

**Intimate Partner Psychological Abuse:
What We Knew and What We Experienced.**

A Thesis Submitted for the Degree of Doctor of Philosophy

By

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Declaration

I, Natalie Asamoah-Russell, declare that this thesis is my original work conducted while enrolled for a PhD in Psychology at Brunel University London. No part of this thesis has been submitted elsewhere for any other degree. The empirical research featured in this thesis was carried out in accordance with the Brunel University Code of Research Ethics. Secondary resources referred to in this thesis have been acknowledged using citations and the accompanying reference list provided.

Note on Inclusion of Published Work

Some ideas presented in Chapter 5 Part Two (How Cultural and Societal Context Impacts IPPA Education) derive from a paper currently under review for publication. To reflect these overlaps, I wish to acknowledge and credit the following co-authors' contributions: Russell, N. A., Harry, M.K., Bremshey, A., Nascimento, B. S., Shishane, K. & Adair, L. Black Adolescent girls and intimate partner psychological abuse: An exploratory survey into learning experiences and future interventions (*under review*).

**Intimate Partner Psychological Abuse:
What We Knew and What We Experienced.**

Introduction to Thesis

This doctoral research is designed to contribute to a more comprehensive understanding of IPPA in adolescent relationships, using an intersectional perspective to specifically focus on the victimisation of Black adolescent girls in England and to understand how adolescent girls learn about intimate partner psychological abuse (IPPA).

Black feminism and the framework of intersectionality helps to highlight differences in how an individual or a specific group of people experience the world (Crenshaw, 2017; De Coster & Heimer, 2021). Black women and girls in England can view and experience the world through multiple lenses including the lens of girlhood/womanhood, ancestral culture lenses, English culture lenses and other subsections of their identity. However, Black women and girls also uniquely experience a world where gendered oppression (e.g. sexism and violence against women) and racial biases (e.g. anti-black racism and stereotypes about Black people) collide and intertwine uniquely to affect Black women.

To date past literature has not specifically explored IPPA perpetrated against Black adolescent girls in England. How IPPA is experienced, what is taught to Black adolescent girls about IPPA, and the factors affecting their perceptions of IPPA is not yet fully understood. As the unique IPPA experiences and needs of Black adolescent girls have not deliberately been considered in research in England, it is difficult to fully apply past studies about IPPA to the experiences of Black adolescent girls.

Thesis Aims

The aims of this thesis are to:

1. Establish a more comprehensive understanding of Black adolescent girls' experiences of psychological abuse in intimate relationships.
2. Explore how formal sources (e.g. school) and informal sources (e.g. family) contribute to Black adolescent girls' understanding of IPPA, and the extent to which cultural factors (e.g. attitudes towards intimate partner violence and parent-child communication styles) affect how IPPA is taught to Black adolescent girls.
3. Gather recommendations for improving education and interventions to reduce rates of IPPA and to appropriately support Black adolescent girls who may experience IPPA.

To achieve these aims, over the next six chapters I explore literature to contextualise the aims and need of this thesis. Past literature helps to inform an understanding of how IPPA experiences and education can differ as a function of age (Chapter 3), gender (Chapter 4), race and culture (Chapter 5), and how these factors interact to create unique experiences of IPPA (Chapter 1). I then present a collection of four empirical studies, each contributing to a more precise understanding of how adolescents learn about IPPA and how IPPA is experienced during adolescence by Black girls.

In addition to the overall research aims, throughout this doctoral research and thesis, I aimed to centre the experiences of Black girls and women. But what does this mean to me?

1) Centring Black Girls and Women's Experiences.

In Chapter 2 (Intersectionality), I draw upon literature to emphasise the importance of intentionally studying Black women and girls' experiences. For years, empirical and theoretical work within the domain of intimate partner violence has been described as 'cross-cultural' or 'representative' despite many studies being based on samples which exclude and misrepresent

Black women and girls. I often find examples in existing studies and datasets that superficially compare ethnic and racial differences without properly considering the real-world experiences of women from different racial groups (Barnes, 1999; Kelly et al., 2022). This can lead to the development of blanket conclusions based on samples which exclude and misrepresent Black women or girls, ultimately leading to theories and interventions that do not necessarily fully meet the needs of Black women and girls being applied to them. Similarly, when Black women and other marginalised groups have their experiences compared to other ethnic groups (e.g., in national statistics and research data), White samples often become the default control group or comparison group. This creates an ecosystem whereby white people's experiences are often viewed as the norm and deviation from these 'norms' starts to be seen as an issue, even when the researchers have not intentionally and meticulously explored existing intersectional variability between groups. Without explanation and intentional consideration of differences before conducting research, some researchers continue to run into the issue of upholding colonial and ethnocentric viewpoints in research. This thesis therefore studies and shares Black girls and women's experiences and views, without comparison to non-Black 'control groups.'

2) *Centring Black Girls and Women's Experiences.*

In Chapter 4, I discuss IPPA in the context of gender differences, to provide background theoretical context into why I have chosen to study women and girls experiences in this thesis. However, this thesis is not about men and generally aims to centre the stories and learning experiences of IPPA amongst Black girls and women in England.

3) *Centring Black Girls and Women's Experiences.*

In this thesis, I focus on Black women's past experiences of being psychologically abused during an adolescent intimate relationship as well as their experiences of learning about IPPA. Whilst I absolutely acknowledge that women inflict abuse and IPPA too, this thesis does

not seek to detail Black women's perpetrations of IPPA, beyond what is required for reasonable background context (as provided in Chapter 4: Gender). Black adolescent girls' experiences of IPPA victimisation have not yet been studied in the UK, and that is what this thesis explores.

It is important to note that, when studying, analysing and linking theoretical meaning (e.g. applying theories about how cultural or societal factors link to abuse) to the experiences of IPPA shared by participants in this study, I do not aim to victim-blame. I instead make these links with the intention of exemplify how unique intersectional factors may contribute to learning and abuse experiences amongst Black adolescent girls and discussing how culturally informed education can be used as a tool for protecting and safeguarding Black adolescent girls.

Summary of Key Findings

Below I provide a brief summary of the main findings of each empirical study featured in this thesis. The findings of these studies have the potential to inform improvements in interventions, training, and education offered to young people, practitioners (e.g. outreach workers, youth workers and teachers), and families about IPPA. The findings of this thesis therefore have potential benefit for several sectors, including education, children's services, and related third-sector organisations.

Study 1 | Black Adolescent girls and intimate partner psychological abuse: An exploratory survey into learning experiences and future interventions. (Russell, Harry, Bremshey, Nascimento, Shishane & Adair – Under review).

In a survey of 119 Black and mixed-race women, most participants had not explicitly learnt about IPPA at school (66.4%) and were dissatisfied with the information about IPPA that they received from their parents (64.6%) during adolescence. Several participants expressed their support for training on IPPA to be provided to teachers as well as parents, to equip them to better educate and support current and future generations of adolescents.

Study 2 | How we didn't learn about psychological abuse: Interviews and focus groups with Black women.

From focus groups and interviews with 24 Black and mixed-race women, normalisation of IPPA and violence against women, gaps in their parents' understanding about IPPA and cultural taboos surrounding adolescent relationships were found to be influential factors impacting how women had learnt about IPPA and the misconceptions about IPPA that many women had during adolescence.

Study 3 | A school-based study into adolescents' knowledge, views, and access to help surrounding abuse in intimate relationships.

In Study 3, adolescents from a school in London, UK, were asked to share their experiences of learning about IPPA and who they would feel comfortable seeking help or further information from. In addition to this, I also designed an educational workshop intervention aimed at teaching adolescents about IPPA. Participants pre-intervention and post-intervention knowledge was measured to test the effectiveness of robust IPPA workshops. Overall engaging in this intervention resulted in young people scoring slightly higher on a quiz about IPPA, as well as rating their own knowledge and confidence about IPPA higher after the intervention.

Study 4 | Unhealthy adolescent relationships: A mixed methods study into intimate partner psychological abuse of Black adolescent girls.

In a survey of 68 Black and mixed-race women, the majority (92.6%) had experienced at least one psychologically abusive act from an intimate partner between the ages of 10 and 19 years old. Women most commonly reported experiencing milder psychologically abusive acts such as being criticised or belittled by their partner. Thirteen women also participated in an interview where they shared their stories of experiencing IPPA during adolescent relationships. Each woman's story is presented in this thesis, and provides examples of Black women experiencing multiple psychologically abusive behaviours as adolescents.

Literature Review

Chapter 1 | Defining Psychological Abuse

This chapter explores definitions, behaviours, and measures of intimate partner psychological abuse (IPPA). Overall, this chapter captures the difficulty and implications of not having a universal definition of psychological abuse and describes the potential reasons for why IPPA has not yet been studied as much as other forms of abuse (e.g. physical and sexual abuse)

First, I begin by defining the umbrella term abuse, then child abuse and domestic violence, which are important to first understand when explaining what it means for an adolescent (age 10 – 19) to experience IPPA.

Abuse can be defined as the "unfair, cruel, or violent treatment of someone" (Oxford Learners Dictionaries, n.d.) and is typically subdivided into different categorises based on the behaviour displayed and the effects on the victim (e.g. physical abuse, psychological abuse and sexual abuse), or the relationship between the perpetrator and victim (e.g, intimate partner abuse, child abuse and domestic abuse). As this thesis spotlights psychological abuse in the context of adolescent intimate relationships the types of abuse most related to this thesis are intimate partner abuse, psychological/emotional abuse, domestic abuse and child abuse.

1.1 Child Abuse and Domestic Abuse

The National Society for Prevention of Cruelty to Children (NSPCC), a leading body for child protection in the United Kingdom (UK), defines **child abuse** as “physical, sexual, or emotional harm or neglect of a child's needs” (NSPCC, 2020). Under UK law, a child is any person under the age of eighteen (Children Act, 1989; U.N. General Assembly, 1989), making almost all adolescents, children according to UK law and protected by UK child-specific protection guidance and legislation (e.g., Children Act, 1989; 2004, Children and Social Work Act, 2017).

The **Domestic Abuse Act (2021)** provides the statutory definition of domestic abuse as “behaviour of a person towards another person... where each person is aged 16 or over and are personally connected to each other and the behaviour is abusive”. This includes physical, sexual and psychological/emotional abuse including coercive control. According to the Domestic Abuse Act (2021), a ‘connected person’ may include anyone that the victim is or has been married to, in a civil partnership with or in an intimate relationship with. This extends to include abuse perpetrated by the victims' relatives, including parents and anyone else who has held parental responsibility for the victim, such as stepparents, a parent's partner, cousins, siblings, and other family members.

Based on this definition of domestic violence, intimate partner abuse inflicted against an adolescents aged over 16 is included under the Domestic Abuse Act (2021), providing them with similar services and reporting mechanisms as adult victims. Any abuse directed towards a person under the age of 16 is instead considered as and dealt with as child abuse. According to UK guidelines (Home Office, 2022), this separation between child abuse and domestic abuse in the UK is intended to avoid smearing the lines between what is domestic violence and what is abuse of a child. According to the Domestic Abuse Act (2021), any child who witnesses domestic abuse against, or perpetrated by a relative, is by definition experiencing child abuse. Under this amendment to the Domestic Abuse Act (2021), which came into effect in January 2022, children witnessing domestic abuse are automatically eligible to receive mental health support and the relevant safeguarding services (Domestic Abuse Act, 2021; Crown Prosecution Service, 2022). This is due to the negative impacts that witnessing abuse can have on a child, as later discussed in Chapter 5 (Race, Culture and Societal Context).

Overall, the Crime Survey for England and Wales predicts approximately 7% (around 1.6 million) of girls and women between 16 and 74 years old have experienced domestic violence, with girls and women aged 16 to 19 the most likely group to have experienced abuse at the

hands of a romantic partner in England and Wales (Office for National Statistics [ONS], 2022a, 2023a, 2023b).

Emotional abuse has been found to be the most common type of abuse experienced before 16 years old in England and Wales (25% or about 5.1 million) (ONS 2023a). For instance, in a sample of 398 women surveyed, 91.3% of intimate partner violence survivors had experienced non-physical abuse, including psychological/emotional abuse, financial abuse, and threats (ONS 2023a).

1.2 Intimate Partner Abuse

Abuse between current and former partners who are or have been in an intimate relationship is referred to as intimate partner violence. Intimate partner violence explicitly refers to "... behaviour within an intimate relationship that causes physical, sexual or psychological harm" (WHO, 2017).

Intimate partner violence (including stalking and assault) is dealt with under common law and related legislations (Lipscombe et al., 2023) including the Protection from Harassment Act (1997), Sexual Offences Act (2003), Domestic Abuse Act (2021) and the Serious Crime Act (2015) which in 2015 introduced coercive control as a crime, now carrying a maximum sentence five years imprisonment and a fine.

Official legislation and guidance in England on abuse recognise and outline distinctions between types of abuse to help provide clarify for working with victims and perpetrators (Children Act, 2004; Home Office, 2022). Categories of abusive behaviours include (Home Office, 2022; Walls & Drape, 2021; Women's Aid, 2022):

- Physical abuse, such as hitting, shaking, starving, punching or kicking.
- Sexual abuse, such as forced sex, sexual insults and refusing to practice safe sex.

- Psychological or emotional abuse, such as undermining confidence, making the partner feel unattractive or stupid, restricting their partner's other relationships or social life, intimidation, insults, denying abuse, gaslighting, shouting and threats of harm.
- Coercive control, such as intimidation, isolating a partner from others, achieving control through threats or threatening behaviours.
- Financial or economic abuse, such as refusing or unfairly restricting access to money, causing a partner debt or stopping a partner from working.

There are overlaps between some categories of abuse. For instance, coercive control can be considered as a distinct category of abuse as well as an example of psychological/emotional abuse. Similarly, controlling a partner's income can be classified as financial/economic abuse as well as a form of coercive control (Christy et al., 2020). This overall leads to some variations in how abuse is categorised in literature and measured across different studies and scales (Leen et al., 2013; O'Hagan, 1995).

In addition to overlaps between categories, abuse victims commonly experience multiple types of abuse simultaneously (Hacialiefendioglu et al., 2020; Henning & Klesges, 2003; Kerbs et al., 2011). For instance, Krebs and colleagues' (2011) research found that on average, women who experienced IPPA were simultaneously experiencing an additional two to three types of intimate partner violence. Women experiencing IPPA were typically also experiencing physical or sexual violence within the same relationship.

One explanation for this co-occurrence of IPPA with physical and sexual violence is the natural presence of the psychological/emotional tactics used in physical and sexual abuse. For example, perpetrators often use manipulative, undermining, belittling, intimidating and threatening behaviour whilst or in order to commit physical and sexual abuse (NSPCC, n.d.). Victims are far more likely to recognise and understand physical forms of abuse that are more overt than psychological and emotional abuse, which is often covert (Francis & Pearsons,

2021). This potentially creates an issue whereby victims may be able to recognise when physical abuse is occurring, but not necessarily able to recognise the simultaneous experience of IPPA in these cases. Being aware and able to identify abuse can act as a preventative and protective mechanism for victims of abuse, where victims who recognise when it is occurring can address, seek-help or leave the relationship quicker than those who do not recognise and label the behaviours as abusive (Adler-Baeder et al., 2007; Simpson et al., 2017). At present, past literature does not provide an idea of the extent to which Black adolescent girls understand IPPA or can recognise the signs of IPPA. Consequently, it is unclear whether Black adolescent girls in England are benefiting from this preventative knowledge at all.

To date, research on intimate partner violence in adolescent relationships has mainly explored physical and sexual abuse with historically, less attention being given to IPPA (e.g Zweig et al., 2013; Barter et al., 2009; West & Rose, 2000; Ybarra et al., 2016), despite high rates of this form of abuse found in adolescent relationships and evidence that the negative mental and physical effects of IPPA can be just as bad as the effects physical and sexual abuse (Barter et al., 2009; Leen et al., 2013; Kelly, 2004; Straight et al., 2013). Examples of impacts of IPPA, include lowered self-esteem, stress, confusion, susceptibility to psychological disorders (e.g. depression, anxiety, and post-traumatic stress disorder), avoidance behaviours, intrusive thoughts and fear of further abuse (Aguilar & Nightingale, 1994; Hamel et al., 2023; Mills et al., 2017; Ramos et al., 2014; WHO, 2012; Safe Live, 2019).

Variations surrounding how to best define and measure IPPA may also help to explain why IPPA has been studied less than other forms of intimate partner abuse in academic literature (Council of Europe, 2011, p. 10; Leen et al., 2013; Follingstad, 2007; Follingstad & DeHart, 2000; Heise et al., 2019; O'Hagan, 1995, Safe Lives, 2019).

1.3 Defining Psychological Abuse and the Complexity of Doing So.

There are inconsistencies in how IPPA is defined across different existing studies, and incongruities surrounding whether psychological and emotional abuse should exist as one category of abuse (Korbin et al., 2000; Leen et al., 2013; North, 2022; O'Hagan, 1995). The term psychological abuse is often used interchangeably with other terms, including psychological violence, non-physical violence, and emotional abuse (Council of Europe, 2011, p. 10; Safe Lives, 2019).

In research conducted by the UK charity Safe Lives (2019), when studied across 405 survivors of psychological violence, it was found that survivors tended to use different terms including emotional abuse (26%), psychological abuse (26%), coercive control (19%), and mental abuse (6%) as umbrella terms to describe forms of non-physical violent behaviours. In addition to this, 468 practitioners (including practitioners from domestic violence agencies, children's social care/children's centres and educators) were asked what terms they used to describe experiences of non-physical violence. In this sample, 56% reported using either emotional, psychological, or coercive control as interchangeable umbrella terms, whilst 44% used these terms as distinguishably separate forms of non-physical abuse. Many viewed emotional violence as different to psychological abuse or coercive control.

Past literature, particularly from O'Hagan (1995), has argued that *emotional abuse* and *psychological abuse* should not be seen as synonymous or interchangeable but ought to remain as separate terms and concepts. O'Hagan (1995, p. 450), wrote "No one regards these [emotional and psychological] words as synonymous", specifically drawing light on differences between the words **emotional** and **psychological** when 'abuse' is removed as the suffix. According to the Oxford Learners Dictionary (n.d), **emotional** refers to a "person's feelings or causing people to feel strong emotions", whilst **psychological** relates to "the mind and the way in which it works" (Oxford Learners Dictionary, 2022c). The distinction between

these two words led O'Hagan (1995, p. 456) to conclusively define **emotional abuse** as "the sustained, repetitive, inappropriate emotional response to the child's experience of emotion and its accompanying expressive behaviour" and **psychological abuse** as "sustained, repetitive, inappropriate behaviour which damages or substantially reduces the creative and developmental potential of crucially important mental faculties and mental processes of a child" (O'Hagan, 1995, p. 458).

Variations and interchanging use of the terms emotional, psychological and non-physical abuse may also have a knock-on effect on how clinical practice, policy, the public and practitioners apply and use these terms. Without a agreed definition or accepted term for describing these forms of abuse, the public, and even practitioners can face confusion or difficulties in accurately identifying, describing, reporting, and intervening consistently and effectively (Korbin et al., 2000; North, 2022; O'Hagen, 1995).

This view is supported by additional findings from Safe Lives (2019), where practitioners and victims were asked for their views on the importance of having distinctively separate labels (e.g. emotional violence and psychological violence as separate categories). Most (73%) of practitioners believed that it was extremely or very important, with explanations given by practitioners for why this is important included wanting to have the ability to make distinctions between victims' experiences and to help victims understand their experiences more specifically. It must, however, be noted that practitioners in this research were discussing the term psychological *violence* rather than *abuse*. This suffix variation may, therefore, have had an influence on practitioners' views which may have altered if replicated using the suffix *abuse*. Evidence has shown that using seemingly minorly different terms/synonyms in research, can affect participants responses and research results, particularly when surveys are begun used, or where participants do have the opportunity to directly ask the researchers for clarity on the meaning of terms (Altenhof & Roberts, 2023; Fowler, 1992; Hill et al., 2012).

To control for the potential influence of suffix effect on participant responses, across each empirical study carried out for this thesis, I assured that every participant had access to the exact same definition of psychological abuse. Providing participants with the same definition also insured that all participants were answering questions from similar insights into what psychological abuse is considered to be in the context of this research.

An absence of consensus when labelling and categorising psychological/emotional abuse, also creates difficulty when comparing studies and conducting meta-analyses about this form of abuse (McHugh et al., 2013). In empirical studies, researchers often use a preferred term, definitions or combinations of descriptions based on their review of existing literature or a personal preference (Follingstad, 2007; Follingstad & DeHart, 2000; Heise et al., 2019; O'Hagan, 1995). For instance, in one study, a researcher may choose to use the term psychological abuse (e.g. Almendros et al., 2009), another may opt for psychological violence (e.g. Safe Lives, 2019) and in another, emotional abuse (e.g. Corbett, 2013), yet all describing similar constructs.

To illustrate, Leen and colleagues (2013) reviewed studies on adolescent dating violence in Europe and North America. All ten studies found that psychological/emotional violence was the most reported type of abuse experienced by adolescents. In their discussion however, Leen and colleagues (2013) commented on the difficulty of establishing reliable prevalence rates for psychological/emotional abuse due to variations between studies. They observed wide methodological variation in the samples, measurement tools and definitions of psychological/emotional abuse used across studies, making it difficult to compare directly or be confident that the same occurrences are being explored across all studies. Nevertheless, whilst the creation of an agreed definition may be helpful for practitioners, researchers and the general public, emphasis on establishing definitions also has the potential to interfere with and oversimplify how non-physical abuse is observed and described in clinical practice. For

instance, as victims and research participants often use varied terms/language when describing their unique and personal experience, having a rigid single term may not always be appropriate when asking a participant or service user to share their own accounts (Rees, 2009; Safe Lives, 2019), where their use of preferred language may in fact be empowering or protective for victim. This can therefore be viewed as a criticism of my decision to provide all participants with the same definition of psychological abuse, particularly when it comes to empirical Study 4 in this thesis, where women are asked to share their personal stories or experiencing IPPA during adolescence. Nonetheless, in defence to this, it is useful to note that there was no set instruction given to indicate to participants that they had to use the word psychological abuse themselves when recalling their IPPA experiences. In interview transcripts of stories, many women did in fact use the terms emotional abuse and psychological abuse interchangeably, with some also using more colloquial terms like ‘toxic behaviour’ and ‘red flags’ to describe the same phenomenon.

Despite arguments for the separation of terms, to investigate a broad scope of non-physical abuses, within this thesis and the featured empirical studies, the term *psychological abuse* will be used to refer to both psychological abuse and emotional abuse (nonetheless, when describing others research, the term emotional abuse or psychological violence are sometimes used in order to correctly depict the terminology used in the literature that is being cited). The definition of psychological abuse used is borrowed from Safe Lives (2019):

The regular and deliberate use of a range of words and non-physical actions used with the purpose to manipulate, hurt, weaken, or frighten a person mentally and emotionally; and/or distort, confuse or influence a person's thoughts and actions within their everyday lives, changing their sense of self and harming their well-being (Safe Lives, 2019, p. 10).

In the current research, **intimate partner psychological abuse (IPPA)** will include the following behaviours (Home Office & Against Women and Abuse, 2015; Jones et al., 2005; Kelly, 2004; O'Hagan, 1995; Porrúa-García et al., 2016; Safe Lives, 2019; Tolman, 1992):

- Undermining confidence
- Making the person feel unattractive.
- Making the person feel stupid.
- Restricting a partner's relationships or social interactions with others
- Controlling freedoms
- Insults and criticism
- Constant humiliation or belittling
- Denying that their abusive behaviours have occurred
- Gaslighting / unjustly making the person question their understanding, memory, perception, or sanity
- Aggressive shouting towards the person
- Intentional non-physical punishments
- Verbal threats of harm
- Intimidation or threatening behaviours
- Manipulation
- Attempts to frighten
- Any other behaviour which intends to inflict emotional or psychological distress on the person
- All behaviours included in the Measure of Psychologically Abusive Behaviours (MPAB) (Follingstad, 2011).

1.4 Measuring Psychological Abuse

Since the 1980s, a few researchers have developed tools to exclusively measure psychological abuse in intimate relationships (Shorey et al., 2012). Many of these measures have evolved from or include IPPA items from preceding tools that measured multiple forms of abuse such as the Index of Spouse Abuse (Hudson & McIntosh, 1981), the Measure of Wife Abuse (Rodenburg & Fantuzzo, 1993), the Abusive Behaviour Inventory (Shepard & Campbell, 1992) and the Conflicts Tactics Scale (Straus et al., 1996).

Most IPPA-specific scales break IPPA down into subcategories. These include:

- The Subtle and Overt Scale of Psychological Abuse scale by Marshall (1996, 1999) which splits IPPA into subtle IPPA (undermining, discounting, and isolating) and overt IPPA (dominance, indifference, monitoring, and discrediting a partner).
- The Psychological Maltreatment of Women Inventory (Tolman, 1989, 1999) breaks IPPA into two subscales - the dominance-isolation subscale referring to behaviours such as demands for subservience, isolation and observance of traditional gender roles; and the emotional-verbal subscale which includes humiliation, devaluing and withholding affection.
- The Scale of Psychological Abuse in Intimate Partner Violence (Porrúa-García et al, 2016) which categorises IPPA as direct IPPA strategies (e.g. emotional abuse, mental degradation and minimising/blaming) and indirect IPPA strategies (e.g. control and isolation)
- The Multidimensional measure of emotional abuse (Murphy & Hoover, 1999), splits IPPA into the subscales of hostile withdrawal (e.g. avoidance during conflict, withholding of emotional availability) dominance/intimidation (e.g. destruction of

property and threats of harm), denigration (e.g. name calling and humiliation), and restrictive engulfment (e.g. controlling activities and attacks on self-esteem)

- The Controlling and Abusive Tactics Questionnaire 2 (Hamel et al, 2015, 2023) describes IPPA as expressive abuse (e.g. belittling and insults) and instrumental abuse (e.g. jealousy-driven monitoring, threats and coercive control).

These scales are again an example of the interchangeable language used to describe similar abusive behaviours (e.g., psychological aggression - psychological maltreatment - Tolman, 1989, 1999, psychological abuse – Marshall, 1996, 1999, and emotional abuse - Murphy & Hoover, 1999).

In addition to differences in terminology and categorising of IPPA acts, there are several other methodological challenges present when measuring IPPA. Firstly, most measurement tools rely on self-report methodologies. As is well-understood, self-report techniques can lead some participants to be reluctant to share truthful responses in attempts to conceal aspects of the abuse, particularly when exploring a sensitive matter. This has the potential to impact the validity of results in studies where victims are expected to recall instances of IPPA, or perpetrators are expected to disclose their abusive behaviours (Burke & Follingstad, 1999; Krumpal, 2013; Sugarman & Hotaling, 1997). In addition to this, despite measurement tools explicitly listing examples of IPPA behaviours, some victims (and perpetrators) may underestimate the severity/abusive nature of their experiences or struggle to accurately label IPPA behaviours in their relationships, especially given the covert and sometimes normalised nature of IPPA, which can result in an underrepresentation of participants IPPA experiences (Corbett, 2013; Follingstad & Rogers, 2013; Peatee, 2022).

Concerning the current research focus on Black women and girls, it is essential to highlight the issue with the samples used to create and validate measurement tools. Many

measurement tools listed above were developed by testing samples which have not included Black women and girls in England, or simply do not report ethnicity of the samples used to develop the scale at all (Rathus & Feindler, 2004). For instance, as to be explored in the next chapter, (Chapter 2 – Intersectionality), as experiences of abuse can be influenced by a range of individual and ecological factors, including culture and race, it is inappropriate to assume that all measurement tools accurately and thoroughly apply to or explain the experiences of Black women in England.

The scale used in this thesis (Study 4) is Follingstad's (2011) Measure of Psychologically Abusive Behaviours (MPAB) which splits IPPA behaviours into fourteen categories based on the behaviour being used by the perpetrator. These categories include: sadistic, threats, isolating, manipulation, public humiliation, verbal abuse, wound through sexuality, treat as inferior, hostile environment, monitoring, wound through fidelity, jealousy, withheld emotional/physical affection, and control of personal decisions. Each of the 14 categories contains three examples of IPPA behaviours, rated as either milder, moderate and severe actions. For instance, for the category *threats*, the items 'Threw a temper tantrum as a way to frighten you' (milder), 'Verbally threaten to physically harm you or make a gesture that seemed physically threatening as a way to frighten you' (moderate) and 'Threaten to kill you as a way to frighten you' (severe) are featured.

The MPAB (Follingstad, 2011) is used in Study 4 to identify whether women/participants had experienced IPPA during an adolescent intimate relationship and the severity of the abuse experienced by participants. Follingstad (2011) tested the reliability and validity of this scale using a nationally representative U.S. sample of 649 men (51%) and women (49%), with 11% of participants identifying as African American. Follingstad (2011) found that only gender significantly impacted participants' ratings of the seriousness (milder, moderate of

severe rating) of each IPPA item, with women often rating IPPA behaviours as more serious than men did. Statistically significant group differences in participant's ratings were not observed as a function of other demographic variables, including age, race and religiosity. Having no significant differences based on other demographic factors suggests that Black women rated IPPA items on the MPAB similarly to the rest of the sample. Together these factors made the MPAB a suitable tool for capturing Black women's experiences, when used alongside qualitative methods to learn about any additional IPPA behaviours (not measured by the MPAB) and nuances in Black women's experiences.

1.5 Covert Nature and the Use of Technology in IPPA

The difficulty to identify and physically evidence IPPA may partly explain the historic minimal focus on IPPA in academic research, whereby non-observable and subjective experiences have traditionally been viewed as more scientific and valuable to investigate than less concrete observable topics (Bem & Jong, 2013).

When physical or sexual abuse occurs, the signs are commonly more easily observable than psychological abuse. For instance, bruising or injury caused by physical abuse can make evidence of abuse more noticeable (Rees, 2009; Paulson, 1983). Comparatively the signs of IPPA can be more challenging to identify and prove, as the perpetration and effects of IPPA are often covert, not leaving physically observable signs of injury, and in many cases, may be undetectable to the victim themselves (Follingstad & DeHart, 2000; Keashly, 2001).

This difficulty in recognising and proving IPPA can affect the reporting of IPPA, with many victims found to believe that they cannot produce enough evidence of IPPA or that their experiences will not be believed or taken seriously by others (Gurm & Marchbank, 2020; Kippert, 2015; Safe Lives, 2019).

Nonetheless, with the rise of technology, it is now easier than ever to preserve evidence of IPPA and other forms of abuse (e.g. online sexual offences and child abuse) when it occurs online or is recorded (Glasgow, 2010; McCarten & McAlister, 2012; Myles & Trottier, 2017; Urbas, 2010). Apart from the use of technology to evidence IPPA, the potential to access information and support surrounding abuse online also creates new means for victims to gather information and support, making technological advancements useful for combatting issues of abuse and intimate partner violence (Melander, 2010; Storer et al., 2022).

Nevertheless, technological advancements and increased social media use, especially amongst adolescents, has also led to a rise in online abuse including IPPA, where IPPA behaviours like cyberbullying, distribution of videos and images and use of technology for surveillance can occur (Almansoori et al., 2024; Martínez-Soto, & Ibabe, 2024; McCarten & McAlister, 2012; Nasaescu et al., 2018; Schokkenbroek et al., 2022; Stephenson et al., 2018; ; Xu & Zheng, 2022). According to the feminist organisation End Violence Against Women (EVAW), one in five women in the UK has experienced harassment and abuse online, with almost 50% of these women receiving sexist or misogynistic violence online (EVAW, 2022). Similarly, in a Safe Lives (2019) investigation into psychological violence, 61% of survivors reported that their partner had used technology to abuse, harass or stalk them.

Given the covert nature of IPPA compared to other forms of abuse, and the potential impacts of this on how individuals perceive and recognise IPPA, in this thesis I was particularly interested in understanding the extent to which covertness impacted Black women and Black adolescent girls understanding and experiences of IPPA. In my first empirical study, Study 1, using surveys, Black women were asked to rate their confidence to spot the signs of IPPA and in Study 3, 16 - 17-year-olds ability to identify IPPA verses physical abuse in fictional vignette scenarios was measured to assess the extent to which covertness may impact success in this task.

Chapter 2 | Intersectionality

In this chapter I introduce the framework of intersectionality which underscores the basis of my theoretical perspective to all empirical studies in this thesis. Intersectionality and Black feminism are philosophies and frameworks, which place an explicit focus on the experiences of Black women and highlight how the multifaceted elements of an individual's identity (e.g. race, gender, socioeconomic status etc) collectively interact to impact their lived experiences of the world. It is important to specifically study Black women and girls' experiences of intimate partner abuse, given that Black women and girls experience the world in a way that is unique to them and them only (Rice et al., 2021; Eaton & Stephens, 2018; Potter, 2008; Hampton et al., 2003; Spates et al., 2020).

"Black women are inherently valuable, that [Black women's] liberation is a necessity not as an adjunct to somebody else's but because of our need as human persons for autonomy".

(Combahee River Collective & Nicholson, 1978).

2.1 Black feminism and Intersectionality

Black feminism, also referred to as Afro-feminism, is a branch of feminism that first rose to prominence in the US in the 1960s - Early Black feminists acknowledged the existence and complexity of interacting multiple hierarchal oppressive systems far before mainstream feminist acknowledged these differences. They were aware that the priorities of mainstream feminist movements would not be fit to represent and support all women to be fully equal, protected and not discriminated against (Combahee River Collective & Nicholson, 1978; hooks, 1981).

The first (approximately 1848 – 1920's) and second waves (approximately 1963 - 1980's) of feminist movements have been criticised for focusing on gender inequality as a singular paradigm which overlooked how for women of colour, the simultaneous operation and co-existence of multiple oppressive hierarchal systems (race, gender and class hierarchies) that collectively, lead to unique lived experiences and exposure to various oppressions all at once (i.e. racism, sexism and economic inequality) (Davis, 1988; Pruitt, 2023; Wada, 2008; Wallace, 1978). The absence of a full acknowledgement of the different unique forms of oppression experienced by Black women, meant that in early waves of feminist movements some of the issues that Black women were facing (e.g. Black women being excluded from positions of power at work, not only due to being a woman, but additionally due to being Black) were not being addressed or advocated for enough in the fight for gender equality.

This oversight of multiple oppressions in early feminism fundamentally meant that Black women and women of colour were placed on the fringe of mainstream feminist movements and the fight for gender equality.

The concept of intersectionality has always been ingrained in Black feminism and Black activism, literature and liberation (Anthias & Yuval-Davis, 1983; Brah & Phoenix, 2004; Collins, 2000; Copper, 2017; May, 2012; Truth, 1851; King, 1988). The framework of intersectionality – as coined by Kimberlé Crenshaw (1989) in an essay entitled 'Demarginalising the Intersections of Race and Sex: A Black feminist critique of anti-discrimination doctrine feminist theory and antiracist politics' and applied by many scholars thereafter (e.g. Brah & Phoenix, 2004; Cardenas, 2023; May, 2015; Rice et al., 2021) - derives directly from Black feminism (Lindsey, 2015).

Intersectionality describes how individuals' multiple identities (such as race, gender, nationality, socioeconomic status, sexual orientation, personality, religion and occupation) co-exist and interact to create divergent world experiences, including differing experiences of

discrimination and privilege. Intersectionality helps us to understand that people who share just one social characteristic, whilst all other characteristics differ, are unlikely to have matching experiences of the world and specifically of oppression (Crenshaw, 2016; Crenshaw, 2017). Accordingly, to truly understand one's experience of their environment, the co-existence and interaction between the individual's various social characteristics must be considered. Figures 1.1 to 1.5 illustrate ways that others have presented the concept of intersectionality in visual aids and models.

Figures 1.1 - 1.5

A Collection of Illustrative Depictions of Intersecting Characteristics Often Included in Intersectional Literature and Research.

Figure 1.1

International Women's Development Agency (2018)

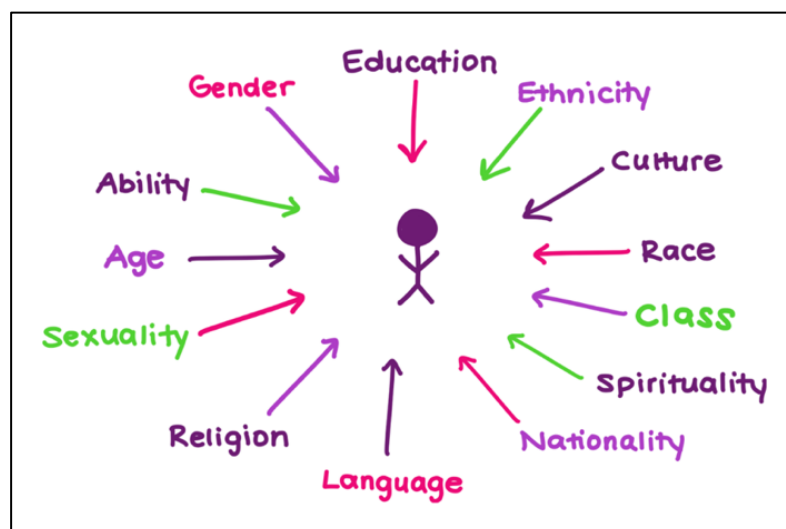


Figure 1.2

Morgan (1996) in Association for Women in Science (n.d)

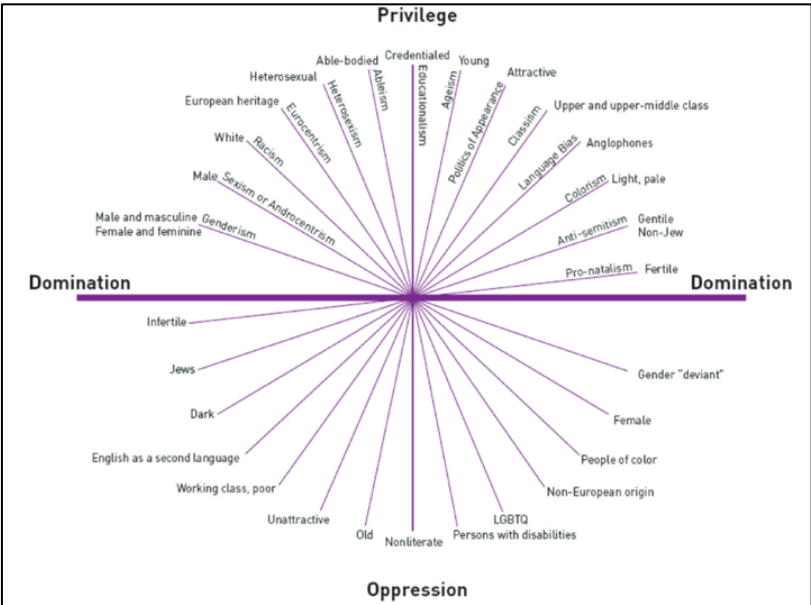


Figure 1.3

Scottish Government (2022)

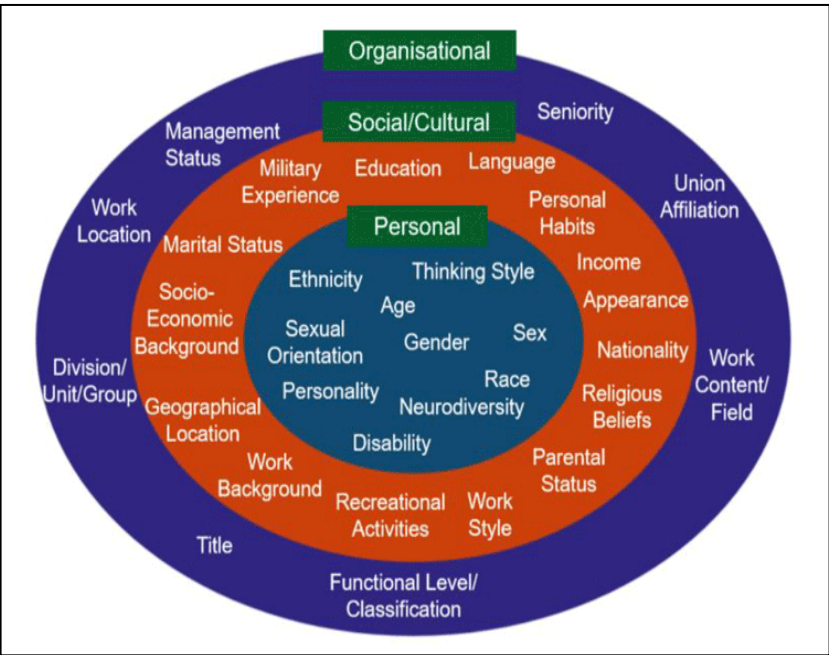


Figure 1.4

Jass Just Power (n.d)

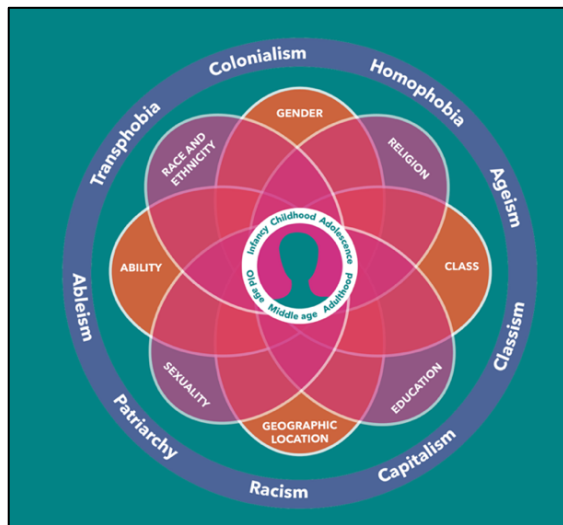
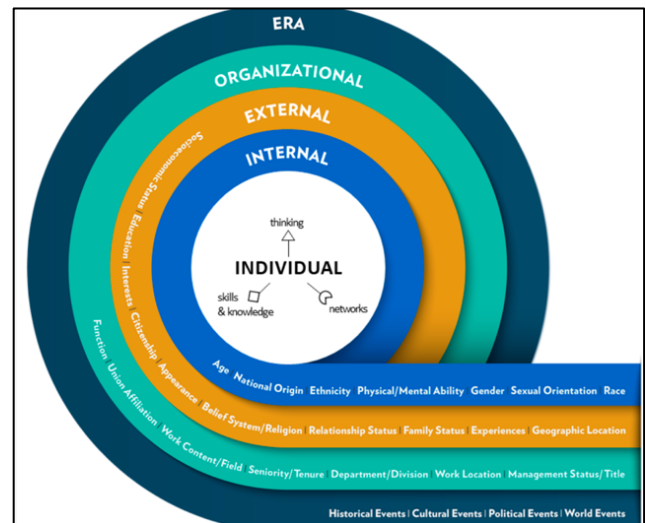


Figure 1.5

Thomas et al. (2021)



In the context of studying intimate partner violence and IPPA, when the complex interactions between multiple characteristics are simultaneously recognised and considered, an understanding of how experiences of gender-based oppression may vary for women and girls with differing intersecting characteristics can be created. Ultimately, how a Black girls and women experience intimate partner violence and access to support is affected by both race and gender and may uniquely differ to women who do not experience race-based oppression in the same way (Agozino, 1997; Collins, 2000), as further discussed in Chapter 5 (Race, Culture and Societal Context).

General population abuse data and research (e.g. Barter et al., 2009; ONS, 2023a) often compares and comments on racial disparities but rarely carefully and critically dissects or attempts to explain these differences from each groups perspectives. In the absence of literature and culturally informed explanations for how and why different groups are affected by intimate partner violence, it is difficult to truly have trust in the usefulness and quality of education, care and interventions delivered to Black adolescent girls in England, when their specific needs are

not truly understood nor represented in published literature (Arthers & Zacharias, 2007; Flowers, 2018). By understanding the intricacies of lived experiences based on internationality, practitioners, researchers, and policymakers can make strides to tailoring education and services surrounding IPPA to better meet the needs of different groups of girls and women.

Since Crenshaw's (1989) work, the framework of intersectionality has gathered tremendous esteem and is now commonly used to analytically describe and explain the oppression and experiences of people of varying identities. Specifically, the concept of intersectionality has, in recent years, become a fundamental theory in social sciences, including anthropology and psychology (Grzanka et al., 2020; Rosenthal, 2016; Thimm, 2023), where culture-informed and **interactionalist approaches** have already existed in various forms.

For instance, psychologists use interactionalist approaches to explain how biological factors (e.g. genes and biochemistry), cognitive factors (e.g. mental processes and neurodevelopment) and environmental factors (e.g. socialisation, situational variables, environmental stressors, and symbolic cultural meanings within a society) operate collectively to determine and forecast an individual's life outcomes, behaviours and their likelihood of experiencing a mental health disorder (Bland, 2020a, 2022b; Bowers, 1973; Ekehammar, 1974; Fine, & Kleinman, 1983; Plomin, 2011; Scarr & McCartney, 1983). Intersectionality differs from interactionalist approaches, as intersectionality instead offers a framework to study how various aspects of an individual's personal identity, including their culture, education, socioeconomic status, race, age and ability, operate together and impact lived experiences and their level of power and oppression in society.

2.2 Intersectional Discrimination

Given that this thesis focuses on intimate partner abuse directed at Black adolescent girls, which can sometimes be fuelled by a partner's prejudice or discrimination towards girls, women and/or Black people, it is useful to define the term intersectional discrimination, as this will link to several concepts discussed throughout this thesis. According to Amnesty International (2022), discrimination "occurs when a person is unable to enjoy their human rights or other legal rights on an equal basis with others because of an unjustified distinction made in policy, law, or treatment [from others]".

The term intersectional discrimination can be used to explain how one person or one group of people may experience multiple forms of discrimination and oppression simultaneously as a result of their various intersectional characteristics (Attrey, 2018; Crenshaw, 1989; Lieberman et al., 2021; de Leon & Rosette, 2022).

For instance, 'gendered racism' refers to a form of intersectional discrimination (Essed, 1991) whereby racism and gendered-based discrimination intertwine to create a distinctive form of discrimination. Gendered racism is known to have harmful personal and systemic effects on Black women. For example, Black women may be subjected to stereotypical perceptions such as stereotypes about being promiscuous, having an attitude or being strong and therefore able to tolerate more hardship (Jerald et al., 2017; West et al., 2016). An individual who believes these stereotypes may therefore treat a Black woman differently or discriminate against them based on these views (Spates et al., 2020).

What makes these stereotypes intersectional, is the fact that they are based on a combination of attitudes about women, as well as stereotypes about Black people, which have merged to create stereotypes about Black women. Take the 'strong Black girl/woman' stereotype (which will be further explored in Chapter 5 - Race, Culture and Societal Context). The origins of this label for Black women are believed to be partly based on the false belief that Black people are

‘stronger’, ‘harder’ and able to endure more pain than people of other racial groups (stereotypes which stems from rhetoric created during the transatlantic operation of the enslavement of Black people - Coley, 2024; Collins, 1990, 1995, 2022; West, 1995). Simultaneously, the strong Black girl/woman stereotype is also partly related to rigid gender stereotypes, such as the expectation for women to be loyal and obedient to male partners and the expectation for women to take on a more nurturing and emotionally attuned role than men in the traditional family unit. Together these stereotypes interact to create a strong Black girl/women ‘profile’, which depicts Black women as able to endure pain and deal with adversity independently (Black stereotype) and simultaneously able to put others needs and emotions before their own (Woman stereotype). In practice, these stereotypes about Black women can result in several impacts on Black girls and Black women's lives. Such stereotypes have been linked to Black women and girls being less likely to be viewed as a legitimate victim in the justice system (Donovan, 2023; Simmons, 2020; Williams, 1986) and increased health complications for Black women due to practitioner bias (Brown et al., 2021; DeSantis et al., 2016; Douglas, 2018; Gillispie-Bell, 2021; Jones et al., 2015; Palmer et al., 2023).

Practitioner bias is when a person working in a professional capacity, such as a police officer, therapist, or teacher, upholds particular views, prejudices, and stereotypes about a group of people based on their race or other distinct characteristics. These views can, in turn, influence the practitioner's willingness and approach to supporting individuals of this group, affecting their decision-making and actions and potentially leading to failures to provide adequate care, support or information for groups who they are prejudice against (Fergus, 2017; FitzGerald & Hurst, 2017; Sharp, 2022). In relation to intimate partner violence this could mean a Black women or girl being not given adequate support by a practitioner when she tries to seek help.

Not only does discrimination come directly from how one individual or single practitioner treats Black women, it can also come in the form of systems and institutions that disproportionately disadvantage and oppress particular groups. Systemic (or institutional) racism refers to the "policies and practices that exist throughout a society or organisation, that result in or support a continued unfair advantage to some people and unfair or harmful treatment of others based on race" (Cambridge University Press, 2023). With enough thoughtfulness, examples of how multiple oppressions can interact to place Black and other ethnic minority women at a greater disadvantage than other groups in the UK can be seen across almost every sector.

For example, literature on women's experiences in rape cases in the criminal justice system has shown that girls and women are often labelled, blamed for the perpetrator's actions, and face attempts from prosecutors to delegitimise them as victims (Dinos et al., 2015; Mopac & NHS England, 2016; Wheatcroft et al., 2009). These perceptions and treatments of female rape victims can be in part attributed to ambivalent sexist views (Abrams et al., 2003; Rollero & Tartaglia, 2019; Masser et al., 2010), patriarchal norms held in a society (Bouffard, 2010; Bryden & Madore, 2015; Hadi, 2017), belief in rape myths (Dinos et al., 2015; Rollero & Tartaglia, 2019) and stereotypical or counter-stereotypical victim views (Masser et al., 2010; Wenger & Bornstein, 2006). However simultaneously, Black people in Western cultures are disproportionately targeted in the criminal justice system and are more likely to be criminalised, even when reporting a crime as a victim (Brunson, 2007; Home Office, 2022; Kelly & Varghese, 2018; Uhrig, 2016; Wheatcroft et al., 2009). The co-existence of these forms of discrimination in one society can combine to ultimately place Black girls and women at a heightened risk of experiencing more significant systemic disadvantage and intersectional discrimination when attempting to access support or justice in rape cases.

The empirical studies of this thesis do not directly aim to test the presence of systemic racism or intersectional discrimination (i.e. participants are not directly asked to comment on these constructs), nevertheless, as systemic racism and intersectional discrimination inherently affects Black women's and girls' lived experiences, it was anticipated that Black women to participate in interviews and focus group as part of the research presented in this thesis, may naturally bring up examples of systemic racism or intersectional discrimination in relation to their IPPA education or IPPA experiences – This was indeed the case (as later discussed in the findings of Study 2) where some women, described examples of their teachers not taking them seriously when they reported boys at school acting inappropriately towards them, but taking these concerns seriously when White girls reported the same issue.

2.3 Intersectionality in the Thesis Context

In this thesis, I use an intersectional approach to challenge and enrich thinking surrounding adolescent intimate partner abuse and to seek recommendations directly from Black women and girls, for how both formal and informal IPPA education can be enhanced to meet the needs of Black adolescent girls. In the words of Cho, Crenshaw, and McCall (2013):

“Rather, what makes an analysis intersectional – whatever terms it deploys, whatever its iteration, whatever its field or discipline – is its adoption of an intersectional way of thinking about the problem of sameness and difference and its relation to power. This framing – conceiving of categories not as distinct but as always permeated by other categories, fluid and changing, always in the process of creating and being created by dynamics of power – emphasises what intersectionality does rather than what intersectionality is.”

The concept of intersectionality has increasingly been used in intimate partner violence research (e.g. Cardenas, 2023; Messinger, 2010; Sokoloff & Dupont, 2005). The use of intersectionality in intimate partner violence research provides insights into how perpetration, victimisation and access to help can vary based on various factors such as race and ethnicity, socioeconomic status and gender identity. Nonetheless, no existing studies have explored how age (specifically adolescence), gender (specifically girls), race (specifically Black), and dual-cultural influences (specifically African, Caribbean and British culture), collectively interact to affect IPPA education and IPPA experiences, which this thesis is interested in. Over the next few chapters, this thesis will explore various literature which helps to contextualise and predict how adolescence (Chapter 3), gender (Chapter 4), and race and dual-cultural influences (Chapter 5) may impact how Black adolescent girls in England experience and learn about IPPA. In Chapter 6, The Collective Picture, I then bring together the conclusions of Chapters 3, 4 and 5, to illustrate how these characteristics may interact in the context of IPPA experiences and education.

Throughout this thesis, I argue and demonstrate how past literature and existing interventions on IPPA (where Black women and girls in England have not adequately been represented) can be reliably applied to understanding the IPPA experiences of Black adolescent girls in England.

As will be explored over the next few chapters, much of the past literature on adolescent intimate partner violence and IPPA are based on eurocentric norms, rarely reflecting intersectional characteristics, individual identities and diverse influences affecting other groups. Assuming that these studies can be generalised to represent the experience of Black women and girls, facilitates the potential for Black women and girls' experiences to be misinterpreted and for their needs to not be fully understood (Allen, 2004; Boisvert, & Bamed, 2023; Few et al., 2003; Jones, 1994). The empirical studies presented in this thesis (Study's 1 – 4) therefore take inspiration from the framework of intersectionality to explore IPPA in relation

to a specific population with converging intersectional characteristics, in this case, race (Black), gender (girls), age (adolescence) and culture (Afro-Caribbean and English). In doing so, this thesis will contribute to a more well-informed understanding of how Black adolescent girls experience IPPA and learn about IPPA, based on studies conducted with Black participants.

Based on Black feminist guidance, in this thesis, I intentionally avoid studying Black women and girls through the lens of comparison to White girls and women, instead studying within-group experiences in its essence to consciously understand, acknowledge and centre Black voices and realities (Cardenas, 2023; Few et al., 2003; Jones, 2010).

Chapter 3 | Adolescence

In this chapter, I explore the meaning of adolescence, how intimate relationships begin to form and influence adolescents' lives and literature surrounding the presence of intimate partner violence in adolescent relationships. I do this to provide background context on the nature of intimate relationships during adolescence. Whilst most of the literature discussed in this chapter has not been derived for samples of Black adolescent girls, or research which has used intersectional analysis to study varied experiences amongst adolescents of different racial groups, the literature explored here does provide foundational insights which are useful to grasp before studying how intimate partner violence manifests and effects victims, in the context of Black adolescent girls' intimate relationships.

The term adolescence has its origins in the Latin word “adolescere” meaning “to grow up” (Oxford English Dictionary, nd) however adolescence was not used to describe a distinct phase of the human life cycle until 1904 when G. Stanley Hall (1904) initially used it to describe the stage of life between the ages of 14 and 24 years old. Adolescence is now the term given to label the phase of development that occurs between childhood and adulthood (McLaughlin et al., 2015; Sawyer et al., 2018; World Health Organisation, 2022). The World Health Organisation (2022) recognises adolescence as 10 and 19 years old, however from culture to culture what adolescence looks like differs, making the nature of adolescence a social construct and culturally dependent (Kapadia, 2017; Youniss, 1983). For example, according to UNESCO (2019), in Europe and Northern America approximately 98% of children complete lower secondary school (age 12-14), compared to 81% in Eastern and South-Eastern Asia, 76% in Latin America and the Caribbean, and 38% in Sub-Saharan Asia, illustrating just one example of how the activities and opportunities available to adolescents can be drastically different in different parts of the world. Throughout this paper, the terms adolescent (the person) and

adolescence (the phase of life) refers to an age range between 10 and 19 years old, following the World Health Organisation (2022) definition.

Adolescence is an important phase of the human life cycle, where a person experiences unique developmental changes, including physical, cognitive, and psychosocial changes, which makes adolescence a period of significant change, as well as heightened vulnerability to external influences (Chulani & Gordon, 2014; Dorn & Biro, 2011; McLaughlin et al., 2015). Table 3.1 illustrates examples of just some developmental changes that typically occur.

Table 3.1

Examples of Developmental Changes Occurring During Adolescence

Types of development	Examples of changes
Biological	<ul style="list-style-type: none"> ▪ The onset of puberty (Bogin, 1998; National Health Service, 2019) ▪ Maturation of the 'social brain' (a network of regions in the brain thought to be responsible for recognising, understanding, and interpreting social cues) (Andrews et al., 2021) ▪ Continued development of intracranial volume and whole-brain volume (Mills et al., 2016) and continued maturation of the prefrontal cortex (related to cognitive development such as working memory, decision-making, risk-taking and goal-directed behaviours) (Schalbetter et al., 2022)
Cognitive	<ul style="list-style-type: none"> ▪ Greater ability to interpret human behaviour and other peoples viewpoints (Mukerji et al., 2019; Remschmidt, 1994) ▪ Theory of mind development (Mukerji et al., 2019; Valle et al., 2015) ▪ Cognitive flexibility (e.g. hypothetical thinking and ability to consider multiple outcomes) reaches adult-like levels (Anderson, 2010; Christie & Viner, 2005)
Psychological / Emotional	<ul style="list-style-type: none"> ▪ Heightened susceptibility to the onset of mental health diagnoses (Kessler et al., 2007) ▪ Advancement in emotional regulation abilities (Zeman et al., 2006) ▪ Experiences of rapid mood changes including increased irritability and overwhelming feelings of happiness and confusion (Angsukiattitavorn et al., 2020; Larson et al., 1980; Rubin, 1990) ▪ Personal identity formation/learning about oneself and how one wishes to present themselves to others (Crocetti, 2017; Meeus, 2011; Swanson et al., 1998). ▪ Increased risk-taking behaviours (Steinberg, 2004; Willoughby et al., 2021)
Social / Relationships	<ul style="list-style-type: none"> ▪ Increased in time spent with same-age peers and a greater perceived importance of these relationships (Blackmore, 2019) ▪ Decreased time spent with family (Blackmore, 2019) ▪ Increased desire for independence, increased number of independent choices being made (Hadiwijaya et al., 2017; Soenens et al., 2017) and increased desire for privacy (Hawk et al., 2009; Hawk et al., 2013) ▪ Increased likelihood of developing romantic relationships (Bandura & Walters 1977; Erikson & Erikson, 1998; Freud, 1905; Madsen & Collin, 2011). ▪ Boundary testing and boundary learning in social and romantic relationships (Erickson et al., 2015; Stiles & Raney, 2004; Taylor et al., 2016; Townsend, 2006).

The current thesis primarily focuses on the dynamics of romantic relationships during adolescence, thus mainly concentrating on the social/relationship developments during adolescence.

3.1 Relationships During Adolescence

During adolescence, how romantic and non-romantic relationships are formed, what they mean to those involved, and expectations of friends and romantic partners significantly differs from those experienced in earlier childhood (Blackmore, 2019). Changes to the nature of relationships that occur during adolescence can be linked to the other forms of development presented in Table 3.1. For instance, biological development in the brain, impacts how adolescents process information, behave and experience emotions, which inevitably alters thinking, behaviours and emotions felt and expressed towards others (including friends, family and romantic interests) (Andrews et al., 2021; Viner, 2012).

Significant changes in the social environment during adolescence also impact the nature of relationships. Children in England typically move from primary to secondary school at 11 years old (Department for Education, 2017). Secondary schools in England are generally far larger than primary schools in physical size and pupil population (Department for Education, 2017). This transition presents children with new and increased opportunities to socialise and form relationships with more peers during the early years of adolescence (Blackmore, 2019).

In addition to this, during adolescence some of the time previously spent with parents and family members throughout childhood shifts to being spent in social and school settings with peers and friends in a process known as disengagement, which makes the potential influence of peers far greater than previous points during a child's development (Andrews et al., 2021; Gilleta et al., 2021; Larson et al., 1996; 1999 Viner, 2012). Larson and colleagues (1996) exhibited this pattern in their cross-sequential research, which recorded the number of hours youths spent with their families from age 10 to 18. Their findings showed a significant

decrease in the time spent with family from 35% at age 10 to just 14% by age 18, with most of this time now spent with peers. Although there is little recent or longitudinal research on disengagement patterns during adolescence, the premise of adolescents spending less time with their parents as they get older has been seen in a number of studies (American Time Use Survey, 2019; Ashbourne & Daly, 2010; Dubas & Gerris, 2022; Lee, 2008; Lindberg, 2017; Phares et al 2008). As adolescents spend more and more time together, their bonds and the level of emotional attachment with their close peers increases, with peer attachment levels (the measure of closeness, positive connection, and affection towards another person) generally greater between adolescent girls than boys (Gorrese & Ruggieri, 2012; Hay & Ashman, 2010; Schneider et al., 2001).

Over the past two decades in particular, research into adolescent's time distribution has been linked to social media and online gaming, where many adolescents are increasingly spending their free time (Boer et al., 2020; Fam et al., 2018; Hellström et al., 2015; Rideout, 2017; Twenge et al., 2019). The growth in social media sites and gaming platforms has in fact created even further opportunities for adolescents to continue to spend time with peers (and strangers) even whilst at home and with family (Auxier & Anderson, 2021; Dixon, 2022; Twenge et al., 2019). Online communication allows children and teens to maintain and continue relationships with friends and romantic interests who they have met at school and in real life online (e.g. Hayes et al., 2022; Lee, 2008; Subrahmanyam & Greenfield, 2008), but also creates new opportunities for young people to meet and engage with people who they have never met in person. When surveyed about who they most commonly spoke to online, according to data from the ONS (2020), the majority of children aged 10 – 15 in England and Wales stated 'friends' (88.3%) and 12.5% stated 'a boyfriend or girlfriend. Approximately 1 in 6 children (17%) had spoken to someone online who they did not know in real life and 2% of these adolescents reported that they had thought that they were speaking to someone online their own

age, but later found out that the person was much older. While meeting new people online (including new romantic partners – e.g. Barbovschi, 2009), can be beneficial for facilitating social connection (Bonetti et al., 2010; Dennen et al., 2024) and creating a sense of belonging (Allen, 2020; Elder, 2021; Walsh et al., 2013) for some young people, the risks carried when young people engage with strangers online are worrying. These include risks of children being exposed to inappropriate content and unwanted images online (Razi et al., 2020; Savoia et al., 2021), cyberbullying (Balas et al., 2023; Hayes et al., 2022) and greater risk of experiencing predatory and grooming through social media and gaming chat rooms (Livingston et al., 2017; Ringenberg et al., 2022; Sinclair et al., 2018), which ultimately can have detrimental negative impacts on the child's safety and wellbeing.

3.1.1 Romantic Relationships During Adolescence

In addition to the changes in the nature of friendship and family relationships, adolescence is also marked as a time when romantic relationships begin to develop in a way previously not seen or experienced in the typical child's life, with many adolescents progressing from having no dating relationships to casual dating and relationships, and eventually to steadier more committed longer relationships (Brown, 1999; Connolly & Goldberg, 1999; Connolly et al., 2004; Davies, & Windle, 2000; Meier & Allen, 2009; Seiffge-Krenke, 2003). Research suggests that the number of adolescents who report having romantic relationships tends to increase with age (Carver et al., 2003; Lenhart et al., 2015), with some research finding that by 18, as much as 50-75% of adolescents have had at least one romantic relationship (Barter et al., 2009; Carver et al., 2003; Women's UN Report Network, 2006).

Romantic relationships in later adolescence, can often resemble similarities to adult-like relationships, including similar communication styles between partners, similar

perceptions of the significance of their partners companionship, and similar levels of relationship satisfaction (Carver et al., 2003; Collins, 2003; Levesque, 1993). Like adult relationships, theory suggests that intimate relationships during adolescence function as a source of social bonding (i.e. creating a consistent companion), attachment (i.e. mutual love and sense of security), caregiving (i.e. support and assistance) and physical intimacy in some cases (Furman & Wehner, 1994).

The quality of romantic relationships can have many immediate impacts as well as longer-term impacts into adulthood. Relationships during adolescence are thought to impact self-esteem, interpersonal skills, social integration, well-being, academic achievement and how one forms one's self-identity (Barber & Eccles, 2003; Honghao et al., 2021; Kansky, 2018; Montgomery, 2005; Sorensen, 2007). Healthy romantic relationships during adolescence are associated with having a more positive romantic self-concept, where the adolescent is more likely to view themselves as a desirable and good romantic partner, which has knock on effects on overall self-esteem and confidence (Sorensen, 2007; Langlais et al., 2018). Nonetheless, it has also been found that regardless of relationship satisfaction, romantic relationships are also a significant source of anxiety (e.g. anxiety about appearance) and unhappiness (e.g. upset due to relational conflict) for most adolescents (Barter et al., 2004). Adolescent romantic relationships significantly contribute to an individual's behaviour in their later dating habits and romantic relationship experiences (Crouter & Booth, 2014; Furman, 2018; Kansky et al., 2019; Karney et al., 2007; Madsen & Collin, 2011; Meier & Allen, 2009; Shulman et al., 2019). This connection between childhood/adolescent relationships and adulthood relationships can be explained through relational blueprint theories.

The concept of relational blueprints originates from classic theories within developmental psychology, such as Bowlby's (1973) internal working model. Bowlby's (1973) model suggests that humans' early experiences of relationships, primarily during infancy,

contribute to the creation of mental representations (or blueprints) for future relationships. These mental representations work as a guidance system that governs the individuals' behaviours and expectations for partners in future relationships. Bowlby's (1973) original theory primarily focuses on a child's relationship with their primary caregivers (e.g. mothers) as the central relationship blueprint for future relationships. For this reason, Bowlby and other developmental researchers have largely investigated the first years of life (typically the first 2.5 years) as a critical period where infants form early attachments with caregivers, which ultimately influence the rest of their relationships going forward (Dagen & Sagi-Schwartz, 2021; Glaser, 2003; Malekpour, 2007). It is, therefore, seen as imperative that infants develop healthy attachments with their early caregivers within this critical period, in order to have healthy attachments in later relationships.

Since Bowlby's original theory (1973), more recent research has explored the contribution of other relationships during childhood and adolescence in shaping mental representations/blueprints which ultimately end up impacting future adult relationships (Connolly & McIsaac, 2009; Madsen & Collins, 2011; Meier & Allen, 2016; Raley et al., 2007). In one longitudinal study, which explored links between adolescent dating (age 15 – 17.5) and early adulthood dating (age 20 - 21), adolescent dating experiences were found to have predicted 19% of variance in romantic relationships during early adulthood (once peer and parental relationships were controlled for) (Madsen & Collin, 2011). The researchers proposed that healthier dating quality during adolescence is linked to better relationship behaviours, better knowledge of one's relationship habits, and greater relationship satisfaction in early adulthood (e.g., a greater ability to negotiate during conflict and greater ability to give care and seek help from their partner). This is supported by other studies which show links between the quality of adolescent relationships and both negative and positive outcomes in adult relationships (Crouter & Booth, 2014; Furman, 2018; Kansky et al., 2019; Karney et al., 2007;

Meier & Allen, 2009; Shulman et al., 2019). For instance, having high quality adolescent relationship experiences links to greater confidence and self-worth in adult relationships (Masten et al., 1995), better self-esteem (Kansky et al., 2019b), greater social-romantic communication skills and conflict-resolution techniques (Berger et al., 2005; Dulman et al., 2008) and overall greater dating satisfaction during adulthood (Collibee & Furman, 2015). Comparatively, unhealthy experiences of relationships during adolescence can be linked to lower social-emotional competence in adult relationships, poor conflict management and acceptance of abuse behaviours (Kansky et al., 2019; Kansky et al., 2019b). The relevance of discussing relational blueprint theories helps to understand how intimate partner relationship experiences during adolescence may have impacted Black women included in the research, as later presented in this thesis (in Study 2 and Study 4).

So far, this chapter has highlighted the nature of and significance of intimate relationships during adolescence, helping to illustrate why research into adolescent intimate relationship is useful and important, given its impacts on an individual and their outcomes. I now go on to more specifically talk about violence and IPPA that occurs in adolescent relationships, to contextualise why this thesis specifically sought to focus on this aspect of adolescent relationships.

3.1.2 Intimate Partner Violence and IPPA in Adolescence

Unfortunately, in the same way that intimate partner violence occurs in adult relationships, abuse also occurs between adolescents in intimate relationships and can be perpetrated against adolescents by adults who date adolescents. Experiencing intimate partner violence in adolescence is known to create increased vulnerability for young people to experience adverse health outcomes, including symptoms of anxiety, depression, relationship-related traumatic stress and suicidal behaviour (Barter et al., 2009; Bossarte et al., 2008; Coffey

et al., 1996; Exner-Cortens et al., 2013; Glass et al., 2006; Kansky & Allen, 2018; Taquette & Monteiro, 2019). Experiencing intimate partner violence also increases the likelihood of the adolescent being exposed to and engaging in risky sexual behaviours and drug and alcohol use (Baker, 2016; Exner-Cortens et al., 2013; Gudonis-Miller et al., 2012; Taquette & Monteiro, 2019).

The Crime Survey for England and Wales predicts that 25% (about 5.1 million) of women between the ages of 18 and 84 experience some form of abuse before their 16th birthday. More specific to adolescence and intimate partner violence, national statistics indicate that girls aged 16 to 19 are the most likely group in England and Wales to experience abuse by a romantic partner compared to all other groups of women and men in England and Wales (ONS, 2023a).

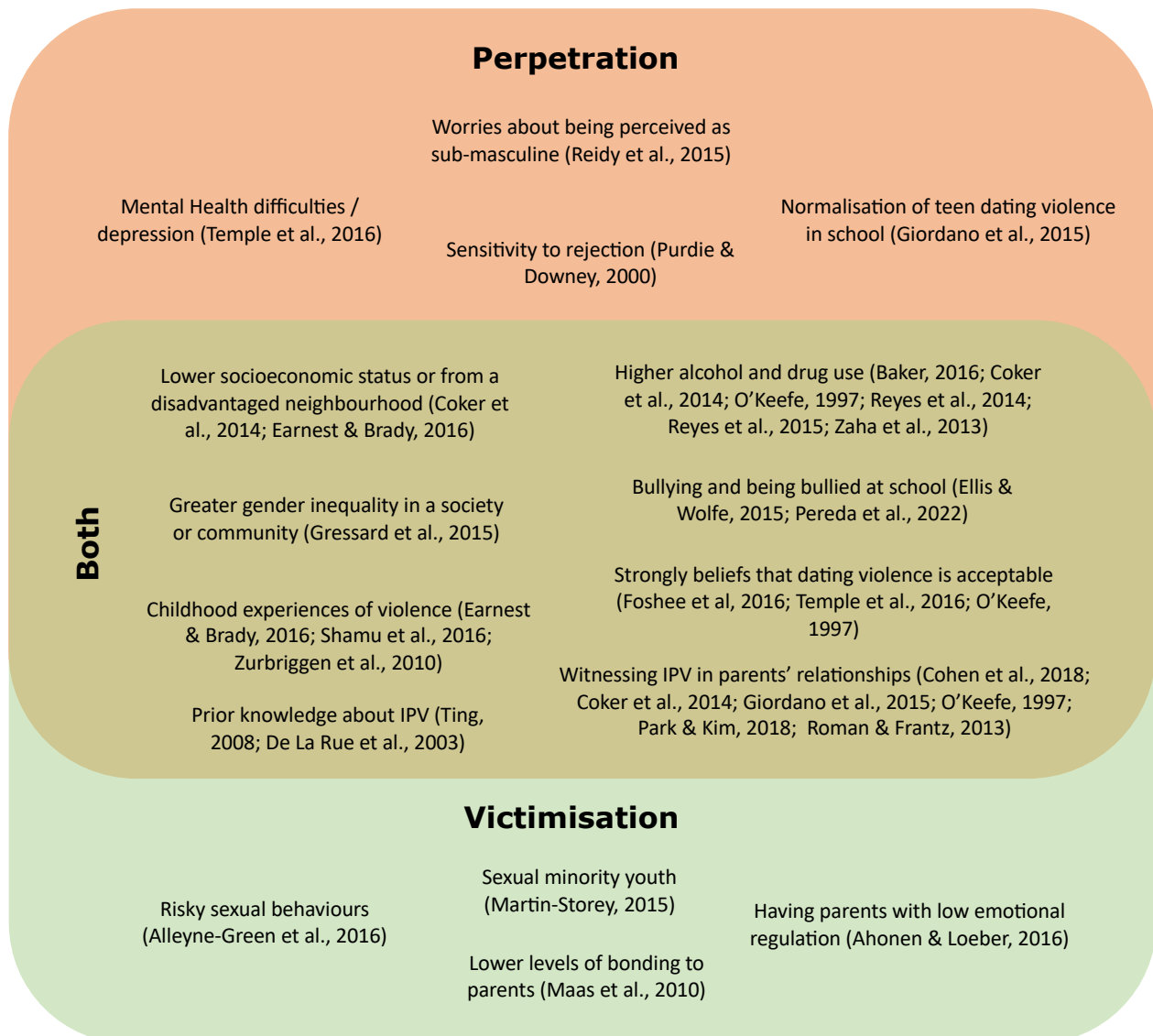
Research in the U.S. has shown that 26% of women who were victims/survivors of abuse first reported experiencing abuse before they turned 18 years old (CDC 2020). In other adolescent focussed studies, IPPA has been recorded to have been experienced by 3 in 10 adolescents who have dated (Zweig et al., 2013), with some studies seeing signs of IPPA as young as age 11/12 (Sears et al., 2007). In 2009, research conducted in the UK by the NSPCC provided substantial information about partner exploitation and violence in intimate teenage relationships (Barter et al., 2009). This research found that 50% of boys ($N = 289$) and 75% of girls ($N = 428$) experienced emotional violence in their relationships. Examples of emotional violence experienced by these participants included having a partner shout or scream at them, receiving threats of physical violence and controlling their socialising with others. Girls also tended to experience emotional violence more frequently, intensely, and across more of their relationships than boys. This is supported in similar populations in the US, whereby a longitudinal study into psychological abuse found that this form of abuse occurred significantly more towards adolescent females (47.1%, $n = 229$) than adolescent males (35.3%, $n = 184$) (Ybarra et al., 2016).

The predictive/risk factors of intimate partner abuse in adolescent relationships appears to align with those that predict intimate partner violence during adulthood (Capaldi et al., 2012). For example, research shows that some psychopathological traits make it more likely for an individual to act violently, thus increasing the risk of them perpetrating intimate partner violence regardless of age (Robertson et al., 2020; Temple et al., 2016). Past research also demonstrates how drug and alcohol use is known to cause violent tendencies during adolescence and adulthood, also making alcohol use a predictor of intimate partner violence (Cafferkey et al., 2018; Salas-Wright et al., 2016). As later discussed in Chapter 4 (Gender and IPPA) and Chapter 5 (Race, Culture and Societal Context), Feminist theory and family violence theories which explore how rigid gender-role, beliefs about male-domination over women, and sexist and patriarchal beliefs held in a particular society or community can explain why intimate partner violence towards women and girls is of high prevalence, regardless of age (De Coster & Heimer, 2021; Heise, 1998; Humphreys & Campbell, 2010; Hunnicutt, 2008; Lawson, 2012; Straus & Gelles, 1990). In Chapter 5 (Race, Culture and Societal Context), I also discuss how social learning theories explain how witnessing and experiencing abuse during childhood and adulthood can lead to one learning that violence is an acceptable means of gaining power or control over other people, leading one to also be more likely to perpetrate IPPA (Powers et al., 2017; Steller et al., 2006; Straus et al., 1980).

In addition to these overarching concepts that help to explain intimate partner violence as a whole, when looking more closely at empirical research (Taquette, & Monteiro, 2019), we regularly see the following factors specifically highlighted as predictors and risk factors associated with intimate partner violence perpetration during adolescence (Figure 3.1):

Figure 3.1

Examples of predictors associated with higher rates of intimate partner violence perpetration and victimisation in adolescence.



