblay, R. E. (2018). On the need for a biopsychosocial victimology: a foundational model for focusing violence prevention on women and children. *Victims & Offenders*, *13*(7), 938-954.

Purkayastha, B. (2000). Liminal lives: South Asian youth and domestic violence. Journal of Social Distress and the Homeless, 9(3), 201-219.

Qureshi, K., Charsley, K., & Shaw, A. (2014). Marital instability among British Pakistanis: transnationality, conjugalities and Islam. *Ethnic and Racial Studies*, *37*(2), 261-279.

Rahman, A., Ali, M., & Kahn, S. (2018). The British art of colonialism in India: Subjugation and division. *Peace and Conflict Studies*, *25*(1), 5.

Rai, A., & Choi, Y. J. (2018). Socio-cultural risk factors impacting domestic violence among South Asian immigrant women: A scoping review. *Aggression and violent behavior*, *38*, 76-85.

Raj, A., Livramento, K. N., Santana, M. C., Gupta, J., & Silverman, J. G. (2006). Victims of intimate partner violence more likely to report abuse from in-laws. *Violence against women*, *12*(10), 936-949.

Rassool, G. H. (2015a). Cultural competence in counseling the Muslim patient: Implications for mental health. *Archives of psychiatric nursing*, *29*(5), 321-325.

Rassool, G. H. (2015b). *Islamic Counselling: An Introduction to theory and practice*. Routledge.

Rasool. S., & Suleman. M. (2016) Muslim women overcoming marital violence: breaking through 'structural and cultural prisons' created by religious leaders, Agenda, 30:3, 39-49.

Reavey, P., Ahmed, B., & Majumdar, A. (2006). 'How can we help when she won't tell us what's wrong? 'Professionals working with South Asian women who have experienced sexual abuse. *Journal of Community & Applied Social Psychology*, *16*(3), 171-188.

Rehman, A. A., & Alharthi, K. (2016). An introduction to research paradigms. *International Journal of Educational Investigations*, *3*(8), 51-59.

Reid, K., Flowers, P., & Larkin, M. (2005). Exploring lived experience. *The Psychologist*. 18 (1): 20-23. *Link: https://goo. gl/9ScDxi*.

Robinson, A. L., Pinchevsky, G. M., & Guthrie, J. A. (2016). Under the radar: Policing non-violent domestic abuse in the US and UK. *International journal of comparative and applied criminal justice*, *40*(3), 195-208.

Rolfe, G., Freshwater, D., Jasper, M. (2001) Critical reflection in nursing and the helping professions: a user's guide. Basingstoke: Palgrave Macmillan.

Rose, E. (2015, November). A feminist reconceptualisation of intimate partner violence against women: A crime against humanity and a state crime. In *Women's Studies International Forum* (Vol. 53, pp. 31-42). Pergamon.

Rose, L. E., & Campbell, J. (2000). The role of social support and family relationships in women's responses to battering. *Health Care for Women International*, *21*(1), 27-39.

Rostill-Brookes, H., Larkin, M., Toms, A., & Churchman, C. (2011). A shared experience of fragmentation: Making sense of foster placement breakdown. *Clinical Child Psychology and Psychiatry*, *16*(1), 103-127.

Rothman, A., & Coyle, A. (2018). Toward a framework for Islamic psychology and psychotherapy: An Islamic model of the soul. *Journal of religion and health*, *57*(5), 1731-1744.

Sabki, A. I. A., & Hardaker, G. (2013). The madrasah concept of Islamic pedagogy. *Educational Review, 65*(3), 342-356.

Sadek, N. (2017). Islamophobia, shame, and the collapse of Muslim identities. *International Journal of Applied Psychoanalytic Studies*, *14*(3), 200-221.

Salahi, A., (2019). The Qur'an: A Translation for the 21st Century. *The Islamic Foundation*, Markfield, UK.

Salter, M. (2014). Multi-perpetrator domestic violence. *Trauma, Violence, & Abuse,* 15(2), 102-112.

Samari, G., Alcalá, H. E., & Sharif, M. Z. (2018). Islamophobia, health, and public health: a systematic literature review. *American journal of public health*, *108*(6), e1-e9.

Saxton, M. D., Jaffe, P. G., Dawson, M., Straatman, A. L., & Olszowy, L. (2020). Complexities of the Police Response to Intimate Partner Violence: Police Officers' Perspectives on the Challenges of Keeping Families Safe. *Journal of interpersonal violence*, 0886260520934428.

