

THE EFFECTS OF INTIMATE PARTNER VIOLENCE

THE EFFECTS OF INTIMATE PARTNER VIOLENCE (IPV) ON AFRICAN-  
AMERICAN CHRISTIAN FEMALES

by

Rebecca C. Crane

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

Liberty University, Lynchburg, VA

2023

THE EFFECTS OF INTIMATE PARTNER VIOLENCE (IPV) ON AFRICAN-  
AMERICAN CHRISTIAN FEMALES

by

Rebecca C. Crane

A Dissertation Presented in Partial Fulfillment

of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

Liberty University, Lynchburg, VA

2023

APPROVED BY:

---

Keisha Pou-Buchanan, Ed.D., Committee Chair

---

Jama Davis, Ph.D., Committee Member

**ABSTRACT**

The purpose of this phenomenological study was to communicate the experiences of African American Christian females with intimate partner violence (IPV). The central phenomenon of the study aimed to research religious effects on African American Christian females' decision-making regarding IPV in the state of Georgia. The theory guiding this study was social constructivism, introduced by two sociologists, Peter L. Berger and Thomas Luckman. The study's goal was to depend as much as possible on the stories of the members being examined. Data were collected using two methods: interviews and oral history. A critical case sampling was used to collect specific information about the problem, providing access and ease in collecting data. Themes were generated from the analysis of significant statements provided by participants. The data from research questions were used to highlight significant statements, sentences, or quotes that explained how the participants experienced the phenomenon. Interviews were semi-structured and consisted of open-ended questions to allow the participants to speak freely about their lived IPV experiences.

*Keywords:* Intimate partner violence, Christians, African American females, and religion

Copyright@2023 by Rebecca C. Crane. All rights reserved

### **Dedication**

This manuscript is dedicated to my husband, Benny Sr., who never denied me anything and has always encouraged me to excel. To my sons, Benny Jr., Andre', and Jeremy, my daughters-in-law, and my goddaughter, Trina, who constantly encouraged and supported me academically. To my grandchildren Marcus, Christopher, Hallie, Kennedy, Jeremiah, Benny III, Asher, and one great-grandchild Lyndon, who will follow this legacy. To my deceased mother for raising a Strong Black Woman. To my 97-year-old dad, who taught me the Word of God, how to pray and trust God. To my prayer partners who prayed me through. I give all the honor and glory to my Lord and Savior, Jesus Christ because this journey would have failed without Him. I love you all.

### **Acknowledgments**

First, I want to acknowledge my Lord and Savior, Jesus Christ, who never left me during my struggle. I give all the glory to God for every good and perfect gift from the Lord. I could not have completed this journey without God. Next, I would like to acknowledge Dr. Chandra Story, who was always willing to proofread my papers. To my sons Benny Jr., Andre', and Jeremy, who not only proofed my documents, but were also bold enough to give me the hard talk when I was weary. To my husband, Benny Sr., who never complained while I worked. To Dr. Holden and Dr. Williams, who have become best friends and advisors. I want to thank my chair, Dr. Keisha Buchannan, for all the encouragement, extra time (not only for me but also for my classmates), patience, and dedication to your position. Dr. B, I know God hand-picked you to be my chair. I cannot imagine what the end of this journey would have been like without you. Thank you, Dr. B. Finally, to my reader, Dr. Jama Davis, thank you.

## Table of Contents

ABSTRACT .....	ii
Dedication.....	iv
Acknowledgments.....	v
List of Tables .....	x
LIST OF ABBREVIATIONS.....	xi
CHAPTER ONE: INTRODUCTION.....	1
Overview.....	1
Background.....	2
Situation to Self.....	6
Problem Statement .....	7
Purpose Statement.....	9
Significance of Study .....	9
Research Questions .....	10
Definitions .....	10
Summary.....	11
CHAPTER TWO: LITERATURE REVIEW.....	13
Overview.....	13
Related Literature.....	15
Theoretical Framework.....	15
Religious Coping.....	16
Silencing-Self Theory.....	17
Sociological Theories .....	18

The Ecological Theory .....	20
Spirituality and Religious Beliefs of IPV Suffers .....	21
Why Do Women Leave/Stay in Abusive Relationships? .....	24
Safety is a Crucial Objective for Abused Women .....	26
Seeking Spiritual Help for IPV .....	27
Training Help For IPV .....	28
Silencing Intimate Partner Violence (IPV) .....	30
IPV and Gender-Based Violence (GBV) .....	33
Mental Health Problems and IPV .....	35
Mental Effects of IPV .....	36
Factors Associated with IPV Relationships .....	38
IPV and LGBT Community .....	40
Clinical Treatment for IPV .....	41
Summary .....	43
CHAPTER THREE: METHODS .....	46
Overview .....	46
Design .....	46
Research Questions .....	47
Settings .....	47
Participants .....	48
Procedure .....	48
The Researcher's Role .....	49
Data Collection .....	50



Instrumentation .....	51
Questions.....	51
Data Analysis .....	52
Trustworthiness.....	53
Credibility .....	53
Dependability and Confirmability.....	54
Transferability .....	54
Ethical Considerations.....	54
Summary.....	55
CHAPTER FOUR: FINDINGS.....	56
Overview.....	56
Results .....	58
Theme Development.....	58
Research Question Responses.....	59
Research Question One.....	59
Research Question Two .....	59
Research Question Three .....	61
Category I - Views of Mental Well-being .....	62
Category II - Focus on Religion.....	66
Category III - Silencing .....	68
Category IV-Witnessing IPV During Childhood.....	70
Category V – Staying Versus Leaving .....	71
Sub-categories: Coping and Prayer .....	73

Summary.....	74
CHAPTER FIVE: CONCLUSION.....	76
Overview.....	76
Summary of Findings .....	76
Discussion.....	78
Implications .....	82
Religious Coping.....	83
Silencing Self-theory .....	83
Sociological Theories .....	83
The Ecological Systems Theory.....	84
Delimitations and Limitations.....	84
Recommendations for Future Research.....	85
Summary.....	86
References .....	88
Appendix A: IRB Approval.....	113
Appendix B: Consent Form.....	114
Appendix C: Demographic Questionnaire .....	116
Appendix D: Interview Guide .....	117
Appendix E: Recruitment Email.....	120

**List of Tables**

Table 1. Participants' Demographics.....	57
Table 2. The Role of Religion in Their Decision Making.....	60
Table 3. Counseling Experiences For IPV .....	61
Table 4. Mental Health Challenges.....	63
Table 5. Mind-Set .....	64
Table 6. Church Influences.....	66
Table 7. Pleasing God .....	67
Table 8. Silence-Self .....	69
Table 9. Childhood Experiences .....	70
Table 10. Staying Versus Leaving .....	72
Table 11. Coping and Payer .....	74

**LIST OF ABBREVIATIONS**

Center for Disease Control	CDC
Intimate Partner Violence	IPV
Institution Board of Review	IRB
Lesbian, Gay, Bisexual, Transgender, Queer	LGBTQ
National Intimate Partner and Sexual Violence Survey	NISVS
Posttraumatic Stress Disorders	PTSD
Strong Black Woman	SBW

## CHAPTER ONE: INTRODUCTION

### Overview

Intimate partner violence (IPV) involves physical or sexual violence, stalking, and psychological aggression described by verbal, emotional, or psychological coercion or terrorization between sexual or intimate partners (Black, 2011; Kaufman et al., 2020). Black's (2011) nationally representative survey indicated that nearly 33 million women in the United States had experienced IPV (2020). In addition, IPV is associated with adverse mental health outcomes among female survivors, including depressive symptoms, posttraumatic stress symptoms (PTSD), anxiety symptoms, suicidal ideation, and substance use (Dillon et al., 2013; Golding, 1999; 2020). Research revealed that females are twice as likely to encounter severe physical violence from an intimate partner than males (Smith et al., 2011; Williams & Jenkins, 2019) and twice as likely to be murdered (Catalano et al., 2009; Williams & Jenkins, 2019). In addition, homelessness, substance abuse, and unprotective sex amid other high-risk behaviors have been reported by females who experience IPV (Center for Disease Control [CDC], 2008, CDC, 2018; 2019). IPV-related incidents include experiencing or being fearful, concerned for safety, injury, need for medical care, needing help from law enforcement, missing at least one day of work, missing at least one day of school, and contacting a crisis hotline (Smith et al., 2017). Furthermore, females are three times more likely to report adverse effects when IPV occurs (2011).

The Christian community is not immune to IPV. It influences all populations, irrespective of race, schooling, or financial status (Shaw et al., 2020). In addition, research has indicated that religious beliefs play a considerable role in the lives of victims of domestic violence who may find strength in their faith rather than compromise their faith by leaving (Zust et al., 2021).

Instead of abandoning their relationship, victims endure violence at all costs to keep a family or a marriage together (Zust et al., 2021). Davis and Johnson (2021) noted that individuals who are violent against their intimate partner(s) sometimes use religion as a mechanism of control. However, academic literature has limited discussion on religious/spiritual abuse in the context of intimate partner violence (IPV; Davis & Johnson, 2021). Therefore, the attack on one's spirituality or faith is unique enough to explore typical psychological or emotional abuse separately (Davis & Johnson, 2021), given that abusers often try to interrupt the social support systems of IPV sufferers (Mbadugha, 2016; Walklate et al., 2018). Previous research has also revealed conflicting findings on the protective role of spirituality and positive outcomes (Oni-Ojo et al., 2014). Consequently, the Christian community must become aware of IPV.

### **Background**

This study used intimate partner violence and domestic violence interchangeably based on research. Domestic violence is defined broadly as abusive behavior (i.e., physical, sexual, emotional, economic, or psychological) performed by an intimate partner or family member (Healey, 2014). The expressions recognized for domestic violence include domestic abuse, spousal abuse, battering, family violence, and intimate partner violence (IPV). An example of domestic violence is the behavior of one accomplice against one more in a personal connection like marriage, dating, family, or living together (Alokan, 2013). However, in an extensive sense, domestic violence includes intimate partner violence and family violence, such as child abuse, sibling violence, or even elder abuse, which may also be cited as domestic violence (2014). Considering that the essential focal point of this conversation is violence among African American Christian females associated with a close, sincerely based relationship, we have

decided to utilize the term intimate partner violence (IPV) to characterize the particular social setting for the following conversation.

Intimate partner violence (IPV) is commonly used to refer to acts of hostility between present or past spouses, boyfriends, or girlfriends (Stover & Kiselica, 2015). Likewise, IPV customarily includes violence between cohabitating individuals (Mosha et al., 2019). However, this phenomenon is more life-threatening among racial-ethnic minorities, specifically African Americans, who are unequally affected (Centers for Disease Control and Prevention [CDC], 2018). According to the CDC (2018), 44% of females and 40% of males encountered IPV during their life cycle. In addition, the National Intimate Partner and Sexual Violence Survey (NISVS) indicated that 45.1% of African American females reported having encountered sexual violence, physical aggression, or stalking by an intimate partner (Smith et al., 2017). Given these prevalence rates, more than six million African American females are survivors of IPV during their lifetime (Black, 2011).

Over the past 40 years, research indicated that African Americans, whether as individuals or couples, reported consistently higher rates of overall severe, mutual, recurrent, and lifetime IPV victimization and enactment when compared with their Caucasians and Hispanic counterparts (Lacey et al., 2015; West, 2012). Therefore, researchers must continue investigating the differences in the occurrence and frequency of IPV centered on race and ethnicity, particularly among African American females in the United States (2015). Considering this, a dearth of research draws attention to the distinctive elements that may indicate the high degrees of IPV within the African American community (Al'Uqdah et al., 2016).

African American females continue to be affected by rates of mental health situations that can be aversive to their well-being (Lacey et al., 2015). Qualitative analyses found that African

American females have described being overwhelmed by the pressure to exemplify strength and be resilient for their families and communities (Abrams et al., 2014, 2019; Woods-Giscombé, 2010). In addition to feeling overwhelmed, African American females embrace the need to abstain from disrupting others with their sensitive wants and concerns (Abrams et al., 2019). This Strong Black Woman (SBW) phenomenon supports reluctance to explore substantial and elusive help, express feelings, or display weakness; help-pursuing behavior is entirely against their character (Abrams et al., 2019; Watson-Singleton, 2017; Woods-Giscombé, 2010). Furthermore, research shows that psychological pain frequently is overlooked, given that it is obscure by a display of strength (Abrams et al., 2014, 2019).

Abrams et al. (2019) proposed that the SBW Schema's self-quieting is noteworthy. This self-quieting has been connected to burdensome symptomatology and might obstruct African American females from seeing a requirement for and looking for emotional wellness administrations (2019). Given these unrealistic expectations, African American females might seek relief in their faith and find meaning in serving their local community church (Avent Harris, 2021). Social help from religious individuals was essentially and contrarily discovered through a multivariate investigation to connect with burdensome manifestations and mental trouble (Chatters et al., 2015). The recurrence of adverse connections with religious individuals was emphatically linked with burdensome indications and mental misery (2015). Social help from religious individuals continued to be necessary; however, adverse communication from religious individuals did not remain important while controlling for signs of family-friendly help (2015). Included in this example of religious participants, everyday encouragement from family was a defensive component and adverse connections with family were a dangerous influence for burdensome indications and mental pain (2015).



It is not unexpected that African American people, women specifically, often use religion and faith as coping mechanisms for many personal problems and IPV, given the level of religious involvement among African American (Nguyen, 2018; Williams & Jenkins, 2019). One of the most recent Pew Center Religious Landscape Studies (Pew Research Center, 2015) revealed that more than eight out of 10 African Americans were associated with a religion (Williams & Jenkins, 2019). In comparison to Caucasians, African Americans reported that they attended church 47% once or more a week and prayed daily, almost three-quarters (73%) more than Caucasians or Hispanics (Masci, 2018; Williams & Jenkins, 2019). African American females are devout, with 83% scoring highly religious on a measure of mutual regularity of prayer and church attendance, belief in God, and the importance of religion (Cox & Diamant, 2018; Williams & Jenkins, 2019).

Research has discovered that around 90% of African American maltreated females use prayer as a coping mechanism for IPV (El-Khoury et al., 2004; Gillum et al., 2006; Williams & Jenkins, 2019). The same findings in a national sample of African American using prayer and faith for general personal problems and distress were indicated (Chatters et al., 2018; Williams & Jenkins, 2019). While the significance of supplication and spirituality is purportedly recognized, especially for fervent abused females of color, conversations about the effect of ecclesiastical lessons and insight are extensively more amalgamated (Williams & Jenkins, 2019). Towards the end of the '70s and mid-'80s, very few spiritual leaders were equipped to address IPV effectively (Bent-Goodley, 2013; Williams & Jenkins, 2019).

Often viewing abused women's programs as unfavorable, some ministers viewed services as adverse towards males and instigated marital break-ups (Williams, 2011; Williams & Jenkins, 2019). Inspiring females to remain in abusive relationships and "submit to their husbands" was

not unusual for faith leaders and provided biblical misinterpretations that justify wife violence (Clark, 2015; Williams, 2011; Williams & Jenkins, 2019). Even though numerous ill-treatment females continued to pursue support from their faith communities, abused females' services started to lose confidence in faith houses, leaders, and traditions as a means of help (Nason-Clark et al., 2018; Williams & Jenkins, 2019).

### **Situation to Self**

The motivation for conducting this study comes from my experiences as an African American female and other African American females in counseling and church. Before beginning the doctoral process, I held the Family Violence Intervention Provider (FVIP) position and served as Assistant Pastor of my church. I also managed my own behavioral health counseling practice. As a Family Violence Provider, Assistant Pastor, and Licensed Counselor, my position was to provide interventions designed to address the effects of anger on the body, behavior, and mind and how it can lead to violence. In these sessions, I observed African American Christian females who held strong convictions regarding the principles of the Word of God. In church, I found that females experiencing intimate partner violence often made excuses for their mates and were encouraged by other members to remain in their relationships. On many occasions, I was asked to pray about marriages qualifying as intimate partner violence for the female to cope with the situation. I became concerned that these African American females would not seek help due to their faith and misuse of scripture.

From my own experiences as a Christian, it was essential to keep my family together. My family beliefs were that we stay together till death do we part. However, I accepted Christ as my Lord and Savior early in my married life, which caused a separation in the relationship. My spouse then was not a Christian, and the things I did before becoming a Christian began to

change. It was not easy only for a short time because my husband, shortly after me, became a Christian. However, later learning more about the Word of God did have some impact on staying married. I, too, interpreted the scriptures as God hates divorce. Which meant divorce was not God's best for me. However, it was not just the Word of God but how others viewed me as a woman of God. It appeared that who I was as a Christian was far more important than the pain I might be experiencing as a person. How I represented Christ in the community seemed more critical and minimized what I might be experiencing in my home.

### **Problem Statement**

The problem is that IPV impacts faith-based communities and silences the voice of African American Christian females in the U.S. African American females are excessively influenced (43.7%) contrasted with White ladies (34.6%; Shaw et al., 2020). Many African American females depend highly upon their faith and church to guide them regarding intimate partner violence. However, insufficient attention has been given to religion's role in these females' lives (Tedder & Smith, 2018).

While proof shows that religious associations and pastorates are critical in averting and reacting to IPV among African American females, restricted exploration has already been undertaken on this subject. Most examinations have concentrated on African American females in church (Shaw et al., 2020). The U.S. National Domestic Violence Hotline 2015 recognized spiritual abuse as an under-discussed yet dangerous form of IPV (Davis & Johnson, 2021). Davis and Johnson (2021) noted that a significant body of work had been done to understand the intersection of religion and abuse (Bent-Goodley et al., 2015; Nason-Clark et al., 2018). However, many scholars note that gaps within the literature remain related explicitly to African American communities (Tedder & Smith, 2018; Valandra et al., 2019). Research in this area is

essential to synthesizing how religion affects African American Christian females who remain in violent relationships. It could also educate Christians and those who counsel (pastors/professionals) these females on effectively addressing this issue.

Previous studies have noted a general silence about and hesitancy to speak to IPV in religious congregations, which Houston-Kolnik et al. (2019) described as a holy hush. Houston-Kolnik et al. examined 20 Protestant Christian religious leaders regarding how they understood and responded to IPV to explore this phenomenon. This study enlightened how some religious leaders had occasions to respond to violence (2019). However, many religious leaders narrated that they did not have much opportunity or experience responding to IPV, possibly due to a lack of knowledge about IPV among religious leaders (2019). Some religious leaders may have heard about or witnessed IPV but judged it not counting as IPV (2019).

Houston-Kolnik et al.'s (2019) study also revealed how religious leaders' understanding of IPV fashioned and determined their response. For example, numerous religious leaders portrayed violence with more passionate or verbal types of cruelty as lower and types of actual maltreatment on the higher end as actual physical violence (2019). In addition, many viewed actual cruelty as crossing a line and bound to provoke a reaction (2019). In contrast, leaders expressed hesitancy in speaking about lower or more minor acts such as emotional or verbal violence, even though leaders recognized emotional or verbal violence as an initiator to more significant acts of violence (2019). Therefore, leaders articulated more necessity for intervening in more significant acts instead of taking earlier intervention or prevention measures (2019). Houston-Kolnik et al. reported that this approach might overlook warning signs, such as verbal aggression in public.

Additionally, it might communicate that some types of abuse, such as physical abuse, are more valid, important, or honest than other mistreatment of verbal, emotional, or periodic abuse (Houston-Kolnik et al., 2019). These discoveries highlighted a requirement for future examination concerning why particular kinds of violence are measured as lower when the level of earnestness crosses from lower to higher, which achieves a response from pioneers (2019). Also, what sorts of systems might assist with expanding comprehension of how fewer extreme types of cruelty are likewise IPV and need a reaction (2019)?

### **Purpose Statement**

This phenomenological study aimed to understand the study's central phenomenon for Christian African American females in Georgia. At this stage in the research, the central phenomenon is generally defined as the experiences of religious effects on African American Christian females and their decision-making regarding IPV in remaining or leaving a violent relationship. The theory guiding this study is social constructivism, introduced by two sociologists, Peter L. Berger and Thomas Luckman. The study's goal was to depend as much as possible on the stories of the members being examined.

Additionally, the aim was to examine the well-being of African American females' self-definition, religion's role in their lives, and their outlook upon it. Finally, the study investigated the relationship of social context factors, variables of stress defined by African American females, and the levels of social support experienced by these females as they attempt to narrate their Christian values and related special needs.

### **Significance of Study**

The significance of this study was examining the link between social context factors, variables of stress as defined by African American females, and the levels of social support

experienced by these females as they attempt to narrate their Christian values and relationship needs. History has shown and continues to indicate the Black church as a pillar of strength for African American families and communities (Bent-Goodley, 2013). Nevertheless, the role of the Black church in acting upon domestic violence has been conflicting and, at the least, inadequate (2013). Still, there are some gaps in the researched literature regarding African American females, religion, spirituality, and mental well-being (Taylor et al., 2014; Wiley, 2020). While findings attempt to answer how religion affects African American females, further studies are needed to evaluate psychological and physical well-being disparities, social and financial systems, and cultural understanding (2020). Additionally, the narratives of these females can promote support and improvement in best practices in working with African American females and addressing their mental well-being (Wiley, 2016, 2020).

### **Research Questions**

- **Research Question One** - How do African American Christian females describe their experiences with a violent partner?
- **Research Question Two** - How do African American Christian females describe the role of religion in their decision to stay in a violent relationship? (Use of scripture and understanding of scripture).
- **Research Question Three** - How do African American Christian females describe, if any, their counseling experiences for IPV experiences?

### **Definitions**

1. African American— Refers to both men and women of color, also referred to as Black.
2. Caribbean Black – African females originating from the Caribbean region are referred to as (Chatters et al., 2008).

3. Coping – Thoughts and behaviors acquired to handle internal and external stressors (Algorani & Gupta, 2021).
4. Help-seeking - The survivor's process to disclose, garner support, or secure legal services for partner abuse (Goodson & Hayes, 2018).
5. Intimate Partner Violence - This study's term intimate partner violence signifies violence that ensues between existing or past spouses, boyfriends, or girlfriends. It is interchangeable with domestic violence, abuse, mistreatment, and maltreatment. It consists of physical or sexual violence, stalking, and psychological aggression described by verbal, emotional, or psychological coercion or terrorization between sexual or intimate partners (Black, 2011; Kaufman et al., 2020).
6. Religion / Spirituality – The terms religion and spirituality are often used interchangeably; however, their meanings differ. Religion is considered communal, systematized, official, and concerned with people's lives. In addition, religion involves organized belief systems, habits, customs, and rites that are intended to assist in bringing individuals to an intimate relationship with God (Koenig et al., 2012).
7. Well-being – “The presents of the mind of an individual to understand their capabilities, ability to cope with daily life stresses, ability to work productively and effectively, and can contribute to their society" (Galderisi et al., 2015; WHO, 2004).

### **Summary**

Research shows that African Americans are unequally shown amid IPV suffering (Campbell et al., 2020; Hampton et al., 2003). Thus, the need for researchers, representatives, politicians, and mental health providers to be socially knowledgeable about the needs of African American women is vital to offer services, and mediation more effectively is essential (2003).