Each of these predictive variables may also be viewed as separate factors which could be incorporated into an intersectional model to study intimate partner violence in adolescent relationships, however in this thesis, I focus on only some intersecting factors (adolescence, girlhood, Blackness, and African, Caribbean and English culture). Nonetheless, the intersecting factors of interest in this thesis are also linked to some of the predictive factors presented in

Figure 3.1 (e.g. witnessing intimate partner violence at home may be in part linked to cultural attitudes towards intimate partner violence), as later, discussed in Chapters 4 and 5.

3.1.3 Adolescent Intimate Partner Violence and Help-Seeking

As earlier discussed, intimate partner violence during adolescence is common and can have substantial and lifelong impacts. Yet, young people tend not to tell anyone when they experience intimate partner abuse and therefore many do not receive help (Ashley & Foshee, 2005). This might be for various reasons. For instance, an adolescent may not be able to recognise that they are being abused, especially when the abuse is subtle/covert, therefore making them unlikely to report and seek help (Bandyopadhyay et al., 2014; Mars & Valdez, 2007). A young person may also avoid disclosing or seeking help when they experience intimate partner abuse due to fear of stigma and judgement (e.g from professionals, their parents and peers) and concerns around privacy when disclosing (i.e. fears that a practitioner will tell their parents), which in previous studies, young people have specifically mentioned as worries that stop them from making disclosures (Ashley & Foshee, 2005; Safe Lives, 2019).

When adolescents do seek help, they tend to seek help from informal sources (Ashley & Foshee, 2005). For instance, research overwhelmingly finds that when adolescents experience intimate partner abuse, if they do seek help, they are most likely to turn to their friends who may themselves have limited experience and dealings with issues in intimate relationships (Daw et al., 2022; Rowe et al., 2014; Fortune et al., 2008; Fry et al., 2013). This illustrates that friends (in the form of other adolescents) can be important in the process of a young person seeking help when they face abuse. Nonetheless, in a number of studies, when asked, adolescents have also reported that they would lean on relatives such as parents for support if they were to experience intimate partner abuse (including controlling behaviours) in a relationship (Daw et al., 2022; Elias-Lambert et al., 2013). While parents are instrumental in

supporting their adolescents, a common methodological limitation in research is the failure to capture other family members (e.g. siblings) who can also serve as a trusted source of support and the roles of extended family members (e.g. cousins and aunties).

Presumably, if a young person is going to their friend or a family member for help, in order for this help to be adequate, the friend or family member must have a reasonable amount of knowledge on the matter and the ability to provide effective support, otherwise, they run the risk of providing potentially damaging or ineffective support (e.g. not helping the victim to access suitable formal support, or giving advice based on misconceived ideas about IPPA). In surveys, interviews and focus groups later presented in this thesis (Studies 1 and 2), I directly ask Black women whether they spoke about IPPA with friends during adolescence and whether these conversations impacted their overall understanding about IPPA, and in Study 3, I specifically ask 16-17 year olds, whether they have learnt about IPPA from friends, how satisfied they were with the information received through the source and whether they would seek help from friends if faced with abuse. In the studies I also ask similar questions around the role of parents as well as other family members. Through these questions, I seek to achieve further clarity on the role of friends, parents and other family members (aunts, uncles, siblings and cousins), specifically for Black adolescent girls in England, and the extent to which these sources are effective for this population.

3.4 Link to the Next Chapter: An Intersectional Approach to Adolescence and IPPA

Age has traditionally not been found to be a significant predictor of dating violence (Arias et al., 1987; Marshall & Rose, 1987; Reuterman & Burcky, 1989); however, more recent evidence has indicated that adolescent intimate partner violence increases in older adolescence (over 15 years old) compared to younger adolescence, both in terms of victimisation and

perpetration rates (Black et al., 2015) and specifically for IPPA (Debnam et al., 2015). Furthermore, older adolescents (15 – 18 years old) have been found to experience control (a form of IPPA) from an intimate partner more, compared to early adulthood samples (19 – 24 years old), suggesting that age does have some link to IPPA (Catallozzi et al., 2011).

Research into how adolescent relationships and adolescent intimate partner violence changes throughout adolescence (from early adolescence to later adolescence) can offer even more insights when the role of gender is simultaneously studied. For instance, Taylor and Mumford's (2016) research found trends in the type of IPV displayed at different age points during adolescence, however these age differences were dependent on the victim's gender. In Taylor and Mumford's (2016) research, older adolescent girls (15- to 18-years-old) were more likely to have experienced intimate partner violence (73%) compared to younger adolescent girls (12 – 14 years old) and compared to all boys. Younger adolescent girls faced physical and sexual abuse far less than older adolescent girls (15- to 18-year-olds), whilst younger boys reported the highest amount of physical IPV victimisation and older boys were the most frequent perpetrators of sexual violence. Older adolescent girls were also more likely to have experienced moderate IPPA (65%) (e.g. jealousy or insulting behaviour and excessive surveillance of a victim) and serious threats/physical violence (10%) than younger adolescent girls (who experienced moderate IPPA = 51% and serious threats/physical = 4%). Overall, Taylor and Mumford's (2016) study shows that during adolescence, the nature of intimate partner violence differs from younger adolescent to older adolescents, however simultaneously, it differs according to gender. These findings help to again establish the importance of intersectionality when studying IPPA, as Taylor and Mumford's (2016) findings illustrates how experiences of the same phenomena (i.e. intimate partner violence) can and does differ depending on multiple characteristics (i.e. age and gender), not just one characteristic (age).

Whilst the current thesis does not specifically explore differences in IPPA education and experiences across different age points in adolescence, it does however use intersectional approaches to study how adolescence and a phase of life, may interact with gender, race and culture to create unique experiences of learning about and experiencing IPPA. In this chapter I have provided a general picture to contextualise how romantic relationships, intimate partner abuse, and IPPA may present during adolescence. Now, in the following chapters I go on to discuss intimate partner violence and IPPA in the context of gender (Chapter 4), race and culture (Chapter 5), making commentary on how existing literature surrounding these other characteristics, may also contribute to experiences of learning about and experiencing IPPA; ultimately, illustrating how studying literature on adolescence alone is not enough to paint a full picture of how Black adolescent girls in England learn about and experience IPPA.

Chapter 4 | Gender and IPPA

In this chapter I briefly explore relevant literature which helps to understand gender differences in IPPA in adolescent populations (e.g Barter et al., 2009; Tomaszewska & Schuster, 2021; West & Rose, 2000). The overall purpose of this chapter is to highlight and critically discuss past research which may be useful in informing an understanding of how and why IPPA may disproportionately impact Black adolescent girls in England, based on their gender, before even considering the intersecting influence of race, culture and societal context (to be discussed in Chapter 5). I start by discussing gender differences in IPPA victimisation and perpetration, before introducing and evaluating the idea of gender symmetry and gender bidirectionality, which alternatively argues that gender differences in intimate partner abuse may not be as pronounced as suggested by the vast majority of literature across the field. On occasion in this chapter, I refer to research which has used adult populations and research about other forms of intimate partner abuse such as physical abuse (and femicide/homicide) and sexual abuse, where these alternative studies help to encapsulate meaningful insights about gender differences in general. Notably, the need to rely on past research outside of the scope of IPPA in adolescent samples, again demonstrates how scarce IPPA adolescent research is and the general gap on literature on this topic within this field.

4.1 IPPA Victimisation During Adolescence, Gender Differences

Victims and perpetrators of intimate partner violence can be of any gender; however, several authorities recognise violence against women as a significant public health issue (United Nations, 1993; Home Office, 2021; WHO, 2021). The World Health Organization (2021) estimates that almost 27% of women worldwide (aged 15–49 who have been in a relationship) have experienced violence at least once at the hands of an intimate partner.

Research conducted by Barter and colleagues (2009) at the NSPCC found differences in teenage intimate partner violence victimisation amongst a sample of 1,185 adolescents. Around 75% of girls, compared to around 50% of boys had experienced IPPA which included being shouted or screamed at, receiving threats of physical violence, controlling who a partner socialises with, and receiving threats over a mobile phone or the internet. In line with the vast majority of gender comparison studies, in Barter and colleagues (2009) research, teenage girls also tended to experience intimate partner violence (including IPPA, physical and sexual) more frequently, intensely and across more relationships than boys did, therefore demonstrating clear gender differences amongst adolescents in a sizable UK adolescent sample.

More recently, Tomaszewska and Schuster's (2021) conducted a review of 34 European studies published between 2010 and early 2021 about teenage dating violence (age 10 - 20 years old), with a specific interest in prevalence rates and gender differences found in these studies. Of the 34 studies reviewed, 19 reported on IPPA victimisation. Adolescent girls were found to have been victims of IPPA at a rate of 5.9% to 95.5% and adolescent boys were victims of psychological violence 5.6% to 94.5% depending on the study. While Tomaszewska and Schuster (2021) found statistically significant gender differences, whereby quantitatively IPPA was consistently more prevalent towards girls than boys, as is presented in the figures above, the rates of victimisation for both girls and boys varied widely between the 19 studies. This level of variability and inconsistency across studies, is possibly due to differences in the methods such as samples and definitions of IPPA used across studies (as earlier discussed in Chapter -1 Defining Psychological Abuse).

Gendered differences can also be found by exploring the effects of intimate partner violence on adolescent girls and boys. As commonly found in research, the severity of abuse inflicted and impacts of abuse are typically more profound on girls and women, and the impacts of abuse

on girls and women than boys and men (Roger & Follingstad, 2011; Tjaden & Thoennes, 2000; Ybarra et al., 2016). In a systematic review led by Taquette and Monteiro's (2019) the causes and consequences of adolescent dating violence (including IPPA, physical and sexual abuse) were investigated across a collection of 35 studies from North America, Africa, Europe and Asia (Japan only). Several studies in this sample indeed found that the consequences of intimate partner violence were more profound and intense for adolescent girls than boys. Young women and adolescent girls were found to be more likely to face more severe physical injury and health problems (Tjaden & Thoennes, 2000), heightened fearfulness (Reidy et al., 2016), adverse effects on academic performance (Martz, Jameson, & Page, 2016) and more pronounced long-term mental health difficulties including posttraumatic stress disorder as a result of intimate partner violence, compared to young men and boys (Hamby & Turner, 2013; Tjaden & Thoennes, 2000).

Similarly, in an adult sample, women were also found to have been impacted by IPPA more than men (Hamel et al., 2023). In total, 45.5% of men reported that IPPA victimisation had no impact on them compared to 37.8% of women in this study. In contrast, 13.6% of males and 46.7% of women reported experiencing at least one impact of IPPA (e.g. psychological trauma and symptoms of depression). Across the 34 impacts of IPPA measured in Hamel and colleagues (2023) research, 13 impacts were significantly more frequently experienced by women victims. For instance, women more frequently reported feeling stupid, giving in to their partner's request to avoid more conflicts, feeling sexually inadequate and fearing stepping out of line. Hamel and colleagues (2023) found no significant difference in the other 21 impacts of IPPA tested in their study.

Further evidence of differences in the impacts of abuse can regretfully also be demonstrated through gendered rates of intimate partner homicide/femicide victims in the UK.

- In the year ending March 2023, a large proportion of women homicide cases in the UK were

committed by the women's current partner or an ex-partner (33% / 182 female victims age 16+ and over). This proportion was far lower for males whereby 4% of male homicide cases were committed by a partner or an ex-partner (ONS, 2023c). Whilst data on gendered homicide rates is not readily available in the UK for the entire adolescent age range (age 10 – 19) in the US, adolescent girls make up 90% of 11–18-year-olds killed by intimate partners (Adhia et al., 2019). Together, data from both the UK and U.S. demonstrate that the one of the most severe outcomes of abuse, death, more often affects adolescent girls, not boys.

4.2 IPPA Perpetration During Adolescence, Gender Differences

Gender differences can also be found in IPPA perpetration rates. In a study containing 171 low-income adolescent and early adulthood Black Americans aged 16- to 24-year-olds (mean age = 18), gender differences (f = girls/young women; m = boys/young men) were found in IPPA techniques used by participants (West & Rose, 2000). For instance, ‘making a partner feel guilty’ was used more by girls and women [f = 88.6%; m = 68.3%] but ‘degrading a partner’ was used more by boys and men [f = 37.9%; m = 53.7%]. On the other hand, ‘using tactics to hurt their partner's feelings’ [f = 80.7%; m = 79.5%] and ‘criticising a partner’ [f = 72.7%; m = 73.2%] was almost equally used across genders. This presents mixed evidence regarding IPPA, where perpetration of IPPA by gender appears to depend on the actual IPPA act being perpetrated.

Nevertheless, interestingly in Sears and colleagues (2007) research which studied 633 12- to 18-year-olds in the U.S., 35% of boys and 47% of girls had used IPPA in an intimate relationship which was far higher than the number of adolescents in this sample perpetrating physical and sexual abuse (physical abuse: boys = 15%; girls = 28% and sexual abuse: boys = 17%; girls = 5%). This same study highlighted that boys were more likely to have used IPPA (as well as physical and sexual abuse) if they were more accepting of dating violence, had

previously experienced intimate partner violence themselves, were aware of friends who were abusive to others, and if they were fearful of violence within their own family. Girls were more likely to perpetrate IPPA and physical intimate partner abuse if they were older, were more accepting of dating violence, had previously experienced abuse themselves or knew peers who perpetrated abuse of any kind (not specifically sexual).

Gender differences related to perpetration can also be seen in research that studies boys and girls' intentions for abusing. For instance, Johnson and colleagues make a distinction between intimate partner terrorism and situation couple violence (Johnson, 1995; 2008; Johnson et al., 2014). Intimate terrorism is thought to relate to acts of violence motivated by an overall goal of control and power. For example, a partner may use coercion and belittling tactics to control or exert power over some aspect of their partners life. On the other hand, Johnson (2008) uses situational couple violence to describe violence perpetuated in response to conflict escalation with a partner. Situational couple violence is found to be perpetuated almost equally by males and females in relationships (Johnson, 2008). Research suggests that intimate partner terrorism is almost exclusive to boy and men in heterosexual relationships, compared to the often self-defensive or fear-driven use of violence behind girls and women's perpetration (Eisner, 2021; Johnson, 2011; Reed et al., 2010; Swan et al., 2008). However, some studies have also found no difference in the use of self-defence as the reason for violent behaviours (Reidy et al., 2006).

4.3 The Idea of Gender Symmetry

Despite evidence of gender difference and high levels of violence against women globally, since the mid-1980s, the concept of **gender symmetry** has increasingly drawn attention in the field. The idea of gender symmetry argues that intimate partner violence victimisation rates are, in fact, far more similar between genders than typically assumed (Eisner, 2021; Hamel et al., 2023; Lascorz et al., 2018; Straus, 2011; Wincentak et al., 2017).

For instance, in Wincentak and colleagues' (2017) metaanalysis of 101 international studies of 13- to 18-year-olds, there was no significant difference found between boys and girls intimate partner violence victimisation, with approximately 21% of adolescent girls and boy reporting that they had experienced, intimate partner violence. Nonetheless, when generally delving into differences by types of abusive acts used, significantly more adolescent girls (14%) were victims of sexual violence than adolescent boys (8%), illustrating the importance of studying different forms of intimate partner abuse separately.

Similarly in the National Survey on Teen Relationships and Intimate Violence (STRiV) (Taylor & Mumford, 2016), a representative U.S. survey of 12- to 18-year-olds ($N = 1,804$), found no significant gender differences for intimate partner violence victimisation, with approximately 69% victimisation rates for both boys and girls. In line with this thesis focus, psychological abuse was the most common form of intimate partner violence experienced by both male and female victims in this study which was more than three times more common than physical (18%) or sexual (18%) abuse in this sample. For instance, the STRiV study (Taylor & Mumford, 2016) found that 63% of adolescents in the US had perpetrated violence (of any kind) in an intimate relationship with little gender difference overall; however, when the data is more closely inspected by categories of abuse, IPPA was perpetrated almost four times more by adolescent boys than it was by adolescent girls. Similar studies find IPPA to be the most experienced with similar victimisation rates for adolescent boys and girls (Halpern et al., 2001; Paíno-Quesada et al., 2020).

However, in a review of dating violence literature, Lewis and Fremouw (2001) acknowledged evidence of similarities in victimisation between boys and girls; however, they critically discussed how methodological differences could explain some of these findings. Limitations discussed included issues with wording of questions and operationalisation of intimate partner violence, the use of unsuitable measurement instruments, participant selection bias, reliance on

self-report data and social desirability by participants when reporting violence in research which together impact the quality of research results surrounding gender symmetry and generally exaggerate the prevalence of symmetry (Aldridge, 2021; Chan, 2011; Eisner, 2021; Hamby & Turner, 2013; Johnson, 2011; Reed et al., 2010).

A further criticism of gender symmetry research, noted within Straus's (2011) metanalysis, argues that supporters of gender-symmetry research tend to explore and compare perpetrator rates for all types of abuse (e.g. physical, IPPA, sexual) together, ignoring the stark gender difference which emerge when different types of abuse are studied. Separately, Straus (2011) made recommendations for future research to study relationship abuse using both the perpetrator and victim as participants to understand the intricate dynamics in the context of an individual relationship, which is likely provide researchers with more rich insights to help demonstrate how in some cases. Even when the rate of intimate partner violence within a heterosexual relationship may appear to be quite similar, when the motivations, consequences and types of violent tactics being used by each partner is further analysed, clear differences may emerge.

4.4 The Idea of Gender Bidirectionality

Studies report that many victims of relationship violence also perpetrate relationship violence (Bates, 2016; Courtain & Glowacz, 2019; Cui et al., 2013; Giordano et al., 2010; López-Barranco et al., 2022; Park & Kim, 2019; Renner, & Whitney, 2010; Spencer et al, 2021; Taylor & Mumford, 2016; Taylor & Xia, 2022; Viejo et al, 2016). This is sometimes referred to in the literature as bi-directionality, whereby a partner assumes both the roles of victim and perpetrator (Eisner, 2021).

For instance, Taylor and Mumford's (2016) research found that over half (58%) of adolescents who experienced psychological and physical intimate partner violence victimisation were also perpetrators of psychological and physical intimate partner violence (however, this pattern was not mimicked for sexual violence).

Supporters of bidirectional approaches to studying intimate partner violence (e.g. simultaneously studying the occurrence of intimate partner violence by both parties in a relationship) comment on its benefit in producing a more holistic understanding of the dynamics of violence in relationships.

Similar to critics of gender symmetry discussions, critics of the increased focus on bidirectionality when studying violence perpetration point to the sometimes misleading nature of bidirectionality arguments, whereby bidirectionality research often understates the motivations for why a partner is perpetrating violence (e.g. terrorism or situation couple violence) and the existence of power imbalances, which in turn can result in victim-blaming narratives (Eisner, 2021; Johnson, 2011; López-Barranco et al., 2022; Reed et al., 2010; Straus, 2011; Swan et al., 2008).

In the current thesis I choose not to deploy bidirectionality methodologies based on the Black feminist approach being used, whereby through the empirical studies presented in this thesis, I explore the victimisation of Black adolescent girls exclusively and free from comparisons to males and other racial groups. This thesis will in turn align with the majority consensus across literature and global public health approaches, which recognises that violence against girls and women is a serious, widespread and disproportionate issue that deserves to be thoroughly studied, which some studies that support of bidirectionality essentially minimise (Johnson, 2011; Reed et al., 2010).

4.5 Chapter Conclusions

From the research discussed, there is clearly variability in the field regarding gender differences in intimate partner violence victimisation and perpetration. Variability in the literature presented in this chapter, may in part, be explained by a range of methodological differences found in intimate partner violence and IPPA research. This includes variations in the definitions and measures of IPPA used across studies, sampling differences as well as the general reluctance that some participants may have in disclosing abuse that they have experienced or perpetrated (Archer, 2002; Tomaszewska, & Schuster, 2021; Chan, 2011). In addition to this, as IPPA research in adolescence is relatively in its infancy, it is difficult to conclusively confirm gender difference or gender symmetry in regard to IPPA amongst 10 – 19-year-olds. This is particularly true for 10 – 15 years olds, who in England are not currently included in national statistics on domestic violence and intimate partner violence until age 16, therefore we do not yet have an indication of gendered rates and impacts of IPPA in this group in England (ONS, 2023a, Schuster & Tomaszewska, 2021).

Despite research into gender and IPPA providing insights that may help to understand some Black adolescent girls experiences on IPPA, as echoed at the end of each chapter in this thesis, it is challenging to draw a sound understanding about IPPA when inflicted against Black adolescent girls in England, based solely on one characteristic (gender). In this chapter I have focused on the nature of IPPA when it occurs for adolescent boys and girls, however in Chapter 5, I now go on to build on this age-gender intersection, to now incorporate literature into the influence of race, culture and societal context into the picture.

Chapter 5 | Race, Culture and Societal Context

Now that the influence of age (adolescence) and gender (girlhood) have been explored, Chapter 5 focuses on delving into how these two constructs may interact with racial, cultural and societal factors, to ultimately explain how experiencing IPPA and learning about IPPA can uniquely differ when an adolescent girl also happens to be Black, living in England, and culturally influenced by their African and Caribbean heritage. In this chapter, I do not use generalised theories (e.g. biological, evolutionary, temperament and social exchange theories of male violence), which do not consider the influence of race-related phenomena to explain and describe violence against women. Instead, within this chapter I aim to carefully explore how intersectionality, and intersectional discrimination (e.g. misogynoir, stereotypes about Black girls and women) more specifically explains intimate partner violence, the target population of the research in this thesis.

In the first part of this chapter (pages 76-119), I assess factors that may impact Black women and Black girls' experiences of IPPA. To do this, race-based variables (e.g. stereotypes about Black women and girls), cultural norms (e.g. attitudes towards violence against women and girls) and societal contexts (e.g. socio-economic disadvantage and structural and individual level racism), are examined. In part two of this chapter (Part Two: How Cultural and Societal Content Impacts IPPA Education) I explain how these factors might impact experiences of learning about IPPA.

Part One | Factors Affecting IPPA Experiences

5.1 Gaps in Data on Black Girls and Women's Experiences of IPPA

Black girls and women experience psychological violence and abuse in numerous contexts, including (but not limited to) within intimate relationships (Kelly et al., 2022; Rivas, 2012; Barnes, 2001) and in family dynamics (i.e. parent to child abuse and aunt/uncle to child abuse; Franklin et al., 2008). Black girls and women also experience psychological violence sometimes in the form of race-related bully, discrimination and peer and exclusionary policies in the workplace (Attell et al., 2017; Hall et al., 2011; Hollis, 2018; Hughes & Dodge, 1997), at school (Khalifa, 2014; McKenzie, 2009) and within other institutions such as the criminal justice system (Agozino, 1997) and in healthcare (Birthrights, 2022).

In England and Wales, Black people make up 4.0% (2,409,283) of the population and Mixed race with African or Caribbean heritage make up 1.3% (762,633) (ONS, 2022b). According to data from the Crime Survey for England and Wales in 2023, the highest rates of domestic violence victimisation is against Mixed-race (7.9%) and White (4.7%) 16-74-year-olds. Domestic abuse rates towards Black (3.5%) and Asian (2.0%) 16-74-year-olds (ONS, 2023b) is lower. It is useful to highlight that this data is exploring domestic violence as a whole - The Crime Survey for England and Wales (2023) does not provide racial/ethnic split for specifically intimate partner abuse as a stand-alone form of domestic violence (ONS, 2023a).

Several studies, particularly in the US, suggest that Black women are at a heightened risk of experiencing intimate partner violence compared to other racial groups (Guerra, 2013; O'Keefe, 1997; Smith et al., 2017; Whitton et al., 2021). Nonetheless, some past studies also report no racial or cultural differences in dating violence (Lane & Gwartney-Gibbs, 1985; Malik et al., 1997; O'Leary et al., 2008; Koss, et al., 1991). These differences in findings may again in part be explained by methodological difference, including characteristics of the sample

studied (e.g age groups, location, university samples) and differences in the measurement tools used, the types of abuse being included in each study (e.g., some studies focus on physical and sexual violence, whilst others may include emotional and financial abuse) and the data analysis technique used across different studies. Racial disparities are also sometimes moderated in studies where additional factors, namely socioeconomic status, are incorporated into the analysis models (e.g. Rennison & Planty, 2003).

Nevertheless intimate partner violence and domestic abuse data in the UK is likely to be inaccurate as a result of various barriers to victims reporting abuse (e.g. due to stigmatisation, fear or embarrassment, negative past experiences with police, unawareness of criminal nature of abuse - e.g. Fergus, 2017; Hampton et al., 2003; Neville & Pugh, 1997; ONS, 2023a; Waller et al., & Quinn, 2022; West, 2002). Whilst these statistics are concerning as-is, these figures are unlikely to be a representation of the true prevalence of abuse against girls and women, as many cases go unrecognised or unreported. This is supported by data from the ONS (2023a), where participants (16-59 years old) were asked who they disclosed their abuse to. The majority of girls and women reported that they had only told someone known to them personally such as a friend or neighbour (53.3%), family or relatives (31.6%) or work colleague (11.0%). Fewer reported the abuse to formal sources such as a health professional (20.8%), the police (18.4%), Victim Support (10.8%) or a counsellor or therapist (24.2%). Top reasons given by both male and female victims for why they had not reported the abuse to the police included concerns that their abuse would be perceived as trivial or not worth reporting (45.5%), perceptions of abuse being a private or family matter (39.5%), and the victim not thinking that the police could not help with the issue (34.2%). Other reasons included embarrassment (27.5%), not wanting the perpetrator to be punished (16.6%), fearing further violence as a result of reporting the abuse (11.4%), and having a dislike or fear of the police (2.5%) (ONS, 2023a). Other studies have also found similar reasons for not reporting intimate partner abuse including victims' distrust

of formal support services and concerns regarding confidentiality when reporting through formal mechanisms such as a GP doctor (Vil et al., 2022; Salaheddin & Mason, 2016).

Similar issues with official statistics are found in other nations. For instance, a study exploring the underreporting of intimate partner violence in Nigeria and Rwanda found that when alternative measures (e.g. surveys and interviews) were used to study intimate partner violence rates, the rate of intimate partner violence increased by 39% in Nigeria and an astonishing 100% in Rwanda compared to national data, clearly demonstrating how publicly accepted data on intimate partner violence cannot be held as fully reliable (Cullen, 2020).

The general culture of discomfort in reporting abuse victimisation in the UK, paired with evidence which suggests that Black women and Black youth are less likely to formally report abuse or access formal support (Fergus, 2017; Hampton et al., 2003; Neville & Pugh, 1997; Waller et al., 2022; West, 2002), places Black girls and women in the position of *double omission* in data (caused by barriers to reporting abuse as a woman and as a Black person), making it inappropriate to assume that existing abuse data in England accurately reflects Black women and girls' experiences.

As will be explored in this chapter, evidence has also been found showing that some Black women deny the seriousness of their abuse experiences to protect partners and maintain racial loyalty (i.e. protect Black families and Black men) or avoid the label of being a victim of abuse (Rivas, 2010; West et al., 2020). Black women have also specifically been found to minimise their IPPA experiences due to misconceptions about IPPA acts being normal or acceptable relationship behaviours (Barnes, 2001; Stockman et al., 2014). Together, these factors also reduce the likelihood of abuse against Black women and girls being recorded in formal reporting mechanisms and national statistics.

Even when exploring empirical research, rather than national statistics, issues and under representation in data persist. Almost four decades ago, Asbury (1987) wrote about how across

many studies examining domestic violence and violence against girls and women, researchers often did not report the race of their participants or used samples which lacked multi-ethnic representation. When Black women and girls are not fully represented in intimate partner violence research, this can lead to conclusions and interventions being made and applied to all women/women in a particular country, without much genuine consideration of potential intersectional influences at play which should be taken into consideration to enrich and contextualise findings (Kelly et al. 2022).

Nonetheless, regardless of issues with statistical datasets, it is also important to note that quantitative data in general, is limited in its ability to truly examine, understand and explain how domestic abuse cases may differ for women when race and culture are considered. Simply counting cases of abuse does not provide a rich account of why and how abuse occurs, thus limiting the ability to develop interventions specifically suited to the needs of victims of abuse based on their race or culture. Evidence of racial differences recorded in datasets, even if unreliable, inevitably justify further enquiry as to why differences exist at all, a question which can be addressed through qualitative research methodologies.

Using both quantitative and qualitative methodology, a growing number of studies have explicitly studied Black women and girls' present and past experiences of intimate partner violence, including physical, sexual, and psychological/emotional abuse (e.g. Barnes, 2001; Gillum, 2019; Kelly et al., 2022; Potter, 2008; Ramos et al., 2004; Rivas, 2012; Sabri et al., 2012; Taft et al., 2009; West, 2021; Whitton et al., 2021). For instance, in a study by Mills and colleagues (2017), which surveyed over 120 Black women in America aged 18 to 61+ (mean age = 39.54), 62.5% had experienced IPPA. In past studies which centre Black women's experiences, we also find examples of research which has studied the effects of experiencing IPPA on Black women, which include increased depressive and anxiety related symptoms

compared to non-abused women (Barnes, 2001; Campbell et al., 1994; Mills et al., 2018; Ramos, 2004). In one study, Black women in fact reported having more long-lasting and profound negative mental health outcomes (such as anxiety, depression and intrusive thoughts) as a result of experiencing IPPA compared to physical abuse (Mills et al., 2018), again highlighting why it is important that IPPA is studied just as much as other types of abuse, given the serious implications associated with IPPA.

Studies often simultaneously investigate how various social factors (e.g. social economic status, living in a violent neighbourhood, the impact of rigid views on gender roles, and childhood experiences of violence) impact Black women and girls' abuse experiences and how such factors can affect Black girls and women's access to help and domestic violence services, as discussed later in this chapter (from page 106).

Despite the existence of some research into Black women's experiences of IPPA (e.g. Rivas, et al., 2013), no previous studies have explored IPPA in the specific and meaningful context of Black adolescent girls in England, a gap in the literature that I wish to significantly contribute to through the four new empirical studies presented in this thesis.

5.2 The Impact of Stereotypes

To grasp and explain Black women's and girls' experiences of IPPA, I now outline the significance of intersecting gender and race-based stereotypes in contributing to explaining nuances in Black women and girls' abuse experiences. As discussed in Chapter 1 (Intersectionality), Intersectionality (Crenshaw, 1989) explains how the co-existing and complex interaction of multi-social identities (e.g. race, gender, age, socioeconomic status, sexual orientation, ability) creates unique experiences of the world, oppression, and prejudice. In regards to intimate partner abuse, experiences of abuse and violence against **all** women and

girls are often found to be associated with misogyny, sexism, and traditional gender roles (Cinquegrana, et al., 2022; Blake & O'Dean, 2021; Canto et al, 2020), however **when directed at Black women and girls**, this abuse can sometimes simultaneously be motivated by or connected with anti-Black racism, stereotypes and stigmas about Black women and girls. This is known as **misogynoir**, a term first coined by Dr Moya Bailey (Bailey, 2016; Bailey, 2021; Bailey & Trudy, 2018; Northwestern University & Bailey, 2023).

5.2.1 Intimacy and Femininity Stereotypes

Several gender-race stereotypes about Black girls and women, are rooted in rhetoric created during the transatlantic operation of the enslavement of Black people (Coley, 2024; Collins, 1990, 1995, 2022; West, 1995). Rhetoric used to dehumanise and justify the mistreatment of Black people during this period in history (e.g. rhetoric of Black people being less human, violent and able to endure extreme physical pain), have continued to contribute to stereotypes and fuel prejudice with the repercussions of such rhetoric still seen today (e.g. via media representations of Black women - Jerald et al., 2016; Ward et al., 2023, and police brutality against Black people – Echols, 2022; Iheme, 2021). A number of stereotypes that still exist about Black women and girls play into hypersexual views about Black women, (e.g. Jezebel stereotypes), negative perceptions about Black women's personalities (e.g. Sapphire stereotypes), perceptions of Black women as being non-feminine (e.g. Matriarch stereotypes) and stereotypes about the role and labour expected of Black woman in their families and communities (e.g. Caregiver Mammy stereotypes). – The Jezebel stereotype refers to presumptions about Black women as sexually promiscuous, hypersexual, sexually manipulative (Collier et al., 2017; West, 1995). The Sapphire stereotype depicts Black women as threatening, verbally aggressive and defensive (Ward et al., 2023; West, 1995). Matriarch stereotypes also view Black women as aggressive, as well as loud and over animated. Due to this outwardly confident presence. Matriarch stereotypes also aim to paint Black women as

unfeminine, compared to women of other races and emasculating of men (Jewells 1993; West, 1995). Lastly, caregiver Mammy stereotypes suggest that Black women are highly maternal, self-sacrificing, family and community caretakers, who are capable of balancing multiple domestic and care-giver roles at once (Jewell, 1993; Moss 2024; West, 1995).

These stereotypes are known to have adverse effects on Black women's everyday lives (Ward et al., 2023), including employment opportunities (where a Black women may be overlooked for a job opportunities based on hirers stereotypes - Givens & Monahan, 2005; Ward et al., 2023), the treatment of Black women victims in the criminal justice system (e.g. Donovan, 2007 found that Black rape survivors tended to be viewed as more promiscuous than non-Black survivors) and Black women's experiences in relationships and of intimate partner abuse (e.g. where others may hold rigid expectations for how a Black woman should act in relationships and expectations of Black women to endure abuse - Fisher & Coleman, 2017; Gillum, 2002). Endorsement of the stereotypes is not only evident in day-to-day life for many Black women, but it is also explicitly demonstrated in intimate partner violence research (Cheeseborough et al., 2020; Fisher & Coleman, 2017; Gillum 2002). For example, in a U.S. based study, which included 221 Black heterosexual men, Gillum (2002) found that the vast majority endorsed stereotypical views about Black women (i.e. jezebel stereotypes endorsed by 48% and Matriarch stereotypes endorsed by 71%) which was measured using agreeability statements such as "African American women are likely to sleep around [Jezebel]", "African American women are too critical of their men [Matriarch]". Many (94%) participants in Gillum's (2002) research also endorsed positive stereotypes about Black women such as "African American women deserve to be respected [positive]". Nevertheless, in this research, endorsement of the Jezebel stereotype positively correlated with participants viewing physical violence against Black women as justified, indicating the disturbing negative impacts of stereotypes on the safety of Black women. These findings are unfortunately echoed in more

recent studies (e.g. Cheeseborough et al., 2020; Leath et al., 2021; Rosenthal & Lobel, 2016) which also show associations between beliefs in such stereotypes and strong beliefs in the sexual objectivation and violence against Black women and girls.

These stereotypes can also have an impact on how some about Black women and girls form their self-identity, make decisions about intimacy (Cotter et al., 2015; Graham & Clarke 2021). For instance, in an interesting study of 137 Black adults in the U.S., who were married or in a committed relationship, it was found that women who more strongly agreed with the Jezebel stereotypes also tended to have lower satisfaction in their own relationship (Fisher & Coleman, 2017).

In another study, Leath and colleagues (2021a) found that simply being more aware of other people's beliefs in the Jezebel stereotypes contributed to differences in Black women's self-perception. When asked 'How much do you think people in society believe that Black women ...' followed by various Jezebel stereotype statements adapted from the Stereotype Roles of Black Women Scale (Townsend et al., 2010) (e.g. How much do think that Black women use sex to get what they want?). Black women who believed that more people in society agree with Jezebel stereotypes about Black women, also reported feeling more sexually objectified and tended to have poorer sexual outcomes (e.g. lower sexual assertiveness, lower sexual satisfaction and higher sexual guilt) compared to Black women who were less aware that other people believed Jezebel stereotypes about Black women (Leath et al., 2021a; 2021b).

Opara and colleagues (2022) used Black feminism and an intersectionality perspective to study the effects of gendered-racist stereotypes on sexual decision making amongst a sample of 27, 14- to 18-year-old Black adolescent girls. They found that Black adolescent girls recognised that they were targeted by men and boys at school in sexual ways because of their race, gender, and physique. Girls interviewed by Opara and colleagues (2022) were aware of

the hypersexualised stereotypes and labels that existed about Black girls and women. Many of the girls also felt that they could not speak to their family about issues related to sexual violence and that sexual violence and stereotypes about Black girls were normalised in their communities. Girls also shared how they sometimes felt uncomfortable and unsafe at school, did not receive enough education about sexual violence at school and were not taken seriously at school when inappropriately touched by boys, leaving many girls feeling powerless, unable to seek help and left minimising their own experiences.

Ultimately, studies which explore the relationship between stereotypes, intimacy, and intimate partner violence, present clear examples of how endorsement of these intersectional based stereotypes (i.e stereotypes that are specifically applied to women who are also Black), are linked to attitudes which support intimate partner violence towards Black women and effects on Black girls self-perceptions. In a way, such stereotypes specifically place Black women and girls at risk of victimisation fuelled by stereotypes and expectations which are not placed on non-black women. – This does not necessarily mean that the existence of such stereotypes increases the rate of intimate partner violence towards Black women any more than rates of violence towards non-black women, but it does help to illustrate how the motivations behind intimate partner abuse perpetration, and attitudes towards intimate partner abuse can differ when distinctive intersectional experiences are studied. – In the empirical studies conducted for this thesis I do not explicitly ask participants to speak about any stereotypes, given the pervasive nature of these stereotypes and the potential impacts that said stereotypes can have on women and girls self-perceptions, and a perpetrators motivations for committing IPPA, I strongly believe that it was important to note the significance of these stereotypes in this chapter, to inform an overall understanding of the ecosystem, impacting Black women and girls lived experiences of abuse. As later seen in the findings of my empirical studies, no participants in my research directly used the terms Jezebel, Sapphire, Matriarch or Caregiver Mammy to

describe stereotypes placed on themselves, however in qualitative studies where Black women are asked to share their stories of learning about IPPA (Study 2) or directly experiencing IPPA (Study 4) during adolescence, we see several examples of participants describing the impact of the different stereotype... The strong Black girl/woman stereotype.

5.2.2 Strength Stereotype

The ‘strong Black girl/woman’ stereotype is a race-gender stereotype which depicts Black girls and women as strong, independent and resilient (Kelly et al., 2020; Stewart, 2017; Ward et al., 2013; Watson & Hunter, 2015). Perceptions of Black women being exceptionally strong and resilient are again thought to stem from the transatlantic slave trade, where the positioning of an ideology that Black women are strong and therefore have a greater tolerance for pain and suffering was used as a form of justification to dehumanise, abuse, and mistreat Black women (Bell & Mattis, 2000; Stewart, 2017). In modern times, this stereotype of Black strength is often paired with the expectation that Black girls and women are capable of suppressing their emotions even when faced with hardship, abuse, and health issues (Donovan & West, 2014; Godbolt et al., , 2022; Liao et al., 2019; Nelson et al., 2022; Rosenthal & Lobel, 2016; Stewart, 2017; Tristine, 2021).

This stereotype is found to affect Black girls and women’s own behaviours and self-perceptions, as well as how others perceive and treat them (Kelly et al., 2020; Stewart, 2017; Ward et al., 2013; Watson & Hunter, 2015). The effects of these stereotypes have been linked to heightened levels of depression, anxiety, emotional suppression, social isolation, and difficulties with emotional regulation amongst Black girls and women (Anyiwo et al., 2021; Carter & Rossi, 2021; Donovan & West, 2015; Liao et al., 2019; Nelson et al., 2022a; Nelson et al., 2022b; Woods-Giscombé, 2010).

Strong Black girl/woman stereotypes may sometimes act as a barrier to Black women and girls' engaging with support. For example, some Black women and girls may distance themselves from the label of being a 'victim' to (intentionally or unintentionally) uphold the image of being a resilient and strong woman (Debnam et al., 2021). In fact, evidence suggests that the (real or imagined) pressure to uphold expectations of being strong affects how and if Black women and girls seek help when abused by an intimate partner (Stewart, 2017; Watson & Hunter, 2015).

Monterrosa (2021) conducted interviews with African American and White victims of intimate partner violence, comparing the effects of internalised stereotypes on intimate partner violence. This research revealed a relationship between Black women affected by strong Black woman stereotypes and a lesser likelihood of seeking help. Black women were more likely to confide in friends or close family members rather than formal sources of support, such as law enforcement or therapists, whilst White women reported being comfortable speaking to both professionals and their personal support system when experiencing abuse.

This was similarly found in (Debnam's, (2021) research of an adolescent sample of 18-19-year-old Black girls in America, where increased identification with strong Black women stereotypes was associated with being less likely to report abuse victimisation (Debnam, 2021).

Research reveals that Black women who internalise strong Black women stereotypes score below average for psychological openness and help-seeking propensity (Watson & Hunter, 2015). When help-seeking, with regard to intimate partner violence experiences is investigated, research finds that some Black women's resistance to engage with formal sources of support (e.g., law enforcement, therapists) reflects internalised 'strong Black girl/woman' stereotypes – with Black women citing their fear of burdening their friends and family, desire to protect the well-being of others, and desire to 'hold their own' as barriers to engagement with support mechanisms (Monterrosa, 2021).

Nonetheless, a few studies have also found that strong Black woman/girls stereotypes can also have an empowering sentiment for some Black girls and women encouraging positive agency, resilience and dedication achieving goals for some (Watson & Hunter, 2016; Woods-Giscombé, 2010). Some researchers also describe how being perceived as strong or ‘unbreakable’ is used as a protective shield from racist attacks from others by some Black women, whereby exhibiting an image of being strong and tough may discourage others from being directly racist to a Black woman (e.g. out of fear of the repercussions or because they know that their racist comments would not bother the Black women) (Woods-Giscombé, 2010). Nonetheless, even when researchers have highlighted the positive impacts of the stereotypes, they typically still tend to comment on the negative impacts of these stereotypes in the same literature, particularly also noting that Black woman/girls self-perceptions does act as a barrier to Black women and girls seeking help early when faced with adversity (including intimate partner abuse, as well as adversity in their work life or when in need of financial and medical assistance - Tristine, 2021; Ward et al., 2013). As such, there is general consensus in the field that strong Black woman/girls stereotypes can and does have negative effects.

In addition to the impacts of strong Black girl/woman stereotypes on individual Black women and Black communities, this stereotype is also known to be held by other people, ultimately having an impact on how they view and interact with Black women. For example, when a Black woman is struggling with a project at work, colleagues or managers may be less likely to offer her support, guidance or grace as hastily as they would for a non-Black colleague facing the same issue, possibly due to the preconception that the Black woman can and will find a solution independently or can handle the associated stress or failure easier than her non-Black counterpart (as well as due to other anti-Black and anti-Black women stereotypes that their colleagues may have) (Donovan & West, 2014; Hall et al., 2011; Wood-Giscombé, 2010). On the flipside several studies have also found Black women using emotional suppression, to hide

their feeling of stress or struggle from the colleagues at work, as a self-protective mechanism in the workplace and education where giving off the impression that they are not stressed and not struggling can protect Black women from being misjudged as incompetent in the workplace where by comparison, other women might be able to show stress and struggle without magnified anti-Black scrutiny from others (Donovan & West, 2014; Hall et al., 2011; Rosette & Livingston, 2012; Wood-Giscombé, 2010).

In some cases, the effects of this stereotype can be seen on a systemic level, whereby widespread ingrained beliefs about Black women. This ultimately leads to disproportionate levels of Black women and girls being denied access to effective care and protection.

As an example, in recent years, in the UK, there has been greater awareness and information shared around practitioner bias related to Black women's strength in maternity care. In the UK, Black women are four to five times more likely than White women to suffer maternal mortality (Birthrights, 2022). Recent reports include publications by the charity Birthrights (2022) entitled 'Systemic racism not broken bodies' which reported on the racial injustice and human rights in UK maternity care, the Channel 4 dispatches documentary 'The Black Maternity Scandal' (Shannon et al., 2021) and the 'Black Maternal Health' report (Women's and Equalities Committee, 2023). One cause of this disparity detailed in the evidence put forward in the above sources, is that when nurses and doctors hold stereotypes and stigmas of Black women having greater tolerance for pain, they are less likely to take concerns and complaints of pain as seriously as they would if a White woman complained about pain. This leads to these practitioners failing to provide pain relief and other adequate required care to Black mothers in a timely manner, often leaving Black women to endure higher pain levels for extended periods and sometimes death (Birth Rights, 2022; Knight et al., 2021).

As the impacts of strong Black girl and women stereotypes have not been explicitly studied and connected to IPPA experiences, in adolescent samples in England, we cannot predict the

impact of these stereotypes on the sample of the current thesis; however, as mentioned, prior to conducting empirical studies, I expected discussions related to strong Black woman stereotypes to be naturally brought forward by participants. Within Study 2, I include reflections from Black women who indicated that this stereotype impacted their perceptions about IPPA and help-seeking.

5.2.3 Adultification Biases

Lastly, I wish to introduce the ideas of adultification in the context of Black adolescent experiences in England, which allows us to draw on previously discussed issues of practitioner bias (Chapter 2 – Intersectionality) but specifically incorporates the intersection of both adolescence and gender.

Black children and adolescents likely face unique challenges when accessing support for IPPA for several reasons, one being ‘adultification’. This refers to the process and experience of a child being prematurely treated as an adult and viewed as more mature than other children their age. Through adultification, a child may be more likely to be exposed to adult-like themes, expectations, responsibilities, and punishments, and may receive less sympathy from adults who hold adultification biases (Thompson, 2020). This can ultimately strip the child of traditional childhood innocence (Burton, 2007; Davis & Marsh, 2020). Viewing children as older or more responsible than they are can also distract adults from their safeguarding responsibilities, as they may view the child as more capable of caring for themselves or dealing with difficult matters without adequate support from adults (Burton, 2007; Davis & Marsh, 2020).

Adultification is linked with abuse and sexual exploitation, as children seen as older are more likely to be subject to intimate adult themes and behaviours (Thompson, 2020). In Thompson’s (2020) article, they linked the Jezebel stereotype (discussed on page 81) to the

adultification of Black girls. Thompson (2020) discussed how when older people apply Jezebel stereotypes to Black girls, they may view Black girls as more sexually available than other girls, which in some cases fuels predators and groomers to target these girls for intimate relationships and exploitation (Thompson, 2020). With this in mind, adultification becomes relevant to IPPA, as girls who are viewed as older may be at a higher risk of being abused, coerced and manipulated by older partners. Simultaneously, if the adults around the adolescent girl (e.g. teachers, family members and other practitioners) also hold adultification stereotypes about them, they may overlook harmful experiences (including as IPPA) that the girl goes through and offer limited support and safeguards based on the presumption that the adolescent girl is mature enough to deal with the situation she is facing.

From an intersectional perspective, adultification disproportionately affects Black children, where Black girls may be more frequently viewed as fully grown women (Curtis et al., 2022; Morris, 2016), and Black boys are viewed as men by society and the criminal justice system (Gilmore & Bettis, 2021). A report in the US by Epstein and colleagues (2017) assessed 325 adults' views on the innocence of Black girls, where most participants were White (74 per cent) and female (62 per cent). Their results found that from as young as five years old, adults viewed Black girls as more adult than White girls, requiring less protection than White girls and needing less nurturing than White girls. These findings are consistent with other studies, which show greater adultification of Black girls by teachers, healthcare professionals, and police (Baetzel et al., 2019; Gamble & McCallum, 2022; González, 2018; Kalu, 2021; Morris & Perry, 2016). In the UK, a recent thematic report explained that many issues experienced at a disproportionate rate by Black children are catalysed by the presence of adultified perceptions of Black children by practitioners, including their teachers (Commission on Young Lives, 2022). For instance, the adultification of Black children in schools contributes to disproportionate levels of harsh punishment and a disproportionate likelihood of Black child

being excluded from school or referred to a pupil referral unit for alternative schooling (Commission on Young Lives, 2022; Perera, 2020).

The existence of adultification biases highlights differences in Black children's lived experiences compared to other racial groups of adolescents, supporting the need for this thesis to study the unique experiences of Black adolescent girls. At the time of writing, there is no published research which conclusively links adultification to IPPA in Black adolescent populations. In relation to the aims of this thesis, whilst participants are not directly asked about the presence or effects of adultification in their lives, when using qualitative methods (ie. focus groups and interviews) in Study 2 and Study 4 of this thesis, it would not have been a surprise if Black women spoke about or implied adultification biases played a role in their experiences of IPPA, given our understanding that this stereotype disproportionately affects Black children. As later discussed in empirical studies of this thesis, signs of adultification having an impact on IPPA education and IPPA experiences during adolescence were indeed found, with some Black women discussing examples of teachers not taking their concerns about being assaulted as serious as they did white girls concerns (see Study 2, page 183) and some Black women sharing their adolescent relationship experiences where older men perpetrated IPPA against them (see Study 4, page 311)

5.3 The Influence of Cultural Norms and Social Learning

Culture refers to “the ideas, customs, and social behaviour of a particular group of people or society” (Oxford Learners Dictionaries, n.d). When discussing culture in the context of this study, I am referring to how the beliefs, norms, values, attitudes, laws and customs held by Black women’s parents, families, and communities (e.g. religious communities, educational institutions, Afro-Caribbean social groups, friendship groups, school and local services) may

have shaped how they experienced, and they learned about IPPA during their adolescent years. Overall, research into cultural differences in intimate partner abuse, illustrate how structures (e.g. gender inequality) and norms (e.g. strict gendered rules and expectations) in a community can be linked to attitudes towards and perpetration of intimate partner violence.

Research has frequently found that in cultures and communities with higher recorded levels of intimate partner abuse towards women a number of common cultural beliefs and sociodemographic factors also tend to be present. For instance, intimate partner violence is more widely viewed as acceptable in communities which also tend to suffer from greater gender inequality (e.g. larger wage gaps and lower rates of women in education - Sardinha & Catalán, 2018; Tran et al., 2016). Additionally, people in these cultures and communities also tend to hold stronger beliefs in rigid traditional gender norms (e.g. beliefs that women should be feminine and caregiving and beliefs that men hold authority over women - Uthman et al., 2009), have more sexist attitudes towards women (Gracia et al., 2020; Nascimento et al., 2023; Wubs et al., 2013) and are more likely to believe myths about domestic violence (e.g. believe that ‘making a man jealous is asking for it’ - Cinquegrana et al., 2023; Peters, 2008) and that wife-beating is acceptable (Tran et al., 2016).

Vil and colleagues (2022) findings cover a range of cultural and sociodemographic factors associated with predicting abuse that will be explored in this section. In a U.S. sample, Vil et al. (2022) used interview techniques to ask 22 Black nursing students to comment on why they believed intimate partner violence was prevalent in predominantly Black communities. Cultural and socio-demographic related responses shared by participants included beliefs that systemic issues related to missing Black fathers in Black communities, unhealthy male masculinity norms, witnessing mothers experience and remain in abusive relationships and the normalisation of intimate partner violence within their community all

contributed to higher domestic violence rates. Participants also suggested that people in their communities had misinformed information about intimate partner violence and were mistrusting of formal sources like the police, which collectively ultimately contributed to low levels of help-seeking amongst abuse victims and prolonged experiences of abuse in their communities. A number of the views shared in Vil et al (2022) research are also echoed later in the empirical studies of this thesis whereby Black women in England share beliefs that IPPA towards Black adolescent girls is in part connected to IPPA being normalised within their cultures, witnessing abuse in the household as an adolescent, religion promoting IPPA and violence against women.

With centuries of globalisation, migration and cultural integration, many people are living in a society influenced simultaneously by several cultures. In relation to this thesis, it is therefore important to recognise that many Black adolescent girls living in England are influenced by the intersection of cultural norms and values attributable to England as well as their country of ancestral heritage, being predominantly countries in the Caribbean and countries in Africa (Cook & Waite, 2011, 2016; Machaka, 2024; Ochieng, & Hylton, 2010). The marriage of English, African and Caribbean culture creates a unique adolescent experience in a way that is not fully analogous to adolescents growing up with different cultural influences at home.

I now delve into some of these potential influences of culture in the creation and upholding of violence against women and IPPA in the context of the sample being explored in this thesis. Below I present the influence of African and Caribbean heritage and cultures, whereby the effects of these cultures influence on Black women's understanding, perceptions and help-seeking behaviours surrounding IPPA as adolescents is discussed, and the influence of English culture, whereby the influence of living in England as an adolescent girl is shared.

5.3.1 Acceptance of Male Violence Against Women and Rigid Gender Roles

Fakunmoju and Bammeke (2016) studied differences in cultural beliefs and stereotypes surrounding gender roles and violence in intimate relationships between a sample of men and women in Nigeria, South Africa, and the U.S. – All considered to be patriarchal societies. Fakunmoju & Bammeke's (2016) provide extremely useful insights into difference between these three countries in relation to IPPA. Respondents in Nigeria appeared to deem that manipulation and control of women is acceptable and more strongly believed in stereotypes about women being 'too emotional'. Compared to participants in South Africa and the U.S., Nigerian participants more strongly agreed with statements like "Sometimes, a man should bring his woman to her knees for her mistakes by withholding his love and affection from her" and "It is not an exaggeration to suggest that women are conflicted: They act as if they are miserable with men, yet feel insecure without them" (Fakunmoju & Bammeke., 2016). In Fakunmoju and Bammeke's (2016) discussion, they made links between these results and the influence of cultural and religious socialisation in Nigeria, which is thought to more strongly reinforce patriarchal structures, male superiority, control over women, women's expectations to be submissive, views on marriage as a form of ownership of women, and traditional roles for women than is found in the other two countries studied.

Lacey and colleagues (2021) brought together existing literature to explore domestic violence through a Caribbean lens (including Latin American and Caribbean research). They highlighted how strong patriarchal values and more rigid gender roles (e.g. women being held responsible for daily domestic and nurturing duties) found in some Caribbean communities in the U.S. contributed to high rates of domestic violence and violence against women in these communities (also supported by Barriteau, 2003; Bissessar & Huggins, 2021; Jones et al., 2017; Joesph & Jones, 2022; Smith, 2016; Stephenson, 2021). Lacey and colleagues (2021), again makes links to the Atlantic slave trade, where the use of violence by Europeans contributes to

a maladaptive schema that violence and dehumanising practices can be used as a means to achieve to power, social order and obedience. Some scholars discuss how this use of violence became normalised and regenerated in some Caribbean countries (Morgan & Youssef, 2006).

La Franc and colleagues (2008) explain how acceptance of violence as an conventional solution to relational conflict leads to increased intimate partner violence. They drew on an earlier study (La Franc & Rock, 2003) in Barbados which found that men were more motivated by the desire to 'win' a relationship conflict, rather than negotiate and compromise when conflict arose. A focus on winning in conflict appeared to increase the use of violence, including IPPA tactics (e.g. manipulating, belittling, shouting and intimidating partner) as a means to win arguments. Nonetheless, La Franc and colleagues (2008) described this desire to win as a 'universal culture of adversarial relationships' whereby this approach to conflict is found globally rather than being a culturally specific trait potentially being more relevant to how men and women are socialised and taught to deal with conflict, as found in several other studies (e.g. Gere & Schimmack, 2011; Rodrigues et al., 2019; Sanderson & Karetzky, 2002; Simon et al., 2008),

In Kimuna and colleagues' study (2018), 4,512 women (mean age 32) from five ethnic groups in Kenya were asked if they had ever experienced intimate partner abuse, including physical, sexual, and emotional abuse (e.g. feeling threatened, humiliated, insulted or made to feel bad by their spouse). Within this sample, physical violence (35.2%) occurred more than emotional (30.9%) and sexual violence (11.4%). However, various confounding variables impacted the nature of abuse. For instance, factors which were strongly linked to increased rates of emotional abuse included having a husband who drank alcohol, having a husband who was more domineering/controlling and being a woman who believed that wife beating was justifiable. Education and wealth levels did not statistically impact emotional abuse, contrary to other studies which find both education and wealth as predictors of increased abuse

(Abramsky et al., 2011; Cunradi et al., 2000; Gillum, 2019; Pavao et al., 2007). To capture the specific cultural factors involved in IPV perpetration and victimisation, Kimuna and colleagues (2018) made distinctions between the differences between the five ethnic groups in Kenya that they had studied. For instance, Luhya and Luo Kenyan women reported higher rates of abuse than other ethnic groups in Kenya. The researchers described this in part might be related to cultural and social factors. For instance, in Luhya and Luo groups, there tends to be lower levels of education, higher unemployment rates and greater economic disenfranchisement, in part due to systemic underserving of these groups in Kenya. Within these subcultures in Kenya, researchers also found more widespread acceptance of wife-beating, male dominance over women and traditional marriage roles (Lawoko, 2008), which in other cultures outside of Kenya, is also linked to higher rates of intimate partner violence against women (La Franc & Rock, 2003; Nascimento et al., 2023; Sears et al., 2007, Temple et al., 2016).

Similarities are found in Nwabunike & Tenkorang (2015) research which compared the largest ethnic groups in Nigeria, whereby Igbo (25%) and Hausa (22.9%) women reported experiencing emotional violence more than Yoruba (10.1%) women. Again, more widespread justifying of wife-beating or having a domineering husband was related to increased rates of emotional violence, as well as physical and sexual violence in Igbo and Hausa groups. As Nwabunike and Tenkorang (2015) highlight, for interventions aimed at addressing domestic violence to be effective across Nigeria, strategies must consider the differences found between groups in Nigeria, rather than attempting to address domestic violence with a one-size fits all approach. This aligns with one of the key arguments presented in the current thesis, that interventions for adolescents across England should also be culturally informed and potentially targeted, to maximise the effectiveness of IPPA reduction strategies amongst adolescents influenced by differing cultures outside of school.

5.3.2 Misogyny and Sexism

Given the stark statistics surrounding violence against women in England and Wales, it is clear that violence against women and misogyny is a problem. This is supported by a number of studies and articles conducted with UK samples which describe the presence of misogyny across several UK sectors including but not limited to, healthcare, politics, journalism, higher education, music, nightlife culture, online on social media and in sport (Barker et al., 2019; Benzon et al., 2024; Caudwell, 2017; Gill & Toms, 2019; Hayes, 2014; McCarry et al., 2023; Pope et al., 2022; Turgoose, 2019; Zempi & Smith, 2021)

For instance, in Bows and colleagues (2022) study, 13 women were interviewed about sexual violence at music festivals. The researchers found worrying insights into sexual violence at music festivals, including participants describing sexual violence as almost normalised in these settings. Alternatively, Benzon and colleagues (2024) research, uncovered insights into the widespread and normalised use of misogynistic language used in women's healthcare services. In this study, women described how they were often faced with misogynistic and belittling phrases used in women's health services such as a doctor calling them a 'good girl'. Participants indicated that this could ultimately made some women feel disempowered when accessing healthcare. When investigating studies into misogyny, sexism and attitudes towards violence against girls and women, there is also evidence of the existence of these viewpoints amongst some adolescents in the UK, which in turn may have a knock-on effect on their behaviours in intimate relationships.

First, looking at studies into misogynistic cultures in UK universities. During the first year of university, most students still fall into the category of being an adolescent, at age 18/19. A sizable collection of papers exploring gender-based violence on UK university campuses help to underscore the existence of misogynistic and sexist attitudes amongst young university students (Diaz-Fernandez & Evans, 2020; Jackson & Sundaram, 2015; Jones, 2014; Phipps,

2013; Turgoose, 2019). Turgoose (2019) for instance, specifically highlighted how programmes and policies aimed at tackling gender-based violence in UK universities should tackle the nature of so-called 'lads culture'. So-called lads culture is a group mentality usually amongst young men often associated with being boisterous, heavy alcohol consumption, 'banter' usually related to the hyper sexualisation of women and homophobia (Phipps, 2013). This sub-culture has contributed to the normalisation of gender based violence on university campuses and regards offensive behaviour from some male students as excusable. A number of studies have evidenced the existence and impact of this culture at universities. For instance, in a study commissioned by the National Union of Students (NUS) (Phipps, 2013), interviews and focus groups with 40 female students found that lad culture appeared to have a dominating presence on university campuses despite only really being upheld and beneficial to a minority of students in the university population.

Many participants discussed the noticeable influence of lad culture on social activities at university including sports and nightlife. Students spoke about sport facilities and sporting activities at university being a setting where sexism, sexual harassment and humiliation of women was frequently found, as a result of lad-culture being especially prominent within male sports teams at universities. Some women in Phipps (2013) research also disclosed their experiences of sexual molestation and sexual pressure linked to university nightlife. This is further supported by another survey which found that one in four students had suffered sexism or unwanted sexual advances, two in three reported hearing, rape or sexual assault jokes on campus, and 44% had seen sexualise images of women around campus, which made them feel uncomfortable (NUS, 2014; Jones, 2014). Participants described how victims would often feel unable to challenge these acts, due to the normalisation of such behaviour on campus, and how many students are also unaware of how to seek help at their university or who to report these

incidents to (Phipps, 2013), which is again supported by the NUS (2014) survey whereby 60% of students were unaware of their universities policies on sexism.

Whilst it is unclear exactly how many young people experience violence and abuse whilst at university (as universities are not required to publish this data), a number of researchers and student activists have identified an ongoing issue with a lack of meaningful policies, insufficient reporting mechanisms and inadequate staff training at universities, which ultimately contributes to the continued pervasiveness of sexual violence in particular (Brown et al., 2014; Bull et al., 2022; Humphreys & Towl, 2022; Office for Students, 2022; Phipps, 2023; Towl & Walker, 2021; Universities UK, 2016).

Studies from U.S. universities have already studied this in Black American samples, and found that Black female students understanding and experiences of abuse and sexual violence on campus is affected by hypersexualising stereotypes about Black women (Zounlome et al., 2019), racialised trauma and community loyalty/silencing (Zounlome et al., 2019), religiosity (Zounlome et al., 2019), and systemic barriers to accessing help including their disclosures being dismissed by the university and in the criminal justice system (Henry, 2009; Lindquist et al., 2015; Zounlome et al., 2019).

I am unable to find literature which specifically explores intimate partner violence or sexual assault of Black 18 -19 year old women attending universities in England, however ample literature evidences the experiences of racism, feelings of non-belonging (when attending predominantly white institutions), stereotypes about Black students from peers and mental health issues for many Black university students in the UK, illustrating how being Black is an important factor relevant to how university is experienced (e.g. Osbourne et al., 2021; Osbourne et al., 2023; Stoll et al., 2022). As such, by taking an intersectional approach, we can acknowledge that young women at university may be subjected to sexism, misogyny and assault, however Black young women's experiences of these may also be affected by anti-black

racism and stereotypes, potentially creating a unique multilayer experience of misogynoir for Black adolescent women attending university in England.

Looking at school-aged adolescents (10-18 years old), the issue of rising sexism and misogyny amongst students in UK schools has become a point of discussion at government level, with several schools, teaching unions, parents and researchers calling for more interventions to tackle these issues in schools (Davies-Jones, 2023; UK Feminista & National Education Union, 2017). In 2021, following calls for a rapid review into sexual violence in schools, Ofsted (2021) reported that despite there being no centralised way of reporting and accessing official rates of violence between young people in UK schools, it is evident that sexual violence between peers is occurring at a high rate in schools and colleges in England and Wales. For instance, 1.3% of all permanent school exclusions and 0.6% of all temporary school suspensions between the 2013/2014 and 2018/2019 school years, were primarily due to sexual misconduct. This averages out to about 55% of secondary schools suspending students for sexual misconduct every school year. In an additional survey of over 800 adolescents aged 13 and over, 93% of girls responded that sexist name calling happened a lot/sometimes in their school. Comparatively less boys surveyed (74%) believed that sexist name calling happened a lot/sometimes in their school. Additionally, 81% of girls said rumours about sexual activity happened a lot/sometimes in their school compared to 53% of boys. Older adolescents (age 16 and over) were more likely to report these acts occurring than younger adolescents. Overall, these findings indicate a mismatch between boys' and girls' perceptions of the extent to which the sexually violent acts were occurring in their school, as well as differences in perceptions and awareness of these issues according to adolescents' age. This demonstrates another example of how the intersection of age and gender simultaneously impacts perceptions and potentially the onset of experiencing (and therefore being aware of) sexual violence.

In Ofsted's (2021) investigation, they also carried out qualitative focus groups with adolescents to gain a better understanding of young peoples' perceptions on why sexual violence was occurring amongst their age group. Young people reported that sexualised language was normalised in their schools, with many students (boys more than girls) regarding this language as banter. Some students even commented that their teachers often dismissed the use of sexualised and derogatory language as banter, or they simply did not address when sexualised language is used. This illustrates how a culture of acceptance surrounding sexism in schools in England contribute to students' experiences of sexual violence.

Whilst this Ofsted (2021) report is exploring sexual violence rather than IPPA, these findings are incredibly helpful and painting a picture of the current landscape of violence occurring adolescents in schools in England and Wales. Furthermore, when comparing victimisation rates (of people over 16 in England and Wales) of different types of intimate partner violence, we can see that sexual violence is often experienced less frequently than IPPA or emotional abuse (ONS, 2023a). As such, if rates of sexual violence are high among school children in England, we can infer that rates of IPPA are likely to also be present. Furthermore, given our already established understanding that IPPA often co-occurs with other forms of violence and overlaps between different categories of violence (see Chapter 1- Defining Psychological Abuse), it is feasible to assume that many of the young people experiencing sexual violence are simultaneously experiencing IPPA (e.g. being pressured into sending sexual images involves psychological pressuring; sexist name calling can also be a form of IPPA). By acknowledging the issue of sexism in schools and England, and the known link between sexism, misogyny and violence against women and girls, it is anticipated that some Black women involved in the qualitative portions of empirical studies later presented in this thesis may share examples of sexism and misogyny occurring in their school settings or held by their adolescent intimate partners that may have contributed to their experiences of IPPA (Study 4),

or may have influenced their perceptions IPPA growing up (Study 2). As described earlier in this chapter, when misogyny is directed at Black women and girls, this can sometimes simultaneously appear, alongside anti-racist hate in what has been coined as misogynoir, (Bailey, 2016; Bailey, 2021; Bailey & Trudy, 2018; Northwestern University & Bailey, 2023), As such, in stories shared by Black women, later presented in this thesis, some participants may also indicate signs of misogynoir occurring in their IPPA experiences (Study 4).

5.3.3 Social Media and Misogyny

Studies investigating how social media contributes to issues of violence against women and girls, have found that misogynistic views, toxic masculinity and negative sexual stereotypes about girls and women are often amplified to young people via social media. Influential social media figures who promote these views, paired with social media algorithms which create an echo-chamber where young people are bombarded with similar rhetoric, can eventually normalise misogyny and toxic views for young viewers (Dearden, 2023; UK Feminista & National Education Union, 2017; Regehr et al., 2020; Regehr et al., 2024). In 2024, Regehr and colleagues published a report into how social media algorithms popularise online hate and misogyny for young people. Using interviews with 10 young people, expert roundtables and a TikTok algorithms analysis of 1000 videos, Regehr and colleagues (2024) found that harmful content tends to first be presented to young people as entertainment, which at first appears to be seemingly palatable and non-radical (e.g. short skits which play into stereotypes about women, or ‘tips’ about how to be an alpha-male). When young people engage with this content (e.g. watching a full video, commenting, liking and reposting content) the algorithms then begins to show more content on this topic. Through Regehr and colleagues (2024) algorithms analysis they found that once misogynistic content was engaged with the amount of misogynistic content displayed on the social media platforms main feed pages

increased by four times within just five days of using the app. Similar issues have been found on other social media sites including YouTube's video recommendations algorithms (Reset Australia, 2022).

As exposure to harmful content increases, the researchers suggested that these views and the associated derogatory language (e.g. negative slurs about women) becomes normalised, and eventually begins to be featured in young people's everyday language and conversations offline. Regehr and colleagues (2024) also highlighted how young people who feel lonely, a lack of sense of belonging, suffer with mental health difficulties or are bullied are at a greater risk of being exposed to misogynistic and incel related material, once the social media algorithm recognises that the young person has engaged with content aimed at helping them to deal with their loneliness and mental health. This is especially alarming, as it suggests that some major algorithms are targeting the most vulnerable young people to present misogynistic ideas to, which may lead to them believing that facets related to misogyny (such as violence against women) are acceptable, in turn increasing the risk of both intimate partner violence perpetration and victimisation. This is just one of the reasons why many campaigners believe that great responsibility needs to be put on social media platforms to combat this issue with their algorithms, as social media seems to be an entry point and radicalisation instrument for negative attitudes towards girls and women (Equimundo, 2022; Ofcom, 2024; Singleton & Rayman-Jones, 2024).

Again, here we can go beyond simply examining the issue of misogyny on social media to also bring in social medias contribution to **misogynoir**, (Bailey, 2016; Bailey, 2021; Bailey & Trudy, 2018). Several papers have explored exposure to racist content via social media (Chaudhry & Gruz, 2019; Chetty & Alathur, 2019; Harriman et al., 2020; Heard-Garris et al., 2021; Tao & Fisher, 2021; Tynes et al., 2008). Membership to online communities and following people who post racist content plays a role in upholding regular exposure to this type

of messaging (Chaudhry & Gruzd, 2019; Daniels, 2009; Frey et al., 2022) and can act as a breeding ground for racist attitudes to be developed and for young people to become desensitised to racist viewpoints and biases (Frey et al., 2022; Oksanen et al., 2014; Wold et al., 2009) . This again means that if a young person is exposed to both misogynistic and anti-black rhetoric online, particularly about Black women and girls, this may contribute to the risk of the young person being motivated to commit acts of violence or abuse against girls and women based on misogynoir, rather than only misogyny. This therefore illustrates another risk faced exclusively by Black adolescent girls and Black women simply based on their intersectional characteristics, and the existence of intersectional discrimination and multi-dimensional oppressive and offensive messaging. Again, we take this into consideration when approaching Study 4 of this thesis where it is anticipated that, through qualitative research methods, some Black women may indicate signs of misogyny and misogynoir presents in their experiences of IPPA.

5.3.4 Social Learning and Exposure to Abuse

Social learning has also been linked to intimate partner violence. For instance, exposure to familial violence, including physical punishment of children (Jones et al., 2017; Smith 2016), has been linked to adverse outcomes for children such higher internalising (e.g. feeling shame, anxiety and depression) and externalising behaviours (e.g delinquency) (Jeremiah et al., 2017) as well as developing normalised views on familial violence which leads to the regeneration of violence in other relationships (Joesph & Jones, 2022; Jones et al., 2017; Modeste-James, & Huggins, 2022; Priestley, 2014). There is ample evidence to suggest that witnessing violence in the household can directly link to the learned violent behaviours, which can be presented in later relationships as familial and intimate partner violence (Cohen et al., 2018; Coker et al., 2014; Giordano et al., 2015; O’Keefe, 1997; Park & Kim, 2018; Roman & Frantz, 2013). This

means that several children including adolescence are at risk of experiencing the negative impacts of witnessing violence in the home. In recorded cases of intimate partner domestic violence in 2023, data shows that a child was present in the house at the time of abuse in 32.4% of cases, and in 15.4% of cases adult respondents confirmed that a child did see or hear the violence when it was happening (ONS, 2023a).

Yosep and colleagues (2022) conducted a scoping review of published articles on the impacts and coping strategies of those who witness domestic violence using a sample of 8 - 18-year-olds, and one sample of adults who reflected on their past adolescent experiences of observing abuse. Of the nine studies included in this review, four empirical studies and one article was based in England (i.e. Callaghan et al., 2018; Chester & Joscelyne, 2021; Lloyd, 2018; Pang & Thomas, 2020; Swanston et al., 2014). Yosep and colleagues (2022), review highlighted the psychological (e.g. anxiety - Callaghan et al., 2018), social (e.g. antisocial behaviour and difficulty communicating with others - Swanston et al., 2014) and school (e.g. disruptive behaviour, decreased achievement and lowered motivation to learn - Chester & Joscelyne, 2021; Lloyd, 2018; Pang & Thomas, 2020) effects of witnessing domestic abuse.

We also find evidence of this in numerous studies based in the Caribbean, including from Haiti (Gage, 2005), Jamaica (Priestley, 2014), the Dominican Republic (Hindin et al., 2008) and Grenada (Jeremiah et al., 2017) where research provides examples of correlations between women witnessing violence at home growing up, and later experiencing violence in intimate relationships and their marriages. This indicates a connection between witnessing violence during childhood (adverse childhood experiences/ACE's) and the potential acceptance and normalisation of abuse, including IPPA, in later relationships.

In the context of the current thesis, through qualitative methods (interviews and focus groups – Study 2), Black women will be asked to reflect on and share their perceptions of how their

family contributed to their understanding of IPPA. Given the literature explored, highlighting the influence of witnessing abuse on attitudes and behaviours related to abuse, it is anticipated that some participants may report their experiences of witnessing abuse and possibly experiencing abuse themselves (both intimate partner abuse and other forms of familial abuse); and how this would have shaped their understanding about IPPA. As previous research has not specifically studied the impacts of witnessing abuse as a child on adolescent girls understanding about IPPA, Study 2 therefore has the potential to contribute a new line of evidence to the field research into the effects of children witnessing abuse.

5.4 Societal Context and Sociodemographic Factors

5.4.1. Socioeconomic Disadvantage and Lack of Resources

Intimate partner violence occurs in all types of relationships, regardless of socioeconomic status (Kebede et al., 2021; Terrell & Bailey, 2020). Nonetheless there is a sizeable amount of research which explores the connection between socioeconomic status and intimate partner violence both generally as well as specifically in Black communities (e.g. Jenkins, 2020; Lacey et al., 2021; Maldonado et al., 2022; Rennison & Planty, 2003). Whilst socioeconomic status and poverty is not explicitly measured in any of the empirical studies included in this thesis, given the disproportionality of poverty and wealth distribution in the UK when divided by race, it seems important to recognise this as a potential factor that may have impacted how some Black women experiences or were exposed to abuse, given the relationship between poverty and abuse. Some Black women may express a connection between these variables in qualitative responses in regard to how this may have influenced their understanding about IPPA growing up (Study 2) and we may see examples of IPPA perpetrated against participants exacerbated by financial stresses and barriers to accessing resources (Study 4). Therefore, introducing some of this literature can help to again contextualise some

of the experiences of IPPA, that might be shared by Black women in empirical Study 4 of this thesis.

In the same way that scholars make connections to the transatlantic slave trade and colonialism when discussing facets of intimate partner violence in the Caribbean, these links continue in U.S. literature, where the remanence of slavery and racial disenfranchisement continues to affect Black communities. Jenkins' (2020) research analysed data from a sample of 335 Black Americans, who participated in focus groups between 1998 and 2004, benefiting from a large sample size and participants spread across various parts of the U.S. According to this study, participants seemed to link domestic violence in their communities to issues of blocked opportunities, economic disenfranchisement and continued discrimination and racism against Black people. Participants discussed how these factors, resulted in frustration and powerlessness, particularly for Black men, which leads some men to perpetrate violence in the household, as an alternative means of gaining power (e.g. displaying violence in the household to assert dominance) in a society that strips them of opportunities for power. The generational passing down of trauma, systematic violence and adverse coping mechanisms, in part linked to the oppressive legacy of slavery, the ongoing patriarchal male dominance messaging and lack of access to resources and opportunities.