Schmidt, M., & Hansson, E. (2018). Doctoral students' well-being: a literature review. International journal of qualitative studies on health and well-being, 13(1), 1508171.

Scott, S., Williams, J., McNaughton Nicholls, McManus, S., N. C., Brown, A., Harvey, S., Kelly, L., & Lovett, J. (2015). *Violence, abuse and mental health in England Population*Patterns Responding Effectively to Violence and Abuse. REVA project, briefing 1.

Seck, M. D., & Honig, H. J. (2012). Multi-perspective modelling of complex phenomena. *Computational and Mathematical Organization Theory*, *18*(1), 128-144.

Seith, E. (2013). Religion-Diversity within Muslim community 'unrecognised'. *The Times Educational Supplement Scotland*, (2335), 6.

Shah, S. (2012). Muslim schools in secular societies: persistence or resistance!. *British Journal of Religious Education*, *34*(1), 51-65.

Shah, S. (2014). Islamic Education and the UK Muslims: Options and Expectations in a Context of Multi-locationality. *Studies in Philosophy and Education*, *33*(3), 233-249.

Shaaraoui, M.M. (2006). *Oppression and the Oppressors*. (C. Abdelghani, Trans.) Al-Firdous, London, UK.

Shorey, R. C., Febres, J., Brasfield, H., & Stuart, G. L. (2012). The prevalence of mental health problems in men arrested for domestic violence. *Journal of family violence*, *27*(8), 741-748.

Sidat, H. (2018). Between tradition and transition: An Islamic seminary, or Dar al-Uloom in modern Britain. *Religions*, *9*(10), 314.

Siddiqui, A. (2012). Faith and Engagement: A Reflective Journey in Bayfield, T., Race, A., & Siddiqui, A. (Eds.). *Beyond the Dysfunctional Family: Jews, Christians and Muslims in Dialogue with Each Other and with Britain*. Manor House Abrahamic Dialogue Group.

Siddiqui, H. (2018). Counting the cost: BME women and gender-based violence in the UK. *IPPR Progressive Review*, *24*(4), 361-368.

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative research in psychology*, *1*(1), 39-54.

Smith, J. A. (2011). Evaluating the contribution of interpretative phenomenological analysis. *Health psychology review*, *5*(1), 9-27.

Smith, J.A. and Osborn, M. (2003). Interpretative phenomenological analysis. In Smith, J.A., editor, *Qualitative psychology: a practical guide to research methods*. London: Sage.

Soler, A. (2020). A multiperspectival exploration of depression in old age: the lived experience of psychiatrists and community living older women (Master's thesis, University of Malta).

Spitzberg, B. H., & Cupach, W. R. (2014). *The dark side of relationship pursuit: From attraction to obsession and stalking*. Routledge.

Stark, E. (2007). Interpersonal violence. *Coercive control: How men entrap women in personal life.* Oxford University Press

Stark, E. (2012). Looking beyond domestic violence: Policing coercive control. *Journal of Police Crisis Negotiations*, *12*(2), 199-217.

Stedman, B. (1917). Right of husband to chastise wife. *The Virginia Law Register*, 3(4), 241-248.

Steinert, T., & Whittington, R. (2013). A bio-psycho-social model of violence related to mental health problems. *International journal of law and psychiatry*, *36*(2), 168-175.

Stepick, A., & Stepick, C. D. (2002). Becoming American, constructing ethnicity: Immigrant youth and civic engagement. *Applied developmental science*, *6*(4), 246-257.

Stith, S. M., Smith, D. B., Penn, C. E., Ward, D. B., & Tritt, D. (2004). Intimate partner physical abuse perpetration and victimization risk factors: A meta-analytic review.

Aggression and violent behavior, 10(1), 65-98.

Strauss, A., & Corbin, J. M. (1997). *Grounded theory in practice*. Sage Publications, London.

St Vil, N. M., Sabri, B., Nwokolo, V., Alexander, K. A., & Campbell, J. C. (2017). A qualitative study of survival strategies used by low-income black women who experience intimate partner violence. *Social work*, *62*(1), 63-71.

Sussman, D. (2005). What's wrong with torture?. *Philosophy & Public Affairs*, *33*(1), 1-33.

Sylaska, K. M., & Edwards, K. M. (2014). Disclosure of intimate partner violence to informal social support network members: A review of the literature. *Trauma, Violence, & Abuse, 15*(1), 3-21.