African American females are more inclined to endure the abuse until it becomes overwhelming. They will usually seek medical help from their doctor or through emergency services or informal friendship networks rather than traditionally turn to social, police officers, or government organizations for help (2003). This phenomenon is more life-threatening among racial-ethnic minorities, specifically African Americans, who are unequally affected (Centers for Disease Control and Prevention [CDC], 2018). Therefore, researchers must investigate the differences in the occurrence and frequency of IPV centered on race and ethnicity, particularly among African American females in the United States (Lacey et al., 2015).



## CHAPTER TWO: LITERATURE REVIEW

### Overview

Intimate partner violence (IPV) is described as physical, sexual, psychological, or emotional violence or threat of viciousness perpetrated by a current or former partner (Azziz-Baumgartner et al., 2011). In the United States, the National Intimate Partner and Sexual Violence Survey surveyed over 40,000 individuals across the nation and showed that 37.3% of women and 30.9% of men had suffered some form of IPV (Houston-Kolnik et al., 2019; Smith et al., 2017). Portrayed as a "heavenly quietness," past research has noticed an overall hush about and hesitance to address IPV in spiritual assemblies (2019). However, IPV is not exempted from Christian society. Shaw et al. (2020) stated that IPV influences all populations, irrespective of race, schooling, or financial status. Shaw et al. further noted that African American women are disproportionately influenced by IPV (43.7%) more so than their Caucasian counterparts (34.6%).

Research has shown that IPV in African American communities has reliably distinguished higher rates than their counterparts (Bredling et al., 2014; Gillum, 2019). It is extensively recognized that African American females who experience challenges in life differ from other women and are expected to endure life stressors (Chisale, 2018). The socialization of females into self-hushing by religion has muddled ministerial mediations for the survivors of aggressive behavior in the home, especially inside the marriage setting (2018). According to Bryant-Davis et al. (2011), many African American women endorse social support and religiosity to cope with life hardships and manage these stressors. Subsequently, mental health problems are at high risk.

Further exacerbating this theory is African American men's perception of strength as a desirable trait for an ideal mate (Perry, 2013). However, that strength would be in service to the men (2013). Johnson and Loscocco (2015) noted that most males described a strong woman as someone who could support them. In addition, these men regarded a supportive partner who would be loving, agreeing, and able to look past their weaknesses (2015).

Extraordinary contributing elements, like encounters of bigotry, compound the experience of IPV for African American females (Gillum, 2019). This perplexing snare of exploitation is related to a large group of substantial mental and actual well-being outcomes, social and monetary results, and expanded commitment to high-hazard practices for these females (2019). While investigations of protective and resiliency factors among African American women have been studied, IPV among Christians has been understudied (Zust et al., 2021). According to Zust et al., religious beliefs hold a significant role in the lives of victims of domestic violence, such as sufferers who find power in their faith. They often decide to survive the violence at all expenses to keep a family or a marriage together rather than trade off their faith by leaving (2021). Dollahite et al. (2018) proposed a theoretical framework for a dynamic religious and relational duality structure. In other words, when accepted in families, religion involves several foundational mindsets and rituals that result in generational conflicts, anxieties, stressors, and contradictions, such as forbidding Christians to get a divorce. This phenomenon of exalting the institution of marriage above the needs of abused women is not specific to the Black church. However, the clergy's misdirection, compounded by African American women's over-reliance upon their church (Lacey et al., 2011; Waller et al., 2021) and religious resources, have had significant adverse implications on their ability to secure crisis intervention (Bent-Goodley & Brade Stennis, 2015; Violence Policy Center, 2020; Waller et al., 2021).

McMullin et al. (2015) noted that a significant criticism of the role of religion in domestic violence relates to the solid male-controlled ideology of some Christian faith traditions that serve to 'keep women submissive' and may act as a root cause of violence intertwined with other identified causes. Research also shows that the number of IPV sufferers may be underestimated in some churches and infrequently addressed from the pulpit (Bent-Goodley, 2013). In addition, they sometimes provide potentially harmful interventions (i.e., couples' counseling or lack of safety risk assessment; 2013).

## **Related Literature**

### **Theoretical Framework**

Theoretical frameworks in qualitative research link parts of a paradigm and present a perspective channel to view the story (Anfara & Mertz, 2014). On the other hand, Creswell and Poth (2018) stated that theories offer a general description of what the researcher intends to find or a perspective on understanding the needs of participants and communities in a study. Given that this study focuses on the experience of African American Christian females, the effects of religion on their intimate relationships, and decision-making, the researcher was grounded in four theories. Each theory is used in this study to view the perception of self-value and how females conceive the role of religion in their intimate relationships as Christian African American females. The first theory, religious coping, discusses the importance and the role it plays in the lives of African Americans. The second theoretical foundation is the silencing self, which will examine the experiences of race and racism and how they intersect with African American females in intimate relationships. The third theoretical framework is socialization which discusses the social structures contributing to violence against African American females in and out of the home. Lastly, the ecological system theory discusses environmental effects on

behaviors and establishes why individuals may inversely behave when behavior is compared in the presence of others.

### **Religious Coping**

The religious coping theory is built on the foundational assumption that human phenomena are multifaceted and recognized through the ongoing process of relationships between individuals and life situations in a larger social setting (Abu-Raiya & Pargament, 2015). This phenomenon has been shown through research to be a global phenomenon. Abu-Raiya and Pargament found that many people with diverse religious practices rely on their religious and spiritual teachings, faiths, and customs to cope with life's complications, trials, pressure, and troubles. Individuals may find meaning during distress and confusion and connect to sacred objects through their religious systems (2015). Religious coping appeared to help people accomplish or relinquish control, find comfort, attain intimacy, and change their perspectives (2015). This premise posits that the use of religious control does not guarantee a healthy response. Abu-Raiya and Pargament discovered that some forms of religious coping in Christian samples connected with desirable results such as satisfaction with life, optimism, and spiritual well-being. Other forms of religious coping were linked to undesirable well-being resulting in poor health, depression, and anxiety (2015).

The study of religious association among African Americans is significant due to the disproportionate impact on their overall well-being (Holt et al., 2014). Research has shown relatively high levels of commitment to religion among African Americans and the vital role religious coping plays in their well-being. The Pew Research Center (2015) reported that African Americans are more likely to identify as Christian in the United States than other Americans. African Americans who believe in God were an absolute certainty of 83%, and 75% consider

religion necessary in their lives. In addition, 75% of African Americans reported praying daily (2015). Given the importance of religion in the lives of African American, counselors must consider how these beliefs affect coping methods (Harris et al., 2019).

### **Silencing-Self Theory**

Self-silencing is the relational strategy where women silence certain feelings, thoughts, and actions to keep intimate relationships, escape any relationship confrontation, and maintain intimacy and safety. Evidence supports the assumption that dependence on dominant others whose acceptance and support are valued shows a level of uncertainty (London et al., 2012). It is not uncommon for individuals to try to prevent rejection by silencing aspects of the self and inhibiting behavior that might put at risk their acceptance (2012). In self-silencing, females are apt to silence their thoughts and feelings and ignore their own needs while they uphold the significant needs of others. This theory has clarified the connection between gender and health (Maji & Dixit, 2019). In addition, research related to the theory has dramatically increased, indicating that this might somewhat explain the significant gap in the prevalence of specific psychological disorders like depression in females (2019).

The theory also speaks to social situations, whereas interpersonal relationships can influence a female's schematic response, inducing her vulnerability toward depression (Abrams et al., 2019). Likewise, formal or informal sharing outside of the home or seeking help influences poor mental well-being. London et al. (2012) stated that cultural norms might influence IPV reporting, especially for African American females who have been socialized to sacrifice themselves. This premise offers consideration of the Strong Black Woman (SBW) Schema and associated silencing behaviors such as quieting the self and externalized self-perceptions, which could also be related to depressive symptoms among Black women (2019). Donovan and West

(2015) found that depressive symptoms among Black women who endorsed SBW schema were from moderate-to-high levels and increased the correlation between stress and depressive symptoms compared to low levels of SBW endorsement. However, self-silencing is not independent of the social structure but is firmly rooted in the gender norms prescribed by the culture (2019). This premise emerges from an attempt to provide a gender role marked by passivity, body shame, fear and vulnerability, and niceness (2019).

### **Sociological Theories**

In contrast to individual pathology, sociological theories of IPV attempt to explain violent conduct as a product of social institutions (Lawson, 2012). Although psychologists explained IPV as an individual pathology, social theories express IPV as conflict within the family, best understood by examining social structures contributing to violence (2012). This expression is best understood by reviewing social structures contributing to violence, including the frameworks, environmental, trade/social control hypothesis, asset hypothesis, and subculture-of-violence theories (2012). In addition, social theories were inclined to view intimate partner violence from either a feminist perspective or a general family violence perspective to examine these structures.

The family violence viewpoint also asserts that most violence is not the result of individual pathology but is a normal part of family life in most societies, including America (Lawson, 2012). For example, it is customary for African Americans to keep family matters private within the home and not share them with anyone outside (Bent-Goodley, 2013; Chhikara et al., 2013). In this perception, the unit of analysis is the family rather than the individual or the couple (2012). Furthermore, partner violence is just one expression of conflict within the larger family structure (2012). Therefore, the key to comprehending intimate partner violence is

understanding what makes family members use violence to respond to conflict for those utilizing a family violence perspective (i.e., feminist perspective, intimate partner violence, etc.; 2012).

The feminist perspective of intimate partner violence expresses males' gender-based domination of females (Lawson, 2012). This theory argues that wife abuse connects to the patriarchal institute of society embedded in the practices of behaviors and attitudes toward females (e.g., utilizing generational norms to control females; 2012). They believe IPV is not an isolated or family problem but a deeply embedded social problem that must speak to social change (Ali & Naylor, 2013). A social phenomenon, determined by the patriarchal structure of most societies, forces females to stay submissive through physical, psychological, sexual, and economic abuse as control tactics and permits coercive practices such as prostitution and forced sex (2013). Brice-Baker (1994) argued that although we live in a patriarchal society, the generalizability of the theory to African Americans is limited (2012).

The theoretical divide between feminist and family violence perspectives is so distinct that even deciding on the terminology for discussing the problem is laden with meaning (Lawson, 2012). The various terms for describing the problem reflect their underlying theoretical assumptions. For example, the terms wife abuse, wife-beating, and violence against women reflect a theoretical choice to frame the problem in gendered terms that expose the fundamental assumption that gender is central to the problem (2012). On the other hand, spousal abuse, marital violence, family violence, and even domestic violence reflect the theoretical assumption that the problem is essentially gender-neutral and should be studied and discussed in gender-neutral terms (2012). In other words, gender should play no part in social roles and structures regarding IPV. The feminist perspective believes that the disproportion of power is the causation of relationship inequality.

This study utilized the term intimate partner violence (IPV) as the primary term to discuss the difficulties of violence between males and females within marriages or other intimate relationships. IPV was an appropriate choice to maintain objectivity and avoid absolute agreement with any theoretical framework. Additionally, IPV avoids openly endorsing a feminist perspective while focusing on the male/female partner relationship as the individual unit of analysis, ensuring attention apart from the larger concept of family violence.

### **The Ecological Theory**

The ecological systems theory asserts that human development is influenced by different environmental systems (Sincero, 2012). This theory formulated by Bronfenbrenner (1979) aids professionals in comprehending why individuals might show different behaviors when the behavior is compared to the presence of other family members at school or work (2012). For example, African Americans are socialized differently to preserve and maintain a positive family image in the community, keep affairs private, and not share them with anyone outside the home (Bent-Goodley, 2013). Another example would be children seeing violence between parents and caregivers or experiencing childhood physical abuse associated with subsequent partner violence (West, 2012). These are learned generational behaviors passed from one generation to another.

Pokharel et al. (2020) used the ecological model developed by Bronfenbrenner to examine the impact of the ecological environment on child development. Bronfenbrenner's (1979) model of the four levels of environmental influence, microsystem, mesosystem, ecosystem, and macrosystem, believed they were embedded within each other, impacting the development of human beings moving from innermost to outermost each level (2020). The dominant theory is the bond between a person and the residents of their setting and the outcome of the interrelationships as determined by changes in the person's behaviors (Pokharel et al.,



2020; Richard et al., 2011). Applications of the ecological model have mainly been utilized to study the integrated effect of environmental factors with other influences on health-related behaviors (Fisher, 2008; Pokharel et al., 2020). Analogously, a complex interplay among individual and environmental factors may determine the outcome of disclosing or silencing women who experience IPV (Alaggia et al., 2012; Pokharel et al., 2020).

Among African American women, IPV develops within pervasive and continuous oppression and abuse (Finfgeld-Connett, 2015). Many African American females feel trapped in the oppression and abuse cycle due to the inability to make a change. Some barriers elicit and sustain IPV even with personal and interpersonal inspiration and support (2015). The ambivalence of others, fear, mental health problems, and negative perceptions of helping services are barriers to making change (2015). These included unusual events inciting inexperienced attempts to resolve crises, which initially rotated the problem (2015). Improvement can occur by accessing holistic services for African Americans, whereas an emergent process can be developed to break this unproductive cycle (2015). Establishing trust and offering holistic, nonjudgmental services fosters women's hope for a safe environment and personal growth for themselves and their children (2015).

### **Spirituality and Religious Beliefs of IPV Suffers**

Numerous African American females reportedly depend upon the church community, friends, and family for support, while only some seek help from organizations supporting women who encounter IPV (Bent-Goodley, 2013). However, these religious institutions may not be well-informed about domestic violence or appropriately trained to respond to domestic violence (2013). Therefore, females may receive mixed, harmful, or no messages (2013). Subsequently, a possible implication for how a female recognizes and processes her sense of spirituality, prayer

life, and belief in a Higher Power to help change her situation may be affected (2013). Thus, African American females' dependency on unauthorized systems and religious institutions as a coping mechanism can place them at significant risk for violence and lethality (2013).

Iverson et al. (2013) noted that African American females encounter IPV at higher rates resulting in more severe and lethal injuries and mental health problems than their Caucasian counterparts. Remarkable tributary factors, like encounters with prejudice, heighten the experience of IPV for African American females (Gillum, 2019). This perplexing trap of exploitation is related to a large group of substantial psychological and physical well-being results, community and financial outcomes, and expanded commitment to high-hazardous practices for these women (2019). These various situations are blockers for African American females from pursuing support.

The significant awareness of the position held by religion in the lives of men who have behaved harmfully against an intimate partner is scarce (Davis & Jonson-Reid, 2020). However, some empirical studies have explored the role of religion in correlation with IPV. Numerous investigators have focused on the general relationship between religion and domestic violence, theorizing that religious involvement could license or lessen the likelihood of perpetrating IPV (Davis, 2015). Davis offered the argument that this premise is increasing as evidence arises in the literature. Given that religious ideas and involvement could serve as a protective factor, encouraging loving behavior and anti-violence is thought to be supportive of averting committing IPV (2015).

On the other hand, another viewpoint has suggested that religious involvement could facilitate the controlling or dominating behavior of females by males, given that religious ideas encourage insolent gender- roles (Davis, 2015). The point is that abusers can and do use religion

to license their behavior and maintain a positive self-image, regardless of which perspective is arguably presumed (Svanemyr et al., 2015). Such is the case when religious beliefs serve a central role in enabling violence instead of preventing this behavior (Svanemyr et al., 2015).

**Helpful or Harmful.** Researchers continue to argue whether religion/spirituality is harmful or helpful. Some scholars investigate the benefits between religion and families, while others focus on how religion can be toxic to individuals and families, producing conflicting outcomes (Dollahite et al., 2018; Marks & Dollahite, 2017). Social science has shown evidence that religion can be both helpful and harmful to individuals, couples, families, communities, cultures, and nations (Burr et al., 2011; Dollahite et al., 2018, 2019; Stark, 2012). The effects of religion and spirituality are so powerful and divergent, which is believed to be why religion results in both good and harm (2018). If they were only powerful but not divergent, religion would be helpful or harmful but not both (2018). If the effects of religion were divergent but not robust, its minimal influence would not warrant serious attention (2018). Theories considering why religion can help and harm may provide a more balanced perspective (2018).

Numerous principles might prompt religion to become hurtful, including applying religion in youthful or childish ways, radicalism, zeal, or applying strict thoughts when and where they do not helpfully apply (Dollahite et al., 2018). For example, keeping marital commitments is relationally valuable and respected by many faith communities. However, it illustrates a religious principle that could be harmful if not used beneficially (2018). For example, when a person who has no fear that their spouse will seek divorce uses that unwavering commitment as a reason not to attend to the spouse's needs or grow as a partner, this commonly beneficial relational aspect of religion can become harmful (2018).

Another aspect is that religion and mental health problems, such as irrationality, can cause marital problems (Dollahite et al., 2018). Research indicated that irrationality and religiosity could render individuals vulnerable to endorsing maladaptive beliefs about a threat, personal responsibility, and controlling unwanted intrusive thoughts (Inozu et al., 2020). Accordingly, these obsessive beliefs can trigger guilt and precise punishment strategy in mental control (2020). It is argued that damage can also occur when religiosity is combined with other mental illnesses and personality disorders such as pedophilia, obsessive-compulsive disorders, and family dysfunction like enmeshment (2018). Religious beliefs, practices, and communities probably have divergent effects depending on the age, gender, culture, personality, temperament, political leanings, and socioeconomic status of the religious practitioner (2018).

### **Why Do Women Leave/Stay in Abusive Relationships?**

There could be many reasons females in violent relationships do not leave their abusive male companions. For example, some females might feel humiliated about separation and being single. Therefore, these females would prefer to project the picture of a happy, secure, and utilitarian relationship, despite the potential for other maltreatment from their companion (Lacey et al., 2011). Research has found that most females who left only remained away for under a month (2011). Others contemplating leaving the abusive relationship would not act because it conflicted with their Christian morals (Pokharel et al., 2020). Surprisingly, the study found that women of color with relatively higher social-economic status were more likely to remain in abusive relationships (2011).

Cravens et al. (2015) divided reasons for leaving or staying in an abusive relationship into internal and external groups. Internal inhibitory reasons are beliefs about self and limiting situations (2015). Such views may be rational and precise. For example, she fears that an

intimidating partner will make her life difficult or fight for custody of the children (Cravens et al., 2015; Dollahite et al., 2018). However, distorted beliefs, such as negative beliefs about self-worth or minimization of the problem, may also occur (2015). These perceptions are common for those who live with a psychologically controlling and degrading partner (2015). Research indicated that controlling behavior alone often is the first expression of abuse (Domenech del Rio & Sirvent Garcia del Valle, 2017). In controlling and violent relationships, psychological abuse is commonly discovered and encourages self-doubt, self-blame, and feelings of worthlessness or depression (Cravens et al., 2015; Whiting et al., 2012). In addition, the decision to leave an abusive relationship can be dangerous for females, with a greater possibility of severe injury and death connected with attempts to escape (2015).

External inhibitory influences comprise elements built into the context of the relationship, making it difficult to leave (Cravens et al., 2015). Limited financial resources are a typical example of female victims (2015). Often, this results from the perpetrator isolating them from employment opportunities or because they have lost jobs due to the inability to go to work because of bruises or injuries (2015). Other external reasons include threats to hurt or take children away (2015). The presence of others in the household was also associated with Black females' decision to stay in violent intimate relationships (Lacey et al., 2011). This premise supposes that the physical presence of others in the household may alter or reduce levels of violence (2011). It is also difficult for many isolated females to unite with resources such as therapy, legal, or protective services, particularly for females with financial limitations (2015). There may also be social stigmas or interpretations of religious leaders that may pressure her to remain and work things out (2015). The decision to leave an abusive partner is more of a process than an isolated event. However, the factors related to this process also fit into internal and

external categories (2015). Leaving an abusive partner is more of a process than an isolated event of external influences. However, the aspects related to this process can apply to internal and external categories (2015).

**Roles That Fuel IPV.** Some females silently experience IPV for a considerable time. According to Pokharel et al. (2020), ecological factors at each level work together to strengthen this silence. At the microsystem, self-blame, concern for family, and concern for children was the most frequent factors supporting females' silencing regardless of their native land (2020). However, macrosystem factors followed in the second position, aggravation of societal expectations, normalization of violence, religious values, and immigration policies (2020).

Furthermore, the knowledge of those who provide services for these factors is vital to facilitate female disclosure respectfully and empathetically. Service providers should avoid the temptation to shame or guilt the victim into leaving their partner (Pokharel et al., 2020). Although these are normal responses to painful situations, when this occurs in a therapeutic setting, the clinician's interventions become more about managing their anxiety and less about helping the client (Merchant & Whiting, 2014). Thus, clinicians must avoid minimizing the danger of leaving by raising awareness of the victims' attitudes toward silence and understanding the various factors related to the leave/stay decision (2020).

### **Safety is a Crucial Objective for Abused Women**

Safety is crucial for abused females who experience IPV. However, they are often unaware of obtaining resources or what services are obtainable (Eden et al., 2015). Subsequently, most do not access legal services, suggesting missed opportunities to reduce exposure to IPV and its negative health consequences (2015). The COVID-19 pandemic could also exacerbate this problem by requiring females to quarantine daily with their violent and abusive partners with

restricted access to those who might provide care and assistance (Mazza et al., 2020). COVID-19 pandemic-imposed challenges include dealing with the fear of the disease, changing the regular household routine, and increasing time with the partner (Moreira & da Costa, 2020). In addition, isolation from other people outside the household and economic crises can significantly contribute to increased stress in a previously strenuous relationship, triggering IPV episodes (Moreira & da Costa, 2020). In many ways, stay-at-home orders and social distancing could assist female residents in becoming one of the most unsafe places for IPV victims (Moreira & da Costa, 2020). The social procedures executed to diminish the spread of COVID-19 and the reconfiguration of medical care administrations together with IPV can affect the mental well-being of victims (Gulati & Kelly, 2020).

### **Seeking Spiritual Help for IPV**

Females seeking help for IPV might seek out numerous sources. Research indicated that 75% or more IPV survivors disclose their abuse encounter with a comrade, family member, religious leader, or some other form of informal support (Edwards & Sylaska, 2013). Many also seek help from traditional service providers such as healthcare providers or law enforcement (2013). However, many African Americans look to the church community for help despite IPV victims' challenges and continue to seek help in the church.

Studies have shown that IPV survivors identify several problem areas encountered as they seek help from church members and leaders (Drumm et al., 2018). Blaming victims, meeting theological barriers to safety, and lacking referrals to needed victim services were some experiences of survivors. The research discovered that, specifically, IPV victim-survivors experienced blaming of the victim by both church leaders and members (2018). Specifically, church leaders often recommend that the victim-survivor change their behavior to prevent the

spouse's anger (Behnke et al., 2012; Choi, 2015). Therefore, the victim-survivor seems to instigate the problem by provoking angry outbursts or behaving selfishly (2018). Additionally, the examined pastors suggested that the victim-survivor should help their abusive spouse (2018).