Poverty is an additional intersecting factor that alters intimate partner violence rates and is regularly seen as a risk factor which increases vulnerability to experiencing and perpetrating domestic abuse (Maldonado et al., 2022; Rennison & Planty, 2003). The relevance of socioeconomic status in explaining and understanding intimate partner violence in communities affected by poverty, is not simply about having little money, but rather about the effects that experiencing poverty can have on the individual. For instance, experiencing poverty is linked to being at a heightened susceptibility to facing mental health symptoms (e.g. high

levels of anxiety, post-traumatic stress symptoms and depression) which in turn is linked to increase violence in general and increased intimate partner violence perpetration (Cunradi et al., 2000; Gillum, 2019; Pavao et al., 2007). Given the disproportional experience of poverty amongst Black communities globally (APA, 2017; Edmiston et al., 2022; Oxford Poverty & Human Development Initiative et al., 2023; Trust for London, 2023), this may in part contribute some understanding of intimate partner violence rates in Black communities.

Lacey and colleagues (2021) also highlighted how socio-economic status also plays a sizable role in explaining trends in domestic violence perpetration in Caribbean communities, with poorer women more likely to experience physical abuse than women with more money (also supported by Bucheli & Rossi, 2019; Nagassar et al., 2010; Priestley, 2014;). In specific relation to gender roles and economic disparity, some researchers have studied links between intimate partner violence and women's unemployment levels and earning inequality in some parts of the Caribbean. They comment on how earning inequality leaves many women (with children) faced with financial dependency on their partners, essentially trapping them in abusive situations (Foster & Reddock, 2011; Huggins & Mugal-Bissessar, 2022; Jones et al., 2017) For instance an analysis by the United Nations Women (2019) studying gendered employment rates in Barbados, Grenada, Guyana, Jamaica. St. Lucia and Trinidad and Tobago helps to illustrate the gendered disparities and the potential extent of financial dependency on male partners prior to the COVID-19 pandemic (Note: Data in this analysis was not split by race; however, Black is the main race in all named countries apart from Guyana and Trinidad and Tobago where East Indian racial heritage is marginally higher). Across these nations, women's employment rates were 8 – 27% less than men. This was despite women in the region being more likely to have completed tertiary education (e.g. university) than men. Women who had received tertiary education were more likely to be in employment than women who had stopped education at primary or secondary level (but still less likely than men). The gap between secondary school

educated women and tertiary level educated women being employed ranged from 12% in Barbados to a whopping 33% in Jamaica. Despite this, when looking at the mean hourly earnings between males and females in each country, women consistently earn slightly less than men, apart from in Jamaica, where women appeared to earn 9.5% more.

Nonetheless, it is important to note that it is not necessarily negative for women to choose not to be employed or to choose to take on full-time domestic and childcare roles (which in some cases may in fact illustrate a sign of financial freedom, employment autonomy, or access to spousal support or familial/generational wealth). Unemployment is however an issue when it is due to women being marginalised from equal access to opportunities for employment and to have financial autonomy.

Links between economic disadvantage/employment and domestic violence can also be drawn from findings in the UK. In 2022/2023, 5.2% of domestic violence cases recorded in England and Wales, were victims who were unemployed compared to 4.6% of victims who were employed (ONS, 2023b).

According to one ONS (2023) dataset, 66.1% of recorded partner abuse in 2023 was categorised as non-physical violence which refers to the subcategories emotional and financial abuse. The presumed high rates of financial abuse show that money and resources are quite frequently used as weapons in intimate partner abuse in the UK. This data does not necessarily provide enough insights to conclusively link a high occurrence of financial abuse to social economic status or poverty, however other UK based studies, reports and articles have spotlighted this link. – For instance, in a report, informed by over 80 peer-reviewed journals, books and research reports, Fahmy et al. (2016) presented valuable evidence regarding how domestic violence against women is affected by poverty. Fahmy and colleagues (2016) assessment of past literature concluded that poverty exacerbates the experience of domestic

violence in the UK. For instance, Fahmy and colleagues (2016) referred to Towers' (2015) analysis of previous crime survey data, which found that women in households with a yearly income below £10,000 were over three times more likely to experience domestic violence compared to women in households grossing over £30,000 per year.

Despite the UK being one of the most economically wealthy nations in the world (The World Bank, 2023; UN, n.d.), contextually many of its residents continue to live in relative hardship or financial strain. Overall, we know that about 20% of people in the UK are living in relative poverty (defined as living in a household with an income below 60% of the national median income in that year) and around 18% are in absolute poverty (in a household with an income below 60% of the national median income compared to the baseline year of 2010/11). Poverty in the UK is most experienced by households of Bangladeshi heritage (who make up 42% of low-income households), and least likely to be experienced by White households (15%) (Francis-Devine, 2024).

Black African Caribbean and Black British households make up 26% of low-income households (Francis-Devine, 2024). Nevertheless, amidst an ongoing cost of living crisis, energy bill surges, and mortgage price-hikes in the UK in 2023 more people began being affected by economic stresses, which unfortunately can be linked to increased cases of domestic violence (ONS, 2023d; Woman's Aid, 2022). The UK's cost of living crisis has been found to have created further barriers for many women to leave domestic abusers. In a survey of 137 women, conducted by the domestic abuse charity Women's Aid (2022), survivors reported that an abusive partner had used the cost-of-living crisis to intensify their coercive controlling behaviours. In fact, 66% of women reported intensified behaviours, such as the abuser further limiting the women's access to money and resources, 39.4% had an abuser refuse to pay child maintenance and 23.4% of women had abusers forcing them into further debt. These findings

demonstrate a relationship between socioeconomic security and increased instances of what can be consider as both financial and psychological forms of abuse.

Studies which link financial security and domestic violence/intimate partner abuse act as a reminder that economic variability should be considered as an intersectional factor when discussing intimate partner violence. The apparent positive correlation between socioeconomic status and domestic abuse/intimate partner violence also underscores the importance of ensuring that economic status is not a hindrance to access to services and support. While wealthier women may be more able to access private support like counselling, refuge housing and legal costs when faced with abuse, access to these services are disproportionally acting as a barrier to poorer women successfully seeking help when faced with intimate partner abuse (Davidge & Magnusson, 2019; End Violence Against Women, 2022). As such, for marginalised communities most impacted by socioeconomic disadvantage, investment in services, is critical for closing the gap in access to support.

5.4.2. Religion

Studies into the influence of religion on intimate partner violence are also useful in demonstrating how the messaging around intimate partner abuse can differ based on membership to a particular cultural facet, in this case, religion. Both the positive influences (e.g. source of help for victims and the therapeutic effects of reading holy texts and engaging in religious rituals) and negative influences (e.g. sometimes promoting patriarchal views about gender hierarchy, deterring victims from leaving abusive partners) of some religion-based cultural views on domestic and marital violence have been documented in numerous studies (e.g. Abugideiri, 2010; Adjei, & Mpiani, 2020; Ames, et al., 2011; Choi, 2015; Choi, et al., 2016; Chowdhury, 2023; Gonçalves et al., 2020; Istratii, & Ali, 2023; Kanyeredzi, & Wilson, 2023; Kassas, Abdelnoul., & Malhoul, 2020; Oyewuwo, 2020; Truong et al., 2022).

In a qualitative study of 29 adults (age 18 – 79) in the United Kingdom, Sivarajasingam and colleagues (2022) studied attitudes, perceptions and awareness of domestic violence and abuse. The researchers found that ethnicity did not have an impact on attitudes and perceptions, however some participants suggested that in ‘certain cultures’, men are viewed as dominant and abuse towards women was commonly perceived as an acceptable response to marital conflict. Some participants believed that constrictions caused by religion within these cultures made it particularly challenging for victims of abuse to recognise and label their experiences as abuse, due to the normalisation of domestic violence within their religious beliefs.

Mulvihill and colleagues' (2022) paper is also a valuable example of research which demonstrates how intimate partner control and religious coercive control can be associated. In a UK sample across participants of various religions (Islam, Christianity, Judaism, Buddhism and Sikhism), a number of participant responses indicated that places of worship were a significant source of support for victims of intimate partner abuse to turn to, however some religious texts were often used by religion leaders to uphold patriarchal values and warrant the use of coercive control in marriages. Messaging from religious texts and the opinions of some religious leaders were reported to have contributed to the justifying of abusive behaviours in marriages, victim blaming, encouraging of reconciliation between spouses after abuse occurs, and would sometimes be used to deter victims from seeking help from sources outside of their religious community.

When qualitatively investigating IPPA education (Study 2) and experiences (Study 4) amongst Black women in this thesis, it would not be inconsistent with past literature to see religion playing a role in what some women may have learnt about IPPA outside of school and their experiences of IPPA and help-seeking, either directly from religious groups they identify with or through religion informed messaging about intimate partner abuse from their parents.

5.4.3. Attitudes and Barriers to Seeking Help

In many countries, less than 40% of women who experience violence from an intimate partner seek help (United Nations Economic and Social Affairs, [2015](#)). Just as experiences of IPPA may uniquely differ for Black women and girls, help-seeking behaviours are also found to be shaped by Black women and girls' unique and intersecting social identities. Little is explicitly known about how Black adolescent girls based in England seek help when they experience IPPA and the factors that may influence their help-seeking decisions. England as a location, its sociocultural context and the unique expression of the Black diaspora in England (predominately in relation to migration from African and Caribbean countries) all have the potential to impact IPPA help-seeking in a way that uniquely differs from that of a sample in the US (where most IPPA research has been conducted) and international samples. As such, what is already understood about help-seeking for IPPA amongst adolescents cannot wholly reflect the experiences of Black adolescent girls in England due to the absence of contextual and intersectional perspectives.

Relevant factors known to impact help-seeking include cultural socialisation (e.g. norms and attitudes towards gender roles and intimate partner violence – Vil et al., 2021; Lacey et al., 2020; Femi-Ajao, 2018), socioeconomic status (e.g. Benson et al., 2004; West, 2004), religious institution influences (e.g. Shaw et al., 2020; Williams & Jenkins, 2019) and location (e.g. Stockman et al., 2014). In addition to this, systematic race related barriers to accessing services (e.g. Rice et al., 2021; Potter, 2017; Taft et al., 2009). Stereotypes about Black women held by others (e.g. Slatton & Richard, 2020; Potter, 2008), and Black women and girls' self-perceptions (e.g. of strength, resilience and gender roles) also affect help-seeking decisions and the availability of opportunities for accessing help (Washington & Hoxmeier, 2024; Haynes-Thoby et al., 2022; Monterrosa, 2021; Tristine, 2021; Kelly et al., 2020).

5.4.3a Systemic Barriers. Research generally depicts that Black women and women from other ethnic minority groups are unlikely to seek help from formal sources, in part due to the role of systemic and institutionalised racism as well as direct discrimination sometimes faced when engaging with services (Belur, 2008; Fergus, 2017; FitzGerald & Hurst, 2017; Sharp, 2022).

England suffers from the issue of anti-Black racism at an individual and systemic level. Despite past governments' attempts to deny the pervasiveness of racism in the UK (Chakraborty, 2021; Sewell et al., 2021; UN, 2023), and countless organisations implementing (often shallow level) anti-racism and race-inclusive initiatives in recent years (Bhopal, 2019; Ekpe & Toutant, 2022; Galán et al., 2023; Grayson, 2022; Endgram & Mayer, 2023), racism is an issue that cannot be silenced or gimmicked away. In England and Wales, 101,906 race-fuelled hate crimes were recorded in 2022/23 (Home Office, 2023), however there are plenty of unreported cases.

Numerous studies have found that the existence of racism in institutions such as the police creates disproportionate barriers for Black communities. Where systemic racism lies, those most disadvantaged can lack trust in the system, affecting how discriminated groups engage with services. Black victims of abuse are statistically less likely to report or seek help for abuse using formal sources such as the police (Breiding et al., 2014; Femi-Ajao et al., 2020; Vil et al., 2022). To illustrate this, in Sualp and colleagues (2020) research, fear and mistrust of the legal system, cultural stigmatisation and victim blaming were found to be some of the factors affecting help-seeking amongst assault survivors.

Another review by West (2002) found that Black women were being put off reporting their abuse to the police for fear of being discriminated against, even as victims. In addition to this, research has also shown that when Black women's perpetrator is a Black man, some Black

women avoid reporting the abuse to the police for fear that unjust treatment rooted in racism will be directed at the perpetrator (Hampton et al., 2003; Neville & Pugh, 1997).

Another example of how systemic systems can operate in a way which marginalises and upholds systemically exclusionary mechanisms include the under resourcing of services specifically aimed at supporting women of colour (EVAW, 2023; Fugate et al., 2005). For instance, women founders (British Business Bank et al., 2019; Fackelmann et al., 2019) and ethnic minority founders (Fairlie et al., 2021) statistically receive less funding for their businesses compared to their counterparts (due to several factors including bias grant application reviewers and deeply ingrained societal inequality which has favoured men and White owned businesses), meaning that grassroots Black women-led organisations aiming to support victims of abuse may have access to less resources to support Black women. To give an example, in Thiara and Roy's (2022) review, which explored violence against Black and ethnic minority women in the UK during COVID-19 evidence of systemic and intersectional discrimination affecting access to suitable support services was found. Specifically, this study found that women from Black and ethnic minority groups faced greater barriers when attempting to seek help during COVID-19 due to governmental budget cuts in previous years, which had disproportionately led to the decommissioning and closure of several race-specific and community-led initiatives in the UK. This meant that when COVID-19 hit, a time when domestic violence rate was heightened during lockdown restrictions (Berniell & Facchini, 2021; Lyons & Brewer, 2021), Black and minority women were less likely to be able to access effective domestic violence services that meets all their intersectional needs. *Yes*, whilst, despite these cuts to race and community-specific support, these women would have still had access to services available to all women (e.g., NHS, national charities), from an intersectional lens there is room to argue that these general services may not always be appropriate sources of help for Black women and minority women, as many of these services and interventions do not have

the inclusive approaches and cultural competencies needed to understand these women's needs and preferences.

There is no requirement for larger organisations to have practice frameworks or substantive training for staff and volunteers around cultural competency and cultural influences. Systemically exclusionary practices can persist in existing services when there is a lack of adequate cultural-competence training and education of staff who support or teach potentially diverse groups of victims of abuse, which therefore leaves gaps in some practitioners understanding about the unique experiences of Black women and girls (Fugate et al., 2005; Kelly et al., 2020; Postmus et al., 2009). This means that the effectiveness of interventions aimed at combatting intimate partner violence may not always fully meet the unique needs of different cultures and racial groups of women, when service providers do not take carefully consider intersecting factors (e.g. the impact of institutional racism on access to services for women of colour, language barriers for women who have recently immigrated to England, the role of religion and cultural norms affecting and help seeking). Ultimately, whilst a White woman may be able more likely to access adequate support from the already limited pool of existing women's support services, the pool for Black women seeking effective formal support may be even further reduced once additional concerns surrounding the cultural appropriateness of services is taken into consideration. This is illustrated through research where Black women report feeling more understood, comfortable disclosing their experiences and responsive when working with Black therapists and counsellors (Goode-Cross & Grim, 2014; Townes et al., 2009). For example, in Townes and colleagues (2009) research of Black American women and men, they found that participants were more likely to have a preference for a Black counsellor if the participant also felt a stronger sense of cultural mistrust (i.e. stronger suspicion of others as a mechanism to protecting oneself from experiencing racial discrimination), stronger Afrocentric attitudes (i.e. place high value on their African heritage

and strongly identify with Black communities and African cultures) and lower assimilation attitudes (e.g. lower willingness to adopt mainstream Eurocentric culture).

In a systematic review of qualitative studies exploring domestic violence and abuse disclosures and help-seeking among African, Caribbean, South Asian, Jewish and Irish women in the UK, Femi-Ajao et al. (2020) also highlighted how immigration status (e.g. fear of deportation if they seek help formal when their immigration status is tied to the abuser), influence from their community to not seek help, language or interpretation barriers, and unsupportive staff when trying to access mainstream services are also sometimes barriers to help-seeking. Engagement with formal sources of support for IPPA also requires awareness that those sources are available, applicable to your experience, and will be useful. A lack of awareness of services available and accessible to the individual has previously been found to be a barrier to help-seeking for Black survivors of assault (Sualp et al., 2020). Nonetheless, studies have also shown that when people are well aware of resources available to them, they often still choose not to access them for themselves, more often opting for more informal sources of support (De Nagy Köves Hrabar, 2018) for many of the reasons discussed throughout this section.

Overall, the evidence presented suggests that Black women and girls are subject to systems which do not help them in the same way as others due to systematic racism, intersectional discrimination, and a lack of services that suitably acknowledge and operate in a culturally competent fashion (Barnes, 2009; Germain & Yong, 2020; McGuire & Miranda, 2008; Memon et al., 2016; Refuge, 2021; Stafford, 2022; Thiara, & Roy, 2022). This again illustrates the importance of asking Black adolescent girls and Black women about their preferences surrounding IPPA education and preferred sources of support, in order to ultimately work towards ensuring that they have access to education and support related to IPPA that most closely meets their needs.

5.4.3b Cultural Barriers. Black women and girls' engagement with IPPA education and support can also be shaped by influencing factors related to views about IPPA, intimate partner violence, and help-seeking shared in their communities. For instance, Femi-Ajao and colleagues' (2020) review of existing literature highlighted how women were deterred from help-seeking and disclosing their experiences of domestic abuse due to pressure from their community to stay in abusive relationships (Anitha, 2008; Burman et al., 2004) domestic violence being excused and normalised for 'cultural and religious reasons' (Burman et al., 2004) and expectations to uphold family honour and to not expose their community or cultural group to potential scrutiny from others (Anitha, 2008; Burman et al., 2004).

Delving deeper into Nigerian culture as an example, is a qualitative study by Femi-Ajao (2018) which investigated intimate partner violence against Nigerian women in England ($N = 16$). In Femi-Ajao's study (2018), women shared insights, which suggested that socialisation in their country of birth combined with circumstantial characteristics influenced their experiences of intimate partner abuse and help-seeking. For instance, women's help-seeking decisions appeared to have been impacted by norms and attitudes related to their Nigerian culture, including beliefs that some intimate partner violence is acceptable as well as beliefs that any help seeking should be from other Nigerian women rather than outside sources. In addition to this, unsettled immigration status (e.g. conditions of residency in England being dependent on relationship with partners/husbands, causing fear of separation and insecure access to welfare) and prolonged acculturation (e.g. Nigerian women facing barriers to meaningful services, support, and employment upon relocation to England) all contributed to women's reasons why they stayed in abusive relationships and did not report abuse. This study very suitably demonstrates how the compounding of intersecting social characteristics (e.g. living in England and being influenced by perceptions that male violence against wives in

sometimes acceptable), collectively influenced women's experiences and attitudes surrounding intimate partner abuse and help-seeking.

In some Black communities, researchers have also found that seeking help outside of their own networks was viewed as a betrayal or devaluation of their community (Lacey et al., 2020). This is consistent with research showing that cultures that emphasise self-reliance or discourage intervention from those outside of their community (e.g. law enforcement and social services) are also less likely to seek external help (Salaheddin & Mason, 2016).

Furthermore, Nnawulezi and Murphy (2019) studied how Black women are frequently expected to safeguard Black families and communities from negative external influences and navigate through hardships independently. Waller et al (2022) also explored how some Black women are often taught to prioritise racial loyalty, which involves prioritising the needs of family, community, and Black males over their own. Combined with the strong Black girl/woman stereotypes described earlier in this chapter, these influences place social expectations on Black women and girls to protect members of their community, which likely shapes Black women and girls' ability to engage with formal support resources for IPPA. The effects of culture on Black women views on seeking information and help surrounding IPPA are further explored in Study 2.

5.5 Summary of Part One

To conclude, in part one of this chapter I have presented examples and past literature to help to understand how Black women and Black girls' experiences of IPPA as well as help-seeking, may be uniquely impacted by the presence of **stereotypes** (i.e. intimacy stereotypes, strength, stereotypes and adultification), **cultural norms** (i.e. accepting attitudes towards intimate partner violence, misogyny, sexism, rigid gender roles, discouraging attitudes towards seeking formal support and social learning) and **sociodemographic and societal context** (i.e. social,

economic disadvantage, religion and anti-Black racism). This chapter has aided in highlighting how the presence of intersecting characteristics creates an intersecting experience of the world, of abuse and access to help. In the same way, that these unique constructs play a role in shaping IPPA experiences for Black women and Black adolescent girls, intersectional constructs are also likely to impact how and what Black women and Black adolescent girls learn about IPPA, which I now explore further in Part Two.

Part Two | How Cultural And Societal Context Impacts IPPA Learning

Having already explored the different aspects of cultural influence and societal context in relation to IPPA victimisation and perpetration in Part One of this chapter, I now turn to education in Part Two of this chapter. Three empirical studies in this thesis will explore how Black adolescent girls have learnt about IPPA (Study 1, 2 and 3). In general, little is known about how adolescents learn about IPPA. Due to this gap in existing literature, in this chapter I draw on literature from other aspects of relationships and sex education (e.g. sex education and healthy relationships education), as well as some literature from adult samples, to frame a baseline understanding of factors that may contribute to an understanding of how and what Black adolescent girls learn about IPPA.

5.6 Why IPPA Education for Adolescents Matters

Given the prevalence and potential negative effects of IPPA on adolescents and adults, robust education about IPPA (particularly through school programmes or learning about IPPA at home) has the potential to act as a preventative and safeguarding mechanism in protecting adolescents. On one hand, raising awareness about what IPPA is can help in deterring young

people from perpetrating IPPA (Lundgren & Amin, 2015; Owens et al., 2016), can improve their attitudes towards dating violence (e.g. making them less accepting of intimate partner violence) (Pomeroy et al., 2011; Simpson et al., 2017) and teaches skills for healthy/non-abusive romantic relationships with others (e.g. by teaching healthy conflict resolution skills) (Carlson et al., 2014; DfE, 2021; Draper, 2023; Hannah et al., 2016; Meyer et al., 2023; Niolon et al., 2019). Simultaneously, IPPA education may be beneficial in equipping young people with the tools to identify when abuse is occurring (Adler-Baeder et al., 2007; Simpson et al., 2017), and give young people greater confidence to seek help should they experience or witness IPPA (Lundgren & Amin, 2015; Pound et al., 2017).

Despite a clear case for the benefits of learning about healthy relationships and abuse, there remains a gap in research specifically studying the nature of how adolescents in England learn about IPPA and, more specifically, how useful formal (e.g. education received at school) and informal (e.g., education received from parents) IPPA education has previously been and currently is for Black adolescent girls.

Evidence of young people's ability to recognise and identify IPPA has been mixed. Whilst some research suggests that young people are less likely than adults to recognise psychological abuse in their relationships (Lavoie et al., 2000; Sanders, 2003), there is evidence from UK-based studies which indicate that adolescents can, in fact, effectively categorise emotionally abusive and unacceptable relationship behaviours (Francis & Pearson, 2021). Nonetheless, the researchers also found that while adolescents could label emotionally abusive behaviours as unacceptable, they still seemed unaware of how they should respond if they saw signs of abuse. These results may, therefore, be interpreted as a positive result in the fact that adolescents could identify this form of abuse; however, there is potentially an educational gap in training adolescents on how to deal with warning signs of abuse.

5.7 Formal IPPA Education at School in England.

IPPA education for adolescents can be provided by both formal sources (e.g. school) and informal sources (e.g. friends, parents and personal research). School education is the most common form of formal education about intimate relationships and abuse that adolescents in England receive. The topics of healthy romantic relationships and intimate partner abuse (including IPPA) would be typically presented to secondary school students in England and Wales as part of the Relationships and Sex Education (RSE) curriculum (Department for Education [DfE], 2019), formally referred to as Sex and Relationships Education (Children and Social Work Act, 2017; DfEE, 2000). RSE is currently the official term used to describe curriculums and content about intimate and non-intimate relationships and sex education taught in schools in England and Wales. Most schools encompass their RSE within their school Personal, Social, Health, Economic (PSHE) curriculum.

In 2012, the Office of Standards for Education, Children's Services and Skills [Ofsted] (currently the inspecting and regulating body for schools and other child education and care provisions in England), conducted a review into the quality of sex and relationships education being delivered in schools. Their report highlighted the immense inconsistencies in RSE delivered across England, with over a third of all schools requiring improvements in sex and relationships education delivery. At the time, their report indicated that in many secondary schools, there was an over-emphasis on teaching students about reproduction, whilst education about relationships, pornography, safety, emotional regulation, and sexuality was often neglected. In many cases, schools and teachers had a shortage of expertise surrounding these matters, which in part resulted in topics like sexuality and domestic violence being dropped from some school's curriculums all together (Ofsted, 2013).

In 2014/15, calls for a nationwide basic level of statutory RSE became a catalyst for more drastic reform, with many campaigners pointing out that RSE is important for

safeguarding children by equipping them with the information and knowledge needed to stay safe and to identify adversity related to sex and relationships (House of Commons Education Committee, 2015). The compulsory delivery of relationships and sex education in secondary schools (and only relationships education in primary schools) was written into the Children and Social Work Act in 2017 and came into effect in September 2020, in line with the publication of new guidelines from the Department for Education (DfE, 2019); however, schools were able to delay the implementation of these new guidelines until summer 2021 owing to unexpected competing priorities posed by the COVID-19 pandemic.

Prior to these newer guidelines (DfE, 2019), education about non-physical forms of abuse in intimate relationships (including IPPA) was not compulsory in schools in England and Wales (DfE, 2019; DfEE, 2000). The renewed statutory DfE guidelines (2019) included a new expectation for schools and colleges in England that by the end of secondary school (typically age 16), all students are expected to have been taught about domestic violence, coercive control, unacceptable relationship behaviour, and the negative impacts of unhealthy relationships on mental wellbeing (DfE, 2019). Therefore, it is anticipated that since implementing these guidelines most secondary school students in England and Wales will now learn about at least some aspects of IPPA (e.g. coercive control).

Nonetheless, it is not possible to assume that even with these enhanced guidelines, students' experiences of learning about IPPA are effective, especially given that the government guidelines provide each school with autonomy over exactly how their RSE curriculum are delivered. These guidelines still largely give schools the flexibility to deliver the curriculum in a format best suited to their individual school context, meaning that the nature and quality of IPPA education delivered is still likely to differ between schools.

For example, Wilder's (2023) paper explored the role of English primary school leaders in creating their school's relationships and sex education policy. Wilder's (2023) research

demonstrated how differences in school leaders' knowledge about RSE, as well as the extent to which parents in individual schools' express objections or concerns about aspects of RSE (e.g. objections to teaching aspects of reproductive health), played a notable role in explaining variations in the quality and scope of different primary schools' RSE policies and approaches.

Generally, significant improvements to RSE have been made through the most recent guidelines (DfE, 2019; Drapper, 2023), with many teachers and education professionals welcoming the new guidelines and highlighting the importance of discussing traditionally overlooked topics with young people (Alonso et al., 2023; Cumper et al., 2023).

Despite there already being a number of published studies exploring and evaluating RSE since the implementation of the DfE (2019) guidelines (e.g. Cumper et al., 2024; Daly & Heah, 2023; Horan et al., 2023; Maslowski et al., 2024; Rudoe & Ponsford, 2023), there does not yet appear to be a study which measures and explores IPPA education in schools, leaving a gap in the literature. The closest that can be found is the latest Young Peoples RSE poll of 1,002 16-17-year olds in England conducted by the Sex Education Forum (2024). When asked, 'At school, did you learn everything you feel you needed to about how to tell if a relationship is abusive', 56.3% said yes, 27.7% said they had learnt some but not enough, around 12% had not learnt about it at all. Whilst this data does not give precise insights into IPPA as a single form of abuse, it is extremely useful in understanding the current landscape of mid-older adolescents' current views on the effectiveness of intimate partner violence education within RSE at school.

In this thesis, I ask current adolescents (Study 3) as well as women (Study 1 and 2) about their IPPA education during adolescence. As most Black women who participated in Study 1 and 2 are over 18 years old, most would have finished school prior to 2020, and therefore would not have benefitted from these latest guidelines. Going into these studies, I

therefore unexpected that some participants were going to report that they had not received any IPPA education at school or that they were dissatisfied with the education about IPPA that they did receive. Historically, many people in England would have not received adequate and comprehensive relationships education at school (Ofsted, 2013; Rogow & Haberland, 2006; Selwyn & Powell, 2007; Waling et al., 2020). By asking participants to reflect on their experiences learning about IPPA in school (and in other contexts) and the impact of these experiences on their understanding of IPPA, the findings presented in this thesis will help to investigate the effects of IPPA education (or lack thereof) based on retrospective accounts from Black women; however by also studying IPPA education amongst a sample of current adolescents allows for some comparison of IPPA education before and after 2020, hopefully finding an observable improvement between samples.

Although adolescents in England are most likely to receive formal instruction about IPPA at school, this is not the only formal source of IPPA education. Other formal sources of IPPA education can include education provided by specialist organisations/charities, police and medical/psychological professionals through their services. Trustworthy online information (e.g. evidence informed web pages, published research reports YouTube videos), provided by reputable outlets (e.g. NHS and charity websites; Gov.UK., 2018; Local Government Association, N.D; Living Without Abuse, n.d; National Society for the Prevention of Cruelty to Children [NSPCC], 2024) can also act as a useful formal online resource to learn about IPPA. Nonetheless, in order for a young people to success access trustworthy and credible resources online (rather than unreliable content), one must have an awareness that these resources existence or how to search for this source and must be able to accurately identify and assess the credibility of sources. Whilst in this thesis I largely focus on school as the main source of formal IPPA education for adolescents, in research surveys, I ask participants to indicate which

other formal (and informal) sources have contributed to their IPPA knowledge, to quantify the extent to which formal sources are already being used.

5.7.1 Recognising Differences in Learning Experiences

Despite justifications for IPPA education, it is important to recognise how experiences of learning about IPPA might differ for each adolescent, beyond the differences that may emerge due to each school's differing approach to delivering RSE. Even within the same classroom, students may receive and engage with IPPA education and RSE as a whole differently based on personal characteristics. By centring Black women's and girls' experiences in my research, in this thesis I can begin to capture how Black girls and women's experiences of learning about IPPA both in and outside of school may be shaped by unique environmental influences linked to being Black, being a girl, and having an upbringing influenced by both African/Caribbean culture and living in England.

Starting with race, in a few past studies, we see examples of differences in Black students' views and experiences of learning about matters related to sex and relationships (e.g. Coleman, & Testa 2007; Lindberg, & Kantor, 2021) compared to non-Black students. For instance, in an informative cross-sectional analysis of 15 – 19-year-old Black, Hispanic and White adolescents in the U.S., Lindberg and Kantor (2021) studied the content of formal sex education received at school, church and community centres, and found some racial variations in learning experiences. Black boys were less likely to have received education about birth control compared to Hispanic and White boys. Far fewer Black (45%) and Hispanic (47%) boys had learnt about topics like STDs/HIV and where to get birth control from compared to White boys (75%). On the other hand, Black adolescents, regardless of gender, were significantly more likely to have learnt about condoms compared to their peers.

Research into racial differences in the context of RSE received is limited however in Lindberg, and Kantor's (2021) research is useful in demonstrating how the information made

available to adolescents can differ by race. Nonetheless, as expressed from the onset of this thesis, I do not wish to delve into comparisons and suggestion that one racial group ‘know more’ about RSE or IPPA than another racial group. Instead I intend to focus on what specifically shapes these learning experiences for Black adolescent girls.

For instance, as discussed in Part One of this chapter, Black students can be impacted by issues such as racial biases and stereotypes from school staff (Johnson-Ahorlu, 2013; Kalu, 2021; McPherson, 2020; Cherng, 2017) which can have an impact on Black students learning experiences. For example, stereotypes and biases such as adultification biases, which can lead to Black children being subjected to harsher punishments (e.g. disproportionately high rates of school exclusions – Blake et al., 2011; Epstein et al., 2017; González, 2018) or viewed as less in need of protection and support (Alley et al., 2019; Davis & Marsh, 2020; Epstein et al., 2017; González, 2018), based on misconceptions that Black children can comprehend and navigate situations in an adult-like manner far earlier than would be expected for other children of the same age.

Having an adultified view of Black girls in intimate relationships, potentially also leads staff to not be as wary about the issues that a Black girl may be facing in a relationship or assuming that she is already equip with the ability to navigate intimate topics without further support (Crooks et al., 2023; Epstein et al., 2017). In some cases, these misinterpretations about Black girls by school practitioners in education, is known to lead to a lack of trust in these adults’ ability to protect them, which in turn is likely to deter Black adolescent girls from seeking support from teachers at school (Crooks et al., 2023; Epstein et al., 2017). Given existing evidence that demonstrates the prejudices, discrimination and diversity-blindness that can occur in school settings (Blake et al., 2011; Epstein et al., 2017; González, 2018), including within RSE provisions (Mulholland, 2021; Whitten, & Sethna, 2014), I anticipated that some participants’ descriptions of their adolescent educational experiences may include comments

about stereotyping, prejudice, and discrimination (in IPPA curriculum content, in interactions with educators and practitioners, from classmates, etc.).

Evidence of differential treatment and perceptions of Black girls in education, including race and gender-based biases and adultification provided insights which may also have an impact on IPPA education (Baetzel et al., 2019; Epstein, Blake, & González, 2017; Gamble & McCallum, 2022; González, 2018; Kalu, 2021; Morris & Perry, 2016). For instance, Sapphire stereotypes may lead some school staff to sometimes misinterpret Black girl's actions as anger, aggression or rudeness based on the staff members own projected stereotypes about Black girls and women, which in turn can lead to some Black girls in schools, feeling overly criticised and even disliked by some staff (Gadson, & Lewis, 2022; Mahomes, 2021). Jezebel stereotypes on the other hand may contribute to staff having adultified perceptions about Black adolescent girls which oversexualise and over police Black adolescent girls' bodies (e.g. stricter school uniform policy enforcement on Black girls) (Coley, 2024; Connell & Elliot, 2009; Gadson, & Lewis, 2022, Leath et al., 2021). This is particularly well highlighted in Hoefer and Hoefer (2017) study, whereby through interviews with students of colour, they found that Black and Hispanic students tended to feel as though their teachers had assumptions about them being sexually active and knowledgeable about sex, even when this was not the case. Participants in fact indicated that their experiences during sex education classes differed from their White peers. Black and Hispanic students felt that teachers did not trust them to stay abstinent, simply based on the teachers pre-assumed stereotypes about students of colour. Participants also expressed feeling that their teachers did not view them as innocent, and consequently did not provide them with enough relevant information to have safe sexual experiences (e.g not teaching them about abstinence or how to avoid teen pregnancy), ultimately, leaving students of colour at greater exposure to risk.

Scholars are increasingly publishing works surrounding the importance of anti-racist practices in sex education (Massicotte, 2022; Rothmüller, 2018; Saskatoon Sexual Health, n.d; Whitten & Sethna, 2014), noting the importance of actively decolonising approaches to teaching and addressing race-related myths and stereotypes in the classroom in order to more effectively reflect and support diverse experiences of the world. End Violence Against Women Coalition (End Violence Against Women [EVAW], 2023) specifically highlights the need for greater intersectional analysis in reviewing and implementing strategies to combat issues of violence against girls and women in schools in England and Wales. They specifically recognise the racialised nature of sexual harassment, the disproportionate rates of school exclusions for Black girls, and the oversight of sexual harassment, abuse and racism as factors impacting Black girls (EVAW, 2023; Imkaan, 2016; Women & Equalities Committee, 2023). This again helps to illustrate the need to investigate and evaluate IPPA and RSE learning experiences from the perspective of Black adolescent girls and Black women's to further explore the needs of these groups and to inform more intersectional informed approaches to RSE and interventions.

5.7.2 Satisfaction with Formal RSE and Staff Specialism

There is growing evidence to suggest that despite RSE guidelines (DfE, 2019) being in place, many teachers still report a lack of confidence in their ability to deliver RSE, with many delivering lessons with little or no training and without sufficient access to resources. This has a knock-on effect on the quality of RSE lessons that teachers can deliver to students. Teachers who can access RSE training report heightened confidence to teach these topics in the classroom and overall, a more positive teaching experiences (Cumper et al., 2023; Hilton, 2021; Moskovic et al., 2008; Walker et al., 2020; Westwood & Mullan, 2007; Wilder, 2018). For instance, in a study by Lee and Lee (2019) tested a life skills sexuality education programme where the teacher received advanced training to incorporate a range of pedagogical strategies (e.g. audio-visual activities and role-playing) to teach sex education. Pupils exposed to this

programme were more satisfied with their sex education and showed higher levels of knowledge and skills compared to pupils in the control condition (i.e., pupils who received lecture-style instruction and no teacher training). Other dynamic forms of RSE pedagogy which have been found to have beneficial effects on young learners includes education theatre performances (Pomeroy et al., 2011; Selman et al., 2007; Taylor, 2022), educational videos (Green et al., 2014) and peer education programmes (Pomeroy et al., 2011).

Despite the need for training, time constraints and conflicting school priorities often still act as barriers to some teachers being able to engage in robust RSE training (Walker et al., 2020).

Receiving more comprehensive and satisfactory sex and relationships education has previously been linked to greater knowledge and positive sex and relationships behaviours in general (e.g Baños et al., 2019; Blunt-Vinti et al., 2018; Evans et al., 2020; Ko & Chung, 2014; Min et al., 2019; Nurgitz et al, 2021; Rutledge et al, 2011; Rye et al., 2014). In Study 1, Black women are specifically asked about the specialism of the educators who delivered their IPPA education when they were at school to measure the impact of perceived specialism of their teachers on their satisfaction with their IPPA educational experiences. In exploring this, I hope to understand whether staff specialism is linked to satisfaction with IPPA education amongst the target sample, and therefore whether staff specialism (compared to other factors like lived experience and the gender or race of the educator) is an important factor to consider when, providing IPPA education for Black adolescent girls in England.

5.7.3 Representation in Formal RSE Education

Absent representation, racial stereotyping, and a lack of cultural competency among some educators can be harmful to underrepresented groups of students, possibly impacting how these students engage with RSE lessons (Fields, 2005; 2008). Some studies show that educators often do not embed diversity across their RSE curriculums, instead treating aspects of diversity

(including culture, religion and sexuality) as topics to discuss in a separate lesson, often taking a backseat or treated as an ‘add-on’ (Abbott et al., 2015; Haggis & Mulholland, 2014; Setty & Dobson, 2023).

Research shows that when sex and relationship education is not inclusive of students’ diverse characteristics (e.g. does not represent non-heteronormative relationships), this can push young people to seek their education through other less formal means including online research, peers and pornography (Abbott et al., 2015; Haggis & Mulholland, 2014; Hobaica & Kwon, 2017; Kimmel et al. 2013; McNeill, 2013; Stewart et al 2021). Nonetheless, the vast majority of studies which specifically centre students view on non-inclusivity in sex and relationships education focus on non-inclusivity with regards to sexuality and gender identity. Very few studies explore perceptions on racial non-inclusivity from the student’s perspective (e.g. Coleman & Testa, 2006; 2007; Hoefer & Hoefer, 2017; Roberts et al., 2020; Scott-Jones & Turner, 1988). However in a study by Roberts and colleagues (2020), studying 15-19-year-old teenagers who identify as LGBTQ+ students of colour, racial representation did not appear to be of high importance to students. The authors noted that some participants suggested that the inclusion of race, culture and religion in sex education lessons would help to illustrate racial diversity amongst LGBTQ+ groups; however, several participants did not explicitly comment on a link between race, gender and sexual identity in their education.

Although set over 15 years ago, Coleman and Testa’s (2007) research however provided valuable findings from their sample which included 710 Black 15-to-18-year-old adolescents in London (making up 24% of sample total). Their research method particularly mirrors that of Study 3 in this thesis, whereby a multi-ethnic group of adolescents from a college in London will be research participants, with specific findings from Black participants drawn out for further analysis (as also done for Coleman and Testa’s research).

Coleman and Testa's (2007) research survey was used to gather insights into topics that students wanted to know more about and who and where students would like to receive sex education from. When participants were asked about the characteristics of who they would like to teach them about sex, 51.2% of Black girls wanted their educator to be the same-sex as them, 49.4% wanted a sexual health professional and 40.2% indicated that the educator should be of similar age to them. In regards to wanting an educator to be of the same ethnic, cultural, or religious background to them, 32.7% of black girls wanted a Black person teaching them about sex, 24.9% wanted someone from the same culture as them, and 22.5% wanted someone of the same religion of them, together, illustrating a perceived importance for some (although the minority of) Black adolescent girls for their own demographic characteristics to be matched by the educator, indicating a conscious perception amongst some of the participants of a perceived benefit of shared characteristics and racial representation. In Study 2 of this thesis (qualitative interviews and focus groups with Black women), I outline views from Black women about their views on racial representation in IPPA education.

5.8 Informal IPPA Education

In addition to formal learning, young people may also learn about RSE related topics and IPPA from informal sources. For examples informal sources of learning can include personal research and online research (Edwards, 2016; Fox & Ralston, 2016; Stewart et al., 2021), social media content (Fox & Ralston, 2016; Sex Education Forum, 2019; Stewart et al., 2025), learning through discussion with friends, family, romantic partners and other community members (Fox & Ralston, 2016; Sartin-Tarm et al., 2021; Sex Education Forum, 2019; Schwartz, 2015; Stewart et al., 2021; Strouse & Fabes, 1985), and learning about intimate partner violence through religious texts or places of worship (Sartin-Tarm et al., 2021; Schwartz, 2015). In Coleman and Testa's (2007) research, when asked about their preferred

source for learning about sex, 60.9% of Black girls said school, 38.8% said friends, and 27% indicated family. Importantly, 64% stated ‘other’, which included sources like the internet, youth workers, doctors, church, television, and from their own intimate partner, illustrating the diverse range of formal but also informal sources that young people are interested in learning about sex from (their results did not indicate which ‘other’ source Black girls were most likely to prefer).

Informal IPPA education outside of school may take place as intentional education (e.g. initiating a discussion about IPPA or researching IPPA/abuse) or through more casual and unintentional means (e.g. general discussions which lead to IPPA being mentioned and observational learning). Informal education about IPPA and attitudes towards IPPA is likely to differ for adolescence with different intersecting factors based on the divergent influences of each adolescents’ communities, family, and subcultures outside the school (Ehrensaft et al., 2003; Nascimento et al., 2023).

While informal sources of IPPA education are useful, there can be problems associated with informal IPPA education and sociocultural learning, largely issues of reliability and consistency in messaging. Due to the various types of informal education sources available (e.g. family, friends, social media, observation, and other personal research), it would be impossible to expect consistency and accuracy in the informal messaging delivered to each young person about IPPA. Additionally, the risk of faulty learning becomes an issue when young people are exposed to inconsistent messaging about abuse. For this reason, formal and centralised IPPA education across schools in England is logically the most likely mechanism for delivering at least a baseline level of education about IPPA and other forms of abuse.

In this thesis I predominantly study the role of parents in informal IPPA education, given the crucial role that parents play in socialising and teaching their children throughout

adolescence and the importance of family in providing primary socialisation and observational learning, particularly around matters like gender roles (e.g. Crespi, 2004; Hilliard & Liben, 2022) and intimate partner violence (Moruri & Obioha, 2020; Sinha et al., 2022; Vung, & Krantz, 2019). I am particularly interested in learning about the extent to which family and cultural influences in the family (particularly the influence of African and Caribbean heritage) are connected to Black women's and girls of experiences of learning about IPPA as adolescents.

5.8.1 Connecting Culture and Home to IPPA Education

Culture and societal context can play a large role in young people's understanding and attitudes towards intimate partner violence. Aspects of Vygotsky's (1978) sociocultural theory explains how people learn the norms, values, attitudes and expected behaviours within their culture – suggesting that most human behaviour is learned and influenced by one's environment (Akbari, Ariyo, & Jiang, 2022; Dworkin & Weaver, 2021; Sardinha & Catalan, 2018). For most children, parents (as well as school and community) play a core role in sociocultural learning (Gauvain, 2005; Kozulin, 2002; Tam & Chan, 2015).

To my understanding, the impacts of intersecting cultures in England on Black adolescent girls IPPA education have not been studied before. Consequently, given the novelty of my research and absence appropriate prior literature, in order to convey the potential connection between cultural/societal variables and learning about IPPA, below I instead draw on literature that more generally explores knowledge, attitudes and education surrounding various types of intimate partner violence in youth samples (e.g. Francis, & Pearson, 2019; Temple et al., 2013; Temple et al., 2016; Ybarra & Langhinrichsen-Rohling, 2019) and IPPA in adult samples (e.g. Cinquegrana et al., 2023; .; Lin et al., 2015; Ozaki & Otis, 2016; Tran et al., 2016; Uthman et al., 2009; Zark, & Satyen, 2022).

Differences in how intimate partner violence and IPPA is discussed with adolescents in a household may in part be shaped by the attitudes and norms surrounding relationship abuse and gender roles taught by their parents, other family members (e.g. grandparents) and other members within their cultural community (Cala & Soriano-Ayala, 2021; Haglund et al., 2018; Ragavan et al., 2018; Malhotra et al., 2015).

An adolescent may receive information about intimate partner violence that aligns with their families' attitudes and cultural views; however, this information may not necessarily be objective or accurate, may not promote help-seeking and, in some cases, may endorse the use of violence and abuse in intimate relationships. Given the high level of cultural diversity and migration within England's population (Lymperopoulou, 2020; ONS, 2022c; Sturge, 2024), and therefore integration between cultures from across the world, it is logical to expect that experiences of learning about IPPA and abuse outside of school will differ between adolescents depending on influences of their different cultural backgrounds.

5.8.2 Parents as Informal Educators

Parents and family are an essential source of informal education and socialisation surrounding topics of sex and intimacy (Grossman et al., 2021; Rosengard et al., 2013). To emphasise the importance of parental approaches to discussing IPPA, I borrow insights from a qualitative study by Dennis and Woods (2012), which explored Black women's adolescent experiences of learning about sex from their mothers. Across interviews with 20 Black women, Dennis and Woods (2012) found that the majority had not engaged in in-depth or intentionally planned conversations with their mothers about sex. It was instead more common for information about sex shared by their mothers to have occurred randomly and often as indirect comments about sex (e.g. comments off the back of an event happening to other women or in relation to something seen on television). Some women felt that having these unplanned and

casual conversations about sex was, in fact, beneficial as it facilitated a low-pressure and more comfortable way of learning about sex from their mothers. Nonetheless, many participants also reported feeling that these conversations felt one-sided, whereby they received brief information about sex from their mother with little opportunity to challenge the information provided or to continue an in-depth dialogue. On the other hand, women who reported having more open conversations with their mothers about sex also reported that conversations about sex with their mother tended to have begun at a younger age, than women who reported having less open dialogue about sex with their mothers. These women were instead more likely to have not started having such conversations with their mothers until a later age (e.g. in high school or university).

Despite many young people not receiving adequate sex and relationships related education from their parents (Sex Education Forum, 2024), adolescents and young adults' desire to learn about relationships and sex-related topics from their parents is supported by a number of studies (e.g. Koren, 2019; Rutledge et al., 2011; Macdowall et al., 2006). For example, amongst 16-19-year-olds in Macdowall and colleagues' (2006) study, girls reported that they had mainly learned about sex from lessons at school (30.1%) and peers (25.8%), similar to boys, who had also mainly learnt about sex from school (39.2%) and peers (30.3%). However, when asked whom they would have preferred to have learnt about sex from, in both cases, more boys and girls selected school (35.7% girls; 34.4% boys) and parents (40.7% girls; 33.3% boys) as their preferred source over any other source (Macdowall et al., 2006). Similarly, in another study by Rutledge and colleagues (2011), most young adults (ages 18 - 31) indicated that they would have preferred learning about sex from their parents (67.1%) despite only 15.5% actually reporting that their parents were their primary source of sex education. Despite the majority of participants having, in fact, mainly learnt about sex from other informal sources such as friends (40%), through their own research (15.5%) and social media (8.8%). In total,

37% of respondents felt dissatisfied with how they had learnt about sex, and less than 40% said that they would teach their own children about sex in the same way as they were taught. In another study involving a large sample ($N = 11,161$) of 16-44-year-olds in Britain by Macdowall et al. (2006), the vast majority of participants expressed that they would have wanted more information when learning about sex from parents as well as from siblings, peers, their first sexual partner, medical professionals, and media.

These studies indicate a mismatch between the desired source and actual source of learning, and suggests that a parent not being a main source of sex education, does not necessarily deplete the extent to which participants still support the idea that parents should play a leading role in teaching their child about sex education.

Despite this desire for informal education from parents, in a more recent poll by Sex Education Forum (2019), when 16 to 17-year-olds were asked about the sex and relationships education they received from parents/carers, over 20% believed they had **not** learnt everything they needed from their parents. Additionally, 18% reported that they had not learnt about how to identify healthy relationships, and 18% had not learnt how to tell if a relationship is abusive from their parents. This may suggest a need for improved support or other form of intervention for parents in order to enhance the level of RSE and abuse-related education provided for young people at home.

Past research indicates that parents are less likely to engage in meaningful conversations about topics like sex, intimacy and relationships with their children if the parent themselves has limited knowledge (Shin, Lee & Min, 2019) or does not feel equipped to appropriately facilitate conversations about these matters with their child (Shin, Lee & Min, 2019; Wilson et al., 2010). Conversations are also less likely to occur when parents believe that it is not their responsibility to discuss sex and relationships with their child (Sridawruang et al., 2010; Walker, 2001), if

they feel embarrassed discussing these topics (Wilson et al., 2010) or if they perceive intimacy as a taboo subject (Kropiunigg et al., 2006).

For instance, in Kropiunigg and colleagues' (2006) study into topics which adolescents view as taboo to talk to their parents about, in early adolescence, 38% viewed sexual fears, sexuality and premarital sex (RSE-related topics) as taboo topics, and 22% viewed sexual education as a taboo topic. Most other topics (e.g. school grades and interest in cults) were seen as less taboo as adolescents matured with age; however, RSE-related topics continued to be perceived as some of the most taboo issues well into middle and late adolescence.

Research shows that an unwillingness to engage in conversations about embarrassing or taboo topics can contribute to reduced delivery of sufficient information about the topic at home (Hyde et al., 2010; Hyde & Howlett, 2004). In a study by Ragavan and colleagues (2018), the majority of young people (age 16 - 21) discussed how youth intimate relationships were taboo amongst parents from South Asian (India, Pakistan, Bangladesh, Nepal) cultures, which led young people to keep their intimate relationships secret. This made the teens unable to speak to their families when they experienced intimate partner violence. Ragavan and colleagues (2018) study highlights how the extent to which RSE education (including potentially IPPA education) can be determined by cultural factors based on beliefs about intimate partner violence held by the informal sources of IPPA education around them.

Similar to the disadvantages of poor RSE in schools, a number of studies have found that when young people do not have positive or robust experiences of learning about sex and relationships at home, they turn to other alternative sources, including pornography, friends and social media (e.g. Bashir et al., 2017; Fox & Ralston, 2016; Rosengard et al., 2013), which runs the risk of exposing young people to incorrect content about sex and relationships (Litsou et al., 2021; Wallmyr, & Welin, 2006). This is well demonstrated in Bashir and colleagues' (2017) interviews with adolescent girls in Pakistan, which found that parents generally played a

limited role in teaching girls about sexual and reproductive health due to social taboos and stigma surrounding sexual and reproductive health in their culture. As a result, several girls reported having to instead learn about these topics independently from alternative sources, including the internet, movies, dramas, friends, and by observing other women's experiences. This illustrates how limited informal education on RSE-related topics, influenced by cultural factors, can push young people to seek alternative information from potentially unreliable sources.

Based on past literature into the role of parents, and the influence of their culture norms on the likelihood of discussing intimate topics with their adolescent children, in this thesis I wish to uncover insights on the context of Black women's adolescent experiences of learning about IPPA from their parents, by measuring satisfaction with IPPA education received from their parents and assessing the extent to which satisfaction with IPPA education received from parents is associated with views on the role that parents should play in IPPA education. In Study 2, the perceived impacts of their parent's culture and approach to discussing IPPA will be explored through accounts shared by Black women during interviews and focus groups. In particular, in the findings and discussion section of Study 2, I further discuss the role of taboos with specific relevance to insights shared by Black women, who described how discussions about adolescent intimacy and intimate partner violence was taboo in their family home, and how they believe this impacted their understanding about IPPA.

5.8.3 Learning About IPPA From Friends and the Media

Differences in adolescents' experiences of learning about IPPA may also be shaped by the information received about IPPA beyond school and parents, which I investigate further in Studies 1 and 2 of this thesis where participants are asked to think back to how sources other

than school (e.g. family, community, friends, and web-based resources) may have impacted their understanding of IPPA as an adolescent.

This is somewhat reiterated in a number of studies, whereby young people report informally learning about sex, sexuality and relationships from various sources, including friends and family (Bleakley et al., 2009; Forke et al., 2018; Park & Kwon, 2018; Powell, 2008; Rosengard et al., 2013; Rothman et al., 2021; Sex Education Forum, 2019), the internet (Albury, 2013; Bashir et al., 2017; Hillman, 2021; Hollis et al., 2022; Litsou et al., 2021; Paterson et al., 2019; Sill, 2023; Stewart et al., 2021), television (Bashir et al., 2017) and music videos (Frazier, 2013; Hall, 2020). Accordingly, to truly understand one's experience of learning about IPPA during adolescence, considerations for the influence of multiple sources must be observed.

In a paper by Harper and colleagues (2004), Black American teenagers were interviewed about the role of close friends in influencing their sexual and dating behaviours. The researchers found that close friends appeared to play a vital role in shaping how Black adolescents conceptualised dating behaviours (i.e. how friends impacted how Black adolescents defined dating, views the dating process, perceptions on partner fidelity and expectations for using condom use). They also found that Black American teenagers told their friends the most about their relationship; this was often in response to being directly asked about their relationship by a friend. Harper and colleagues (2004) also found that adolescents held strong opinions about their friend's dating partners and reported sometimes bringing their disapproval of their friend's partner to their friend's attention. Adolescents revealed that simply not liking their friend's partner would not negatively impact their friendship, whilst intense disapproval could have more of a detrimental impact on the friendship or may lead to their friend separating from their dating partner. Girls tended to disapprove their close friend's partner if they were mistreating their friend, whilst boys' disapproval tended to be based on a

personal dislike of their friend's partner, indicating a potential protective element in the roles of friends for adolescent girls.

While some research highlights the advantages associated with learning about sex and relationships from peers (e.g. peers sometimes offering more sex-positive messaging than parents - Epstein & Ward, 2008) and online resources (e.g. online resources can be a beneficial alternative to learning when education provided by schools or parents is inadequate - Bashir et al., 2017; Litsou et al., 2021), there are risks associated with an overreliance on these informal sources. For instance, when young people learn about sex and relationships from the media, there is a risk of young people being presented with unreliable and biased information (Davis & March, 2022; Hillman, 2021), which some young people may fall prey to, in part a result of not possessing the information needed to locate credible, objective and age-appropriate information online by themselves (Martin, 2017; Patterson et al., 2019).

The depiction of intimate partner violence, relationship conflict, and violence against women in popular media (e.g. television shows, movies, social media networks and music) has been found to impact viewers' perceptions and create misconceptions about these matters (e.g. Carlyle et al., 2014; Rodenhizer, & Edwards, 2017). We see evidence of this amongst Black 18 to 40-year-olds where greater exposure to certain television shows and music videos was associated with greater acceptance of intimate partner violence, endorsement of stereotypes about Black women, acceptance of traditional gender roles, and tendency/willingness to sexually objectify women (Moss et al., 2022).

The relationship between media consumption, sexual objectification of women, and attitudes towards gender roles is further illustrated by findings from a survey of Black American undergraduate students by Jerald and colleagues (2016). Jerald and colleagues (2016) found that participants who more frequently consumed media (music videos, films, magazines) that contained passive, objectifying and stereotyped representations of women and

relationships also tended to more strongly endorse traditional gender ideologies (such as beliefs that fathers should have greater authority than the mother over family decisions and beliefs that girls should be more concerned with becoming good wives and mothers over a professional career (as measured using the statements from the Attitudes Towards Women Scale for Adolescents - Galambos et al., 1985). Nonetheless, Jerald and colleagues (2016) found that the link between media consumption and endorsement of traditional gender ideologies was mediated by participants having a stronger sense of ethnic belonging (i.e. women who felt more connected to their ethnic group/more strongly felt that their self-identity was tied to their ethnic group, were less likely to endorse traditional gender ideologies even if they frequently consumed this type of messaging from media). This emphasises a complex relationship between what media indirectly teaches young people about Black girls and women and feelings of a sense of ethnic belonging amongst young people,

Although not the focus of my investigations, the potential influence of friends and the media in informally or indirectly teaching young people about IPPA is important to note. In Study 1 (survey with Black women), Study 2 (interviews and focus group with Black women) and Study 3 (survey with adolescents) participants are asked to indicate which sources (including friends and media), played a role in shaping their understanding about IPPA. Some further elaboration on the role of friends and media is presented in Study 2.

5.9 Chapter Conclusion

To summarise, in this chapter I have reiterated why IPPA education is important for adolescents and specifically Black adolescent girls. I highlight the differences that exist in both formal and informal learning experiences (e.g the effects of stereotypes and absent cultural competency training amongst educators and cultural views and intimate partner violence and cultural taboo of intimacy topics). I explored evidence into the effects of staff specialism (e.g. training), delivery style (e.g. pedagogy used) and staff characteristics on learning experiences,

noting that the importance places on of same-sex, same culture and same-race educators varies from adolescent to adolescent and between studies. I then went on to capture the influence of culture and societal context on informal IPPA education, whereby norms, values and attitudes surrounding violence against women and gender roles, plus parents' beliefs about their role in teaching adolescence about sex and relationships can impact learning experiences. Together the exploration of literature across these ideas contributes to contextual understanding of some variables that may affect how Black adolescent girls in England may learn about IPPA.

Now that we have reached the end of the literature review, in chapter 6 I go on to bring together the ideas explored over the last five chapters to integrate them into a single model of intersectionality which forms the basis of the empirical studies featured in this thesis.

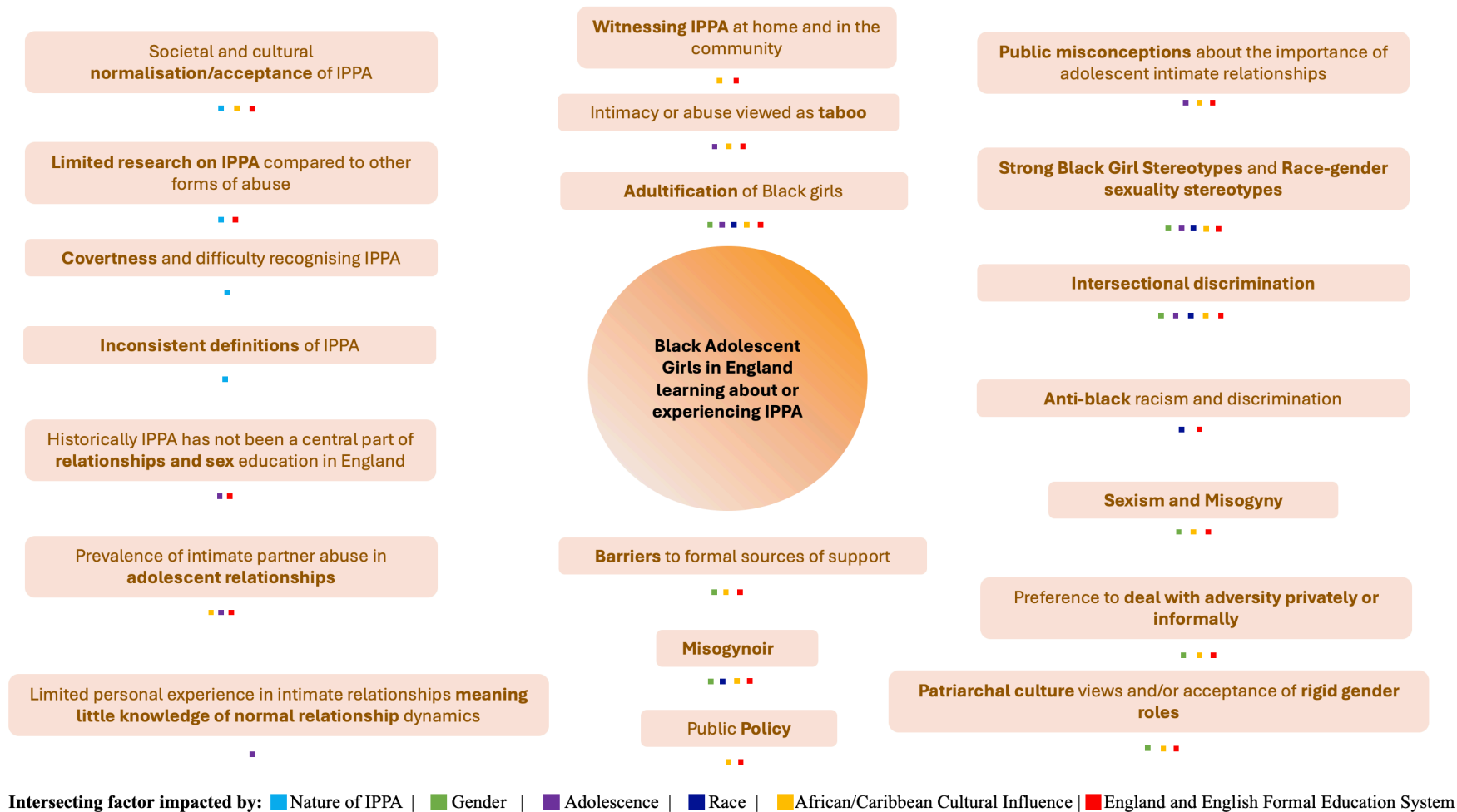
Chapter 6: The Collective Picture

6.1. Intersecting Variables Affecting Black Adolescent Girls in England

In Chapters 2 to 5 of this thesis, I have explored literature and past arguments to inform our understanding of how and what Black adolescent girls in England may experience and learn about IPPA, and the potential influence of age, gender, race and culture on these experiences. In Figure 6.1. I present a visual representation to illustrate how various aspects of the literature already explored in this thesis interact to inform an understanding of the potential variables uniquely impacting how learning about abuse and experiencing IPPA may manifest in the intersecting context of *Blackness, girlhood, Carribeanness, Africanness, and Englishness*. - In Figure 6.1. each phases/term intends to capture constructs that may impact Black adolescent girls' experiences of learning about IPPA and being victims of IPPA, according to the literature explored in this thesis. The coloured dots, defined by the accompanying key, each correspond with a chapter in this thesis, and intends to illustrate which constructs are affected by one or multiple social characteristics.

Figure 6.1

Diagram illustrating the how individual social characteristics (race, gender, age, location, and culture) and the intersection of characteristics create constructs that may impact IPPA experiences and learning for Black adolescent girls in England.



Despite Chapters 3-5 contributing to an understanding of how differing social characteristics (in this case, age, gender, race and culture) may impact IPPA experiences and learning for Black adolescent girls, ultimately, Black adolescent girls learning experiences and personal stories about IPPA have not been told in academic literature.

To truly understand the unique learning journey and experiences of IPPA amongst Black adolescent girls in England, we must seek answers beyond inferences made from research and theories which have not specifically studied IPPA with the contextual experiences and unique intersection of factors affecting the lived experiences of Black adolescent girls in England. Black girls and women in England deserve to have access to information and evidence about their own adolescent experiences of IPPA, and therefore, in this thesis I seek to answer the following overarching questions:

- How have Black adolescent girls in England learnt about IPPA both formally and informally?
- To what extent could Black adolescent girls and their peers accurately define and identify psychological abuse in intimate partner relationships?
- What are Black women in England's experiences of IPPA during adolescence?
- What gaps are there in interventions available to reduce, educate or support Black adolescent girls in England regarding intimate partner psychological abuse?

These questions have guided the development of individual research questions within each of the four empirical studies conducted as part of this thesis between May 2022 to July 2023.

6.2 Introduction to Empirical Studies

In line with Black feminist methodological recommendations, in these empirical studies, symbolic interactions and meanings of experiences are thoroughly explored, hence my decision to predominantly use qualitative research methods (Clemons, 2019; Collin, 2000; Patterson et al., 2016; Phillip & McCaskill, 1995). I use storytelling dialogue techniques, interviews, focus groups, and creative storyboards to explore Black women's experiences of learning about and experiencing IPPA, but then complement these qualitative findings with quantitative data from surveys with Black women and adolescents. When designing and conducting studies with Black women, conscious considerations were made about the researcher-participant relationship, with particular efforts made to minimise the risk of a hierarchal dynamic that could reduce women's willingness to share personal views and experiences. Instead, as later discussed within each empirical chapter I aimed to facilitate a caring, safe, trauma-informed, relaxed, relatable and culturally competent environment for participants (Collin, 2000; Sampson, 1993; Few et al., 2003; Glesne, 2006; Noblit et al., 2004; Thomas, 2004). Black women were also involved in the research process overall, supporting the review of resources, forming ideas, informing the direction of research and data analysis, to ensure that the research and conclusions drawn validly represents Black women and girls experiences.

Study 1, titled **Black Adolescent Girls and Intimate Partner Psychological Abuse: An Exploratory Survey into Learning Experiences and Future Interventions**, I use surveys with Black women to understand how they learnt about IPPA when they were teenagers and how they think IPPA should be taught to current day adolescents. At the time of writing, this study is currently under review with an academic journal, crediting the following authors Natalie A. Russell, Melane Harry, Alexane Bremshey, Dr Bruna Nascimento, Dr Kwanele Shishane & Dr Lora Adair.

Study 2, **How we didn't learn about psychological abuse: Interviews and focus groups with Black women** was conducted simultaneously to Study 1 and was again seeking to explore how Black women learnt about IPPA when they were adolescents and their views on how IPPA should be taught nowadays. In this study I instead use qualitative methods to engage in richer, more in-depth discussions with Black women.

In Study 3 - **A school-based study into adolescents' knowledge, views, and access to help surrounding abuse in intimate relationships**, equipped with both quantitative and qualitative insights about Black women's learning experiences during adolescence (from Study 1 and 2), I go on to investigate IPPA knowledge across a sample of 16- and 17-year-olds, and test the impacts of an educational intervention on their longer-term knowledge of IPPA.

Finally, in Study 4 - **Unhealthy Adolescent Relationships: A mixed methods study into intimate partner psychological abuse of Black adolescent girls**. I was able to have candid interviews with Black women who experienced IPPA in an adolescent relationship. These women bravely reflected on and shared their experiences of IPPA, providing insights into how IPPA towards Black adolescent girls in England manifests and some of the race, gender, and culture-related phenomena impacting these experiences. Additionally, in this study I surveyed 68 women using Follingstad's (2011) Measure of Psychologically Abusive Behaviours (MPAB) to gain a better understanding of the types and severity of IPPA that was experienced in a sample of Black women across England.

Empirical Studies

Study 1

Black Adolescent Girls and Intimate Partner Psychological Abuse: An Exploratory Survey Into Learning Experiences and Future Interventions.

7.1 About Study 1

Receiving education about intimate partner violence, including IPPA such as coercive control, has the potential to provide adolescents with the knowledge needed to recognise unhealthy relationship behaviours when they occur (Adler-Baeder et al., 2007; Simpson et al., 2017) and to make learners less accepting of violence in intimate relationships (Pomeroy et al., 2011; Simpson et al., 2017). If faced with violence in a relationship, this awareness can potentially prompt an individual to seek help, address the behaviours in a conducive way, or leave the abusive relationship (DfE, 2021; Lundgren & Amin, 2015; Pound et al., 2017). Learning about intimate partner violence can also reduce perpetration rates amongst adolescents, by teaching young people how to distinguish between their own healthy and unhealthy behaviours and providing them with the tools to navigate relationships without using violent tactics (Carlson et al., 2014; Lundgren & Amin, 2015; Owens et al., 2016). Despite these protective benefits of learning about intimate partner violence, as discussed throughout this thesis so far, little is known about how IPPA education is accessed and received by all adolescents, including Black adolescent girls in England. As such, the extent to which Black adolescent girls are gaining knowledge and benefiting from the protective factors associated with learning about relationship abuse (in this case, specifically IPPA) is unknown.

As discussed in the literature review chapters of this thesis, IPPA is a widespread (Barter et al., 2009; ONS, 2023a) yet lesser-researched form of intimate partner violence. In addition to this, RSE guidelines in England before 2020 (DfEE, 2000) did not explicitly ask schools and colleges in England and Wales to thoroughly teach young people about IPPA in extensive (still

age appropriate) detail. Prior to 2020, education about non-physical forms of abuse in intimate relationships (including IPPA) was not compulsory (DfEE, 2000). The DfE (2019) made huge strides in improving this, given that since 2020, by the end of secondary school students are now expected to have been taught about domestic violence, coercive control, unacceptable relationship behaviour, and the negative impacts of unhealthy relationships on mental wellbeing. Nevertheless, (albeit making specific reference to coercive control) this guidance does not necessarily indicate how thoroughly IPPA must be taught in schools and provides individual schools with flexibility over how RSE is actually delivered. In addition to this, in England and Wales based studies which have measured young people satisfaction/opinions on RSE education, young people's views on specifically IPPA education has not been captured in much detail (Cumper et al., 2024; Daly & Heah, 2023; Horan et al., 2023; Maslowski et al., 2024; Rudoe & Ponsford, 2023; Sex Education Forum, 2024). As such, it is unclear how and what adolescents have previously (prior to 2020) and currently learn about IPPA.

With a specific focus on Black women's experiences during adolescence, this study will seek out insights into the extent to which participants received formal IPPA education at school. As this research is conducted with people aged over 18, at the time of study, the majority of participants would have left school prior to the introduction of the 2020 RSE guidelines (DfE, 2019), as such it is anticipated that many women would not have learnt about IPPA at school.

For women who report that they had learnt about IPPA at school, they will also be asked about how often they received education about IPPA at school, how satisfied they were with the information that they received at school and who taught them about IPPA (e.g. a specialist teacher, specialist guest speaker or a non-specialist teacher). Whilst there is no past literature available investigating the frequency of IPPA education, more general research into teaching and learning shows that frequency/regular exposure to information (e.g. in other subjects like

maths, science and languages) improves information retainment (Tabibian et al., 2019; Voice & Stirton, 2020; Zhan et al., 2018). This is rooted in early learning theories which highlight that rehearsal and repetition are key principles for securing long-term memory of information (e.g. Atkinson & Shiffrin, 1968; Baddeley, Baddeley et al., 2018; Hebb, 1961). As such, frequency of learning about IPPA at school may play a role in how knowledgeable Black women feel about IPPA now, which may subsequently impact how satisfied Black women feel about the information that they received at school.

Nevertheless, research also tells us that having a higher frequency of learning by itself does not necessarily always translate to greater knowledge and understanding if the student is not receiving good quality and accurate information. As discussed in Chapter 5 Part Two (How Cultural and Societal Content Impacts IPPA Education) of this thesis. When teachers are not adequately trained to deliver aspects of RSE this can have an effect on the quality of RSE lessons delivered and the teachers confidence in delivering RSE to students (Cumper et al., 2023; Hilton, 2021; Moskovic et al., 2008; Walker et al., 2020; Westwood & Mullan, 2007; Wilder, 2018). For this reason, in this study I am also keen to understand the extent to which educator specialism relates to IPPA knowledge and satisfaction with the education received. I use an arbitrary indicator of specialism (arbitrary, as specialism does not indefinitely translate to good quality teaching and participants may not have been fully aware of the level of specialism or training that their teachers had about IPPA).

In addition to formal IPPA education at school, Study 1 also explores informal IPPA education. Participants are asked to indicate which other sources they had learnt about IPPA from as an adolescent, including friends, media and personal research. As discussed in previous chapters, these other sources are known to be used by adolescents both intentionally and unintentionally, to learn about topics like sex and dating (Sartin-Tarm et al., 2021; Sex Education Forum, 2019;

Stewart et al., 2021). However, the extent to which this is the case for Black adolescent girls in England learning about IPPA is not yet expressed in past literature, hence my interest in filling this gap through this study.

In this study there is a specific focus on understanding the informal role of parents in teaching participants about IPPA. As discussed throughout Chapter 5 (Race, Culture and Societal Context), parents play a significant role in socialisation and therefore teaching young people information, norms, values, social expectations and so on (Grossman et al., 2021; Rosengard et al., 2013). Numerous studies show evidence of parents being a source of information for their children on topics like sex and intimacy (e.g. Dennis & Woods, 2013; Rutledge et al., 2011, Sex Education Forum, 2019), although the number of young people receiving this type of information from their parents and the quality of the information provided often varies between studies. In addition to this, as also explored in Chapter 5, the extent to which parents have conversations about such topics with their adolescent children can also significantly depends on various cultural, generational and personal factors. For instance, in Chapter 5, I explored how intimacy being a taboo topic for the parents/in some cultures (Kropiunigg et al., 2006), parents feeling that it is not their responsibility to teach their children about sex/intimacy (Sridawruang et al, 2010; Walker, 2001), and parents not feeling equipped to discuss these topics with their child (Shin, Lee & Min, 2019), can all play a role in explaining variations in young people's experiences of learning about RSE related topics from their parents. In Study 1, whilst I do not delve into why participants believe that they did, or did not receive IPPA education from their parents (that is covered in Study 2 using qualitative methods), I do ask participants to rate how satisfied they were with the IPPA information they received from their parents as teenagers, which again to date has not previously been studied.

Lastly, in Study 1, I also ask Black women to share their views on how IPPA education should be delivered to current and future generations of adolescents. As described in Chapter 5 Part Two, in Coleman and Testa's (2007) research 60.9% of Black girls said that they would prefer to learn about sex from school, 38.8% said friends, 27% said family. Across adolescents (of all races and genders) in Coleman and Testa's (2007) study, 64% selected 'other', stating a preference to learn about sex from other sources like the internet, youth workers, doctors, church, television, sexual health professionals, and from their own intimate partner. In a number of other studies, high rates for a preference to learn about sex and intimacy from parents has been found (Koren, 2019; Rutledge et al., 2011; Macdowall et al., 2006).

Based on some of these past insights, as well as literature explored in this thesis, in Study 1, I ask Black women closed questions about who should teach adolescent girls about IPPA (i.e. healthcare professionals, specialist, charities, teachers, and parents), as well as their views on whether parents and teachers should receive more training about IPPA, whether there is a need for intervention specifically directed for Black girls and at what age they think that this education should begin.

Overall, this study has been designed to first explore the formal (e.g. via school education) and informal (e.g. via parent-child education) ways in which women who grew up in England learnt about IPPA during their adolescent years (ages 10 – 19). Through this study I then explore the extent to which participants were satisfied with the IPPA education they received during adolescence, and how these learning experiences (or lack thereof) has shaped their current understanding about IPPA. Study 1 is therefore designed to address the following research questions:

- **Research Question 1** | What are Black women's experiences and views of learning about IPPA as adolescents?

- **Research Question 2** | What are Black women’s perceptions of current IPPA interventions and education, and do Black women believe changes are needed to improve IPPA education for Black adolescent girls?

7.2 Methods

7.2.1 Participants

One hundred and twenty women aged 18 or over who identify as Black ($N = 111$) or Black mixed ethnic background ($N = 8$) were recruited to complete an online survey. One participant’s response was excluded from analyses due to an over 50% percent incompleteness rate, resulting in a final sample of $N = 119$ (M age = 31, $SD = 11.1$). Participants were also required to have received education in a school or college in England for at least 12 consecutive weeks whilst they were adolescents. This criterion allowed for the study of IPPA education in the context of the English education system. Further demographic data, split to represent each participant recruitment method used, is presented in Table 1.1.