Taher, M. A., & Jamaluddin, S. Z. (2015, November). Reluctance of seeking legal remedy in dowry violence cases in Bangladesh: An analysis of influencing factors. In *Women's Studies International Forum* (Vol. 53, pp. 83-89). Pergamon.

Tajfel, H. and J. C. Turner (1979). 'An integrative theory of intergroup conflict'. In W. G. Austin and S. Worchel (eds.). *The Social Psychology of Intergroup Relations,* pp. 7–24. Monterey, CA: Brooks/Cole.

Tan, C., Basta, J., Sullivan, C. M., & Davidson, W. S. (1995). The role of social support in the lives of women exiting domestic violence shelters: An experimental study. *Journal of Interpersonal Violence*, *10*(4), 437-451.

Tariq, M., & Syed, J. (2018). An intersectional perspective on Muslim women's issues and experiences in employment. *Gender, Work & Organization*, *25*(5), 495-513.

Taylor, C. (2020). Representing the Windrush generation: metaphor in discourses then and now. *Critical Discourse Studies*, *17*(1), 1-21.

Taylor-Dunn, H., Bowen, E., & Gilchrist, E. (2017). The victim journey: A participatory research project seeking the views and experiences of victims of stalking and harassment.

Taylor, J. & Shrive, J. (2021). 'I thought it was just a part of life': Understanding the scale of violence committed against women in the UK since birth. Victim Focus UK. Retrieved from https://www.victimfocus.org.uk/womens_experiences_violence_abuse_study (last accessed 27.06.2021)

Thiara, R. K., & Gill, A. K. (2010). Understanding violence against South Asian women. *Violence against women in South Asian communities*, 29-54.

Thomas, P. (2016). Youth, terrorism and education: Britain's Prevent programme. *International Journal of Lifelong Education*, *35*(2), 171-187.

Thornton, A., & Bouhana, N. (2019). Preventing radicalization in the UK: Expanding the knowledge-base on the channel programme. *Policing: A Journal of Policy and Practice*, *13*(3), 331-344.

Tobah, S. (2017). Constructing mental illness: Comparing discourses on mental health, illness, and depression by Muslim leaders with those found in consumer health materials. *Journal of Muslim mental health*, *11*(2).

Tofte, A.J.I.M. (2011). *Problems Muslims Face in Today's World: Their causes and solutions based on the authentic Sunnah and the way of our predecessors.* International Islamic Publishing House, Riyadh, Saudi Arabia.

Triandis, H. C. (1996). The psychological measurement of cultural syndromes. *American psychologist*, *51*(4), 407.

Triandis, H. C. (2001). Individualism-collectivism and personality. *Journal of personality*, *69*(6), 907-924.

Triandis, H. C. (2018). Individualism and collectivism. Routledge.

Trevillion, K., Hughes, B., Feder, G., Borschmann, R., Oram, S., & Howard, L. M. (2014). Disclosure of domestic violence in mental health settings: A qualitative metasynthesis. *International Review of Psychiatry*, *26*(4), 430-444.

Uddin, I. (2020). Reformulation of Islamic Matrimonial Law: British Muslims, Contemporary Understandings and Normative Practices. *Journal of Muslim Minority Affairs*, 40(1), 6-25.

Unluer, S. (2012). Being an insider researcher while conducting case study research. *Qualitative Report*, *17*, 58.

Usher, K., Bhullar, N., Durkin, J., Gyamfi, N., & Jackson, D. (2020). Family violence and COVID-19: Increased vulnerability and reduced options for support. *International Journal of Mental Health*. 29 549-552

Yousuf, N. (2012). *Defending Muslim Women's Rights: Bridging Muslim Personal Law and Court Judgements*. Majlis.

Wagstaff, C., Jeong, H., Nolan, M., Wilson, T., Tweedlie, J., Phillips, E., ... & Holland, F. (2014). The accordion and the deep bowl of spaghetti: Eight researchers' experiences of using IPA as a methodology. *The qualitative report*, *19*(24), 1.

Walby, S., 1989. Theorising patriarchy. *Sociology*, 23(2), pp.213-234.

Walker, K., Bowen, E., Brown, S., & Sleath, E. (2015). Desistance from intimate partner violence: A conceptual model and framework for practitioners for managing the process of change. *Journal of interpersonal violence*, *30*(15), 2726-2750.

Walker, L. E. (1979). The battered woman syndrome. New York: Harper and Row

Wang, M. C., Horne, S. G., Levitt, M., & Klesges, L. M. (2009). Christian women in IPV relationships: An exploratory study of religious factors. *Journal of Psychology and Christianity*, 28(3), 224.