A female might feel guilty about getting her partner into trouble. By encouraging forgiveness of the abusive partner, church leaders can encourage females to keep silent about abuse (Anderson et al., 2012). One study reported that participants revealed that some religious/spiritual communities connected shame to violence by suppressing the topic (Braganza et al., 2021). This premise denotes that religious/spiritual communities could cause survivors both harm and offer help. However, current research suggests it is crucial to recognize religious/spiritual communities as a possible avenue of support for survivors due to the vital link, advocacy, leadership development, and healing it promotes (2021).

Gezinski et al. (2019) noted that religious leaders supported faith-based resolutions to IPV, or a "faith first" approach. Additionally, they placed regular prayer and church attendance over the victim-survivors safety (2019). However, studies have indicated that religious leaders did not understand IPV trauma and even bypassed larger systems intended to protect survivors (2019). Subsequently, religious leaders needed the training to respond to IPV trauma-informed appropriately (2019). Although religious leaders need the training to respond to IPV in a trauma-informed method with appropriate education, religious leaders can partner with survivors and domestic violence services organizations (2019).

### **Training Help For IPV**

Two pervasive phenomena across many African American communities are violence against women and religious participation (Tedder & Smith, 2018). First, as stated previously, African American females experience intimate partner violence higher than most racial groups in



the United States. However, little attention has been given to Black clergy leaders' response to intimate partner violence against African American females, considering the high dependence on their faith and church to direct their experiences with IPV (2018). In addition, past research has noted a general silence about and hesitancy to address intimate partner violence (IPV) in religious congregations, defining it as a holy hush (Houston-Kolnik et al., 2019).

Houston-Kolnik et al. (2019) examined 20 Protestant Christian spiritual leaders responding to this finding. The goal was to uncover some difficulties, pressures, and intricacies that might obstruct breaking this silence. Twenty Protestant Christian spiritual leaders were interviewed regarding how they understood and responded to IPV (2019). The study revealed that some religious leaders in this sample were met with challenges, tensions, and complexities, possibly hindering overcoming challenges to speaking and responding to IPV (2019). Although IPV extends well beyond physical violence, intimate partner violence and abuse are often conceptualized in four forms: physical, psychological, economic, and sexual (Stylianou et al., 2013). Houston-Kolnik et al.'s study revealed that religious leaders comprehended violence on a scale of less to more severe and connected the need for a type of response based on the level of violence. Reportedly, religious leaders noted an apprehension throughout the examination, a pressure between their leadership role and responding to IPV (2013). However, participants acknowledged the need for higher levels of training, links to formal service providers, and other IPV resources or organizations within the community (2013).

A qualitative study revealed that African American clergy leaders understood their roles when responding to intimate partner violence against women, primarily spiritual advisors, pastoral care/counselors, compassionate leaders, and uninformed responders (Drumm et al., 2018). Drumm et al. identified themes suggesting that although African American pastors

acknowledge the prevalence of intimate partner violence within their churches and are trained in pastoral counseling, they lack the knowledge and training to respond appropriately to intimate partner violence. In addition, Bent-Goodley et al. (2015) noted that while clergy leaders may be the first responders to IPV against females, their limited training in this area may put females in further danger. The results of these studies can benefit clergy leaders in understanding the basics of intimate partner violence and identifying gaps in their practices with abused women.

### **Silencing Intimate Partner Violence (IPV)**

The motives behind IPV are complicated, at times vague, but genuine. Silencing regarding aggression could encourage the length of IPV experienced by females, making an everyday environment distressing for an extended term and possibly influencing females toward numerous depressing related conditions (Pokharel et al., 2020). Research indicated that cultural and traditional norms, religious beliefs, and female dependency on males were either attributed to or found to be a primary reason for IPV silence (Mannell & Jackson, 2014; Owusu, 2016). While investigating factors influencing females, Pokharel et al. found that the macrosystem (e.g., societal expectations, normalization of violence, religious values, and immigration policies) was in the second position. Out of the four levels of ecosystems, the macro system was found to be the most potent determiner of silencing females (2020). While these motives subject females to suffer IPV and be silent in agony and quietness, this levied the silence to be influential in activating added misuse simultaneously while strengthening family and community acceptance of maltreatment in the home towards females (2016).

Religious and spiritual leadership advice have complicated the socialization of IPV survivors into self-quieting (Chisale, 2018). As a result, African American females have been socialized to be quiet, not ask for help, to handle their problems, and to be strong (Ritchie, 2017).

This socialization of African American females has been designed by racism, class and gender inequality, and limited access to needed community support and resources (2017). According to Anyikwa (2015), these intersecting factors hinder African American females' help-seeking strategies. In investigating the perceived barriers to help-seeking in response to IPV, Lelaurain et al. (2017) recognized its influence on numerous factors that differ in nature, like violent personalities, sociodemographic factors, patriarchal norms, and values. This investigation suggested that these factors should be considered as contributions versus independently (2017). Therefore, any attempt to understand help-seeking factors and their overlapping should conform to the social environment and be based on integrative methods (2017).

Chisale (2018) composed an intercultural way to deal with peaceful consideration and applied the hypothesis on quietness. This investigation was done to assist in eliminating this silence while challenging spiritual caretakers to examine for answers to silencing the victim in the framework of IPV, both in marriages and committed relationships (2018). The discoveries revealed that females are compelled to quiet the self in settings of abusive behavior at home by not talking about maltreatment, especially in marriage (2018). This study is not isolated in suggesting eliminating IPV silence. Zust et al. (2021) suggested the need for clergy to eradicate the silence regarding domestic violence in their congregations and speak to the misunderstood social and religious beliefs that may attach a victim to the violence.

In research, hushing oneself is defended by people who inadvertently translate Biblical scriptures addressing marriage (Chisale, 2018). Further analysis revealed that sharing biblical scriptures was very important to clergy when interacting with abused women (Tedder & Smith, 2018). Chisale's research affirmed that Proverbs 21:9 was one of the scriptures utilized to

legitimize hushing oneself. Another passage quoted supporting this teaching is First Corinthians 7:10–11 (Ademiluka, 2019).

Nigeria, like other countries, has experienced a dangerous rise in IPV (Ademiluka, 2019). One of the most critical reasons among many Christians who suffer IPV to remain in their marriages is the principle of the Bible that divorce is forbidden (Zust et al., 2021). Ademiluka's research found that when understood in its specific framework, First Corinthians 7:10–11 permits divorce and remarriage because of sexual immorality and allows a partner whom the mate abandoned to remarry. However, it can be realized from the text that the church and the affected Christians should enable the specific situation to conclude the correct reaction (2019). In cases where IPV threatens life, divorce should be advised, and the partners are allowed to remarry if that is their wish (2019).

Owusu (2016) provided details of research on abusive behavior in the home and considered its contributing powers to silence, maintain, and reinforce males' brutality towards females. Such quietness sustains the hazard, especially in social orders where widespread social practices overwhelm essential fundamental liberties (2016). The research was directed in Accra, the capital of Ghana, where 20 females and four key sources were shared in the semi-organized comprehensive interviews (2016). Social and conventional practices, strict convictions, and the monetary reliance of females on males were the principal explanations behind quietness instead of defying the maltreatment (2016). Although, as noted earlier, these reasons impacted females to persevere through aggressive behavior at home and be quiet in torment peacefully. This force of quietness was also unique, tolerating additional maltreatment (2016). These reasons also worked simultaneously in building up the family and local area resistance to abusive behavior at home towards females (2016). Owusu noted that females should be enabled to stand up,

especially the thought that the power of quietness is so solid that it is liable for setting off additional quietness and supporting it. Global data on the average regarding the effects of females suffering before seeking help for IPV is not precise, and further research in this area is imperative (Pokharel et al., 2020).

**Self-Silencing and Coping.** Women affected by violent experiences may use silencing as a coping mechanism (Gammeltoft, 2016). Being silent means the voice is absent and may be a form of power, voluntary or, on the other hand, signifies loss of control (Chisale, 2018). In conservative situations such as religion and traditional contexts, silence is used as a form of respect (2018). Females are taught to be respectful by not being outspoken, particularly to their elders and men; hence, they resort to self-silencing in contexts of abuse (2018). Research indicated that Christian married women often silence themselves to protect their husbands' dignity and their own. Gammeltoft identified two categories of silencing, unconscious and intentional. Unconscious silence hides that an individual attempt to dispose of an out-of-mind consciousness, and deliberate silence occurs when a person is deliberately in control (2016, p. 429). Many times, terminating the silence of IPV is attempted with time. Numerous strategies are employed by women who submit to lessen the consequences of or end the violence (O'Doherty et al., 2014). Subsequently, the affected females might endure IPV for a considerable time before disclosing the experience and seeking help (Garcia-Moreno et al., 2006). Pokharel et al. (2020) argued that, on average, global data regarding affected women suffering before seeking help for IPV is not precise, and further research in this area is imperative.

### **IPV and Gender-Based Violence (GBV)**

In the United States, African American females are impacted by racism and sexism, a form of GBV at all stages of life (Szymanski & Lewis, 2016). However, African American

females have a resilient history during extreme hardships. Given their subordinate racial and gender status, African American females have survived extraordinary traumatic experiences. Research revealed that in 2018, at a rate nearly three times higher than their Caucasian counterparts, African American females were murdered by males (2.85 vs. 1.03 100,000; 2016). Studies show that of African American females killed by a known offender, 61% were current or former spouses, cohabiting partners, or girlfriends (2016). An African American female murdered by a spouse is twice as likely as for Caucasian woman (Petrosky et al., 2017; Smith et al., 2010). It has been proven that African American females experience a rate of gender violence that is higher than other races; national studies disaggregate victimization rates by race (2011).

The impact on females trying to defend themselves in the criminal justice system from all forms of gender violence and ending up being punished rather than protected by it is distressing (Ritchie, 2017). However, African American females experience institutional violence disproportionately. The survivor may encounter institutional violence while seeking services from traditional agencies (Fitzgerald, 2017). Discrimination may be experienced in police treatment of having their IPV and sexual assault minimized or facing police officers with victim-blaming attitudes (Decker et al., 2019; Richie & Eife, 2021).

Investigations of criminalization policies and practices have provided a more qualitative analysis of African American females regarding arrest and incarceration (Office of Violence Against Women [OVW], 2017; Winant, 2016). Ritchie (2017) noted that laws and policies that depend primarily on criminalization rather than seeking the root causes of social problems target African American males and females. Research on the criminalization of poverty, health, psychological issues, and parenting challenges is an example of this premise (Gustafson, 2013).

There is scant knowledge about protective factors, although the risk factors associated with IPV among African Americans have been well-documented (West, 2012). For instance, among African American female survivors of IPV, higher levels of spirituality and more significant social support served as protective factors associated with resilience (Howell et al., 2018). This discovery shows the need to study resilience, described as the ability to cope with an attack of stress and hardship, rebound from it, or harden oneself against it such that one's ability to function returns to approximately normal levels (Jackson et al., 2018). However, the meaning-making process is marked by profound growth and results from experiencing post-traumatic growth because of domestic violence, indicating that some African American survivors are more resilient than others.

### **Mental Health Problems and IPV**

Severe physical intimate partner violence, discrimination, and minor neighborhood problems are significant predictors of African American females ailing mental health (Lacey et al., 2015). IPV has been recognized by research to influence the emotional wellness of survivors negatively and may affect the female's choices regarding partners, tending to remain with partners with a vast risk of IPV perpetration (2015). Studies have generally focused on the psychological wellness effect of IPV versus thinking about distinct types of cruelty (Lagdon et al., 2014). Primary discoveries proposed that IPV can expand negative impacts on the psychological well-being of sufferers in correlation with people who have never experienced IPV or those encountering other horrendous mishaps (2014). The main discoveries were the relationship between IPV encounters, discouragement, post-traumatic stress, and tension (2014).

Although discoveries affirm past perceptions that the seriousness and degree of IPV sincerity can augment psychological well-being manifestations (2014), the impact of mental

cruelty on emotional well-being is more noticeable than initially suspected. IPV severely threatens children's emotional, psychological, and physical well-being, especially chronic violence (Sipilä et al., 2018). Individual contrast, such as sexual orientation and childhood experience of cruelty, also raised IPV hazards and influenced emotional wellness results in diverse ways (2014). For example, the association between witnessing violence and physical IPV victimization, in contrast to witnessing violence and psychological IPV maltreatment between two parents, was found to fully mediate compulsive anger-related use for males and females (Iverson et al., 2013). Therefore, mental cruelty from abusers may cause a more severe type of IPV that can influence the emotional wellness of survivors (2013). Additionally, experiencing beyond one type of IPV can increase the seriousness of results (2013). This premise indicates that investigators should view IPV as a multi-dimensional experience (2014).

### **Mental Effects of IPV**

The worsening of physical and mental health and lower quality of life of women who experience IPV is evidenced by 2005 WHO multi-country study showing that IPV is associated with unaffected women (Pokharel et al., 2020; Rees et al., 2011). Furthermore, research shows that females who experience IPV visit the healthcare system more often than unaffected women (Bonomi et al., 2009; Pokharel et al., 2020). Therefore, clinicians must comprehend that physical and mental health status worsens as perceived danger increases (Stubbs & Szoeki, 2021).

There is proof that PTSD, disappointment, and alcohol misuse are comorbid typical mental health problems and that a bidirectional relationship exists between melancholy and IPV in specific settings (Machisa et al., 2017). Moreover, the worldly course in the relationship between alcohol misuse and female IPV encounters from various examinations is indistinct (2017). Machisa et al. examined a group of females from the universal populace to study the



relationship between childhood misuse, mental medical illness, and IPV; and revealed the fundamental pathways between them. Studies found that half of the females experienced IPV during their life and 18% experienced IPV in a year prior to the study, 23% of females were discouraged, 14% hit heavy drinkers, 11.6% had PTSD indications, and 86% of females had encountered some children misuse (2017).

Sadness, post-traumatic stress disorder (PTSD), and heavy alcohol use correlate with emotional wellness, the impact of child misuse, and IPV encounter among females (Machisa et al., 2017). Developing information shows the potential interposing role of mental medical illness in the relationship between child misuse and IPV (2017). Caetano et al. (2017) posited that the role of alcohol in partner violence might be described by people's hopes that alcohol will have a disinhibitory effect on behavior or by alcohol's direct physiological release of inhibitory behaviors. However, the presence of drinking in a partner-violence incident does not automatically mean that alcohol is the cause of the violence (2017). Therefore, it is essential to be aware that violence frequently happens in the absence of alcohol (2017).

Low socioeconomic status and socio-environmental influences have been known to increase the risk of drinking problems and illicit drug use, heightening violence risk (Lacey et al., 2015). Machisa et al. (2017) studied sociodemographic factors correlated with ongoing IPV in multivariate models, and despondency, PTSD, and heavy alcohol use were other impacts of late IPV. Lastly, the different variables related to late IPV experience included relationship control, having an accomplice who consistently devoured alcohol, and encountering other horrendous life encounters (2017).

Lacey et al. (2015) evaluated the prevalence of mental health disorders among U.S. Black females (e.g., African Americans, Caribbean, and Black people), focusing on social and other

background factors such as neighborhood characteristics, perceived unfairness, and IPV. This observation found commonly high velocities of the stressful issue (23.7%) and personality problems (16.7%) among all U.S. Black females, compared with other mental health issues in this ethnic group (2015). Also, high velocities of self-harm ideation were recognized (12.7%; 2015).

### **Factors Associated with IPV Relationships**

It is not uncommon for IPV perpetrators to facilitate intimate partner violence via technology such as Twitter and Instagram. Studies have shown evidence of IPV being enabled by a current or former partner in ways of abuse, control, distress, and isolation via technology (Al-Alosi, 2020). However, modest consideration has been given to technology's potential to prevent intimate partner violence (2020). Utilizing technology offers a more well-organized means to observe and discomfiture victims exerting control (Schnurr et al., 2013). Technology is desirable to perpetrators, given it is uninhibited by place or time, and there can be less guilt connected with it than face-to-face hostility (2013). Additionally, abusive perpetrators can initiate public assaults using technology, such as retaliation for nonconformity (2013).

As a social media network, Twitter allows users to communicate anonymously. In the past 3 years, those silenced by ominous social restrictions have found Twitter to be a conduit through which they can voice opinions about the inequality they often face, particularly females (Odone, 2013). After Ray Rice's abusive behavior became public, many females took to Twitter to share their maltreatment stories utilizing the hashtag #WhyIStayed (Weathers et al., 2016). According to Clark (2015), under the hashtag #WhyIStayed, there were more than 90,000 Twitter responses to the 2014 NFL IPV altercation against Baltimore Ravens running back Ray Rice.

As an opportunity to expand research on IPV, Weathers et al. (2016) directly evaluated females using Twitter to impart their lived encounters of oppressive connections and purposes behind remaining. Females remaining in oppression situations and under forced submission has been an issue since Biblical days. Reportedly, an apology was made by Pope John Paul II to several groups oppressed by the church since the statement of its investigation (Casimir et al., 2014). According to Casimir et al., this apology to women as a group was due to the loathsome and oppressive denial of women's human rights by the Church and the greater society, which asserted the wrong interpretation of the submission passage in the Bible (New International Version Bible, 2001, Ephesians 5:22-24). A public apology was a considerable feat; however, research has not currently examined how survivors of domestic violence would use social media to narrate their stories (2016).

Weathers et al. (2016) investigated females who responded and uncovered four topics: (absence of) assets, obligation regarding misuse, dread, and sexual orientation connected to power. Females with a deficiency of such resources do not have these options. In contrast, females with financial and social resources can utilize these assets to avoid and recover from sexual attacks (Loya, 2014). The examination of these females indicated that Twitter served as a place where females could disclose their encounters with abusive behavior at home, encouraging conversation about a defamed theme (2016). Disclosure is thought to heighten an individual's ability to make meaning of the experience, allowing the survivor to develop a more coherent narrative of their experience (Bogen et al., 2019).

Additionally, Twitter provided a connective component where females could comprehend other encounters of aggressive behavior in the home and access a vast local area where data and backing could be traded (Weathers et al., 2016). Using social media as a health communication

has numerous benefits (Bogen et al., 2019). The ability to seek out and glean more tailored health information and increase the accessibility of health information is an opportunity for emotional support through social media (Moorhead et al., 2014). When they feel inadequate in-person social support, seek tailored information, or hope to influence policy, survivors of sexual victimization can seek out platforms such as Twitter to disclose problematic encounters (2019). Additionally, survivors could select to disclose online if they are distrustful of formal support providers, unready to reveal face to face, or are seeking help from sources that are difficult to contact (Naslund et al., 2016).

### **IPV and LBGT Community**

LGBTQ individuals who identify as Christians have been viewed by society as incongruent with Biblical teachings (Hardesty & Ogolsky, 2020). However, studies have suggested that individuals who identify as LGBTQ have shown to be at a higher risk for IPV victimization than, if not higher than, those heterosexual individuals (2020). Therefore, this phenomenon must be explored as well. Furthermore, the risk for this community is amplified by intersections of sexual orientation, gender identity, and race (Reuter et al., 2017).

Contrasted with those who identify as gay, female-to-male transgender, and not African American, those who identify as lesbian, male-to-female transgender, and African Americans are specifically at a higher risk of victimization (Reuter et al., 2017). Studies draw attention to these incongruent rates of IPV among sexual minorities and give way to unique mental and physical well-being concerns (Hardesty & Ogolsky, 2020). For example, minority stressors play a crucial role in explaining the different well-being paths for LGBTQ individuals (Lick et al., 2013). Furthermore, further studies have shown that relationship dynamics could damage the mental health of LGBTQ individuals because of the interaction between IPV and relationship cycling

(Monk et al., 2018). However, over the years, comprehensive investigations on IPV have increased an understanding of the unique encounters of LGBTQ sufferers (2020).

### **Clinical Treatment for IPV**

Clients' cultural and religious diversity has been neglected in psychotherapy for some time. According to Prout et al. (2022), psychotherapy has begun to understand intentionally, acknowledge, and purposefully value the underlying importance of clients' cultural backgrounds and histories (Prout et al., 2022; Sue et al., 2019; Vogel et al., 2013). These steps are essential to improve and make changes in the African American community, particularly highly religious females. Such efforts could break barriers to addressing mental health issues and the lack of trust in proper support. For example, therapy with a secular therapist may be perceived as threatening religious values among highly religious clients (Greenidge & Baker, 2012). Subsequently, the client would likely be unwilling to participate or disclose during sessions.

Regrettably, America has resulted in a complex and longstanding confluence of mistrust, prejudice, and disparity of resources in the social, economic, and political dynamics of race and ethnicity, which has leaked into mental health care provision (Walling et al., 2012). As a result, research suggests that individuals of racial and ethnic minority groups are less likely to receive empirically supported treatment, more likely to be misdiagnosed, and more likely to discontinue treatment (2012). In addition, spirituality and religion are part of this long-overdue multicultural competence movement in psychotherapy and are more readily acknowledged as vital aspects of identity and spheres for multicultural competence (Vieten, 2018).

Moreover, countertransference reactions can affect treatment recommendations and assessments of psychopathology among therapists practicing in secular settings, with religious clients seen as more depressed and more in need of pharmacotherapy than nonreligious clients

(Moukaddam et al., 2019). While the field is making strides to provide more culturally competent care, it is unsurprising that some religious clients may seek treatment at overtly religious counseling centers (Prout et al., 2022). In the United States, over 80% of the population acknowledges a confident or somewhat sure belief in God, with religion as an essential aspect of their lives. Over 25% identify as evangelical Christians and over 70% of Americans identify as Christians (Pew Research Center, 2015). Clients who consider themselves highly religious sometimes desire therapists who share their morals (Harris et al., 2019). The evidence currently is substantial for the efficacy of religiously informed psychotherapies. A current meta-analysis of treatments designed for clients' religious and spiritual beliefs and morals demonstrated that religious/spiritual altered treatments were equal to or better than traditional psychotherapies (Captari et al., 2018).

By addressing specific, precise dimensions of identities, such as race and gender, contributions have been made to studies from many models of socially constructed identities (Kangos & Pieterse, 2021). Nonetheless, co-occurring identities, such as sexual orientation and religion, typically fail to address these models with few exceptions (Lease et al., 2005; Rodriguez et al., 2013; Shurts et al., 2020). Additionally, little research has been performed regarding the experiences of individuals whose co-occurring identities are societally and culturally in opposition or antagonism, such as Christian and lesbian, gay, or bisexual (LGB) self-identification (2021). As stated earlier, Christian and LGB identification is one instance of co-occurring identities that are seen by the public as incongruent (Schuck & Liddle, 2001). Even though the number of American LGB Christians is on the rise (up to 48% in 2015 from 42% in 2013; Pew Research Center, 2015), many individuals who identify as Christian and LGB feel their sexual orientation excludes them from religious participation. Due to the Christian ideology

experienced as antigay, LGB participants feel rejected (Kangos & Pieterse, 2021; Sherry et al., 2010). Subsequently, the historical and contextual challenges for Psychotherapists must consider Christian sexual minorities' challenges.