Table 1.1

Sociodemographic Characteristics of Survey Participants

Characteristics	Full Sample		Recruited at event		Recruited via Prolific.com		Recruited via Online Ad	
	$N = 119$		$N = 10$		$N = 72$		$N = 37$	
	n	%	n	%	n	%	n	%
Age (M age = 31, $SD = 11.1$)								
18 – 19	9	7.6	1		0		8	
20 – 24	28	23.5	3		16		9	
25 – 29	32	26.9	3		14		15	
30 – 34	19	15.9	1		14		4	
35 – 39	11	9.2	1		10		0	
40 – 44	2	1.6	0		2		0	
45 – 49	5	4.2	1		4		0	
50 – 54	6	5.0	0		6		0	

55 – 59	3	2.5	0	3	0
60 - 64	4	3.3	0	3	1
Ethnic background					
Black African	56	47.1	4	26	26
Black Caribbean	44	37.0	2	35	7
Black African and Caribbean	10	8.4	0	9	1
Mixed Black African	3	2.5	1	0	2
Mixed Black Caribbean	4	3.4	3	1	0
Mixed Black African and Caribbean	1	.8	0	0	1
Other Black mix	1	.8	0	1	0
Sexuality					
Heterosexual/Straight	103	86.6	6	62	35
Bisexual	7	5.9	2	3	2
Pansexual	3	2.5	1	2	0
Sapiosexual	1	.8	1	0	0
Asexual	1	.8	0	1	0
Homosexual	1	.8	0	1	0
Prefer not to say	3	2.5	0	3	0
Currently residing in England					
Yes	112	94.1	8	69	35
No	7	5.9	2	3	2
School/college year groups educated in England					
All year groups	111	93.3	10	67	34
Year 5 onwards only	4	3.4	0	3	1
Year 6 onwards only	1	.8	0	1	0
Years 12 and 13 only	1	.8	0	1	0
Year 13 only	2	1.7	0	0	2

Three recruitment methods were used. 1) With permission from the event organisers, 10 participants were recruited in person at a well-being festival in London which attracts Black attendees. Participants completed the online survey immediately whilst at the event, using a tablet device provided by the researcher or using their own smartphone by scanning a QR code. 2) Thirty-seven participants were recruited through an online advert (an online poster with accompanying descriptive text and a link to the online study). This ad was shared by the researcher on social media platforms (LinkedIn, Facebook, Instagram, and Twitter) and also re-shared by other individuals and organisations (including an abuse charity, a women's equality charity, and a therapy network), allowing for convenience and snowball sampling. 3) The remaining 73 participants were recruited using the online participant recruitment platform

Prolific (www.prolific.com). The built-in Prolific screening function was used to filter and promote our research invitation to prospective participants who were more likely to fit the eligibility criteria/characteristics outlined above. Prolific participants were paid £3 when they completed the study. This was funded by the Centre for Culture and Evolution in the Life Sciences Department at Brunel University London. For this study, payment was not provided for participants recruited at the wellbeing event or via social media.

Research protocols were designed to adhere to APA and BPS ethical guidelines and were reviewed and approved by the Brunel University College of Health, Medicine, and Life Sciences [CHMLS] Research Ethics Committee.

7.2.2 Materials and Procedure

The research survey and all accompanying research materials were presented to participants online using Qualtrics.com (Qualtrics, Provo, UT), which was accessed by participants through a weblink or QR code. The study took approximately 20 minutes to complete.

Participant information sheet (PIS) and Consent Form. Participants were first presented with the PIS, which provided detailed information about the research purpose, procedure, ethical safeguards and participant rights (e.g., confidentiality, right to withdraw, intended use of data collected), advantages and disadvantages of participating, and information about how responses would be used. After reading the PIS, participants were directed to a consent form to confirm their understanding of the research procedure and ethics. In this form, participants also asked to agree to having their data pseudonymised, stored and used in future research in line with Brunel University's data retention policies. The consent form also included questions to confirm that the participant met the eligibility criteria outlined (e.g. to confirm that

they are over age 18 and identify as Black or Black mixed ethnic background). After consenting, participants were presented with the remaining study materials in the following order:

Demographic survey. A demographic survey was used to assess participants' age, ethnic background, sexuality, residence (i.e., if they currently resided in England), and the year groups they were educated at a school or college in England (see Table 1.1).

Definitions. To ensure that all participants were familiar with the definitions of key terminology used in this study, a page of definitions was provided. Participants were given the following definitions for the terms adolescent/adolescence, psychological abuse, intimate relationships, intervention, culture, and personal, social, health and economic education (PSHE) (See Table 1.2).

Survey questions. Participants completed a 29-question survey designed to investigate women's past experiences of IPPA education and their preferred sources for seeking help if faced with abuse (as part of a wider investigation), however in the current study only results about education are provided. In total, findings from 23 survey items are relevant to the current study. Table 1.3 presents these 23 survey items, along with the Likert scale response choices. Participants could skip any question if desired, given the sensitivity of the subject matter and to safeguard participants who may find some survey items intrusive or upsetting.

Table 1.2

Key terms provided to participants.

Key terms	Definitions Provided
Adolescent/Adolescence	Adolescence is the name given to the phase of life between ‘childhood’ and ‘adulthood’ and is considered to occur between the ages of 10 and 19 years old (Viner, 2012; WHO, 2022). An adolescent person can also be a child. In England, a child is defined as anyone who has not yet reached their 18th birthday (Children Act, 1989).
Psychological abuse	The terms psychological abuse and emotional abuse are often used interchangeably. “Psychological abuse involves the regular and deliberate use of a range of words and non-physical actions used with the purpose to manipulate, hurt, weaken or frighten a person mentally and emotionally; and/or distort, confuse or influence a person’s thoughts and actions within their everyday lives, changing their sense of self and harming their wellbeing” (Safe Lives, 2019, p. 10). Some examples of psychological abuse include insults, belittling, constant humiliation, Intimidation, Threats of harm and controlling freedoms (WHO, 2012; Follingstad & DeHart, 2000).
Intimate relationship	An intimate relationship can be described as a relationship between parties which involves either emotional intimacy, physical intimacy, or both. An intimate relationship does not necessarily mean that there is any sexual activity involved (Wong et al., 2014).
Intimate partner violence	“...physical, psychological, or sexual harm perpetrated by a current or former intimate partner” (WHO, 2012),
Intervention	“the act or an instance of intervening” such as “the act of interfering with the outcome or course especially of a condition or process (as to prevent harm or improve functioning) (Marriam-Webster.com, 2022).
Culture	: “the ideas, customs, and social behaviour of a particular people or society” (Oxford Learners Dictionaries, 2021).
PSHE	PSHE (Physical, Social, Health and Economic) education is a non-statutory subject taught in schools in England. PSHE can include a number of topics (Department for Education, 2021). Some topics associated with PSHE are Relationships and sex education (RSE), physical health, bullying and discrimination and money and work. From September 2021 all schools in England must teach Relationships Education (primary schools) or Relationships and Sex Education (secondary schools) (Department for Education, 2019).

Table 1.3

Survey Questions used in Study 1

Item number	Item questions or statement	Scale
Category 1: Learning		
L1	Which statement best describes your current understanding of psychological abuse in intimate adolescent relationships?	Likert: 1 = <i>I have no understanding.</i> 2 = <i>Some or limited understanding.</i> 3 = <i>Fair understanding.</i> 4 = <i>Good understanding.</i> 5 = <i>Very good understanding.</i>
L2	Where else has your understanding of psychological abuse in intimate partner relationships come from? (Please select all applicable answers)	Multiple Choice: <i>I currently have no understanding of psychological abuse; Parent/carer; Sibling or cousin; Other family members; Friends; Training through an employer; Personal research (e.g., internet search, reading, documentary, podcasts etc); Social media (information shared by others on social media platforms); This study; Social worker or youth worker; Women's, children's, or abuse charities/organisations; Other - please explain [other responses were coded into the relevant source listed above. Two participants response led to a new code = During therapy following abuse].</i>
L3a	In what year group(s) at school or college did you learn about psychological abuse in intimate relationships? (Please select all applicable answers)	Multiple Choice: <i>I did not learn about psychological abuse at school or college; I am unsure of what year group I was in, but I did learn about psychological abuse at school or college; Early years/Reception - Typically ages 3 – 5; Year 1 – Typically ages 5 to 6; Year 2 – Typically ages 6 -7; Year 3 – Typically ages 7 – 8; Year 4 – Typically ages 8 -9; Year 5– Typically ages 9 – 10; Year 6 – Typically ages 10 – 11; Year 7 – Typically ages 11 – 12; Year 8 – Typically ages 12 – 13; Year 9 – Typically ages 13 – 14; Year 10 – Typically ages 14- 15; Year 11 – Typically ages 15 – 16; Year 12 – Typically ages 16 – 17; Year 13 – Typically ages 17 – 18.</i>
L3b	<i>You've told us that whilst at school/college you learnt about psychological abuse.</i> Who was it that delivered this information? (Select all applicable answers)	Multiple Choice: <i>A subject specific teacher (such as PSHE teacher or home economics teacher); Another teacher (such as a PE teacher, science teacher, form tutor); School nurse or school medical staff; An external provider/a visitor to the school; I am unsure, but I did learn about this in school or college; Other – please explain [other responses were coded into the relevant options listed above].</i>
L3c	Please select the statement that best describes how you learnt about psychological abuse in intimate relationships whilst at school/college?	Multiple Choice: <i>In one lesson or workshop; Across two or more lessons or workshops; It was a regular part of my curriculum/regularly taught in my school or college; I am unsure, but I did learn about this in school or college; Other – please explain.</i>
L3d	Please select the statement that best describes how satisfied you are with the education that you received on psychological abuse in intimate relationships at school/college?	Likert: 1 = <i>Very unsatisfied.</i> 2 = <i>Unsatisfied.</i> 3 = <i>Neutral.</i> 4 = <i>Satisfied.</i> 5 = <i>Very satisfied.</i>
L4	Feel free to tell us more about your experiences of learning about psychological abuse in intimate relationships.	Open ended: <i>Qualitative response.</i>

Category 2: Support			
S9	Think back to when you were an adolescent. <u>Were you aware of any services, organisations, or professionals outside of school, where you could have accessed further support or education</u> surrounding psychological abuse in intimate relationships? If Yes, please list any services, organisations, or professionals that you were aware of below.	Multiple Choice: <i>Yes; No</i> Open ended: <i>Qualitative response</i>	
S10	State how much you agree or disagree with the following statements (Select one answer per statement): c. I am satisfied with the information that my parent/carer gave me about psychological abuse in intimate relationships when I was an adolescent.	Likert: <i>1 = Strongly disagree. 2 = Disagree. 3 = Neither disagree nor agree. 4 = Agree. 5 = Strongly agree.</i>	
Item Category 3: Future			
F11a - 1	State how much you agree or disagree with the following statements. a. There should not be specific interventions in schools for Black adolescent girls around psychological abuse in intimate relationships. (reverse scoring). b. There should not be specific interventions outside of schools for Black adolescent girls around psychological abuse in intimate relationships (reverse scoring). c. Parents/carers should teach their adolescent child about psychological abuse in intimate relationships. d. Parents/carers should have training on psychological abuse in intimate relationships. e. Schools/colleges should teach adolescent students about psychological abuse in intimate relationships.	f. Teachers should have more training on psychological abuse in intimate relationships. g. Social workers should teach adolescents about psychological abuse in intimate relationships. h. Women's, children's and abuse charities/organisation should teach adolescents about psychological abuse in intimate relationships. i. General practitioners (GP's) should teach adolescent service users about psychological abuse in intimate relationships. j. Nurses should teach adolescent service users about psychological abuse in intimate relationships. k. Providing adolescent girls with education about psychological abuse and intimate relationships would reduce the number of adolescent girls who experience this. l. Providing all adolescents with education about psychological abuse and intimate relationships would reduce the number of adolescent girls who experience this.	Likert: <i>1 = Strongly disagree. 2 = Disagree. 3 = Neither disagree nor agree. 4 = Agree. 5 = Strongly agree.</i>
F12	In what year group(s) should Black girls be taught about psychological abuse in intimate relationships in school or college? (Select all applicable answers)	Multiple Choice: <i>Black girls should not be taught about this in school or college ; Early years/Reception - Typically ages 3 – 5; Year 1 – Typically ages 5 to 6; Year 2 – Typically ages 6 -7; Year 3 – Typically ages 7 – 8; Year 4 – Typically ages 8 -9; Year 5– Typically ages 9 – 10; Year 6 – Typically ages 10 – 11; Year 7 – Typically ages 11 – 12; Year 8 – Typically ages 12 – 13; Year 9 – Typically ages 13 – 14; Year 10 – Typically ages 14- 15; Year 11 – Typically ages 15 – 16; Year 12 – Typically ages 16 – 17; Year 13 – Typically ages 17 – 18.</i>	
F13	At what age should Black girls begin learning about psychological abuse in intimate relationships at home?	Multiple Choice: <i>Black girls should not be taught about this by their parent(s)/carer; 0 – 4 years old; 5 years old; 6 years old; 7 years old; 8 years old; 9 years old; 10 years old; 11 years old; 12 years old; 13 years old; 14 years old; 15 years old; 16 years old; 17 years old; 18 years old; 19 years old and older.</i>	

To explore research question 1 (What are Black women's experiences and views of learning about IPPA as adolescents?) participants were first asked to rate their current level of understanding about IPPA (item L1). This was asked to gather an overall understanding of participants self-perceived knowledge about IPPA. Participants were also asked to rate their satisfaction with the IPPA education that they received at school (item L3d) and their satisfaction with the IPPA information they were provided with by their parents (item S10) between the ages of 10 and 19 years old. These items were used to assess whether Black women had learnt about IPPA from school and their parents at all and their views on whether information provided by these sources were satisfactory. Together, responses to these items could then be used to analyse correlations between current level of understanding and participants satisfaction with the information they received about IPPA as adolescents

Participants who had learnt about IPPA at school were also asked to indicate how often they recalled receiving lessons where IPPA was discussed (item L3c) and whether these lessons were provided by specialists or non-specialist educators(item L3b). These items were used to assess the extent to which the level of specialism and number of lessons about IPPA at school may be related to participants current understanding of IPPA as adults, and their satisfaction with the IPPA education that they received at home.

All women were also asked to tell us if they were aware of any services outside of school that they could have sought information or support from when they were adolescents (item S9) and which other sources beyond school and parents they had learnt about IPPA from throughout their lifetime (item L2). These items were used to help establish a more holistic picture of how knowledge about IPPA may have been formed.

To address, research question 2 (What are Black women's perceptions of current IPPA interventions and education, and do Black women believe changes are needed to improve IPPA education for Black adolescent girls?) items F11c-F11l, F12 and F13 were used. These items

gather responses from participants on their views on who should deliver IPPA education (e.g. Parents/carers, Schools, GP's etc), whether teachers and parents should receive IPPA training, and when Black adolescent girls should begin learning about IPPA. Participants were also asked to indicate their agreement with statements about whether specific interventions for Black adolescent girls should exist in school (item F11a) and outside of school (item F11b). These items were intended to help gather suggestions from Black women which could be used to inform recommendations for future formal and informal IPPA education and interventions.

Debrief Letter. A debrief letter containing a reminder about ethical rights and the researcher's contact details was provided at the end of the survey. Due to the topic sensitivity and risk of emotional distress for participants, recommendations for ways to seek formal support (e.g. contacting a charity) and informal support (e.g. reaching out to a trusted person) were also offered.

7.2.3 Data Analysis

Quantitative data from this survey was analysed using SPSS version 26 software. Due to the exploratory nature of this research, we did not report statistical interpretations based on p-values in this study (Wagenmakers et al., 2012). Descriptive statistics (means, standard deviations, and percentages) and correlation coefficients (Pearson's R) are reported and used to assess trends in the data presented. Qualitative survey responses were coded using inductive coding, whereby similar ideas shared in participants responses were grouped to create a code. Each qualitative answer was read and coded by two research assistants separately, with their findings then compared and consolidated.

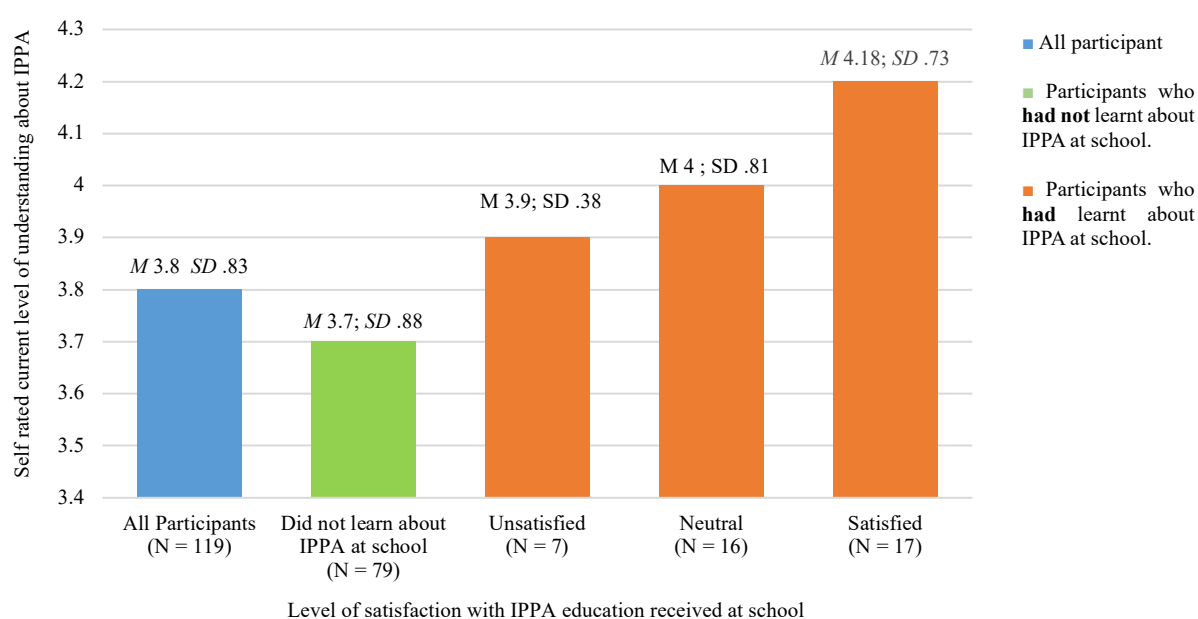
7.3.4 Results

7.3.4a Research Question 1 | What are Black women's experiences and views of learning about IPPA as adolescents?

7.3.4i IPPA Education at School . Across all 119 participants, just 33.6% ($N = 40$) indicated that they had learnt about IPPA at school (at any point between early years and year groups 13/college/sixth form). Of these 40 participants, most were satisfied (42.5%; $N = 17$) or felt neutral (40%; $N = 16$) towards the IPPA education they received at school. Seven women were unsatisfied (17.5%). Women who did not learn about IPPA at school (66.4%; $N = 79$) rated their current understanding about IPPA lower compared to women who had received IPPA education at school regardless of if these women were satisfied or unsatisfied with the education they received at school (Figure 1.1).

Figure 1.1

Participants self-rated level of current understanding about IPPA, categorised by level of satisfaction with the IPPA education that they receive at school.



As displayed below in Table 1.4, women who received multiple or regular lessons about IPPA were more likely to report that they were satisfied with their school IPPA education compared to those who received just a single lesson. Women who received IPPA education at least once from a specialist (e.g. specialist RSE teacher, external charities, school nurses) also more frequently reported being satisfied than those who did not receive lessons from a specialist.

Table 1.4

Participants' satisfaction with IPPA information received at school cross-tabulated with the frequency of lessons received and level of specialism of those providing IPPA education.

Satisfaction with school IPPA education	Frequency of IPPA lessons at school		IPPA lessons at school delivered by	
	Single lesson	Multiple or regular lessons	Non-specialists only	A specialist on at least one occasion
Unsatisfied	33%	12.5%	0%	17.6%
Neutral	44%	37.5%	75%	35.3%
Satisfied	22%	50%	25%	47.1%

7.3.4ii IPPA Education From Parents and Outside of School. Of 118 responses, 64.4% ($N = 76$) of participants reported that they were not satisfied with the IPPA information they have received from their parents. Twenty-six (21.8%) felt neutral and 16 (13.4%) reported that they were satisfied with this information.

When asked to identify where else they had learnt about IPPA in their lifetime, as summarised below in Table 1.5, social media (68.9%), personal research (65.6%), and friends (36.1%) were found to be the most common sources of IPPA information amongst participants. Overall, informal sources (e.g. social media, personal research, friends) were more commonly used than formal sources (e.g. charities training through a provider, university).

Table 1.5

Sources of IPPA information other than school and parents, used by participants throughout their lifetime.

Formal Source of IPPA Information	Participants who received IPPA information from each source		Informal Sources of IPPA Information	Participants who received IPPA information from each source	
	<i>n</i>	%		<i>n</i>	%
Women's, children's, or abuse charity/organisation	31	26	Social Media	82	68.9
Training through an employer	25	21	Personal research (e.g. internet search, reading, documentary, podcasts)	78	65.6
This study	25	21	Friends	43	36.1
University	12	10.1	Siblings or cousins	11	9.2
Social or youth worker	6	5	Other family members	19	16
Therapy following abuse	2	1.7	Television	3	2.5

Overall, most participants (80.7%) were unaware of further formal sources support or education (e.g. professionals and charities outside of school) that they could have accessed as adolescents. Only 23 (19.3%) participants indicated that they were aware of any other organisations or professionals outside of school that could have been sources of information or help surrounding IPPA when they were an adolescent. These participants listed one or more other sources including UK-based child safeguarding charities ($N = 10$), mental health charities and helplines ($N = 3$), youth clubs ($N = 1$), women's charities or refuges ($N = 3$), NHS/healthcare professionals ($N = 3$), police ($N = 4$), friends and family ($N = 1$) and 'other' (e.g. contact information provided at the end of a TV show or at school; $N = 4$).

Finally, to gather any further information on participants experiences of learning about IPPA, participants were offered the opportunity to provide further information as an open-ended qualitative response (item L4). A summary of these responses is presented in Table 1.6.

Table 1.6

Summary of participants qualitative responses to the prompt ‘Feel free to tell us more about your experiences of learning about psychological abuse in intimate relationships’ (item L4).

Theme	Codes	Count of participant responses	Example quotes
Delivery of school IPPA education	Delivered in a specifically aligned subjects	4	“We learned about it in my psychology lessons which I did for 2 years in sixth form. I also think we may have touched on it when we did our lessons on sex education in year 9/10.”
	Delivered in a specific week or day (e.g. PSHE day)	2	“We had a week in school where we talked about it, I think it was every year near the end of the academic year, it was quite touch and go.”
	Part of a lesson about other forms of abuse	2	“... It was quite brief and was a small part of a wider session on relationships.”
Type of information provided	Repetitive information	2	“... It does have to be noted that by year 11, it all became very repetitive and tedious meaning that most people would not be bothered enough to listen to what is being taught and discussed.”
	Lack of detail / Brief information only	6	“... I remember the lessons being very basic, it didn’t go into any details about what abuse or consent looked like. They also refused to speak on it regarding LGBT people.”
	Detailed/comprehensive information was provided	3	“... We had workshops, and they went into detail and also showed a few videos to add more context and perspective.”
	Not taken seriously by students	2	“we were kids, so we didn't really take the sessions seriously to be honest. I think there was nothing wrong with the sessions just we didn't take the learning seriously.”
	Taught about signs of IPPA	2	“I felt it was enlightening as it made me gain an understanding of how psychological abuse can occur and that it can happen to anybody. I like how we were also taught tell-tale signs such as the abuser trying to isolate you from friends and family.”
Help-seeking	School viewed as a source of support	2	“...It was apparent that the school would help us in different situations.” “... [teachers] would provide contact details and people who could help us if we faced psychological abuse...”
Learning outside of school	Learnt about IPPA from family, friends, or media	1	“... Via my family friends’ network. Self-study. Tv? E.g. a character in EastEnders being in an abusive relationship

7.2.4b Research Question 2 | What are Black women's perceptions of current IPPA interventions and education, and do Black women believe changes are needed to improve IPPA education for Black adolescent girls?

Table 1.7 presents a series of Pearson's r correlation coefficients exhibiting how satisfaction with the IPPA education received at school and from parents relates to views on how IPPA education should be delivered, participants beliefs about the role that schools and parents should play in IPPA education (items F11a-j) and beliefs about the extent that IPPA education can help to reduce victimisation amongst adolescent girls (items F11k-l).

Table 1.7

Pearson' R Correlation displaying relationships between survey items F11a-c, F11e, F11k-l and satisfaction with IPPA education received at school and home (L3d, S10).

	Satisfaction with IPPA education received at school and from parents (L3d, S10)	
	School ($N = 40$; M satisfaction = 3.08 ; $SD = 1.07$)	Parents ($N = 118$; M satisfaction = 2.19 ; $SD = 1.14$)
	r	r
Participants support for:		
F11b IPPA interventions for Black adolescent girls outside of school	.29	.21
F11c Parents should teach their adolescent children about IPPA	-.08	.04
Participants support for:		
F11a Specific IPPA interventions for Black adolescent girls in school	-.05	.08
F11e Schools should teach adolescents about IPPA	-.15	-.08
Participants support for:		
F11k Providing adolescent girls with IPPA education reduces the victimisation of adolescent girls	-.27	-.03
F11l Providing all adolescents with IPPA education reduces the victimisation of adolescent girls	-.30	-.11

Note. [Dark shades = Moderate correlation coefficients $-.3$ to $-.5$ and $.3$ to $.5$; Light shades = Weak correlation coefficients 0 to $-.3$ and 0 to $.3$]. Orange shades represent positive correlations, green shades represent negative correlations.

Overall, 69.7% ($N = 83$) of Black women agreed that there should be specific IPPA interventions in schools for Black adolescent girls and 83.2% ($N = 99$) agreed that there should be specific interventions outside of school for Black adolescent girls. A weak positive exploratory correlation was found such that greater support for IPPA interventions outside of school for Black adolescent girls was associated with participants having greater satisfaction with the IPPA education received from their own parents ($r = .21$) and at school ($r = .29$).

Table 1.7 shows negative correlations, whereby lower satisfaction with IPPA education received at school related to stronger beliefs that providing adolescent girls ($r = -.27$) and all adolescents ($r = -.30$) with IPPA education, would mitigate girls experiencing IPPA. This suggests that even when participants were unsatisfied with their own education experiences, participants still saw the value of IPPA education and believe that educational interventions overall – whether provided only for girls or all adolescents – would effectively reduce IPPA.

In regards to who women believed should be involved in teaching adolescents about IPPA, Table 1.8 displays the number of participants who believed that parents, schools, GPs, nurses, charities, and social workers should be involved, as well as their beliefs about whether teachers and parents should receive more training on IPPA.

There was generally strong support from participants for parents, schools, social workers, charities, and healthcare professionals to play a role in teaching adolescents about IPPA. This belief was most pronounced for schools/colleges (98.6% agreed or strongly agreed) and parents (96.6% agreed or strongly agreed) and least, but still high, for GPs (71.5% agreed or strongly agreed). The vast majority of participants also agreed or strongly agreed that parents ($N = 106$; 89.1%) and teachers ($N = 109$; 92.4%) should receive more training on IPPA.

Table 1.8

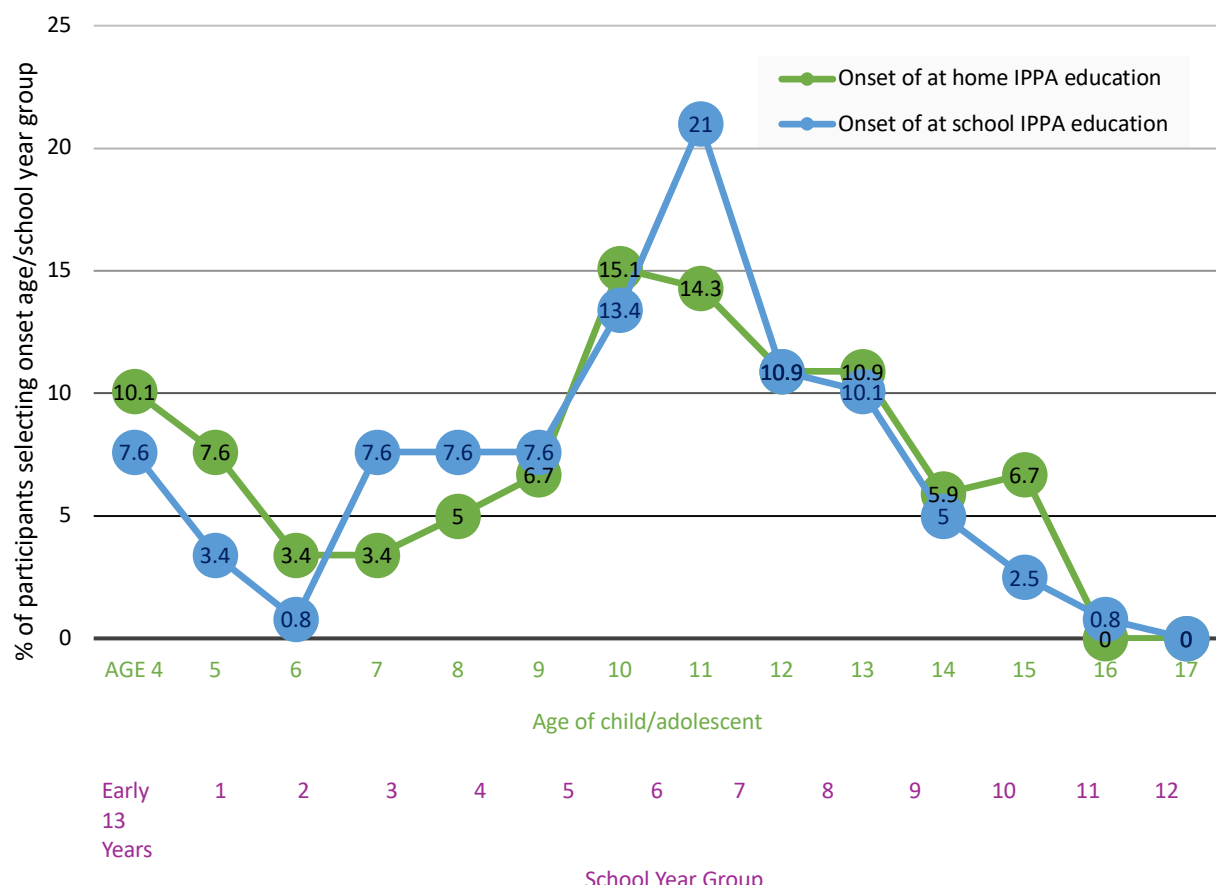
Participants views on the role of parents, schools and practitioners in IPPA education (Items F11c-j).

Statements	Participant responses						Total
	1 Strongly Disagree	2 Disagree	3 Neither	4 Agree	5 Strongly Agree	No response	
Who should teach adolescents about IPPA?							
F11c Parents/carers	2 (1.7%)	0 (0%)	2 (1.7%)	37 (31.1%)	78 (65.6%)	0	119
F11e Schools/colleges	1 (0.8%)	1 (0.8%)	2 (1.7%)	28 (23.5%)	87 (73.1%)	0	119
F11i GP's	4 (3.4%)	9 (7.6%)	21 (17.6%)	29 (24.4%)	56 (47.1%)	0	119
F11j Nurses	2 (1.7)	9 (7.6%)	15 (12.6%)	36 (30.3%)	57 (47.9%)	0	119
F11h Women's, children's, and abuse charities/organisations	1 (0.8%)	0 (0%)	5 (4.2%)	31 (26.1%)	82 (68.9%)	0	119
F11g Social Workers	1 (0.8%)	3 (2.5%)	9 (7.6%)	24 (20.2%)	82 (68.9%)	0	119
Who should receive more training about IPPA?							
F11d Parents/carers should have training on psychological abuse in intimate relationships.	1 (0.8%)	1 (0.8%)	11 (9.2%)	39 (32.8%)	67 (56.3%)	0	119
F11f Teachers should have more training on psychological abuse in intimate relationships.	1 (0.8%)	1 (0.8%)	7 (5.9%)	29 (24.4%)	80 (67.2%)	1 (0.8%)	119

Finally, when asked which age IPPA education should be introduced for Black girls, participants' responses varied widely as shown in Figure 1.2. Most participants believed that IPPA education at school should begin during year groups 5 and 6 (M Year Group = 5.9; SD = 2.9) and IPPA education at home should start between ages 9 and 10 (M Age = 9.9; SD = 3.3) (Figure 2). There is clearly synergy surrounding the onset of formal (school) and informal (parents) IPPA education as the school year group 5 typically corresponds with the ages 9 to 10 in England.

Figure 1.2

Participants views on the onset age of IPPA education at school and the onset age of IPPA education from parents.



7.3 Discussion

This exploratory study intended to uncover a greater understanding of Black women's retrospective accounts of learning about IPPA as adolescents, their views on these learning experiences, and their views on how IPPA education should be delivered both in and outside of school for current and future adolescents. Overall, it was found that 66.4% of women had not explicitly learnt about IPPA at school and 64.6% were dissatisfied with the level of information about IPPA that had they received from their parents. Several participants expressed their support for teachers and parents to receive training about IPPA, to better equip them to educate current and future generations of adolescents about IPPA. Implications are

discussed, including consideration for the involvement of alternative sources (e.g. social workers and healthcare professionals) in IPPA education.

Regarding our **first research question** (*What are Black women's experiences and views of learning about IPPA as adolescents?*) the results indicate an overall absence of formal IPPA education at school for the majority of Black women in the sample (66.4%) and a general dissatisfaction amongst participants with IPPA education received at home from parents (64.6%). Considering the average age of participants ($M = 31$; $SD = 11.1$), the latest compulsory RSE curriculum (DfE, 2019) would not have been in effect during most participants' time at school. As discussed in Chapter 5 Part 2 (How Cultural and Societal Content Impacts IPPA Education), prior to 2020, education about non-physical forms of abuse in intimate relationships (including IPPA) was not compulsory in schools in England and Wales (DfE, 2019; DfEE, 2000). This may explain why many women in this research sample had therefore not received IPPA education at school at all. At the time of writing this study's discussion section, I hope that IPPA education is already being more widely taught in schools since the introduction of the latest RSE guidelines (DfE, 2019), which is empirically investigated later in Study 3 of this thesis, where the learning experiences and effectiveness of IPPA education amongst a sample of current adolescents (age 16-17) is explored.

In line with past research into relationships and sex education (but not specifically IPPA education which has not previously been researched) (Blunt-Vinti, Stokowski & Bouza, 2018; Evans, Widman & Goldey, 2020; Min et al., 2019; Nurgitz et al., 2021; Rutledge et al., 2011; Rye et al., 2014), the current study found that participants who were more satisfied with IPPA education received at school also rated their current level of understanding about IPPA higher.

Numerically speaking, those who received education from a specialist educator at school (e.g. a PSHE teacher or guest speaker) were also more satisfied with their school IPPA education in comparison to those who did not have a specialist educator. Nevertheless, only

47.1% of participants who received lessons from a specialist were satisfied. As discussed in Chapter 5 Part 2 (How Cultural and Societal Content Impacts IPPA Education), there is growing evidence that despite RSE guidelines (DfE, 2019), many teachers who are tasked with teaching RSE are doing so without an adequate level of specialist training leading to many teachers reporting that they do not feel confident in their ability to deliver RSE, having a knock on effect on the quality of lessons delivered (Cumper et al., 2023; Hilton, 2021; Moskovic et al., 2008; Walker et al., 2020; Westwood & Mullan, 2007; Wilder, 2018). Receiving more comprehensive sex and relationships education from equip educators has previously been linked to greater knowledge and positive sex and relationships behaviours in several studies (e.g Baños et al., 2019; Blunt-Vinti et al., 2018; Evans et al., 2020; Ko & Chung, 2014; Min et al., 2019; Nurgitz et al, 2021; Rutledge et al, 2011; Rye et al., 2014). As such the relevantly low (47.1%) number of Black women in the current study who had lessons with a specialist educator and were satisfied with their IPPA, does not provide strong enough evidence to suggest that having a specialist educator was critical to receiving satisfactory IPPA education within this study's sample group. Similarly, women who recalled receiving multiple or regular lessons where IPPA was discussed were more satisfied with their school IPPA education in comparison to those who did not have multiple or regular lessons. However just 50% of those who received regular IPPA lessons were satisfied with their IPPA education at school, again making evidence for the impacts of these variable fairly mixed.

Overall, simply having multiple lessons or engaging with a specialist educator does not unanimously correspond with greater satisfaction according to the findings of this study. There presumably may be other factors at play in determining satisfaction levels among this sample. Examples of alternative factors that may have contributed to participants' satisfaction with their school IPPA education includes the teaching pedagogy used in the class room (e.g. use of interactive teaching techniques, audio-visual activities and role-playing may be more satisfied

that a lecture style lesson - Lee & Lee, 2019) and the extent that participants felt represented in the educational materials used by their teachers/educators (Abbott et al., 2015; Haggis & Mulholland, 2014; Setty & Dobson, 2023). Both factors were not assessed in the current study.

Finally, the results of the study showed that during their lifetime most Black women had primarily learnt about IPPA from informal sources such as social media (65.55%) and personal research (68.91%). This aligns with previous literature, which shows that young people often learn about RSE-related topics (e.g. sex and dating) using media and personal research (Rutledge et al., 2011). Whilst personal research and social media, particularly during adolescence, are subject to scrutiny around the reliability and trustworthiness of these sources (e.g. due to sometimes false or misleading content available online - Hillman, 2021; Hollis et al., 2022; Paterson et al., 2019), the use of social media and personal research to learn about intimate partner violence is not ultimately inherently harmful. As past research highlights, personal research can be a useful alternative source of information, especially when formal sources are not otherwise available (Kimmel et al., 2013; Stewart et al 2021) or not appropriately inclusive of the young persons' personal diverse experiences (Abbott et al., 2015; Haggis & Mulholland, 2014; Hobaica & Kwon, 2017; McNeill, 2013; Stewart et al 2021). Since these sources are already being used by adolescents, there is a potential for sources like social media to be utilised even more to deliver IPPA information, perhaps through increased IPPA content being shared by reputable charities or through school social media pages.

Given the already widespread use of social media as a learning tool (as found in this study, as well as countless other studies – e.g. Hillman, 2021; Hollis et al., 2022; Paterson et al., 2019), I also recommend that wider access to interventions are needed to support young people to learn how to critically analyse and deduce trustworthy sources of information about IPPA (and RSE topics more generally) online and advocate and for further research to be

conducted into how online resources can be diversified to encompass various cultural lenses in order to provide accessible and representative advice for more adolescents, including Black adolescent girls.

In answering our **second research question** (*What are Black women's perceptions of current IPPA interventions and education, and do Black women believe changes are needed to improve IPPA education for Black adolescent girls?*) the responses provided by Black women provided insights on beliefs about how IPPA education should be delivered (by who and when) based on participants reflection on their own experiences of receiving (or not receiving) IPPA education during their own adolescence.

While participants' individual responses varied from as young as four years old to as old as 16 years old for when IPPA education should begin, on average, women reported that 9 to 10 years old was viewed as the best age for Black adolescent girls to start learning about IPPA both in school and at home from parents. Whilst there is no evidence of research into the age appropriateness of education about IPPA specifically, there are several past studies which explore age appropriateness for delivering sex education (e.g. Bourton, 2006; Fentahun et al., 2012; McGinn et al., 2016; Mueller et al., 2008; Somers & Eaves, 2002; Tripathi & Sekher, 2013), which often point to the importance of consideration of a child's maturity and developmental stage when deciding when to introduce sex education in schools. There is limited direct evidence showing the negative impacts of teaching sex education *too early*, with many studies instead highlighting the benefits of sex education before a young person becomes sexually active (e.g. more likely to practice safer sex, more likely to delay first sexual encounter) (Kim et al., 2023; Van Leent et al., 2023). However, more generally literature acknowledges correlations between exposing children to information such as sexual content that they are not developmentally ready or mature enough for and prematurely taking away a

child's sense of 'innocence' around potentially upsetting content (McGinn et al., 2016), and the child potentially developing distorted views about sex (Adarsh & Sahoo, 2023).

According to current guidelines from the government (DfE, 2019), students are expected to have been taught about domestic violence, coercive control, unacceptable relationship behaviour, and the negative impacts of unhealthy relationships on mental wellbeing during secondary school (typically age 16) (DfE, 2019). Comparatively children are expected to have learnt about topics like the characteristics of a healthy family life, how to recognise unsafe family relationships and how to report concerns or abuse by the end of primary school, justified by assessments of what is deemed to be appropriate at primary school age versus secondary school age. Nevertheless, given that IPPA acts (e.g. manipulation, coercion and belittling language) can also be perpetrated against children from a young age outside of intimate relationships (e.g. peer bullying), which children are typically taught about from as early as primary school (DfE, 2019), teaching IPPA in the context of intimate relationships to primary school students may not be too implausible.

This may indicate that IPPA could potentially be taught earlier than sex education, as it is already possible to discuss similar issues in the context of friendships and bullying at a younger age. In addition to this, as part of the RSE guidelines (DfE, 2019) each school is given the flexibility to adjust when they teach particular topics to the students, based on the specific needs of the school. For instance, if one school noticed that students in year group five (age 9-10) were sharing indecent images to combat this issue, the school could use their discretion to teach their year five students about the wrongness of sharing indecent images, in an age-appropriate manner, earlier than another school in the same local area. There is a need for future research to potentially explore differences in age appropriateness for teaching children about different forms of intimate partner violence, as well as further investigation (perhaps longitudinal research) into the impacts and benefits of learning about IPPA at different ages.

Most participants were supporters of IPPA education and interventions for Black adolescent girls as well as all adolescents, with the majority of participants believing that educational interventions, whether provided for only girls (85.71%) or all adolescents (87.39%), would effectively reduce IPPA victimisation. These perceived positive effects of RSE related education is echoed and the general consensus across most literature on this topic which finds that relationships education can have protective and preventive benefits for the learner, including reduced experiences of intimate partner violence (Lundgren & Amin, 2015; Meyer et al., 2023; Niolon et al., 2019; Pound et al., 2017; Simpson et al., 2017).

Additionally, most participants supported the idea of there being specific IPPA-related interventions in schools (69.7%) and in communities (83.2%) for Black adolescent girls. This may perhaps be linked to participants believing that specific interventions for Black adolescent girls would be delivered in a culturally competent manner which takes Black adolescent girls needs into account. Nonetheless, this is a presumption based on literature previously explored in Chapter 5 Part 2 (How Cultural and Societal Content Impacts IPPA Education), which suggests that relationships and sex education can often suffer from not being inclusive of students diverse needs (e.g. Abbott et al., 2015; Haggis & Mulholland, 2014; Setty & Dobson, 2023) and can also sometimes perpetuate stereotypes about Black people (e.g. Hoefer & Hoefer, 2017; Massicotte, 2022; Mulholland, 2021; Rothmüller, 2018; Whitten, & Sethna, 2014). Further explanations for why some participants support the idea of specific targeted interventions and why some do not would need to be further investigated before drawing these conclusions.

Most participants agreed that schools and parents should play a role in teaching adolescents about IPPA, and that both parties should receive more training on this subject. As seen in past literature, several studies recognise how a lack of adequate sex and relationships education training for some teachers, directly links to them feeling less confident and less equipped to

deliver robust RSE lessons in schools (Cumper et al., 2023; Hilton, 2021; Walker et al., 2020). A number of recent studies, which explore teaching of the current RSE guidelines in England and Wales, call for increases teacher training in order to effectively implement the RSE guidelines (Greenan, 2019; Hilton, 2021; Wilder, 2018).

Given that 89.1% of women agreed that parents should also receive training on IPPA, the findings of Study 1 can also be used to support the advancement of interventions which focus on also providing parents with training in order to improve the quality of IPPA education delivered at home. These findings align with aspects of past literature explored in Chapter 5 Part 2. For instance, past research indicates that parents are less likely to engage in meaningful conversations about topics like sex, intimacy and relationships with their children if the parent themselves has limited knowledge (Shin, Lee & Min, 2019), does not feel equipped to appropriately facilitate conversations about these matters with their child (Shin, Lee & Min, 2019; Wilson et al., 2010) or when parents feel embarrassed discussing these topics with their children (Wilson et al., 2010; Kropiunigg et al., 2006), therefore justifying the need for parents to receive support, perhaps in the form of training, to increase the likelihood of them teaching their children about these topics at home. Some studies do indeed show evidence of parents having a desire to learn about sex education from experts (Shin et al., 2019) and strategies for how to discuss these topics with their children (Koren, 2019; López et al., 2014; Mulholland, 2023; Newby et al., 2009; Rudoe & Ponsford, 2023; Shin et al., 2019). A number of intervention studies in fact also provide evidence that training for parents on sex education in particular does in fact increase their knowledge and confidence to speak with their children about sex (e.g. Akers et al., 2011; Baku et al., 2017; Kamala et al., 2017; Newby et al., 2009; Shtarkshall et al., 2007), indicating some merit in the suggestion for parents to receive IPPA training also.

Finally, in this study I found wide support from Black women for the use of healthcare professionals, charities, and social/youth workers in educating adolescents about IPPA. This indicates that participants believed that IPPA education does not need to be reduced to only the responsibilities of schools and parents. This is most closely echoed by findings from Coleman and Testa (2007), whose research with adolescents in London found that amongst Black adolescent girls in their sample ($N = 710$), 64% stated that they would prefer to learn about sex from ‘other’ sources like the internet, youth workers, doctors, church, television, and from their own intimate partners, helping to draw the conclusion that Black adolescent girls may benefit having access to RSE (and more specifically IPPA education) from a range of sources and varied practitioners, beyond school. These findings provide support for a further triangulation of adolescent IPPA education including encouraging healthcare professionals and social workers to take a further role in IPPA education. Future research may wish to further explore the potential impact of each of these sources for Black adolescent girls IPPA education in greater detail than has been achieved in this thesis, in order to develop, well-informed approaches to incorporating varied practitioners into the delivery of IPPA education and RSE as a whole.

Overall, Study 1 brings attention to how Black women had learnt about IPPA as a specific type of intimate relationship abuse during adolescence (age 10-19) and Black women's recommendations for improving IPPA education for current and future adolescents. These results may be useful to those involved in the research, creation, and implementation of RSE related education and interventions, including schools and the Department for Education. It is clear from the results presented that the presence of the voices of Black women in England helps in understanding how both formal and informal IPPA and RSE education can be improved to equitably meet the needs of Black adolescent girls and potentially improve IPPA education for all young people. By providing an illustration of how intersectionality can be used to

approach research into RSE improvement, this paper also contributes to advocating for the application of intersectional frameworks in reviewing how IPPA and other RSE topic are taught in schools, as previously recommended by the End Violence Against Women Coalition (EVAW, 2023).

7.4 Methodological Limitations

I recognise some limitations of Study 1. This includes the limited generalisability of the findings presented. Based on a sample size of 119 women, I acknowledge that the generalisability of these findings is restricted to women who share the characteristics and experiences of the sample included. Furthermore, given the varied sample recruitment methods used, I was unable to control for extraneous variables such as distractions in participants testing environments (i.e. when completing a survey surrounded by others at a public event versus completing the survey quietly at home). Whilst the data collected did not necessarily indicate any differences between women who completed the research in different settings, this is a consideration to keep in mind in future replications of this study, whereby pre-emptive steps should be taken to maximise opportunities to achieve the desired sample size without needing to use such varied recruitment methods.

I additionally recognise the absence of control of other potentially influential intersecting characteristics, such as socio-economic status, family structures and variations between different African and Caribbean cultures which may have impacted each participants responses in different ways. For instance, as discussed in Chapter 5 (Race, Culture and Societal Context), poverty is predictive factor known to increase vulnerability of experiencing intimate partner violence (Maldonado et al., 2022; Rennison & Planty, 2003). Similarly, cultural differences in attitudes towards wife-beating (Lawoko, 2008; Tran et al., 2016), gender inequality (- Sardinha & Catalán, 2018; Tran et al., 2016) and beliefs about gender roles

(Fakunmoju and Bammeké; Uthman et al., 2009) can alter the rates and which intimate partner violence occurs within a particular community and discussed within families and communities. With appropriate funding, In the future I hope to further study with a larger sample sizes and larger comparable groups with multiple intersecting identities.

Lastly, the use of mainly closed questions in this research can also be criticised. The responses provided in this study largely offer a surface level insight steered by the question response options provided to participants. Whilst the findings presented in this study numerically quantify aspects of women's IPPA learning experiences and their views on how IPPA education should be delivered, ultimately, these results are missing the richer details and meanings behind Black women's responses. However, this limitation of closed questions was pre-empted prior to conducting the research. In line with inspiration from other lived-experience studies (e.g. Cardenas, 2023; Few, Stephens, & Rouse-Arnett, 2003), I planned to overcome this issue by also conducting in-depth focus groups and interviews to explore the same research questions in Study 2.

7.5 Conclusion

The survey results reported in this study build on the body of literature on intimate partner violence education/RSE during adolescence. This paper draws a specific interest on the IPPA learning experiences of Black women in England during their adolescence, both through formal and informal sources. Overall from this study, we learn that 66.4% of women had not explicitly learnt about IPPA at school and 64.6% were dissatisfied with the level of information about IPPA that had they received from their parents. Black women typically believed that IPPA both at school and at home should begin during year groups 5 and 6 / between ages 9 and 10. The results of this study should be considered in developing education and intervention provisions surrounding IPPA and unhealthy relationships education for adolescents, and more specifically,

for Black adolescent girls. As discussed, practical implications (i.e. recommendations for when to deliver IPPA education in schools, offering more teacher and parent training on IPPA, involving GP's and nurses in IPPA education, and delivering targeted IPPA education for Black adolescent girls in community spaces outside of school) can be taken from this study to improve and develop adolescent IPPA education. These recommendations, and the findings of this empirical study overall may be beneficial for schools and colleges, relevant charities, adolescent and healthcare practitioners and for informing local and community intervention programmes to improve IPPA education with the voices and experiences of Black women and girls now included in the conversation.

Study 2

How We Didn't Learn About Psychological Abuse:

Interviews and Focus Groups with Black Women.

8.1 About Study 2

Study 1 and Study 2 were developed and conducted simultaneously, with the intent of studying the same research questions with the same demographic of participants, however using different methods of gathering data. As such the theoretical basis and background literature, relevant to Study 2 is the same as that presented in Study 1. Study 2 therefore builds on the findings of Study 1 by presenting Black women's reflections on their experiences of learning about IPPA as an adolescent, both in and outside of school shared, during focus groups ($N = 14$) and interviews ($N = 11$). As discussed in Chapter 5 Part 2 (How Cultural and Societal Content Impacts IPPA Education), as IPPA education can occur both formally (e.g. at schools, in community groups) and informally (e.g. conversations with parents or friends), this study is designed to capture IPPA education experiences across a variety of settings. Black women are again asked to share their recommendations for how to improve IPPA education for current and future generations of adolescent girls. Using in-depth focus groups and interviews with Black women, this study gathers retrospective accounts of learning experiences to answer the following research questions:

1. **Research Question 1** | What are Black women's experiences and views of learning about IPPA as adolescents?
2. **Research Question 2** | What are Black women's perceptions of current IPPA interventions and education, and do Black women believe improvements are needed to support Black adolescent girls?

8.2 Methods

8.2.1 Participants

In total, 25 women were recruited to participate in semi-structured interviews ($N = 14$, M age = 26.42, $SD = 12.88$) or focus groups ($N = 11$, M age = 26.73, $SD = 4.38$). All 25 interview and focus group participants also completed the survey exploring IPPA educational experiences previously reported in Study 1.

Again, all participants were required to be women or to have identified as a girl during adolescence (age 10 to 19 years old); aged 18 or over; to identify as Black or Black mixed ethnic background; and to have received education in a school or college in England for a minimum of twelve consecutive weeks (approximately one school term). These inclusion criteria enabled me to explore the research questions and learn about Black women's IPPA educational experiences during adolescence, within the English educational context. Participants' eligibility to participate was assessed through the online consent form, whereby ineligible participants were automatically thanked for their interest but were unable to proceed. A breakdown of sample demographic information is shared in Table 2.1.

Table 2.1

Sociodemographic Characteristics of Participants

Characteristics	Full Sample		Focus Groups		Interviews	
	n	%	n	% within method	n	% within method
Age						
19	2	8.	1	9.1	1	7.1
20 – 24	6	24	2	18.2	4	28.4
25 – 29	9	36	4	36.4	5	35.7
30 – 35	6	24	4	36.4	2	14.2
61	1	4	0	0	1	7.1
No response	1	4	0	0	1	7.1
Ethnic background ^a						
Black African	7	28	3	27.3	4	28.6
Black Caribbean	10	40	4	36.4	6	42.9

Black African and Caribbean	4	16	2	18.2	2	14.3
Mixed Black African	1	4	1	9.1	0	0
Mixed Black Caribbean	1	4	1	9.1	0	0
Other Black mix	1	4	0	0	1	7.1
No response	1	4	0	0	1	7.1
Sexuality						
Heterosexual/Straight	20	80	8	72.7	12	85.7
Bisexual	3	12	2	18.2	1	7.1
Homosexual	1	4	1	9.1	0	0
Prefer not to say/No response	1	4	0	0	1	7.1
Currently residing in England						
Yes	23	92	10	90.9	13	92.9
No	1	4	1	9.1	0	0
No response	1	4	0	0	1	7.1
School/college year groups educated in England ^b						
All year groups from year 5	19	76	9	81.8	10	71.4
Year 13 only	5	20	2	18.2	3	21.4
No response	1	4	0	0	1	7.1

^a Reflects participants who also identified as Black British within each ethnic background group.

^b Grouped categories in response to the demographic question: *In what year groups were you educated at a school or college in England for at least 12 consecutive weeks? Please select all applicable.*

All participants were recruited using convenience and snowball sampling. Prospective participants responded to an online poster accompanied by descriptive text and a link to focus group and interview registration forms hosted on Qualtrics (www.qualtrics.com; Qualtrics Provo, UT). The poster was shared online (on LinkedIn, Facebook, Instagram, and Twitter) and was re-shared by other individuals and organisations (including an abuse charity, a women's equality charity, and a therapy network). All participants received a Love2shop gift vouchers. Focus group participants also received a tote bag, candle, book holder, accessories and key chains from UK based Black-owned businesses.

This study was funded by the Public Engagement Fund at Brunel University London. Research protocols were designed to adhere to APA and BPS ethical guidelines and were reviewed and

approved by the Brunel University College of Health, Medicine, and Life Sciences Research Ethics Committee.

8.2.2 Materials

Participant Information Sheet and Consent Form. A digital participant information sheet (including information about the study such as the study aim, procedure, participant protection measures and researcher contact information) and a consent form (assessing eligibility to participate and obtaining informed consent) were created.

DEMOGRAPHIC SURVEY – A demographic survey was designed to assess key participant characteristics, including age, ethnic background, and sexuality. Participants were also asked if they currently lived in England and to clarify which school and college year groups they were in when they received education at institutions in England for at least one full school term.

Hosting Platforms and Locations. The participant registration, information sheet, consent form, demographic survey and debrief letter were all hosted on www.qualtrics.com (Qualtrics Provo, UT). The latter four were also available as physically printed copies for in-person focus groups. Two focus groups were conducted in person—one at Brunel University, London, and another at a hired space in Central London. In-person focus groups were audio recorded using a dictation device. Interviews were hosted online using Zoom Video Communications software and recorded using Zooms built-in recording and auto-transcription features. All recording and auto transcriptions were deleted, after the researchers had completed transcription consolidation and pseudonymisation of transcriptions.

Keyword Definitions Sheet. The same page of definitions presented in Study 1 (Table 1.2, page 159) were provided at the beginning of the session to ensure participants were familiar with key terminology related to the study. Definitions of adolescent/adolescence, psychological

abuse, intimate relationships, intervention, culture and Personal, Social, Health and Economic Education (PSHE) were displayed. For online semi-structured interviews, definitions were presented using the screenshare function on Zoom. For in-person focus groups, definitions were presented on a projected screen and printed copies were provided.

Semi-Structured Interview and Focus Group Schedules. For this study a semi-structured interview and focus group schedule was developed (Table 2.2) based on the research questions being explored. Guidance on good practice for designing and conducting qualitative interview and focus group research methods was taken for various academic works, including using the same questions in both interview and focus group procedures to consistently measure the same constructs (Acocella & Catalidi, 2021; Gibson & Abrams, 2003; Morgan, 2018); the interviewer having a shared cultural connection with the participants (e.g. being a Black women who attended school/college in England) (Walton et al., 2022); empowering women to speak from their own perspectives about their own biographic experiences (Few et al., 2003); and being flexible with asking follow up questions based on the information shared by participants (Adams, 2015).

Both the focus group and semi-structured interview schedules were structured around three discussion sections. **Discussion 1: Formal Education** exploring participants' experiences of learning about IPPA at school; **Discussion 2: People Around You** discussing experiences of learning about IPPA from family, friends, and other influences in their community; **Discussion 3: Other Interventions** where participants were asked to share their awareness of sources of IPPA support and intervention outside of school. All discussion sections were the same across both focus groups and interviews.

Each discussion section began with an open-ended starting question such as *“Think back to your adolescence and the people around you—friends, family, online and in your community, for example. What impact do you think they had on your understanding of*

psychological abuse in intimate relationships at the time?”. This was followed by a series of additional follow up questions and prompts, such as *“Was the information useful?”* which could be used at the discretion of the researcher to gather further information from participants. Clarifying questions (i.e. “You mentioned... would you mind telling me more about this please?”) were also sometimes asked to further understand information shared by participants. Participants had the right to refrain from contributing to any discussion section or answering any follow-up questions they did not wish to.

Four academic colleagues reviewed all schedules to assess the quality of discussion prompts and the structure of sessions, providing feedback for amendments. This process was repeated until all colleagues were satisfied with the schedules created. I also tested the prompt questions with two other Black women prior to beginning the study and made amendments accordingly.

Table 2.2

Semi-structured Interview and Semi-structured Focus Group Schedule.

Discussion content	Interview Time Allocation	Focus Group Time Allocation
Discussion 1: Formal Education		
Starting question: Tell me about your experience of learning about psychological abuse in the context of intimate relationships, whilst you were in formal education. If you have not received education on this, why do you think that is?	15 minutes	35 minutes
Additional prompt questions: <ul style="list-style-type: none"> ▪ At what point in your education did you receive this education? ▪ Who was the source of this information? ▪ Was the information accessible? ▪ How satisfied were you with this education? ▪ Was this learning experience beneficial? Explain why? ▪ How did this learning experience make you feel? ▪ Were you receptive to the education delivered? ▪ Would you have wanted more or less education in school on this topic? ▪ What education would you have liked to receive? 		

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Discussion 2: People around you		
Starting question:	10 minutes	20 minutes
Think back to your adolescence and the people around you. Friends, family, online and in your community for example. What impact do you think they had on your understanding of psychological abuse in intimate relationships at the time?		
Additional prompt questions:		
<ul style="list-style-type: none"> ▪ What did they teach you? ▪ Was the information useful? ▪ Did you have access to the information that you needed at the time? ▪ Did you feel supported in the way that you wanted to be? ▪ Were you, or would you have felt comfortable speaking to this person about psychological abuse in intimate relationships at the time? ▪ What was it that led to you feeling able to have these conversations? ▪ How did these conversations come about? 		
<hr/>		
Discussion 3: Other interventions		
Starting question (Part A):	10 minutes	15 minutes
Tell me about any other interventions, services, organisations, or professionals that you were aware of at the time that could have offered support around psychological abuse in intimate relationships? For example, this could have been direct support, but also helplines, websites, and other sources of information that you were aware of.		
Starting question (Part B):		
Tell me about any services that you are now aware of, that you wish existed or were available during your own adolescence.		
Additional prompt questions:		
<ul style="list-style-type: none"> ▪ How did you learn about this other service? ▪ Was it helpful? ▪ Would you have recommended this to a friend? 		
<hr/>		

Debrief Letter. A debrief letter was provided at the end of the study. This included a reminder of participants' ethical rights and information about how their data would be used. Participants were also provided with a list of recommended charities and services to seek support if required and contact details for the researchers.

8.2.3 Procedure

Booking Procedure. After following the appropriate weblink from online research advertisements, participants were asked whether they were interested in participating in a focus group or interview, and then shown the participant information sheet and consent form. Prospective focus group participants were asked to select a session to attend from pre-scheduled dates. Interview participants were asked to list up to five possible dates and times to be interviewed. Within 72 hours, participants were emailed a booking confirmation with a focus group location or Zoom interview meeting joining details. A reminder email was sent to participants one week before their allocated session.

Semi-Structured Interview Procedure. One day prior to the interview, participants were emailed a link to resubmit the consent form and to complete the demographic survey. The consent form was resubmitted to ensure that participants were still happy to participate, considering the time gap between sign-up and the research session.

Interviews had a time allocation of 60 minutes, including time for introductory information, the three interview discussions, and comfort breaks.

Interviews opened with instructions about the structure of the session and a reiteration of relevant ethical considerations (e.g., confidentiality, right to withdraw, intended use of data) being shared. Key terms related to the study were then shared using the Zoom share screen function, which participants could request to see again throughout the session. For each discussion section open-ended starting question was asked for participants to provide an initial response, before any additional clarifying and follow-up questions were asked. At the end of the semi-structured interview, participants were thanked and emailed the debrief letter and remuneration immediately afterwards.

Focus Group Procedure. Two focus groups were held. One at a venue in Central London, attended by nine women ($N = 9$, M age = 28.1, $SD = 28.1$) and another at Brunel

University, London, attended by two women ($N = 2$, M age = 20.5, $SD = 2.1$). The initial intention was to recruit four to nine participants per focus group, aligning with past recommendations on focus group sizing (Breen, 2006; Nyumba et al., 2018; Bouchard & Hare, 1970). This was achieved for the London focus group, however for the Brunel University focus group where only two (out of five women who had registered to attend) turned up on the day. The decision to proceed with the focus group was made as both participants said that they were happy to proceed as a smaller group. As each focus group, as well as the semi-structured interviews used the same schedule and questions, I was confident that results from this smaller focus group would still be valuable and not necessarily impacted by the smaller focus group size when analysing the data alongside the other focus group and interview findings (Boddy, 2016; Toner, 2009).

Upon arrival at the focus group location, participants were greeted by a research assistant then asked to re-read the participant information sheet, recomplete a consent form and fill in the demographic survey before the research session began. Focus groups were approximately 120 minutes in duration. The overall procedure remained the same as the interview procedure described above, however, focus group participants were also asked to introduce themselves to the group at the start of the session, key terms remained accessible on a projected screen and on printed sheets throughout the session and participants had up to three minutes each for their initial response to each opening discussion question. Participants were also encouraged to view each discussion as an active conversation, meaning that participants could respond to each other's points. At the end of the focus group, participants were thanked and given a printed debrief letter and remuneration before departing the venue.

8.2.4 Data Analysis

All qualitative data collected from both focus groups and interviews were analysed and presented collectively, as both explored the same research questions and used the same discussion prompts. Inductive thematic analysis (Braun & Clarke, 2012; 2019) was used to identify latent and semantic codes and broader themes in the data set. The grounded theory practice of memoing was also deployed (Tie et al., 2019). An inductive thematic analysis approach was selected due to the study's exploratory nature and the potential novelty of the insights to be gathered. The intended intersectional characteristics of the sample and unique discussions conducted ultimately made it inappropriate to draw upon past published literature to take a deductive approach, largely as the views on Black girls and women in England on this topic have been underrepresented in research of this nature in the past (Vears, & Gillam, 2022). Table 2.3 describes the thematic analysis steps taken and how inter-rater reliability practices were ensured (Armstrong et al., 1997; McAlister et al., 2017).

Table 2.3

Inductive thematic steps used to analyse interview and focus group data.

Analysis Steps	Description of step
1: Familiarising oneself with data (transcribing)	Each researcher from the team of researchers working on data analysis from this study (team made up of one principal investigator and eight research assistants) listened to, then transcribed interview recordings. The number of interviews each research assistants transcribed varied, depending on the length of each recording. Focus groups were initially transcribed live (in real-time during the focus groups) by a research assistant, however recordings of the sessions were used to consolidate and check accuracy of these transcriptions. All research assistants then met to discuss the initial insights and reflections that came across in the transcripts that they had written up.

2: Generating initial codes	<p>Each discussion section (see Table 2.1) of the interviews/focus groups was allocated to two different research assistants for initial coding. Research assistants first independently read each participant's responses for their allocated discussion section, identifying initial codes that appeared in the data and listing these codes on a spreadsheet. Research assistants then met with their paired reviewers to compare and consolidate initial codes from their allocated discussion sections. Following this meeting, research assistants then separately conducted systematic line-by-line analysis. This consisted of reading each transcription in detail again and recording the line numbers that each code appeared on a spreadsheet. Research assistants then met again to compare their line-by-line analysis, discuss discrepancies, and consider additional codes that had emerged. 41 codes were agreed on (see Table 2.4).</p>
3: Searching for themes	<p>The entire team met to present and discuss the codes drawn from each discussion. The group identified codes which appeared in multiple discussion sections. Research assistants then thematically grouped codes which represented similar ideas into themes, using colour coding and tables to help this process.</p>
4: Reviewing themes	<p>The team then discussed the themes generated, explaining how each code fit into each theme and how each theme was relevant to the overall data set and research questions. The team shared examples of how each theme was represented in the transcriptions. Initial themes which did not have enough supporting extracts were discarded at this point. In conclusion, the team agreed to five themes containing 17 subthemes. These are presented in Table 2.4.</p>
5: Defining and naming themes	<p>With the themes decided, the team then discussed their interpretations of the overall meaning of each theme. Together, the team experimented with the wording of each theme title to encapsulate and consolidate the essence of each theme's meaning, eventually agreeing on the theme names and definitions presented in Table 2.4.</p>

6: Producing the report	The principal investigator finally used the line-by-line coded analysis to identify relevant rich extracts to represent each sub-theme and code presented in Table 2.4.
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8.2.5 Findings and Discussion

Through analysis of focus groups and interview transcriptions, 41 individual codes (e.g. indirect lessons, IPPA is covert, relationships are taboo + 38 more) were identified. These codes are grouped into 17 subthemes (e.g. School, friends, religious institutions, barriers to speaking out + 14 more), which are then clustered into five overarching superordinate themes:

- **What we did and did not learn** | Explaining what participants had learnt about IPPA as adolescents, who they had learnt about IPPA from (i.e. family, friends and media), gaps in their IPPA education, and the effectiveness/ineffectiveness of information that they received.
- **Impacts of culture and community** | Exploring how factors related to cultural norms, attitudes, family. Religion and race-gender stereotypes impacted participants' experiences of learning about IPPA during adolescence.
- **Outcomes of education** | Sharing participants' comments on the positive and negative impacts of their IPPA education experiences.
- **Help-seeking** | Discussing factors that participants indicated would have impacted their ability to seek help if they were faced with IPPA as an adolescent.
- **Future** | Sharing recommendations made by participants for how IPPA education should be delivered to current day and future adolescents.

Below, is a summary and analysis of the **five themes**, their *subthemes* and how they link to existing literature discussed in earlier chapters. To more systematically capture all themes, subthemes and codes, Table 2.4 is also provided from page 255, which outlines each of the 41 codes found with accompanying extracts for each.

8.2.5a Theme 1: What We Did and Did Not Learn

Theme 1 encompasses insights, in response from Black women being asked to share their experiences of learning about IPPA between the ages of 10 and 19. Participants shared how and where they learned about IPPA and their views on the effectiveness of these experiences. As the majority of women reported not learning about IPPA effectively, most discussed their beliefs about why IPPA was not taught or discussed with them during their adolescent years. Nearly all participants reported that as adolescents they were unaware of technical terms, such as psychological abuse or emotional abuse despite several women reporting that they had either witnessed or experienced this form of abuse themselves as adolescents, but did not have the awareness to label what it was at the time.

Several women suggested a causal relationship, suggesting that having a lack of IPPA education was related to them having an inability to identify IPPA or seek help when it occurred in their own adolescent and adulthood relationships. In some cases, women described how a lack of IPPA education also contributed to them perceiving IPPA as normal. This association between gaps in knowledge and normalised perceptions about abuse is seen in other intimate partner violence studies (Adler-Baeder et al., 2007; Antle et al., 2011; Gardner & Boellaard, 2007; Lundgren & Amin, 2015; Pomeroy et al., 2013; Pound et al., 2017; Simpson et al., 2017).

Theme 1 consists of five sub-themes: Home and Family, School, Friends and The Media, Misconceptions and Language.

Theme 1 Sub-theme 1 | *Home and Family*

A small minority of women recalled family members discussing aspects of domestic violence with them. Most women expressed that they had not explicitly been taught about psychological abuse from family but they explained how they sometimes **received drip-fed or indirect information** about IPPA (primarily from parents and older sisters). This was typically

in the form of cautionary advice on how they should expect to be treated in relationships or as a brief discussion off the back of seeing IPPA behaviours on a television show or discussing another family member's relationship. For instance Woman 8 explained:

Woman 8 *"With my mum, these things are so random. We might be watching something on TV, and my mum will start going off on one, and I'm just like, 'right, okay', and that makes me not want to listen because I feel like 'where this has come from?'. But with my sisters, we could be speaking on the phone, and I could be telling them about someone I'm speaking to, and they'll just be like, 'okay, well, be careful'".*

From Woman 8's extract we see some parallels with findings from Dennis and Woods's (2012) research into Black women's experiences of discussing sex with their mothers. In both their study and the current study, Black women commented on experiences of unplanned conversations, brief comments or indirect education provided by their mothers, which was sometimes triggered by a related topic appearing on television. Whilst some women in Dennis and Woods's (2012) research reported that these casual, unplanned conversations helped in facilitating comfortable conversations about sex, many of Dennis and Woods's (2012) participants also reported feeling that these conversations felt one-sided and offered little opportunity for girls to challenge the information provided by their mothers or to continue the dialogue to find out more detailed information. The current study did not garner enough extracts to thoroughly evaluate how useful Black women in England found these casual interactions where IPPA was discussed with their mothers and other family members, however it was generally found that Black women were unsatisfied with the IPPA education they received at home during adolescence (as is also supported in by study 1, where 64.6% of Black women reported being dissatisfied with the information about IPPA that they received from their parents). The usefulness of receiving drip-fed and indirect IPPA information should be

explored further in future studies with more participants to see exactly what kind of information is gained by adolescents during these conversations and the effectiveness of this method.

In the current study, when seeking explanations for why participants may not have directly and effectively been taught about IPPA at home, a number of women suggested that **their parents' own gaps in understanding about IPPA** limited their ability to teach their children about IPPA. This was commented on Woman 13 for example:

Women 13 *"My mum and my dad were going through things [relationship conflict and intimate partner violence], and I don't think they knew what they were going through themselves."*

This is echoed in a number of past studies, whereby a lack of knowledge on topics such as intimacy and sex has been found to be a barrier to parents providing education on these matters for their children, where the parent may feel too embarrassed or feel uninformed to provide this information to their child (e.g. Baku et al., 2017; Jerves et al., 2024; Newby et al., 2011; Koren, 2019; Shin et al., 2019).

Several women also discussed how **witnessing their mothers and aunts experiencing IPPA** and other forms of intimate partner violence contributed to them developing some awareness of what could be considered to be IPPA, however as this abuse was witnessed without any nuanced or critical discussions with adults (e.g. their parents) afterwards, this resulted in a number of participants perceiving **IPPA as a normal and acceptable relationship dynamic**.

Women 3 *"... You learn a lot by just watching your aunties. The majority of my aunties have actually been in what you would call quite violent or psychologically abusive relationships, and that was just normalised. It was just normalised to be treated badly by this figure and be there waiting and not be empowered enough to leave because the family would tell them to give him another chance.... when you're a child, no one talks*

about it, and so you just see it, and so you think that is how relationships should be and it goes unchallenged”.

Children witnessing and being exposed to abuse, or domestic violence is thoroughly known to have adverse impacts on a child. As discussed in Chapter 5 (Race, Culture and Societal Context), these impacts include both short and long term psychological, mental and behavioural difficulties (Doroudchi et al., 2023) such as PTSD symptoms (Levendosky et al., 2002), self-blame and parentification (Fortin et al., 2011) as well as depression and anxiety (Cho, 2018; Gomma et al., 2019).

Without any nuanced discussion or disapproval of the abuse witnessed, witnessing parental domestic violence may also indirectly increase the risk of later victimisation and perpetration when compounded with other risk factors. Traditional social learning theories (e.g. Bandura’s (1971; 1977) highlight how humans learn as a result of observing and repeating the behaviour of role models. However, witnessing abuse by itself does not cause one to become abusers or experience abuse; instead, the impacts of witnessing abuse should be taken into consideration with other risk factors, such as depressive symptoms and alcohol consumption (Costa et al., 2015; Forke et al., 2021; Madruga et al., 2017; Roberts et al., 2020; , 2016). Literature on the risk factors of becoming perpetrators of intimate partner violence (e.g. Costa et al., 2015; Forke et al., 2021; Roberts et al., 2020; Wilson, 2016), show that children exposed to abuse in the home may learn and regenerate maladaptive relationship behaviours in their future intimate relationships. Together with past literature, comments shared by participants in this study (see Table 2.4) help to form an understanding of how witnessing IPPA at home without appropriate education about IPPA in this sample seemed to lead to the normalising of IPPA, which in turn could increase the risk of perpetrating and accepting abuse.

Theme 1 Sub-theme 2 | *School*

For most participants, IPPA education offered to them at school was insufficient or absent. In fact, **92% (23 out of 25 participants) reported receiving no education at school about IPPA at all.** Literature generally shows that historically many young people have not receive comprehensive formal sex and relationships education (Ofsted, 2013; Rogow & Haberland, 2006; Selwyn & Powell, 2007; Waling et al., 2020).

These findings are also consistent with data presented in study 1, whereby across a sample of 119 Black women in England, 66.4% had not explicitly learnt about IPPA at school, and of the 33.6% who had, less than half (42.5%) were satisfied with the education received.

Women in the current study hypothesised that reasons for not being taught about IPPA at school was due to their **schools not recognising IPPA as serious** or important enough of a topic to cover at the time compared to other topics like sex and pregnancy prevention. Some participants also suggested that due to the **covert nature of IPPA**, it was not spoken about in general anyway in comparison to more overt forms of abuse such as physical abuse, naturally making it less likely to have been taught about in schools:

Woman 1 *“The culture at the time was focused on educating young adults about sex and prevention of pregnancy and maybe reducing STIs. There wasn't any emphasis in my education on psychological well-being.”*

Focus Group Woman 2.2 *“I wasn't really taught about psychological abuse. I think maybe because it wasn't seen as much as physical abuse or bullying. We're always taught not to bully and, to be nice and to share. However, psychological abuse is not a thing that is visible; it can't be seen, so maybe that's why it wasn't really spoken about when I was a teenager.”*

Again, given the average age of participants in the current study, Woman 1's and Focus Group Woman 2.2's experiences of receiving education at school which empathised sex and pregnancy, and not IPPA and relationship abuse, somewhat aligns with the trajectory of public policy in England, whereby up until 2019/2020 (DfE, 2019) it was not explicitly compulsory for schools across England to teach students about non-physical forms of intimate partner abuse such as coercive control (DfE, 2019; Department for Education and Employment [DfEE], 2000), and guidance for schools at the time placed a focus on sex and relationships education being in line with the biology national curriculum, where students learnt about puberty and reproduction.