Ward, T. (2002). The management of risk and the design of good lives. *Australian psychologist*, *37*(3), 172-179.

Ward, T., & Brown, M. (2004). The good lives model and conceptual issues in offender rehabilitation. *Psychology, Crime & Law*, *10*(3), 243-257.

Ward, T., & Hudson, S. M. (1998). The construction and development of theory in the sexual offending area: A metatheoretical framework. *Sexual Abuse*, *10*(1), 47-63.

Ward, T., Polaschek, D. L., & Beech, A. R. (2006). *Theories of sexual offending* (Vol. 21). Chichester: Wiley.

Waterhouse, G. F., Reynolds, A., & Egan, V. (2016). Myths and legends: The reality of rape offences reported to a UK police force. *The European Journal of Psychology Applied to Legal Context*, 8(1), 1-10.

Weller, P., & Cheruvallil-Contractor, S. (2015). Muslims in the UK. In Burchardt, M. & Michalowski, I. (Eds). *After Integration. Islam, Conviviality and Contentious Politics in Europe.* Springer VS, Wiesbaden. (pp. 303-325).

Wellock, V. K. (2010). Domestic abuse: Black and minority-ethnic women's perspectives. *Midwifery*, *26*(2), 181-188.

Wehr, H. (1979). A dictionary of modern written Arabic. Otto Harrassowitz Verlag.

West, C. M. (2004). Black women and intimate partner violence: New directions for research. *Journal of Interpersonal Violence*, *19*(12), 1487-1493.

Westmarland, N., Thorlby, K., Wistow, J., & Gadd, D. (2014). Domestic violence: Evidence review. N8 Policing Research Partnership.

White, J. W., Yuan, N. P., Cook, S. L., & Abbey, A. (2013). Ethnic minority women's experiences with intimate partner violence: Using community-based participatory research to ask the right questions. *Sex Roles*, *69*(3-4), 226-236.

White, M. E., & Satyen, L. (2015). Cross-cultural differences in intimate partner violence and depression: A systematic review. *Aggression and violent behavior*, *24*, 120-130.

Whiting, J. B., Oka, M., & Fife, S. T. (2012). Appraisal distortions and intimate partner violence: Gender, power, and interaction. *Journal of Marital and Family Therapy*, *38*, 133-149.

Williams, P., & Durrance, P. (2017). Resisting effective approaches for BAME offenders in England and Wales: The triumph of inertia. *Evidence-Based Skills in Criminal Justice: International Research on Supporting Rehabilitation and Desistance*, 373.

Williamson, A. (2017). The Law and Politics of Marital Rape in England, 1945–1994. Women's History Review, 26(3), 382-413.

Williamson, E. (2010). Living in the world of the domestic violence perpetrator: Negotiating the unreality of coercive control. *Violence Against Women*, *16*(12), 1412-1423.

Wilson, F. M. (2011). Women in management in the United Kingdom. In Davidson, M. J., & Burke, R. J. (Eds). *Women in Management Worldwide*. (pp. 109-120). Gower.

Appendices

Appendix 1 Study 1 Interview Schedule

Experiences of community attitudes towards survivors of domestic violence and abuse from the Muslim community

Interview Schedule

- Can you tell me a bit about yourself?
 (Family, education, working/home life/any children)
- 2. Can you tell me which of the following type(s) of DV you would say you experienced: physical, psychological, sexual, financial, emotional, spiritual?
- 3. How long were you in DV relationship?
- 4. How did you go about getting help and support?
- 5. How did your family react and treat you? (why do you think they reacted this way)
- 6. What was the reaction from the community?
- 7. Why do you think they reacted this way?
- 8. Did the community do anything that helped you?
- 9. [Did the community do anything that was not helpful to you?]
- 10. What could the community have done to help you better?
- 11. What other types of support would have helped you?
- 12. What advice would you give to another survivor who is looking for community help and support?
- 13. What do you think needs to be done by/within Muslim communities in order to help victims more?
- 14. What do you think needs to be done by/within the wider population in order to help victims more?
- 15. What was the perpetrators reaction to you seeking help and support (from community or otherwise)?
- 16. How did the community react towards and treat the perpetrator in your case?
- 17. How do you think communities should be involved in terms of dealing with DV perpetrators?
- 18. Where is your life at now?
- 19. What are your plans for the future?
- 20. Is there anything else you would like to say about your experiences?