### **Summary**

Intimate partner violence is a worldwide epidemic that affects all social and sexual statuses. The Christian community is not exempt from this phenomenon. Suggestions made by scholars that intimate partner violence does not have a voice in the religious community precipitated further inquiry and subsequently looked to define reasons through research. Religion played a primary role in quieting and coping with IPV victims in the African American community, who are also overrepresented by this phenomenon. Therefore, theoretical outlooks were taken to explain what researchers hope to find.

The theoretical frameworks for this literature depended upon four theories, religious coping, silencing self, sociological, and ecological systems theory. The religious coping theory assumes human phenomena are multifaceted and recognized through the ongoing relationships between individuals and life situations in a larger social setting. Silencing self-theory identifies a relational strategy where females silence certain feelings, thoughts, and actions to maintain intimate relationships, escape any relationship confrontation, and maintain intimacy and safety. Sociological theories express IPV as conflict within the family, which can best be understood by examining contributing factors of social structures to the use of violence. Lastly, the ecological systems theory asserts that different environmental systems influence human development. These theoretical lenses have been reviewed to determine that the content and context of information discussed in this chapter supports African American females' experiences with IPV and the effects of IPV on Christian females. They systematically search the literature and

combine germane studied analysis from included reports to develop a single conclusion with a greater statistical level.

This literature review highlighted that IPV is not specific to heterosexual relationships, but lesbian, gay, bisexual, transgender, and queer (LGBTQ) are all affected by IPV (The National Coalition of Anti-Violence Programs (NCAVP, 2012). However, African American females experience IPV at higher rates than other groups. Despite this phenomenon, African American females have, as a rule, overcome extreme hardships and continue to do so. A lack of resources and knowledge of securing resources has been much of their plight, influencing suffering silently. Social barriers and racism continue to affect this silence. Some parishioners fail African American females by continuing to seek them out for guidance. Then there is the continual need for safety concerns around those who want to ask for help and are fearful of their accomplices. The therapist who works with clients is encouraged to be aware of how religion plays a part in the lives of African American females and the need to address their spiritual beliefs and provide interventions to change well-being practices and improve females' psychological wellness.

Based on the rationale and the initial incidental evidence reviewed above, we aim to directly test whether Christian beliefs negatively or positively affect the decision of African American women to remain in a violent relationship and fill gaps in research. We argue that traditions of religious beliefs are likely to lower the ability of African American females to leave violent relationships due to fear of God, misinterpretation of scripture, and the risk of an increase in the psychological distress of family separation. Implied evidence for this hypothesis is provided by studies focusing on African American females' faith as a coping mechanism for IPV



(Abu-Raiya & Pargament, 2015) and concerns with specialized assistance and security (Barrett & Pierre, 2011).

## **CHAPTER THREE: METHODS**

### **Overview**

This qualitative phenomenological investigation aimed to understand "The Effects of Intimate Partner Violence (IPV) on African American Christian Females." This chapter expounds on the research design selected and the importance of the design. It describes the setting and wherefore the participants from that setting were selected. The chapter describes the procedures used, the data collection process, the instruments for analysis, and the type of data analysis. The researcher's role will be discussed, as well as the validity and credibility of the research.

### **Design**

According to Creswell and Poth (2018), it is appropriate to conduct a qualitative investigation to explore a group or populace to recognize variables that cannot be calculated with ease or to hear quiet voices. Therefore, a qualitative method was selected to investigate this group, utilizing the phenomenological approach. A phenomenological investigation was conducted with interpretivism as the central worldview. The investigator collected sources and obtained stories of African American Christian females via interviews. These interviews assisted the researcher in understanding the decision, choices, and experiences of African American Christian females with intimate partner violence.

The phenomenological approach is one of the most used methodologies in qualitative research within social and health sciences (Creswell & Poth, 2018). A phenomenological study describes the mutual connotation for several people of their lived experiences of a theory or a phenomenon (2018). Therefore, the investigator gathered information from people who had encountered the phenomenon and fostered a composite portrayal of the substance of this

experience for all people (2018). The gathering of these descriptions helped us to understand African American Christian females' decision to remain with violent partners and the role of faith in silencing these females. This understanding, in turn, hopes to raise awareness of IPV's effects on the lives of African American females and find meanings surrounding the phenomenon.

The process to completion included individual interview sessions with each participant using eleven interview questions for the interview sessions. The interviews were transcribed verbatim and read several times thoroughly. After interviews, organizing and coding terms and phrases and isolating and categorizing themes between the participants' responses were performed. This process was repeated until having a clear understanding and insight into the participants' thoughts and perceptions. Finally, the data were written to verbalize and assign language and meaning to participants' experiences.

### **Research Questions**

- **Research Question One** - How do African American Christian females describe their experiences with a violent partner?
- **Research Question Two** - How do African American Christian females describe the role of religion in their decision to stay in a violent relationship? (Use of scripture and understanding of scripture).
- **Research Question Three** - How do African American Christian females describe their ability to share violent experiences with others?

### **Settings**

The interviews were conducted via Zoom due to COVID. The Zoom platform was used to both record and conduct interviews. A conference room with a video recorder for backup

recording and a voice recorder for audible recordings was utilized to provide privacy and deter interruptions (Creswell & Poth, 2018).

### **Participants**

The researcher assured anonymity using aliases for participants during screening completion. All participants completed the demographic questionnaire (e.g., age, year of education, religion, inclination towards religion, marriage status, and the number of years married). These questions assisted with studying analysis and concluded what variables may impact a respondent's answers, interests, and feelings. A critical case sampling was taken to gain access and simplify collecting data (Creswell & Poth, 2018). Participants were between the ages of 25 and 75 African American Christian females who lived in Georgia. They were all in a heterosexual partnered relationship, married for at least two years or more, and had formerly lived intimate partner violence. Seven participants were selected for this analysis after saturation.

### **Procedure**

The researcher received approval from the university and the Institutional Review Board (IRB) to conduct a phenomenological study. Interviews were conducted with females who have encountered the phenomenon using open-ended questions to disclose and understand the phenomenon from the participant's point of view (Creswell & Poth, 2018). The researcher obtained and recorded the personal testimonies of participants using open-ended questions. The Zoom platform was utilized to assist in social distancing due to COVID to record interviews. This platform required the host to be present before the meeting to protect the privacy and construct policies and controls to safeguard information collection, use, and disclosure.

Additionally, information was collected through audio and video recordings or written works for later review of dialogue, non-verbal behaviors, and signs of discomfort among the

participants (Creswell & Poth, 2018). Participants were asked to preview information and provide feedback by verifying data and interpretation. Participants were recruited from faith-based communities in Georgia. Email, social media, and flyers were utilized to recruit participants. Online interviews were proposed for the social distancing of participants while ensuring the best information would be obtained since interviewees are analogous to each other (2018). Each participant was contacted by the researcher directly by telephone. The research procedure, purpose, and structure of the investigation were explained to everyone interested in participating in the study. Individual appointments were set up via telephone in a confidential setting designated by the researcher. Interviews were conducted to establish a positive rapport and bring a sense of connection with each participant (2018). Before the start of the interview, participant concerns were discussed, and consent forms were signed with permission for audio recording.

The researcher scheduled 90-minute semi-structured interviews. A \$10 gift card was provided to encourage participants to complete the interview (Creswell & Poth, 2018). The interview questions and inquiries include questions about understanding the terms such as mental well-being, religion/spirituality, and support system and how they relate to their lives. These questions permitted the participants to share how intimate partner violence existed in their lives and the influence of religion in their decision-making. In addition, narratives and feelings were expressed regarding these experiences with violence and how they manifested in their lives. Participants also discussed whether religion was a positive or a negative experience in their lives.

### **The Researcher's Role**

As a certified family violence intervention provider, the researcher has witnessed numerous women who choose to stay with violent partners. Furthermore, given the researcher's

position as a counselor and Christian African American female, her personal experiences that shaped her views on the role of religion and its potential effects on African American Christian females in intimate relationships must be considered. Subsequently, the researcher could set aside any preconceived perception as a researcher that she may have of the phenomenon being studied. The researcher kept an open mind and listened respectfully to the participants' descriptions of the studied phenomenon process (Creswell & Poth, 2018). Careful thought was given to not letting past knowledge be engaged while determining experiences and explaining the study without biasing the potential participants. Additionally, any interpretations and understanding of the Word of God were also set aside.

### **Data Collection**

After selecting respondents for research, the researcher conducted interviews for approximately 90 minutes and recorded them for transcription. The interviews were recorded and transcribed for data analysis purposes. The researcher was the primary instrument for collecting the data for this study through interviewing, observation, and document analysis (Chenail, 2009). Permission was obtained from participants in writing for investigation while respecting participants' privacy by utilizing pseudonyms, avoiding siding with participants, only disclosing positive results, and assigning fictitious names while developing composite profiles (Creswell & Poth, 2018). Open coding, which Strauss and Corbin (1990) characterized, was used to collect data. Coding assisted the researcher in organizing and developing data into common themes.

Additionally, categories were developed from data collection to create summaries and tables for research. The researcher analyzed data using multiple levels of abstraction. Rigorous means were used to validate accuracies, such as member checking and audit trails. Finally, the researcher performed mock interviews to gain insight and estimate timing and observation.

## Instrumentation

### Questions

The researcher utilized the following questions to guide the interview. The first question served as an icebreaker to create conversation.

1. How do you, as an African American Christian female, describe IPV?

This question will help to understand the meaning for the participant.

2. How do you describe to me your challenges with IPV?

This question will provide an understanding of violence in the relationship.

3. What childhood experiences, if any, did you have with IPV?

This question will provide validity to research regarding childhood experiences and the probability of violence being repeated in adulthood.

4. How often do you, your partner, or your family attend church services?

This question provides the status of commitment for the participant and family.

5. How do you describe your role of service in church?

This question provides insight into church involvement.

6. How do you describe your experience as an African American Christian female with a violent partner and your coping methods?

This question provides insight into what methods were used to cope with violence.

7. How do you describe safety issues regarding IPV?

This question helps to understand if safety issues encouraged the participant to remain in a violent relationship.

8. Describe the role of religion in your decision to stay or leave the violent relationship.

The question provides insight into participants' faith and any religious/spiritual concerns regarding leaving a violent relationship.

9. How would you describe your support system?

The question provides an opportunity to identify support systems, formal or informal (counselors, family, pastors).

10. How do you describe your feelings regarding what others think about African American Christian females' decision to leave a violent relationship?

This question identifies any concerns about what others think and its importance to whether participants stay in a violent relationship.

11. Describe your fears/concerns about leaving your partner as an African American Christian female.

This question would provide insight into threats made or religious/spiritual implications for leaving a violent relationship.

### **Data Analysis**

The researcher gathered data from a population of seven African American Christian females who experienced the phenomenon by using in-depth and multiple interviews (Creswell & Poth, 2018). All participants were asked two open-ended general questions (Moustakas, 1994): What have you experienced regarding intimate partner violence? What circumstances or situations have usually influenced or affected your experiences with intimate partner violence?

The researcher built on the data from research questions and highlighted critical articulations, sentences, and statements that helped to understand how the members experienced the phenomenon and produced subjects by examining significant proclamations (Creswell & Poth, 2018). This process also allowed the researcher to develop clusters of meaning from these



significant statements into themes. Moustakas's (1994) recommendation for horizontalization was implemented by treating each statement as having equal value and developing a list of non-repetitive or overlapping statements (2018).

The audit trail, triangulation procedures, and bracketing were utilized to create dependability and confirmability. Memoing of short phrases, ideas, and critical concepts that occurred in the reading and writing process was used to generate audit trails and capture thematic ideas (Creswell & Poth, 2018). Memoing also added to the tracking of fostered ideas and credibility to the qualitative data process and outcomes (2018). Obtaining permission from participants in writing for investigation while respecting participants' privacy by utilizing pseudonyms, avoiding siding with participants, only disclosing positive results, assigning fictitious names or aliases, and developing composite profiles were done (2018). Before interviews, permission from the university and IRB was requested. A consent form was provided for each participant to protect them from harm and provide anonymity and confidentiality. The data gathered from the consent form will be destroyed following the completion of its use for the research assignment.

### **Trustworthiness**

#### **Credibility**

Member checks were performed to preview information and gain feedback for credibility and accuracy of interpretation. Contact was maintained via email and telephone to take data, analyses, interpretations, and conclusions back to participants and to ensure data collection was accurate (Creswell & Poth, 2018). The participants were given opportunities to review and prove any inaccuracies.

**Dependability and Confirmability**

The audit trail, triangulation procedures, and bracketing were utilized to create dependability and confirmability. In addition, the audit trail allowed the researcher to review the process by which the researcher attained these findings (Creswell & Poth, 2018). Reliability and confirmability were established through auditing the research process (2018).

**Transferability**

Memoing of short phrases, ideas, and critical concepts in the reading and writing process will be utilized to create audit trails and capture thematic ideas (Creswell & Poth, 2018). The use of memoing expanded the tracking of fostered ideas; it also gives credibility to the qualitative data process and outcomes (2018).

**Ethical Considerations**

In a phenomenological study, it is crucial to obtain written permission from sample individuals who have experienced the phenomenon to be studied (Creswell & Poth, 2018). Therefore, each participant was informed and signed their consent to participate in the research. Additionally, proper permission for research through the IRB and the university was obtained before the research. The researcher then proceeded without bias and with neutrality to not influence the participants in their responses. The researcher recognized the privacy of participants and avoided siding with participants. The researcher assigned fictitious names to address this issue and develop composite profiles (2018). Confidentiality was ensured by recordings and transcriptions being placed behind a password-protected computer and in a locked filing cabinet in the researcher's home office. In addition, the researcher conducted interviews in a private office and conference room to deter distracted by surroundings.

### **Summary**

This chapter provided the details of the study's design, participant eligibility and recruitment, the research and interview questions, and the procedures used to conduct the study. The study was based upon a phenomenological approach to explore the lived experiences of intimate partner violence and the effects of religion in the lives of Christian African American females. Participants were recruited from faith-based communities in Georgia to conduct the study. The primary data collection was developed from one-on-one interviews conducted via the Zoom platform, which was utilized to identify common themes and experiences of the participants. The transcriptions were created from the interviews on the Zoom platform, and the researcher's transcription was utilized to analyze the data.

## **CHAPTER FOUR: FINDINGS**

### **Overview**

This phenomenological study aims to describe African American Christian females' experiences with Intimate Partner Violence in Georgia. Critical case sampling was utilized to gain access and collect data to allow the researcher to develop logical generalizations from the rich evidence produced when studying a few cases. This chapter will provide information regarding the results of the data analysis, the participants, and the categories developed during data collection. Descriptions of the seven participants interviewed will be presented in this chapter, and how they were recruited for this study. Tables will be presented of demographic questions and responses from participants to provide and assist the readers with an understanding of participants in this study. None of the participants were currently experiencing intimate partner violence. A narrative of responses and answers to each research question will be supplied using the data collected. All participants consented to their participation by completing an informed consent form and scheduling a date and time for an interview.

### **Participants**

This study consists of seven participants in total. The participants were African American Christian females between the ages of 25 and 75 who were married for two years or more. Recruitment took place in the state of Georgia and from various religious organizations. These females were self-reported religious and spiritually connected representatives of three denominations Methodist, Non-Denominational (4), and Pentecostal (2). Participants were recruited from religious organizations through flyers, emails, and social media. None of the participants were clients or relatives of the researcher.

Furthermore, none of the participants were currently experiencing intimate partner violence at the time of this study. Each participant was given a recruitment email that supplied the study's details to confirm that the participant met the research criteria. After each participant was confirmed as eligible and agreed to the terms of the interview, they consented by signing their names and returning their consent form electronically to the researcher. Participants each received a ten-dollar gift certificate after the completion of interviews. The names used in this study for participants are pseudonyms.

**Table 1***Participants' Demographics*

Name	Age	Marital Status	Yrs.	Level of Education	Denomination	Employment Status	Location
Sallie	66-75	Married	26	4-yr College	Methodist	Unemployed	Snellville
Janice	56-65	Married	15	Some College	Pentecostal	Unemployed	Ellenwood
Norma	46-55	Married	12	Some College	Non-Denom.	Self- Employed	Mableton
Patricia	56-65	Married	20	High School	Pentecostal	Full-time	Jonesboro
Nancy	46-55	Married	20	4-yr College	Non-Denom.	Full-time	Atlanta
Velma	25-35	Married	02	Some College	Non-Denom.	Unemployed	S. Fulton
Pamela	56-65	Married	32	Some College	Non-Denom.	Unemployed	Atlanta

## Results

### Theme Development

A phenomenological investigation with interpretivism as the central worldview was conducted for this study. Seven African American Christian females between the ages of 30 -70 were interviewed regarding their lived experience with intimate partner violence. The interviewer began each session with an introduction of the participant and researcher, lasting 45 – 60 minutes. The research used 11 open-ended semi-structured questions to guide the interview and permit the participants to freely express their thoughts and experiences regarding lived experiences with intimate partner violence. No definitions were provided for participants during the interview. The participants in this study were sample representatives as Methodist, Non-Denominational (5), Pentecostal, and self-reported as religious and spiritual.

Regarding education and employment, one of the participants received less than a college education, four received some college education, and two received four years or more of college education. One of the four participants reported being self-employed, three were employed, and three were unemployed at the time of the study. Five participants (62.5%) had divorced and remarried, and two (25%) of the females were still married to their spouses. The two participants who remained in their marriage reported verbally abusive spouses. Table 1 illustrates the participant demographics and gives the reader a table of reference while reading the research. This table could be beneficial to assist the reader when thinking about the types of respondents giving information. However, demographics did not influence the results of this study.

The interviews were recorded using Zoom for audio and video recording. A backup voice recording using the Voice Memos app on iPhone was used to capture the interview in the event of a Zoom connection loss. The interviews were transcribed using word dictation and otter.ai.

Otter.ai. transcriptions were reviewed by the researcher for accuracy and utilized for comparing the transcription document with the recorded interview. Data were then edited for accuracy using Microsoft Word by the researcher. Five overarching categories emerged: mental well-being, the focus of religion, silencing, witnessing intimate partner violence in childhood, staying versus leaving, and two sub-categories: coping and prayer. The categories and sub-categories emerged during the identification of coding and analysis of the interview questions and responses. The data were then hand-coded by the researcher using the transcribed interviews. Finally, participant quotes were selected to support the responses to the research questions below.

### **Research Question Responses**

#### **Research Question One**

The first research question of this study was: How do African American Christian females describe their experiences with a violent partner? The participants in this study defined their experiences as “then there came verbal abuse,” it has a lot to do with mental abuse,” and “I would always go to pray,” which were categorized with other codes as perceptions and as experiences. As participants narrated their experiences with IPV, several themes emerged: mental well-being, the focus on religion, silencing, witnessing intimate partner violence in childhood, staying versus leaving, and two sub-categories: coping and prayer. These categories and sub-categories emerged during the identification of coding and analysis of the interview questions and responses.

#### **Research Question Two**

The second question was: How do African American Christian females describe the role of religion in their decision to stay in a violent relationship? (Use of scripture and understanding

of scripture). Again, all participants noted that using scripture or understanding scripture played a significant part in whether they stayed or left their violent relationship.

**Table 2**

*The Role of Religion in Their Decision Making*

Participant	Responses
Sally	"I believe learning, even in Sunday school, the Scriptures that Jesus loves me and had a big impact on me and being able to pray. Because I shared with you when I was a child, I remember getting down on my knees and praying to Jesus for help. I know that even as a little child, I believe that the Lord was with me to get me through that."
Patricia	"I don't remember which exact scriptures they used. I read them and wrote them down. And I remember they would also read it to him about how you don't suppose put your wife away and different things like that?"
Norma	"The pastor said to me; you're not in sin. If your husband says go grocery shopping and make sure you bring back my beer, my wine, or whatever it is, um, you just do what you're asked to do, just do what you're told."
Velma	"It was almost as if it was okay. Like a lot of the elders in the church, they would, you know, kind of not so much share their testimonies or their interactions; it was almost like, if you can bear it, hold on a little while longer, it'll get better or won't be as bad or won't be as frequent. The one big thing was like pray about it. Give it to God. He will handle it. So, it was almost as if keep your spiritual faith, but what's happening in the natural, you just have to go through it until it gets better."
Nancy	"There were a couple of scriptures that I really kind of held near and dear to my heart; all things are possible for him that believes. So, I believed it was possible, you know, for him to change."
Pamela	"I went through that with the church...for a period of time, so when you say what part that religion had...it had a part for a period of time because it was said that God doesn't like divorce. So, you need to stay in it and make it work."



---

Janice	"So, I just kept praying and talking to the Lord. And then God said, don't worry about it. And one thing that clicked in my spirit was when God said, he said, Can the creation tell the Creator what to do? And I said, No. He said, can the clay make the potter? I said no. He said, "so why are you worried about it? I got it. So, then He said He had it, I just started focusing on God and me, I took my focus off him and started putting it on God."
--------	--

---

### Research Question Three

The third research question was: How do African American Christian females describe if any, their counseling experiences for IPV experiences? The counseling experiences of these participants were limited. Most of them received counseling from pastors, bishops, and elders.

**Table 3**

*Counseling Experiences For IPV*

---

Participants	Responses
Sally	"My family advised me not to go back. You know, I understand that. But I didn't think that was the answer at the time. Because as I said before, my fear went far beyond what he would do to me but what he would do to my family. But no, we didn't receive counseling, and we didn't have premarital counseling, either. So, I think that's important as well. So, I think that it would be very advisable to have that. Because a lot of conversation you get to know people when you're in conversation with them about certain things, and pastoral care, pastors can, and leaders can bring out questions, you may not have even thought of to ask and get beyond that feeling part."
Patricia	"We went to counseling, and I was told to be more patient and understanding with my husband telling me to, you know, give him time to get over what had supposed to have happened, communicate more, do more date nights. But it's like, every time they would tell us to do something, it never goes any further."
Norma	"The Pastor said to me, you just do what you're asked to do, just do what you're told. That's his thing. And so, I was doing that. Cut down the arguments. He's the head of the household. He said that as long as he's not asking you to do something against your morals and values. So, I did that for a while."
Velma	"I confided in many leaders in my church at the time, we were in church, and being that we were married, and we were young, I was told to go to counseling, pray, and counsel with the bishop. And it was almost as if, as long the abuse wasn't open and out to other people, it

---

---

Nancy	<p>was okay to go back and try it again. So, I will say I suffered a lot of depression."</p> <p>"The pastor, at the time, was supportive and counseling. He actually was the one that suggested when things just got extremely volatile and out of hand when I graduated from the two-year college, and he's the one that suggested that I leave until things could get better. In the beginning, his counseling mainly focused on the biblical principles of marriage. He never said, well, you have grounds for divorce or anything like that, as my mom did. It was more, I feel, at least try to stick this out. That was more of the feeling I initially got from him until things worsened."</p>
Pamela	<p>"One of the things that my church practiced and what caused me to stay in it longer than I really should have been because the question asked of me by even my grandmother, what are you doing wrong? That's causing him to beat you. What are you doing wrong? Are you not cooking? Are you not cleaning? Are you not having sex? What is it you're doing? Because a man is just not going to beat you for no reason, you have to be doing something. So, I went through that with not only family members but also the church. So, when you say what part religion had, it had a part for a time because it was said that God doesn't like divorce. So, you need to stay in it and make it work."</p>
Janice	<p>"We went to Bishop who told us to go to counseling with the Apostle. Then we did counseling with another church. My husband wasn't really verbal. Most of my distress came through emotional and mental abuse. We did do counseling, but he walked out on the counseling session. It worked, but it didn't work. Because I think he just learned to get smarter in whatever he was doing."</p>

---

### **Category I - Views of Mental Well-being**

Intimate partner violence in this study was associated with adverse mental health outcomes among female survivors, including depressive symptoms, anxiety symptoms, and substance use. The participant in this study noted no awareness during interviews of crisis interventions outside of police officers, medical help, and counseling through spiritual leadership. Some participants reported that professional counseling in their community was frowned upon. Subsequently, under this category emerged the experience of mental well-being and the mindset or attitude of the participants toward their lived experiences. According to Zingoni and Corey (2016), individuals vary in their mindsets and implicit beliefs regarding

human attributes' plasticity. Because mindset influences responses to achievement situations, hopefulness also seemed significant for each female. The reports are listed below.