On the other hand, a few women, particularly in the central London focus group, recalled learning about aspects of both physical (i.e. unwanted touching) and non-physical violence (i.e. upskirting/taking photos up girls skirts) at school, however this was usually in the form of a **one-off assembly** in response to another student at the school experiencing one of these issues. Unfortunately, participants reflected on how even when Black girls at their school had reported experiencing these forms of physical and non-physical violence at school, **these issues would only be addressed after a non-black student faced the same issue.**

Focus Group Woman 1.9 *"Abuse wasn't really brought up until year 9. Some boys pulled up Black girl's skirts and slapped their bums. Nothing happened until this happened to a White girl, and she broke down crying; then something was done about it, and we had an assembly. It was just so funny that although the Black girls raised it, and some of the Asian girls, it didn't mean anything to anyone until it was a White girl".*

The reality of such dismissal of Black students' experiences is increasingly documented (Carter-Andrews, 2019; Gadson, & Lewis, 2022; Johnson-Ahorlu, 2013; Kalu, 2021; McPherson, 2020; Cherng, 2017), where acknowledgement of school staffs' racial biases and stereotypes towards Black students, including adultification biases (Blake et al., 2011; Epstein

et al., 2017; González, 2018) help us to evidence failure on some practitioners part, where they may overlook adversities experienced by Black students and fail to afford Black children the same level of support, safeguarding and protection given to other students.

Theme 1 Sub-theme 3 | Friends

Most women directly or indirectly shared that IPPA was **unlikely to have been discussed amongst their friend and peer groups** due to their shared lack of knowledge and inexperience surrounding IPPA and intimate relationships at a young age.

Woman 9 *“I probably wouldn't have gone to my friends or my mum... My friends because we're all in the same boat [all have a similar level of experience in romantic relationships], so I'd probably go to the internet first and then go to my friends and ask what they think about the information”.*

Nonetheless some participants reported learning about some aspects of unhealthy relationship behaviours through **social learning by listening to and witnessing hardship in their friend's emerging relationship experiences.**

Woman 3 *“...I think two of my friends got out of two quite toxic situations, and that meant a group learning... You're like, 'oh, maybe that's not good... 'maybe I shouldn't accept that [either]'...”.*

Whilst focus group and interview participants shared that such discussions with friends would have been unlikely, in Study 1 of this thesis 43 out of 119 Black women (36.1%) surveyed indicated that they had learnt about IPPA from friends. In other research, we also see young people reporting friends being a source for learning about topics like unhealthy relationships at variable rates (e.g. 4% had learnt about unhealthy relationship from friends according to Sex Education Forum, 2024, and 71% in Stewart et al's, 2021 and 40% in Rutledge et al's, 2011

research). This mismatch in findings, suggest that further investigation is needed in future research to assess and seek clarity surrounding the role and usefulness of friends in Black adolescent girls' experiences of learning about IPPA.

Theme 1 Sub-theme 4 | *The Media*

A few participants shared how they had learnt about some aspects of IPPA independently from information obtained from the **internet and social media**.

Focus Group Woman 2.2 *"I got really interested in sociology and psychology, so a lot of things I was trying to figure out. I eventually started googling [issues like abuse] as a child, when we had Internet."*

Some discussed how growing up, the portrayal of IPPA behaviours (e.g. controlling and obsessive behaviours) as **acceptable or romantic in popular culture** (e.g. in novels and music) led them to view what could be considered as IPPA acts as normal.

Woman 9 *"I think particularly when it comes to media and movies, how relationships are depicted in movies, that classic romance, like, what was it? At school, we did [name of classic romance novel], and that's classed as a really great romantic story, but I was thinking, 'this guy is awful'! He's so controlling, so obsessive over this woman, but this is classed as a great romantic story, and we strive for this. Even in music and lyrics, how people speak and sing about each other... I'm sure that these things shape your idea of what relationships and abuse looks like, and regardless of what everyone says, you're going to be conditioned in some sort of way and it's going to have an impact on how you view things, and you might miss red flags because you think, that's OK, that's normal."*

These insights can be in part linked to works of Moss and colleagues (2022) and Jerald and colleagues (2016) as previously described in Chapter 2 Part 1 (Culture and Race) whereby greater exposure to stereotypes about women in media (e.g. music videos), appeared to link to having a greater acceptance of gender-based stereotypes amongst Black women. However, as the current study did not measure levels of exposure to stereotyping media nor delve much further into the role of the media during interviews and focus groups, it is therefore difficult to draw conclusions surrounding the impact of media on Black adolescents in England's views and learnings about IPPA. This would again, benefit from further exploration in future research.

Theme 1 Sub-theme 5 | *Misconceptions and Language*

The fifth sub-theme was formed to demonstrate how most participants had **misconceptions and gaps in technical language about IPPA**. Reasons given for these misconceptions and gaps also links to the other subthemes described within superordinate theme 1. For instance, gaps in their parents and friends' knowledge about IPPA may have contributed to participants having gaps in technical language to describe IPPA, and the covert nature of IPPA may have contributed to IPPA appearing to be a normal non-abusive relationship behaviours. Some women (e.g. Focus Group Woman 1.5) explained how family members would speak to them about aspects of IPPA without using technical language.

Focus Group Woman 1.5 *“Growing up my mum taught me about consent, abuse and cohesion but never said the word ‘psychological abuse’. Somethings she would think that she is teaching me good things, like ‘if they say mean things just ignore them’, not realising that she isn’t really defining it or giving examples.”*

Woman 4 *“I would say physical abuse and sexual abuse I was able to identify a lot quicker in my adolescence and I think it was because it was a lot more extreme in*

regards to how it comes across externally. I think because psychological abuse tends to be more intimate and passive and can be woven into someone's speech. Especially stuff like manipulation, it's often purposely built-in way where you can barely see it and barely recognise it. Especially when you're first being gaslit, for instance... I think that's why this type of education and understanding I didn't catch until later on, but sexual and physical abuse is something that's a little bit more in your face."

Some also recalled being aware of abuse but having misconceptions about technique language, as illustrated in Woman 11's comment:

Woman 11 *"I think when I was younger, the language was confusing to me. I felt like it was kind of a rite of passage in a way that sometimes people just get angry with each other, and then they call each other abusive. It didn't seem like there were boundaries about what was acceptable and unacceptable behaviour. I knew that abuse was something that is supposed to be unacceptable, but it was unclear exactly what criteria that was."*

Theme 2 | Impacts of Culture and Community

The second superordinate theme found, consists of four sub-themes reflecting most participants' views on how their culture and those in their cultural communities influenced their understanding of IPPA as adolescents. Culture, in the context of this research, was defined to participants as 'the ideas, customs, and social behaviour of a particular people or society' (Oxford Learners Dictionaries, n.d), whilst community referred to any significant influence outside of formal education, including religious institutions and activity clubs. All participants

appeared to discuss culture in terms of ideas, norms, and behaviours related to their African and/or Caribbean heritage.

Nuances in IPPA education based on culture and other intersecting characteristics were exhibited, where many participants described the influence of their cultural background and parents' heritage on IPPA education, whereby learnt norms, stereotypes, misinformation and religious messaging within their culture which appeared to impact the extent to which participants had learnt about IPPA and how they viewed IPPA (e.g. if IPPA was viewed as normal or acceptable).

Theme 2 Sub-theme 1 | Impacts of Cultural Norms and Values.

As similarly found in Bashir and colleague's (2017) study of Pakistani adolescent girls and Sridawruang and colleagues (2010) study of Thai adolescents and parents, the current study also found evidence to suggest that cultural taboos towards RSE-related topics (e.g. sex, sexuality and intimate relationships) in their household impacted the messaging that they received about such topics. In the present research, we see several participants describe how intimate adolescent relationships were **seen as taboo** in their households, with their parents typically viewing intimate relationships with boys as off the cards.

Woman 3 *"I think culture has such a massive impact because of the unspoken nature of [romantic relationships during adolescence]. You just don't talk about it. It is frowned upon. If you were talking about it, the first thing that would come out of your parents was, 'why are you talking to boys anyway? You should concentrate at school', not realising that maybe you're trying to tell me something here [i.e. trying to tell parents that you are experiencing abuse]."*

Several participants specifically noted that their parents did not believe that adolescent girls should be in romantic relationships or interested in boys, owing to their cultural beliefs or own

upbringing. Participants shared how these views held by their parents would have generally decreased the likelihood of effective discussions about IPPA in the household, as demonstrated in other studies which show that the taboo nature of young people's relationships leads to greater secrecy from adolescents surrounding their intimate relationships (Ragavan et al., 2018), limited informal education about relationships at home (Bashir et al., 2017) and leads young people seeking alternative sources (e.g. internet research) to learn about intimacy (Bashir et al., 2017).

Most participants also believed that in their culture, acts of IPPA, as well as psychological abuse outside of intimate relationships (e.g. between other family members), were somewhat **normalised** and therefore not something which would be discussed as an issue.

Woman 4 *"I feel like learning about psychological abuse was something that I just didn't get because it was so normalised in my culture to be psychologically abusive."*

Given the known risks related to sex and relationship taboos and the normalisation of abuse, and the impacts that these can have on the messaging delivered at home surrounding intimacy, relationships and abuse, this particular subtheme provides worrying, yet consistent insights. These insights help in establishing two clear action needed in order to improve IPPA education received at home by Black adolescent girls – *de-taboo* adolescent intimacy amongst parents and in cultures, and *de-normalise* IPPA within social and familial networks.

In addition to this, most participants expressed the belief that IPPA was not adequately discussed or taught in their households because of common **gender role stereotypes** in their culture. Participants especially referred to the expectation that girls and women were expected to put up with abuse and poor behaviour from male intimate partners.

Focus Group Woman 1.5 *“I think that culturally, especially for men, things get excused. Men are allowed to be that way because they're a man, and they are figuring it out. But women, we're nurturing, we're caring, we're strong, we've got to be the backbone of the family.”*

Holding stricter gender role stereotypes and the normalised perceptions about men perpetrating violence against women within various cultures and subcultures globally has been associated with greater acceptance of violence against women and intimate partner violence (Cinquegrana et al., 2023; Gracia et al., 2020; Nascimento et al., 2023; Sardinha & Catalán, 2018; Tran et al., 2016; Uthman et al., 2009; Wubs et al., 2013). This indicates how gender norms (e.g. strict gendered rules and expectations) in a community/society can be linked to attitudes towards, and perpetration of intimate partner violence, as previously discussed in earlier chapters in this thesis (e.g. Chapter 4 - Gender and IPPA and Chapter 5 Part 1 - Factors affecting IPPA experiences).

Theme 2 Sub-theme 2 | *Being a Strong Black Girl and Woman.*

Several participants discussed ‘**strong Black girl/woman stereotypes**’ as a factor impacting Black girls and women’s education surrounding IPPA. The research team decided to briefly include this stereotype within this superordinate theme (Theme 2 - Impacts of Culture and Community), as strong black girls/women stereotypes can very much be associated with culture, especially when other Black women, including parents also hold these self-views and perpetuate the same stereotypes onto their children.

However, later on I describe strong Black girl/woman stereotypes in much further detail under a later sub-theme *Barriers to Speaking to Parents* within superordinate theme four ‘Help-seeking’ as many participants specifically commented on how this stereotype would have deterred them from seeking help if faced with IPPA as an adolescent. Whilst there is clear

overlap in the use of concept of strong Black girl/woman stereotypes between these two superordinate themes, the research team ultimately made the decision to feature this across both themes, in order to demonstrate how these stereotypes have the ability to affect how a Black adolescent girls form an understanding of what is acceptable and unacceptable in a relationship and form an understanding of their role in a relationship; whilst this stereotype simultaneously acts as a barrier to seeking help if faced with abuse.

Stereotypes of Black strength are often paired with the expectation that Black girls and women can suppress complex emotions even when faced with hardship, abuse, and health issues (Monterrosa, 2021; Potter, 2008; Stewart, 2017; Watson & Hunter, 2015). Whilst not explicitly asked by the researcher, several participants alluded to the role their culture plays in perpetuating strong Black girl and strong Black woman stereotypes and how this expectation may have impacted their education about abuse, as well as their self-identity.

Woman 10 “...*That's what I saw in my household and my family. The women always pick up the pieces regardless of how disrespectful the man was. But you still had to be the strong woman that literally can't show emotions. You have to be very tough all the time*”.

Participants suggested that strong Black girl and strong Black woman **stereotypes reinforced the normalisation of intimate partner violence.**

Woman 10 “*I was brought up in my Jamaican side and I lived with my grandmother, and what I gained from my experience with my culture is that women have to be extra strong. You just have to be extra strong, and if you cry, you're weak, and if you say someone has hurt you, you have to fight back... From what I've learned, I have to be a woman, a strong woman that's willing to pick up the pieces, and so, when I experienced*

an abusive relationship myself, it was very hard for me to process. It was very hard because I was like, 'but this is what my family taught me'".

Theme 2 Sub-theme 3 | Generational Misinformation.

The third sub theme within Theme 2 helps to categorise comments made by participants which related to the **passing down of misinformation about IPPA** and strongly relates to the *home and family* and *misconceptions and language* sub themes presented in theme 1 (what we did and did not learn). Most participants commented on how witnessing unchallenged intimate partner violence in their family contributed to the normalisation of IPPA, describing how witnessing this abuse led to the passing down of faulty messaging from elders and parents onto children that IPPA is acceptable relationship behaviour. To illustrate this, I repeat the following quotes:

Black Woman 3 *"It [seeing family members experience IPPA] was just normalised to be treated badly by this figure and be there waiting and not be empowered enough to leave because the family would tell them to give him another chance.... when you're a child, no one talks about it, and so you just see it, and so you think that is how relationships should be and it goes unchallenged."*

Black Woman 1 *"So presently, I feel like there needs to be some type of intervention in terms of education, not just for girls in the education system, but probably the older community as well because I would say, by and large, most Black women don't have enough of that knowledge to relay it to the next generation."*

Some participants suggested that this presence and **impacts of abuse across generations of Black people** (i.e., via transatlantic enslavement) has contributed to a continued regeneration of abuse in relationships and families and towards Black women.

Focus Group Woman 1.8 “There is historical context. We’ve been psychologically abused for the last 300 years and hold on to it, psychologically. It impacts the way you treat your children and what you tell them to accept. I don’t think it’s us. I think it’s what we’ve all been through. And so, we can’t be mad at us. We can’t be mad at our culture because it’s so fucking recent. We may be the first generation to receive counselling or want to. And the fact of the matter is, that’s needed.”

This is closely linked to literature earlier explored in this thesis, whereby connections have been made between historical abuse against Black people and the trauma related regeneration of violence perpetrated by some Black males against some Black women (Lacey et al., 2021; Morgan & Youssef, 2006).

Theme 2 Sub-theme 4 | Religious Institutions

Several women, particularly in the larger focus group setting, shared the view that **religion was integrated with their cultural heritage**, with religion being ingrained in the values and norms taught within their culture, as illustrated in this dialogue between two focus group participants:

Focus Group Woman 1.8 “I think that the issue is that religion is so intertwined with our cultures through our historical oppressions. Focus Group Woman 1.5 “[religion has] been used as a form of coercion and control.”

Some women also referred to the influence of attending **faith schools** in England, and the impacts of this on their relationships and sex education, whereby teaching about unhealthy relationship behaviours appeared to be neglected.

Woman 1 *“We had PSHE... but it was very focused in terms of Catholicism, a man, and a woman, and ‘this is how God sees the relationship’ as opposed to ‘these are red flags to look for if you're in a relationship’”.*

Several participants also described their view that **some religious institutions upheld gender stereotypes and teachings which perpetuate messages that violence against women** is acceptable and discouraged help-seeking outside of the family or the religious institutions’ context. Women implied that those who were influenced by religious institution messages of this nature during adolescence, would have again been less likely to have learnt that acts of IPPA were unacceptable.

Focus Group Woman 1.1 *“My stepdad used to say the bible quote about man and a woman shall leave their mother and father to become one or something. That quote was used a lot for coercion [against women]”.*

We see examples of similar findings in previous literature. For instance, previous researchers have made links whereby the teaching of stringent gender roles and the upholding of patriarchal views through interpretations of religious texts (e.g. Davis, 2015; Mulvihill et al., 2022; Wood, 2021) appears to be associated with perpetration, endurance and justification of intimate partner abuse (Mulvihill et al., 2023) amongst some members of religious institutions. Inadequate responses to cases of domestic violence by religious member (e.g. not being equipped with knowledge on domestic abuse, not signposting victims to more extensive support, encouraging victims to forgive and stay with abusive partners and victim-blaming), and limited awareness-

raising in religious institutions surrounding domestic violence (e.g. Barnes, & Aune, 2021; Williams, & Jenkins, 2019) has also been reported as a factor affecting the effectiveness of help available to some victims of abuse. When applied to IPPA, these findings help in forming an understanding of how some religious institutions and cultures informed by religion may also play a role in defining how IPPA is portrayed and perceived, which may therefore impact how adolescent girls influenced by such messages understand IPPA too.

Theme 3 | Outcomes of Education

The third theme gathers responses and codes about what women believe are some of the negative and positive outcomes of having or not having sufficient IPPA education as an adolescent. Of participants' responses were based on their reflections on the consequences of their own lack of IPPA education as well as theoretically derived suggestions based on what participants believed other consequences of the absent IPPA education may be.

Theme 3 Sub-themes 1/2 | *Positive Outcomes and Negative Outcomes.*

The perceived positive outcomes of receiving IPPA education shared by participants included an **increased ability to identify IPPA** when it occurs and consequently, an **increased chance of those experiencing IPPA to access help or leave** psychologically violent relationships. Comparatively, many participants expressed that not receiving adequate IPPA education during adolescence leads to adolescent girls having a limited ability to identify IPPA when it occurs and a greater chance of remaining in abusive relationships in the future.

Woman 12 *“As a young girl or young guy, it would actually have been very handy for a lot of people. I feel like education would have saved a lot of people from abusive situations.”*

Woman 3 *“I think it would have been so helpful to learn about psychological abuse a lot earlier because there were so many, myself included, other young women who ended up in quite traumatic relationships very early on, but we just didn't have the education to know that that wasn't how relationships worked... I think it would have helped to have had the tools to recognise what the signs were, so in these situations, we can be like, ‘ah, I remember learning about that at school’. Oh, ‘I don't think that's quite right’ and knowing that you can challenge it.”*

The perceived positive impacts of learning about IPPA according to Black women are supported by the vast majority of past evidence which demonstrates how successful relationships education (e.g. learning about healthy and unhealthy relationship dynamics at school or through specific programmes and interventions) can be beneficial in improving the learners ability and confidence to identify and recognise the signs of abuse and seek help if faced with abuse (Adler-Baeder et al., 2007; Gardner & Boellaard, 2007; Lundgren & Amin, 2015; Pomeroy et al., 2013; Pound et al., 2017; Simpson et al., 2018). This rationale is also used in the development as public policy and guidelines surrounding RSE education in England, where guidelines state that RSE for young people helps adolescents to have positive and safe relationships and plays an important role in safeguarding children from abusive relationships (Children and Social Work Act, 2017; DfE, 2019; House of Commons Education Committee, 2015). Insights from the current study therefore help to support the need to include effective IPPA education in RSE curriculums, to ensure how young people are also protected from prolonged IPPA in a relationship.

Theme 4 | Help-seeking

Theme four compiles' participants responses about their awareness of services related to IPPA that may have been available to them as adolescents as well as participants beliefs about the factors that would have influenced their chances of seeking help or further information about IPPA during adolescence.

Theme 4 Sub-theme 1 | *Barriers to Speaking Out.*

Several women described how they probably would have **avoided speaking to their parents about IPPA** because they were aware that their parents had misconceptions about intimate partner violence and that IPPA was normal to their parents. (see Theme 1 - Home and family subtheme).

Woman 12 *“If something were happening to me, maybe at that age, I would not have been comfortable talking about it with family, but maybe friend... I think one reason is that at that age, being in an intimate relationship is probably something that your parents wouldn't be advocates for. Then, secondly, just the awkwardness and potential misunderstanding, maybe even being scorned by your family. I think it's typical in some Black families where there is a certain relationship dynamic within the family whereby there's certain things you talk about and others that you don't. I think talking about a relationship that you're in was taboo, so then you don't go into depth on something like psychological abuse. There is that barrier of talking in depth about an intimate relationship.”*

In hindsight, several women also felt that **strong Black girl stereotype** endorsement by both them and the people around them (e.g. family) would have acted as barriers to them seeking

further information or help regarding IPPA during adolescence (see subtheme 2 - being a strong Black girl and woman subtheme).

Woman 9 “I also think the messaging around abuse, but also the messaging around Black girls experiencing pain and harm and struggling with mental health, particularly when I was growing up, was not clear or visible at all. So, even if I was going through something or anything of that sort, for me, the images were saying that that's not something that even exists for you. I usually saw a slim, blonde, White girl, that was, you know, kind of all distraught, and that was like the image that you'd receive, so it was only her. Only that kind of girl would be able to experience something like this.”

This is echoed in studies, where links have been made between Black woman having stronger self-endorsement of strong Black girl/women expectations and being less likely to use formal sources of help (e.g. hospitals and law enforcement) when facing abuse (Monterrosa, 2021). Bias held by others that Black girls and women do not suffer and can handle hardship, and messaging that Black girls are not regarded as the archetypical victim are also barriers to seeking help during adversity. For example, some studies have attributed cases of subpar levels of care and treatment for Black girls and women to being caused by systemically unequal processes (such as the under resourcing of services and opportunities aimed at suitably supporting particular groups in society and a lack of robust compulsory cultural competency training for practitioners - Mai, 2023; Pereira et al., 2020; Vargas et al., 2023). Individual level biases can also be reflected when practitioners (e.g. health care professionals and school staff) hold stereotypes and anticipatory assumptions (e.g. stereotypes of strength/endurance and adultification stereotypes) causing them to undermine Black girls and women's suffering (Birthrights, 2022; Commission on Young Lives, 2022; Epstein et al., 2017; Knight et al., 2021; Shannon et al., 2021) resulting in regular lived experiences of unfair treatment and negative outcomes which can be off-putting for Black women needing support (Bent-Goodley et al.,

2023; Pereira, et al., 2024; Sim et al., 2021; Simpson & Helfrich, 2014). Nevertheless, in future research, further exploration is needed to truly understand the relevance of strong Black girl stereotypes on specifically IPPA education experiences, and help seeking, in the context of Black adolescent girls in England, as I believe that this study did not fully explore this.

Theme 4 Sub-theme 2 | Unawareness of Formal Services During Adolescence.

Overall, most participants were **unaware of IPPA-related services and support** available during their adolescent years. This is echoed in Study 1.

Woman 3 *“I just don't think they were signposted to us. It wasn't seen as like a priority to make sure that we had access to those things.”*

Here we see parallels to some past studies where some Black women report being unaware of domestic violence and intimate partner violence support available in their community (e.g. Lucea et al., 2013; Sabri et al., 2015), albeit most past studies have studied intimate partner violence services as a whole, not explicitly studying awareness of access to support for IPPA.

Even when participants reported that during adolescence, they were aware of services that could help with intimate partner violence and other forms of abuse (e.g. child abuse), they reported not necessarily knowing that they could have spoken to these organisations about IPPA. As previously discussed, this again may be linked to the misperceptions of IPPA as a normal relationships behaviour or not being serious enough to deem as abuse, thus not requiring support from services.

Woman 11 *“[at university] there must have been a student services, but I would never have assumed that they could offer me emotional help for being emotionally distressed from being psychologically abused in some way. If they did offer that, I just feel like it would need to be something really extreme, and I just think that there would never be a circumstance where I would have wanted to speak to somebody because I hadn't at that*

stage done therapy or anything so it would have been an alien concept to talk to somebody about personal problems.”

Theme 5 | Future

Theme five comprises of ideas from participants on what they believe school, community and home interventions surrounding IPPA should look like for current and future adolescents in England. Recommendations included strategies specifically for Black adolescent girls as well as for all adolescents in general. Some ideas expressed in these subthemes were presented by participants as reflections on what and how they would have liked to have learned about IPPA as an adolescent, whilst others were expressed as ideas for what they think should now be implemented, regardless of their own experiences.

Theme 5 Sub-theme 1 | Delivery of Information (Who)

Participants commonly suggested that IPPA education should be delivered to adolescents by educators of the **same-sex/gender** (e.g., women should teach girls) due to their shared identity and lived experiences of girlhood/womanhood.

Woman 7 “Girls should address girls, and boys should address boys. It makes it more relatable, and I think it should be done in PSHE classes. I think just having a chat with the students about it would have been good.”

Focus Group Woman 7 “I'd like to see more female role models sharing experiences with young people, young girls, and some more spaces where that can happen informally. Places where you can bring young people together around something they love, whether it's music or art or something. But they're also seeing women that look

like them and talking about things like abuse and having a space to talk with other people that look like them where they feel safe.”

Furthermore, several participants specifically discussed the potential benefits of receiving lived-experience informed **education from women who had experienced IPPA**/other forms of intimate partner violence themselves as a mechanism for effective education and support, which women implied would present more realistic and powerful messaging to young people.

Black Woman 10 *“I also think with girls, education with a woman, or maybe even getting people that are domestic [abuse] survivors to come and talk to them about their own experiences and what they've experienced. It just needs to be a reality. So, they're really in touch, not just plastered in front of the screen saying ‘don't do this’.”*

Women also discussed the advantage of utilising **specialist organisations** to support better quality IPPA education in schools.

Focus Group Woman 1.2 *“Personally, I wish my school brought someone from outside, like a charity. I don't think I would have listened to my teacher. Or maybe someone who has been through it and who now studies it, so it's someone who really knows what they are talking about and someone I could relate to.”*

These sentiments are somewhat featured in current RSE guidelines (DfE, 2019). First, the DfE guidelines (2019) recognise the benefits of utilising specialist external organisations to (e.g. bring specialist knowledge and different student engagement styles) and gives schools flexibility to engage with appropriate providers to facilitate and support RSE delivery. Second, the guidelines acknowledge and support the use of sex/gender-separated teaching of some RSE topics, recognising its benefits when conducted within the bounds of the Equality Act (2010)

as a form of positive action (i.e. when schools can justify the use of separated learning as a function of supporting differing needs of students, as long as both groups of students receive proportionate support to achieve the same learning aims – e.g. both girls and boys should learn about IPPA to the same standard, even when separated - DfE, 2018). The gender separation guidelines (DfE, 2018) name sex education and some aspects of Personal, Social, Health and Economics (PSHE) education as examples of where this may be justified.

Additionally, some participants expressed the belief that **social media can be a useful alternative source** for delivering IPPA education, due to its capability to provide young people with bitesize and relatable information, especially when IPPA education has not otherwise effectively provided by schools and at home.

Black Woman 4 *“You can see many people are willing to open about their experiences with psychological abuse online. And I’m not the type of person to usually sit through some of that stuff but even hearing about other people’s experiences, and seeing a community, and the comment section just sharing their own advice or opinions and perspectives, I think at least that kind of brings up this kind of conversation. Once you start taking in information in such a digestible way on social media, I feel like it can affect what you don’t know.”*

Again, we see this echoed in past literature, whereby it is known that young people commonly learn about topics related to RSE (e.g. sex and intimacy) from the internet and social media (Hollis et al., 2022; Patterson et al., 2019) and this can be useful when education provided by schools or parents is inadequate or absent (Bashir et al., 2017; Litsou et al., 2021).

Interestingly, most participants did not suggest that IPPA education for Black adolescent girls should specifically come from Black women educators, with some suggesting that schools are

capable of teaching all young people about IPPA and healthy relationships regardless of race, even when this education is absent of cultural distinctiveness. Below is an extract from a conversation between two focus group participants:

Focus Group Woman 1.8 *“In my Jamaican family, how we respond to things and how we speak is different from some of my peers. If I would have had a White woman at school telling me about abuse, I would have probably undermined it because, in our household, we just say things in a different way. So, I think the way we go about things makes things come across as more aggressive way. So, I think it depends on who is giving you the information and is what they are saying coming across prejudice, and do I have comfortability with them, and do they understand my culture. It would have been nice to have had the information but it’s difficult.”*

Focus Group Woman 1.9 *“But I think, when you go to school, there are so many different people from different cultures teaching you, so regardless of what race they are, I think they can still say what is fundamentally wrong. I’m Jamaican also, and I know there’s differences, but there are some things that schools can clearly say are wrong, regardless. For example, if you are feeling small, if you are feeling belittled, all these types of things. I think it’s about planting the seed in a child’s head that this is wrong.”*

Focus Group Woman 1.9 later on in this focus group also said: *Planting the seed in school isn’t that hard and schools don’t need to bring in race to do that.”*

Whilst Sivarajasingam and colleagues (2022) research did not directly discuss preferences to learn about domestic violence from same race educators, we see similar messaging in their findings whereby many participants in their study supported the idea that schools should educate all young people about domestic abuse to provide them will a baseline

foundational level understanding that abuse is wrong, regardless of any cultural or religious influences outside of school that may be suggesting otherwise.

Theme 5 Sub-theme 2 | *How to Improve IPPA Delivery.*

Most participants also suggested further practical steps to improve IPPA education at school and home. Participants argued that effective **financial investment, teacher training and greater access to topic resources** is needed to improve IPPA education.

Woman 4 *“I would say that formal education needs to have more of a budget or investment, or time dedicated to bringing in third party community groups to talk about things in relation to life.”*

Focus Group Woman 1.1 (previously a sociology teacher) *“I think that a main problem for teachers is that because there’s not a unified approach to teaching this, and different schools do it in different ways there’s not always good resources to support them. If you are in a more progressive school, of course you will have resources to help you to teach this, but some schools are not. I feel like this is something that needs to be coordinated by the government, but unfortunately, I don’t think that will be the case.”*

These recommendations for improving RSE in England are similarly advocated by many RSE activists and educators of (e.g. Brook, n.d.; Brook & The Open University, n.d.; Local Government Association, 2019; NSPCC, & NASUWT, 2022; Sex Education Forum, 2018; Taylor-Gee, & Boyson, 2022). To support this recommendation, numerous studies provide evidence of the benefits of RSE related teacher training on teacher’s confidence in delivering RSE (Bourke et al., 2024; Lodge et al., 2022; Walker et al., 2020) and on the quality of RSE curriculums provided to students (Lee & Lee, 2019; Westwood & Mullan, 2007; Wilder, 2018). We expect that the same effect would be seen for IPPA specific RSE lessons.

Theme 5 Sub-theme 3 | *Starting Point.*

Nearly all participants believed that IPPA education should occur during childhood and adolescence before age 19; however, the specific age suggested differed between participants, who seemed to base their recommendation on varied reasons such as their beliefs about the onset of puberty, average onset of intimate relationships and perceived maturity of adolescents at different ages.

Focus Group Woman 1.9 *“We all started getting into relationships at different ages, but I’d say probably about 14/15. Not teaching them about sex but teaching them all this other side. Give them something. I am sure that when some of us were 14/15, we were probably in an abusive relationship and didn’t even know it. We were sending nude photos pressured into doing things like that. These things happen at that age”*

Focus Group Woman 1.4 *“I actually think that teaching about this should happen even younger. Maybe age 11, like when you start your period. I think that people forget that kids are very observant even from the age of 3, so if abuse is happening at home, for example, they won’t know what is happening if we leave the education for too late.”*

In the larger focus group, with nine participants, a final hands-up poll was held at the end of a discussion about when IPPA education should be delivered, asking participants, *“What age do you think IPPA should start to be taught?”* Six women voted that this education should begin in primary school, whilst three said secondary school. Many women in this focus group noted the importance of **‘planting the seed’** at a young age, whereby during primary school children should at least understand and be taught that IPPA is unacceptable at an age-appropriate level of detail, before being further expanded upon during secondary school. To

repeat the words of Focus Group Woman 1.9 *“Planting the seed in school isn’t that hard and schools don’t need to bring in race to do that.”*.

Theme 5 Sub-theme 4 | Improvements to Education at Home and in the Community.

Several participants shared the view that **parents and families need additional information and support**, including training about IPPA themselves.

Focus Group Woman 1.8 *“We could also give teachers, parents and social services better training. I’m about to become a mum, and I know my way of doing things is not always the good way... Similar to there being antenatal classes to prepare you, you should probably have something at adolescence where you can perhaps learn about what your children are going through and how you can better understand them because their brains have changed.”*

Woman 9 *“You literally can’t really make change without parents. Maybe we need to get them on a course or whatever.”*

Participants believed that this in turn would help parents to support and better educate their children. The concept and positive impacts of providing training and support for parents surrounding how to speak about RSE related topics at home has been quite widely supported in past intervention studies (Akers et al., 2011; Kamala et al., 2017).

Women also commented on the benefits of home IPPA education, noting that **parents can contextualise IPPA education from a culturally competent perspective** for their children (e.g. acknowledging how race-based bias may impact IPPA support, or communicating how IPPA may be culturally normalised but is wrong). Some explained how

this could complement IPPA education occurring at school, whilst overcoming issues of underrepresentation of different experiences of abuse based on intersectional differences.

Focus Group Woman 1.8 *“I think that is what we are missing. I feel like cross-culturally, by schools sending information home, parents have the opportunity to discuss it in a culturally competent way. It might kick up an argument at home, but at least you and your parents are seeing information about what is wrong in relationships.”*

This perceived benefit of home RSE education is supported in studies which have also explored parent-child communication about topics such as sex and intimacy. These studies note the important role of parents in providing socialisation information (e.g. explaining their religious values surrounding intimacy) about topics for their children in a way that schools may not provide in a group class setting (Shtarkshall et al., 2007; Sivarajasingam et al., 2022)

Given the importance placed on involving and consulting with parents in the development of schools RSE curriculums, throughout the RSE guidelines for schools (DfE, 2019), there is already strong support for involving parents in RSE delivery. However, through this research, we are able to demonstrate Black women's support for parental involvement in specifically IPPA education. Participants support for parental involvement may extend to other aspects of RSE (e.g. sex education), however research would be needed to understand views on parental involvement and parental training on other topics covered in RSE curriculums.

Table 2.4

A description of key finding and quotes to support each code within themes and subthemes.

Research Question 1: What are Black women's experiences and views of learning about IPPA as adolescents?	
THEME 1: What we did and did not learn: Participants shared stories and reflections on how they received IPPA education as adolescents and what kind of information was provided.	
Sub-themes	Codes and quotes within each subtheme
Home and family	<p>Indirect Lessons - Some participants discussed how they received some indirect or drip-fed information related to IPPA, mainly from mothers and older sisters. This came in the form of advice on how a man should treat you or discussing IPPA behaviours when it appeared in a television show or soap opera.</p> <p>“With my mum, these things are so random. We might be watching something on TV, and my mum will start going off on one, and I’m just like, right, okay, and that makes me not want to listen because I feel like where this has come from. But with my sisters, we could be speaking on the phone, and I could be telling them about someone I’m speaking to, and they’ll just be like, okay, well, be careful.” BW8</p> <p>Witnessing Abuse - Several participants discussed how their knowledge of IPPA was derived from witnessing IPPA or other forms of intimate partner violence within their family, usually with their mother or aunt being the victim of this abuse by a male family member (father or uncles)</p> <p>and Lack of Explicit Learning - Where participants reported witnessing IPPA, they did not recall having explicit conversations about what they had witnessed. This resulted in many participants perceiving the abuse that they witnessed as normal and acceptable relationship behaviour or translating into them being aware that the behaviour was unacceptable but not being equipped with the language to describe or fully understand.</p>

“... You learn a lot by just watching your aunties. The majority of my aunties have actually been in what you would call quite violent or psychologically abusive relationships, and that was just normalized. It was just normalised to be treated badly by this figure and be there waiting and not be empowered enough to leave because the family would tell them to give him another chance.... when you're a child, no one talks about it, and so you just see it, and so you think that is how relationships should be and it goes unchallenged”. BW3

Parental gap in knowledge - Some participants shared the view that an absence of IPPA education from their parents may have resulted from their parents' having gaps in their own understanding of intimate partner violence and IPPA. Participants expressed that this contributed to a plausible inability to teach their children about intimate partner violence and IPPA.

“My mum and my dad were going through things, and I don't think they knew what they were going through themselves.” BW13

School	<p>Not important enough - Many participants believed that their school did not view IPPA education as important compared to traditional academic subjects or sex education. Participants expressed this as an explanation for why education about IPPA was not delivered to them at school.</p>
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“The culture at the time was focused on educating young adults about sex and prevention of pregnancy and maybe reducing STIs. There wasn't any emphasis in my education on psychological well-being.” BW1

IPPA is Covert - Several women suggested that the covert nature of IPPA compared to other forms of abuse (i.e. physical abuse) may also explain why IPPA education was not delivered at school and why IPPA was generally less discussed in public dialogue.

“I wasn't really taught about psychological abuse. I think maybe because it wasn't seen as much as physical abuse or bullying. We're always taught not to bully and, to be nice and to share. However, psychological abuse is not a thing that is visible; it can't be seen, so maybe that's why it wasn't really spoken about when I was a teenager.” FG2.2

Reactive Education - Some participants reported that topics related to non-physical abuse and sexual assault (such as upskirting and sharing indecent images) were only taught in their school (usually as a one-off assembly) as a reactive response to an incident occurring at the school.

“Abuse wasn't really brought up until year 9. Some boys pulled up Black girl's skirts and slapped their bums. Nothing happened until this happened to a white girl, and she broke down crying; then something was done about it, and we had an assembly. It was just so funny that although the black girls raised it, and some of the Asian girls, it didn't mean anything to anyone until it was a white girl”. FG1.9

Friends

Inexperienced - Most participants expressed that they had not spoken about IPPA with friends at all during their adolescent years, as their friends probably also had little explicit or accurate knowledge about IPPA.

“I probably wouldn't have gone to my friends or my mum... My friends because we're all in the same boat, so I'd probably go to the internet first and then go to my friends and ask what they think about the information”.BW9.
[when asked what impact they think people around them had on their understanding of IPPA] “I think not so much my friends. They didn't understand a lot. I'd never seen or experienced that with them”. BW7
“Friends, we were so young, so we didn't really have those discussions”. BW8

General Chats - Some participants shared how IPPA sometimes appeared in general discussions with friends about intimate relationships or from observing friends' intimate relationships. These discussions sometimes led participants to notice and learn about bad relationship behaviours in general.

“Possibly during college, we would have discussions amongst friends. What impacts? I think it was more like when people were starting to dabble more into relationships, it was more like a realisation that that was a form of abuse...or you're discussing something with a group of friends, and you have the realisation like, Oh, like that is a form of abuse or that's something that is not right.” BW12

“...I think two of my friends got out of two quite toxic situations, and that meant a group learning... You're like, oh, maybe that's not good. Like maybe I shouldn't accept that [either]...”. BW3

The Media **Learning Online** - A few participants shared that they had used the internet, including social media, as a source of information or support surrounding IPPA as an adolescent.

“I got really interested in sociology and psychology, so a lot of things I was trying to figure out. I eventually started Googling as a child, when we had Internet.” FG1.5

[discussing who they would have felt most comfortable speaking to about IPPA] “... I'd probably go to the internet first and then go to my friends and ask what they think about the information, but the first point of call would probably just be like Google really”. BW9

Normalisation in Pop Culture - Some participants discussed the portrayal of IPPA behaviours as acceptable or romantic in some media that they were exposed to as adolescents, such as in novels and music. This led to participants viewing some IPPA behaviours as normal relationship behaviours.

“I think particularly when it comes to media and movies, how relationships are depicted in movies, that classic romance, like, what was it? At school, we did [name of classic romance novel], and that's classed as a really great romantic story,

but I was thinking, this guy is awful! He's so controlling, so obsessive over this woman, but this is classed as a great romantic story, and we strive for this. Even in music and lyrics, how people speak and sing about each other... I'm sure that these things shape your idea of what relationships and abuse looks like, and regardless of what everyone says, you're going to be conditioned in some sort of way and it's going to have an impact on how you view things, and you might miss red flags because you think, that's OK, that's normal.” BW9

Misconceptions and language **Missing Terminology** - All participants reported that their parents had not taught them about IPPA using technical language such as ‘abuse’, ‘violence’, ‘psychological’ or ‘emotional’ as an adolescent. There was a clear connection between having a lack of education about IPPA at home or school and this resulting in missing vocabulary.

“I think stuff like psychological and emotional abuse that didn't really appear in my vocabulary or my awareness until after 19.” BW2

“They wouldn't always say psychological abuse in those exact words, but they might say that that’s a sign of a toxic relationship or that person is a bad person for you.” BW9

“Growing up my mum taught me about consent, abuse and cohesion but never said the word psychological abuse. Somethings she would think that she is teaching me good things, like if they say mean things just ignore them, not realising that she isn’t really defining it or giving examples”. FG1.5

Other Abuses More Overt - Several women reported being more able to identify physical and sexual abuse due to the more overt recognisability of IPPA and better education received about these forms of abuse.

“I would say physical abuse and sexual abuse I was able to identify a lot quicker in my adolescence and I think it was because it was a lot more extreme in regards to how it comes across externally. I think because psychological abuse tends to be more intimate and passive and can be woven into someone’s speech. Especially stuff like manipulation, it’s

often purposely built-in way where you can barely see it and barely recognise it. Especially when you're first being gaslit, for instance... I think that's why this type of education and understanding I didn't catch until later on, but sexual and physical abuse is something that's a little bit more in your face." BW4

"I think when I was at school, people loved to say, 'if a boy or a man is mean to you, that is an indication that they like you or they're obsessed with you. That's the kind of gaslighting I received when I was younger, especially within my community as well as at home. It's weird because my mum was a domestic violence survivor, and from when I was young, I was taught domestic violence meant abusive relationships and was basically when a man hits you, that's it. But no one actually spoke to me about the actual abuse or what leads to it or what the signs are.'" BW10

Normal Relationship Dynamic - Many women explained that as adolescents, they viewed IPPA as a normal and expected relational dynamic. This often connected directly to the subtheme of home and family, whereby observing IPPA in familial relationships yet not having explicit follow-up discussions or condemnation of IPPA within their family led them to normalise IPPA behaviours.

"I think when I was younger, the language was confusing to me. I felt like it was kind of a rite of passage in a way that sometimes people just get angry with each other, and then they call each other abusive. It didn't seem like there were boundaries about what was acceptable and unacceptable behaviour. I knew that abuse was something that is supposed to be unacceptable, but it was unclear exactly what criteria that was." BW11

THEME 2: Impacts of culture and community: Participants' beliefs on how their culture and community influenced their understanding of IPPA.

Impacts of cultural norms and values **Relationships Are Taboo** - Several women discussed their belief that IPPA was not adequately discussed in their household in part due to a cultural belief held by parents, that adolescent girls should not be in romantic relationships or should not be interested in boys at all, consequently contributing to discussions and adolescent intimate relationships a taboo subject in their family. This led to participants feeling uncomfortable to speak to their parents about relationship issues.

“I think with my background being that my parents are Angolan, I don't want to be stereotyping of African families, but in a very stereotypical fashion, we just didn't talk about relationships because you're not supposed to know about boys until you have graduated from university. That was their line, which meant they never talked about relationships at all.”

BW3

“I think culture has such a massive impact because of the unspoken nature of it. You just don't talk about it. It is frowned upon. If you were talking about it, the first thing that would come out of your parents was, why are you talking to boys anyway? You should concentrate at school, not realising that maybe you're trying to tell me something here.” BW3

Normalisation in Culture: Most participants expressed the belief that IPPA was not adequately discussed or taught in their households because of the normalisation of IPPA in their culture.

“I feel like learning about psychological abuse was something that I just didn't get because it was so normalised in my culture to be psychologically abusive.” BW4

Gender Stereotypes - Most participants expressed the belief that IPPA was not adequately discussed or taught in their households because of common gender role stereotypes in their culture. Participants especially referred to the expectation that girls and women were expected to put up with abuse and poor behaviour from male intimate partners.

“I think that culturally, especially for men, things get excused. Men are allowed to be that way because they're a man, and they are figuring it out. But women, we're nurturing, we're caring, we're strong, we've got to be the backbone of the family.” FG1.5

“I think there is something definitely to be said about the fact that [IPPA] goes unchallenged in a lot of African families, and you learn a lot by just watching your aunties. The majority of my aunties have actually been in what you would call quite violent or psychologically abusive relationships, and that was just normalized. It was just normalised to be treated badly by this figure and be there waiting and not be empowered enough to leave because the family would tell them to give him another chance. “BW3

Being a strong Black girl and woman	<p>Strong Black woman/girl - Whilst not explicitly asked by the researcher, several participants alluded to the role their culture plays in perpetuating strong Black girl and strong Black woman stereotypes and how this expectation may have impacted their education, perceptions, Participants suggested that strong Black girl and strong Black woman stereotypes reinforced the normalisation of intimate partner violence by suggesting that Black women and girls are not victims of intimate partner violence and strong enough to tolerate abuse or should be able to defend themselves in violent situations.</p>
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“I was brought up in my Jamaican side and I lived with my grandmother, and what I gained from my experience with my culture is that women have to be extra strong. You just have to be extra strong, and if you cry, you're weak, and if you say someone has hurt you, you have to fight back... From what I've learned, I have to be a woman, a strong woman that's willing to pick up the pieces, and so, when I experienced an abusive relationship myself, it was very hard for me to process. It was very hard because I was like, but this is what my family taught me”. BW10

“...That's what I saw in my household and my family. The women always pick up the pieces regardless of how disrespectful the man was. But you still had to be the strong woman that literally can't show emotions. You have to be very tough all the time”. BW10

“There are even studies that show in the healthcare system, some believe that Black women can endure more pain than white women. I feel like that runs through our own community, too. We have to bear the brunt of everything. We are the shoulder. We hold everything up. I just feel like abuse is something which is normalised in any form, and we just have to be strong about it. We just have to cope with it. We can cope with it because we're meant to because we're Black.” FG1.5

Generational misinformation **Learning Through Observation** - Most participants suggested that witnessing experiences of abuse in their family contributed to IPPA being normalised, however in this sub code, participants specifically referred to their culture as part of their experiences of witnessing abuse.

“I think there is something definitely to be said about the fact that [IPPA] goes unchallenged in a lot of African families, and you learn a lot by just watching your aunties. The majority of my aunties have actually been in what you would call quite violent or psychologically abusive relationships, and that was just normalised. It was just normalised to be treated badly by this figure and be there waiting and not be empowered enough to leave because the family would tell them to give him another chance.... when you're a child, no one talks about it, and so you just see it, and so you think that is how relationships should be and it goes unchallenged.” BW3

Lack of Information - Several participants suggested that their mothers were not fully informed about IPPA, making them unable to teach their children about IPPA adequately.

“We're living in a climate where we're trying to teach our children to do better, but we don't have the tools or language to tell them what is acceptable or the expectation for what they should expect.” FG1.8

“I have spoken to my mum and my grandma about things, and they have told me about things that have happened in their relationships... and that made me understand it a little bit more and what to watch out for. So, the terminology was never spoken, but we have had discussions around it.” BW7

Historical Context - Some participants suggested that impacts and trauma of abuse across generations of Black people (i.e., the transatlantic slave trade) have contributed to a continued regeneration of abuse in relationships and families.

“There is historical context. We've been psychologically abused for the last 300 years and hold on to it, psychologically. It impacts the way you treat your children and what you tell them to accept. I don't think it's us. I think it's what we've all been through. And so, we can't be mad at us. We can't be mad at our culture because it's so fucking recent. We may be the first generation to receive counselling or want to. And the fact of the matter is, that's needed.” FG1.8

Religious institutions.	<p>Upholding Gender Stereotypes - Some interview/focus group participants shared the view that religious institutions upheld gender stereotypes and teachings, which perpetuate messages that violence against women is acceptable.</p> <p>“My stepdad used to say the bible quote about man and a woman shall leave their mother and father to become one or something. That quote was used a lot for coercion”. FG1.1</p> <p>Religion and Culture - Some participants connected religious institutions to Black culture, viewing religion as a significantly influential factor on their culture.</p>
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“We had PSHE..., but it was very focused in terms of Catholicism, a man, and a woman, and this is how God sees the relationship as opposed to these are red flags to look for if you're in a relationship”. BW1

Dialogue between two focus group participants (FG1.8 and FG1.5), “I think that the issue is that religion is so intertwined with our cultures through our historical oppressions. FG1.8 It's been used as a form of coercion and control. FG1.5”

THEME 3: Outcomes of education: Participants' beliefs and experiences of the impacts of receiving and not receiving IPPA education.

Positive outcomes **More Likely to Identify IPPA** - All participants shared the view that IPPA education helps girls identify signs of IPPA in their future relationships

And **More Likely to Seek Help** - Participants believed that better IPPA education improves girls and women’s likelihood to seek help or leave relationships where IPPA occurs.

“A subject like [RE] could be used to focus on topics like abuse throughout the RE curriculum. Next thing you know, they might be able to spot this happening at home and might feel more comfortable speaking to that teacher and asking for advice when they do see abuse.” FG1.4

“As a young girl or young guy, it would actually have been very handy for a lot of people. I feel like education would have saved a lot of people from abusive situations.” BW12

“Schools need to teach young people and children about the real world in terms of the problems and issues that people may face and challenging scenarios where someone may need to be able to defend themselves; just be aware for your own self-protection.” FG2.1

Negative outcomes	<p>Inability to Identify IPPA - Participants agreed that absent IPPA education makes it difficult to label and recognise the signs of abuse in adolescent and adult relationships</p> <p>and Victimisation in Adulthood - Most focus group participants shared the view that a lack of IPPA education during adolescence can lead to girls and women ending up in abusive relationships in adult relationships due to their lessened awareness of the signs of IPPA and other unhealthy relationship behaviours.</p> <p>“In school, they don’t teach you about these things like being in psychologically abusive relationships, emotionally abusive relationships, physically abusive relationships, and domestic violent relationships. After I left school and entered my first relationship and experienced it myself... In schools, I feel like they should teach about this so that you don’t get older and get into a relationship, and when things go left, that’s when you learn about these things.” BW13</p> <p>“I think it would have been so helpful to learn about psychological abuse a lot earlier because there were so many, myself included, other young women who ended up in quite traumatic relationships very early on, but we just didn't have the education to know that that wasn't how relationships worked... I think it would have helped to have had the tools to recognise what the signs were, so in these situations, we can be like, ah, I remember learning about that at school. Oh, I don't think that's quite right and knowing that you can challenge it.” BW3</p> <p>“With my first relationship, I was in that relationship for less than six months. That was child's play, but my partner was psychologically abusive because he used to manipulate me and harass me in certain ways. He would say ‘I'm depressed, I'm going to jump, and I've hurt myself’. I didn't know that was a form of abuse. So, for me, I just automatically would submit, right. And looking back now I wish my mum kind of told me about those parts of psychological abuse.” FG1.4</p> <p>“It was only recently, when I had therapy when I was 21, that I realised actually those dynamics aren’t normal in a relationship.” FG1.</p>
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THEME 4: Help-seeking: Participants' understanding of IPPA services and support available and factors influencing their help-seeking behaviours as adolescents.

Barriers to speaking out **Barriers to speaking to parents** - Several participants expressed the belief that, they would not have spoken to their parents if they faced IPPA as an adolescent. Most participants suggested that their parents' cultural norms or misconceptions about adolescent relationships and IPPA reduced the likelihood of seeking help from parents.

“If something were happening to me, maybe at that age, I would not have been comfortable talking about it with family, but maybe friend... I think one reason is that at that age, being in an intimate relationship is probably something that your parents wouldn't be advocates for. Then, secondly, just the awkwardness and potential misunderstanding, maybe even being scorned by your family. I think it's typical in some Black families where there is a certain relationship dynamic within the family whereby there's certain things you talk about and others that you don't. I think talking about a relationship that you're in was taboo, so then you don't go into depth on something like psychological abuse. There is that barrier of talking in depth about an intimate relationship.” BW12

We Don't Suffer - Several participants described strong Black girl/woman stereotypes as a contributor to why Black girls are less likely to seek or access intimate partner violence -related support (also see theme 2).

“I also think the messaging around abuse, but also the messaging around black girls experiencing pain and harm and struggling with mental health, particularly when I was growing up, was not clear or visible at all. So, even if I was going through something or anything of that sort, for me, the images were saying that that's not something that even exists for you. I usually saw a slim, blonde, white girl, that was, you know, kind of all distraught, and that was like the image that you'd receive, so it was only her. Only that kind of girl would be able to experience something like this.” BW9

“I was brought up in my Jamaican side, and I live with my grandmother, and what I gained from my experience with my culture is that the women have to be extra strong, you just have to be extra strong, and if you cry, you're weak, and if you say someone has hurt you, you have to fight back, you have to do this, you have to do that. It just feels like there is

pressure in my experience, in my community, that it's so much on the women to be better and to pick up the pieces.”

BW10

“Abuse wasn’t really brought up until year 9. Some boys pulled up Black girl’s skirts and slapped their bums. Nothing happened until this happened to a white girl, and she broke down crying, then something was done about it, and we had an assembly. It was just so funny that although the Black girls raised it, and some of the Asian girls it didn’t mean anything to anyone until it was a white girl. It was even happening in front of our teachers. And there was never a follow-up, never a check in with us, never are you ok, especially for us Black females growing up”.FG1.9

Unawareness of formal services during adolescence	<p>Unaware of Services - Many participants reported being unaware of services outside of school that they would have been able to access surrounding IPPA support as an adolescent.</p> <p>“I just don't think they were signposted to us. It wasn't seen as like a priority to make sure that we had access to those things.”</p> <p>BW3</p>
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Unaware of IPPA Support- Several participants also explained that they were aware of services that they probably could have sought help for intimate partner violence and non-intimate partner violence abuse (e.g. child abuse) but had not previously considered them a service that could be useful for IPPA-related issues.

“[at university] there must have been a student services, but I would never have assumed that they could offer me emotional help for being emotionally distressed from being psychologically abused in some way. If they did offer that, I just feel like it would need to be something really extreme, and I just think that there would never be a circumstance where I would have wanted to speak to somebody because I hadn't at that stage done therapy or anything so it would have been an alien concepts to talk to somebody about personal problems.” BW11

Research Question 2: What are Black women’s perceptions of current IPPA interventions and education and do Black women believe improvements are needed to support Black adolescent girls?

THEME 5 - Future: Participants' reflections on what and how they would have liked to have learnt about IPPA as an adolescent and recommendations for future school and community education and interventions.

Delivery of information (who). **Learning From Women** - Several participants commented that girls would benefit from IPPA education, from female educators, due to their shared identity and lived experiences of girlhood/womanhood and **Educators with Lived Experience** - Several participants commented that girls would benefit from IPPA education from women with lived experiences of IPPA/intimate partner violence, as survivors may be able to provide more personable and realistic education on this matter.

“Girls should address girls, and boys should address boys. It makes it more relatable, and I think it should be done in PSHE classes. I think just having a chat with the students about it would have been good.” BW7

“I also think with girls, education with a woman, or maybe even getting people that are domestic [abuse] survivors to come and talk to them about their own experiences and what they've experienced. It just needs to be a reality. So, they're really in touch, not just plastered in front of the screen saying don't do this.” BW10

“It would have probably been very powerful to have had a female come in and speak about it, who may have encountered and experienced some of that abuse themselves or an agency or a charity.” BW14

“I'd like to see more female role models sharing experiences with young people, young girls, and some more spaces where that can happen informally. Places where you can bring young people together around something they love,

whether it's music or art or something. But they're also seeing women that look like them and talking about things like abuse and having a space to talk with other people that look like them where they feel safe.” FG1.7

The majority of participants did not suggest that IPPA education for Black adolescent girls should specifically come from Black women educators. Below is an extract from a conversation between two focus group participants:

FG1.8: “In my Jamaican family, how we respond to things and how we speak is different from some of my peers. If I would have had a white woman at school telling me about abuse, I would have probably undermined it because, in our household, we just say things in a different way. So, I think the way we go about things makes things come across as more aggressive way. So, I think it depends on who is giving you the information and is what they are saying coming across prejudice, and do I have comfortability with them, and do they understand my culture. It would have been nice to have had the information but it’s difficult.”

FG 1.9 “But I think, when you go to school, there are so many different people from different cultures teaching you, so regardless of what race they are, I think they can still say what is fundamentally wrong. I’m Jamaican also, and I know there’s differences, but there are some things that schools can clearly say are wrong, regardless. For example, if you are feeling small, if you are feeling belittled, all these types of things. I think it’s about planting the seed in a child’s head that this is wrong.”

External Educators and other professionals – A number of participants commented on a desire for IPPA education and support to be delivered by non-classroom teachers such as external providers and school counsellors who would possibly have more specialised knowledge surrounding IPPA than other teachers.

“I think it would be good if there were somebody who wasn't a teacher, but I think a counsellor, or somebody with the background in that area, who could speak to us in smaller groups.” BW11

“I think now if there had been some kind of student's services, student welfare, counselling, just somebody at college talking about mental health and talking therapy and also about situations that you might think of as normal, but actually they could help with that, [that] would really have helped join the dots.” BW11

“Personally, I wish my school brought someone from outside, like a charity. I don't think I would have listened to my teacher. Or maybe someone who has been through it and who now studies it, so it's someone who really knows what they are talking about and someone I could relate to.” BWFG 1.2

Learning Through Social Media - Several participants also commented on the usefulness of social media as a source to deliver education on IPPA. Participants shared potential benefits of social media education, including it being a source of easily digestible and short-form information that is sometimes relatable and its use as an alternative source of learning when not otherwise provided.

“You can see many people are willing to open about their experiences with psychological abuse online. And I'm not the type of person to usually sit through some of that stuff but even hearing about other people's experiences, and seeing a community, and the comment section just sharing their own advice or opinions and perspectives, I think at least that kind of brings up this kind of conversation. Once you start taking in information in such a digestible way on social media, I feel like it can affect what you don't know.” BW4

“Things like [social media platform name], you hear from [social media platform name] therapists about what partners should and shouldn't do. But those things are always a bit dangerous because people fit themselves in general categories online and self-diagnose and then that's a whole downward spiral, but it's good for people who don't have access to friends and family to warn them about those things, but it has pros and cons.” BW8

How to improve IPPA delivery.	<p>Greater Investment: A number of participants recommended that greater monetary and time investment in IPPA education would generally improve the quality of IPPA education in schools.</p> <p>“I would say that formal education needs to have more of a budget or investment, or time dedicated to bringing in third party community groups to talk about things in relation to life.” BW4</p>
	<p>Training and Support for Teachers – Several participants discussed a need to improve training and shared resources for schools and teachers to improve the quality of IPPA education.</p> <p>“Having teachers who are trained to be a bit more aware of peer-on-peer abuse [would help]... Also, having someone in the school pastoral team, either as part of their role, or maybe just to do with safeguarding. [Someone that is] trained up.” BW9</p> <p>“I think that a main problem for teachers is that because there’s not a unified approach to teaching this, and different schools do it in different ways there’s not always good resources to support them. If you are in a more progressive school, of course you will have resources to help you to teach this, but some schools are not. I feel like this is something that needs to be coordinated by the government, but unfortunately, I don’t think that will be the case.” FG1.1 (previous sociology teacher).</p>
Starting point.	<p>Onset of Education - Whilst there were a variety of viewpoints on when IPPA education should begin for children and adolescents, most participants agreed that IPPA education should occur before the age of 19.</p> <p>In one focus group with nine participants, the researcher held a final hands-up poll at the end of a group conversation about when IPPA education should be delivered, asking participants, “What age do you think IPPA should start to be taught?” RESULT: In primary school (N = 6); In secondary school (N = 3)</p>

What makes the right age? - Participants shared a range of reasons for their beliefs about the onset of education. Reasons varied but included beliefs that education should align with the onset of puberty, intimate relationships, and adolescent maturity.

“I actually think that teaching about this should happen even younger. Maybe age 11, like when you start your period. I think that people forget that kids are very observant even from the age of 3, so if abuse is happening at home, for example, they won’t know what is happening if we leave the education for too late.” FG1.4.

“We all started getting into relationships at different ages, but I’d say probably about 14/15. Not teaching them about sex but teaching them all this other side. Give them something. I am sure that when some of us were 14/15, we were probably in an abusive relationship and didn’t even know it. We were sending nude photos pressured into doing things like that. These things happen at that age” FG1.9

“Then I think that as you continue to go through education, the more you grow up, you then take it to the next level. Especially when you are in college and sixth form when you are getting into more relationships. At that age, we SHOULD be planting seeds and teaching them how to protect their mental health. I’m not saying that we need to give them a tick list, but we need to give them just a little base, so that they know. If they do get into it later, they are not just confused, and won’t stay in that situation. Planting the seed in school isn’t that hard and schools don’t need to bring in race to do that.” FG1.9

Improvements to education at home and in the community.	<p>Supporting Parents' Home Education - Several participants shared the view that parents and families need additional information and support, including training about IPPA themselves, which would, in turn, help them support their children better.</p> <p>“One thing that I feel everyone has said is that the teachers don’t have the tools, but I feel like we need resources sent home. I feel like having your mum or dad read information about abuse with you can be really impactful.” FG1.8</p> <p>“You literally can't really make change without parents. Maybe we need to get them on a course or whatever..” BW9</p> <p>“We could also give teachers, parents and social services better training. I'm about to become a mum, and I know my way of doing things is not always the good way... Similar to there being antenatal classes to prepare you, you should probably have something at adolescence where you can perhaps learn about what your children are going through and how you can better understand them because their brains have changed.” FG1.8</p> <p>“So presently, I feel like there needs to be some type of intervention in terms of education, not just for girls in the education system, but probably the older community as well because I would say, by and large, most Black women don't have enough of that knowledge to relay it to the next generation.” BW1</p>
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Benefits of Home Education Participants also shared their views on the benefits of home and community education, primarily relating to the opportunity for parents to modify IPPA education based on their cultural competencies in a way that their school may not.

“I think that is what we are missing. I feel like cross-culturally, by schools sending information home, parents have the opportunity to discuss it in a culturally competent way. It might kick up an argument at home, but at least you and your parents are seeing information about what is wrong in relationships.” FG1.8

8.2.6 Connecting the Themes

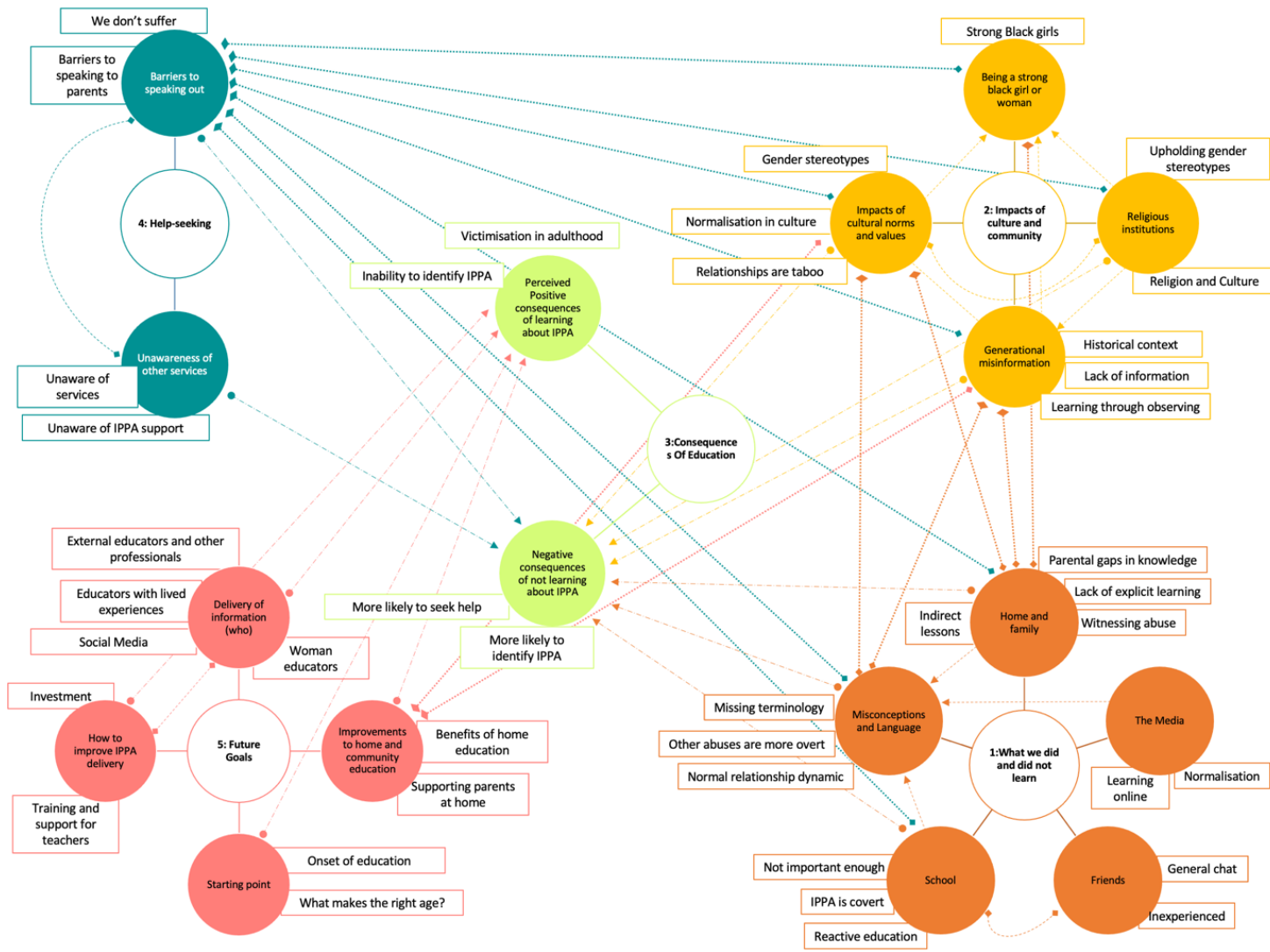
It is clear that there are links and interconnections occurring both within and between the different themes and subthemes found in this study. For instance, within theme one (What we did and did not learn), absent IPPA education from *home and family* subtheme directly connects with the *IPPA misconceptions and language gaps* subtheme. These are connected, as several women reported that they had not learnt accurate abuse related terminology at home from their parents.

Cultural norms and values (subtheme within Theme 2) can also be connected with having *misconceptions or language gaps* and not learning about IPPA from *home with family* (subthemes both within theme 1) – I.e. Participants often related the absence of IPPA education at home to cultural norms within their family which permitted and normalised acts considered to be forms of IPPA. The concept of normalisation of IPPA is also widely seen across the early themes, whereby participants appear to discuss normalisation of IPPA in the context of media representations (subtheme within Theme 1), normalisation of violence against women and IPPA through religious (subtheme within Theme 2), and historical normalisation and regeneration of abuse (subtheme within Theme 2) for instance.

In Figure 2.1 I illustrate the numerous connections found between and within themes and subthemes. In some cases, themes/subthemes are thought to impact one another bidirectionally (e.g. cultural norms and values will impact home and family, and vice versa home and family will impact cultural norms and values). Other connections appear to be more monodirectional (e.g. participants report that cultural norms and values, directly impact strong black girl and women stereotypes however this effect would not necessary occur in the opposite direction).

Figure 2.1

A Thematic Map Illustrating Links Between themes and subthemes.



Key:

Directional connection between subthemes within the same theme, where one subtheme directly impacts the other →

Bidirectional connections between themes/subthemes ↔

Connection between subthemes and the consequences of IPPA learning/lack of learning →

Main Themes ○
Subthemes ●
Key Findings within sub-themes □

8.3 Summary

I have reported five themes superordinate: *What we did and did not learn*; *Impacts of culture and community*; *Outcomes of education*; *Help-seeking*; *Future*, along with 17 subthemes made up of 41 codes.

Overall, from focus groups and interviews with Black women educated in England as adolescents, this study has found a saddening gap in effective IPPA education provided both inside and outside of school during adolescent years, amongst the vast majority of women who kindly took part in this research. The key findings of Study 2, derived through thematic analysis include ideas which point to the normalisation of IPPA and violence against women, gaps in parents' understanding about IPPA and taboos surrounding adolescent relationships as an example of influential factors impacting Black women's understanding and perceptions of IPPA as adolescent girls. This ultimately leads to gaps in understanding, absent technical language, and/or a reduced ability to identify IPPA or seek-help if faced with IPPA.

Women generally attributed their lack of IPPA education as an adolescent to IPPA being a normalised and covert relationship behaviour, typically portrayed as acceptable or simply not spoken about both by the public (including schools) and within families. Women also spoke of a lack of knowledge about IPPA and misconceptions about abuse held by their parents and other family members, which in turn limited the extent to which their parents could provide their adolescent daughters with accurate information about IPPA. Where Black women did receive some IPPA education at home this was often through indirect conversations (e.g. drip-fed information or in response to behaviours seen on television shows) or by witnessing abuse without any nuanced follow up conversations to address, condemn or learn about what was being observed.

We see Black women also attribute some of their misunderstandings about IPPA and intimate partner violence to cultural and intersectional phenomena. This included the taboo nature of adolescent intimate relationships within their culture and race-gender stereotypes such as strong Black girl stereotypes, which appeared to contribute to how they perceived IPPA and why they believe they were not explicitly taught about the harmful nature of IPPA.

Women shared their recommendations to improve IPPA education for current and future generations of adolescents. Women typically advocated for IPPA education in school for adolescent girls to come from women (i.e., participants noted the importance of same sex/gender educators), women with lived experiences of abuse, and external providers, noting the potential benefits of shared identity and specialised knowledge of the person delivering IPPA content to young people. Several women also commented on the usefulness of social media as an alternative source of accessible bitesize information on IPPA, as well as an overall need for greater financial investment in IPPA education and increased training and resources for teachers in schools. Additionally, several participants believed that IPPA training should be extended to parents, to support them with providing culturally informed IPPA education at home, to compliment the IPPA education which should be delivered at school.

8.4 Methodological Considerations and Reflexivity

I recognise the limitations of qualitative methods, particularly regarding the limited generalisability of this study's findings. Whilst this research and the creation of overarching themes help to forward knowledge within this field by uncovering insights into how IPPA education is uniquely experienced by a specific group of girls and women who share intersectional characteristics (e.g. mainly educated in England prior to 2020, African and Caribbean Black/Black mixed-heritage identity), the results of this study are by all means is not intended to represent the IPPA learning experiences of every Black girl and woman in the

England. My greatest hope is that findings from this research will offer at least some Black women data and literature to support her experience, whilst not attempting to minimise all Black women and girls in England's experiences into one single phenomenon or one single story.

This study complements and is generally supported by quantitative findings from the corresponding survey presented in study 1 of this thesis. The current study has therefore successfully added richer meaning to the values reported in Study 1. This illustrates the strength of a mixed methods approach when studying IPPA and intimate partner violence amongst Black women and girls, whereby we can derive both quantitative findings and supporting thematic insights to add voices to statistics and lived experiences to trends.

Taking inspiration from past dialogue (e.g. Cardenas, 2023; Few et al., 2003; Jones, 2010), I made intentional methodological decisions to provide the best possible experience for Black women who took part in this study. I specifically chose to utilise both focus group and interview methods to give Black women a choice over how they wished to share sensitive memories and reflections with the researcher. To increase comfortability and connectivity between the participant and the researcher, all interviews and focus groups were hosted by myself, a Black British woman with some contextual cultural understanding. Additionally, all sessions began with general welcoming conversations and a well-being check-in. Participants were also offered several breaks. In-person focus groups were held in comfortable modern spaces, with refreshments provided and participants received a gift bag containing products from Black-owned businesses. I believe these choices might have supported the women who participated in this study to feel comfortable sharing their stories, which is evident in the rich insights shared by our participants.

Whilst the intersectional identity (Black women, raised in England) and lived experiences (experiences of intimate partner abuse) of me as a researcher should be acknowledged, given my personal connectedness to the research topic, to lessen issues of single-researcher interpretation bias, a team of research assistants were recruited to support with data analysis. Research assistants supported in conducting in-depth inductive thematic analysis and embedding grounded theory and inter-rater reliability practices into this analysis journey. This meant that multiple perspectives and interpretations were involved in the data analysis and when drawing conclusions from the data. Prior to collecting data, my personal experiences and views on IPPA education may have also played a role in the development of research questions used, however, to address this, I ensured that a number of other academics (i.e. PhD supervisors) were involved in inputting their ideas, then reviewing and providing guidance for amendments to the research materials based on their professional judgements and experiences in conducting research across the fields of violence against women, and women's rights.

8.5 Future Recommendations

The findings presented in Study 2 have implications for developing and improving proactive and protective interventions and education related to IPPA for adolescents. Recommendations derived from this study include strategies directly suggested by participants, as well as recommendations for future experimental research.

As discussed, Black women recommended for IPPA education be delivered by same sex educators, from women with lived experiences of IPPA and external educators (e.g. specialist charities and visitors). These recommendations somewhat align with guidelines from the Department of Education (DfE, 2019), which advocates that working with external agencies can enhance RSE delivery but should not be used as a total replacement for appropriate teaching staff in the school. The Department of Education does not make any recommendations

surrounding lived experience in teaching however, past empirical studies have also depicted benefits and desire among some young people for same-sex educators (e.g. Coleman & Testa, 2007; Strange et al., 2003) and expert external visitors (e.g. Coleman & Testa, 2007; Kimmel et al., 2013; Pound et al., 2017) in delivering RSE related topics (sex education). However, a number of studies show the successful delivery of RSE related programs for Black adolescents, where sex and lived-experiences of the educator were not included as factors contributing to success (e.g. Meyer et al., 2023). Future research may therefore wish to further investigate who adolescents in schools across England are currently learning about IPPA from, to evaluate whether the effectiveness of education being delivered differs based on these recommended educator characteristics. Measures of the impact of financial and time investment, as well as training support for teachers, could also be examined in future studies.

As recommended as a source of learning by some participants in this study, future studies may also wish to investigate the accuracy and effectiveness of social media IPPA education on popular platforms adolescents use. Past literature has shown that social media is widely used to learn about such RSE-related issues (Hollis et al., 2022, 2022; Paterson et al., 2019), and efforts should consider the viability of social media as a beneficial triangulated method for teaching young people about IPPA.

Finally, and potentially most directly impactful for improving and recognising the cultural differences in IPPA education, I recommend further exploration into ways to support parents and families to better, deliver IPPA education at home, potentially through training and resources for parents. As past research illustrates (Akers et al., 2011; Kamala et al., 2017) training and appropriate resources for parents are known to improve and increase dialogue and education between parents and their adolescent children, for other RSE related topics (sex education) and we would be keen to see whether similar positive impacts would arise from interventions targeted at teaching parents of teenagers about IPPA.

8.6 Conclusion

In this study, including the results table provided, I have presented detailed insights from Black women in England about their experiences of learning about IPPA as an adolescent and their recommendations for delivering and improving IPPA education for current and future adolescents. We see factors such as the normalisation of IPPA in relationships and the covert nature of IPPA negatively affecting the quality of IPPA education received during adolescence both at home and at school. By taking an intentional intersectional approach to research, this study helps to recognise how IPPA education, particularly at home, can be strongly shaped by culture, race, and gender. Given participants distinctive views on the unique impacts of their intersecting identities (e.g. race – Black; culture and heritage – African, Caribbean, English; gender – girl; and age – adolescence) on their IPPA education, it can safely be assumed that experiences of home and community IPPA education may, therefore, differ for adolescents with different intersecting characteristics.