Appendix 2 Study 2 Interview Schedule

Understanding healthcare and judicial professional's experiences of domestic violence and abuse in the UK Muslim community

Interview Schedule

- Can you tell me a bit about yourself?
 (Family, education, professional experience)
- 2. Can you tell me a bit about the Muslim community you work in?
- 3. In what capacity have you seen domestic violence cases/incidents? (type of cases dealt with, job role)
- 4. What has been your role?
- 5. What would you say the main issues are in regards to DV within the Muslim community you work within?
- 6. How do you think these issues could be best addressed to reduce the occurrence of DV in this community in the future?
- 7. Where do you think these issues stem from?
- 8. What has been the role of faith and culture in domestic violence from what you have seen?
- 9. What has been the difference you have seen between how victims/survivors and perpetrators are treated?
- 10. What has been your experience with perpetrators and how they explain their behaviour?
- 11. How do you think communities can better help both victims/survivors and perpetrators?
- 12. Is there anything else you would like to say about your experiences?

Brunel University Research Ethics Committee

RESEARCH ETHICS RISK ASSESSMENT AND MANAGEMENT

This form should be used to support the assessment of risks associated with your research project and their mitigation. This must be completed and submitted where relevant within the BREO form.

Prior to completion, if there is any aspect of the risks or risk management process associated with your proposed research that you feel unsure about then it is **your responsibility** (as the researcher) to seek further guidance.

For Completion by the Researcher:

Identified Risks	Likelihood	Potential Impact/Outcome	Risk Management/Mitigating Factors
Identify the risks/hazards present Risks to the participant:	High/Medium/Low	Who might be harmed and how?	Evaluate the risks and decide on the precautions, e.g., Health & Safety
Questions of a sensitive nature may cause distress/upset	Medium	Participant may become distressed or upset with some of the questions	 Participants will be provided with details of what the interview will be regarding prior to agreeing to partake in the research. Participants will be informed that they do not need to answer any questions they do not wish to do so. Participants will be informed that they can stop the interview at any time and/or withdraw their data without any repercussions. Researcher will check the wellbeing of the participant at regular intervals and ensure they are happy to continue. Participants will be provided with support services they can refer to for further information.

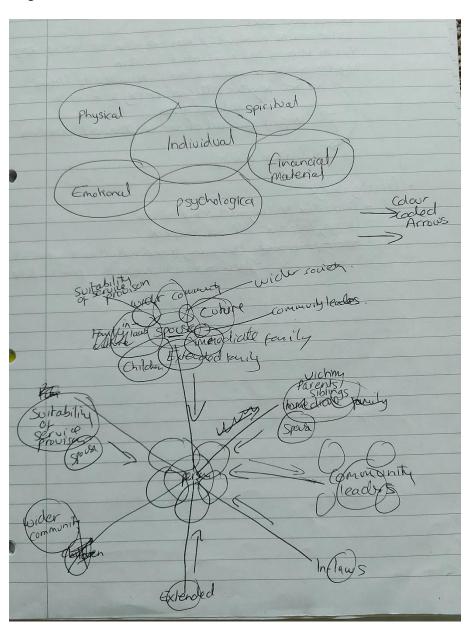
			 It is anticipated that by putting these measures in place the risk would be reduced to low.
Safety of data pertaining to participants	Low	Data pertaining to participants may get into hands of unauthorised personnel or outsiders	 Interviews will be recorded on a passcode protected audio recorder. This will be transported to home of researcher in a locked combination case in the boot of her car. The interview will then be transferred onto a password protected laptop and a secure drive at Nottingham Trent University (NTU) accessed from the researcher's home. Interview will be deleted from recorder. Transcript will not contain any names or identifiable information, these will be omitted. Only the researcher will transcribe the interviews (ethics amendment submitted and approved, permitting use of NTU forensic research assistants to support transcription of study 2 interviews via NTU secure drive). Once transcribed interviews will be deleted off laptop and only stored on secure drive for required period as per funding guidelines, with recycle bin emptied.
Risk of harm to reputation of faith of participants	Medium	Faith of participants could potentially be tarnished or maligned through	 Any findings of the research will be presented in a balanced manner and as an accurate reflection of data provided by participants themselves, it will not hold any subjective views or opinions. Findings will be presented in the wider context of domestic violence and abuse