**Table 4**

*Mental Health Challenges*

Participants	Responses
Sally	"My biggest challenge was that it was totally unexpected and unprovoked. I had, unfortunately, been married to what you might call a Dr. Jekyll and Mr. Hyde type of person. And I really did not know the person that I was married to. I thought he was very intelligent. I met him through my oldest brother, who was going to college then, and he was a very intelligent young man. I had no idea that he was disturbed when I married him. So that was the biggest challenge. So, who is this person that I've attached myself to? And living in fear from day to day? And the abuse caused me to leave and go home; whenever I would leave and go back to Miami, he would be there the next day to get me. And as strange as it may seem, I was afraid for my family. I feared this man so much that I would leave and go back with him."
Janice	"Well, most of my distress came through emotional and mental abuse. Beforehand it was mostly, I think, when men choose to make choices to go outside the home. I think it brings on a lot of emotional stress. I think I do believe that I would gain a lot of weight. And like I said, I got up to 287 pounds."
Pamela	"I dealt with low self-esteem. I lost the value of who I was because I was torn down as the individual I was; as the woman I was, I felt worthless. So, again, it caused me to have very low self-esteem. And I felt like, what did I do wrong to deserve it? You know what I was in at that time. So, I turned to alcohol."
Velma	"I experienced domestic violence... it got as serious as me having my youngest daughter prematurely, two pounds, 12 ounces. I will say I suffered a lot of mental abuse...I will say I suffered much depression. I lost a lot of trust and confidence in others while going through personal issues. It was a very lonely and scary situation, especially because I confided in many leaders in my church at the time. So, it made me fall into a huge depression because certain church ministers and staff didn't necessarily say it, but their body language said they were disappointed."
Norma	"So, my experience is that the thing I think about the most is tearing down my character who I am as a person and making me feel less than. I can't remember sleeping or not sleeping. And I remember getting sleepy but always on edge, you know? Oh, I'm sorry, I'm sorry, I'll fix that. Oh, don't worry, don't worry, don't worry, you know, always like, oh my gosh, anxious, anxious. That's what I was like, oh my gosh, what did I do

---

Nancy	<p>wrong? Oh, what did I do wrong? That I remember asking all the time if I did do something wrong. What did I do wrong?"</p> <p>"I guess the better way to say it is it threw me off balance. It was blurring the lines of real reality versus a reality that I, you know, fantasize to, I guess, to kind of take me out of the reality of what I was in and where I was to this other realm of what it could be. Um, I was fully aware of what was happening, but I guess it's a coping mechanism or defense mechanism to keep me from, I guess, totally losing it. I just would focus on things that you know were okay. Once I graduate, this is how my life is going to be. And I'm going to have this, and I'm going to do that. And I'm going to be more involved in this. And so, my mind would go there instead of to what was really happening. Because whenever I would think about or focus on what was happening, I was sad, I was depressed, I was lonely, I was hurt, I would just cry, and I didn't want to be in that place."</p>
Patricia	<p>"I'm just like I said before, it's not so much physical abuse, where somebody's physically fighting you, hitting you, or pushing you. But it has a lot to do with mental abuse, where people are like controlling, trying to tell you what to do, or always blaming you, saying that it is your fault and what you're going through. I have experienced it on different occasions; as I said, I have been accused of something that I did not do or didn't say, and he didn't believe me. And it was the verbal abuse, the things that he said to me that I did not like, even when he, years ago, would do things like stay out all night long, be gone all day, just different things, he will come back and try to fuss at me about it and say things to me, that was really ugly, that I did not like."</p>

---

**Table 5***Mind-Set*


---

Participants	Responses
Velma	<p>"So, I was embarrassed because what appeared to be the perfect family dynamic was not even true. So, I did, I suffered, and I was embarrassed. She recalled that she grew up in a violent home where her mother committed suicide and witnessed both her mother and grandparents being victims of intimate partner violence. She noted that one of her biggest fears was that she had already had a child before I got with my spouse. And so, I didn't want to be a single mother with multiple baby daddies or multiple kids. It was hard enough; we were struggling as a unit. So, to imagine what life would look like by myself was even more frightening. And then nobody at the time; I would now leave with three kids. I feared nobody would let me stay with them with three kids. Like, you got a woman and three kids. And I was barely making ends meet, barely making ends meet,</p>

---

---

	<p>then, so I didn't want to be a burden to anyone. I will say initially, because I was so young and inexperienced that my pride, I was embarrassed. Because on the outside, it looked like we had a good home. We were married, we had a house, a car, and two kids, a boy and a girl, and I was pregnant with my last child. So, I was embarrassed because what appeared to be the perfect family dynamic was not even true. So, I did, I suffered, I was embarrassed."</p>
Norma	<p>"I just remember, I just remember...remember being so like, so helpless. I don't know why I couldn't stand up for myself. I didn't. And I wish that I could have known...I wish I knew how to stand up for myself in those moments. I didn't. I was terrified. Never been a fighter in my life. So physical altercation...touch...that was very scary to me. I wish I had known how to. I wish I had the courage. I wish I had more courage back then."</p>
Nancy	<p>"I wasn't doing well mentally. But I just, you know, press through physically. Because it wasn't, you know, a constant type of a thing, it was when he would get extremely angry whenever I would say I want out of this. That's when physical violence would occur. Emotionally, I just knew I needed to get through school, and then I needed to take care of my first daughter... that was always in the back of my mind."</p>
Pamela	<p>"Because when you have someone that's not just physically abusing you, but mentally, the physical, the verbal abuse. You're nothing, you know, and they just continue to horn that in constantly over and over and over and over again. So yeah, it gets into your mindset. And you start saying, Well, I'm not I'm not worthy. Why am I living? I had a lot of those thoughts.... thoughts of wanting to give up. I stayed in hiding except for when I went to work."</p>
Janice	<p>"I still wanted to get out even though I was in Word. But what made me change my mind was the prophecy that the divorce was canceled. And so, me being who I am, loving God with all my heart, my desire is to please God totally, yet I know God wants us to be happy. But more so, we have to be obedient."</p>
Patricia	<p>"So, I felt like I wanted my daddy in my life when I was coming up, and he was not there. So, I felt like nobody said this to me. However, I felt like I had two kids already by two different men. And to me, that did not look good to have all these children by different men and going from man to man."</p>
Sally	<p>"But just remembering how much Jesus loves me held me together. I believe that foundation...because I even learned later on in life, you know, even when I made some bad choices, I can always go home, those words and scriptures that have been embedded in us come back, yes...I can always go home. You know, like the prodigal son. Yes. When you hit bottom, you can always go home."</p>

---

### Category II - Focus on Religion

Earlier, it was noted that African American females are devout in their faith, with 83% scoring highly religious on a measure that mutual regularity of prayer and church attendance, belief in God, and the importance of religion (Cox & Diamant, 2018; Williams & Jenkins, 2019). Some participants recognized that the focus of religion was God and that the perceptions were that God directly relieved and aided them. Subsequently, the African American Christian females in this study were able to determine their understanding of religion and spirituality. No definition was given to the participants for the term *religion*, most of them comprehending religion as attending church and having faith in God. One participant recognizes religion as love, and the two major categories derived from religion are presented below.

**Table 6**

#### *Church Influences*

Participants	Responses
Velma	"Yes, before we got married, we did. And it seemed like the moment that we said I do, we used to have conversations about going to church and raising our kids in the church because we both had a similar childhood with going to church and our background mine was probably more prominent than he is. But when we got married, he just never went. So, when I continued to go, he would accuse me of cheating on him. But he knew I was at church like I was going to the church meetings and things like that."
Norma	"It was really hard because I saw him one way outside the church, and what I saw at church did not match. My husband at the time worked. He was working on a program to become a deacon of the church. But also, very involved in holding small Bible studies. What I saw at church, how he interacted in the Word, and how much he knew it. It did not match the actions."
Sally	"Even though my mother and father had their issues, I still had the support of a church family. As little children, we grew up in the church, junior Usha board, the choir, always having activities on Saturday at the church. So that was a part of our family life."
Pamela	"Church was constant. I grew up in a church. So that's all I knew. Okay. And so, after meeting him, I was still going to church. But I sometimes

slacked back to being with him on Sundays, thinking that would make the situation better. But for the most part, I've been in church all my life. Every Sunday, Tuesday, Thursday, Friday night, Saturday, and Sunday? Because I came up with in a very strict Holiness Church, the most I did was sung in the choir ...occasionally was able to teach Sunday school class. Other than that, for women in the church, it was not a lot that we could do."

Nancy	"I was the only one confessing Christianity, but I didn't really attend any church service. I don't know why. After we get out of the military...I found a church. So, we started going to church. I met a friend who is currently my sister-in-law, who introduced me to her church, so I started going to her church. So, I've been in church ever since then."
Patricia	"We grew up in church. We would have church with my grandmama in the home."
Janice	"I grew up in church. So, that's all I knew; for the most part, I've been in church all my life. I came up with a very strict Holiness Church, and the most I did was sung in the choir. And Sunday School, occasionally, I was able to teach Sunday school classes. However, other than that, it was not a lot for women in the church that we could do."

**Table 7**

*Pleasing God*

Participants	Responses
Sally	" I found out during all this time I was married to a man who was a rapist. "I just thank God for His grace and bringing me through that in my right mind."
Patricia	"The only reason I was still there is that when I fasted and prayed, I heard God tell me to trust him. Trusting God, and not him, not man. So that is why one of the reasons why I was still there, even when I tried to file for divorce on my own; it was when we were getting unemployment, the week that I was getting ready to go file for a divorce, they stopped my unemployment. So, I just said, God, I surrender. And I just give it out to you."
Velma	"I will say my personal relationship with the Lord definitely strengthened during that time because I had to believe in his faith and that he would keep me, and His grace would carry me."
Norma	"I was constantly confused, which I think I was confused about religion because I couldn't understand. I couldn't understand why this was happening. And we serve God and love God, and we read the Word, and yet, what we learned wasn't matching up with the actions."
Janice	And then God said, don't worry about it, and one thing that clicked in my spirit was when God said, why are you worried about it...I got it."

---

Pamela	"I found myself turning more and more away from God. I was sitting on my porch. A neighbor came over to my porch. She told me you are better than this and slapped me in my face. But when she slapped me in my face, it woke me up. And from that time, I thanked her because that was not a slap for being angry at me. I felt it was a slap to wake me up. And for the first time, I cried, and I cried for days. And that is when I start feeling the presence of God come back into my life. And that's when I started praying and asking God to bring somebody who would intercede. That's when I started asking God to bring somebody back into my life that would lead me back to him. Because still, at that time, I did not have enough willpower within myself."
Nancy	"It was just rough, but eventually, I was able to, you know, push through it because there were people in my life that God placed in my life that really cared about me."

---

### Category III - Silencing

As noted earlier, African Americans are socialized differently. To preserve and maintain a positive family image in the community, African Americans have been socialized to keep affairs private within the family and not share them with anyone outside the home (Bent-Goodley, 2013). Self-silencing is the relational strategy where women silence certain feelings, thoughts, and actions to keep intimate relationships, escape any relationship confrontation, and maintain intimacy and safety. In this study, the females were noted to silence their thoughts and feelings and ignore their own needs while they upheld the significant needs of others. Some participants in this study reported seeking formal (police) and informal (families and friends) help was sought for violence. However, all the participants in this study sought help from outside the home.



**Table 8***Silence-Self*

Participants	Responses
Norma	<p>"I was too afraid to tell people what was really going on. At that time, I tried not to let anybody else know what was happening behind closed doors. No one knew what I was going through but me. Usually, what would happen is if something happened today, I'm not telling anybody about it tomorrow. Usually, once we've gotten past it all, and maybe I'm talking with my girlfriends talking about similar instances, but I never talked to anybody about it with anyone." I was always concerned about being safe. I just felt like sometimes I had to tiptoe. I had to not talk about certain things or even lie, unfortunately, about certain things just to not have to face possibly getting hit."</p>
Sally	<p>"For the most memorable one was when I had left him. I rented an apartment in Atlanta and got me a job. And he came...I had left him, or so I thought, and he came to my apartment. And when I came home from work, I noticed that one of the locks was loose. And I know I locked both the deadbolt and the other lock. And when I headed down the stairs, he jumped out of the apartment's window and came after me with a knife. And I went to the landlady's apartment, and she said she couldn't let me in because she was in there with her baby. They were alone, but she would call the police for me. So, she did; she called the police. But the Holy Spirit, I know it was the Holy Spirit who gave me the wisdom on how to deal with him when he caught up with me because he did. And He, the Holy Spirit, said speak to him as though nothing is wrong with him. So, in a calm voice, I said, John, what's wrong with you? That was his name? Why are you acting like this? I walked back to the apartment with him. And it was an upstairs apartment. And when we got to the top of the stairs, the police drove up. But there was only one officer. And all I could see was this man throwing that officer off the banister upstairs and killing him. One officer to me was not enough to restrain him. So, when the officer got to the top of the stairs, I told the officer, I'm sorry, officer, my husband, had come home. And I didn't know it was my husband. He came home unexpectedly. And I didn't know he was at home. And I did not press charges. I did not panic. But I went back with this man. And that's when he hit me on the post when I went back with him. I did not call my sister. I have a sister here living in Atlanta. And I did not call her because of my fear."</p>
Velma	<p>"So counseling isn't normal in our neighborhood, and our lifestyle is to pray about it. It's almost as if you do anything other than talking to Jesus is almost a sin. Right? So it wasn't, that wasn't normal for me. And anything that looked outside of what we kind of what our structure was in church because it was an apostolic church was not normal. Even though</p>

---

	just most black people that I've talked to, or knew, or just being a Christian woman, like, going to therapy, was frowned upon. So, you pray about it, the Lord go and fix it, and you go and keep pushing like everybody else before you kind of thing."
Janice	"Bishop had no clue that...he may have because God could have let him know in the spirit...I'm not saying that what I'm saying is I did not talk to him or discuss it with him getting a divorce."
Nancy	"So, I guess if you feel like you put yourself in harm's way, all of this because all of the signs that were there prior to comes back in your head, you feel like, well, people are going to say it is your fault."
Patricia	"I did not like it. But my kids were small. And you know, sometimes I would just not say anything. I would just, you know, just keep trying to keep the peace."

---

#### Category IV-Witnessing IPV During Childhood

Another category that emerged is childhood experiences with IPV. The study further provided validity to research regarding childhood experiences and the probability of violence being repeated in adulthood. All the participants in this study, except Nancy, reported witnessing IPV in their homes. Additionally, all participants reported that their spouses grew up with parents who were violent in their homes. The participant's reports are below.

**Table 9**

#### *Childhood Experiences*

---

Participants	Responses
Janice	" I did not want to go through what my mom went through. I was refusing to go through that because my dad was cheating, and they were fighting and arguing, and I really just did not want that in my marriage."
Sally	"My parents were physically abusive to one another...my father and mother used to fight. I recall when I saw my father going down the hallway towards the living room where my mother was and screaming out because I feared he would harm her. So, that is an excellent area to explore. Because I think many times, we don't understand the effect it has on children. And yes, it did affect me. I grew up hating my father. Because even though mom fought back, and there was physical abuse on both sides, I felt that he was the perpetrator because he was the man. And so, I really didn't get to know my father until I was an adult."
Norma	"As a child, I experienced verbal abuse. I never saw any physical abuse. But yeah, just the verbal abuse between my parents."

---

---

Patricia	"Well, it came with my daddy and my momma; he used to stay out all night. And he would talk to my mom any kind of way when he came back sometimes; they even fought. So, it was not like, well, he just physically just, you know, put his fist on but I remember him slapping her one time."
Nancy	"I never witnessed intimate partner violence as a child in the home. My mom's side of the family, as well as my dad's side of the family, were not like violent people. But my grandmother, my mom's mom, was very assertive, and she had to be, you know, dealing with the civil rights issues and whatnot. So, she was more of the aggressor. And then I had two aunts that were the same way. So no, they were never beat by a man."
Velma	"Well, first off, my mother, who committed suicide, was in a violent relationship with my dad and her partner, which I witnessed, remembering, you know, them arguing, fighting, being hit, police being called. And then, when my grandmother got custody of myself and my sister, that was a violent relationship; they would fight, they would argue, police would be called. I remember my grandmother and her boyfriend busting my granddad's head with a bat and splitting his head open, right? And then my foster mom, she and my dad, my dad broke her nose. So, like when I say it was not abnormal, I thought that that was love, and it was okay. And that the longer you stay with them, it means how loyal and committed you are to a relationship, right? So, my mom and foster parents are still married today, right? And my granddad and grandmother, of course, separated. But that's over 30 years before that to transpire, like for them to separate."

---

### **Category V – Staying Versus Leaving**

As stated before, abused women remain in IPV relationships for many reasons. In this study, all the women admitted they did not want to be alone. Distorted beliefs, such as negative beliefs about self-worth or minimization of the problem, may also occur (Cravens et al., 2015). Additionally, facing a failed marriage was another deterrent to leaving if it would displease God. Therefore, these females would prefer to project the picture of a happy, secure, and utilitarian relationship, despite the potential for other maltreatment from their companion (Lacey et al., 2011). The primary causes in this study for females who remained in violent relationships were religious, financial, and insecure reasons.

**Table 10***Staying Versus Leaving*

Participants	Responses
Norma	"So, I was concerned financially about how I would make it; that was a huge part of not leaving. My husband was the breadwinner. Yeah, I stayed for the kids. I didn't know how...I didn't know what I was gonna do, how I was going to leave. So financially, that definitely played a part in not leaving. The kids not having a father in the home."
Nancy	"Um, at that time, you know, being as young as I was, I guess because it wasn't spelled out in the Bible that, you know, God doesn't want you to be in an unhealthy relationship, you know, because all it talked about was the grounds for divorce was adultery, which, you know, he just repeatedly did over and over...and with no, real true like, remorse but I guess it you know, in a 20 something-year-old mind, you know, it just doesn't say in the Bible, you can leave somebody for hitting you. So, staying well, I guess I felt I had to stay involved with this in some capacity."
Sally	"So, I became a military wife, and everywhere he was stationed, you know, that's where I was. And the abuse caused me to leave and go home. Every time I was abused, I remember one time when one of his other soldiers advised me not to tell his commanding officer that he hit me, because they would put him in the stockade. And so, a lot of that physical abuse was not shared. And I just dealt with it. When the other soldier, his friend soldier, told me what they would do to him you know, even though he deserved it, something in me didn't want anything bad to happen to him. The love piece, yeah. So, when you love your husband, you know, even though they are, you know, mistreating you, yeah, there's compassion there, you know, for them."
Velma	"I will say I suffered a lot of mental abuse, as well as physical abuse. It was a very lonely and scary situation, especially because I confided in many leaders in my church at the time. We were in church, and, you know, being that we were married, and we were young, I was told to, you know, go to counseling, pray, go to counseling with the bishop. And it was almost as if, as long as the abuse wasn't open and out to other people, it was okay to go back and try it again."
Pamela	"I had to make up my mind that it wasn't so much about religion. I take that back; let me back it up. One of the things that my church did practice and caused me to stay in it longer than I should have stayed in, was because the question was asked of me by even my grandmother, what are you doing wrong? That's causing him to beat you. What are you doing wrong? Are you not cooking? Are you not cleaning? Are you not having sex? What is it you're doing? Because a man is just not going to beat you for no reason, you have to be doing something."

**Sub-categories: Coping and Prayer**

Given the level of religious involvement among African Americans, it was not unexpected that African American Christian females, according to Nguyen (2018), often use religion and faith as coping mechanisms for many personal problems and intimate partner violence. However, coping among abused African American women vary based on the perception of abuse and religious beliefs about marriage. Qualitative research showed that some African American females perceived between abuse and beatings, with beatings defined as severe intimate partner violence (Bent-Goodley, 2013). However, where a woman endures pushing, shoving, slapping, and verbal aggression, the abuse is described as a benign, tolerable form of violence (not IPV; 2013). During the study, two females experienced verbal abuse and were the only females who remained in their marriage.

In contrast, the females who reported physical and sexual abuse finally left their partners and remarried. However, coping and prayer were persistent categories throughout the study. All participants in this study reported religious coping, such as prayer and attending church. Four participants reported spending time with their children as a coping mechanism. Another participant turned to alcohol, but they all said prayer was the primary tool for coping with the violence.

**Table 11***Coping and Payer*

Participants	Responses
Velma	"Well, coping for me looks like journaling. But, of course, writing, I did a lot of praying, I will say my personal relationship with the Lord definitely strengthened during that time because that's all I had to believe in was his faith and that he would keep me, and His grace would carry me."
Sally	"Every time I was abused, and I remember one time we one of his, the other soldiers advised me not to tell his commanding officer that he hit me because they would put him in the stockade. And so, a lot of that physical abuse was not shared. And I just And I just dealt with it. You know, I prayed a lot."
Patricia	"So, I did stay there, you know, and dealt with, and it was thinking and praying that it would get better."
Nancy	"My mom, she just never really said anything. But she said she kept praying; she would just keep praying and keep praying."
Norma	"I got that...that advice that sometimes a wife can bring around a husband if you are constantly in the Word and praying. So, I coped with it; one was going to church, and I was just away."
Janice	"So, I mean, he just did whatever he thought he was big and bad enough to do. And so, I just kept praying and talking to the Lord about it. And then God said, don't worry about it."
Pamela	"And I kept praying because I did not know the only thing, I ever knew was my church. It was a Holiness Church that I went to, and we were not allowed to fellowship with other churches."