As echoed by participants, there are clearly perceived positive impacts of good IPPA education, and the implementation and testing of home and community-based recommendations provided by Black women in our study (e.g. increased support and education about IPPA for parents to improve IPPA education delivered at home) may also help to establish improved home IPPA education for adolescents.

If this research were replicated with Black adolescents and women who have benefited from newer Relationships and Sex Education guidelines in England (DfE, 2019), hopefully more positive experiences of learning about IPPA at school will be found. Nonetheless, recently published data from the Sex Education Forum (2024), continues to show that 40.9% of adolescent girls (out of a sample of 577 16 – 17 year old girls, although not broken down by race or not separately exploring IPPA) still do not feel that they have learnt enough at school

about how to tell if a relationship is abusive, and 39% of Black African young people (out of 119 Black African youth participants) rated their RSE as below good. It is therefore unfortunately difficult to fully confirm that IPPA specific education is currently effective for Black adolescent girls in England even with the 2020 guidelines in effect. As such, in the next study, with a sample of current adolescents, I will hopefully be able to uncover this information.

Study 3

A School-Based Study Into Adolescents' Knowledge, Views and Acceptance of IPPA.

9.1 About Study 3

As discussed in Chapter 5 Part Two (How Cultural and Societal Context Impacts IPPA Education) there is little direct research available about young people's knowledge about IPPA since in introduction of the RSE (2019) guidelines. These guidelines included an expectation for students in England and Wales to learn about domestic violence, coercive control, unacceptable relationship behaviour, and the negative impacts of unhealthy relationships on mental wellbeing by the end of secondary school. This was not required in RSE education prior to the updated 2019 guidelines (DfEE, 2000), making it more likely for current adolescents to have learnt about intimate partner violence and coercive control than those who completed their schooling before 2020. This means that current adolescents are also more likely to be gaining the protective benefits of receiving education about healthy relationships such as having greater knowledge and ability to recognise the signs of unhealthy relationship dynamics (Simpson et al., 2017), less acceptance of violence in relationships (Pomeroy et al., 2011), less likely to perpetrate violence in relationships themselves (Owens et al., 2016).

Despite a potential increase in IPPA education now adays, it may still be predicted that adolescents know less about IPPA than forms of intimate partner abuse including physical, sexual and financial abuse. This is based on literature explored in Chapter 1 (Defining Psychological Abuse), where I outlined potential reasons why IPPA has been less researched and historically less discussed by the public compared to other forms of abuse. For instance, previous literature has argued that young people and adults are typically more likely to be able to recognise overt signs of intimate partner violence like physical abuse compared to more covert forms of abuse like IPPA (Francis & Pearsons, 2021; Follingstad & DeHart, 2000; Keashly, 2001). To assess this, in Study 3, I therefore hypothesise that **Adolescents will rate**

their knowledge of abuse in intimate relationships as lower for psychological abuse compared to physical, sexual, and financial abuse – Hypothesis 1 and Adolescents will be able to list more signs of physical abuse than psychological abuse - Hypothesis 2.

I also aim to measure adolescents' current level of knowledge about IPPA by asking participants direct quiz style questions about IPPA. Given the potential gaps in knowledge about IPPA it was always important for me that all participants also received an educational workshop about IPPA. This intervention involved students attending a workshop about IPPA to learn about how to spot the signs of IPPA, the law about coercive control and how to seek help. This would hopefully support young people to develop more knowledge and an improved confidence to spot the signs of IPPA. This intervention also provided an opportunity to test the impacts of an education workshop intervention. As discussed in Chapter 5 Part Two (How Cultural and Societal Context Impacts IPPA Education) a number of students show that receiving education and interventions on topics like sex education and healthy relationships can improve young people's knowledge on the topic (Owens et al., 2016; Lundgren & Amin, 2015; Pomeroy et al., 2011; Pound et al., 2017; Simpson et al., 2017), I test the following hypothesis: **Adolescents' accuracy on a 10-question knowledge survey about IPPA will be lower before attending a workshop (time 1) compared to after attending a workshop (time 2) and two weeks late (time 3) – Hypothesis 3.**

In addition to testing these hypotheses, in Study 3 I also intend to gather exploratory data into The extent to which adolescents find IPPA behaviours acceptable, where past literature does not provide enough content to predict findings. IPPA is often perceived to be less severe (or normalised) compared to other forms of intimate partner abuse (Barnes, 2001; Stockman et al., 2014), despite IPPA often have equal or more profound long-term consequences for victims compared to other forms of abuse (Almendros et al., 2009; Barter et al., 2009; Follingstad et

al., 1990; Kelly, 2004; Krebs et al., 2011; Leen et al., 2013; ONS, 2023a; Rees, 2009; Straight et al., 2003). This normalisation and minimisation of IPPA can in part affect the extent to which an individual may be accepting of this type of intimate partner violence (Barnes, 2001; Rivas et al., 2013; Stockman et al., 2014).

As discussed in Chapter 5 (Race, Culture and Societal Context), the presence of sexism and misogyny in schools (Davies-Jones, 2023; Ofsted, 2021) and exposure to sexist and misogynistic content via social media (Dearden, 2023; Regehr et al., 2024) may have a knock-on effect on some young people's perceptions about violence against women as well as IPPA behaviours like using derogatory name-calling against girls/women. As summarised by Ofsted's (2021) review into sexual violence in schools, it is evident that sexual violence between peers is occurring at a high rate in schools and colleges in the England and Wales, and that sexist name calling happens alot/sometimes in secondary schools, as reported by 93% of adolescent girls surveyed. Through focus groups with adolescents, the Ofsted (2021) review also noted that many young people report that sexualised language was normalised in their schools and often regarded as banter, illustrating of acceptance surrounding sexist language amongst a noteworthy proportion of young people in schools in England. With this in mind, for exploratory purposes, in this study I measure the extent to which adolescents are able to identify milder, moderate and severe IPPA acts (Follingstad, 2011) and whether they view any of these IPPA acts as more acceptable in relationships than others.

As previously discussed in Chapter 1 (Defining Psychological Abuse), perpetrators often also use IPPA tactics when committing physical, sexual and financial abuse too (Hacialefendioglu et al., 2020; Henning & Klesges, 2003; Kerbs et al., 2011; ONS, 2023a). As such, In this study I also decided to measure the extent to which adolescents are able to recognise/distinguish when IPPA is present in scenarios (vignettes) where physical abuse is also present, and whether this increases or decreases the extent to which adolescents label IPPA

as unacceptable when it is co-occurring with another type of abuse (physical) that young people are already more likely to understand to be unacceptable.

For exploratory purposes, I also ask adolescents who they have learnt about IPPA from, and how satisfied they are with the information received. Whilst past research has shown that young people learn about sex and relationships related topics from various sources including school, friends, parents, social media and personal research (Sartin-Tarm et al., 2021; Sex Education Forum, 2019; Stewart et al., 2021), again, it is not clear the extent to which these sources are also used by adolescents to learn more specifically about IPPA. As, the insights gathered from Study 1 of this thesis, indicated that Black women had learnt about IPPA from mainly social media (68.9%), personal research (65.6%), and friends (36.1%), it would be interesting to see if current Black adolescent girls are also learning about IPPA using these same sources.

Like Study 1 and 2, in the current study adolescents are also asked to share who they think should teach them about IPPA (e.g. teachers, parents and guest speakers) and what age they believe IPPA education should begin. These questions were asked in order to gain a better understanding of current adolescents' preferences and could be used to aid the develop of schools RSE policies and interventions for delivering IPPA education to young people. As previously discussed, young people preference for who should teach them about RSE related topics (e.g. sex and dating), differs, however typically support is found for a preference for parents and schools to be the main sources of education on these topics (Koren, 2019; Rutledge et al., 2011; Macdowall et al., 2006), as well as some preference to learn from the internet, youth workers, doctors, religious institutions, television, and peers (Coleman & Testa, 2007).

Again, it would also be interesting to see to what extent current Black adolescent girls' preferences for IPPA education aligns with those of Black women from Studies 1 and 2, who typically supported the idea of healthcare professionals, charities, teachers and parents being

involved in IPPA education and believed that teachers and parents should receive more training about IPPA.

Lastly, as discussed in Chapter 3 (Adolescence), when adolescents who are faced with intimate partner violence seek help, they tend to seek support from informal sources such as their friends (Ashley & Foshee, 2005; Daw et al., 2022; Rowe et al., 2014; Fortune et al., 2008; Fry et al., 2013). Other studies have also found that when asked young people believe that they would seek help from their parents (Daw et al., 2022; Elias-Lambert et al., 2013).

In addition to this, in Chapter 5 (Race, Culture and Societal Context), I also discussed some variables which can affect Black women's and girls opportunities to seek help and report abuse to formal sources (e.g. counsellors, community support for victims of domestic abuse and the police). These variables include external barriers such as a systemic under-resourcing of services set up to specifically support women of colour (Thiara & Roy, 2022), a lack of cultural competence training amongst practitioners (Fugate et al., 2005; Kelly et al., 2020; Postmus et al., 2009), and negative experiences with bias or discriminatory service providers which reduces the quality of care provided to Black people (Commission on Young Lives, 2022; St. Vil et al., 2017; Perera, 2020). For some Black women and girls, decisions over who they seek help from may sometimes also be linked to more personal reasons including beliefs in cultural attitudes against seeking help outside of the family (Lacey et al., 2020; Waller et al., 2022), a desire to protect Black men from disproportionate punishment if reported to the police for abuse (Hampton et al., 2003; Neville & Pugh, 1997) and self-identifying with strong Black women/girl stereotypes about strength and self-resilience (Anyiwo et al., 2021; Carter & Rossi, 2021; Nnawulezi & Murphy, 2019). Whilst help-seeking preferences were not investigated in Study 1 or Study 2, in Study 3 current adolescents preferred sources for seeking-help if faced with IPPA is also studied.

To summarise, through Study 3 I aim to explore adolescents' current understanding and attitudes about IPPA. Young people's **knowledge, ability to recognise** and **attitudes** towards IPPA is measured and compared to their knowledge and ability to recognise the signs of physical abuse (a more overt and well-known form of abuse). Young people's knowledge, ability to recognise, and acceptance of IPPA is measured before receiving an educational workshop intervention using participants responses to a survey and vignette scenarios which contain examples of IPPA and physical abuse. Adolescents' knowledge and ability to spot the signs of IPPA were measured again directly after participating in the intervention and two weeks later, to test the effectiveness of educational workshop as an intervention. Data was also collected on participants **views on the effectiveness of IPPA education** that they have received from various formal (e.g. school) and informal (e.g. parents and friends) sources and their **preferences for who should teach adolescents about IPPA and who to seek help from if faced with IPPA**. Overall, in Study 3 I sought to answer five research questions:

- **Research Question 1** | How accurate are adolescents' knowledge and ability to identify signs of psychological abuse?
- **Research Question 2** | Does attending a workshop about IPPA improve the accuracy of adolescents' knowledge and confidence in their ability to identify signs of IPPA?
- **Research Question 3** | What behaviours related to IPPA do adolescents view as acceptable and unacceptable in intimate adolescent relationships?
- **Research Question 4** | What are adolescents' views on education and support surrounding psychological abuse?

9.2 Methods

9.2.1 Participants

The results of Study 3 come from a sample of 39 students from two year 12 class groups (typically aged 16 - 17 years) from one school in London. This included 26 adolescent girls (66.7%) and 13 adolescent boys(33.3%). The ethnicities of adolescents who participated are presented in Table 3.1. Participants for this study could identify as any gender or ethnicity, and there were no lifestyle restrictions or additional requirements. The decision was made to include adolescents of all races/ethnicities in this research sample in order to mimic a diverse classroom experience and not to single out Black adolescent girls or make them feel othered when delivering the intervention workshop. Nevertheless, as I am specifically highlighting the experiences of Black adolescent girls in England throughout this thesis, the college was asked to consider taking steps to ensure that Black adolescent girls were included in the sample (e.g. by distrusting research invitations to a diverse group of students/potential participants). I specifically explore Black adolescent girls' responses in the second part of the results and discussion section of the study (page 290).

Four students (three girls and one boys) who took part in the first part of the study (Time 1 and 2) were unable to attend the second research day two weeks later (Time 3); therefore, their results were discarded from any analysis where young people's knowledge was compared to time 3.

Table 3.1*Ethnicities of Adolescent Participants*

Characteristics	Full Sample		Female		Male	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Ethnic background						
Black African	18	46.2%	11	61.1%	7	38.9%
Black Caribbean	6	15.4%	4	66.7%	2	33.3%
Black African and Caribbean	2	5.1%	2	100%	0	0%
Black Other	1	2.6%	0	0%	1	100%
Mixed Other	1	2.6%	0	0%	1	100%
Asian Bangladeshi	2	5.1%	2	100%	0	0%
Asian Indian	4	10.3%	4	100%	0	0%
Asian Other	1	2.6%	1	100%	0	0%
White English	3	7.7%	2	66.7%	1	33.3%
No response	1	2.6%	0	0%	1	100%
Total of Full Sample	39	100%	26	66.7%	13	33.3%

In order to recruit adolescents for this research, school and college leaders (e.g. head teachers) were emailed an invitation for their school/college to participate. Potential schools and colleges were identified through the UK government's online schools list, and leaders' email addresses were found on school websites. One school responded whose head teacher granted permission for the research to take place in their institution. The head teacher was asked to allocate a member of staff (Appointed Staff Research Liason [SRL]) to lead Communications with the researcher, make suitable arrangements ahead of the research workshops, lead participant recruitment, distribute participant information booklets to protective adolescent participants and their parents, to gather their informed consent. Information booklets were distributed to parents/carers and students at least two weeks before the first research workshop.

No remuneration was provided for participating in this research; however, as part of the study, all young people involved received a workshop on IPPA. This workshop ultimately

enhanced their knowledge and awareness of IPPA. The college was also offered a training session/CPD for staff about IPPA in adolescent relationships.

This study has been funded through the Doctoral Research fund from the College of Health, Medicine, and Life Science at Brunel University London. Research protocols were designed to adhere to APA and BPS ethical guidelines and were reviewed and approved by the Brunel University College of Health, Medicine, and Life Sciences Research Ethics Committee.

9.2.2 Materials

Participant Information Sheet (PIS) and Consent Form. Four versions of a PIS were created (School Leaders, Appointed SRL, Parents/Carers, and Adolescent versions), providing participants and gatekeepers with relevant, age, and role-appropriate information about the research. The participant information booklets were shared with the SRL over email, who could choose to distribute the information booklets for parents/carers and adolescents using email, an existing online home-school communication channel, or as physically printed booklets provided by the researcher upon request. The decision was made to omit the specific type of abuse being studied from the PIS booklets because this may have led some prospective participants to research IPPA before attending the research, therefore skewing the results. Instead, prospective participants were informed that the research will be about non-physical abuse in intimate relationships rather than psychological abuse specifically.

Consent was required from parents/carers and adolescent participants. As such, two versions of the consent form were created. Parents/carers completed an online version of the consent form hosted on Qualtrics.com, accessible through a link and QR, provided in their participant information booklet. The adolescent's consent form was a printed paper form provided at the

beginning of the research session. All consent forms included questions asking participants to confirm that they understood and consented to participate in the study and agreed to the outlined ethical considerations (e.g. confidentiality, right to withdraw, the intended use of data collected).

Debrief Letter. A printed debrief letter containing a reminder about ethical rights, information about how research results will be used and recommendations for how participants can seek support following the study was provided to adolescents at the end of each day.

On-site Facilities. The SRL was asked to arrange for the researcher to access a suitable classroom at the college premises, with access to a projector to display the research PowerPoint. As participants had the right to withdraw from the study, the SRL was also asked to arrange an alternative location, activity, and additional staff member to be available throughout the research session for pupils should they wish to withdraw.

Distractor Task. Participants were given a worksheet with unrelated distractor tasks (picture search and sudoku activities) between survey/presentation sections when they finished before the allotted times to each section of the research.

Research and Educational Workshop Presentation. The structure of the research workshop was tied to a PowerPoint presentation developed for the purpose of this study. The PowerPoint presentation was split into six parts (part A – F), with each part corresponding with a section of an accompanying printed research survey booklet (see research survey details below). For instance, part A of the PowerPoint presentation instructed participants to answer questions one to seven of the research survey, then to wait for further instructions (and complete the distractor task whilst they wait). Table 3.2. outlines the content of the PowerPoint presentation slides alongside the corresponding research questions and response options. The educational workshop (intervention) section of the PowerPoint presentation was made up of five slides containing information on the definition of IPPA, headline statistics and IPPA in

England and Wales, signs of IPPA, impacts of IPPA, and sources of support/help when experiencing IPPA.

Due to the novelty of the research materials used in this study, the PowerPoint and survey were reviewed by two academic colleagues and two secondary school teachers to assess the language and clarity of the questions.

Research Survey. The research survey used in this study consisted of 22 questions, made up of predominantly closed-response questions. Out of these 22 questions, 12 of those that were asked to participants prior to the educational workshop intervention (Time 1) were repeated/used again immediately after the educational workshop (Time 2) and two weeks after the education workshop (Time 3), to allow for a pre and post intervention analysis to be carried out. The survey consisted of nine sections detailed below (demographic survey¹, self-assessment questions², listing signs of abuse questions³, IPPA knowledge quiz questions⁴, acceptance of IPPA and recognising IPPA in peer relationships vignette questions⁵, sources of IPPA education and satisfaction questions⁶, views on delivering education and interventions questions⁷, sources of support questions⁸ and extraneous variables checks⁹):

Demographic Survey¹. Participants were asked to confirm their school year group, and to indicate their gender identity and ethnic background. As there were no gender or ethnic background restrictions/criteria to participate in this study, gender and ethnic background information was only collected in order to allow for the researchers to identify and further analyse Black adolescent girls' responses.

Self-assessment Questions². The research survey contained two Likert scale style questions used to assess participants self-rating of their own knowledge about each type of abuse (physical, financial, sexual and IPPA) and their self-rated confidence to spot the signs of physical abuse, financial abuse, sexual abuse and IPPA (see Table 3.2 for question wording and Likert scale response options). Participants answered these questions close to the beginning of

the research and before participating in the educational workshop. After taking part in the educational workshop (intervention) participants were asked the self-assessment questions again, however this time participants were only asked to self-rate their knowledge and confidence to spot the signs of IPPA to allow for pre and post intervention comparisons.

*Listing Signs of Abuse Question*³. To assess young people's knowledge and ability to spot the signs of IPPA, participants were also asked to create exhaustive lists of examples physical abuse, financial abuse and IPPA. This question intended to test whether young people are more familiar with signs of physical and financial abuse, compared to IPPA. Young people were not asked to list examples of sexual abuse due to the heightened inappropriate nature of sexual abuse and the potential adverse impacts that listing examples of sexual abuse could have had on young people.

*IPPA Knowledge Quiz Questions*⁴. The final way participants knowledge about IPPA was assessed was through a IPPA knowledge quiz, consisting of nine closed-response questions. Knowledge quiz questions (as listed in Table 3.2) included questions about statistics on the prevalence of abuse, the effects of IPPA, signs of IPPA and the law on coercive control. The same knowledge quiz questions were asked both before, immediately after, and two weeks after the educational workshop intervention.

*Acceptance of IPPA and Recognising IPPA in Peer Relationships Vignette Questions*⁵. Students were shown five vignettes, each describing a scenario between two young people the same age as them in an intimate relationship. After reading and listening to each scenario (played using computer generated predeveloped voice recording of vignettes), students were asked whether they found either character's behaviour acceptable (on a scale of 1 = acceptable, 2 = Slightly acceptable, 3 = Neutral, 4 = slightly unacceptable, 5 = unacceptable). Students were then asked whether they believed that physical abuse or psychological abuse was present

in the scenario. If participants said yes, they were asked to explain why they thought the behaviour was unacceptable. Below, I present each vignette used:

Vignette 1 – Neutral

No Abuse – Participants were given one vignette where no signs of abuse were present. In this scenario, participants were shown an example of Aubrey inviting their partner Zion to watch football on the weekends; however, Zion rejects these invites due to not enjoying football. This provided a baseline to

Zion doesn't enjoy football, but their partner **Aubrey** loves football.

Aubrey invites **Zion** to watch football at their house on Saturday and Sunday afternoons when football is on, but **Zion** rarely accepts this invitation because they prefer to hang out when football is not on.

indicate whether participants could correctly identify when no abuse is present in a vignette and were not answering 'yes, abuse is present' for every scenario without an attempt to interpret if abusive behaviours were actually being displayed.

Vignette 2

In this vignette, participants were presented with an example of Jordan perpetrating a *milder* IPPA act (pointing out others as attractive as a way to make a partner feel uncomfortable) and a *moderate* IPPA act (refusing to speak to a partner as a way to punish or hurt them) (Follingstad, 2011). Jordan's behaviours can be

Jordan always tells **Parker** about other people at school who they find attractive. **Jordan** says things like, 'wouldn't **Charlie** and me make a beautiful couple?'.
Parker has started to ignore **Jordan** when they make these comments but has noticed that **Jordan** gets annoyed and starts to give **Parker** the silent treatment when they are ignored.

considered unacceptable IPPA actions. Parker ignoring Jordan's hurtful comments would not be considered IPPA as Parker simply does not react to Jordan's spurring comment, rather than giving silent treatment as a form of manipulation.

Vignette 3

Participants were shown a vignette illustrating milder and severe forms of IPPA whereby the character Cameron is criticising JT's physical looks (milder), calling JT derogatory names to make them feel bad about themselves (severe) and treating JT with strong contempt (severe).

Cameron calls their partner **JT** horrible names every day. **Cameron** comments on **JT**'s appearance and says that **JT** looks messy and embarrassing at school.

Cameron says that this is why they cannot hang out together at school.

Vignette 4

Participants were shown an example of Robin displaying a combination of both physical abuse (Robin shoving and pushing Shea) combined with a *milder* form of IPPA where Robin was intentionally turning neutral interactions into arguments with the purpose of creating conflict (Follingstad, 2011). By combining physical and psychological abuse, during analysis, I would be able to compare whether there is a difference in young people's ability to identify more overt abuse (physical) easier than a more covert form of abuse (psychological) when occurring simultaneously.

Robin intentionally starts arguments with **Shea** at least once a week.

During these arguments, **Robin** will usually start shoving and pushing **Shea**. On many occasions, **Shea** has been shoved into lockers or walls, causing them to hurt their head and shoulder.

Vignette 5

Similar to the previous vignette, participants were again presented with a combination of physical abuse (Peyton pulling Lennox's hair) and psychological abuse, however now with severe psychological abuse (Peyton trying to forbid Lennox from socialising with a friend at school and had others follow/report back

Peyton pulls **Lennox's** hair whenever they hear from other people at school that **Lennox** has spoken to their ex during form time.

Peyton hopes that **Lennox** will eventually learn not to talk to their ex again.

on Lennox's activities) (Follingstad, 2011). This again helps to compare whether there is a difference in young people's ability to identify overt abuse (physical) easier than a more covert form of abuse (psychological) when occurring simultaneously; however, this time with psychological abuse being presented in a more severe form.

*Sources of IPPA Education and Satisfaction Questions*⁶. This part of the research survey included a two-part closed-response question. The first part of this question intended to ask participants about where they had learnt about IPPA prior to taking part in this research. Participants were provided with a list of various potential formal and informal sources (e.g. school, friends, parents, personal research) and were able to select all of the sources that they had previously learnt about IPPA from. There was also an 'other' option where participants could state any other sources, not listed, that they had learnt from. The second part of this question then asked participants to rate how satisfied they were with information that they received from each of these sources. The response options/Likert scale used for both parts of this question are detailed in Table 3.2.

*Views on Delivering Education and Interventions Questions*⁷. Like Studies 1 and 2 of this thesis, adolescents in this school-based study were specifically asked about their opinions on how IPPA should be taught to young people and whether IPPA education benefits adolescents today. Participants were presented with nine statements wherein they were asked to indicate their degree of agreement (1 = Strongly disagree, 2 = disagree, 3 = neither, 4 = disagree, 5 = strongly disagree) with different statements (presented in Table 3.2) relevant to IPPA education (e.g., who should provide this education, what are the likely outcomes of IPPA education, should parents and teachers have training on this topic?).

*Sources of Support Questions*⁸ As past literature has not made it clear who adolescents in England would feel comfortable seeking help from for specifically IPPA, for explorative

purposes the research survey included a question which asks participants who they would feel comfortable seeking support from if faced with IPPA themselves. To study this participants were presented with a list of possible sources of support (presented in Table 3.2) including teachers, parents and friends, whereby participants could indicate yes, no, not sure, or non-applicable.

*Extraneous Variables Checks*⁹ As I assess young people's knowledge and confidence to spot signs of IPPA two weeks after receiving the educational workshop intervention (Time 3), it was important to take into consideration that some young people's knowledge and confidence may have improved two weeks later as a result of them independently seeking out further information about IPPA after participating in the first part of the study. This could have the potential to be an extraneous variable impacting the result of Time 3. In order to assess the potential impacts of this as an extraneous variable, at the beginning of the research survey used on the second research day (time 3), participants are asked to indicate whether they had learnt about IPPA again or done any further research about IPPA since the previous research day.

Table 3.2

Research session order based on PowerPoint presentation slide order and accompanying participant activities/questions.

Presentation slide	Activity/Survey Questions [Response type]
[RESEARCH DAY 1]	
Introduction - 15 minutes	Researcher introduces the study, explaining ethical guidelines, answering any questions from participants, collecting physical consent forms, displaying key terms to be used in the study (Adolescent/adolescence and Intimate Relationships) and explaining the research procedure (including distractor activity).
Part A - 10 minutes	Participants answered the following questions in the survey booklet.
Demographic survey ¹	
Self-assessment questions ²	1. What year group are you in at school? [Open response] ¹
Listing Signs of Abuse Question ³	2. How would you describe your gender / What is your gender identity? [Open response] ¹
Knowledge Quiz Questions ⁴	3. Which option best describes your ethnic background? [Ethnicity Multiple Choice Options] ¹
	4. Which statement best describes your current knowledge of each type of intimate partner abuse (Physical, Sexual, Psychological and Financial abuse)? [Likert Scale = No knowledge to Very good knowledge] ²
	5. How confident are you in your ability to identify signs of each type of intimate partner abuse (Physical, Sexual, Psychological and Financial abuse)? [Likert Scale = Not at all confident to very confident] ²
	6. Can you list examples of each type of intimate partner abuse below? - Write as many examples as you know in the columns below [Open response] ³
	7. According to official statistics, which type of intimate partner abuse is most common? [Multiple Choice Options = Physical, Non-physical, Sexual, Not Sure] ⁴
Part B: Time 1 Pre-workshop Knowledge Test - 8 minutes	Participants answered the following questions in the survey booklet.
Knowledge Quiz Questions ⁴	8. Is the following statement true or false: "Victims of psychological abuse have a higher risk of developing depression in comparison to people who do not experience psychological abuse." [Multiple Choice Options = True, False, Not Sure] ⁴
	9. Is the following statement true or false: "Exposing a partner to upsetting situations such as witnessing drug abuse or sexually explicit content can be a form of psychological abuse." [Multiple Choice Options = True, False, Not Sure] ⁴
	10. Is the following statement true or false: "Intimate partner psychological abuse can be non-verbal" [Multiple Choice Options = True, False, Not Sure] ⁴
	11. Which statement best describes <i>the term "Gaslighting"</i> ? [Multiple Definitions Options] ⁴
	12. Is the following statement true or false: "Repeatedly or continuously controlling a partner in a relationship is illegal in England and carries a maximum prison sentence of 10 years and/or a fine" [Multiple Choice Options = True, False, Not Sure] ⁴
	13. Is the following statement true or false: "If someone thinks that they are being psychologically abused by their partner, they can speak to their GP about what they are experiencing." [Multiple Choice Options = True, False, Not Sure] ⁴

	<p>14. Is the following statement true or false: “Boys/men are more likely to experience psychological abuse in a relationship than girls/women” [Multiple Choice Options = True, False, Not Sure]⁴</p> <p>Is the following statement true or false: “Threatening to punch your partner can be a form of psychological abuse.” [Multiple Choice Options = True, False, Not Sure]⁴</p>
<p>Part C – 15 minutes Vignette Scenarios⁵</p>	<p>The researcher explains the vignette section of the survey, then displays each vignette on screen and plays an accompanying audio reading of the scenario twice. Students had approximately 1.5 minutes to answer each set of scenario questions before being presented with the next vignette.</p> <p>Scenario/Vignette Titles:</p> <p>1) Cameron and JT. 2) Jordan and Parker. 3) Robin and Shea. 4) Zion and Aubrey. 5) Payton and Lennox.</p> <p>Scenario Questions (asked after each vignette)⁵:</p> <p>A) How acceptable do you find (perpetrator’s name) behaviour? B) How acceptable do you find (victim's name) behaviour? C) Were there any signs of psychological intimate partner abuse within this scenario? D) Were there any signs of physical intimate partner abuse within this scenario? E) If you selected yes to questions C or D, please tell us what parts of the scenario suggest signs of psychological and/or physical abuse.</p>
<p>Part D - 10 minutes Sources of IPPA Education and Satisfaction Questions⁶ Views on Delivery of IPPA Education⁷ Sources of Support Questions⁸</p>	<p>The researcher specifically explained how to answer questions 16 and 19 due to the more complex nature of these questions. Participants answering questions in the survey booklet.</p> <p>15. (A) Where have you learnt about psychological abuse in intimate relationships before this workshop [Sources Multiple Choice Options].</p> <ul style="list-style-type: none"> ○ School/College ○ Parents/carers ○ Siblings/Cousins ○ Other Family members ○ Friends ○ Own research ○ Social Media ○ Social/Youth Worker ○ Charity ○ Other <p>and (B) How satisfied are you with the information you received from these sources [Likert Scale: Not at all satisfied to Extremely satisfied]⁶</p> <p>16. Please state how much you agree or disagree with the following statements [List of statements presented in Table 3.9] Likert Scale: Strongly disagree to strongly agree]⁷</p> <ul style="list-style-type: none"> ○ Learning: It is important for adolescents to learn about psychological abuse in intimate relationships. ○ Learning: It is important for adolescents to learn about all forms of abuse in intimate relationships. ○ Sources: Parents/carers should teach their adolescents about psychological abuse in intimate relationships. ○ Sources: Parents/carers should have training on psychological abuse in intimate relationships. ○ Sources: School teachers should teach adolescents about psychological abuse in intimate relationships. ○ Sources: People who have previously experienced psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.

- Sources: Professionals/external speakers (such as charities, nurses and researchers) who have a good understanding of psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.
 - Impact: Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who experience this type of abuse (victimisation).
 - Impact: Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who abuse their partners in this way (perpetration)
17. In what year group should adolescents be taught about psychological abuse in intimate relationships at school/college? [Multiple Choice Options – all school year groups listed] ⁷
18. If you were worried that you might be being psychologically abused by an intimate partner, would you feel comfortable seeking support from any of the following people?
- A friend
 - A sibling or cousin
 - A parent or carer
 - A women's, children's, or abuse charity/organisation
 - Another family member
 - A police officer/ The police
 - A teacher in my school
 - A dedicated 'healthy relationships' member of staff in my school.
 - A different member of staff in my school
 - A social worker or youth worker
- [Sources Multiple Choice Options - Yes, No, Not Sure, Other]. ⁸
19. Are you aware of any services, organisations, or professionals outside of school where you could access further support or education on psychological abuse in intimate relationships? [Multiple Choice Options = Yes, No]. If yes, please name them below [Open response]. ⁸

Intervention - 10 minutes
Educational Workshop

Participants are asked to close their survey booklets and instructed not to change any of their previous survey responses after the workshop. The researcher then delivers the education workshop covering **definitions of IPPA, headline statistics, signs of IPPA, impacts of IPPA, and sources of support/help**.

Part E: Time 2 Immediate Post-test - 10 minutes

Self-assessment questions²

Listing Signs of Abuse Question³

Knowledge Quiz Questions⁴

Participants answered the following questions in the survey booklet.

20. Which statement best describes **your current knowledge** of psychological intimate partner abuse following this workshop? [Likert Scale = No knowledge to Very good knowledge] ²
21. How confident are you in **your ability to identify signs** of intimate partner psychological abuse following this workshop [Likert Scale = Not confident at all to Very confident] ²
22. Can you list examples of each type of intimate partner psychological abuse below? - Write as many examples as you know in the columns below [Open response] ³

24– 32 = Part B – All Knowledge Quiz Questions Repeated⁴.

Debrief - 2 minutes	Researcher thanks participants for explaining when the next research session will occur and reminds participants of their ethical rights. Students are asked not to discuss the research with other students at school, in case they are yet to participate in the study.
<hr/> [RESEARCH DAY 2] <hr/>	
Reintroduction - 8 minutes	The researcher returns to college two weeks later and begins the sessions by reintroducing the study, explaining ethical guidelines, answering participants' questions, and explaining the remaining research procedure
Part F: Time 2 Delayed Post-test - 10 minutes	Participants answered the following questions in the survey booklet.
Extraneous Variables Checks ⁹	32. Since the first research session, have you learnt about intimate partner psychological abuse again [Multiple Choice Options = Yes, No] ⁹
Self-assessment questions ²	33. Since the first research session, have you done any further research about intimate partners psychological abuse [Multiple Choice Options = Yes, No] ⁹
Listing Signs of Abuse Question ³	34. Which statement best describes your current knowledge of psychological intimate partner abuse following this workshop? [Likert Scale = No knowledge to Very good knowledge] ²
Knowledge Quiz Questions ⁴	35. How confident are you in your ability to identify signs of intimate partner psychological abuse following this workshop [Likert Scale = Not confident at all to Very confident] ²
	36. Can you list examples of each type of intimate partner psychological abuse below? - Write as many examples as you know in the columns below [Open response] ³
	37– 45 = Part B – Quiz Repeated. ⁴
Debrief - 2 minutes	Researcher thanks participants and reminds participants of their ethical rights. Students are provided with a physical debrief letter

9.2.3 Procedure

Research Day 1 | Pre-workshop-test (Time 1), Intervention and Immediate Post-test (time 2): I attended the college on the first research day, requiring a minimum uninterrupted time of 80 minutes for the full research session, including the educational workshop. During the research session, participants completed the survey sections in line with an accompanying PowerPoint presentation when prompted to in line with Table 3.2. Participants were given the distractor task worksheet to complete between survey/presentation sections if they finished a section before the allotted time.

Research Day 3 | Delayed Post-test (time 3): I returned to the college two weeks later, requiring 20 minutes of uninterrupted time with the same participants. During this time, participants completed the final part of the survey, also outlined in Table 3.2.

Both research days began with the researcher introducing the study with instructions and ethical practices and ended with the participants receiving a debrief letter.

Data Analysis

Quantitative data from the demographic and research surveys were analysed using SPSS version 26 software. Descriptive Statistics (e.g. mean and standard deviation) provide the most insightful data for this study. Pearson's R, T-tests and Chi-squared analyses were selected to test each hypothesis. Qualitative data collected through open-response questions were analysed using written counts (Chang et al., 2009; Fife, 2020), whereby a team of research assistants worked together to identify codes in participants' responses and conducted inter-rater comparisons to compare and consolidate codes from the data set of results. Thematic analysis was not used, as qualitative responses gathered were in the form of lists (participants creating lists of signs of abuse) and short sentences where participants stated which behaviour in each vignette could be considered as abusive – these lists/short statements were instead counted (i.e. the number of signs correctly listed) and marked as 'correct' or 'incorrect' (i.e. participant correctly identifies abusive behaviour in vignette). Quotes to illustrate examples of participants responses are shared.

9.2.5 Findings and discussion

9.2.5a Findings From All Adolescents

All Adolescents | *Knowledge About IPPA – Pre-Intervention*

Table 3.3 presents participants average self-rated current knowledge average, self-rated confidence to spot the signs of various forms of abuse and average number of abuse signs listed by young people.

Table 3.3

Students' self-rated knowledge and confidence to spot the signs and list different types of intimate partner abuse (N = 39).

Characteristics	Self-rated current knowledge		Self-rated confidence to spot signs of abuse		Number of signs of abuse listed by participants				
	<i>M</i> ¹	<i>SD</i>	<i>M</i> ²	<i>SD</i>	<i>Range</i> ³	<i>M</i>	<i>SD</i>	<i>Top five examples of signs listed by participants (N of participants listing sign)</i>	
Type of Abuse									
IPPA	3.9	.93	3.2	1	0-9	3	1.8	Insulting/using hurtful words (18), Gaslighting (16), Manipulation (12), Blackmailing (11), Threatening partner (8)	
Financial	3.3	.98	2.6	1.2	0-5	1.97	1.1	Controlling partners spending (17), Stealing money (15), Forcing partner to give their money (4), Forces financial dependency on partner (4), Using partner for money (4)	
Physical	4.3	.74	4.4	.6	0-9	3.21	2	Hitting (23), Punching (19), Slapping (15), Kicking (13), Using weapons/throwing items (11)	
Sexual	4.1	.83	3.4	1.1	-	-	-	-	

Note¹. Self-rated knowledge scale = 1 (no knowledge), 2 (some/limited knowledge), 3 (fair knowledge), 4 (good knowledge), 5 (very good knowledge).

Note². Self-rated confidence scale = 1 (not confident at all), 2 (slightly confident), 3 (somewhat confident), 4 (fairly confident), 5 (very confident).

Note³. Range refers to the lowest to highest number of signs of abuse listed by participants.

By conducting repeated measures one way ANOVA, a statistically significant overall difference for the dependent variables self-rated knowledge, ($F(3, 38) = 20, p < .001$), self-rated confidence ($F(3, 38) = 51.3, p < .001$), and the average number of examples of signs of abuse listed by participants ($F(2, 38) = 11.2, p < .001$), between each type of abuse (independent variable). Sphericity was tested and confirmed for each ANOVA. Accompanying least significant difference (LSD) post-hoc comparisons for each repeated measures one way ANOVA is presented in Table 3.3.1.

Table 3.3.1

Post Hoc analysis of statistically significant repeated measures one way ANOVA's - Students' self-rated knowledge, confidence to spot the signs and list different types of intimate partner abuse.

Type of Abuse	Self-rated current knowledge post hoc LSD analysis (MD)				Self-rated confidence to spot signs of abuse post hoc LSD analysis (MD)				Number of signs of abuse listed by participants post hoc LSD analysis (MD)			
	IPPA	Financial	Physical	Sexual	IPPA	Financial	Physical	Sexual	IPPA	Financial	Physical	Sexual
IPPA	-	-	-	-	-	-	-	-	-	-	-	-
Financial	.6**	-	-	-	.6**	-	-	-	1**	-	-	-
Physical	.4*	1**	-	-	-1.2**	-1.8**	-	-	-.2	1.2**	-	-
Sexual	.1	.7**	-.3*	-	-.2	-.8**	1**	-	-	-	-	-

MD = Mean Difference. ** = $p < .001$ * = $p < .05$

As shown in Table 3.3, physical abuse was the form of abuse participants seemed most knowledgeable about and most confident to spot the signs of abuse, followed by sexual abuse, then IPPA. Financial abuse was the least rated for knowledge and confidence, as well as the type of abuse that young people listed the least number of signs of. As such, **hypothesis 1** (adolescents will rate their knowledge of abuse in intimate relationships as lower for psychological abuse compared to physical, sexual, and financial abuse) is partially supported, given that psychological abuse was less understood than physical and sexual abuse, but not financial abuse than was found in this study. Based on means, students were able to list more

signs of physical abuse ($M = 3.2$) than psychological abuse ($M = 3$), however this difference was very small and not significant, thus rejecting **hypothesis two** and accepting the null hypothesis that adolescents will not be able to list more signs of physical abuse than psychological abuse .

Participants were then asked nine questions about intimate partner abuse and, specifically, IPPA. Students' scores for correct answers varied from 4 – 8, as shown in Figure 3.1 ($M = 6.4$; $SD = 1.05$). As illustrated in Table 3.4, Students were most successful with questions that asked them directly about types of IPPA

behaviours (i.e. exposing a partner to explicit content, use of non-verbal actions in IPPA, gaslighting, threatening to punch a partner), where correct responses from students range from 87.2% to 94.9% correct. Students appeared to struggle more when asked if boys experience IPPA more than girls (just 17.9% of students answered correctly), and when asked about the law surrounding coercive control, where 51.3% of students responded, 'not sure'.

Interestingly, when asked what the most common type of intimate partner abuse is, the largest proportion of participants knew that non-physical abuse was the most common form (48.7%). Behind this, 33.3% believed physical abuse was the most common, 7.7% said sexual, and 7.7% were not sure (1 participant did not respond). This, therefore, demonstrates that the majority (51.3%) of young people in the sample did not know that non-physical abuse, such as IPPA and financial abuse, are more common in England and Wales than other forms of intimate partner violence; however, a sizable portion did. These findings diverge from past research, which shows us that both adults and young people are more likely to view physical and sexual abuse as more prevalent compared to non-physical, potentially attributed to the heightened visibility of physical and sexual abuse and normalised view of IPPA (Kane et al., 2010; Keashly, 2001; Rees, 2009).

Figure 3.1

Histogram showing distribution of number of correct answers by students at Time 1.

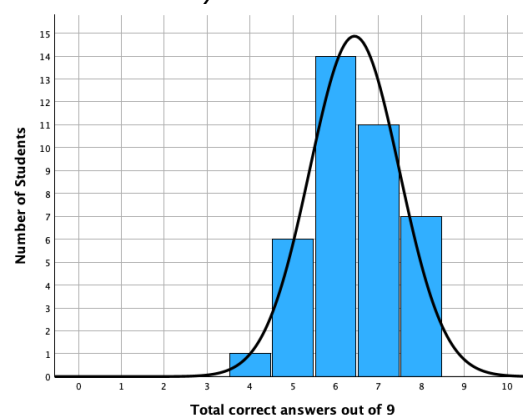


Table 3.4

Number of students correctly answering knowledge questions about IPPA before the workshop.

Knowledge Questions	Total N = 39	Correct responses		Incorrect responses		Not Sure or Prefer not to answer	
		<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
	<i>SD</i>						
1. According to official statistics, which type of intimate partner abuse is most common? (Multiple choice)	.8	19	48.7%	17	43.6%	3	7.7%
Answer: Non-physical Abuse							
2. Is the following statement true or false? “Victims of psychological abuse have a higher risk of developing depression in comparison to people who do not experience psychological abuse.”	.2	32	82.1%	3	7.7%	4	10.3%
Answer: True							
3. Is the following statement true or false? “Exposing a partner to upsetting situations such as witnessing drug abuse or sexually explicit content can be a form of psychological abuse.”	.6	37	94.9%	2	5.1%	0	0
Answer: True							
4. Is the following statement true or false? “Intimate partner psychological abuse can be non-verbal” (<i>non-verbal = not using word</i>)	.6	35	89.7%	1	2.6%	3	7.7%
Answer: True							

5.	Which statement best describes the term “ <i>Gaslighting</i> ”? (Multiple choice options provided)	.5	36	93.3%	1	2.6%	2	5.1%
	Answer: Manipulating your partner into questioning how true their own thoughts and perceptions of reality are.							
6.	Is the following statement true or false? Repeatedly or continuously controlling a partner in a relationship is illegal in England and carries a maximum prison sentence of 10 years and/or a fine.”	.7	5	12.8%	14	35.9%	20	51.3%
	Answer: False							
7.	Is the following statement true or false? “If someone thinks that they are being psychologically abused by their partner they can speak to their GP about what they are experiencing.”	.8	24	61.5%	6	15.4%	9	23.1%
	Answer: True							
8.	Is the following statement true or false? “Boys/men are more likely to experience psychological abuse in a relationship than girls/women.”	.7	17	43.6%	7	17.9%	7	17.9%
	Answer: False							
9.	Is the following statement true or false? “Threatening to punch your partner can be a form of psychological abuse.	.5	34	87.2%	3	7.7%	2	5.1%
	Answer: True							

All Adolescents | *Knowledge About IPPA – Post-Intervention*

After participating in an educational workshop about IPPA, students were asked to answer the same knowledge questions about IPPA as previously answered, self-rate their knowledge and confidence to spot the signs of IPPA again and were asked to create a new list of signs of IPPA that they are aware of. Participants were asked to do this both immediately after the educational workshop (time 2) and two weeks after the workshop (time 3). At time 3, participants were also asked to indicate whether they had received further lessons or done additional research into IPPA since the workshop to assess the extent to which outside influences may impact the Time 3 IPPA knowledge results. Overall, no participants reported that they had received further lessons or had done additional research.

Knowledge Test. Repeated t-test analysis found a statistically significant improvement between young people's knowledge during the pre-test (time 1: $M = 6.4$; $SD = 1.04$) and their test scores immediately after the workshop (time 2: $M = 8.2$; $SD = .8$) ($t(38) = 8.3$, $p < .001$). A statistically significant improvement in scores was also found between pre-testing quiz scores and scores two weeks after the workshop (time 3: $M = 7.9$; $SD = .9$) ($t(34) = 6.2$, $p < .001$), illustrating a beneficial impact of receiving educational learning about IPPA on young people's immediate and longer-term performance on an IPPA knowledge tests. As such, the statistical results support hypothesis 3, that adolescents' accuracy on a 9-question knowledge survey about IPPA will lower before attending a workshop (Time 1) compared to after attending a workshop (Time 2) and two weeks later (Time 3) .

Self-rated Knowledge. Young people felt more knowledgeable as shown in the mean values presented in Table 3.5; however, this difference was only statistically significant immediately after the session ($t(38) = 4.3$, $p < .001$) but not two weeks after the workshop ($t(34) = 1.4$, $p = .092$) according to a repeated t-test analysis.

Self-rated Confidence to Spot Signs. Using a repeated t-test analysis, an increase in participants self-rated confidence to spot the signs of IPPA was statistically significant both immediately ($t(38) = 7.4, p < .001$) and two weeks after attending the workshop ($t(34) = 3.9, p < .001$). Young people also listed more signs of psychological abuse immediately ($t(37) = -8.1, p < .001$) and two weeks later ($t(34) = -4.1, p < .001$). Associated descriptive statistics and analysis values are presented in Table 3.5. Looking solely at the mean and range values given in Table 3.5, there also appears to be a pattern whereby on all measures, participants showed improvement immediately after the session (Time 2), however (while still an improvement compared to pre-workshop results), this improvement was less profound two weeks later, indicating potentially a temporal effect taking place, but potentially also highlighting the importance of teaching students about IPPA regularly, as opposed to a one-off session, to maintain the positive impact of workshops.

Table 3.5

Students' tested knowledge, self-rated knowledge and self-rated confidence to spot the signs and performance when listing different types of intimate partner abuse, comparing results before attending IPPA workshops (Time 1) to immediately after the workshop (Time 2) and two weeks later (Time 3).

Self-rated current IPPA knowledge											
Time 1 [Baseline]				Time 2 *			Time 3				
M	SD	M	SD	t	df	Cohen's d	M	SD	t	df	Cohen's d
3.9	.9	4.7	.5	4.3	38	1	4.2	.6	1.4	34	1.1

Self-rated confidence to spot signs of IPPA											
Time 1 [Baseline]				Time 2*			Time 3*				
M	SD	M	SD	t	df	Cohen's d	M	SD	t	df	Cohen's d
3.2	1	4.4	.5	7.4	38	1	4.1	.6	3.9	34	1.3

Average number of examples of IPPA listed by participants														
Time 1 [Baseline]			Time 2 *						Time 3*					
Range	M	SD	Range	M	SD	t	df	Cohen's d	Range	M	SD	t	df	Cohen's d
ge														
0-9	3	1.8	2-12	6.5	2.2	8.1	37	2.6	0-10	5	1.7	4.1	34	2.7
NB. Cohen's d is always compared to Time 1 [Baseline]														
Performance on IPPA knowledge test														
Time 1 [Baseline]			Time 2						Time 3*					
Range	M	SD	Range	M	SD	t	df	Cohen's d	Range	M	SD	t	df	Cohen's d
ge														
4-8	6.4	1	6-9	8.2	.8	.0e0	37	2.2	6-9	7.9	.9	6.2	34	1.4
*p=<.001														

All Adolescents | Acceptance of IPPA and Recognising IPPA in Peer Relationships (Exploratory Findings)

Table 3.6 shares young people's responses to acceptability questions about each vignette scenario and their qualitative elaborations.

Table 3.6

Young people's acceptability of IPPA behaviours, number of participants able to correctly identify IPPA and physical abuse occurring in vignettes, and examples of how young people identified abuse.

Vignette perpetrator	Abuse perpetrated	Acceptability ratings of behaviour displayed		N participants correctly identified presence of IPPA		N participants correctly identified presence of physical abuse		Example quotes of responses to: 'Please tell us what parts of this scenario suggest signs of psychological and/or physical abuse.'
		M	SD	M	%	M	%	
Zion	No abuse [baseline vignette]	1.8	1	-	-	-	-	-
Jordan	Milder and Moderate IPPA	4.4	.8	24	61.5%	-	-	Participant 15. Jordan is constantly making Parker feel upset by making it seem that their relationship means nothing. Jordan keeps comparing themselves with other people as if they are single. Parker ignoring Jordan is taking

								away Jordan's right to converse with Parker even though they are in a relationship.
								<i>Participant 22.</i> While being in a relationship they are telling the other person that they'd like to be with someone else, implying that they are not good enough.
Cameron	Milder and Severe IPPA	4.8 Unacceptable	.6	37	94.9%	-	-	<i>Participant 3.</i> Cameron made JT feel like she wasn't good enough for him and his comments towards her appearance and him isolating her is emotional abuse as he's running her self-esteem and damaging her emotional wellbeing.
								<i>Participant 4.</i> Psychological abuse is shown there. Cameron calls JT horrible names EVERYDAY! Commenting on their appearance and telling them they're ashamed to chill together at school is putting them down and can mess with emotions.
Robin	Milder IPPA and Physical abuse	5 Unacceptable	.2	35	89.7%	39	100%	<i>Participant 23.</i> Arguments are being intentionally started, which can be psychologically impact shea. Robin is starting to push and shove Shea, causing them to hurt their head.
Payton	Severe IPPA and Physical abuse	4.7 Unacceptable	.9	22	56.4%	38	97.4%	<i>Participant 2.</i> Payton is pulling Lennox's hair in order to get a message across <i>Participant 7.</i> Lennox may be psychologically abusing Payton unintentionally when they talk to their ex. However, Payton is deliberately and physically abusing Lennox by pulling their hair.

Using a repeated measure one-way ANOVA analysis, a statistically significant difference was found between the number of students who were accepting of behaviours shown in the four scenarios, which contained IPPA. Sphericity was tested and confirmed for this ANOVA ($F(3, 38) = 4.7, p = .004$). Further least significant difference post-hoc comparisons for each repeated measures one way ANOVA is presented in Table 3.6.1.

Table 3.6.1

Post Hoc analysis of statistically significant repeated measures one way ANOVA's - Students' acceptability rating of abuse displayed in vignettes (Jordan, Cameron, Robin and Payton Vignettes).

Vignettes	Acceptability of vignette abuse post hoc LSD analysis (MD)			
	Jordan	Cameron	Robin	Payton
Jordan	-	-	-	-
Cameron	-.3*	-	-	-
Robin	-.5**	-.2	-	-
Payton	-.3	.02	-.2	-

MD = Mean Difference. ** = $p < .001$ * = $p < .05$

Students were generally able to distinguish when IPPA was present in the vignette being presented (present in four out of five scenarios), with 13 students (33.3%) correctly identifying IPPA in all four scenarios and 18 students (46.2%) correctly identifying IPPA in three out of five scenarios. Students also typically correctly rated the behaviour of the character perpetrating IPPA in each vignette as unacceptable or slightly unacceptable.

All Adolescents| Sources of IPPA Education and Satisfaction (Exploratory Findings)

Table 3.7 illustrates which sources of information young people reported that they had learnt about IPPA from before participating in this research and how satisfied they were with the information received from these sources. Young people had mainly learnt about IPPA from school (82.1%), social media (73.7%) and their parents (61.5%), as expected based on findings from other past studies into sex and relationships education (e.g. Fox & Ralston, 2016; Rutledge et al., 2011). Young people were unlikely to have learnt about IPPA from charities (13.2%), social workers (73.7%) and other family members such as uncles and grandparents (34.2%). Only 17.9% reported not learning about IPPA at school, indicating a stark increase in access to IPPA education at school amongst current adolescents, compared to the findings of

Study 1 (66.4%), thus supporting my earlier comment that more young people would be receiving IPPA now, since the 2019/2020 guidelines, compared to participants from Study 1 and Study 2. As shown in Table 3.7, young people were more likely to indicate that they were extremely satisfied, very satisfied or moderately satisfied rather than unsatisfied with the quality of information they had received from each source.

Table 3.7

Young people's sources of IPPA education and their satisfaction with the information received from these sources.

Sources of IPPA education accessed	Number of students who have received education through the source (Total N = 38) and their Satisfaction level with the education received from the source.											
	Did not learn about IPPA from this source / No satisfaction level provided		Had learnt about IPPA from this source									
			Not at all satisfied		Slightly satisfied		Moderately satisfied		Very satisfied		Extremely satisfied	
	N	%	N	%	N	%	N	%	N	%	N	%
School/College	7	17.9%	2	5.1%	3	7.7%	9	23.1%	13	33.3%	4	10.3%
Parents/carers	15	38.5%	2	5.1%	0	0%	6	15.4%	6	15.4%	9	23.1%
Siblings/Cousins	22	57.9%	1	2.6%	3	7.7%	4	10.3%	6	15.4%	2	5.1%
Other Family	25	65.8%	2	5.1%	1	2.6%	5	12.8%	4	10.3%	1	2.6%
Friends	16	42.1%	0	0%	7	17.9%	7	17.9%	7	17.9%	3	7.7%
Own research	11	28.9%	1	2.6%	1	2.6%	5	12.8%	5	12.8%	15	38.5%
Social Media	10	26.3%	2	5.1%	1	2.6%	4	10.3%	12	31.6%	9	23.1%
Social/Youth Worker	33	86.8%	3	7.7%	0	0%	1	2.6%	1	2.6%	0	0%
Charity	33	86.8%	2	5.1%	0	0%	1	2.6%	1	2.6%	1	2.6%
Other (a conference)	36	94.7%	0	0%	0	0%	2	5.1%	0	0%	0	0%

All Adolescents | Preferred sources of support if experiencing IPPA (Exploratory Findings)

In this study, participants were also asked to indicate who they would feel comfortable speaking to if they were worried about experiencing IPPA themselves. The results presented in Table 3.8 suggest that young people were more comfortable seeking help from their friends (76.9%) followed by their own siblings or cousins (64.1%). For all other sources (i.e. charities, social workers and police) the majority of participants (i.e. over 50%) did not indicate that they would feel comfortable seeking support or were unsure if they would seek support from these other sources. For instance, help from parents or carers was the third, most popular source (41%), while social workers and youth workers appeared at the bottom (10.3%); however, this may, in part, be because many children do not have access to social workers or youth workers in their day-to-day life, potentially impacting their perceptions of these practitioners as viable sources of support. Interestingly, we see that out of the ‘formal source’ options available (i.e. charities, police, teachers, other school staff, a dedicated healthy relationships staff member, and social/youth workers), charities appear to be the source that the largest proportion of young people would feel comfortable accessing (30.8%), whilst speaking to teachers and other school staff appeared to be low (12.8% - 20.5%) within the school used in this study.

Additionally, when young people were directly asked if they were aware of any services organisations or professionals outside the school where they could access further support or education on IPPA, 41% of students reported that they were aware of services, giving examples such as Childline (a UK based children’s safeguarding charity), the National Health Service including GP’s, young mental health charities, and the police. Unfortunately, 53.8% were unaware of any services outside of school (two participants did not respond to this question), suggesting a real gap in young people’s awareness of various formal methods to seek help if ever faced with IPPA.

Table 3.8

Number of participants felt comfortable seeking help from each source if they were worried that they might be experiencing IPPA.

Sources of IPPA help	Student responses (Total N = 39)					
	Yes		No		Not Sure	
	I would feel comfortable		I would not feel comfortable		I am not sure if I would feel comfortable	
	N	%	N	%	N	%
A friend	30	76.9%	4	10.3%	5	12.8%
A sibling or cousin	25	64.1%	10	25.6%	4	10.3%
A parent or carer	16	41%	12	30.8%	11	28.2%
A women's, children's, or abuse charity/org	12	30.8%	16	41%	11	28.2%
Another family member	9	23.1%	17	43.6%	13	33.3%
A police officer/ The police	9	23.1%	17	43.6%	13	33.3%
A teacher in my school	8	20.5%	20	51.3%	11	28.2%
A dedicated 'healthy relationships' member of staff in my school.	6	15.4%	22	56.4%	11	28.2%
A different member of staff in my school	5	12.8%	21	58.3%	13	33.3%
A social worker or youth worker	4	10.3%	24	61.5%	11	28.2%

All Adolescents| Views on delivering education and interventions (Exploratory Findings)

On average, results show that current adolescents generally believe that it is important for young people to learn about all forms of intimate partner abuse, including IPPA and were typically supportive of education on these topics coming from parents, schoolteachers, survivors of IPPA and external speakers such as healthcare or charity workers. Whilst less pronounced (average agreement rating of 3.5), young people also believed that education about IPPA can successfully reduce the number of adolescents experiencing and perpetrating IPPA, indicating that young people recognise the positive preventative impacts of IPPA education.

Table 3.9

Young people's views on how IPPA education should be delivered and the effects of IPPA education.

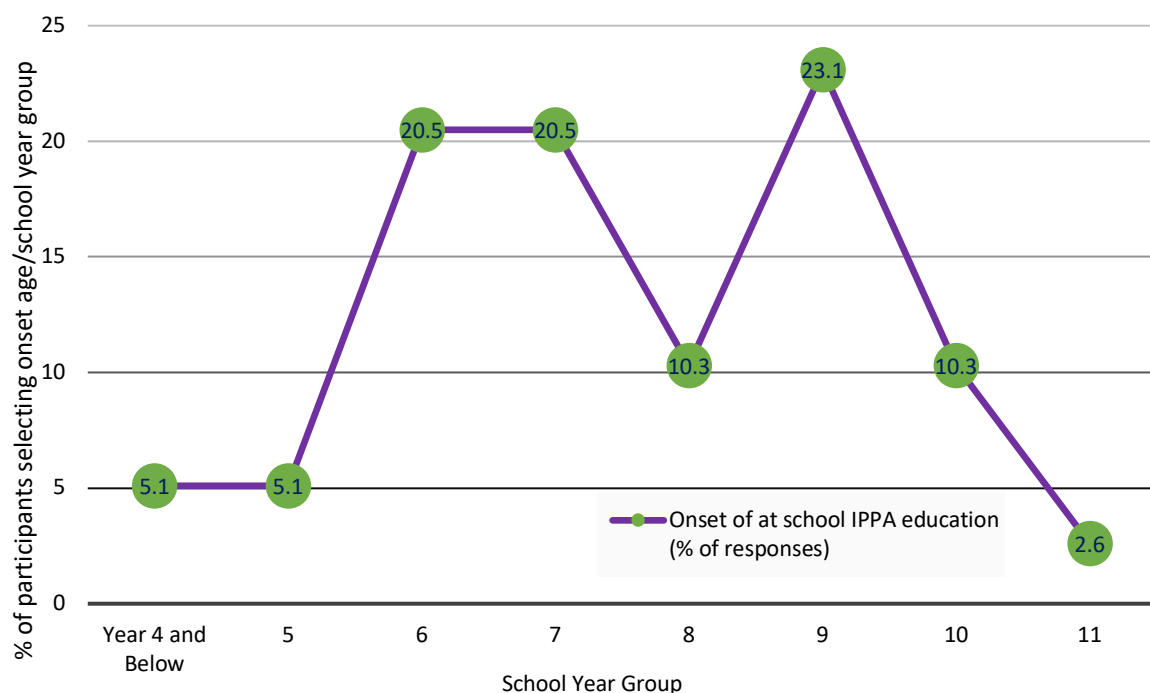
Statements	<i>M</i>	<i>SD</i>	Participant responses (<i>N</i> = 39)				
			1	2	3	4	5
			Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
Learning:							
It is important for adolescents to learn about psychological abuse in intimate relationships.	4.8	.5	0	0	1 (2.6%)	6 (15.4%)	32 (82.1%)
It is important for adolescents to learn about all forms of abuse in intimate relationships.	4.7	.4	0	0	0	10 (25.6%)	29 (74.4%)
Sources:							
Parents/carers should teach their adolescents about psychological abuse in intimate relationships.	4.4	.8	0	1 (2.6%)	6 (15.4%)	10 (25.6%)	22 (56.4%)
Parents/carers should have training on psychological abuse in intimate relationships.	3.8	1.1	1 (2.6%)	5 (12.8%)	8 (20.5%)	13 (33.3%)	12 (30.8%)
School teachers should teach adolescents about psychological abuse in intimate relationships.	4.2	.9	0	2 (5.1%)	5 (12.8%)	15 (38.5%)	17 (43.6%)

People who have previously experienced psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.	4.2	6.4	2 (0.8%)	5 (12.8%)	20 (51.3%)	7 (17.9%)	5 (12.8%)
Professionals/external speakers (such as charities, nurses and researchers) who have a good understanding of psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.	4.4	.6	0	0	3 (7.7%)	17 (43.6%)	19 (48.7%)
Impact:							
Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who experience this type of abuse (victimisation).	3.5	1.1	3 (7.7%)	2 (5.1%)	13 (33.3%)	14 (35.9%)	7 (17.9%)
Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who abuse their partners in this way (perpetration)	3.5	.9	1 (2.6%)	4 (10.3%)	13 (33.3%)	17 (43.6%)	4 (10.3%)

When adolescents were asked to think about which school year group children should begin learning about IPPA at school, the highest number of young people (23.1%) believed that year 9/age 13-14 was the ideal age. This was very closely followed by 20.5% of young people suggesting that children should begin learning about IPPA at school in year groups 6 and 7/ age 10-12. Figure 3.2 presents the distribution of participants' responses.

Figure 3.2

Participants' views on the year group that schools should start teaching children about IPPA education (N = 38).



9.2.5b Findings From Black Adolescent Girls

In the current study, convenience sampling was utilised to study all adolescent's IPPA education experiences. I believe that the results of this particular study can contribute to improving IPPA education for all adolescents, regardless of race. Nonetheless, given that this thesis focuses on the experience of Black adolescent girls, I now describe specific insights from

this research gathered from Black adolescent girls who participated in this study. As described in the introduction to this thesis, I do not wish to compare the experiences of Black adolescent girls to others. As such, I do not present analytic comparisons between Black students and non-Black students below, but rather re-explore the research questions with a focus on Black adolescent girls only. As previously shown in the demographic table on page 261 (Table 3.1), the majority of participants in this sample were Black students (N = 27; 69.2%). There were 17 Black adolescent girls (48.6% of all participants).

Black Adolescent Girls | Knowledge About IPPA – Pre-Intervention

Self-assessment and listing of signs. Table 3.10 presents self-rated knowledge, confidence to spot the signs and the number of signs of abuse listed for Black adolescent girls in the research sample.

Table 3.10

Black adolescent girls time 1 self-rated knowledge and confidence to spot the signs and list different types of intimate partner abuse (N = 17).

Characteristics	Self-rated current knowledge		Self-rated confidence to spot signs of abuse		Range ¹	Number of signs of abuse listed by participants			Examples of signs listed by participants
	M	SD	M	SD		M	SD		
Type of Abuse									
IPPA	4	.9	3	1	1-6	2.9	1.5		Gaslighting (8), Manipulation (8), Name-calling/Insulting(6), Threatening words(2), Blackmailing (2)
Financial	3	1.1	2.4	1.1	1-4	1.7	1		Limiting partners' spending (8), Taking bank account details (3), stealing money (3)
Physical	4.4	.8	4.2	.6	0-9	3	1.6		Hitting (13), Punching (8), Kicking (7)
Sexual	4	.8	3.2	1	-	-	-		-

Note¹. Range refers to the lowest to highest number of signs of abuse listed by participants.

By conducting repeated measures one way ANOVA, a statistically significant difference between each type of intimate partner abuse was found for self-rated knowledge, ($F(3, 16) = 25.1, p < .001$), self-rated confidence ($F(3, 16) = 26.5, p < .001$), and the average number of examples of different types of abuse listed ($F(2, 16) = 9.9, p < .001$). Sphericity was tested and confirmed for each ANOVA. Further least significant difference post-hoc comparisons for each repeated measures one way ANOVA is presented in Table 3.10.1.

Table 3.10.1

Post Hoc analysis of statistically significant repeated measures one way ANOVA's - Black adolescent girls self-rated knowledge, confidence to spot the signs and list different types of intimate partner abuse.

Type of Abuse	Self-rated current knowledge post hoc				Self-rated confidence to spot signs of abuse post hoc				Number of signs of abuse listed by participants post hoc			
	LSD analysis (MD)				LSD analysis (MD)				LSD analysis (MD)			
	IPPA	Financial	Physical	Sexual	IPPA	Financial	Physical	Sexual	IPPA	Financial	Physical	Sexual
IPPA	-	-	-	-	-	-	-	-	-	-	-	-
Financial	1**	-	-	-	.6*	-	-	-	1.2*	-	-	-
Physical	-.4*	-1.4**	-	-	-1.2**	-1.8**	-	-	-.2	-1.4**	-	-
Sexual	-.1	-1.1**	-.3 ⁺	-	-.2	-.8*	1**	-	-	-	-	-

MD = Mean Difference. ** = $p < .001$ * = $p < .05$ + = $p = .056$

As shown in Table 3.10, physical abuse was the form of abuse that Black adolescent girls seemed most knowledgeable and confident about the signs of across measures, followed by sexual abuse, then IPPA and lastly, financial abuse. Table 3.11 presents the number of Black adolescent girls correctly answering knowledge questions about IPPA. Overall Black adolescent girls answered 5 - 8 questions correctly ($M = 6.65$; $SD = .9$) prior to the educational workshop intervention.

Table 3.11

Number of students correctly answering knowledge questions about IPPA

Knowledge Questions	Total N = 17	Correct responses		Incorrect respondents		Not Sure or Prefer not to answer	
	SD						
	SD	N	%	N	%	N	%
1. According to official statistics, which type of intimate partner abuse is most common? (Multiple choice)	.8	9	52.9	7	41.2%	1	5.9%
Answer: Non-physical Abuse							
2. Is the following statement true or false? “Victims of psychological abuse have a higher risk of developing depression in comparison to people who do not experience psychological abuse.”	.2	16	94.1%	1	5.9%	-	-
Answer: True							
3. Is the following statement true or false? “Exposing a partner to upsetting situations such as witnessing drug abuse or sexually explicit content can be a form of psychological abuse.”	.7	13	76.5%	2	11.8%	2	11.8%
Answer: True							
4. Is the following statement true or false? “Intimate partner psychological abuse can be non-verbal” (<i>non-verbal = not using word</i>)	.5	16	94.1%	1	5.9%	-	-
Answer: True							
5. Which statement best describes the term “ <i>Gaslighting</i> ”? (Multiple choice options provided)	0	17	100%	-	-	-	-

Answer: Manipulating your partner into questioning how true their own thoughts and perceptions of reality are.

6.	Is the following statement true or false? Repeatedly or continuously controlling a partner in a relationship is illegal in England and carries a maximum prison sentence of 10 years and/or a fine.”	.8	7	41.2%	3	17.6%	7	41.2%
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Answer: False

7.	Is the following statement true or false? “If someone thinks that they are being psychologically abused by their partner they can speak to their GP about what they are experiencing.”	.8	11	64.7%	3	17.6%	3	17.6%
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Answer: True

8.	Is the following statement true or false? “Boys/men are more likely to experience psychological abuse in a relationship than girls/women.”	.7	9	52.9%	2	11.8%	6	35.3%
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Answer: False

9.	Is the following statement true or false? “Threatening to punch your partner can be a form of psychological abuse.	.7	14	82.4%	1	5.9%	2	11.8%
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Answer: True

When asked what the most common type of intimate partner abuse is, most Black adolescent girls correctly identified non-physical abuse as the most common form (52.9%) followed by physical abuse (29.4%), demonstrating that a sizable portion of Black adolescent girls are aware of the widespread prevalence of non-physical abuse (e.g. IPPA and financial abuse).

Black Adolescent Girls | Knowledge About IPPA – Post Intervention

Repeated t-test analysis successfully found a statistically significant improvement in Black adolescent girls' knowledge according to the knowledge test results about IPPA immediately after the workshop ($t(16) = 5.8, p < .001$) ($M = 6.6; SD = .8$) and two weeks after the workshop ($t(14) = 64.4, p < .001$) ($M = 8; SD = .9$).

Black adolescent girls also self-rated their knowledge as higher immediately after the session ($t(16) = 3.5, p = .002$) ($M = 4.8; SD = .4; Cohen's d = .4$), yielding a statistically significant result. Self-rated knowledge also increased after two weeks compared to pre-intervention ratings, however this was not statistically significant ($t(14) = 1.5, p = .08$) ($M = 4.4; SD = .5; Cohen's d = -.9$). Higher confidence to spot the signs of IPPA was found immediately after the session ($t(16) = 1.5, p < .001$) ($M = 3.1; SD = 1; Cohen's d = 1$), and two weeks after the workshop ($t(14) = 1.1, p = .002$) ($M = 4.5; SD = .51; Cohen's d = 1.3$).

Black adolescent girls also listed more signs of IPPA immediately ($t(16) = 5.8, p < .001$) ($M = 2.9; SD = 1.5; Cohen's d = 2.6$), and two weeks later ($t(14) = 1.6, p < .03$) ($M = 4.7; SD = 2; Cohen's d = 2.6$).

Black Adolescent Girls | *Acceptance of IPPA and Recognising IPPA in Peer Relationships*

(Exploratory Findings)

As displayed in Table 3.12, Black adolescent girls were generally capable of identifying when IPPA was present in each vignette and typically correctly indicated all the behaviours displayed as unacceptable. However, using repeated measures one-way ANOVA analysis, a statistically significant difference was not found between the number of Black adolescent girls who were accepting of behaviours shown in each scenario ($F(3, 16) = 2.4, p < .076$). Sphericity was tested and confirmed for this ANOVA.

Table 3.12

Black adolescent girls' acceptability of IPPA behaviours correctly identified IPPA and physical abuse occurring in vignettes and examples of how they identified abuse in vignettes.

Vignette perpetrator	Abuse perpetrated	Acceptability ratings of behaviour displayed		N participants correctly identified presence of IPPA		N participants correctly identified presence of physical abuse		Example quotes of responses to: 'Please tell us what parts of this scenario suggest signs of psychological and/or physical abuse.'
		M	SD	N	%	N	%	
Zion	No abuse [baseline vignette]	2.1 Slightly Acceptable	1.1	-	-	-	-	-
Jordan	Milder and Moderate IPPA	4.65 Unacceptable	.7	12	70.6%	-	-	<p><i>Participant 17.</i> It shows psychological abuse as when Jordan says, 'Wouldn't me and Charlie make a beautiful couple?' it could make Parker feel less of themselves.</p> <p><i>Participant 22.</i> In the scenario, it states that Jordan speaks about the people in school that they find attractive; this may impact Parker's self-esteem as they feel disrespected in the relationship and may believe that they are not good enough for Jordan; this could lead to Parker's mental health deteriorating</p>

Cameron	Milder and Severe IPPA	4.9 Unacceptable	.2	10	100%	-	-	<p><i>Participant 16.</i> This shows signs of psychological abuse, as Cameron's actions can cause JT to feel down and upset. It could also have an impact on JT's mental health.</p> <p><i>Participant 17.</i> There is psychological abuse as JT is exposed to hearing Cameron ridicule them all the time about their appearance, and Cameron calls JT names. This is psychological abuse, as JT's mental health may decline due to constant ridicule and humiliation.</p>
Robin	Milder IPPA and Physical abuse	5 Unacceptable	.0e	15	88.2%	17	100%	<i>Participant 30.</i> Starting arguments with no regrets, pushing and shoving
Payton	Severe IPPA and Physical abuse	4.8 Unacceptable	.5	10	58.8%	17	100%	<p><i>Participant 18.</i> It can be a sign of emotional abuse as Lennox may feel restricted to do certain things, and Payton's behaviour is controlling. Pulling Lennox's hair is a sign of physical abuse.</p> <p><i>Participant 19.</i> Payton conditioning (or trying to) Lennox to not talk to their ex by physical abuse (pulling their hair)</p>

Black Adolescent Girls | Sources of IPPA Education and Satisfaction (Exploratory Findings)

Table 3.13 illustrates which sources of information Black adolescent girls had learnt about IPPA prior to participating in this research and how satisfied they were with the information received from these sources. Black adolescent girls had mainly learnt about IPPA from social media (88.2%), school (82.4%) and friends (70.6%), and were unlikely to have learnt about IPPA from a charity (11.8%), a social of youth worker (17.6 %) and other family members (23.5%). As shown in Table 3.13, Black adolescent girls were more likely to indicate that they were extremely satisfied, very satisfied or moderately satisfied rather than unsatisfied with the quality of information they had received from source. Interestingly, Black adolescent

girls were often extremely satisfied when they had done their own research to learn about IPPA rather than relying on anyone else to teach them about IPPA.

Table 3.13

Black adolescent girls' sources of IPPA education and their satisfaction with the information received from these sources.

Sources of IPPA education accessed	Number of students who have received education through source (Total N = 17) and their Satisfaction level with the education received from the source.											
	Did not learn about IPPA from this source / No satisfaction level		Not at all satisfied		Slightly satisfied		Moderately satisfied		Very satisfied		Extremely satisfied	
	N	%	N	%	N	%	N	%	N	%	N	%
School/College	3	17.6%	0	0%	2	11.8%	4	23.5%	7	41.2%	1	5.9%
Parents/carers	7	41.2%	0	0%	0	0%	3	17.6%	3	17.6%	4	23.5%
Siblings/Cousins	11	64.7%	1	5.9%	0	0%	2	11.8%	3	17.6%	0	0%
Other Family members	13	76.5%	0	0%	0	0%	2	11.8%	2	11.8%	0	0%
Friends	5	29.4%	0	0%	2	11.8%	6	35.3%	3	17.6%	1	5.9%
Own research	7	41.2%	0	0%	0	0%	1	5.9%	3	17.6%	6	35.3%
Social Media	2	11.8%	0	0%	1	5.9%	2	11.8%	7	41.2%	5	29.4%
Social/Youth Worker	14	82.4%	2	11.8%	0	0%	0	0%	1	5.9%	0	0%
Charity	15	88.2%	1	5.9%	0	0%	0	0%	1	5.9%	0	0%

Whilst 66.4% of Black women in Study 1 of this thesis reported that they had previously, prior to the introduction of the latest RSE guidelines for schools (DfE, 2019) not learnt about IPPA at school at all, in this school-based study, only 17.6 % of 16–17-year-old Black adolescent girls currently in mainstream education had not learnt about IPPA at school indicating a stark increase in access to IPPA education at school between theses samples. This therefore supports my earlier comment/hope that there would be evidence that more young people and more specifically Black adolescent girls would be receiving IPPA education in school since the 2019/2020 guidelines were introduced and implemented. Nonetheless, as

82.4% (rather than 100%) of Black girls reported learning about IPPA, these findings simultaneously highlight the importance of improving IPPA education at school to ensure that more/every Black adolescent girls receives satisfactory formal IPPA education.