		publicity of	with any weaknesses and
Risks to the researcher: Risk of distress due to sensitive topics	Low	Researcher may become distressed at some of the information that is revealed within interviews	with any weaknesses and limitations made apparent. Participants will also be made aware prior to agreeing to partake, that findings will be publicly disseminated without their names being revealed. As the researcher is of the same faith, it will be easier for her to justify the importance and relevance of the research and demonstrate that it is not an attack on a particular faith. Researcher has previous experience of working with victims of domestic violence and interviewing Imams in regard to their experiences within community settings of DV in the Muslim community. Researcher therefore is aware of the type of sensitive topics which may arise and is confident that she will be able to deal with them in a professional manner. Researcher will also check in with one of her supervisors after every interview in order to raise any issues of concern.
Safety during conducting interviews	Low	Safety of researcher in getting to, during and after interview	 Researcher will keep one or both of her supervisors informed of all interviews, dates, times and exact locations and will check in with them via mobile contact after each interview. Risk assessment will be reviewed prior to each interview. Researcher will also keep a member of her family informed of when conducting interviews and will pass on supervisor contact details for emergency use. Interviews will be held in a suitable location – may involve

	workplaces, public coffee shops, university campus or home environments, all with adequate privacy. Some interviews may be conducted over telephone / videophone - recording mechanism via
	passcode protected dictaphone will be the same for these.

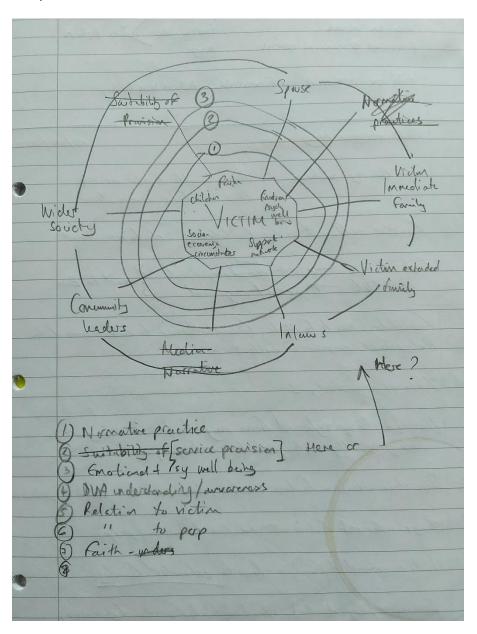
Appendix 4 MP-IPA Development

Stage 1

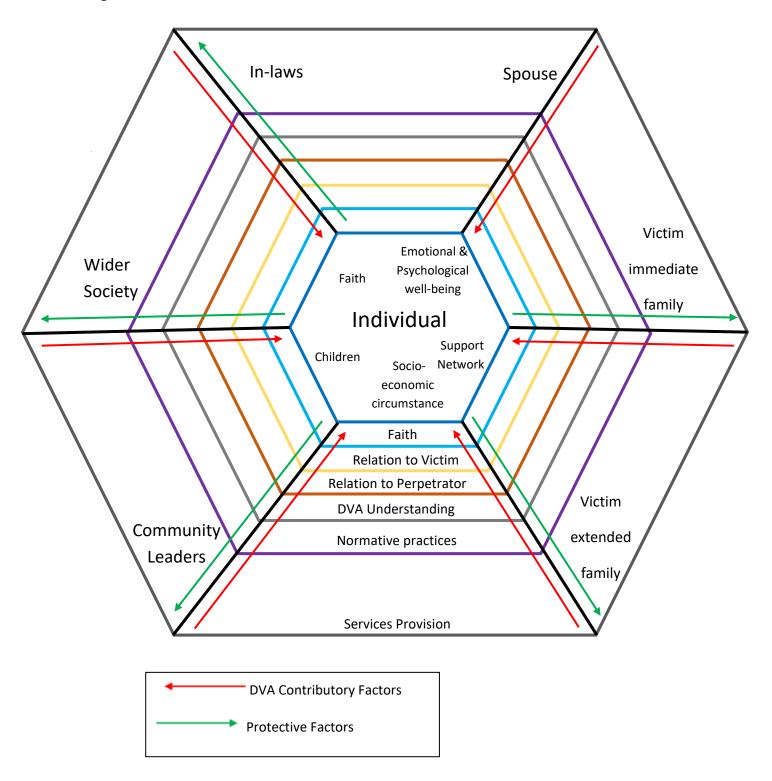


Stage 2

Complete with PhD essential coffee stain of course!



Stage 3



Stage 11

Various iterations were tried in order to develop a model that was representative of the data yet would be straightforward enough to understand and apply within practice.