**Summary**

The lives of African American females are often very religious, and despite this, the females often describe their lives positively. Although participants generally found religious life and socialization necessary and self-identified as religious and spiritual, they credited family members with positively impacting their feelings about religion and spirituality. Young adults did not significantly differ from older adults in the influence that mother, father, grandmother, brother(s), and sister(s) had on feelings about religion, spirituality, and intimate partner violence.

The females in this study had similar views regarding religion and intimate partner violence, from which several categories were derived. The narratives to describe these views: are mental health, religion, silencing, witnessing intimate partner violence during childhood, and staying versus leaving their violent spouses. Two sub-categories were identified, which were coping and prayer. Some participants lived with the violence and experienced mental well-being by coping with their situations through prayer and receiving counsel from spiritual leaders. Staying and leaving were often decided based on the family's needs or that the females did not want to be alone. However, when combined with a deficient environment and a lack of victim assistance, physical and mental disease can be burdensome and unpleasant for people.

## **CHAPTER FIVE: CONCLUSION**

### **Overview**

This phenomenological study aims to describe African American Christian females' experiences with Intimate Partner Violence in Georgia. In addition, the study aimed to research religious effects on African American Christian females' decision-making regarding IPV in Georgia. A qualitative study of African American Christian females living within Georgia was practical in studying the phenomenon of African American Christian ladies who do not leave but also remain in violent relationships. This chapter will summarize the findings and the implications in light of the relevant literature and theory, an implications section, an outline of the study delimitations and limitations, and recommendations for future research.

### **Summary of Findings**

This study shows the experiences of seven African American Christian females who experienced IPV and religious connections. Specifically, the study addressed whether religion negotiated the decision to remain in violent relationships. The females ranged from 25 to 75 years old, all married for two years or more, education was from high school to four or more years of college, and each was employed at some time. Intimate partner violence for the individual female regarding socioeconomics, education, marital status, and age was not significant based solely on demographic factors. However, their socioeconomic level was indicated as a factor regarding the effects of religion and IPV. Theoretically, there were four theoretical frameworks that this study depended upon Religious Coping, Silencing Self, the Sociological, and Ecological Systems theory. The violence and religious connection were determined by answering three questions: RQ1: How do African American Christian females describe their experiences with a violent partner? RQ2: How do African American Christian



females describe the role of religion in their decision to stay in a violent relationship? RQ3: How do African American Christian females describe, if any, their counseling experiences for IPV experiences?

Although this is not a comprehensive delineation of African American females' experience, the results exemplify how African American females define and experience both the effects of intimate partner violence and religion. The females in this study reported experiencing intimate partner violence-related incidents, including being fearful, concerned for safety, injuries requiring the need for medical care, needing help from law enforcement, and losing at least one day out of work. These reports were consistent with the findings given by Smith et al. (2017). In addition, each participant reported poor mental health, which they coped with mainly through prayer. Furthermore, participants reported that clergy or friends of violent spouses usually influenced reasons for remaining in violent relationships.

Participants described their experience with IPV as being afraid for their lives, the lives of their families, and the well fair of their children. They reported being threatened, hit, stalked, and sexually, verbally, and emotionally abused. Most participants suffered in silence for fear of being judged or as a reaction to directions given by religious leaders (pastors, bishops, elders). One female described seeking help as hopeless, even when there was police involvement. Some females noted that professional counseling was frowned upon in their neighborhood, which was not an intervention for people in their community. Others who participated in the study said seeking professional treatment was not an option.

The role of religion was significant in each of these participants' lives. Some females even saw religion as the strength to remain in violent relationships. One participant specified religion as why she stayed longer than she should have. All participants noted that using

scripture or understanding scripture played a significant part in whether they stayed or left their violent relationship. Consideration was given before leaving the violence due to needing finances and their children's welfare. Although some participants could not recall scriptures given to them by others, all but one of them were concerned that divorce was not God's will for their marriage. Subsequently, the females endured abuse by their spouses in fear of not pleasing God.

The counseling experiences of these participants were primarily limited to spiritual leaders such as pastors, bishops, and elders. However, Bent-Goodley et al. (2015) noted that spiritual leadership sometimes provided potentially harmful interventions (i.e., couples' counseling, or lacked safety risk assessment). Family members also served as support systems for these participants and offered counsel. Participants' families sometimes recommended they leave their violent partners, whereas others were encouraged to remain. In some cases, participants were told by spiritual leaders to "go home and serve their spouses or asked by family members what they were doing to make their spouse unhappy." The prophecies provided gave participants the hope that their marriages would improve. Though this is not an exhaustive delineation of African American females' experience, it does characterize how many African American females define and experience intimate partner violence and religion and how they intersect.

### **Discussion**

Intimate partner violence is a worldwide epidemic that affects all social and gender statuses. The Christian community is not exempt from this phenomenon. Intimate partner violence (IPV) influences all populations, irrespective of race, schooling, or financial status. As previously mentioned, African American females are excessively influenced, as was already mentioned (43.7%) compared to Caucasian counterparts (34.6%; Shaw et al., 2020). While

studies show that religious associations and pastorships are critical in averting and reacting to IPV among African American females, there is a restricted exploration of this subject. More studies should include African American females; however, most examinations have concentrated on African American males in church (2020).

This study sought to understand the effects of intimate partner violence in the lives of African American Christian females. A phenomenological study was designed to gather insight and bring awareness to the experiences of African American Christian females with IPV. The central phenomenon of the study aimed to broaden the knowledge of religious effects on African American Christian females' decision-making regarding IPV in the state of Georgia. Utilizing the four theoretical frameworks, Religious Coping, Silencing Self, Sociological, and Ecological Systems theory, this research discovered that many females in this study seem to rely on their religious and spiritual teachings, faiths, and customs to cope with life's complications, trials, pressure, and troubles. Therefore, the results of the spiritual lessons and insight were intensely connected. However, previous research has revealed conflicting findings on the protective role of spirituality and the positive outcomes of these lessons (Oni-Ojo et al., 2014).

Many African American females in this study found meaning and comfort during distress and confusion through their religious systems. However, according to Abu-Raiya and Pargament (2015), religious control does not guarantee a healthy response. Anxiety, depression, and fear were standard reports among the females in this study who looked to religion to maintain their relationships. Research has shown relatively high levels of commitment to religion among African American and the vital role religious coping plays in their well-being (The Pew Research Center, 2015). Results from this study indicated that African American females who reported higher levels of spirituality and greater religious involvement remained in violent relationships,

especially if they had children. They silenced their feelings, thoughts, and actions to maintain intimate relationships, escape any relationship confrontation, and maintain intimacy and safety. Self-blame, concern for family, and concern for their children were the most common factors that fueled the silencing of females regardless of social factors. Reports of alcohol use to numb the pain of IPV were reported in some cases when judged poorly by religious leaders.

Little attention has been given to Black clergy leaders' response to intimate partner violence against African American females, considering the high dependence on their faith and church to direct their experiences with IPV (Tedder & Smith, 2018). Williams and Jenkins (2019) recognized the significance of spiritual/religious abuse of females of color who are committed to their faith. The higher the church attendance, the more likely these females were to seek counseling from religious leaders to manage violence in the home versus leaving the relationship. The females in this study often were encouraged to endure the abuse, hoping that things would change and place them in further danger. They also looked to scriptures given by spiritual leaders to confirm their relationships. Bent-Goodley et al. (2015) found that religious/spiritual leaders who provide counseling sometimes provide potentially harmful interventions (i.e., couples' counseling or lack of safety risk assessment).

Social support did not mediate the relationship between religious involvement and adverse mental health outcomes; however, religious coping did mediate the relationship between spirituality and adverse mental health outcomes. These findings would be relative to religious-oriented individuals who rely more extensively on spiritual than natural resources to address stressors and family problems, as Williams and Jenkins (2019) reported. The females revealed during their interviews that deciding to stay or leave the violent partner was predicated upon their financial status, understanding of scriptures, and provision for their children. Some feared

harm to family members or themselves, but the decisions were mostly connected to their religious beliefs. This posit would correspond with Cravens et al. (2015), who divided motives for separation or staying in an abusive relationship into internal and external groups. Internal inhibitory reasons are beliefs about self and limiting situations (2015). Some participants in this study specified instances where their violent partner constantly attacked their self-esteem. Such beliefs may be rational and precise; for example, she fears that an intimidating partner will make her life difficult or fight for custody of the children (2015). However, distorted beliefs, such as negative beliefs about self-worth or minimization of the problem, may also occur (2015).

Neglect of cultural and religious diversity in psychotherapy is concerning. Most of the females in this study either were unaware of professional counseling outside of church or counseling was unacceptable in the religious community. During the interviews, participants reported either being unaware of professional counseling or noting that counseling in their community was not considered normal and frowned upon. The self-silencing theory speaks to the females who silence themselves regarding formal or informal sharing outside the home or seeking help influencing poor mental well-being. London et al. (2012) stated that cultural norms might influence IPV reporting, especially for African American females who have been socialized to sacrifice themselves. Subsequently, the person would likely be unwilling to participate or disclose during sessions.

According to Di Giuseppe et al. (2021), psychologists have begun to understand intentionally, acknowledge, and purposefully value the underlying importance of clients' cultural backgrounds and histories. Understanding cultural backgrounds and histories is essential to improve and make changes in the African American community, particularly highly religious females. In addition, such efforts could break barriers to addressing mental health issues and the

lack of trust in the proper support. For example, therapy with a secular therapist could threaten religious values among highly religious clients (Greenidge & Baker, 2012). Therefore, bringing awareness about this phenomenon is a beneficial contribution to educating religious leaders and other professionals who counsel African American females.

### **Implications**

This study highlighted the role of significant variables regarding abused African American Christian females to promote support and improvement in best practices in working with African American Christian females and addressing their mental well-being (Wiley, 2016). Implications of African American Christian females in this study looked to the religious community as a support system and problem-solving. Further implications show that professionals and religious leaders should rethink old methodologies for solving problems in the African American community. It is essential to understand the limitation of spiritual counseling and the responsibility of referring those with mental issues to qualified counselors. Attention to the meaning-making of abuse takes time and patience of those who counsel abused African American females. In addition, it is crucial to discern the fear of being alone or threats of poverty, which influences remaining in a violent situation that requires outside resources such as shelters or seeking employment.

Four theoretical theories provided a foundation and relevance for this study, religious coping, silence-self, sociological, and the ecological system theory. Additionally, the theories help to explain the problem of IPV in the lives of African American Christian females. This study implicated the following theories in self-value perception and how religion affects intimate relationships as African American Christian African females.

### **Religious Coping**

The religious coping theory regarding this study implicated that human phenomena are multifaceted. Participants reported utilizing religious coping such as prayer and attending church. These mechanisms for coping assist participants in managing and decreasing depressed moods and other mental health issues. Scriptures were also used to maintain their relationships and were essential to their decisions making process. However, not all religious coping showed positive results. According to other studies, religious coping produces desirable results, while some experience poor health, depression, and anxiety (Abu-Raiya & Pargament, 2015).

### **Silencing Self-theory**

Silencing self-theory recognized a relational strategy where the female silenced certain feelings, thoughts, and actions to maintain intimate relationships, escape any relationship confrontation, and maintain intimacy and safety. The research related to this theory has dramatically increased, indicating that this might somewhat explain the significant gap in the prevalence of specific psychological disorders like depression in females (Maji & Dixit, 2019). Using this theory, the researcher sought to understand the schema and association of silencing behaviors such as quieting the self and externalized self-perceptions, which could also be related to depressive symptoms among African American Christian females. Subsequently, using this theory implicated an essential need for the participants to preserve and maintain a positive family image in and out of the church community.

### **Sociological Theories**

According to Lawson (2012), the psychologist explained IPV as an individual pathology; however, social theories express IPV as conflict within the family, which is best understood by examining social structures contributing to violence. Using the sociological theory in this study

implicated that using IPV to respond to a conflict was a regular part of the participant's family life. These participants grew up in environments that utilized violence to control their family relationships from generation to generation. The implication of this study also indicated a need to bring awareness to cycles of IPV in African American families regarding conflict resolution.

### **The Ecological Systems Theory**

The ecological systems theory asserts that different environmental systems influence human development, such as the violent childhood experienced by these participants. Subsequently, this study utilized the ecological systems theory to examine violence to resolve conflicts within the family. Implications showed that many participants witnessed IPV in the home during their childhood by their parents. Furthermore, it was significant that all the spouses of these participants grew up in a home where there was violence, as expressed by their parents.

### **Delimitations and Limitations**

Delimitations associated with this research include participants aged 25 to 75, indicating a level of maturity and insight needed for such a serious topic. Secondly, the females were required to be African American Christian females in a partnered relationship (married for at least 2 years) with past lived experiences of intimate partner violence. Studies indicated that 21% of marriages end within the first two years, so the delimitations lines connected with the first two years of marriage (Quinn & Odell, 1998). Finally, participants must reside in Georgia because a critical sample would be chosen to provide information and opportunity for future research. This criterion was established due to the purpose of the study, which was to describe African American Christian females' experiences with Intimate Partner Violence in Georgia. The focus on African American Christian females emerged from other studies, mainly on Caucasian females. Research showed that African American females had been understudied in this area.



One limitation of this study was the small convenience sample, resulting in a lack of diversity among the participants. Recipients of the survey were all married, lived in Georgia at the time of the study, and were predominantly non-denominational. Additionally, all the participants were over the age of 50, except for one who was between 25 and 35 years old. More than half the participants were born in the early 1950s and grew up in an era when patriarchy was the social norm, and women stayed home to keep house and care for the family, which could influence their perspectives.

### **Recommendations for Future Research**

This qualitative study was done on a small scale in a particular geographic area. However, it provides implications for future research on social policy and social work methods among African American Christian females. These future studies should include more African American Christian females. Further studies are needed to analyze mental and physical health disparities, social and economic systems, and cultural understanding of African American Christian females of the same sex and other regions. Further recommendations for education to assist these females in making healthy decisions regarding IPV could be beneficial. Moreover, continuous training and education should take place among religious leaders to appropriately advise these females.

Additionally, infidelity was a factor related to intimate partner violence but was not considered abuse by participants. According to Pichon et al. (2020), infidelity and romantic jealousy are commonly cited as relational-level drivers of intimate partner violence but remain in lack theorized and utilized in IPV research and prevention. Therefore, the qualitative nature of this study is primarily exploratory and intended to gather a list of meaning-making responses of African American Christian females that can lead to testable, quantitative hypotheses in future

studies. Subsequently, future studies on the correlation between infidelity and intimate partner violence should be studied.

### **Summary**

A qualitative investigation was done to understand the effects of intimate partner violence (IPV) on African American Christian females and how it intersects with their perception of religion. Three research questions were established to understand this phenomenon, and four theological theories were used to assess the content and context of information discussed in the findings. There were eleven questions created to guide the interviews.

The importance of addressing IPV in the African American Christian community is to find ways to decrease the violence through spiritual counseling and other counseling professionals. While proof shows that religious associations and pastorates assume critical parts in averting and reacting to IPV among African American females, restricted exploration has been done on this subject. This study's findings add to the body of knowledge regarding the critical role of clergy in responding to victims/survivors of IPV. In addition, it will address some situations where cultural and religious diversity has gone unnoticed in psychotherapy, particularly in the African American community.

Alarmingly, most African American Christian females in this study were unaware of professional help for violence outside of the church and police. Some reported that professional health outside the church was unacceptable in the religious community. Subsequently, they remained in violent relationships while suffering in silence. Most of these females suffered in silence primarily due to their religious beliefs. As a result, they reported mental health decline and coping mechanisms of trusting God while praying and believing for change. Consequently,

African American Christian females need much education on IPV and the supports that are accessible.

The Black church is still a pillar in the African American community. However, the Black church needs to explore how clergy and their congregations can intentionally and effectively support survivors of IPV. Lastly, a survey of the perceptions of church support in all regions, ethnically and religiously diverse communities in Georgia, and across the country should be examined.

### References

- Abrams, J. A., Hill, A., & Maxwell, M. (2019). Underneath the mask of the strong black woman schema: Disentangling influences of strength and self-silencing on depressive symptoms among US black women. *Sex Roles, 80*(9), 517–526.  
<https://pubmed.ncbi.nlm.nih.gov/31086431>
- Abrams, J. A., Maxwell, M., Pope, M., & Belgrave, F. Z. (2014). Carrying the world with the grace of a lady and the grit of a warrior: Deepening our understanding of the "Strong Black Woman" schema. *Psychology of Women Quarterly, 38*(4), 503–518.  
<https://doi.org/10.1177/0361684314541418>
- Abu-Raiya, H., & Pargament, K. I. (2015). Religious coping among diverse religions: Commonalities and divergences. *Psychology of Religion and Spirituality, 7*(1), 24–33.  
<https://doi.org/10.1037/a0037652>
- Ademiluka, S. O. (2019). Reading 1 Corinthians 7:10–11 in the context of intimate partner violence in Nigeria. *Verbum Et Ecclesia, 40*(1), 1–11.  
<https://doi.org/10.4102/ve.v40i1.1926>
- Alaggia, R., Regehr, C., & Jenney, A. (2012). Risky business: An ecological analysis of intimate partner violence disclosure. *Research on Social Work Practice, 22*(3), 301–312.  
<https://doi.org/10.1177/1049731511425503>
- Al-Alosi, H. (2020). Fighting fire with fire: Exploring the potential of technology to help victims combat intimate partner violence. *Aggression and Violent Behavior, 52*, 101376.  
<https://doi.org/10.1016/j.avb.2020.101376>
- Algorani, E. B., & Gupta, V. (2021). *Coping mechanisms*. StatPearls [Internet].  
<https://europepmc.org/books/n/statpearls/article-105825>

- Ali, P. A., & Naylor, P. B. (2013). Intimate partner violence: A narrative review of the feminist, social and ecological explanations for its causation. *Aggression and Violent Behavior, 18*(6), 611–619. <https://doi.org/10.1016/j.avb.2013.07.009>
- Alokan, F. B. (2013). Domestic violence against women: A family menace. *European Scientific Journal, 9*(19), 24–26. <https://eujournal.org/index.php/esj/article/view/1317/0>
- Al'Uqdah, S. N., Maxwell, C., & Hill, N. (2016). Intimate partner violence in the African American community: risk, theory, and interventions. *Journal of Family Violence, 31*(7), 877–884. <https://doi.org/10.1007/s10896-016-9819-x>
- 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. <https://doi.org/10.1177/1077801212470543>
- Anfara, V. A., Jr., & Mertz, N. T. (Eds.). (2014). *Theoretical frameworks in qualitative research*. Sage.
- Anyikwa, V. A. (2015). The intersections of race and gender in help-seeking strategies among a battered sample of low-income African American women. *Journal of Human Behavior in the Social Environment, 25*(8), 948–959. <https://doi.org/10.1080/10911359.2015.1047075>
- Avent Harris, J. R. (2021). The Black superwoman in spiritual bypass: Black women's use of religious coping and implications for mental health professionals. *Journal of Spirituality in Mental Health, 23*(2), 180–196. <https://doi.org/10.1080/19349637.2019.1685925>
- Azziz-Baumgartner, E., McKeown, L., Melvin, P., Dang, Q., & Reed, J. (2011). Rates of femicide in women of different races, ethnicities, and places of birth: Massachusetts, 1993-2007. *Journal of Interpersonal Violence, 26*(5), 1077–1090. <https://pubmed.ncbi.nlm.nih.gov/20522891>

- Barrett, B. J., & Pierre, M. S. (2011). Variations in women's help-seeking in response to intimate partner violence: Findings from a Canadian population-based study. *Violence Against Women, 17*(1), 47–70. <https://doi.org/10.1177/1077801210394273>
- Behnke, A. O., Ames, N., & Hancock, T. U. (2012). What would they do? Latino church leaders and domestic violence. *Journal of Interpersonal Violence, 27*(7), 1259–1275. <https://doi.org/10.1177/0886260511425246>
- Bent-Goodley, T. B. (2013). Domestic violence fatality reviews and the African American community. *Homicide Studies, 17*(4), 375–390. <https://doi.org/10.1177/1088767913497949>
- Bent-Goodley, T., & Brade Stennis, K. (2015). Intimate partner violence within church communities of African ancestry. In Johnson, A. (Eds.), *Religion and Men's Violence Against Women*. Springer. [https://doi.org/10.1007/978-1-4939-2266-6\\_8](https://doi.org/10.1007/978-1-4939-2266-6_8)
- Bent-Goodley, T., Henderson, Z., Youmans, L., & St Vil, C. (2015). The role of men of faith in responding to domestic violence: Focus group themes. *Social Work and Christianity, 42*(3), 280–295. <https://www.proquest.com/openview/d50bacdda7ec71f7c352836eae45379d/1?pq-origsite=gscholar&cbl=40430>
- Black, M. C. (2011). Intimate partner violence and adverse health consequences: Implications for clinicians. *American Journal of Lifestyle Medicine, 5*, 428–439. <https://doi.org/10.1177/1559827611410265>
- Bogen, K. W., Bleiweiss, K., & Orchowski, L. M. (2019). Sexual violence is #NotOkay: Social reactions to disclosures of sexual victimization on twitter. *Psychology of Violence, 9*(1), 127–137. <https://doi.org/10.1037/vio0000192>

- Bonomi, A. E., Anderson, M. L., Rivara, F. P., & Thompson, R. S. (2009). Health care utilization and costs associated with physical and nonphysical-only intimate partner violence. *Health Services Research, 44*(3), 1052–1067. <https://doi.org/10.1111/j.1475-6773.2009.00955.x>
- Braganza, M. E., Hoy, S., & Lafrenière, G. (2021). “They are my family”: exploring the usage of spiritual and religious supports by survivors of intimate partner violence. *Journal of Religion & Spirituality in Social Work: Social Thought, 1–28*.  
<https://doi.org/10.1080/15426432.2021.1955427>
- Breidling, M. J., Chen, J., & Black, M. C. (2014). *Intimate partner violence in the United States – 2010*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Brice-Baker, J. R. (1994). Domestic violence in African American and African-Caribbean families. *Journal of Social Distress and the Homeless, 3*, 23–38.  
<https://doi.org/10.1007/BF02087357>
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Harvard University Press.  
<https://www.hup.harvard.edu/catalog.php?isbn=9780674224575>
- Bryant-Davis, T., Ullman, S. E., Tsong, Y., & Gobin, R. (2011). Surviving the storm: the role of social support and religious coping in sexual assault recovery of African American women. *Violence Against Women, 17*(12), 1601–1618.  
<https://doi.org/10.1177/1077801211436138>
- Burr, W. R., Marks, L. D., & Day, R. D. (2011). *Sacred matters: Religion and spirituality in families*. Routledge.