Table 3.13 also shows us that of the 58.8% of Black adolescent girls who had learnt about IPPA from their parents/carers, 100% of them were moderately, very or extremely satisfied with the information they received from their parents/carers. This is again a warming improvement from the reported poor satisfaction (66.4% unsatisfied) levels amongst Black women in Study 1 of this thesis (page 165). Nonetheless, more work is needed to increase the number of parents discussing issues like IPPA at home with their adolescents and ensure that these discussions are useful and satisfactory for more/all Black adolescent girls.

Black Adolescent Girls | Preferred Sources of Support if Experiencing IPPA (Exploratory Findings)

When asked to indicate who they would feel comfortable speaking to if they were worried that they were experiencing IPPA themselves, Black adolescent girls tended to show more comfort with speaking to a friend (82.4%), a sibling or cousin (58.8%) or a parent/carer (41.2%), aligning with past studies which show that Black girls and women are more likely to seek informal support inside their personal circle rather than formal help (Monterrosa, 2021). Apart from charities, where 29.4% of Black adolescent girls would feel comfortable seeking help, all other sources listed had under 20% of Black adolescent girls reported that they would feel comfortable approaching these sources for help (Table 3.14). Black adolescent girls were least interested in seeking support from a dedicated healthy relationships member of staff at school (5.9%), a non-teaching member of staff at school if there were one available (5.9%) and youth or social workers (11.8%).

As explored in past literature, factors such as a preference to deal with issues privately (Anitha, 2008; Monterrosa, 2021; Office of National Statistics, 2019), mistrust or negative past experiences with formal services (Sualp et al., 2020; Vil et al., 2022), and potentially the impacts of strong Black girl and Sapphire stereotypes (Debnam, 2021; Donovan & West, 2015) may play a role in explaining the discomfort in seeking support from most formal sources amongst Black adolescent girls in this sample. However, this is just speculation as an assessment based on past literature, however the impacts of these factors were not investigated in this study and further enquiry would be needed through future research to draw such conclusions.

Table 3.14

Number of Black adolescent girls who reported feeling comfortable seeking help from each source if they were worried that they might be experiencing IPPA.

Sources of IPPA help	Student responses (Total N = 17)					
	Yes		No		Not Sure	
	I would feel comfortable		I would not feel comfortable		I am not sure if I would feel comfortable	
	N	%	N	%	N	%
A friend	14	82.4%	1	5.9%	2	11.8%
A sibling or cousin	10	58.8%	5	29.4%	2	11.8%
A parent or carer	7	41.2%	5	29.4%	5	29.4%
A women's, children's, or abuse charity/organisation	5	29.4%	6	35.3%	6	35.3%
A teacher in my school	3	17.6%	10	58.8%	4	23.5%
A police officer/ The police	3	17.6%	7	41.2%	7	41.2%
Another family member	3	17.6%	9	52.9%	5	29.4%
A social worker or youth worker	2	11.8%	9	52.9%	6	35.3%
A dedicated 'healthy relationships' member of staff in my school.	1	5.9%	11	64.7%	5	29.4%
A different member of staff in my school	1	5.9%	10	58.8%	6	35.5%

When asked if they were aware of any services, organisations or professionals outside the school where they could access further support or education on IPPA, just 35.5% of Black adolescent girls were aware of services, largely naming Childline as a potential source. Unfortunately, 64.7% were unaware of any services outside of school or skipped the question.

Black Adolescent Girls | Views on delivering education and interventions (Exploratory Findings)

Table 3.15 indicates that Black adolescent girls in this sample generally strongly agree that it is important for adolescents to learn about all forms of intimate partner abuse and IPPA. Black adolescent girls strongly agreed that parents and carers should teach their adolescents about IPPA (average agreement rating of 4.4), with similar levels of support for schoolteachers (average agreement rating of 4.3) and professional external speakers (average agreement rating of 4.2) teaching adolescents about IPPA, as presented in Table 3.15.

Black adolescent girls appeared to neither agree nor disagree that IPPA education would reduce victimisation or perpetration of IPPA in adolescent relationships. This perhaps indicates that Black adolescent girls see additional issues outside of education (and therefore not addressed by school education) which also contribute to IPPA experiences. This would again, be a good line of enquiry for future research, which could further investigate what other factors and interventions Black adolescent girls consider to be important in order to fully tackle the issue of IPPA.

Table 3.15

Black adolescent girls' views on how IPPA education should be delivered and the effects of IPPA education.

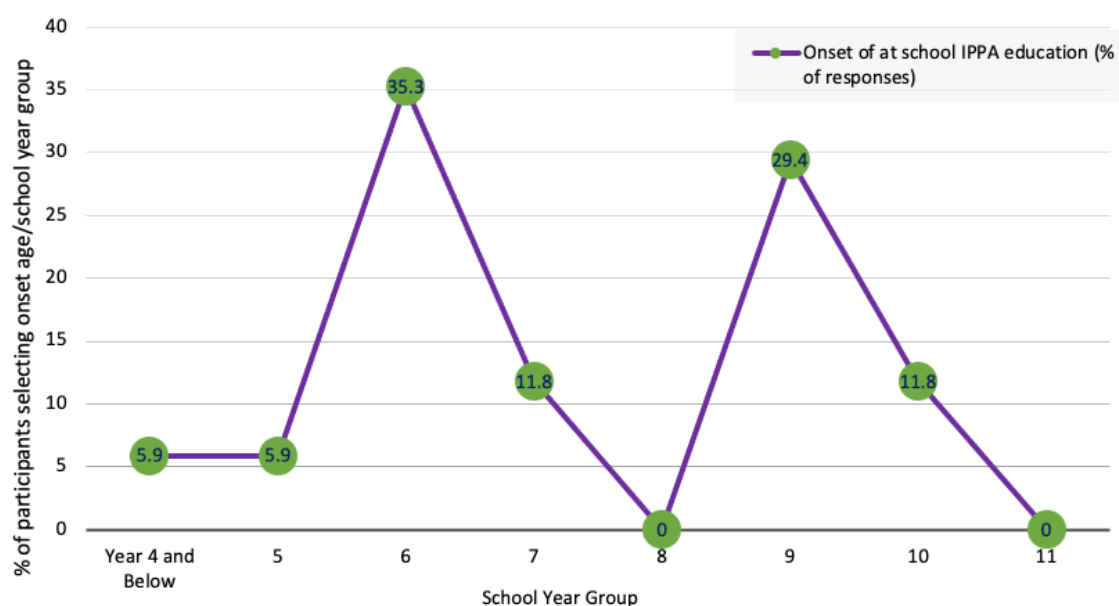
Statements		Participant responses (<i>N</i> = 17)					
	<i>M</i>	<i>SD</i>	1 Strongly Disagree	2 Disagree	3 Neither	4 Agree	5 Strongly Agree
Learning:							
It is important for adolescents to learn about psychological abuse in intimate relationships.	4.8	.4	0	0	0	4 (23.5%)	13 (76.5%)
It is important for adolescents to learn about all forms of abuse in intimate relationships.	4.8	.4	0	0	0	3 (17.6%)	14 (82.4%)
Sources:							
Parents/carers should teach their adolescents about psychological abuse in intimate relationships.	4.4	.7	0	0	2 (11.8%)	6 (35.3%)	9 (52.9%)
Parents/carers should have training on psychological abuse in intimate relationships.	3.8	1	0	1 (5.9%)	3 (17.6%)	10 (58.8%)	3 (17.6%)
School teachers should teach adolescents about psychological abuse in intimate relationships.	4.3	.9	0	1 (5.9%)	1 (5.9%)	7 (41.2%)	8 (47.1%)
People who have previously experienced psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.	3	.7	0	3 (17.6%)	11 (64.7%)	2 (11.8%)	1 (5.9%)
Professionals/external speakers (such as charities, nurses and researchers) who have a good understanding of psychological abuse in intimate relationships should come into schools to educate adolescents on this topic.	4.2	.6	0	0	1 (5.9%)	11 (64.7%)	5 (29.4%)
Impact:							
Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who experience	3.2	1	1 (5.9%)	2 (11.8%)	9 (52.9%)	3 (17.6%)	2 (11.8%)

this type of abuse (victimisation).								
Providing adolescents with education about psychological abuse in intimate relationships would reduce the number of adolescents who abuse their partners in this way (perpetration)	3.2	.9	1 (5.9%)	2 (11.8%)	6 (35.3%)	8 (47.1%)	0 (0%)	

Finally, when asked when schools should begin teaching young people about IPPA, we see slightly more variability in the year groups being suggested compared to Black women's responses in Study 1 (page 168). Black women most frequently indicated that adolescents should learn about IPPA at school from age 11-12/year group 7 (21%), whilst in the current study, Black adolescent girls most frequently suggested that age 10-11/year 6 (35.3%) is the ideal age, followed by age 13-14/year group 9 (29.4%). Figure 3.3 presents the distribution of Black adolescent girls' responses. Future research may explore reasons for differences in views on when IPPA should be taught in schools, which would perhaps uncover insights into what factors affect young people's judgements on age of delivery.

Figure 3.3

Black adolescent girls' views on the year group are that schools should start teaching children about IPPA education (N = 17).



9.3 Summary

Overall, this empirical study has aided in creating the first set of insights about current adolescents in England knowledge about IPPA, how they learn about IPPA and their views on who they would feel comfortable seeking help from for IPPA. Adolescents' opinions on who should teach young people about IPPA and their perceptions about how effective IPPA education in for reducing victimisation were also gathered. Not only has this study aided in addressing the hypotheses created, it has also provided a wealth of additional exploratory findings associated with each overarching research questions, which can be used as initial insights to guide more comprehensive studies into IPPA and adolescence, but can also be used as an informative step in designing educational programs/interventions on IPPA.

9.3.1 Answering Research Question 1 | How accurate are adolescents' knowledge and ability to identify signs of psychological abuse?

Findings show that adolescents typically self-rate their knowledge about IPPA as higher than the knowledge of financial abuse but lower than the knowledge of physical and sexual abuse. The same pattern persists when asked to rate their confidence to spot the signs of intimate partner abuse. The first hypothesis, 'Adolescents will rate their knowledge of abuse in intimate relationships as lower for psychological abuse compared to physical, sexual, and financial abuse,' was therefore partially supported as participants self-rated their knowledge of psychological abuse less than physical and sexual abuse, but more than financial abuse.

When more objectively measured using an IPPA knowledge quiz and asking adolescents to create lists of the signs of different forms of abuse that they are aware of, we see that adolescents can list more examples of IPPA than financial abuse but slightly fewer examples than physical abuse. Hypothesis 2, 'Adolescents will be able to list more signs of physical abuse than psychological abuse,' was therefore supported as a result of these findings.

This aligns with past literature, which indicates that the public generally has a greater understanding of and ability to identify physical forms of abuse over non-physical or more covert forms of abuse (Francis & Pearsons, 2021; Gurm & Marchbank, 2020; Kippert, 2015; Safe Lives, 2019).

When specifically delving more closely into the results of Black adolescent girls within this school-based sample, this pattern of self-rating knowledge and confidence, as well as the more objective measures of IPPA knowledge tests, display the same patterns of results.

9.3.2 Answering Research Question 2 | Does attending a workshop about IPPA improve the accuracy of adolescents' knowledge and confidence in their ability to identify signs of IPPA?

Attending an educational workshop successfully improved young people's average performance scores on the IPPA quiz. Improvements were statistically significant two weeks after the workshop, providing evidence consistent with the third and final hypothesis that 'Adolescents' accuracy on a 9-question knowledge survey about IPPA will lower before attending a workshop (time 1) compared to after attending a workshop (time 2) and two weeks late (time 3))'.

Participants' self-rated knowledge and confidence in spotting the signs of IPPA also appeared to increase after the workshop. Together, these results demonstrate the advantageous impact of receiving education about IPPA on Black adolescent girls and all adolescents' performance on an IPPA knowledge test. These findings are supported by numerous literatures on the benefits of relationship (and sex) education for young people, whereby past literature also shows educational intervention increases young people's knowledge and ability to recognise unhealthy relationships behaviours (Adler-Baeder et al., 2007; Gardner & Boellaard, 2007; Lundgren & Amin, 2015; Moskovic et al., 2008; Owen, Antle & Quirk, 2016; Pomeroy et al., 2011; Pound et al., 2017; Simpson et al., 2017; Wolfe et al., 2003).

9.3.3 Answering Research Question 3 | What behaviours related to IPPA do adolescents view as acceptable and unacceptable in intimate adolescent relationships?

Students could generally distinguish when IPPA was present in the vignette and typically correctly labelled IPPA acts in vignettes as unacceptable or slightly unacceptable behaviours. On average, participants rated milder (e.g. criticising partners' physical looks) and moderate (e.g. pointing out others as more attractive than partner) forms of IPPA as slightly unacceptable to unacceptable, whilst vignettes which involved severe IPPA (e.g. calling partner derogatory names) or examples IPPA cooccurring with physical abuse (e.g, pulling partners hair) as distinctly unacceptable. This is contrary to results found in several studies, which sometimes highlight that young people view some IPPA acts such as (monitoring whereabouts, losing their temper at a partner and making belittling comments) as acceptable (e.g. Haglund et al., 2018; Kane et al., 2010; Sears et al., 2007), but aligns with Francis and Pearson (2021) research, which showed that young people are typically good at recognising abuse (but regularly feel unequipped with tools to address with the abuse or seek help).

9.3.4 Answering Research Question 4 | What are adolescents' views on education and support surrounding psychological abuse?

Overall, adolescents reported that before taking part in this research, they had predominantly learnt about IPPA from school (82.1%), social media (73.7%) and their parents (61.5%), as generally expected based on findings from other past studies into how young people learn about sex and relationships (e.g. Fox & Ralston, 2016; Rutledge et al., 2011). Young people were unlikely to have learnt about IPPA from charities (13.2%), social workers (73.7%) and other family members such as uncles and grandparents (34.2%). For Black adolescent girls specifically, they reported mainly learning about IPPA from social media (88.2%), school (82.4%) and friends (70.6%). When asked who should be teaching young

people about IPPA, most adolescents typically agreed or strongly agreed that parents, schoolteachers, survivors of IPPA, and external speakers (such as healthcare and charity workers) should be involved in teaching young people about IPPA, with most young people also agreeing that IPPA education would reduce the number of adolescents experiencing and perpetrating IPPA.

Lastly, this study also went beyond the original questions of focus by also asking adolescents about who they would feel comfortable seeking help from if they were experiencing IPPA. Past research tells us that when young people do seek help, they are far more likely to seek help from informal sources, such as friends, if they were worried about their relationships or sex (e.g. Ashley & Foshee, 2005; Daw et al., 2022; Rowe et al., 2014; Fortune et al., 2008; Fry et al., 2013), with some studies also indicating a preference to speak to parents when young people are faced with relationship abuse (e.g. Daw et al., 2022; Elias-Lambert et al., 2013). In line with this, the results of this study found that young people were overwhelmingly more comfortable seeking help from their friends, siblings or cousins, and parents. Most adolescents appeared to be unaware of other formal services outside of school that could help them with IPPA. This indicates a sizeable gap in the extent to which information about formal sources available is being communicated to young people, which is known to have a knock-on effect by reducing the probability of a victim of abuse seeking formal help (Francis & Pearson, 2021; Phipps, 2013).

9.4 Methodological limitations

Some methodological designs in this study, upon reflection, should be improved for future studies. Firstly, sample size. When designing this research, I initially aimed to sample over 360 14 to 18-year-olds; however, due to difficulties in receiving responses from schools, as well as

parameters put in place by the University College (CHMLS) ethics board which created further barriers and delays, I was only able to collect data from one school. Fortunately, Cohen's d effect size analysis garnered acceptable levels for statistical analysis; however, I recognise that the study's results therefore have limited generalisability beyond the sample used. Nonetheless, the deep and novel insights collected through this small sample can catalyse future research and provides a foundation of knowledge on IPPA education in England, which has previously been absent from the literature.

Other methodological limitations include issues surrounding the measurement tools used. For instance, when asking participants to list examples of psychological, physical and financial abuse. Typically, there are fewer individual signs of financial abuse, meaning that by nature, students would have been unable to create a longer list of signs of financial abuse signs compared to physical abuse or IPPA signs, which both have far more signs. As such, comparing knowledge on different types of abuse, based on participants ability to create longer lists, faces validity issues. Whilst this approach creates issues when comparing different categories of abuse, using list-making as a measurement was successful when comparing participants' knowledge of IPPA signs before and after receiving an educational workshop, as the same type of abuse (IPPA) was being measured at each time point.

Lastly, there is some concern surrounding practice effect. Although the order in which vignettes and quiz questions were presented to each group of adolescents was randomised at each time point, as the quiz questions were identical for pre-and post-workshop testing, there is the risk of young people simply memorising the answers to questions. Whilst this is a credible limitation of the study when viewed as an individual measurement tool, the fact that this study used several measurement tools to measure knowledge (i.e. quiz questions as well as ability to list signs of IPPA and self-rated knowledge and confidence levels), this criticism becomes less

pronounced. This triangulation of measurements, paired with the fact that participants' knowledge appeared to improve across all three measures, increased confidence in my ability to draw conclusions regarding the efficacy of the educational workshop based on several measures.

9.5 Future Recommendations

Overall, the findings of this study are specifically helpful in informing the future of IPPA education. Those constructing interventions and education should consider how young people are currently learning about IPPA, young people's satisfaction with receiving IPPA education from different sources, including school, social media and parents/carers, and young people's preferences for how IPPA should be taught in schools. Due to the limited sample size presented in this study, I recommend that future replications of this study take place with larger sample sets and possibly nationwide, with representative youth samples. More specifically, whilst young people have shared their preferences for IPPA education delivery, the reasons behind their responses have not yet been explored in this research. As such, I recommend even further methodological triangulation by encompassing more opportunities for qualitative data collection, perhaps by young people being interviewed about their views on future IPPA education in a similar way that Black women were able to discuss and explain the views through focus groups and interviews in Study 2 of this thesis.

9.6 Conclusions

Whilst past literature into teen dating, relationships, and sex education, and IPPA as a whole may give the impression that young people are likely to face difficulties in recognising the signs of an IPPA and labelling such behaviours as unacceptable, this study shows that 16 to 19-year-olds adolescents in England may have a relatively good understanding of IPPA and

the signs of IPPA. This paper also illustrates the positive impacts of providing young people with robust IPPA information through an educational workshop, where the workshop was found to improve young people's knowledge as well as their confidence to spot the signs of IPPA. Overall, this paper supports the implementation of educational workshops for adolescents about IPPA and improved information for young people about how to access formal sources of support.

Study 4

Unhealthy Adolescent Relationships: A Mixed Methods Study into Intimate Partner Psychological Abuse of Black Adolescent Girls.

10. 1 About Study 4

Little is known about how IPPA is experienced by Black adolescent girls in England. Whilst ONS data provides quantitative insights into the rates of Black women affected by domestic violence (3.5% of cases- ONS 2023a), this data does not provide in-depth detail about what these experiences look like, nor does ONS data (2023a; 2023b) provide intimate partner violence rates for adolescents below the age of 16 years old. Furthermore, there are currently no empirical studies, which has specifically studied IPPA experiences of Black adolescent girls in England.

As discussed in Chapter 5 Part One (Factors Affecting IPPA Experiences), experiences of IPPA for Black adolescent girls in England may be affected by unique factors related to racial, cultural and societal variables. For instance, abuse directed towards Black adolescent girl may uniquely be motivated by misogyn~~noir~~, a form of misogyny that is simultaneously connected to anti-Black racism and biases about Black women (Bailey, 2016; Bailey, 2021; Bailey & Trudy, 2018). Some intimate partners may hold negative stereotypes about Black girls, such as beliefs that they are sexually promiscuous or hypersexualised views of Black girls (Jezebel stereotypes - Collier et al., 2017; West, 1995) or beliefs that Black girls are aggressive (Sapphire stereotypes - Ward et al., 2023; West, 1995). In addition to this, the strong Black girl stereotype may result in some partners/abusers holding the belief that Black adolescent girls are strong, independent and resilient, capable of handling violence and abuse directed towards them. As such, these stereotypes, in some circumstances may affect the nature of abuse experienced. For instance, beliefs in the Jezebel stereotype may prompt a partner to call a Black adolescent girl

derogatory names in an attempt to sexually shame her, or beliefs in Sapphire stereotypes may make a partner feel as though it is appropriate to deal with conflict in a violent manner due to his false bias that a Black adolescent girl will also be aggressive towards him.

Adultification of Black adolescent girls (treating a Black girl as more mature than other children her age), may also contribute to IPPA experiences during adolescence, whereby some Black adolescent girls may be targeted by older partners who perceive them as adultlike ((Burton, 2007; Davis & Marsh, 2020; Thompson, 2020). As discussed by Thompson (2020), adultification biases are sometimes also linked the Jezebel stereotypes, whereby older partners may view Black adolescent girls as more sexually available than other girls, which in some cases fuels predators and groomers to target these girls for intimate relationships or exploitation. As such, some stories of IPPA towards Black adolescent girls may involve perpetration from older partners and may involve participants being exposed to adult themes like alcohol use and sexual activity before the legal age limit. Additionally, if the Black adolescent girl is adultified by their teachers, parents and other adults around them, they may end up staying in abusive relationships for longer, as a result of these adults not supporting or safeguarding the girls based on the presumption that she is mature enough to independently deal with the situation she is facing.

As found in the Study 2 (How we didn't learn about psychological abuse: Interviews and focus groups with Black women), Black women shared the view that having a lack of IPPA education as an adolescent directly linked to being unable to spot the signs of IPPA. As the majority of Black women in both Study 1 and Study 2 had not learnt about IPPA at school and were not satisfied with the information about IPPA received from their parents, a gap in ability to spot the signs of IPPA occurring, may have contributed to Black women's experiences of IPPA, whereby they may have not realised that they were being abused.

In study 4 I aim to learn about how IPPA manifests during adolescence for Black girls in England. This is achieved by conducting surveys and interviews with Black women (age 18 and over) about their retrospective accounts of experiencing IPPA during adolescence. I used adults participants rather than current adolescents, for ethical reasons (i.e. to avoid asking adolescents under 18 to share sensitive and potentially current experiences of abuse for the purpose of research). This study is designed to fill gaps in literature surrounding how IPPA manifests in the context of being a Black adolescent girl growing up in England, taking into account the unique influences of intersectional cultural norms and influences of both African and Caribbean heritage and English education and cultural systems. Study 4 seeks to answer the research question, **What are the stories and experiences of Black women who experienced IPPA during adolescence?**

10.2 Methods

10.2.1 Participants

A mixed methods approach was used to address the research question, involving a cross-sectional quantitative survey ($N = 68$) and semi-structured interviews ($N = 13$).

For the semi-structured interview portion of this study, 13 (M age = 28.23, $SD = 4.4$; Black $N = 11$, mixed-Black ethnic background $N = 2$) women participated. All semi-structured interview participants were recruited via email, having previously opted in to being contacted again after taking part in studies 1 and 2 of this thesis. These participants received a £20 gift card as remuneration for participating in the interview portion of this study, which took approximately one hour and 45 minutes to complete. Interview participants were also provided with optional access to free counselling sessions with a partnering counselling provider.

All 13 women from the semi-structured interview portion of this study also completed the survey portion of the study. An additional 55 women were then recruited through Prolific

(prolific.com) to participate in the survey portion of this study only. In total 64 Black and four mixed-Black ethnic background women, aged 20 and over (M age = 32.22, SD = 9.09) participated. Survey participants recruited through prolific were reimbursed £3 for completing the survey portion of the study which took approximately 20 minutes to complete.

A demographic survey was used to gather information about participants' age, ethnic background, and if there were any periods of three or more months where they did not live in England between the ages of 10 and 19. Only three participants reported living outside of England, two did not provide additional information on where they were living during this period whilst one reported living in Ghana for 1.5 years from age 13. A further breakdown of demographic data is presented in Table 4.1. By including these inclusion criteria, this research was able to focus on IPPA experiences in the context of being a Black adolescent girl living in England, which may have had a unique impact on what the participants experienced.

Table 4.1

Sociodemographic Characteristics of Participants

Characteristics	Full Sample		Interview Only Sample	
	N = 68		N = 13	
	<i>n</i>	<i>%</i>	<i>n</i>	<i>% within interview sample</i>
Age				
20 – 24	15	22.1	3	23.1
25 – 29	16	23.5	6	46.2
30 – 34	16	23.5	3	23.1
35 - 39	11	16.2	1	7.7
40 - 44	2	2.9	0	0
45 - 49	2	2.9	0	0

50 - 54	4	5.9	0	0
55 - 60	2	2.9	0	0
Ethnic background ^a				
Black African	29	42.7	5	38.5
Black Caribbean	32	47.1	6	46.2
Black African and Caribbean	3	4.4	0	0
Mixed Black African	1	1.5	1	7.7
Mixed Black Caribbean	3	4.4	1	7.7

This study was funded by the Doctoral Researcher and through the Doctoral Research Fund at the Department of Life Sciences, Brunel University London., London. Research protocols were designed to adhere to APA and BPS ethical guidelines and were reviewed and approved by the Brunel University College of Health, Medicine, and Life Sciences Research Ethics Committee.

10..2.2 Materials and Procedure (MP)

The following research materials were presented to and completed by participants in the stated order. MP1 – MP4 was presented to **all** participants (i.e. survey and semi-structured interview participants), whilst MP5 – MP8 was presented to semi-structured interview participants only.

Once the research materials were developed and reviewed by two academic colleagues and the Brunel CHMLS Ethics Committee, the materials were piloted with two research assistants, who also met the studies participant inclusion criteria, to assess that questions and instructions were clear and suitable. Amendments were made accordingly.

Survey Procedure

MP1. Participant information sheet (PIS) and consent form – The PIS contained details about the study, ethical concerns, and participant rights (e.g., confidentiality, right to withdraw, intended use of data collected). Participants were asked to read the PIS and complete a consent completed online via Qualtrics.com.

All participants consented to having their data pseudonymised, stored, published and used in future research in line with University's data retention policies. All participants also consented to the researcher using pseudonymised and non-attributable quotes from their responses. Interview participants additionally consented to having their interview audio recorded and the researcher keeping a copy of the storyboard that they would create during the interview session which would then be deleted after each participant's responses/story was fully transcribed by the researcher. Participants also consented to their email addresses being shared with a University administrator to process their remuneration payment. The consent form also included questions to confirm participants' eligibility to participate.

MP2. Demographic Survey – A demographic survey was used to gather information about participants' age, ethnic background, and if there were any periods of three or more months where the participant did not live in England between the ages of 10 and 19.

MP3. Quantitative assessment of experiences of psychological abuse using the Measure of Psychologically Abusive Behaviours (MPAB) Follingstad (2011) - To assess participants' experiences (victimisation only - not perpetration) of psychological abuse in intimate relationships when they were adolescents the MPAB (Follingstad, 2011) was used. This 42-item scale distinctively identifies cases of psychological maltreatment that can be constituted as abusive (e.g. intentionally turning neutral interactions into arguments with the purpose of creating conflict) and does not include items that would be viewed as usual couple conflict (e.g. having a mild disagreement about money; Follingstad et al., 2015). Follingstad (2011) tested the reliability and validity of the MPAB scale using a nationally representative sample (U.S.) of 649 men (51%) and women (49%) with 11% of participants identifying as African American. Only gender significantly impacted participants' ratings of the seriousness of each item on the MPAB, with women overall rating IPPA behaviours more serious than men. Other demographic variables such as age, race and religiosity did not significantly impact participants' ratings. As

such, I can be reasonably confident that this assessment tool is capable of reflecting most of Black women's experiences of IPPA. Items from the MPAB (Follingstad, 2011) are grouped into 14 distinct categories, each representing a cluster of IPPA behaviours: *sadistic, threats, isolating, manipulation, public humiliation, verbal abuse, wound through sexuality, threat as inferior, hostile environment, monitoring, wound through fidelity, jealousy, withheld emotional/physical, and control personal decisions*. Each category contains three items, representing either a *milder, moderate, or severe* IPPA act. It is important to note that *milder* does not refer to 'mild' abuse but is rather intended to illustrate that items which as rated as milder were 'less severe' when compared to other expressions of psychological abuse but still abhorrent. For instance, for the category *threats*, the items '*Threw a temper tantrum as a way to frighten you*' (milder), '*Verbally threaten to physically harm you or make a gesture that seemed physically threatening as a way to frighten you*' (moderate) and '*Threaten to kill you as a way to frighten you*' (severe) represents three examples of how a partner might use threatening behaviour as a form of IPPA with differing levels on intensity.

Participants are asked to respond to each statement of the MPAB by selecting *No* (1), *Yes* (2), or *Prefer not to say* (0) in response to the question "*Did any of your intimate partners between the ages of 10 and 19 exhibit any of these psychologically abusive behaviours towards you?*" A total IPPA score was calculated for each participant based on their responses to each item. For each of the MPAB items, where participants responded 'Yes' (indicating that they had experienced this IPPA behaviour in an adolescent relationship) this represented one tally towards each participant's IPPA total (maximum score of 42) and IPPA subcategories totals (maximum score of 3 per category). Higher scores, therefore, were indicative of a participant experiencing more different IPPA behaviours during adolescence but does not measure the frequency of that these behaviours were encountered.

A Cronbach's alpha of the MPAB scale returned a reliability statistic of .98 with strong internal consistency, and split-half comparisons were also found for the categories created (Follingstad, 2011).

MP4 Survey Debrief letter – A debrief letter containing a reminder about ethical rights, information about how the research data will be used and details of recommended charities for further support if negatively impacted by the research were provided.

Semi-structured Interviews Procedure (Women's Stories)

MP5 Interview Invitation – As all participants ($N = 13$) who expressed interest in participating in the semi-structured interviews also indicated that they had experienced at least one IPPA act in an adolescent relationship (i.e., by responding “yes” to at least one of the behaviours included in the MPAB), they were all eligible to continue onto the semi-structured interview portion of this study. These 13 participants indicated that that they had experienced 3 - 29 ($M = 18$; $SD = 8.3$) of the behaviours in the MPAB (Follingstad, 2011) were present in their adolescent relationships.

After completing the research survey, participants were contacted via email to schedule an interview time. Participants were emailed a booking confirmation, Zoom meeting link and a link to a password-protected digital storyboard hosted on padlet.com (See MP6 and Figure 1.1).

MP6 Interview Introduction and Digital Story Board – Upon arrival at the online interview, participants were reminded of the purpose of the research, procedure, ethical considerations, and the sensitivity of the topics to be discussed. The interviewer used a pre-written script to standardise the information provided to each participant.

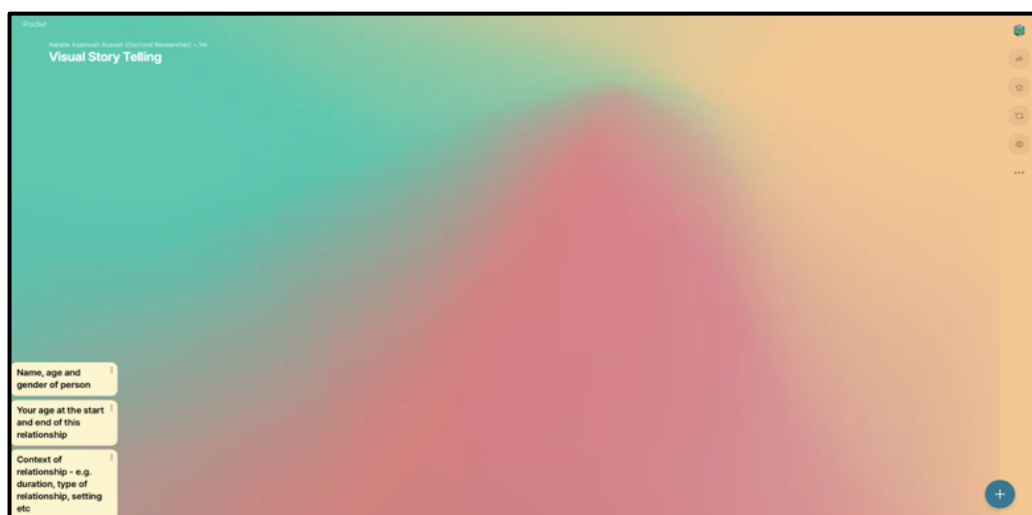
Digital Storyboard (Figure 4.1) – To support interview participants to recall and pre-plan what information they would like to share about their stories of experiencing IPPA as an adolescent, each woman was given the option to create a storyboard at the beginning of the

interview session, prior to verbally sharing their story with the interviewer. Visual story boards were password protected and hosted on the platform padlet.com. The password to the padlet was shared with the participant verbally during the interview session, having already received a link to the storyboard via email. The padlet was downloaded and saved by the researcher at the end of the session and was deleted from Padlet.com immediately after. Storyboards were used to support the researchers in transcribing participant stories, using a participant storyboard as a reference point/reminder of details shared during interviews. Upon completion of transcriptions, all storyboards were deleted in line with the data storage and retention plans, consented to by the participants.

Each storyboard contained a list of prompts to support participants when thinking about their story. Prompts included statements like ‘age and gender of the person and context of the relationship – e.g., duration, type of relationship, setting’. Participants had up to 30 minutes to create their visual storyboard during which both the researcher and participant switched off their cameras, using only the microphone functions to communicate when required (e.g., to clarify the task).

Figure 4.1

Storyboard Template



Most participants wrote bullet pointed lists and statements whilst some wrote extended paragraphs on their visual storyboards. Once 30 minutes have been reached, or the participant alerted the researcher that they were finished, participants were offered time for a five-minute break before proceeding.

MP7 Interview Schedule – Participants were then given up to 30 mins to uninterruptedly tell their story to the interviewer, followed by up to 15 minutes for follow-up questions about the stories shared (e.g. “When did you become aware that you were being psychologically abused in this relationship?”) and clarifying questions (e.g. “Could you please clarify the ages that you and your partner were during this relationship?”).

MP8 Debrief letter – A debrief letter containing a reminder about ethical rights (e.g., confidentiality, right to withdraw, intended use of data collected), information about how the research data will be used and details of recommended charities for further support including details for how to access the optional free counselling sessions being provided with our partnering charity.

10.2.3 Data Analysis

Survey Analysis

Quantitative data from research surveys were analysed using SPSS version 26 software. Multiple regression, Kruskal-Wallis H, and descriptive statistical analyses were conducted.

Interview Transcription All interviews were audio-recorded and auto-transcribed using Zoom. Each audio-recording and auto-transcription was allocated to one researcher (from a team of research assistants and me). Once the auto-transcriptions were corrected (and pseudonymised) using the audio files and storyboards, these files were deleted.

We opted to transcribe participants stories and responses using the edited naturalised intelligent verbatim transcription method (Koch, 2023; McMullin, 2023; Bucholtz, 2000), whereby transcriptions are written in a way that captures only relevant parts of participant responses to the research question and verbal responses are adapted from oral to written form (e.g. editing/removing repetition and verbal fillers such as ‘umm’). Table 4.2 outlines details of how participants’ words and descriptions were modified during this transcription process:

Table 4.2

Modification Made When Transcribing Stories/Interview Responses Using The Edited Naturalised Intelligent Verbatim Transcription Method.

Modification made	Example of Modification		Reason for Modification
	<i>Before Modification</i>	<i>After Modification</i>	
Stories were transcribed in first person (I, me) from the participants perspective.	No changes made	No changes made	The stories were intended to reflect participants personal experiences, making first person the most appropriate perspective.
Participants responses to follow-up/clarity questions after their story were embedded into the transcription alongside the according part of the story.	The participant begins their story with “ <i>I met him in secondary school</i> ”. After telling their story the interviewer may ask for clarity on which school year group they were in when they met the perpetrator, and the participant may respond “ <i>In year 10</i> ”.	The beginning of the transcribed story would now be ‘I met him in secondary school in year 10’.	By placing like for like ideas together, this helps with the flow and logical sequence of the stories. This also allows the researchers to present each woman’s story as a whole, with additional clarity provided when needed (e.g. clarity on year group as illustrated in example of modification columns), rather than at the end of the story as question-by-question responses.
All names and identifiable information were removed with references to intimate partners and other people named pseudonymised in the transcription as generalised labels (e.g. he, his, him, they, friend, mum, dad, aunt, uncle).	“ <i>I met Peter just before moving to university.</i> ” (Fake name used here, for example purposes only).	“ <i>I met him just before moving to university.</i> ”	Maintain anonymity and confidentiality for all participants and individuals that they refer to in stories/interview responses.
Repetition and non-essential conversational filler speech were removed.	“ <i>I was interested in school but, well, hmmm, things changed when I met him.</i> ”	“ <i>I was interested in school but, things changed when I met him.</i> ”	Creating an easier read and removing content which does not alter the meaning of participants descriptions.

Interview Coding

Deductive Coding. Each story was analysed using deductive coding. The researcher team used a spreadsheet to tally if any pre-defined codes appeared in a participant's story. Three a priori codes were agreed on by the research team based on past literature and the MPAB (Follingstad, 2011), as described below.

- **Code 1: Psychologically abusive behaviours listed in the MPAB (Follingstad, 2011)** – To quantify and analyse Black women's stories from semi-structured interviews, we used the MPAB (Follingstad, 2011) to identify and count IPPA experiences in each woman's story. Using the 42 IPPA items listed in the MPAB, we were able to quantify which IPPA acts from the MPAB (Follingstad, 2011) were being experienced by more Black women in the sample. This also allowed for a comparison between differences in the levels and types of IPPA reported by participants between each research methods used in this study (i.e. IPPA reported by survey vs semi-structured interview participants).
- **Code 2: Other psychologically aggressive behaviours** – As previously discussed in Chapter 1 (Defining Psychological Abuse), there are a number of other tools available for measuring IPPA (e.g. Hamel et al, 2015; Keashly, 2001; Marshal, 1999; Porrúa-García et al, 2016; Tolman, 1999), with some variability between which IPPA behaviours are included in each scale. Whilst the MPAB (Follingstad, 2011) contains 42 examples of IPPA acts, it was expected that not every IPPA act is reflected when using only one measure. As such, code two was developed to enable the research team to collate other examples of IPPA seen in women's stories under one umbrella category.
- **Code 3: Other abusive behaviours** – As also discussed in Chapter 1 (Defining Psychological Abuse) of this thesis, IPPA can occur on its own, but often also co-occurs alongside other forms of intimate partner abuse, including physical, sexual, and financial abuse (Francis & Pearsons, 2021; Krebs et al., 2011; ONS, 2023a). It was therefore

anticipated that some participants may share examples of other forms of intimate partner violence that they experienced alongside IPPA. To ensure that the simultaneous experience of other forms of intimate partner violence they experienced, and the full extent of women's stories were not lost, the decision was made to create code three, to acknowledge and measure the extent to which this co-occurrence of abuse types was experienced.

Inductive Coding. Inductive coding (finding new codes after collecting data) was also used. After the initial review and consolidation of participants transcriptions, one additional code, **'culture' (code 4)**, was added to the analysis process as a number of participants had described the effects of culture on their IPPA experiences during their stories/interviews. Story/interview extracts included within this code relate to comments from participants which indicated that their culture impacted their experiences of IPPA, as well as their help-seeking behaviours or understanding of abuse.

There were two research assistants allocated to analysing each code. Using two separate spreadsheets (researcher one and researcher two version), each research assistant tallied which codes appeared in each participant's transcript against the a priori codes, simultaneously colour coding where each code appeared in the transcription text. The two researchers then met to share their tallies, agree on and eliminate discrepancies, resulting in a final joint code spreadsheet. The entire research team then met to reflect on the coding process (e.g. how efficient the process was and the process of consolidating each coder's tallies), share their coding/tally results with the group, and discuss the overall conclusions that they could draw from each code.

10.2.4 Findings and Discussion

Both quantitative survey results and qualitative insights from semi-structured interviews with Black women are presented to help answer the research question - What are the stories and experiences of Black women who experienced IPPA during adolescence?

10.2.4a Survey Results

In total, during an adolescent relationship 92.6% ($N = 63$) of women surveyed had experienced at least one psychologically abusive behaviour listed in the MPAB (Follingstad, 2011). In fact, the majority of participants had experienced several IPPA behaviours, with the average being 13.6 ($SD = 9.3$) IPPA behaviours experienced per participant.

Across the 63 women who had experienced IPPA, when looking more specifically at the three different levels of IPPA illustrated in the MPAB (milder, moderate, severe), on average, women had each experienced 5.2 ($SD = 3.9$) milder psychologically abusive behaviours, 4.2 ($SD = 3.4$) moderate psychologically abusive behaviours and 3.2 ($SD = 2.9$) severe psychologically abusive behaviours. Table 4.4 provides a breakdown of participants' responses to each MPAB item.

A very limited amount of past literature has explored/measured IPPA in terms of milder versus moderate and severe IPPA experiences (e.g. Follingstad & Edmundson, 2010; Follingstad & Rogers, 2012, Roger & Follingstad, 2011), with their conclusions typically clearly stating that one whole severity level (i.e. milder, moderate or severe) happens more than the others. Therefore, it is difficult to make definitive conclusions as to whether milder IPPA is usually the most common form of IPPA experiences. Nevertheless, deductions can be made from a number of studies which explore IPPA which find high rates of behaviours which can be considered as milder forms IPPA (based on the MPAB – Follingstad, 2011) being used in intimate relationships, such as an abuser destroying the partners property (Karakurt & Silver,

2013), throwing a temper tantrum (Follingstad & Edmundson, 2010) and belittling a partner (Follingstad & Rogers, 2014; Katz, et al., 2008; Roger & Follingstad, 2011).

Table 4.3

Participants responses to MPAB (Follingstad, 2011).

MPAB Item ¹	Item descriptor	Yes ²		No ²		Not Sure or Prefer not to say	
		<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
1. Sadistic A	Harmed or destroyed personal things	9	13.2	59	86.8		
2. Sadistic B	Threatened to harm others	3	4.4	65	95.6		
3. Sadistic C	Harmed pets	1	1.5	66	97.1	1	1.5
4. Threats A	Threw a temper tantrum	19	27.9	49	72.1		
5. Threats B	Threaten to physically harm you	15	22.1	53	77.9		
6. Threats C	Threaten to kill you	1	1.5	67	98.5		
7. Isolating A	Disrespectful toward family or friends	11	16.2	57	83.8		
8. Isolating B	Tried to keep you from socializing	12	17.6	56	82.4		
9. Isolating C	Forbad you from socializing	19	27.9	49	72.1		
10. Manipulation A	Act upset	45	66.2	23	33.8		
11. Manipulation B	Threats to end the relationship	29	42.6	39	57.4		
12. Manipulation C	Threats of suicide	6	8.8	62	91.2		
13. Public Humiliation A	Threats to reveal secrets	15	22.1	53	77.9		
14. Public Humiliation B	Reveal secrets	17	25	51	75		
15. Public Humiliation C	Insult or ridicule in front of others	24	35.3	44	64.7		

16.	Verbal Abuse A	Criticized or belittled	35	51.5	33	48.5		
17.	Verbal Abuse B	Yelled or screamed	24	35.3	44	64.7		
18.	Verbal Abuse C	Derogatory names	22	32.4	46	67.6		
19.	Wound Through Sexuality A	Criticized physical looks or sexual performance	25	36.8	41	60.3	2	2.9
20.	Wound Through Sexuality B	Refused Sex to make you feel insecure	12	17.6	55	80.9	1	1.5
21.	Wound Through Sexuality C	Insisted on humiliating sex	17	25	51	75		
22.	Treat as inferior A	Tried to make you think they were smarter	32	47.1	36	52.9		
23.	Treat as inferior B	Treated you as useless	23	33.8	45	66.2		
24.	Treat as inferior C	Demanded obedience	19	27.9	49	72.1		
25.	Hostile Environment A	Created needless conflict	32	47.1	36	52.9		
26.	Hostile Environment B	Intentionally started arguments to make you feel bad	26	38.2	42	61.8		
27.	Hostile Environment C	Treated you with hatred and contempt	15	22.1	53	77.9		
28.	Monitoring A	Report on what you did when you weren't with them	26	38.2	42	61.8		
29.	Monitoring B	Looked though your private property	17	25	51	75		
30.	Monitoring C	Followed you	5	7.4	62	91.2	1	1.5
31.	Wound Through Fidelity A	Pointed out others as attractive	33	48.5	35	51.5		
32.	Wound Through Fidelity B	Flirted with others	22	32.4	46	67.6		
33.	Wound Through Fidelity C	Implied they were having an affair	14	20.6	53	77.9	1	1.5
34.	Jealousy A	Felt jealous if you spoke to or looked at another person	32	47.1	36	52.9		
35.	Jealousy B	Falsely accused you of affair	21	30.9	45	66.2	2	2.9

36.	Jealousy C	Prevent you from speaking to potential romantic partners	29	42.6	38	55.9	1	1.5
37.	Withheld Emotional Physical A	Ignored important holidays or events	17	25	51	75		
38.	Withheld Emotional Physical B	Refused to speak to you	43	63.2	24	35.3	1	1.5
39.	Withheld Emotional Physical C	Withheld physical or verbal affection	34	50	34	50		
40.	Control Personal Decisions A	Upset when they can't make small decisions	21	30.9	47	69.1		
41.	Control Personal Decisions B	Made personal choices for you	24	35.3	44	64.7		
42.	Control Personal Decisions C	Made major decisions for you	14	20.6	54	79.4		

¹ MPAB (Follingstad, 2011) items are labelled A, B, or C to identify the IPPA severity categories. (A = mild, B = moderate, C = Severe).

² 'Yes' indicating how many women had experienced the MPAB item in an adolescent relationship.

³ 'No' indicating how many women had not experienced the MPAB item in an adolescent relationship.

The most common IPPA acts experienced by participants (according to the MPAB) were milder manipulation (statement 4A “Partner continuing to act upset until you did what he/she wanted” = 66.2%), moderate withholding of emotional/physical affection (statement 13B “Partner refused to speak to you as a way to punish or hurt you” = 63.2%) and milder verbal abuse (statement 6A “Criticised or belittled you as a way to make you feel bad about yourself” = 51.1%).

Severe sadistic abuse (statement 1C “Harms pets as a way to intimidate you” = 1.5%) and severe threatening (statement 2C “Threaten to kill you as a way to frighten you” = 1.5%) were the least common behaviours experienced, where only one participant reported experiencing these behaviours.

10.2.4b Semi-structured Interviews Procedure (Women's Stories) Results

Across the 13 participants interviewed, two women shared stories of one intimate relationship, eight women spoke about two intimate relationships, two women spoke about three intimate relationships, and one woman spoke about four intimate relationships. Not all stories that women shared showed signs of IPPA.

The findings below are presented in line with the four codes outlined. I first provide at least one example of an extract from the transcriptions to represent each MPAB code found in women's stories. In some cases, extracts are repeated across several codes, given the co-occurrence of multiple IPPA behaviours and overlaps between categories found some extracts.

I then provide examples of other forms of psychologically aggressive behaviours, not included in the MPAB (Follingstad, 2011) that participants described experiencing during adolescent intimate relationship (Code 2). These included having a partner using guilt-tripping and false-affection (e.g. love bombing) as a method of manipulation, a partner showing a lack of accountability or denying that abuse had occurred, and an abuser motivating other people (e.g. their friends) to act violently towards the victim.

Next, I describe how some women also shared how they simultaneously experienced other forms of mistreatment (i.e. physical abuse, sexual abuse and financial mistreatment) whilst experiencing IPPA as an adolescent (Code 3).

Lastly, I report findings on how culture played a role in some participants' experiences of IPPA (Code 4), most notably with extracts of women expressing the influence of their family's culture's norms (e.g. expected tolerance of violence against women in intimate relationship and taboo surrounding discussions about intimacy and abuse) shared their experiences of IPPA.

Code 1: Psychologically abusive behaviours listed in the MPAB (Follingstad, 2011)

Participants most frequently described experiences of milder forms of IPPA, followed by moderate forms of IPPA. Severe forms of IPPA were relatively rare in women's stories, which aligns with the findings of the survey results presented above.

Table 4.4

Number of women who reported experiencing milder, moderate, and severe IPPA during at least one intimate relationship during adolescence.

Categories of Psychologically Abusive Behaviours	Number of Women Who Had Experiences Each MPAB Item, By Severity Level						
	Milder		Moderate		Severe		Category
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%	Total
Sadistic	1	7.7%	2	15.9%	0	0%	3
Threats	4	30.8%	3	23.1%	1	7.7%	8
Isolating	3	23.1%	4	30.8%	0	0%	7
Manipulation	4	30.8%	2	15.9%	1	7.7%	7
Public Humiliation	2	15.9%	3	23.1%	7	53.3%	12
Verbal Abuse	8	61.5%	1	7.7%	5	38.5%	14
Wound Through Sexuality	5	38.5%	0	0%	1	7.7%	6
Treat As Inferior	1	7.7%	1	7.7%	3	23.1%	5
Hostile Environment	7	53.3%	2	15.9%	1	7.7%	10
Monitoring	4	30.8%	3	23.1%	3	23.1%	10
Wound Through Fidelity	1	7.7%	1	7.7%	2	15.9%	4
Jealousy	4	30.8%	0	0%	0	0%	4
Withheld Emotional/Physical	1	7.7%	2	15.9%	1	7.7%	4
Control Personal Decisions	0	0%	3	23.1%	1	7.7%	4

1) Sadistic | Sadistic acts, according to MPAB items (Follingstad, 2011) can involve harming or destroying an intimate partner's personal items (item 1a), threatening to harm others such as the partners/victims family and friends as a way of intimidating a partner (item 1b), and harming a pet as a way to intimidate a partner. As displayed in Table 4.4, sadistic MPAB items were the least common form of IPPA experienced within the semi-structured interviews sample.

One participant had a partner destroy their personal items (item 1a) and two women described how a partner had threatened to harm others like their friends or family (item 1b). No interview participants reported that a partner had harmed their pets as a form on intimidation (item 1c).

Sadistic Item A. In relation to item 1a, Women 12's story provides an example, where she describes how her partners anger sometimes escalated in them punching items (destroying items). Unfortunately, in Women 12's case, this eventually led to the perpetrator physically abusing the victim instead. This is also found in past literature which shows a trajectory of IPPA leading to physical abuse. Several studies show evidence of IPPA occurring in relationships first and physical abuse being introduced later in the relationships, with IPPA in fact being a predictor of physical intimate partner abuse (Carney & Barner, 2012; Dye, 2019; Integrated Life Center, 2021; Murphy & O'Leary, 1989).

Woman 12 *"it really escalated from that to if he is angry around me he would punch things and then think 'oh let me just take it out on you'"*.

Sadistic Item B. In relation to item b (threatening to harm others), Woman 10 described how a perpetrator threatened in harm/intimidated people around the victim, as a way of hurting or controlling the victim. Literature often references the common use of this tactic by abusers,

whereby they might threaten, intimidate or cause discomfort to the victims' friends as a method of isolating the victim from their friends (Anderson et al., 2003; Rakovec-Fesler, 2014).

Woman 10 *“He would come down to my school to try and talk to me and would try to intimidate anyone I was talking to or would rob people at the school”*

Woman 9 also shared an example where technology was used to perpetrate threats towards others, saying:

Woman 9 *“He used my phone to send threatening messages to people”*

As earlier discussed in Chapter 1 (Defining Psychological Abuse), the increased use of mobile phones and social media has created additional ways to perpetrate IPPA online - Increased social media use, especially amongst adolescents, has been associated with a rise in online IPPA including increased cyberbullying (Martínez-Soto, & Ibabe, 2024; Xu & Zheng, 2022) and use of technology for surveillance in intimate relationships (Freed et al., 2018; Schokkenbroek et al., 2022; Stephenson et al., 2018).

In a Safe Lives (2019) investigation into psychological violence, 61% of survivors from a sample of 344 17-to-59 year olds (21% of participants were aged 20 and under) in the UK, reported that their partner had used technology to abuse, harass or stalk them, illustrating the real threat of online IPPA amongst adolescents.

As social media use amongst adolescents has rapidly increased since the majority of participants in this study were adolescents, there is perhaps a need for newer IPPA tools to be developed to place more emphasis on digital IPPA and ways in which mobiles and online interactions can be used to perpetrate intimate partner abuse (Melandar, 2010; Storer et al., 2022). Given the rapidly growing field of studies, highlighting the issue of online adolescent dating abuse and online bullying (e.g. Martínez-Pecino & Durán, 2016; Martínez-Soto, & Ibabe, 2024; Ringstone et al., 2021; Schokkenbroek et al., 2022; Stephenson et al., 2018; Xu & Zheng, 2022) there is certainly evidence as well as relatively newly developed research

materials from existing studies which would help in informing the development of new validated IPPA measures which further recognise the pervasiveness of digital IPPA amongst teens.

2) Threats | Threats, in the context of this study, referred to a perpetrator throwing a temper tantrum or acting in rage as a way to frighten a partner (item 2a), frightening a partner by making verbal threats or gestures that seem to suggest that the perpetrator is going to physically harm them (item 2b), and at the most severe level, threatening to kill a partner as a way of frightening them (item 2c). Almost a third of women (30.8%) who were interviewed reported experiencing threats during an adolescent intimate relationship.

Threats Item A. Examples of perpetrators throwing a temper tantrum are found in Woman 5's story where she describes an intimate partner shouting about her and acting in rage in front of other people and Woman 6's story where she recalled a partner throwing a temper tantrum in person:

Woman 5 *"I remember hearing him go back downstairs and just shouting 'she's done that she's done that', shouting about me in front of people, complaining and saying that I sleep around, blaming me for the [relationship] breakup, 'this is why girls are like this'."*

Woman 6 *"I remember one time I was at my friend's birthday, and he turns up outside my house when I'm coming home before going clubbing, screaming and crying. He was just trying to manipulate me into staying in. He was saying 'what about me' getting so emotional, screaming, crying."*

In both cases we see examples of male perpetrators displaying outwardly public displays of rage or exaggerated expressions of sorrow, as a means of frightening, embarrassing, and

manipulating adolescent girls. When Follingstad and Rogers (2014) used the MPAB on a national sample of 649 male and female participants in the US, temper tantrums were present in 44% of relationships, indicating its fairly regular use as a form of IPPA in intimate relationships.

Threats Item B and C. In another case, Woman 9 shared how “*there was one day he threatened to stab me and pulled out a kitchen knife in the car.*”

The research team decided to code under both items 2b and 2c, as it appears as though the perpetrator was threatening and gesturing that they were going to physically harm the victim (2b), but given the extent of the severity and vileness of the behaviour (e.g. pulling out a kitchen knife), the perpetrators threat could be constituted as a threat to kill.

In the examples presented above (women 5, 6 and 9), as well as examples of threats also found in women's 8, 10 and 12's stories there are several instances of male perpetrators displaying dramatic and unregulated moments of rage and anger directed at Black adolescent girls, highlighting the destructive negative experiences for several participants, where poor emotional regulation skills of intimate partners has contributed to experiences of IPPA. As mentioned in Chapter 3 (Adolescence), adolescence is a complex developmental phase of life where emotional regulation abilities are drastically developing and emotional reactivity is common and can at times be unpredictable (Ahmed et al, 2015; Fombouchet et al., 2023), nonetheless this does not excuse emotional regulation difficulties translating into IPPA against adolescent girls.

In a number of interviews (e.g. Woman 9's) I heard women describe how after temper tantrums the perpetrator would be sad or use other IPPA acts such as threatening to commit suicide (item 4c, page 337) when the victim tried to hold them to account for their behaviours/threats.

3. Isolating | Isolating behaviours reported in this study involved perpetrators using techniques to limit a victim's ability to socialise and maintain relationships with other people in their lives. Milder isolation (i.e. acting rude toward (e.g., name-calling), gossiping about, or telling lies about the partners family and friends) was reported by three women and moderate isolation (i.e. trying to stop a partner from socialising with others without the abuser of present) was reported by four women. No women recalled having a partner forbid them from socialising with friends or family (item 3c), which is deemed as the most severe type of isolation according to the MPAB (2011).

Isolating Item A. Isolating often included perpetrators' acting rude toward (e.g., name-calling), gossiping about, or telling lies about the partners family and friends to discourage a partner from spending time with others, which was described in three women's stories including Woman 7, Woman 9 and Women 10 who reported:

Woman 7 *"He then actually started limiting me from going to parties saying that a female shouldn't be doing that. It was little controlling, even though I never used that term to him."*

Women 9 *"He would say things to turn me against my family and would make comments about my friends calling them skets".*

Woman 10 *"He didn't want me going out or hanging out with other people without him. He would name call me and my friends saying we're all slags."*

In each case presented above, we see links to another IPPA item from the MPAB (Follingstad, 2011), item 6c (page 341), where derogatory language is being used as a mechanism to achieve isolation of an intimate partner.

Isolating Item B. Four women also described how during adolescence, an intimate partner had tried to keep them from socializing with family or friends without the perpetrator being present as described in extracts from Woman 9 and Woman 10's:

Woman 9 *"He increasingly became more and more controlling and started picking and dropping me to school then college on most days. He was really controlling of where I was who I was hanging out with where I was going."*

Woman 10 *"He didn't want me going out or hanging out with other people without him. He would name call me and my friends saying we're all slags."*

4. Manipulation | As seen in several extracts already explored, manipulation appears to be ingrained across different types of IPPA. The MPAB (Follingstad, 2011) also recognises manipulation as an individual type of IPPA. According to the MPAB, manipulation includes a perpetrator continuing to act very upset (e.g., pouted, stayed angry, gave silent treatment) (item 4a) which was reported by four women, threatens to end the relationship (item 4b) which was reported by two women, or threatens to commit suicide (4c) as a means of getting their partner to do or behave in a way that the perpetrator wants, which one woman reported.

Manipulation Item A. Regarding item 4a, women who described experiencing this form of IPPA during adolescence gave examples of intimate partners using silent treatment or acting sulky as a form of retaliation and manipulation done with the intention of achieving a desired response from the victim:

Woman 11 *"The silent treatment probably started 2 -3 years into the relationship, because we had probably started seeing each other more regularly at that point. I remember this being a reoccurring thing. I always felt there was something in the way that he would describe how he loves me, and it would always be in a way to try and*

make me feel bad about something. Like, I recall vaguely him saying ‘can’t you see that I love you, this is why I have done this’, or ‘don’t you know that I love you’ when we would have a little fall out, to make me feel bad. It was almost like keep me in the relationship.”

Woman 13 *“We messed around a bit then he told me to get the condoms for sex. I kept saying no and eventually that was that. A similar thing happened with me again in my room when he tried to pressure me. When I said no he would try to get sulky with me to get what he wanted but luckily that didn’t work on me. He was absolutely trying to use it as a way to manipulate me as the younger girl.”*

Manipulation Item B. Two women also described how intimate partners would threaten or initiate a breakup for the sake of manipulating the partner into doing what they want (item 4b) such as wanting the victim to not get emotional or upset when hurt by the perpetrator, or to stop the partner from voicing concerns in the relationship.

Woman 4 *“ I remember feeling really upset and anytime I would bring something up to him he would threaten to end the relationship or temporarily end the relationship. It got to the point I felt like I was almost silenced about certain things out of fear that I’d lose what we had together”.*

Woman 12 *“At the time I thought it was really romantic, like ‘aww he is the only one that gets me’, but it also made me think no one else wants me. So then anytime we would have an argument, I would get really upset and he would say things like ‘I don’t even know if I should be with you anymore’. It felt like the relationship was always on a cliff edge and that I was always doing something to make him want to leave.”*

Manipulation Item C. In relation to the most severe form of IPPA measured, as previously presented, women 9 described her experience of the perpetrator threatening to commit suicide. *Fortunately*, this is the only case of this severe form of manipulation that was reported in semi structured interviews, however as shown in the results of the survey segment of this study, six (8.8%) out of 63 women (including Woman 9), responded yes when asked if they had specifically experienced this IPPA act in an adolescent intimate relationship. This indicates the benefit of the utilising mixed methodology and multiple sample groups to explore IPPA, as the survey has debunked the impression that threats of suicide are rare, which would be the case had only semi-structured interviews with 13 women been conducted for this study.

Woman 9 *“We probably did have a breakup of about one month, this was after the knife incident. When it came to him and break-ups, whether that was me threatening a breakup or trying to break up with him, or if I was even just trying to set a boundary, he would use manipulation and violence against me. After break ups, he would claim that he had overdosed, claimed that he was in hospital, claim that he was going to commit suicide and was at a bridge or something like that.”*

5. Public Humiliation | Aspects of milder, moderate and severe public humiliation was present in women's stories. Public humiliation refers to when a perpetrator attempts to make the victim feel embarrassed or silly in front of others. According this the MPAB (Follingstad, 2011), this can include the perpetrator threatening to reveal an embarrassing secret as a way to hurt or manipulate the victim (item 5a) which was reported in two women's stories, revealing important secrets to others as a way to embarrass the victim (item 5b) which was reported by three women, and insulting or ridiculing a partner in front of others victim (item 5c) which was reported by seven women.

Humiliation Item A. Across semi-structured interviews, 15.9% ($N = 2$) of women shared examples of a perpetrator threatening or attempting to reveal a secret about them:

Woman 9 *“I remember one time after the knife incident when we did eventually get back together, I decided that I wanted to keep the relationship a secret from my mum. When I tried to reinforce that boundary, after he had tried to make my mum aware of a relationship, he started cutting his wrists”.*

Woman 10 *“He would also regularly call me names, put me down, call me fat, a sket. He would threaten to tell everyone what we had done sexually if he was mad or if I wanted to go out saying things like ‘would they want to go out with you if they knew’”.*

In both Woman 9 and Woman 10’s extracts above, we again see examples of multiple forms of IPPA cooccurring together. In Woman 9’s extract, the perpetrators attempt to reveal the participants secret to their mother (reveal the relationship against the participants wishes) was linked to the perpetrator also threatening to harm themselves as a way of manipulating the participant into feeling guilty (item 4c) or forcing them into revealing the secret, and controlling an important decision which should be made by the girl (item 14c). In woman 10’s story, public humiliation (in the form of threatening to reveal private sexual information to others), was paired with the perpetrator also calling the victim derogatory names (item 6c). Both examples illustrate how perpetrators can use multiple forms of IPPA to achieve the same goal of humiliating, undermining or controlling a partner.

Humiliation Item B. Three (23.1%) of women reported that an intimate partner had gone beyond threatening to reveal a secret to actually revealing secrets to others in an attempt to humiliate them.

Woman 3 *“I found out about the video at the end the relationship when he presented it to me and asked if I remembered it. And at that time I begged him to delete it and he did in front of me but he had a second copy which he shared with others”.*

Woman 9 *“He changed my WhatsApp picture to a picture of me with bruises where he had previously assaulted me, it was really a big mess”.*

As previously discussed, both Woman 3 and 9’s extracts again illustrate examples of technology (e.g WhatsApp and video recordings) can be used to perpetrate IPPA, in this case public humiliation.

Humiliation Item C. Across all 14 MPAB categories of psychologically abusive behaviours, severe public humiliation was the most common type of severe IPPA reported by participants ($N = 7$; $SD = 53.3\%$). Some women who had a partner insult or ridicule them in front of others (item 5c) shared examples of their partners being involved in embarrassing or teasing them with their friends (e.g. Woman 1 and 4 extracts).

Woman 1 *“Every time we were alone or on the phone, I would get the sense that he likes me but as soon as we got to school, he would pretend that he doesn’t like me because he was embarrassed of me as I was considered one of the less pretty girls at school. If people were bullying me he would join in”.*

Woman 4. *There were times it felt like he would choose his friends over me or try to embarrass me in front of his friends or make me look silly.*

One woman provided an example of an intimate partner criticising and embarrassing them in front of the perpetrator’s mother, which given the participant’s desire to maintain a good relationship with the perpetrator’s mother, the perpetrator knew that this would be a viable way of making the participant behave in a way that they wanted:

Woman 11. *I couldn't be bothered to make breakfast when he wanted, he would say 'oh I'll ask my mum to do it then, you know what she will say', so I would have to go and make the breakfast to avoid the embarrassment. When I did make him breakfast, he would criticise little things and tell his mum.*

We also see examples, such as Woman 5's extract below, of the perpetrator publicly humiliating the victim and trying to turn others against the victim as a form of retaliation/expression of anger when the victim had acted in a way that the perpetrator was unhappy with (e.g. in retaliation to the victim ending the relationship).

Woman 5 *"I remember hearing him go back downstairs and just shouting 'she's done that she's done that', shouting about me in front of people, complaining and saying that I sleep around, blaming me for the breakup, 'this is why girls are like this'."*

6. Verbal Abuse | Verbal abuse refers to the use of hurtful words or aggressive tones/delivery used towards an intimate partner and was the most commonly described example of IPPA found in this research. According to the MPAB, verbal abuse can include criticising and belittling a partner to make them feel bad about themselves (item 6a) which was reported by eight women, yelling or screaming at a partner as a method of intimidating them (item 6b) which was reported by one women, and calling a partner derogatory names to make them feel bad about themselves (item 6c) which was reported by five women.

Verbal Abuse Item A. When coded against the MPAB (Follingstad, 2011) items, the majority of interview participants shared that they had been criticised and belittled by an intimate partner as a way to make them feel bad about themselves ($N = 8$), with partners criticising how participants done activities or criticising their appearance (item 6a). Across all

14 MPAB categories, this milder form of verbal abuse was the most common type of milder IPPA described by women.

Woman 6 *“There was always something I wasn’t doing right, ‘my ex done this, my ex that’. He even tried making feel bad for working so much, always judging my decisions. There was always just an issue”.*

Woman 8 *“He would say nasty comments about my body and image at the time I was really skinny so he would say things along those lines to bring me down. And then overall he just started to be nasty.”*

Woman 11 *“There was a time we were going out for a quick lunch and jumped in the car, and I looked in the mirror and said I should have put some make up on and he said ‘yeah, you should have’”.*

Verbal Abuse Item B. One woman (7.7%) described her experience of moderate verbal abuse where a partner yelled or screamed at them in response to the victim refusing sexual advances or ceasing communication.

Woman 3 *“He started making sexual remarks towards me which he had never done before and I was not really about that so soon and it made me really uncomfortable. He kept asking when, and I realised he wasn’t serious so eventually I blocked him as I could not see this going anywhere serious. After that he began ringing me off different numbers and shouting down the phone saying ‘why did you ghost me’. I don’t even know how many different numbers he had, but it went on for about a week.”*

Verbal Abuse Item C. Lastly, five women (38.5%) shared their experiences of partners calling them derogatory names as a way to make them feel bad about themselves:

Woman 3 *“He’d call me a ‘bitch’ and tell me that ‘young men will use me’ and ‘old men will only want to have sex with me’”.*

Woman 7 *“One time he told me I was ‘salty water, you want to ruin everything’, for being in the same party as him and his friends. He then actually started limiting me from going to parties saying that a female shouldn’t be doing that”.*

Woman 10 *“He would also regularly call me names, put me down, call me ‘fat’, a ‘sket’.”*

The above extracts show signs of misogyny and sexism, where perpetrators are using derogatory labels to attack victims’ femininity and put down adolescent girls based on their stereotypes about how woman should act. In all three of the above extracts, we see very clear demonstrations of misogyny, where stereotypes and derogatory labels are being used by boys to describe girls, with the intent of criticising, belittling and shaming women based on their gender and sexuality expectations placed on women and girls. The use and negative influence of misogyny in the process, perpetration and explanations of intimate partner violence, is thoroughly documented in literature (e.g. Cinquegrana, Marini, & Galdi, 2022; Blake & O’Dean, 2021; Canto et al, 2020), as earlier discussed in Chapters 4 (Gender and IPPA) and Chapter 5 Part 1 (Culture and Race).

Evidence of derogatory language used towards adolescent girls in England is evident in Ofsted’s (2021) review of sexual violence in UK schools where in a survey of over 800 adolescents aged 13 and over, 93% of female respondents said that sexist name calling happened a lot or sometimes in their school and 81% said rumours about sexual activity happened a lot or sometimes in their school.

Women 11 in particular shares the saddening use of race-related derogatory names used against her by a Black male partner, where hurtful comments were made about their appearance and complexion as a way of belittling the victim.

Woman 11 *“After the first year and quite early on, when he was explaining why he was now ready to be in a relationship with me he would often tell me that he wasn’t with me for my looks, but for my personality. He would say this quiet often. And I remember that being a distinctive thing. I’d say the emotional abuse probably started a year in as soon as we became official. He would also say things to me about my appearance. He once told me that I was Black like the pavement”.*

This extract from Women 11 may be a demonstration of misogynoir at play, whereby the insult and abuse towards her appears to also be fuelled by a negative view towards darker skinned Black women (Bailey, 2016; Bailey, 2021; Bailey & Trudy, 2018; Northwestern University & Bailey, 2023). Whilst other participants stories do not provide examples of misogynoir in such clear ways, misogynoir may still be an underlying explanation for IPPA perpetrated against some Black adolescent girls, even when misogynoiristic language is not explicitly used.

7. Wound Through Sexuality | Wounding through sexuality refers to a partner using sex and comments about sex as a weapon to make a partner feel bad or to manipulate or control them. Five women reported experiencing a milder form of this where a partner had criticised their physical looks or sexual performance to manipulate them (item 7a), and one woman reported a partner insisted on them having sex with them in a belittling or humiliating way. No interview participants described having a partner refuse to have sex with them as a way of making them feel insecure (item 7b), however in the research survey 12 out of 62 women (17.6%) who had experienced IPPA, responded yes to this item on the MPAB (Follingstad, 2011).

Wound Through Sexuality Item A. Within the MPAB (Follingstad, 2011), wounding a partner through sexuality included, criticising physical looks and sexual performance as a

way to humiliate the victim (item 7a), which closely overlaps with the previous category (verbal abuse) where male partners verbally criticising women's bodies. This item was the most frequent example of wounding through sexuality described by interview participants ($N = 5$; 38.5%).

Woman 6 *“I have had people comment on my face. My hair, my make up. Some people make you feel really shit about yourself. He would show me photos of nice bodies. His friends and family would complement me, but for him it was never good enough. ‘Why can’t you do your makeup like that girl’. It was always a comparison”.*

Woman 8 *“When he would say things about my body it would really drag me down so my body image has been something I have been working on for years. I was taking supplements and was very insecure and its only within the last couple of years I have now started to be comfortable in my own skin. He said, ‘the reason I had to cheat was because I was so skinny’.”*

Wound Through Sexuality Item C. One woman (7.7%) shared an account of a partner insisting that they had sex in a belittling or humiliating way, where her partner had tried to use online data about sex to insist that the participant is required to engage in sexual activity more frequently than they were willing to.

Woman 11 *“He would complain that we didn’t have sex enough, so he Googled the average rate then would say we are under average”.*

8. Treat as Inferior | The MPAB provided three examples of how a partner may treat or use language towards the victim with the intent of making them feel lesser than them. Treating a partner as inferior can include trying to make them feel less competent or less

intelligent which one woman reported experiencing (item 8a). It can also include treating a partner as though they were stupid which one woman reported (item 8b) or demanding obedience to establish authority over a partner which three women reported.

Treat as Inferior Item A. In interviews with Black women, one woman described how a partner had tried to make her think that he was more competent and intelligent than her, specifically using the perceived difficulty of his degree subject to belittle her (item 8a).

Woman 2 *"When he did have those mood swings sometimes, he would take digs at my course. It kind of knocked my intelligence and made me feel as though I'm not as smart as him".*

Treat as Inferior Item B. One interview participant also expressed that their partner had treated them as useless or stupid (item 8b), in this case making comments about the participants spelling.

Woman 3 *He called me names such as 'dumb' because I misspelt words in text messages, due to my dyslexia, which was undiagnosed at the time.*

Treat as Inferior Item C. Lastly, three interview participants (23.1%) described experiencing the most severe version of this form being treated as inferior according to the MPAB (Follingstad, 2011), whereby they described how their partner tried to establish authority over them by demanding obedience to orders (item 8c). In two extracts below (Woman 8 and 10) participants describe scenarios where the perpetrator withheld access to belongings or security to gain obedience. This is known to be a tactic used in financial abuse in adult relationships, when one partner maintains control over resources (also known as economic abuse) or finances as a form of domination over their partner (Littwin, 2012; Sharp-Jeffs, 2015), illustrating overlaps between IPPA and financial abuse, as previously discussed in Chapter 1 (Defining Psychological Abuse).

Woman 8 *“He would take my phone and be like ‘I got your phone and you’re not getting it back until you’ve gone and got me some food’ and he would literally hold it back until I got him food or done whatever he wanted, or he’d take my handbag so that I couldn’t leave”.*

Woman 10 *“He didn’t want me going out of hanging out with other people without him. ...He would take my stuff, or sometimes if he was angry would stop me from being able to stay [at home], kick me out of the house at 3 am, or not let me have dinner.” -*

Women 10 was living with the perpetrator at this time.

Woman 9 on the other hand, described her experience of an older male partner trying to demand obedience by controlling key decisions around their university selection. This links closely with another MPAB (Follingstad, 2011) item to be later described, where abusers try to make personal choices for the victim (items 14b/c).

Woman 9 *“So fast forward to leaving college and heading to university. When I was searching for universities, he made it very clear that I had to select a university in London to maintain our relationship. When I did get into university, he then went out of his way to get a job close by to my university as he had the intention of moving into my university halls. Obviously, he wanted to move in in order to control me during university. On the first day at university, he came to my halls, I explained to him that he can’t live here, and he got very angry and hit me, I told him to get out and that was the end of the relationship. Little did I know he actually started stalking me.”*

As briefly discussed in Chapter 3 (Adolescence), whether a relationship is healthy or unhealthy, it can have an impact on young people’s school experiences. For instance, romantic relationship experiences are thought to impact self-esteem, interpersonal skills, social integration, well-being, and how adolescents form their self-identity (Barber & Eccles, 2003; Kansky, 2018;

Montgomery, 2005; Sorensen, 2007), in turn affecting how adolescents socialise with peers at school. Towards the end of adolescence (age 16-19), young people face significant decisions and changes surrounding their education and next steps, with 35.8% of all 18-year-olds in the UK heading off to study at a university in 2023 (Bolton, 2024). In England, University offers the opportunity for many young people to move out of the family home for the first time, often living at university campuses or in local towns surrounding the university. This offers young people a new lease of independence and autonomy, as well as new activities such as university student social events and the chance to mix with students from all over the country and the world. In woman 9's story, as well as several other women's stories in this study, unfortunately we see university as a contributing factor in their experiences of intimate partner abuse, something I would be keen to be study further in future research.

In stories shared in this study, we see examples where perpetrators' abuse begins or quite rapidly intensified (e.g. increased surveillance and guilt-tripping) just before or soon after the participant went to university, which appeared to be fuelled by the perpetrators having insecurities surrounding loss of control in a long-distance relationship or fears of competition from other men that the participants might meet at university.