- Caetano, R., Schafer, J., & Cunradi, C. B. (2017). Alcohol-related intimate partner violence among white, black, and Hispanic couples in the United States. In *Domestic violence* (pp. 153–160). Routledge.
- Campbell, A. M., Hicks, R. A., Thompson, S. L., & Wiehe, S. E. (2020). Characteristics of intimate partner violence incidents and the environments in which they occur: Victim reports to responding law enforcement officers. *Journal of Interpersonal Violence, 35*(13-14), 2583–2606. <https://doi.org/10.1177/0886260517704230>
- Captari, L. E., Hook, J. N., Hoyt, W., Davis, D. E., McElroy-Heltzel, S. E., & Worthington Jr, E. L. (2018). Integrating clients' religion and spirituality within psychotherapy: A comprehensive meta-analysis. *Journal of Clinical Psychology, 74*(11), 1938–1951. <https://doi.org/10.1002/jclp.22681>
- Casimir, A., Nwaoga, C. T., Ogbzor, R., & Chrysanthus, F. (2014). Religion, violence, poverty and underdevelopment in West Africa: issues and challenges of Boko Haram phenomenon in Nigeria. *Open Journal of Philosophy, 4*(01), 59–67. <https://doi.org/10.4236/ojpp.2014.41009>
- Catalano, S., Snyder, H., & Rand, M. (2009). *Female victims of violence: Selected findings*. U.S. Department of Justice, Bureau of Justice Statistics. <https://www.ojp.gov/library/publications/female-victims-violence>
- Centers for Disease Control and Prevention. (2008). Adverse health conditions and health risk behaviors associated with intimate partner violence – United States, 2005. *MMWR 2008, 57*, 113–117. <https://doi.org/10.1001/jama.300.6.646>



Centers for Disease Control and Prevention. (2018). *Intimate partner violence: Consequences*. CDC.

<https://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html>

Chang, J. C., Dado, D., Ashton, S., Hawker, L., Cluss, P. A., & Buranosky, R. (2006).

Understanding behavior change for women experiencing intimate partner violence:

Mapping the ups and downs using the stages of change. *Patient Educ Couns*, 62, 330–339. <https://doi.org/10.1016/j.pec.2006.06.009>

Chatters, L. M., Nguyen, A., Taylor, R., & Hope, M. (2018). Church and family support networks and depressive symptoms among African American: Findings from The National Survey of American Life. *Journal of Community Psychology*, 46, 403–417. <https://doi.org/10.1002/jcop.21947>

Chatters, L. M., Taylor, R., Jackson, J., & Lincoln, K. (2008). Religious coping among African Americans, Caribbean Blacks and Non-Hispanic Whites. *Journal of Community Psychology*, 36, 371–386. <https://pubmed.ncbi.nlm.nih.gov/21048887>

Chatters, L. M., Taylor, R. J., Woodward, A. T., & Nicklett, E. J. (2015). Social support from church and family members and depressive symptoms among older African American. *The American Journal of Geriatric Psychiatry*, 23(6), 559–567. <https://doi.org/10.1016/j.jagp.2014.04.008>

Chenail, R. J. (2009). Interviewing the investigator: Strategies for addressing instrumentation and researcher bias concerns in qualitative research. *Qualitative Report*, 13(1), 14–21. <https://doi.org/10.46743/2160-3715/2009.2821>

Chhikara, P., Jakhar, J., Malik, A., Singla, A., & Dhatarwal, S. K. (2013). Domestic violence:

The dark truth of our society. *Journal of Indian Academy of Forensic Medicine*, 35(1),

71–75. <http://medind.nic.in/jal/t13/i1/jalt13i1p71.pdf>

Chisale, S. S. (2018). Domestic abuse in marriage and self-silencing: Pastoral care in a context of

self-silencing. *HTS: Theological Studies*, 74(2), 1–8.

<https://doi.org/10.4102/hts.v74i2.4784>

Choi, Y. J. (2015). Korean American clergy practices regarding intimate partner violence:

Roadblock or support for battered women? *Journal of Family Violence*, 30(3), 293–302.

<https://doi.org/10.1007/s10896-015-9675-0>

Clark, R. (2015). Is there peace within our walls? Intimate partner violence and white mainline

protestant churches in North America. In A. Johnson (Ed.), *Religion and Men's Violence*

*Against Women* (pp. 195–206). Springer. [https://doi.org/10.1007/978-1-4939-2266-6\\_12](https://doi.org/10.1007/978-1-4939-2266-6_12)

Cox, K., & Diamant, J. (2018, September 26). Black men are less religious than black women,

but more religious than white women and men. *Fact Tank: News in the Numbers*.

<https://www.pewresearch.org>

Cravens, J. D., Whiting, J. B., & African Americanmar, R. O. (2015). Why I stayed/left: An

analysis of voices of intimate partner violence on social media. *Contemporary Family*

*Therapy*, 37(4), 372–385. <https://psycnet.apa.org/record/2015-44863-001>

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry & research design: Choosing among*

*five approaches* (4th ed.). Sage.

Davis, M. (2015). Theorizing religious abuse within the context of intimate partner violence: The

African American community. *Journal of Black Sexuality and Relationships*, 1(4), 45–61.

<https://doi.org/10.1353/bsr.2015.0009>

- Davis, M., & Jonson-Reid, M. (2020). The dual use of religious-faith in intimate partner abuse perpetration: Perspectives of Latino men in a parish-based intervention program. *Social Work and Christianity, 47*(4), 71–95.  
<https://www.proquest.com/openview/43e92e361c4c260a95fcd805badbb6a0/1?pq-origsite=gscholar&cbl=40430>
- Davis, M., & Johnson, M. (2021). Exploring black clergy perspectives on religious/spiritual related domestic violence: First steps in facing those who wield the sword abusively. *Journal of Aggression, Maltreatment & Trauma, 30*(7), 950–971.  
<https://doi.org/10.1080/10926771.2020.1738615>
- Decker, M. R., Holliday, C. N., Hameeduddin, Z., Shah, R., Miller, J., Dantzler, J., & Goodmark, L. (2019). “You do not think of me as a human being”: Race and gender inequities intersect to discourage police reporting of violence against women. *Journal of Urban Health, 96*(5), 772–783. <https://doi.org/10.1007/s11524-019-00359-z>
- Di Giuseppe, M., Perry, J. C., Prout, T. A., & Conversano, C. (2021). Recent empirical research and methodologies in defense mechanisms: Defenses as fundamental contributors to adaptation. *Frontiers in Psychology, 12*. <https://doi.org/10.3389/fpsyg.2021.802602>
- Dillon, G., Hussain, R., Loxton, D., & Rahman, S. (2013). Mental and physical health and intimate partner violence against women: A review of the literature. *International Journal of Family Medicine, 313909*. <https://doi.org/10.1155/2013/313909>
- Dollahite, D. C., Marks, L. D., & Dalton, H. (2018). Why religion helps and harms families: A conceptual model of a system of dualities at the nexus of faith and family life. *Journal of Family Theory & Review, 10*(1), 219–241. <https://doi.org/10.1111/jftr.12242>

- Dollahite, D. C., Marks, L. D., & Young, K. P. (2019). Relational struggles and experiential immediacy in religious American families. *Psychology of Religion and Spirituality, 11*(1), 9–. <https://psycnet.apa.org/record/2017-53718-001>
- Domenech del Rio, I., & Sirvent Garcia del Valle, E. (2017). The consequences of intimate partner violence on health: A further disaggregation of psychological Violence—Evidence from Spain. *Violence Against Women, 23*(14), 1771–1789. <https://doi.org/10.1177/1077801216671220>
- Donovan, R. A., & West, L. M. (2015). Stress and mental health: Moderating role of the strong Black woman stereotype. *Journal of Black Psychology, 41*(4), 384–396. <https://doi.org/10.1177/0095798414543014>
- Drumm, R. D., Thayer, J., Cooper, L. L., Mayer, S., Foster, T., Gadd, H., & Brayak, K. (2018). Clergy training for effective response to intimate partner violence disclosure: Immediate and long-term benefits. *Journal of Religion & Spirituality in Social Work: Social Thought, 37*(1), 77–93. [https://aquila.usm.edu/fac\\_pubs/18166](https://aquila.usm.edu/fac_pubs/18166)
- Eden, K. B., Perrin, N. A., Hanson, G. C., Messing, J. T., Bloom, T. L., Campbell, J. C., Gielen, A. C., Clough, A. S., Barnes-Hoyt, J. S., & Glass, N. E. (2015). Use of online safety decision aid by abused women: effect on decisional conflict in a randomized controlled trial. *American Journal of Preventive Medicine, 48*(4), 372–383. <https://doi.org/10.1016/j.amepre.2014.09.027>
- Edwards, K. M., & Sylaska, K. M. (2013). The perpetration of intimate partner violence among LGBTQ college youth: The role of minority stress. *Journal of Youth and Adolescence, 42*, 1721–1731. <https://doi.org/10.1007/s10964-012-9880-6>

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), 383–393. <https://doi.org/10.1037/1099-9809.10.4.383>

Finfgeld-Connett, D. (2015). Intimate partner violence and its resolution among African American women. *Global Qualitative Nursing Research, 2*, 2333393614565182.

<https://doi.org/10.1177/2333393614565182>

Fisher, E. B. (2008). The importance of context in understanding behavior and promoting health.

*Annals of Behavioral Medicine, 35*(1), 3–18. <https://doi.org/10.1007/s12160-007-9001-z>

Fitzgerald, K. J. (2017). Understanding racialized homophobic and transphobic violence. In S. E.

Weissinger, D. A. Mack, & E. Watson (Eds.), *Violence against black bodies: An intersectional analysis of how Black lives continue to matter* (pp. 53–70). Routledge.

Galderisi, S., Heinz, A., Kastrup, M., Beezhold, J., & Sartorius, N. (2015). Toward a new definition of mental health. *World Psychiatry, 14*(2), 231–233.

<https://doi.org/10.1002/wps.20231>

Gammeltoft, T. M. (2016). Silence as a response to everyday violence: Understanding domination and distress through the lens of fantasy. *Ethos, 44*(4), 427–447.

<https://doi.org/10.1111/etho.12140>

Garcia-Moreno, C., Jansen, H. A., Ellsberg, M., Heise, L., & Watts, C. H. (2006). Prevalence of intimate partner violence: findings from the WHO multi-country study on women's health and domestic violence. *The Lancet, 368*(9543), 1260–1269.

[https://doi.org/10.1016/S0140-6736\(06\)69523-8](https://doi.org/10.1016/S0140-6736(06)69523-8)

Gezinski, L. B., Gonzalez-Pons, K. M., & Rogers, M. M. (2019). "Praying does not stop his fist from hitting my face": Religion and intimate partner violence from the perspective of survivors and service providers. *Journal of Family Issues*, 0192513X19830140.

<https://doi.org/10.1177/0192513X19830140>

Gillum, T. L. (2019). African American survivors of intimate partner violence: Lived experience and future directions for research. *Journal of Aggression, Maltreatment & Trauma*, 1–18.

<https://psycnet.apa.org/record/2019-26764-001>

Gillum, T. L., Sullivan, C. M., & Bybee, D. I. (2006). The importance of spirituality in the lives of domestic violence survivors. *Violence Against Women*, 12(3), 240–250.

<https://psycnet.apa.org/record/2006-02157-003>

Golding, J. M. (1999). Intimate partner violence as a risk factor for mental disorders: A meta-analysis. *Journal of Family Violence*, 14, 99–132.

<https://doi.org/10.1023/A:1022079418229>

Goodson, A., & Hayes, B. E. (2018). *IPV victims in developing nations: Factors that influence the decision to seek help*. <https://doi.org/10.1177/0886260518794508>

Greenidge, S., & Baker, M. (2012). Why do committed Christian clients seek counselling with Christian therapists? *Counseling Psychology Quarterly*, 25(3), 211–222.

<https://doi.org/10.1080/09515070.2012.673273>

Gulati, G., & Kelly, B. D. (2020). Domestic violence against women and the COVID-19 pandemic: What is the role of psychiatry? *International Journal of Law and Psychiatry*,

71, 101594. <https://doi.org/10.1016/j.ijlp.2020.101594>

Gustafson, K. (2013). Degradation ceremonies and the criminalization of low-income women.

*UC Irvine Law Review*, 3, 297.

<https://heinonline.org/HOL/LandingPage?handle=hein.journals/ucirvire3&div=19&id=&page=>

- Hampton, R., Oliver, W., & Magarian, L. (2003). Domestic violence in the African American community: An analysis of social and structural factors. *Violence Against Women, 9*(5), 533–557. <https://doi.org/10.1177/1077801202250450>
- Hardesty, J. L., & Ogolsky, B. G. (2020). A socioecological perspective on intimate partner violence research: A decade in review. *Journal of Marriage and Family, 82*(1), 454–477. <https://doi.org/10.1111/jomf.12652>
- Harris, J. R. A., McKinney, J. L. G., & Fripp, J. (2019). "God Is a Keeper": A phenomenological investigation of Christian African American women's experiences with religious coping. *The Professional Counselor, 9*(3), 171–184. <https://doi.org/10.15241/jrah.9.3.171>
- Healey, J. (Ed.). (2014). *Domestic and family violence*. The Spinney Press.
- Holy Bible, New International Version*. (2011). Online. <https://www.biblegateway.com> (Original work published 1973).
- Holt, C. L., Clark, E. M., & Roth, D. L. (2014). Positive and negative religious beliefs explaining the religion–health connection among African Americans. *The International Journal for the Psychology of Religion, 24*(4), 311–331. <https://doi.org/10.1080/10508619.2013.828993>
- Houston-Kolnik, J. D., Todd, N. R., & Greeson, M. R. (2019). Overcoming the "holy hush": A qualitative examination of protestant Christian leaders' responses to intimate partner violence. *American Journal of Community Psychology, 63*(1-2), 135–152. <https://doi.org/10.1002/ajcp.12278>

- Howell, K. H., Thurston, I. B., Schwartz, L. E., Jamison, L. E., & Hasselle, A. J. (2018). Protective factors associated with resilience in women exposed to intimate partner violence. *Psychology of Violence, 8*(4), 438–447. <https://doi.org/10.1037/vio0000147>
- Inozu, M., Kahya, Y., & Yorulmaz, O. (2020). Neuroticism and religiosity: The role of obsessive beliefs, thought-control strategies and guilt in scrupulosity and obsessive–compulsive symptoms among Muslim undergraduates. *Journal of Religion and Health, 59*, 1144–1160. <https://doi.org/10.1007/s10943-018-0603-5>
- Iverson, K. M., Bauer, M. R., Shipherd, J. C., Pineles, S. L., Harrington, E. F., & Resick, P. A. (2013). Differential associations between partner violence and physical health symptoms among Caucasian and African American help-seeking women. *Psychological Trauma: Theory, Research, Practice, and Policy, 5*, 158–166. <https://doi.org/10.1037/a0025912>
- Jackson, K. T., Parkinson, S., Jackson, B., & Mantler, T. (2018). Examining the impact of trauma-informed cognitive behavioral therapy on perinatal mental health outcomes among survivors of intimate partner violence (the PATH study): Protocol for a feasibility study. *JMIR Research Protocols, 7*(5), e9820. <https://doi.org/10.2196/resprot.9820>
- Johnson, K. R., & Loscocco, K. (2015). Black marriage through the prism of gender, race, and class. *Journal of Black Studies, 46*(2), 142–171. <https://doi.org/10.1177/0021934714562644>
- Kangos, K. A., & Pieterse, A. L. (2021). Examining how lesbian, gay, and bisexual Christian clients' perceptions of therapists' cultural humility contribute to psychotherapy outcomes. *Psychotherapy, 58*(2), 254–262. <https://doi.org/10.1037/pst0000375>



- Kaufman, C. C., Thurston, I. B., Howell, K. H., & Crossnine, C. B. (2020). Associations between spirituality and mental health in women exposed to adversity. *Psychology of Religion and Spirituality, 12*(4), 400–408. <https://doi.org/10.1037/rel0000254>
- Koenig, H. G., Al Zaben, F., & Khalifa, D. A. (2012). Religion, spirituality and mental health in the West and the Middle East. *Asian Journal of Psychiatry, 5*(2), 180–182. <https://doi.org/10.1016/j.ajp.2012.04.004>
- Lacey, K. K., Parnell, R., Mouzon, D. M., Matusko, N., Head, D., Abelson, J. M., & Jackson, J. S. (2015). The mental health of U.S. black women: The roles of social context and severe intimate partner violence. *BMJ Open, 5*(10), e008415. <https://doi.org/10.1136/bmjopen-2015-008415>
- Lacey, K. K., Saunders, D. G., & Zhang, L. (2011). A comparison of women of color and non-Hispanic White women on factors related to leaving a violent relationship. *Journal of Interpersonal Violence, 26*(5), 1036–1055. <https://doi.org/10.1177/0886260510376496>
- Lagdon, S., Armour, C., & Stringer, M. (2014). Adult experience of mental health outcomes as a result of intimate partner violence victimization: A systematic review. *European Journal of Psychotraumatology, 5*(1), 24794. <https://doi.org/10.3402/ejpt.v5.24794>
- Lawson, J. (2012). Sociological theories of intimate partner violence, *Journal of Human Behavior in the Social Environment, 22*(5), 572–590. <https://doi.org/10.1080/10911359.2011.598748>
- Lease, S. H., Horne, S. G., & Noffsinger-Frazier, N. (2005). Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bisexual individuals. *Journal of Counseling Psychology, 52*(3), 378–388. <https://doi.org/10.1037/0022-0167.52.3.378>

- Lelaurain, S., Graziani, P., & Monaco, G. L. (2017). Intimate partner violence and help-seeking. *European Psychologist, 22*(4), 263–281. <https://doi.org/10.1027/1016-9040/a000304>
- Lick, D. J., Durso, L. E., & Johnson, K. L. (2013). Minority stress and physical health among sexual minorities. *Perspectives on Psychological Science, 8*(5), 521–548. <https://doi.org/10.1177/1745691613497965>
- London, B., Downey, G., Romero-Canyas, R., Rattan, A., & Tyson, D. (2012). Gender-based rejection sensitivity and academic self-silencing in women. *Journal of Personality and Social Psychology, 102*(5), 961–979. <https://doi.org/10.1037/a0026615>
- Loya, R. M. (2014). The role of sexual violence in creating and maintaining economic insecurity among asset-poor women of color. *Violence Against Women, 20*(11), 1299–1320. <https://doi.org/10.1177/1077801214552912>
- Machisa, M. T., Christofides, N., & Jewkes, R. (2017). Mental ill health in structural pathways to women's experiences of intimate partner violence. *PloS ONE, 12*(4), e0175240. <https://doi.org/10.1371/journal.pone.0175240>
- Maji, S., & Dixit, S. (2019). Self-silencing and women's health: A review. *International Journal of Social Psychiatry, 65*(1), 3–13. <https://doi.org/10.1177/0020764018814271>
- Mannell, J., & Jackson, S. (2014). *Intimate partner violence in Rwanda: Women's voices*. [http://eprints.lse.ac.uk/60014/1/Mannell\\_Jackson\\_Intimate-partner-violence-Rwanda\\_Report\\_2014.pdf](http://eprints.lse.ac.uk/60014/1/Mannell_Jackson_Intimate-partner-violence-Rwanda_Report_2014.pdf)
- Marks, L. D., & Dollahite, D. C. (2017). *Religion and families: An introduction*. Routledge.
- Masci, D. (2018). *Five facts about the religious lives of Africa Americans*. Pew Research Center. <https://www.pewresearch.org/fact-tank/2018/02/07/5-facts-about-the-religious-lives-of-african-americans/>

- Mazza, M., Marano, G., Lai, C., Janiri, L., & Sani, G. (2020). Danger in danger: Interpersonal violence during COVID-19 quarantine. *Psychiatry Research*, *289*, 113046. <https://doi.org/10.1016/j.psychres.2020.113046>
- Mbadugha, E. I. (2016). Intimate partner violence and sexual violence against women: any end in sight? *International Journal of Medicine and Biomedical Research*, *5*(1), 9–18. <https://doi.org/10.14194/ijmbr.5.1.2>
- McMullin, S., Nason-Clark, N., Fisher-Townsend, B., & Holtmann, C. (2015). When violence hits the religious home: Raising awareness about domestic violence in seminaries and amongst religious leaders. *Journal of Pastoral Care & Counseling*, *69*(2), 113–124. <https://doi.org/10.1177/1542305015586776>
- Merchant, L. V., & Whiting, J. B. (2014). Discovering compassion for victims of domestic violence. *Clinical Supervision Activities for Increasing Competence and Self-Awareness*, 255–262. Wiley.
- Monk, J. K., Ogolsky, B. G., & Oswald, R. F. (2018). Coming out and getting back in: Relationship cycling and distress in same-and different-sex relationships. *Family Relations*, *67*(4), 523–538. <https://doi.org/10.1111/fare.12336>
- Moorhead, B., Boetto, H., & Bell, K. (2014). India and us: Student development of professional social work identity through a short-term study abroad program. *Social Work Education*, *33*(2), 175–189. <https://doi.org/10.1080/02615479.2013.768614>
- Moreira, D. N., & da Costa, M. P. (2020). The impact of the Covid-19 pandemic in the precipitation of intimate partner violence. *International Journal of Law and Psychiatry*, *71*, 01606. <https://doi.org/10.1016/j.ijlp.2020.101606>

- Mosha, I. H., Ezekiel, M., Onesmo, W., & Sabasaba, A. (2019). prevalence and predictors of intimate partner violence among women living in informal settlements in Iringa Tanzania: A cross sectional study. *Tanzania Journal of Development Studies*, 17(1), 1–18. <http://www.journals.udsm.ac.tz/index.php/tjds/article/viewFile/2958/2964>
- Moukaddam, N., Andry, T., Cao, J., Moon, Y. M., Tucci, V., Shah, A., & Lomax, J. W. (2019). Instant countertransference affects assessment and treatment recommendations for depression in patients openly professing religious faith. *Spirituality in Clinical Practice*, 6(2), 100–109. <https://psycnet.apa.org/buy/2018-58851-001>
- Moustakas, C. (1994). *Phenomenological research methods*. Sage.
- Naslund, J. A., Aschbrenner, K. A., Marsch, L. A., & Bartels, S. J. (2016). The future of mental health care: peer-to-peer support and social media. *Epidemiology and Psychiatric Sciences*, 25(2), 113–122. <https://doi.org/10.1017/S2045796015001067>
- Nason-Clark, N., Fisher-Townsend, B., Holtmann, C., & McMullin, S. (2018). *Religion and intimate partner violence: Understanding the challenges and proposing solutions*. Oxford University Press.
- Nguyen, A. (2018). African American elders, mental health, and the role of the church. *Generations*, 42(2), 61–67. <https://www.jstor.org/stable/26556362>
- Odine, M. (2013). Media contributions to Arab Women’s Rights. *E-International Relations*. <https://www.e-ir.info/2013/07/05/media-contributions-to-arab-womens-rights/>
- O’Doherty, L. J., Taft, A., Hegarty, K., Ramsay, J., Davidson, L. L., & Feder, G. (2014). Screening women for intimate partner violence in healthcare settings: Abridged Cochrane systematic review and meta-analysis. *BMJ*, 348. <https://doi.org/10.1136/bmj.g2913>

Office of Violence Against Women [OVW]. (2017). U.S. Department of Justice.

[https://en.wikipedia.org/wiki/Office\\_on\\_Violence\\_Against\\_Women](https://en.wikipedia.org/wiki/Office_on_Violence_Against_Women)

Oni-Ojo, E. E., Adeniji, A. A., Osibanjo, A. O., Heirsmac, P. T., & Igbinoba, E. E. (2014).

Impact of domestic abuse on female employees productivity in the Nigerian workforce.

*European Scientific Journal*, 10(26), 185–198.

<https://core.ac.uk/download/pdf/236409435.pdf>

Owusu, D. A. (2016). Mute in pain: The power of silence in triggering domestic violence in

Ghana. *Social Alternatives*, 35(1), 26–32.

<https://doi.org/10.3316/informit.243661809369078>

Perry, A. R. (2013). African American men's attitudes toward marriage. *Journal of Black*

*Studies*, 44(2), 182–202. <https://doi.org/10.1177/0021934712472506>

Petrosky, E., Blair, J. M., Betz, C. J., Fowler, K. A., Jack, S. P., & Lyons, B. H. (2017). Racial

and ethnic differences in homicides of adult women and the role of intimate partner

violence—United States, 2003–2014. *Morbidity and Mortality Weekly Report*, 66(28),

741–746. <https://doi.org/10.15585/mmwr.mm6628a1>

Pew Research Center. (2015). America's changing religious landscape. *Pew Research Center*.

Washington, DC, 2015. [https://www.pewforum.org/2015/05/12/americas-changing-](https://www.pewforum.org/2015/05/12/americas-changing-religious-landscape/)

[religious-landscape/](https://www.pewforum.org/2015/05/12/americas-changing-religious-landscape/)

Pichon, M., Treves-Kagan, S., Stern, E., Kyegombe, N., Stöckl, H., & Buller, A. M. (2020). A

mixed-methods systematic review: Infidelity, romantic jealousy and intimate partner

violence against women. *International Journal of Environmental Research and Public*

*Health*, 17(16), 5682. <https://doi.org/10.3390/ijerph17165682>

- 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. <https://doi.org/10.1016/j.avb.2020.101422>
- Prout, T. A., Goodman, G., Chung, H., & Sherman, A. (2022). Psychotherapy process in regulation focused psychotherapy for children. *Journal of Psychotherapy Integration, 32*(4), 390–407. <https://doi.org/10.1037/int0000275>
- Quinn, W. H., & Odell, M. (1998). Predictors of marital adjustment during the first two years. *Marriage & Family Review, 27*(1-2), 113–130. [https://doi.org/10.1300/J002v27n01\\_08](https://doi.org/10.1300/J002v27n01_08)
- Rees, S., Silove, D., Chey, T., Ivancic, L., Steel, Z., Creamer, M., & Forbes, D. (2011). Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function. *JAMA, 306*(5), 513–521. <https://doi.org/10.1001/jama.2011.1098>
- Reuter, T. R., Newcomb, M. E., Whitton, S. W., & Mustanski, B. (2017). Intimate partner violence victimization in LGBT young adults: Demographic differences and associations with health behaviors. *Psychology of Violence, 7*(1), 101. <https://psycnet.apa.org/buy/2016-03889-001>
- Richard, L., Gauvin, L., & Raine, K. (2011). Ecological models revisited: Their uses and evolution in health promotion over two decades. *Annual Review of Public Health, 32*, 307–326. <https://doi.org/10.1146/annurev-publhealth-031210-101141>
- Richie, B. E., & Eife, E. (2021). Black bodies at the dangerous intersection of gender violence and mass criminalization. *Journal of Aggression, Maltreatment & Trauma, 30*(7), 877–888. <https://doi.org/10.1080/10926771.2019.1703063>

- Ritchie, A. (2017). *Invisible no more: Police violence against Black women and women of color*. Beacon Press.
- Rodríguez, R. L., Rebar, D., & Fowler-Finn, K. D. (2013). The evolution and evolutionary consequences of social plasticity in mate preferences. *Animal Behaviour*, 85(5), 1041–1047. <https://doi.org/10.1016/j.anbehav.2013.01.006>
- Schnurr, M. P., Mahatmya, D., & Basche, R. A., III. (2013). The role of dominance, cyber aggression perpetration, and gender on emerging adults' perpetration of intimate partner violence. *Psychology of Violence*, 3(1), 70–83. <https://doi.org/10.1037/a0030601>
- Schuck, K. D., & Liddle, B. J. (2001). Religious conflicts experienced by lesbian, gay, and bisexual individuals. *Journal of Gay & Lesbian Psychotherapy*, 5(2), 63–82. [https://doi.org/10.1300/J236v05n02\\_07](https://doi.org/10.1300/J236v05n02_07)
- Shaw, A. R., Enriquez, M., Bloom, T., Berkley-Patton, J., & Vidoni, E. D. (2020). We are our sister's keeper: The experience of Black female clergy responding to intimate partner violence. *Journal of Interpersonal Violence*, 37(1-2), NP968–NP990. <https://doi.org/10.1177/0886260520918574>
- Sherry, A., Adelman, A., Whilde, M. R., & Quick, D. (2010). Competing selves: Negotiating the intersection of spiritual and sexual identities. *Professional Psychology: Research and Practice*, 41(2), 112–119. <https://doi.org/10.1037/a0017471>
- Shurts, W. M., Kooyman, L., Rogers, R. C., & Burlew, L. (2020). Assessing the intersectionality of religious and sexual identities during the coming-out process. *Counseling and Values*, 65(1), 15–37. [https://brill.com/view/journals/cvj/65/1/article-p15\\_3.xml](https://brill.com/view/journals/cvj/65/1/article-p15_3.xml)
- Sincero, S. M. (2012). *Ecological systems theory*. <http://explorble.com/ecological-systems-theory>.

- Sipilä, M., Hakulinen, T., Helminen, M., Seppänen, J., Paavilainen, E., & Koponen, P. (2018). Alcohol abuse, psychological distress, and suicidal thoughts are associated with intimate partner violence among parents' with children. *Mental Health & Prevention, 12*, 76–81. <https://doi.org/10.1016/j.mhp.2018.09.006>
- Smith, C. A., Elwyn, L. J., Ireland, T. O., & Thornberry, T. P. (2010). The impact of adolescent exposure to intimate partner violence on substance use in early adulthood. *Journal of Studies on Alcohol and Drugs, 71*(2), 219–230. <https://doi.org/10.15288/jsad.2010.71.219>
- Smith, C. A., Ireland, T. O., Park, A., Elwyn, L., & Thornberry, T. P. (2011). Intergenerational continuities and discontinuities in intimate partner violence: A two-generational prospective study. *Journal of Interpersonal Violence, 26*(18), 3720–3752. <https://doi.org/10.1177/0886260511403751>
- Smith, S. G., Chen, J., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., & Jain, A. (2017). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010–2012 State Report*. Atlanta, GA: National Center for Injury Prevention. <https://www.cdc.gov/violenceprevention/pdf/nisvs-staterreportbook.pdf>
- Stark, R. (2012). *America's blessings: How religion benefits everyone, including atheists*. Templeton Press.
- Stover, C. S., & Kiselica, A. (2015). Hostility and substance use in relation to intimate partner violence and parenting among fathers. *Aggressive Behavior, 41*(3), 205–213. <https://doi.org/10.1002/ab.21548>
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedure and techniques*. Sage.



- Stubbs, A., & Szoeki, C. (2021). The effect of intimate partner violence on the physical health and health-related behaviors of women: A systematic review of the literature. *Trauma, Violence, & Abuse, 23*(4), 1157–1172. <https://doi.org/10.1177/1524838020985541>
- Stylianou, A. M., Postmus, J. L., & McMahon, S. (2013). Measuring abusive behaviors: Is economic abuse a unique form of abuse?. *Journal of Interpersonal Violence, 28*(16), 3186–3204. <https://doi.org/10.1177/0886260513496904>
- Sue, D. W., Alsaïdi, S., Awad, M. N., Glaeser, E., Calle, C. Z., & Mendez, N. (2019). Disarming racial microaggressions: Microintervention strategies for targets, White allies, and bystanders. *American Psychologist, 74*(1), 128–142. <https://psycnet.apa.org/buy/2019-01033-011>
- Svanemyr, J., Amin, A., Robles, O. J., & Greene, M. E. (2015). Creating an enabling environment for adolescent sexual and reproductive health: a framework and promising approaches. *Journal of Adolescent Health, 56*(1), S7–S14. <https://doi.org/10.1016/j.jadohealth.2014.09.011>
- Szymanski, D. M., & Lewis, J. A. (2016). Gendered racism, coping, identity centrality, and African American college women's psychological distress. *Psychology of Women Quarterly, 40*(2), 229–243. <https://doi.org/10.1177/0361684315616113>
- Taylor, R. J., Chatters, L. M., & Brown, R. K. (2014). African American religious participation. *Review of Religious Research, 56*(4), 513–538. <https://doi.org/10.1007/s13644-013-0144-z>
- Tedder, M. A., & Smith, D. E. (2018). A phenomenological study: Black clergy leaders' response to violence against Women. *Pastoral Psychology, 67*(4), 429–442. <https://doi.org/10.1007/s11089-018-0821-5>

- Valandra, Murphy-Erby, Y., Higgins, B. M., & Brown, L. M. (2019). African American perspectives and experiences of domestic violence in a rural community. *Journal of Interpersonal Violence, 34*(16), 3319–3343. <https://doi.org/10.1177/0886260516669542>
- Vieten, U. M. (2018). The new year's 2015/2016 public sexual violence debate in Germany: media discourse, gendered anti-Muslim racism and criminal law. *Media, Crime and Racism, 73–92*. [https://doi.org/10.1007/978-3-319-71776-0\\_5](https://doi.org/10.1007/978-3-319-71776-0_5)
- Violence Policy Center. (2020). When men murder women. <https://vpc.org/when-men-murder-women/>
- Vogel, D. L., Bitman, R. L., Hammer, J. H., & Wade, N. G. (2013). Is stigma internalized? The longitudinal impact of public stigma on self-stigma. *Journal of Counseling Psychology, 60*(2), 311–316. <https://doi.org/10.1037/a0031889>
- Walklate, S., Fitz-Gibbon, K., & McCulloch, J. (2018). Is more law the answer? Seeking justice for victims of intimate partner violence through the reform of legal categories. *Criminology & Criminal Justice, 18*(1), 115–131. <https://doi.org/10.1177/1748895817728561>
- Waller, B. Y., Harris, J., & Quinn, C. R. (2021). Caught in the crossroad: An intersectional examination of African American women intimate partner violence survivors' help seeking. *Trauma, Violence, & Abuse, 23*(4), 1235–1248. <https://doi.org/10.1177/1524838021991303>
- Walling, S. M., Suvak, M. K., Howard, J. M., Taft, C. T., & Murphy, C. M. (2012). Race/ethnicity as a predictor of change in working alliance during cognitive behavioral therapy for intimate partner violence perpetrators. *Psychotherapy, 49*(2), 180–189. <https://doi.org/10.1037/a0025751>

- Watson-Singleton, N. N. (2017). Strong Black woman schema and psychological distress: The mediating role of perceived emotional support. *Journal of Black Psychology, 43*(8), 778–788. <https://doi.org/10.1177/0095798417732414>
- Weathers, M. R., Sanderson, J., Neal, A., & Gramlich, K. (2016). From silence to #whyistayed: Locating our stories and finding our voices. *Qualitative Research Reports in Communication, 17*(1), 60–67. <https://doi.org/10.1080/17459435.2016.1143385>
- West, C. M. (2012). Partner abuse in ethnic minority and gay, lesbian, bisexual, and transgender populations. *Partner Abuse, 3*(3), 336–357. <https://doi.org/10.1891/1946-6560.3.3.336>
- 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. <https://doi.org/10.1111/j.1752-0606.2011.00285.x>
- Wiley, C. Y. (2016). *Don't just give me that old time religion: The intersection of religion and mental well-being amongst African American Women* (Order No. 10191034) [Doctoral dissertation, Howard University]. ProQuest Dissertations and Theses Global. <https://www.proquest.com/openview/069c55ce43f044b1a943907d7c051b55/1?pq-origsite=gscholar&cbl=18750>
- Wiley, C. Y. (2020). The intersection of religion and mental well-being amongst African-American women. *Journal of Religion & Spirituality in Social Work: Social Thought, 39*(3), 225–247. <https://doi.org/10.1080/15426432.2020.1784070>
- Williams, O. (2011). *Speaking of faith: Domestic violence programs and the African American Church*. [YouTube]. <https://www.youtube.com/watch?v=MfZYcmAsufl>
- Williams, O., & Jenkins, E. (2019). A survey of Black churches' responses to domestic violence. *Social Work and Christianity, 46*(4), 21–38. <https://doi.org/10.34043/swc.v46i4.110>

Winant, G. (2016). Black women and the carceral state. *Dissent*, 63(3), 147–151.

<https://doi.org/10.1353/dss.2016.0066>Woods-Giscombé, C. L. (2010). Superwoman schema: African American women's views on stress, strength, and health. *Qualitative Health Research*, 20(5), 668–683. <https://doi.org/10.1177/1049732310361892>

World Health Organization. (2004). *Promoting mental health: concepts, emerging evidence, practice* (Summary Report). Geneva: World Health Organization.

World Health Organization. (2017). *Violence against women: Key facts*. WHO.

<https://www.who.int/news-room/fact-sheets/detail/violence-against-women>

Zingoni, M., & Corey, C. M. (2016). How mindset matters. *Journal of Personnel Psychology*, 16(1), 36–45. <https://doi.org/10.1027/1866-5888/a000171>

Zust, B. L., Flicek Opdahl, B., Moses, K. S., Schubert, C. N., & Timmerman, J. (2021). 10-year study of Christian church support for domestic violence victims: 2005–2015. *Journal of Interpersonal Violence*, 36(7–8), 2959–2985. <https://doi.org/10.1177/0886260518754473>

**Appendix A: IRB Approval**

---

**LIBERTY UNIVERSITY.**  
INSTITUTIONAL REVIEW BOARD

September 20, 2022

Rebecca Crane  
Keisha Pou

Re: IRB Approval - IRB-FY21-22-1153 THE EFFECTS OF INTIMATE PARTNER VIOLENCE (IPV) ON  
AFRICAN AMERICAN CHRISTIAN FEMALES

Dear Rebecca Crane, Keisha Pou,

We are pleased to inform you that your study has been approved by the Liberty University Institutional Review Board (IRB). This approval is extended to you for one year from the following date: September 20, 2022. If you need to make changes to the methodology as it pertains to human subjects, you must submit a modification to the IRB. Modifications can be completed through your Cayuse IRB account.

Your study falls under the expedited review category (45 CFR 46.110), which is applicable to specific, minimal risk studies and minor changes to approved studies for the following reason(s):

7. Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

Your stamped consent form(s) and final versions of your study documents can be found under the Attachments tab within the Submission Details section of your study on Cayuse IRB. Your stamped consent form(s) should be copied and used to gain the consent of your research participants. If you plan to provide your consent information electronically, the contents of the attached consent document(s) should be made available without alteration.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,

**G. Michele Baker, MA, CIP**

*Administrative Chair of Institutional Research*

**Research Ethics Office**

## Appendix B: Consent Form

**Title of the Project:** The Effects of Intimate Partner Violence (IPV) on AFRICAN AMERICAN Christian Females

**Principal Investigator:** Rebecca Crane, Doctoral Student, Liberty University

### Invitation to be Part of a Research Study

You are invited to participate in a research study. To participate, you must be 25 - 75-years-old, be an AFRICAN AMERICAN (AFRICAN AMERICAN) Christian female, be heterosexual, be in a partnered relationship which is defined as being married or cohabitating for at least 2 years or more, live in Georgia, and have former lived experience of intimate partner violence (IPV). Taking part in this research project is voluntary.

Please take time to read this entire form and ask questions before deciding whether to take part in this research.

### What is the study about and why is it being done?

The purpose of the study is to describe African-American, Christian females' experiences with Intimate Partner Violence who live in Georgia.

### What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following things:

1. Complete a demographic questionnaire (estimated completion time 10 minutes), which will be emailed to you after the signed consent form is returned to me.
2. Attend an interview via Zoom, which will be audio- and video-recorded (estimated completion time 60-90 minutes).
3. Potentially participate in a follow-up interview (estimated completion time 30 minutes) via Zoom, which will be audio- and video-recorded.
4. Review the collected data and transcripts in order to provide feedback.

### How could you or others benefit from this study?

Participants should not expect to receive a direct benefit from taking part in this study.

Benefits to society include educating Christians and those who counsel (pastors/professional) these females on how to handle this issue effectively.

### What risks might you experience from being in this study?

The risks involved in this study are minimal, which means they are equal to the risks you would encounter in everyday life. The researcher conducting this study is a mandatory reporter. By law, the investigator must report actual or suspected child or elder abuse to the appropriate authorities. In addition, the investigator has a legal responsibility to protect anyone I/he/she/we may threaten with violence (including those to myself) and may break confidentiality of communication if such a situation arises. If there are significant psychological (mental harm) risks to participation, such as cognitive deficiencies, participants will terminate their participation.

### How will personal information be protected?

The records of this study will be kept private. Published reports will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records. Data collected from you may be shared for use in future research studies or with

Liberty University  
IRB-FY21-22-1153  
Approved on 9-20-2022

Liberty University  
IRB-FY21-22-1153  
Approved on 9-20-2022

other researchers. If data collected from you is shared, any information that could identify you, if applicable, will be removed before the data are shared.

- Participant responses will be kept confidential using pseudonyms. Interviews will be conducted in a location where others will not easily overhear the conversation.
- Data will be stored on a password-locked computer and locked filing cabinet. The data may be used in future presentations. After three years, all electronic records will be deleted, and all physical records will be shredded.
- Interviews will be recorded and transcribed. Recordings will be stored on a password locked computer for three years and then erased. Only the researcher will have access to these recordings.
- The researcher will not disclose participant identities or how named, or identifiable, individuals responded.

#### How will you be compensated for being part of the study?

A \$10 Amazon gift card will be provided to participants who complete the study. The gift card will be emailed directly to you after the procedures have been completed.

#### Is study participation voluntary?

Participation in this study is **voluntary**. Your decision whether or not to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

#### What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

#### Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Rebecca Crane. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact [REDACTED]

#### Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA 24515 or email at [irb@liberty.edu](mailto:irb@liberty.edu).

*Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human subjects research will be conducted in an ethical manner as defined and required by federal regulations. The topics covered and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.*

#### Your Consent

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

*I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.*

The researcher has my permission to audio- and video-record me as part of my participation in this study.

\_\_\_\_\_  
Printed Subject Name

\_\_\_\_\_  
Signature & Date

**Appendix C: Demographic Questionnaire****What is your age?**

- 25 – 35
- 36 – 45
- 46 – 55
- 56 – 65
- 66 – 75

**Marital Status**

- Married
- Cohabiting

**Number of years (married or cohabiting)** \_\_\_\_\_**Level of Education**

- High School
- Some college
- 4 or more years of college
- Other \_\_\_\_\_

**Denomination**

- Pentecostal
- Methodist
- Baptist
- Ecumenical
- Other \_\_\_\_\_

**Employment Status**

- Full-time
- Part-time
- Temporary/contracted
- Unemployed

**Where in Georgia are you Located?** \_\_\_\_\_



## **Appendix D: Interview Guide**

### **Interview Guide**

#### **The Effects of Intimate Partner Violence (IPV) on African American Christian Females**

**Time of interview:**

**Date:**

**Location:**

**Interviewer:**

**Interviewee:**

**Married / Cohabiting:**

This interview will be conducted to receive first-hand accounts of the effects of intimate partner violence (IPV) on African American (African American) Christian females.

### **Questions**

The researcher proposes the following questions to guide the interview. The first question serves as an icebreaker to create conversation.

1. How do you, as an African American, Christian female, describe IPV?

This question will help me understand the meaning of IPV for the participant.

2. How do you describe your challenges with IPV?

This question will provide me with an understanding of violence in the participant's relationship.

3. Did you witness any childhood experiences of IPV in your home?

This question will provide validity to research regarding participants witnessing intimate partner violence in the home and the probability that they will experience intimate partner violence during adulthood.

4. How often do you, your partner, or your family attend church services?

This question provides the status of church commitment for the participant and, potentially, their family.

5. How do you describe your church involvement?

This question provides insight into church involvement.

6. How do you describe your experience as an African American, Christian female with a violent partner and your coping methods?

This question provides insight into what methods were used to cope with violence.

7. How do you describe safety issues regarding IPV?

This question helps me understand if safety issues encouraged the participant to remain in a violent relationship.

8. Describe the role of religion in your decision to stay or leave the violent relationship.

This question provides insight into participants' faith and any religious/spiritual concerns regarding leaving a violent relationship.

9. How would you describe your support system?

This question provides an opportunity to identify support systems, formal or informal (e.g., counselors, family, pastors, etc.).

10. How do you describe your feelings regarding what others think about African American Christian females' decisions to leave violent relationships?

This question identifies any concerns about what others think and its importance in participants deciding whether or not they would stay in a violent relationship.

11. Describe your fears/concerns about leaving your partner as an African American Christian female.

This question would provide insight into threats made or religious/spiritual implications for leaving a violent relationship.

**Thank you for your participation in this interview; your participation and responses will remain confidential.**

**Follow-up Interview Questions**

1. Did you receive a copy of the transcripts you requested?
2. Were there anything that appeared to be inaccurate or incorrect?
3. Is there anything you would like to change, or correct?

### Appendix E: Recruitment Email

---

Dear Participant:

As a graduate student in the School of Behavioral Sciences' Community Care and Counseling program at Liberty University, I am conducting research to understand better how the role of religion influences the decision-making of Christian African American females in Intimate Partner Violence (IPV) in Georgia. The title of my research project is The Effects of Intimate Partner Violence (IPV) On African American Christian Females. My research aims to describe African American Christian females' experiences with Intimate Partner Violence and how they feel about it. I am writing to invite eligible participants to join my study.

Participants must be between the ages of 25 to 75, be African American Christian females, live in Georgia, be heterosexual, be in a partnered relationship which is defined as being married or cohabitating for at least 2 years, and have former lived intimate partner violence (IPV) for at least two years or more. Participants, if willing, will be asked to complete a demographic questionnaire (estimated completion time 10 minutes), attend an interview via Zoom, which will be audio- and video-recorded (estimated completion time 60-90 minutes), potentially participate in a follow-up interview (estimated completion time 30 minutes), and review the collected data and transcripts in order to provide feedback. If required, follow-up interviews will be conducted via Zoom and will be audio- and video-recorded. Names and other identifying information, such as emails or contact numbers, will be requested as part of this study, but the information will remain confidential.

To participate, please contact [REDACTED] to schedule an interview.

A consent document will be emailed to you. The consent document contains additional information about my research. If you choose to participate, you will need to sign the consent document and email it to me prior to participating in any procedures. A demographic survey will be emailed to you after the signed consent document is returned to me.

Participants should expect to receive a \$10.00 Amazon gift card for taking part in the study.

Sincerely,

Rebecca Crane  
Researcher  
[REDACTED]