There is existing literature that touches on experiences of students who begin university in a romantic relationship (e.g. Beckmeyer et al., 2021; Dainton & Aylor, 2001; Ficara & Mongeau, 2000; Maguire, 2007). Although this is quiet common (Beckmeyer et al., 2021), the experience of starting university with a romantic partner can differ from students not in romantic relationships. Studies show that having a partner during this transition to university can have an impact on a young students academic performance and can affect the extent to which the young person has the time to fully integrate into social groups at university given their need to balance a sometimes long distance relationship with new demands of higher education and finding their feet at university (Dainton & Aylor, 2001). Studies also often find that the onset

of university can put a strain on existing relationships eventually leading to a relationship break down (Ficara & Mongeau, 2000; Maguire, 2007).

Nonetheless, beginning university with an existing romantic relationship does not inherently lead to adverse outcomes (Waterman et al., 2017) and studies also show that having a healthy existing intimate relationship can be beneficial in supporting some young students to navigate this drastic life change with support from a significant other (Firmin et al., 2013). Overall the effects of intimate relationships on university and vice versa, can vary for each young person depending on a range of possible factors (e.g. already being used to being away from their partner and the individuals person ability to balance daily routines with commitments of an intimate relationship).

9. Hostile Environment | Follingstad (2011) explains how perpetrators of IPPA may aim to create a hostile environment for their partner in order to purposely create conflict, make the victim feel bad for their views or to express their dislike towards a partner. This can include a partner intentionally turning neutral interactions into arguments to create conflict, as reported by seven women (item 9a), as well as driving a partner into the ground during an argument which was described by two women (item 9b) and treating a partner with strong hatred or contempt which was reported by one women (item 9c).

Hostile Environment Item A. Through interviews with Black women, we found that around half ($N = 7$; 53.3%) described a partner intentionally turn a neutral interaction into an argument or disagree with the purpose of creating conflict (item 9a). When analysing stories we also considered scenarios where partners disproportionately overreacted to a moderate event within this category.

Woman 1 *“Any time I done something, and it would be the smallest thing, maybe I had said something he doesn’t like, that could be overcome with a discussion, he would*

drag it on for weeks. It would get to a point where he would stop talking to me and see me out at events and just walk past me as if he doesn't know who I am."

Woman 5 *"The silent treatment also happened to much smaller things, and I remember, just thinking this is extra ordinary. Something like leaving the bathroom light off or buying the wrong sausages and him not speaking to me for two days to a week. When we did come back after silent treatment episodes, it was always still my fault, I should have bought the right sausages, but I wouldn't necessarily call it gaslighting, it was more just disproportionate reactions to things."*

Hostile Environment Item B. Two women (15.9%) also described how their partner would use arguments as an opportunity to drive them into the ground (make them feel bad about themselves) and make them feel bad about voicing their views (item 9b). This links well to a study from La Franc and Rock (2003) (and Gere & Schimmack, 2011; Rodrigues et al., 2019; Sanderson & Karetsky, 2002; Simon et al., 2008) previously discussed in Chapter 5 Part 1 (Race, Culture and IPPA), which was one example of a study that found the men were more motivated by the desire to 'win' a relationship conflict, rather than negotiate and compromise when conflict arose which sometimes led to the increased use of violence as a means to win arguments with their partners.

Woman 4 *"Sometimes he would pick arguments with me, pick out things he didn't like. And he would always make out that I was argumentative rather than addressing any of the issues. It did eventually take a toll on me. I remember feeling really upset and anytime I would bring something up to him he would threaten to end the relationship or temporarily end the relationship".*

Woman 7 *"He would try to pick up an argument or say comments to put me in my place".*

Hostile Environment Item C. Finally, one woman (7.7%) reported how she experienced the most severe form of hostile environment included in the MPAB (Follingstad, 2011), where the perpetrator treated her with strong hatred and contempt (item 9c). Woman 2 described how as an adolescent, this would have been her first experience of feeling hated by someone, which was further inflated by their ex-partner also allowing their friends to contribute to making the victim feel hated. The involvement of friends/others in IPPA experiences in later discussed again on page 363.

Woman 2 *“The breakup did impact him quiet heavily, he had to retake two exams. I continued to have contact with him because I kind of felt bad about it, and he kind of made sure that I would feel bad about it. He told his friends what I did, and they called me things like ‘evil’ and ‘a liar’ for not bringing this up sooner. It kind of impacted me because I had never had someone hate me before. I knew he still loved me but there were hateful words coming across. He then tried to log into my social medias and even deleted my Netflix profile on my account.”*

10. Monitoring | Monitoring and surveillance is a well-known feature of coercive control in particular, whereby an intimate partner may limit the victims’ ability to socialise with others without them being present, may isolate victims from support and regulate victims activities (Women’s Aid, 2024). In the MPAB (Follingstad, 2011), monitoring is measured by whether a perpetrator tried to make the victim report on details on where they go and what they do when the perpetrator is not around which was described by four women (item 10a), a perpetrator listens in on the victim’s phone calls, reads their emails or goes through their belongings without permission to check on them described by three women (item 10b) and if

a perpetrator followed or had the victim followed by another person also described by three women (item 10c).

Monitoring Item A. Four participants (30.8%) shared their experiences of having to report their whereabouts to a partner. In these examples, we can again see technology (mobile phones) as the main means to monitor behaviours.

Woman 1 *“When I started uni every time, I was going out he would call me asking questions about where I have been and who I had met and if anyone had approached me. He would make me feel as though he had a feeling that people were approaching me, and he was feeling sad about it.”*

Woman 2 *“So, after all of that we didn’t speak for a couple of months and I began meeting new people and sometimes he would give me an odd message really demanding that I tell him if I was speaking to someone new, so that he could know to cut me off for good. He would also ring me a lot, so I eventually had to block his number because I had had enough.”*

Woman 4 *“Do you remember the unlimited pass phone credits back in the days. So, he would literally be on the phone to me from when we left school until I went to bed, even if we weren’t talking, he even wanted to sleep on the phone. At the time I feel like people thought it was cute, but looking back it was kind of possessive. I feel like he was trying to keep an eye on me a bit because he knew he was punching¹, so was making sure there was no opportunity for anyone else. To be fair he was a cool guy, but he made me feel claustrophobic.*

¹ "punching" in this context refers to someone being in a relationship with a partner who is considered to be "out of their league" — typically in terms of attractiveness, success, or other qualities.

Woman 8 *“On some occasions I realised that he wasn’t faithful, I just had the feeling, like if I called but he didn’t answer, but if I was not to answer it would be ‘what are you doing, why didn’t you answer’ type of thing”.*

Monitoring Item B. Three women (23.1%) recalled partners checking their social media accounts and mobile phones.

Woman 9 *“During arguments, he would often steal my phone, he was often logged onto my Facebook account”*

Woman 4 *“I remember him being controlling. There was one situation where we were at youth club, and he took my phone out of my hands, ran into the boys’ toilets, and locked himself in, going through my phone because he had trust issues. All his friends were there watching this commotion and watching me having to beg for my phone back”.*

Woman 2 *“He then tried to log into my social medias and even deleted my Netflix profile on my account”.*

Monitoring Item C. Finally, three women (23.1%) shared their experiences of being followed by a partner during adolescence. In each case we see that following the victim was also connected to acts of what may be considered to be assault or harassment. The examples below (some repeated from previous extracts above) show how perpetrators would go on to physically harm the victim, physically harm the people around them, or verbally harass the victim, which is again supported by previous literature explored, where many victims of IPPA abuse also simultaneously experience other forms of violence (Hacialiefendioglu et al., 2020; Henning & Klesges, 2003; Kerbs et al., 2011; ONS, 2023a).

Woman 5 *“ I remember after that conversation I went to go stay at another friends. I remember him following me and I was upstairs telling my friend and crying and saying*

that I felt really guilty because he made me feel guilty. And then suddenly we just hear the front door open and someone says 'hello' and it was him, because of the boys in the Uni accommodation, had let him in”.

Woman 9 *“After a night out at university a guy came back to my halls with me and he [ex-partner] somehow knew! Obviously, he had been me following or watching me. He came to the flat hallway door and started ringing my bell and calling me. When I realise that it was him ringing the bell I asked the guy to leave. He [ex-partner] then managed to come upstairs to my flat and he started physically assault me”.*

Woman 10 *“It [the relationship] ended at about 15 when me and my mum moved into a refuge [i.e. a accommodation for women or domestic violence survivors], but he would come down to my school to try and talk to me and would try to intimidate anyone I was talking to or would rob people at the school. When he found out that I was seeing someone else he arranged this big, massive fight, I had anxiety and couldn't cope. People were saying it was my fault but there's nothing I could have done.”*

11. Wound Through Fidelity | Wounding through fidelity involves perpetrators using threats and acts of romantic disloyalty (cheating) against the victim with the intention of hurting the victim emotionally or manipulating the victim into acting in a particular way (e.g. manipulating partner into performing sexual acts or changing their appearance). Examples of this form of IPPA featured in the MPAB (Follingstad, 2011) include a perpetrator intentionally making the victim feel uncomfortable by pointing out others as attractive (item 11a), flirting with others in front of the victim to make them make jealous (item 11b), or implying that they are having an affair (whether true or not) as a way of making a partner feel insecure or worried (item 11c). Whilst wounding through fidelity was experienced by a small number of interview

participants (milder = 1 woman, moderate = 1 woman and severe = 2 women), the research survey showed far higher rates of wounding through fidelity amongst 63 Black women (milder = 48.5%, moderate = 32.4% and severe = 20.6%), again highlighting the importance of mixed methodology when exploring such complex concepts, to obtain a clearer picture within a slightly larger sample.

Wound Through Fidelity Item A. Women 6 reported how their boyfriend pointed out that the woman that he had cheated with was attractive to make her feel uncomfortable.

Woman 6 *“About three to four months in he cheated. I found out and I was really hurt and remember the things that he then said were so insensitive to my feelings. Things like ‘I didn’t really cheat because I didn’t cum’ and ‘oh her body was so nice’. I’m a bigger girl as it is for me it was painful. There was never really consideration of my feelings or how I felt. To have to swallow that.”* (example of item 11a and 11c).

Wound Through Fidelity Item B. Woman 10 described how her ex-boyfriend began following her and eventually maliciously enrolled at her college where he attempted to infiltrate her friendship group and date other girls in front of her to make her feel jealous.

Woman 10 *“He then infiltrated my new friendship group and chat bad things about me. He would try to make me feel small and ugly by dating other girls in the college.”* (example of item 11b).

Wound Through Fidelity Item C. Woman 7 explained how her partner tried to make her feel bad for spending time with family and friends, by using this to justify why he had cheated on her.

Woman 7 *“He was really committed but he made me feel bad about everything – going to university, having close friends on campus. He cheated and said it was because I was giving my friends and family too much attention over him.”* (example of item 11c).

12. Jealousy | In the MPAB (Follingstad, 2011), jealousy is measured by whether an intimate partner has acted very upset because they felt jealous if the victim had spoken to or looked at other people which was described by four women (item 12a). Jealousy also included preventing a partner from speaking to or looking at people who could potentially be a romantic competition to the perpetrator (item 12c) and attempting to restrict the victims' behaviours by falsely accusing them of trying to/having an affair which (item 12b) both of which were not found in extracts.

Jealousy item A. Overall, 30.8% ($N = 4$) of interview participants described examples of item 12a in their stories, where participants appeared to indicate that their partners were paranoid about being approached by other boys/men which made them feel jealous and sometimes possessive. This was especially true for Women 11 and 12, who shared examples of situations where the male was an ex-boyfriend or would not fully commit to an official relationship yet used jealousy as an IPPA tactic.

Woman 1 *“When I started uni every time, I was going out he would call me asking questions about where I have been and who I had met and if anyone had approached me. He would make me feel as though he had a feeling that people were approaching me, and he was feeling sad about it”*

Woman 11 *“At one of the final parties [at university] we were at the same club and he saw me with another guy and started saying [via phone message] ‘are you trying to make me jealous, I can see you’ and I stopped responding and by the end of the night he messaged me asking to go over to his dorm and he was crying and saying that he was missing me but he still wasn’t willing you say that he wanted to be with me.”*

Woman 12 *“I remember one time he [ex-boyfriend] sent me a really angry message on Facebook asking why I was talking to other guys and that I don’t like him anymore, and I got upset and thought I done something wrong and said sorry and asked how I can make it up to him, but looking back, he wasn’t trying to claim me but wanting me to keep myself for him”.*

13. Withheld Emotional/Physical | This category relates to behaviours of the perpetrator where they choose to withhold emotional or physical affection towards a partner. In the MPAB (Follingstad, 2011). This includes the perpetrator ignoring important holidays and events which was recalled by one woman (item 13a), refusing the speak to the partner which two women described (item 13b) and withholding physical or verbal affection which was reported by one woman (item 13c). In all cases, for these behaviours to be considered as IPPA, the perpetrator must specifically be doing these acts with an intent to make the partner feel emotionally hurt or to punish them.

Withheld Emotional/Physical Item A. Only one participant, Women 7, described how her partner would ruin happy events which the research team interpreted as the partner choosing to ignore the importance and sanctity of special events,

Woman 7 *“At every happy event he would try to pull me down, graduation, baby shower, he would try to pick up an argument or say comments to put me in my place”*

Withheld Emotional/Physical Item B. Two women reported examples of partners refusing to speak to them as a form of punishment (item 13 b), which can be rather closely related to a partner giving silent treatment as a form of manipulation (e.g. item 4a) and creating a hostile environment (item 9a), which is why I repeat extracts from women 5 and 11 here:

Woman 5 *“Next thing you know, his just not speaking to me for over a week and I remember thinking, this is really awkward, because I’m at his house. What can I do in your house, what should I do, he just wasn’t giving me answers, there must have been a time when I went home because there is no way I stayed in silence that long... The silent treatment also happened to much smaller things, and I remember, just thinking this is extra ordinary. Something like leaving the bathroom light off or buying the wrong sausages and him not speaking to me for two days to a week. When we did come back after silent treatment episodes, it was always still my fault, I should have bought the right sausages, but I wouldn’t necessarily call it gaslighting, it was more just disproportionate reactions to things.”*

Woman 11 *“The silent treatment probably started 2 -3 years into the relationship, because we had probably started seeing each other more regularly at that point. I remember this being a reoccurring thing. I always felt there was something in the way that he would describe how he loves me, and it would always be in a way to try and make me feel bad about something. Like, I recall vaguely him saying ‘can’t you see that I love you, this is why I have done this’, or ‘don’t you know that I love you’ when we would have a little fall out, to make me feel bad. It was almost like keep me in the relationship.”*

Withheld Emotional/Physical Item C. Lastly, close to half of women (46.2%) detailed situations where a partner had withheld physical or verbal affection as a form of punishment or to hurt them (item 13c), which is the most severe measure of withholding physical/emotional in the MPAB (Follingstad, 2011).

Woman 11. *“During uni I moved back home for my final year, and I asked him at the start of the year if I could stay over a couple of days a week, like Sunday to Tuesday*

which he said he was fine. But it got to a point where he said I can't sleep in the bed with him, so I have to bring his own blow-up bed. There was an occasion where we weren't doing too good in our relationship, and I was on holiday with his family, and he basically ignored me for the entire time."

14. Control Partner's Decisions | The final category of psychological abuse acts in the MPAB (Follingstad, 2011) is a perpetrator controlling a partner's decisions. This includes IPPA behaviours where the perpetrator acts very upset when they don't get to make small decisions (e.g. choosing what to watch on television) which no women reported experiencing (item 14a). This category also includes a partner making personal choices that should be controlled by the victim (e.g. what to wear) which three women described in their story (item 14b) and a partner making major decisions which would affect the victim without consulting them which one woman described (item 14 c).

Control Partner's Decisions Item B. Below are a few examples of participants reports about partners attempting to make personal decisions for them which should have been decisions made by the girl/participant:

Woman 12 *"He wanted me to dress a bit sexier as well. I didn't want to dress like that, but he was saying things like 'you need to show off your body, I want to see it' etc. Basically, not respecting my boundaries on that. And making jokes about me being dressed like a nun. But I said 'I don't really want to not be covered up because it's very important to me' and I just wasn't ready".*

I also repeat two extracts from Woman 9, previously shared in relation to items 5c and 8c. Woman 9 shared her experience of a partner attempting to override her decision to inform her mother about their intimate relationships, ultimately making a major decision that would affect her. Woman 9's full story, paints a compelling picture of why this decision was major and why

her partners actions were in fact abusive. Prior to the extract shared below, woman 9 describes how the relationship had previously ended due to the physical, psychological and financial abuse taking place in the relationship. Therefore, when the relationship was re-established, Women 9 had chosen to keep the relationship secret from her mother, a decision that the perpetrator had not respected.

Woman 9: I decided that I wanted to keep the relationship a secret from my mum, when I tried to reinforce that boundary, after he had tried to make my mum aware of a relationship. He started cutting his wrists and I remember him sending me a photo of blood pouring out of several slits.

Control Partner's Decisions Item C. As previously discussed, Woman 9 also shared how the perpetrator had tried to control the major decision of which university she could attend. Illustrating a severe form of control over personal decisions (item 14b) and major life decisions (item 14c).

Woman 9 “So fast forward to leaving college and heading to university. When I was searching for universities, he made it very clear that I had to select to university in London to maintain our relationship. When I did get into University, he then went out of his way to get a job close by to my university as he had the intention of moving into my university halls. Obviously, he wanted to move in in order to control me during university. On the first day at university, he came to my halls, I explained to him that he can't live here, and he got very angry and hit me, I told him to get out and that was the end of the relationship. Little did I know he actually started stalking me.”

Code 2: Other Psychologically Aggressive Behaviours

During the coding process, an additional three IPPA behaviours, not listed on the MPAB (Follingstad, 2011) were identified, as outlined in Table 4.5 and described further below. Whilst the MPAB was not developed with the intent of providing all examples of IPPA, these additional behaviours identified through this study help in garnishing support for future researchers to perhaps develop and test a new scale, intended to centre Black women and girls' experiences. A tested and validated scale with slightly differing IPPA traits may be able to better encapsulate Black women and girls' experiences.

Table 4.5

Number of women who reported experiencing IPPA behaviours other than those listed in the MPAB (Follingstad, 2011).

Other IPPA acts experienced by participants during adolescence.	Women who experienced act	
	<i>N</i>	%
IPPA Behaviours		
Guilt-tripping or false-affection with intent to manipulate or control partner	10	76.9
Lack of accountability / denying IPPA or other hurtful behaviours	6	46.2
Motivated others to act violently towards you or insult you	3	23.1

Guilt-Tripping or False-Affection with Intent to Manipulate or Control Partner.

The most frequent alternative form of IPPA described in semi-structured interviews (mentioned by 76.9% of Black women) was a partner using guilt tripping or false-affection (e.g. partners using phrases like 'you know I love you') to get a partner to do what they wanted including sexual activities and risky activities (e.g. staying out late without parents being aware of whereabouts).

Woman 3 *"Then the worst for me was when he would get me to do things that I could never imagine myself doing in my life. He would say to me "well if you love me, you*

would do this”. And then when I would do those things he would then say “I love you”. Yet, I know now that he knew the only way, he could control me was to present the false illusion that he loved me.”

Woman 6 *“If I told him I wanted the relationship to be public, we would be like ‘ahh you can’t, I’m not in a good head space, I’m doing this’. He would make it all about himself and wouldn’t never really think about me. Really, he was just trying to control the situation.”*

Woman 7 *“It was my first relationship, and he was pressuring me to sleep over, but I knew my mum would not allow that. He would say stuff like ‘at this age you should be’ ‘I have a girlfriend I can’t even sleep next too’ and make me feel bad.*

Woman 11 *“I always felt there was something in the way that he would describe how he loves me, and it would always be in a way to try and make me feel bad about something. Like, I recall vaguely him saying ‘can’t you see that I love you, this is why I have done this’, or ‘don’t you know that I love you’ when we would have a little fall out, to make me feel bad. It was almost like keep me in the relationship. At the time I didn’t recognise this as psychological abuse as such. I kind of thought that he was an expression of love. I thought, ‘wow love does really hurt’, because I was always told that growing up”*

Women 12 *“He would say things like ‘no one loves you the way I love you’; ‘no one sees you the way I see you’; ‘no one cares about you the way I care about you’. At the time I thought it was really romantic, like ‘aww he is the only one that gets me’, but it also made me think no one else wants me.”*

Whilst this new item can be closely linked to items 3b/3c (isolating/restricting socialisation with others) and 4a/c (manipulation to get victim to act as perpetrator wants) of the MPAB

(Follingstad, 2011), as a research team, we believed that there was an additional distinction that was not quite encapsulated using the MPAB items alone. We felt that the original items 3b to 4c provided examples for how a perpetrator may use controlling techniques, acting upset and threats to achieve the desired response from the victim, however we saw a gap in these items ability to include instances of manipulation and efforts to achieve control where the perpetrator was using phrases of endearment (e.g. *I love you*) or poor mental health (e.g. *I'm not in a good place right now*) as a means to achieve control.

The use of these techniques is documented in some existing literature (e.g. Conde et al., 2018; Engel, 2023; Evans, 2010), which show how ideals about love and what love is expected to be (e.g. expectations of acts of service, loyalty etc) can often be used as justification by perpetrators to commit abuse when they feel that love ideals have been violated. Similarly, when exploring research into homicide, often referred to as 'love-killings' or 'passion-killing' a number of interviews and criminal case transcripts have seen particularly male murderers in particular suggesting that they killed a current and ex-partners out of intense passion and love, often paired with jealousy and rage (Besse, 1989; Broussard, 2012; Coker, 1992).

The idea of using affection to manipulate could also be related to the concept of love-bombing. Love-bombing in the context of intimate partner relationships, is an abuse tactic, commonly (but not always) used at the beginning of an intimate relationship. Love-bombing often involves a perpetrator displaying grand acts of affection (e.g. gift giving and spending a lot of time together) and intense infatuation towards to potential victim, usually done with the intent to mislead and later manipulate and exert control over the victim, by first instilling a false sense of security or creating an emotional or resource dependency (Arabi, 2023; Beri, 2024a, 2024b; Strutzenberg, 2016).

It is also possible to link guilt-tripping to known IPPA acts such as coercion, whereby forceful pressure and guilt-tripping can be used as techniques to fatigue the victim into eventually giving in to the perpetrators request. Guilt-tripping and false-affection are also linked to coercion in sexual abuse cases, where a perpetrator may use these tactics to pressure and coheres a victim into non-consensual sexual activity (Miller & McCauley, 2013; Morrision-Beedy & Grove, 2018), as appears to be the case in the following interview extract:

Woman 5 *“The third time that I was at his house, I remember he cooked me a nice meal and then eventually mentioned sex. I was a bit surprised because it was the first time he’s mentioned it and I didn’t really know, but that’s what it was. I thought I was just here for us to enjoy this company. It wasn’t like that. I was a bit shocked, and a bit taken aback. I remember trying to come up with some excuses like saying that I was on my period even though I wasn’t. Straight away he started to switch up saying ‘I’ve done this for you, I’ve cooked etc.’”*

Lack of Accountability / Denying IPPA or Other Hurtful Behaviours. Previous literature has described perpetrators who show a lack of accountability or deny the abuse that they have perpetrated (Costa et al., 2007; Davis et al., 2024; Ferraro, 2017). This would certainly be the case when the perpetrator is using known IPPA techniques such as manipulation and gaslighting (unjustly making the victim question their understanding, memory, perception, or sanity), to convince the victim that abuse had not occurred, that their reaction to the abuse is not warranted, or that the abuse is the victim’s fault.

Within this new code, the research team also included instances where a partner would inflict severe abuse followed by an almost immediate apology or displays of intense regret (e.g sobbing profusely) but would still repeat the same abusive behaviour later. In these cases, the

researchers agreed that this pattern of behaviour was also a display of a lack of genuine accountability on the perpetrators part, and perhaps an attempt to manipulate a partner into tolerating or not reacting to the abuse.

In total, six women's (46.2%) stories showed signs of this new code as exemplified in the extracts below:

Woman 8 *“He was cheating, and we had a physical altercation where he punched me and threw me down on the floor, to a point his brother had to come into the room to split things up. We spoke in the morning, and he blamed me for everything.”*

Woman 12 *“If he is angry around me, he would punch things and then think ‘oh let me just take it out on you’. Every time, as soon as he would punch me, he would say ‘omg I’m so sorry’ then start crying. It made me really confused, like his immediately sorry. Towards the end of that relationship, I felt so trapped like I couldn’t get out of that relationship at all.”*

Motivated Others to Act Violently Towards You or Insult You. The MPAB (Follingstad, 2011), helps in identifying instances where an intimate partner may have threatened harm against the victim and their friends and family (items 1b, 2b, 2c) as well as cases where an intimate partner insults or ridicules the victim in front of others (item 5c), or has others follow and report back on a partner’s activities (item 10c). Nonetheless, through this study we identified what we consider to be another form of IPPA which somewhat combines these items (items 1b, 2b, 2c) from the MPAB (Follingstad, 2011). A number of participants shared their experiences of an intimate partner or ex-partner during adolescence fuelling others (e.g. the perpetrators friends or family members) to act violently towards the victim. This may for instance be an intimate partner taking part in their friendship group bullying the victim, or

the victim saying negative things about the victim to their own friends, which then incites them to then ridicule, attack or display hatred and contempt towards the victim, sometimes on behalf of the perpetrator. In an adolescent specific school setting, this may also be demonstrated as an ex-boyfriend inciting other students in the school to be mean towards an ex-girlfriend for example.

The act of motivating others to act violently was reported in three (23.1%) women's stories, as displayed in the following extracts.

Woman 1 *“I remember he would tell girls about me when I was out, I would get disrespected by these girls. He evidently allowed them to let them think that they could do that. I had to be the mature one and just take their abuse like barging, kissing their teeth, giving me dirty looks. When I told him about it, he just didn't care.”*

Woman 2 *“He told his friends what I did, and they called me things like ‘evil’ and ‘a liar’ for not bringing this up sooner.”*

Woman 5 *“He's obviously gone back to one of his female friends and told her what's happened, and she then follows me and my friend out of the club and starts screaming at me outside the club in front of everybody calling me a ‘slut’ and a ‘whore’.”*

Further investigation and validation (e.g. using larger sample surveys and interviews) are needed to better understand this behaviour in adolescent relationships and whether it should be considered as example of IPPA.

Code 3: Other Abusive Behaviours

Despite this study's focus on IPPA, several participants also disclosed that they had experienced other forms of abuse, including physical, sexual and financial abuse whilst experiencing IPPA, as is displayed in Table 4.6.

As discussed previously in Chapter 1 (Defining Psychological Abuse) abuse victims commonly experience multiple types of abuse simultaneously (Hacialiefendioglu et al., 2020; Henning & Klesges, 2003; Kerbs et al., 2011; Office of National Statistics [ONS], 2018). In Krebs and colleagues' (2011) research, on average, women who had experienced IPPA were simultaneously experiencing 2.3 types of intimate partner violence. For instance, women experiencing IPPA were typically also experienced physical or sexual violence within the same relationship.

Table 4.6

Number of women who reported experiencing other forms intimate partner violence during adolescent relationships.

Other types of abuse experienced	Women who experienced act	
	<i>N</i>	%
Physical abuse	4	30.8
Sexual abuse	4	30.8
Financial mistreatment	2	15.9

It is important to note that whilst a proportion of women volunteered information about other forms of abuse occurring, as this research explicitly asked women to share IPPA experiences, a number of participants may have chosen to not disclose other forms of abuse, may have thought that these other experiences were not relevant to the study, and in some cases may have not been aware that they had experienced another form of abuse at all. This is where studies

and measurement tools (e.g. Hudson & McIntosh, 1981; Rodenburg & Fantuzzo, 1993; Straus et al., 1996) which explore multiple forms of abuse may be more accurate in identifying co-occurrence.

Co-occurring Physical Abuse. A number of previous studies have examined the process of physical abuse emerging in an intimate relationship, with several noting IPPA as an early indicator of a perpetrator eventually using physical abuse (Carney & Barner, 2012; Dye, 2019; Integrated Life Center, 2021; Murphy & O’Leary, 1989). In four women's stories where physical abuse was described (Women 8, 9, 10 and 12) this pattern can be observed, whereby women's stories begin with IPPA as the main form of intimate partner abuse in the relationship, with physical abuse later appearing as the abuse progressed. The following extracts provide a snippet of examples of participants experiences of physical abuse.

Woman 9: *Failure to communicate effectively often led to physical arguments. In arguments he would insult me. He’d call me a ‘bitch’, and as I said, on many occasions, I was also physically attacked such as him pushing me down to the ground and dragging me.*

Woman 12 *It felt like the relationship was always on a cliff edge and that I was always doing something to make him want to leave. And that turned into sexual abuse where he said he was exploring things like aggression in the relationship but then it kind of bleed out of sex into the relationship as physical abuse, like squeezing my arm really hard if he was mad or punch me. And it really escalated from that to if he is angry around me he would punch things and then think ‘oh let me just take it out on you’.*

Co-occurring Sexual Abuse. Four women (Women 3, 4, 12 and 13) also disclosed that they had been sexually abused in later adolescent intimate relationship (ages 16 – 19) where IPPA was also present. Sadly, women reported being raped, having indecent videos made without permission and in one case, a partner transmitting an STI and knowingly withholding this information from them. In the cases presented, we see signs of IPPA embedded in the sexual abuse, such as manipulation into sexual activity, lack of accountability, and withholding important information about sexual health that would affect personal decision making.

Woman 3 *“He was mean and controlling. I was vulnerable, desperate and deeply depressed during that relationship. In that relationship he raped, controlled and video recorded me without my permission.”*

Woman 13 *“I got a drink, either a cola or rum and cola, so nothing I can’t handle. Next, I remember I was lying down in a taxi, then next I remember being on a bean bag in the guy’s house, then I remember me having sex, but not moving very much. When I woke up in the morning, he was on his computer working and just turned around and said ‘morning’ like everything is normal and even offered coffee and breakfast.”*

Woman 4 *“When attending a sexual health workshop through a youth programme, they offered everyone some form of incentive to take an STI test. Obviously, I wasn’t expecting to have anything. Did the test and found out I had a STI all that time. That was the last straw, he must have cheated on me at some point. I remember contacting him in prison. I was so vexed, and really it was that I was vex that I could have potentially have had this STI for so long. I felt violated and even disgusted in myself. It was a whole experience. I have a feeling that he did know, but at the time he made out like it was new to him.”*

Co-occurring Financial Mistreatment. Financial abuse tends to be less common in adolescent populations, largely as most adolescents are financially reliant in their parents (Graham, 2004; Lee & Mortimer, 2009). Despite these two women (Women 8 and 9) indicated signs that they had been taken advantage of financially during adolescence. The extracts presented below, provided examples of male partners potentially manipulating adolescent girls into giving them money. In women 9's case, she distinctly states that financial abuse was present in the relationship, whilst in women 8's extract there is clear use of IPPA tactics (such as manipulation and lack of accountability) by the perpetrator for financial gain. As intimate partner financial abuse also typically involves the perpetrator having a desire to gain control via financial abuse (Littwin, 2012; Sharp-Jeffs, 2015), it is not fully clear from the examples provided, to conclusively label both women's extracts as financial abuse, without seeking further information from participants, hence why this code is titled financial mistreatment, rather than financial abuse.

Woman 8 *“On one occasion he said his mum was not well and he needed to pay a bill in the house for £250. He asked me for the money and said he would pay me back on pay day. I gave him the money and he literally ghosted me. Blocked me on everything. I tried to contact his family members and friends, but he just ran away with everything. Years later I saw him on the street, and he just tried talking like everything was ok and ‘it was when we were young’, it wasn’t an ‘I’m sorry’, it was more of a ‘it is what it is’.”*

Woman 9 *“There was definitely also financial abuse where him and his friends were constantly asking for money for alcohol or for his car, this was really when I got to sixth form so age 16 onwards and had my first job.”*

Code 4: Culture

During the interviews, a number of participants ($N = 5$; 38.5%) commented on the impact of their culture on how they learned about intimacy and relationships. Culture refers to “the ideas, customs, and social behaviour of a particular people or society” (Oxford Learners Dictionaries, n.d). In the context of this study, culture appeared to refer to how the norms, values, and attitudes held by Black women’s parents, families, and communities during their adolescent years shaped how they experienced IPPA, and from insights gathered from participants in this study, culture often appeared to be a barrier to seeking help from family members when the participants were facing abuse.

For instance, Woman 7 specifically spoke about how in her culture there is a lack of open conversations about sex and intimate partner violence between parents and their children, which means that young people from her particular culture are often only able to learn about these issues when they experience it first-hand themselves.

Woman 7 *Just thinking now, some kids nowadays their parents talk to them about sex but some parents don't and leave their child to just have to experience these things themselves. Why wait age 36 when I could talk to my daughter about sex at 13 to stop her from having to go through all of this, but in our culture are we even supposed to be having these conversations? And actually, how often are we in these types of settings, like this research setting, as Black young women or men, where people like you sit down and just talk to them about this stuff. It is actually upsetting, like oh my god, when are our kids going to have these opportunities, so they don't have to go through this shit.*

These findings align closely of the views on cultures effects on IPPA education shared by Black women in Study 2, as well as in the literature discussed in Chapter 5 Part 1 (Race, Culture and IPPA).

Woman 12 (as well as women 2, 3, 7 and 9), highlighted a range of culture-related issues previously discussed in Chapter 5 (Race, Culture and Societal Context) which impacted her ability to seek help when abused. Woman 12 described the effects of rigid traditional gender roles (Cinquegrana et al., 2023; Gracia et al., 2020; Nascimento et al., 2023; Sardinha & Catalán, 2018), acceptance of male dominance over women and children (Lawoko, 2008), adolescent female intimacy being taboo in her culture (Kropiunigg et al., 2006), and witnessing her mother being abused without repercussion for the perpetrator (Jeremiah et al., 2017; Priestley, 2014). These factors impacted communication style in the family, the child-parent relationships and ultimately restricted her ability to learn about IPPA at home, nor disclose her experience of abuse to her parents, meaning that, Woman 12 was unable to gain sufficient help and guidance to leave the abuser, which is echoed in the following extract.

Woman 12 *My dad is a very traditional man, and he is a very strict man born and raised in Angola. He is also someone who has dealt with quite a lot of traumas and is quite a paranoid person as a result and that is the way he brought me up. Particularly when I became a teenager he was incredibly controlling and there was a shift there because when I became a teenager, we had a very close relationship and bond but when I became a teenager it became very hostile and it was like everything I was doing was to please him. I wasn't trusted at all and couldn't talk about boys at all. We couldn't talk about romantic relationships or anything to do with sexuality. Anything like that was a no no.*

Woman 12 *"I've had conversations with my mum recently about how damaging it has been that me and sister were unable to be open about our relationships. and I think this a pattern with me and all of my Black and brown friends, where we were unable to talk about relationships at home but we all somehow ended up being in really bad situations which I just don't think would have happened if we had the space to talk*

about it. We couldn't talk to each other because I think it was like a social status thing and also learned behaviours maybe from what we had seen in family relationships, but I just think not having a space to talk about it at home with people who probably would have seen this kind of coerciveness before, instead of us having to see it, I think that just would have been so beneficial. I know even my sister had a very similar toxic relationship journey and again, I think it's a by-product, because her and I never spoke about it until we were older, and were like 'wow we've had similar experiences'. Like 'mum, even if we couldn't talk to dad about it, we should have been able to speak to you about it and maybe we wouldn't have ended up in these types of those relationships or stayed as long'. And even the trauma from that is hard''.

10.3 Summary

Study 4, the final study of this thesis, was designed to fill gaps in literature surrounding how IPPA manifests in the context of being a Black adolescent girl growing up in England, taking into account the unique influences of intersectional cultural norms and influences of both African and Caribbean heritage and living in England. Using a research survey ($N = 68$) and semi-structured interviews ($N = 13$) with Black women reflecting on their adolescent intimate relationships, the research question - **What are the stories and experiences of Black women who experienced IPPA during adolescence?**

A staggering majority (92.6%) of survey respondents had experienced at least one psychologically abusive act from an intimate partner between the ages of 10 and 19 years old. According to the severity levels and categories of IPPA used in the MPAB (Follingstad, 2011), women most commonly reported experiencing milder psychologically abusive acts (on average 5.2 milder acts) such as being criticised or belittled by their partner, followed by moderately

psychologically abusive acts (on average 4.2 moderate acts experienced) such as a partner threatening to physically hurt them. Severe psychologically abusive acts such as their partner threatening to kill them, were reported to have been experienced the least (on average 3.2 severe acts experienced).

The semi-structured interview findings similarly found that milder forms of IPPA was mostly experienced amongst the 13 Black women who shared their stories, however, in addition to the behaviours outlined in the MPAB (Follingstad, 2011), Black women reported experiencing three additional forms of IPPA in adolescent relationships including a partner motivating others to act violently towards them, a partner using guilt tripping and false-affection to get them to do what they wanted, and another failing to take accountability for inflicting IPPA. A number of women also reported simultaneously experiencing other forms of intimate partner abuse including physical abuse, sexual abuse and financial maltreatment, thus aligning with previously explored literature whereby high rates of co-occurrence across different abuse types (physical, sexual and financial abuse) are frequently seen (Hacialiefendioglu et al., 2020; Henning & Klesges, 2003; Kerbs et al., 2011; ONS, 2011).

As similarly seen in Study 2 of this thesis, the current study also saw a number of participants discuss the influence of their cultural heritage on their IPPA experiences. A number of participants made connections between their own understanding of IPPA and ability to seek help, with factors such as cultural views on gender roles and perceptions about girls and adolescents which made discussions about relationships a taboo, and normalised intimate partner violence for participants.

10.4 Methodological considerations and reflexivity

Given the transparency in information shared with prospective participants at the beginning of the study in the information shared with participants at the beginning of the study, I recognise

that the high proportion of women recorded to have experienced IPPA in this study may in part be due to women who already recognised that they had experienced IPPA being more interested in participating. Self-selection bias is known to have adverse impacts in studies, particularly when a particular set of experiences or personalities are being over emphasised/overrepresented, therefore effecting the accuracy, reliability and generalisability of accounts shared by participants and skewing results (Elston, 2021; Robinson et al., 2023; Young et al., 2020). Nevertheless, whilst this is a methodological critique that should be kept in mind, particularly when designing and recruiting participants for future studies, it is also important to recognise that even if self-selection bias was present in participant sign up for this study, this may not necessarily be a weakness, as the research question at hand was focused on describing Black women's stories and experiences of IPPA during adolescence, rather than attempting to develop a generalisable prevalence rate. As such, recruiting participants with relevant experiences enabled rich description of the experiences that this thesis aimed to study.

Arguably, the small and non-stratified nature of the samples used in this research also limits the extent to which results represent and explain past IPPA experiences for all Black women in England. Additionally, the unique features of the sample recruited for this study (Black and Mixed-ethnic background Black, over 18 and mainly educated in England) help in establish a relatively homogenous sample where the precise experiences of women belonging to a group within the very specific context of having intersecting cultural influences from both Afro-Caribbean heritage and English culture and education systems, means that it is easier to trust that the results of these findings can contribute to explaining experiences of women who share these characteristics. This reflection ultimately encapsulates one of the core aims of this doctoral thesis, whereby I aimed to uncover and uplift the experiences during Black adolescent girlhood in England specifically, rather than continuing to apply theory and knowledge from the fields of intimate partner violence and IPPA which have historically been established

without the voices or consideration of Black adolescent girls in England. The results of this study therefore now provide a more in-depth understanding and contextually relevant understanding of IPPA directed at Black adolescent girls, which has previously been missing from the field.

As already discussed in this study, I also point out that as experiences of IPPA amongst survey participants were only measured using the MPAB (Follingstad, 2011), the survey results may have missed other acts of IPPA (Dokkedahl et al., 2019). This is supported by the findings of the semi-structured interviews, whereby three additional potential IPPA acts outside of the MPAB (Follingstad, 2011) were identified (i.e. a partner motivating other to act violently or insult the participant, guilt-tripping and denying IPPA has occurred).

Nevertheless, this is useful in illustrating the benefits of taking a mixed methods approach to studying this subject matter. By utilising a semi-structured interview approach and listening to, analyse, and representing women's stories, we have been able to find symmetry between the results of the research survey and the interview accounts, where the higher prevalence of experiencing milder IPPA acts more than moderate and severe IPPA according to the research survey is mimicked in accounts shared in interviews. To strengthen this, the interviews have provided attributable quotes to demonstrate and support deeper understanding of how each IPPA act manifests in adolescent intimate relationships.

Nonetheless, as previously discussed in relation to studies 2 and 3, the retrospective accounts shared by Black women in this study may systematically differ from the IPPA experiences of current day Black adolescent girls given generational differences (e.g. societal changes, improved relationships education in schools and the increased use of social media as a tool to perpetrate IPPA) which may alter how IPPA is experienced and understood between girls and women of different generations. The decision to explore retrospective experiences in the

current study was rooted in ethical principles, whereby I wished to avoid asking minors (adolescents under 18 years old) to divulge their IPPA experiences, given the risk of emotional harm that may arise from talking about and even realising that they may be experiencing IPPA.

Having acknowledged these ethical risks, even for adults, emotional distress and the openness, courage and potentially re-traumatising process of retelling personal experiences of abuse, I ensured that optional therapy was made available for all semi-structured interview participants. I identified and developed a relationship with a UK based therapy organisation which specifically supports Black and ethnic minority groups, and secured funding to pay for a number of sessions for each participant, aiding in the protection and on-going support of women willing to participate in the study.

Furthermore, the utilisation of visual storyboards as a creative research tool, supported participants in recalling, arranging and telling their stories, whilst giving participants control of their narrative in providing the opportunity to decide what they wished to share about their experiences. Visualisation tools such as digital storyboarding (Martin et al., 2019) life storyboarding (Chongo et al., 2018; Tarzia et al., 2023), and mind mapping (Wheeldon, 2011; Wheeldon & Ahlberg, 2019) have been successfully used as qualitative methods in other studies which explore sensitive topics. Reflections shared by these researchers often highlight the benefits of such methods for improved participant recollection and facilitating more in-depth, thorough and reflective accounts and discussions in research (Chongo et al., 2018; Tarzia et al., 2023). This evidence of benefits of these methodological tools supports the use of storyboards in my own research, which almost all participants decided to use (one participant used her own notepad to create a written storyboard).

Despite the stated drawbacks there is strength in the intentional methodological considerations taken when conducting semi-structured interviews. I took inspiration from researchers who

offer personal reflections and recommendations for approaches when studying sensitive topics with Black women (e.g. Few, Stephens, & Rouse-Arnett, 2003; Kanyeredzi, 2019). Firstly, all interviews were conducted by me, a Black British woman with contextual cultural understanding. This may have contributed to participants feeling comfortable sharing their stories with another Black woman who they may have been able to identify with on some characteristics. In addition to this, given my familiarity with colloquial terminology and cultural references used by some Black women in this research, I was able to listen to women's stories without interruptedly (i.e. I rarely needed to seek clarity on terminology used). For instance given my lived experience of Black girlhood in England, I also had an understanding of what can be considered to be an intimate relationship is more far reaching than an 'official relationships' (e.g. couples with the titles of girlfriend, boyfriend or partner). I held existing knowledge of the varying terms used to describe different, often shorter intimate relationships, including situation-ships, links, hook-ups and any other relationships participants deemed to be intimate/romantic and relevant to the study. The use of various types of intimate relationships in research has been exhibited and successfully considered in other past studies with adolescent samples (e.g. Korkmaz, Överlien, & Lagerlöf, 2022).

Participants were able to tell their stories to the researcher uninterrupted, with follow up questions afterwards, and participants were not discouraged from sharing information not directly pertinent to the question being asked. For instance, woman 12 asked permission to share background information about her father and his approach to parenting at the beginning of her story. Whilst this information did not specifically explain her own IPPA experience, it did however provide highly valuable insights into about how her father's strict parenting style played a role in her being unable to seek-help or discuss intimacy with her father, as in the findings and discussion section above.

Lastly, my lived experience of adolescent intimate partner violence, which I was willing to disclose when participants asked about my inspiration for conducting this research, may have also contributed to some participants feeling more comfortable to open up during the study. This has been evidenced by other researchers who have also reflected and found that being able to express shared experiences, particularly when conducting research with marginalised groups can be beneficial for rapport building and advantageous for the quality of insights shared by participants, especially when studying sensitive matters (Hoffman & Barker, 2017; Gill, 2021).

10.5 Future Recommendations

The findings presented in this study provide valuable insights into the retrospective experiences of Black women who experienced IPPA as an adolescent. Using the MPAB (Follingstad, 2011) and semi-structured interviews this study was able to capture an overview of some of the IPPA acts perpetrated against Black adolescent girls. However, to capture other forms of IPPA potentially experienced by Black adolescent girls in England, in future research I recommend the study of IPPA utilising other measurement tools (e.g Marshall, 1999; Porrúa-García et al, 2016; Tolman, 1999) whilst continuing the test the validity of these other measurement tools when applied to Black female samples in England. I also recommend that more future studies use of qualitative methods with larger samples sizes to further uncover IPPA experiences and risk factors (including the potential significance of the onset of university as an added risk factor) using an inductive, bottom-up approach, with intent of potentially developing a brand-new validated scale to more accurately capture Black women and girls' experiences. By developing new scales through further research, future studies into IPPA amongst Black samples may be able to benefit from access to tools which more accurately reflect Black adolescent girls' and Black women's experiences.

I urge those who deliver support and education related to IPPA and relationships to consider the findings of this study in informing their understanding of Black adolescents and Black women's experiences of IPPA. These findings and stories can support practitioners in enhancing their understanding of IPPA from an intersectional and culturally competent standpoint.

10.6 Conclusion

In this paper and the retrospective stories shared in the materials provided in Study 1, I have presented detailed accounts and insights from Black women about their experiences of IPPA during adolescence. I am saddened by the extent of psychological violence and abuse faced by Black women and girls, and whilst we would prefer to not need to share such experiences, the reality, as demonstrated in this paper, is that IPPA towards Black adolescent girls is a reality that must be recognised, represented and understood. This paper further contributes to literature on intimate partner violence and abuse towards adolescents (e.g. Denham et al., 2021; French & Neville, 2008; Ogboghodo & Obarisiagbon, 2019; Parkes et al., 2016; Wingood et al., 2001) as well as the continually growing collection of research centring the lived experiences of Black girls and women in England (e.g. Banga & Roy, 2020; Femi-Ajao, 2018; Kanyeredzi, 2018). I hope that through the findings presented in this paper will assist in furthering dialogue about how IPPA is experienced by Black adolescents in England and along with the results of other studies featured in this thesis will inform more inclusive and culturally competent approaches to interventions aimed at educating, protecting and supporting adolescents surrounding IPPA and intimate partner violence as a whole.

Final Remarks

Chapter 11 | Summary of Research Achievements and Future Recommendations

This thesis was created with three core aims: 1) Establish a more comprehensive understanding of Black adolescent girls' experiences of psychological abuse in intimate relationships; 2) Explore how formal sources (e.g. school) and informal sources (e.g. family) contribute to Black adolescent girls' understating of IPPA, and the extent to which cultural factors (e.g. attitudes towards intimate partner violence and parent-child communication styles) affect how IPPA is taught to Black adolescent girls; 3) Gather recommendations for improving education and interventions to reduce rates of IPPA and to appropriately support Black adolescent girls who may experience IPPA. Overall, this thesis has successfully contributed to achieving these aims, firstly through assessing the current landscape of literature surrounding IPPA, adolescent intimate partner violence, and cultural and societal factors which may impact IPPA education and experiences, then secondly through four empirical studies:

Study 1 | Black Adolescent girls and intimate partner psychological abuse: An exploratory survey into learning experiences and future interventions.

Study 2 | How we didn't learn about psychological abuse: Interviews and focus groups with Black women.

Study 3 | A school-based study into adolescents' knowledge, views and acceptance of IPPA.

Study 4 | Unhealthy adolescent relationships: A mixed methods study into intimate partner psychological abuse of Black adolescent girls.

Below, I summarise what new insights have been produced through this thesis, in relation to achieving each of the thesis aims and how these contribute to forwarding literature already in the field.

11.1 Achievement 1 | A More Comprehensive Understanding of Black Adolescent Girls' Experiences of Psychological Abuse In Intimate Relationships.

11.1.1 Main Thesis Findings and Contribution to Literature. Prior to study 4 of this thesis, no research had specifically explored the IPPA experiences of Black adolescent girls in England, where Black adolescent girls' unique intersectional characteristics were intentionally studied and taken into consideration before designing and conducting the research. The field of literature and resources dedicated to studying IPPA as a stand-alone form of intimate partner violence (without simultaneously studying physical and sexual violence, for instance) continues to grow (e.g. Daw et al., 2023; March et al., 2023) however, research on IPPA is overall limited in comparison to research into other forms of intimate partner violence (particularly physical and sexual violence), despite numerous studies and national data revealing that IPPA is often the most frequently experienced form of intimate partner violence found in both adult and teen relationships (Leen et al., 2013; ONS 2020, 2021a; Zweig et al., 2013). It goes without saying that literature exploring IPPA specifically towards Black adolescents is even more limited, as studies on IPPA typically focus on adult samples (e.g. Almendros et al., 2009; Follingstad, 2011; Follingstad & DeHart, 2000; Hamel et al., 2023; Heise et al., 2019; Roger & Follingstad, 2011) or adolescent samples use a modest representation of Black youth without consideration for intersectional perspectives being discussed (e.g. Safe Lives, 2019; Sears et al., 2007; Ybarra et al., 2016). One study about specifically IPPA towards Black women can be found in England (Rivas, 2012); however, this thesis also explored the unique intersection of adolescence.

Overall, Study 4 of this thesis significantly contributes to a greater understanding of IPPA experiences among Black adolescent girls. Using mixed methods (surveys and semi-structured interviews). Study 4 provided both quantitative and qualitative insights into Black women's personal experiences of IPPA during their adolescent years. Using the Measure of

Psychologically Abusive Behaviours (MPAB) (Follingstad, 2011) to measure IPPA, it was found that amongst a sample of 68 Black women, 63 (92.6%) had experienced at least one of the IPPA acts listed in the MPAB (out of a possible 42 acts) ($M = 13.6$ IPPA acts experienced per participant). Women had most frequently experienced milder forms of IPPA, such as being criticised and belittled by a partner, followed by moderate IPPA (such as a partner refusing to speak to them as a way to punish or hurt them) then severe IPPA (e.g. forbidding them from speaking with others), which was comparatively rare amongst women in our sample.

Similar patterns in types of IPPA experienced were also found in semi-structured interview findings, whereby when 13 women's accounts of their adolescent experiences were coded and analysed against the MPAB. The personal stories shared by 13 Black women for this research provided rich insights and retrospective accounts of Black women's experiences of IPPA during adolescence, unveiling numerous examples of IPPA acts from the MPAB. Again, it was found that milder forms of IPPA were the most common. It is important again to note here that *milder* IPPA, according to the MPAB (Follingstad, 2011), does not suggest that the abuse experienced by most women in this study has a lesser impact on the victim. Instead, milder refers to still unacceptable and categorically abusive acts but less severe in nature than the other categories.

In addition to the IPPA items listed in the MPAB, three additional examples of IPPA were described by Black women. These additional behaviours included partners and ex-partners using guilt-tripping or using false-affection with the intent to manipulate or control, partners showing a lack of accountability or denying that IPPA has occurred, and partners motivating others to act violently towards the victim. Whilst these other experiences of IPPA were not captured by the MPAB (Follingstad, 2011), as discussed in Study 4, a number of other past literature has explored guilt-tripping and false affection (Arabi, 2023; Beri, 2024a, 2024b) and abusers denying or not taking accountability (Davis et al., 2024; Ferraro, 2017) however

there is limited past evidence of abuser motivating others to harm their intimate partner in relation to IPPA specifically.

Some women also shared how they had been simultaneously experiencing physical, sexual and financial mistreatment in their adolescent relationships, which aligns with past research which shows that victims of abuse often experience numerous forms of abuse simultaneously (Francis & Pearsons, 2021; Krebs et al., 2011; ONS, 2023a).

In addition to learning about Black women's adolescent experiences of IPPA, the stories shared by women in Study 4 also provided real detail into the context in which IPPA was occurring. We see IPPA occurring in school, college, university and at home, illustrating the transcendence of IPPA across various ages and situations. IPPA also occurred in multiple relationships for some participants, suggesting quite a worrying reoccurrence of IPPA being perpetrated by partners against Black adolescent girls.

11.1.2 Future Directions. The current thesis provides foundational information, which has so far been missing in the literature, to help begin to recognise and demonstrate that intersectional variables (e.g. cultural influence and gender-race stereotypes and prejudices) impact IPPA experiences, which was evident through the accounts shared in women's stories. Nonetheless, principally due to financial constraints, I did not set out to study a representative/generalisable sample of Black women in England nor did I attempt to explain all Black women and girls in England's experiences of IPPA. Whilst the findings presented in this thesis offer rich insights and an early image of the nature of IPPA against Black adolescent girls in England, ultimately this thesis does not provide a clear picture of the scale to which IPPA towards Black adolescent girls in England is occurring. Future research may, therefore, wish to study IPPA on a larger, potentially national scale, to better represent the extent to which IPPA is being perpetrated against Black adolescent girls and, therefore, the extent to which

larger scale intervention may be needed to combat this issue. In future research the relevance of misogyny and misogynoir amongst perpetrators of IPPA against Black adolescent girls may also be useful to explore. The research presented in this thesis has links to these issues however the extent to which misogynoir in particular plays a role in Black adolescent girls IPPA experiences remains unclear.

As discussed in Study 4 of this thesis, the detection of three additional IPPA behaviours, outside of the MPAB (Follingstad, 2011) (the IPPA measure used in Study 4), also helps to underscore a potential need for future research projects to establish a new measure of IPPA measurement tool that specifically reflects the unique experiences of Black girls and women. Given that the alternative IPPA measurement tools outlined in Chapter 1 (Defining Psychological Abuse) were also not developed with meaningfully intersectional considerations of Black women's (and other women of colours) experiences in mind; overall, there is a gap for a culturally informed IPPA tool. Without this tool, future quantitative studies of Black women and girls IPPA experiences may continue to face methodological limitations in regard to the validity of IPPA measured used. Perhaps through first conducting a larger scale qualitative study and hearing the experiences of far more Black women and girls, a validated scale which considers and accounts for cultural and race-gender related variables can be devised, which in turn can help more researchers and Black girls and women to identify and represent their experiences in a way that may not yet be fully encompassed in current measures of IPPA.

11.2 Achievement 2 | An Understanding of How Formal and Informal Sources Contribute to Black Adolescent Girls' Understanding of IPPA, and the Extent to Which Cultural Factors Affect How IPPA is Taught to Black Adolescent Girls.

11.2.1 Main Thesis Findings and Contribution to Literature. In Chapters 1 to 5 of this thesis, I identified a number of gaps in literature, whereby until this thesis, there appeared to be no existing empirical work, taking an intersectional perspective to studying Black adolescent girls (in the context of England) experiences of learning about IPPA. Chapters 2 (Intersectionality) and 5 (Race, Culture and Societal Context) in particular specifically helped to highlight how, even if all adolescents were to receive the exact same IPPA education at school, adolescents' perceptions about IPPA may still be affected by other influencing factors (e.g. family views on abuse, socialisation and religious views). Adolescence does not exist in an echo chamber where education received from school is the only source influencing knowledge. Young people also learn about concepts like intimate partner violence from information passed on through the family, information found through social media and personal research, and the perceptions of their friends, for example. Ultimately, young people with different intersecting characteristics and influences will likely have slightly varied learning experiences in general.

What Black adolescent girls learn about IPPA in schools in England, at home and from others around, has not previously been detailed through research. This thesis provided the data and insights directly from Black women and adolescents which furthers our understanding of how Black adolescent girls learn about IPPA both in and outside of school and the effects of having or not having this education.

In the first two studies presented in this thesis, Black women were specifically asked to reflect on their experiences of learning about IPPA as adolescents. In addition to the previous

experiences of learning about IPPA shared by Black women in Study 1 and Study 2, I then went on to conduct Study 3, this time exploring IPPA education with a sample of current adolescents. By studying both past learning experiences in an adult sample and current learning experiences with an adolescent sample, in this thesis I also managed to capture a potential shift overtime in the amount and quality of formal and informal IPPA education before and after improvements were made to RSE education in England and Wales (DfE, 2019).

In Study 1 I described how most Black women (66.4%) had not learnt about IPPA at school, with many owing this to the belief that IPPA was not viewed as important enough to teach in schools, as well as the covert nature of IPPA contributing to this form of abuse generally being less observed and discussed in society. On the other hand, 82.4% of current Black adolescent girls surveyed in Study 3 had learnt about aspects of IPPA at school, with 25.3% of them being moderately satisfied with their school IPPA education, and 47.1% being very or extremely satisfied. These differences in finding between Study 1 and Study 3 provide insights connected to literature explored in Chapter 5 Part 2 (How cultural and societal context impacts IPPA learning), where I laid out guidelines surrounding formal RSE education in schools in England (DfE, 2019). As outlined, in 2019/20, updated guidance surrounding relationships and sex education in England and Wales was published, providing schools with more detailed guidance and statutory expectations surrounding what young people are expected to learn about within this subject. In regard to IPPA, the guidelines outlines that by the end of secondary school (typically age 16), students are expected to have been taught about domestic violence, coercive control, unacceptable relationship behaviour and the negative impacts of unhealthy relationships on mental wellbeing (DfE, 2019), thus encompassing aspects of IPPA, yet, perhaps not going far enough to make the entirety of IPPA an essential part of RSE education. Consequently, the guidelines do not provide much descriptive information to help genuinely

understand the standard of IPPA education expected to be delivered across all schools in England and Wales. In addition to this, since the introduction of these guidelines, no research has specifically looked at the extent to which young people are learning about IPPA through these new guidelines and the quality of the information we provide. Therefore, predictions and conclusions about the quality and content of IPPA education could not be made in the same way that predictions could be made about what students in England and Wales learn in biology classes, for instance. Now, by using both retrospective accounts from Black women (Study 1) and survey results from a sample of current adolescents (Study 3), this thesis can contribute to a greater understanding of what young people know about IPPA and how this knowledge may have been shaped by both the formal and informal influences in their lives.

In relation to informal learning, some Black women reported that they had learnt about IPPA through online information (e.g. learning about IPPA through social media posts or online tips). In Study 1, 68.9% of Black women surveyed had used social media to learn about IPPA (albeit this percentage includes Black women who may have used social media to learn about IPPA during adulthood too). Amongst current Black adolescent girls surveyed in Study 3, 88.2% had used social media to learn about IPPA. This therefore aligns with some previous studies which have put emphasis on high rates of young people using social media to learn about relationships and sex (Hollis et al., 2022; Patterson et al., 2019), and my findings contributes further to this field of research, by suggesting that this trend may also be true for young people's learning about IPPA.

Some women surveyed (36.1%) surveyed also reported that they had learnt about IPPA from their friends during adolescence, however women who were interviewed explained how this was unlikely because their friends also had a lack of awareness about IPPA and, understandably, little experience with romantic relationships at the time. On the other hand, in a survey of 17 current Black adolescent girls the majority (70.6%) reported that they had learnt

about IPPA from friends. This perhaps suggests a generational shift (between Black women and current Black adolescent girls) in the role that friends are playing in IPPA education and an improved collective understanding about IPPA amongst young peers. Whilst some recent studies have explored the role of friends in informal sex education (e.g. Sartin-Tarm et al., 2021; Sex Education Forum, 2019; Stewart et al., 2021). Studies like Harper and colleagues (2004) show that in interviews Black American adolescent teenagers often reported that close friends play a vital role in shaping how they conceptualise dating behaviours. As Harper and colleagues (2004) research was conducted 20 years ago, ‘adolescents’ in their study would now be roughly the age to some Black women used in Study 1 (where 25.1% of women were aged 30 - 39) and Study 2 (where 24% of women were aged 30 - 35) of this thesis, however Harper and colleagues (2004), study obviously studied a different construct (i.e. how friends impacted how Black adolescents defined dating, views the dating process, perceptions on partner fidelity and expectations for condom use) to the constructs being explored in my thesis (i.e. learning and experiences of IPPA).

In regard to IPPA education received at home, Black women were typically unsatisfied with the information that they received from their parents. Most women had not received direct information about IPPA from their parents, however, some reported that they had received indirect information about IPPA, using more casual conversations (i.e. gossip about other family members' relationships or random comments about toxic behaviours that appeared in television shows), which is echoed in Dennis and Woods's (2012) research into Black women's experiences of how sex with their mothers, where several Black women shared similar experiences of this style of communication when mothers spoke to them about sex.

Many Black women believed that their parents' own gaps and misconceptions about IPPA (i.e. as a result of their parents also not learning about IPPA or IPPA being normalised

in their parent's culture) in turn reduced their ability or perceived need to teach their children about IPPA. Several Black women also shared the view that IPPA was possibly not taught to them as adolescents because their parents, or ethnic culture, tended to view adolescent dating as a taboo subject, making conversations about intimacy and, therefore adolescent intimate partner violence almost non-existent in their communities. This consequently limited Black women's power to seek help from their parents if they were experiencing abuse as an adolescent.

A common experience shared by several participants was the experience of actually witnessing IPPA and other forms of abuse occurring in their parent's or other relatives' intimate relationships, which in itself acted as a form of informal education about IPPA and intimate partner violence. When participants in Study 2 explained their experiences of witnessing IPPA, they often reflected on how IPPA generally appeared to be pardoned, normalised and accepted by victims, their family members and other community members (such as church members and in media depictions of abusive behaviours), which led them to view IPPA as a normal and almost expected relationship dynamic. As explored in Chapter 5, Part 1 (Factors Affecting IPPA Experiences), witnessing intimate partner abuse and familial violence, can and has for many Black participants in past studies, contributed to a normalisation and regeneration of these acts in later relationships (e.g. Jeremiah et al., 2017; Priestley, 2014; Vil et al., 2022). Along with findings from past research, the fact that (without being prompted by the interviewer) several Black women who participated in interviews and focus groups in Study 2 mentioned the impact of witnessing abuse at home or in their community, indicates that this experience is quite widely shared among participants, and is certainly a factor that participants felt played an important role in IPPA education and misinforming young people's about intimate partner violence, which perhaps needs to be further researched and addressed through specific interventions.

Due to the lack of formal or direct informal IPPA education provided both at school and at home, several women in Study 2 reported that they grew up without accurate terminology (e.g. psychological or emotional abuse) to describe acts of IPPA that they were witnessing, and for some, experiencing themselves as teens or early adults. Women described how this ultimately contributed to them being unable to spot and label the signs of IPPA. Nevertheless, the results of Study 3 (school study) showed that in a knowledge quiz about IPPA, most current Black adolescent girls were able to identify non-physical abuse as the most common form of abuse in England and Wales and were able to correctly identify and deem unacceptable acts of IPPA presented in vignettes, suggesting a pretty good understanding about IPPA in a current youth sample. In addition to this, following an educational workshop intervention about IPPA, Black adolescent girls' scores on the IPPA knowledge test and their self-rated confidence to spot the signs of IPPA increased even further, indicating that workshops can effectively forward knowledge about IPPA and do provide benefits.

Additionally, whilst not explicitly asked to comment on the effects of race-gender stereotypes, several participants alluded to the role that their culture played in perpetuating strong Black girl and strong Black woman stereotypes and how these stereotypes may have impacted their understanding of IPPA. Participants suggested that strong Black girl and strong Black woman stereotypes reinforced the normalisation of intimate partner violence towards Black girls and women and instilled the notion that Black women and girls are not victims of intimate partner violence, therefore minimising their perceptions of IPPA behaviours (e.g. belittling a Black woman and shouting at a Black women) as a form of abuse. As quite extensively, explored in Chapter 5 Part 1 (Factors Affecting IPPA Experiences), several studies have explored the negative impacts of strong Black girl/woman stereotypes echoed in the findings presented in this thesis. For instance, some women in Study 2 connected the stereotypes to the belief that

they cannot be victims of abuse and when they are they should not seek help from sources outside of the family which is also found in other past studies (Debman et al., 2021; Burman et al. 2004; Monterrosa, 2021). Through this thesis we now have some insight that strong Black girl stereotypes seem to possibly also be playing a role in IPPA education (as well as IPPA experiences), which perhaps could be explored further in future research.

Overall, both Study 1 and Study 2 of this thesis contributed to a clearer understanding of which sources of information most contributed to Black women's knowledge of IPPA as they were going up, the extent to which they were satisfied with the level of IPPA education received, the perceived impacts of these learning experiences and lastly the perceived relevance of the influence of culture and race on how IPPA information is delivered and received. This thesis has demonstrated how cultural attitudes towards intimate partner violence, cultural norms, stereotypes about Black girls and women, misogynoir and gender roles played a role in how Black women in England understood IPPA when they were adolescents. This exhibits the importance of taking an intersectional approach to understand how different groups learn about and understand IPPA. Had I simply looked at data which compared quantitative scores on knowledge about IPPA without conducting the additional qualitative research that I did, the influence of culture and parents on IPPA on knowledge and education perhaps would not have been exhibited as clearly.

Lastly, this thesis forwards the field by providing the first representation of data on how adolescents are currently taught about IPPA in schools in England, even when the current guidelines (DfE, 2019) do not explicitly give guidance on what to teach about IPPA. The findings of Study 3 suggest that young people surveyed have a good understanding of IPPA and how to spot the signs of IPPA and also shows the positive impact of young people receiving an educational workshop which can enhance both knowledge and self-rated confidence to spot the signs of IPPA among young people.

11.2.2Future Directions. To summarise, this thesis has contributed to the view that historically, Black women in England do not feel as if they had received satisfactory IPPA education from school or at home from their parents. However, by studying an adult sample of Black women reflecting on their past experiences as well as capturing current adolescents' experiences, it appears that IPPA education has improved over time. From the thesis, at least, the future seems optimistic if this improve continues and is present in more school than the one tested in this research. These studies are by no means attempts to create generalisable results that explain the IPPA education experiences of all Black adolescent girls in England. To achieve this, a larger sample size covering young people across various parts of England is needed to create more conclusive results in representing Black girls as a homogenous group. A larger scale study could help to investigate whether systemic gaps exist in the quality of IPPA education delivered to Black adolescent girls and whether further interventions are needed to enhance IPPA education for this group and all adolescents or whether the quality of IPPA differs from school to school.

As previously mentioned, future research may also wish to further delve into the influence of strong Black girl stereotypes on current Black adolescent girls experiences of learning about IPPA as well as more in-depth analysis of differences in how culture may impact Black adolescent girls IPPA learning experiences based on differences in the various African and Caribbean cultures, which was not specifically studied in this thesis.

11.3 Achievement 3 | Recommendations for Improving Education and Interventions to Reduce Rates of IPPA and Appropriately Support Black Adolescent Girls Who May Experience IPPA.

11.3.1 Main Thesis Findings and Contribution to Literature. Researchers have long advocated for including young people's voices in the development of RSE ([Scott et al., 2020](#)). This is considered crucial for developing programmes that engage and motivate young people, and to ensure that RSE reflects young people's experiences and preferences in a changing world. A fundamental premise of this thesis's dedication to studying IPPA experiences and education for Black adolescent girls was to seek recommendations for improving IPPA education and interventions for Black girls by directly listening to Black women's and girls' views.

Examples of recommendations for RSE from adolescents and young people in past literature include a desire for more teaching of varied topics that reflect students' needs, interests and everyday experiences (e.g. young people wanting to learn more about consent) ([Draper, 2023](#)) and more inclusive education that reflects diversity in sexuality and gender differences ([Waling et al., 2021](#)) delivered by qualified RSE educators ([Waling et al., 2021](#)) and with credible [Kimmel et al., 2018](#)). Other recommendations previously suggested by young people and adults include a need for healthcare providers to create safe and supportive environments for disclosures ([Chang et al., 2005](#)), I desire for service providers to be culturally responsive and trauma-informed ([Bent-Goodley, Romero-Chandler & Zonicle, 2023](#)) and improved community awareness, victim-targeted marketing of services and the removal of transport and language barriers to service ([Simmons et al., 2011](#)).

As previously explored in this thesis, what young people may want out of the education and interventions available to them surrounding matters of abuse, intimacy, sexuality, and more can differ based on the young person's particular needs. If Black girls and Black women's

voices are not accounted for when developing such interventions and education, it becomes challenging to assume that what they do have access to meets their needs. As IPPA learning and victimisation for specifically Black adolescent girls in England has previously not been researched and written in such detail, this also means that it is difficult to assume that existing provisions surrounding IPPA education and interventions available to all adolescents, specifically meeting the needs of Black adolescent girls.

In Studies 1 and 2 of this thesis, using mix-methods approaches of surveys (study 1) and interviews and focus groups (study 2), Black women who had already gone through the education system in England provided their views and recommendations about how they believe IPPA education and interventions could be improved and delivered to current day adolescents. In addition to this, in Study 3 (school-based study), current Black adolescent girls, using closed survey questions, were also asked about who they think should teach IPPA education, when this education should begin and the potential impacts of this education.

Black women most frequently believed that IPPA education should begin for Black girls at age 11-12 (school year group seven), whilst current-day Black adolescent girls believed that IPPA education should start at age 10-11 (school year group six) or age 13-14 (school year group nine). This quite closely aligns with guidance from the DfE (2019), for young people to learn about intimate partner violence in secondary school. Nonetheless, a sizable number of participants (47.1% Black adolescent girls and 48% of Black women) also believed that IPPA needs to be introduced during primary school and even earlier, indicating some variability.

When considering improvements to the quality of formal and informal IPPA education, both Black women and Black girls also typically believed that parents and teachers should receive training on IPPA to enhance the extent to which they can provide meaningful IPPA education to young people. Women spoke about the possibility of providing parents with additional

resources at home that would allow parents to discuss IPPA and other aspects of relationship education from a culturally informed perspective.

The RSE statutory guidelines for schools (DfE, 2019), quite extensively comments on the importance of involving parents in RSE education. On page four of the DfE guidelines (2019) it states that “We are clear that parents and carers are the prime educators for children on many of these matters. Schools complement and reinforce this role and have told us that they see building on what pupils learn at home as an important part of delivering a good education”, and that “RSE must be taught sensitively and inclusively, with respect to the backgrounds and beliefs of pupils and parents”. The DfE (2019) guidelines also states that schools should provide parents with examples of the resources they plan to use for RSE, which can support parents to continue RSE conversations at home and also provides more transparency regarding the content of RSE lessons being taught to young people. The DfE (2019) also recommends that schools should support parents to speak about sex education at home. The findings of the research in the thesis, somewhat echoes sentiments from the DfE (2019), regarding parental involvement.

However, some critics have highlighted the need for schools to share **all** RSE resources with parents (DfE, 2024b), as several parents have raised concerns around a continued lack of consultation and do not agree with some aspects of the child’s RSE education (Care, 2024). Beyond parents having the right to withdraw their pupils from some classes (classes related to sex education only - not relationships education) and schools being required to consult parents on the overall school RSE policy (e.g. consulted on how RSE is defined in the schools policy, how and when RSE should be delivered, what will be covered, how the subject will be monitored and evaluated and how often the policy should be reviewed), the guidelines (DfE, 2019) do not give much further direction on how inclusivity of pupils and parents backgrounds, beliefs and intersectional needs can be achieved in the classroom. The guidelines state that

schools can (if they wish to) teach about religious perspectives of sex and relationships and should consider whether it is appropriate to provide students with protected characteristics (e.g. disability, race, sex and sexual orientation) with additional support, in line with the Equality Act (2010). However, again, discretion of how to implement these is left up to individual schools to determine and therefore it cannot be guaranteed that religious needs and other needs of individuals with protected characteristics are fully being met in RSE in all schools.

Next, Black women and Black adolescent girls also supported the idea of using GPs, nurses, social workers and relevant organisations/charities, in addition to teachers and parents to teach adolescents about IPPA. This indirectly aligns with notes made in the RSE guidelines for schools (DfE, 2019), which acknowledges that when correctly vetted by the school beforehand, the use external visitors (i.e. charities and specialist organisations) can be beneficial in boosting RSE education in schools, however, the recommendations made no comments about the use of nurses and GP's. This suggests a recommendation for more triangulated methods of providing IPPA education, whereby experts from different fields can all contribute towards improved IPPA education (i.e. doctors, nurses, charities, schools and parents). Some studies have already provided evidence of doctors and nurses being useful sources of education in RSE (particularly for sex, sexual health and puberty (Bramhagen & Lundström, 2022; Pavelová et al., 2021), however given that sex sexual health and puberty are very much related to physical health, further research is needed to see if the same benefits could be achieved in relation to IPPA. With this in mind, perhaps more specifically psychologists and psychiatrists (i.e. doctors), therapist and counsellors ought to be the practitioners involved in delivering IPPA education for adolescents. An intervention study into the use of these various sources for IPPA education could be a useful next step in progressing these ideas.

Detailed extracts about Black women's recommendations for IPPA education was sought through the use of qualitative methods (Study 2) and captured recommendations, which otherwise would not have been captured had only the surveys had been used.

Black women's accounts helped to understand that many believed that IPPA education for Black adolescent girls may benefit from being delivered by women, whereby having this shared characteristic with the educator may facilitate a greater connection between educators and young girls. Women suggested that same sex/gender educators could enrich the extent to which learners would view the information about IPPA being delivered as relevant to them. The effects of same-sex educators for RSE have not been previously researched, however a similar desire for same-sex educators was echoed by young people in Strange and colleagues research (2003), as well as in Coleman and Testa's (2007) research where 51.2% of Black adolescent girls in a sample in London wanted their educator to be the same-sex as them. Whilst I did not specifically ask current adolescence in Study 3 about their preferences in regards separate sex education, adult Black women provide some insight which may be of interesting to explore in future research with adolescent samples. As previously discussed in Chapter 5 Part 2 (How cultural and societal context impacts IPPA learning), the department for education (2019), recognise the benefits of sex separated teaching of some RSE topics, when used to equitably support the differing needs of different groups of students. As such, if further research did suggest that current adolescents are interested in same-sex educators, this would be fairly easy to implement with the current guidelines in place (i.e. it is already possible to split classes by sex where appropriate).

On the other hand, Black women typically did not suggest that IPPA education needed to be provided to Black adolescent girls by Black educators, noting that the race of the educator would not necessarily enhance IPPA learning experiences for Black adolescent girls. This in part can also be linked to results of Coleman and Testa's (2007) study which found among 710

Black 15-to-18-year-old adolescents in London, that only 32.7% of Black girls indicated that they would prefer a Black person to teach them about sex at school. Coleman and Testa's (2007) results, as well as the results from my thesis, perhaps suggests that having same-race educators for RSE is not extremely important. Nonetheless, as adolescent participants in Study 3 were not asked about their preference for same race, educators, there are still research needed to draw conclusions applicable to adolescents today.

Black women did, however, show great support for IPPA educators to have lived experiences of IPPA/intimate partner violence themselves, where they can draw on personal experiences to provide informed and empathetic IPPA education for girls. As stated in the discussion section of Study 2 (How we didn't learn about psychological abuse: Interviews and focus groups with Black women), the Department of Education does not make any recommendations surrounding lived experience in teaching RSE. Nonetheless some past empirical studies have indicated that when young people learn from people with lived experiences these learning experiences can be impactful and beneficial as a preventive intervention. Nonetheless, this typically comes from research into teen-pregnancy reduction interventions (Lin et al., 2019; Watson & Vogel., 2017) and HIV prevention education (He et al., 2020; Maticka-Tyndale, & Barnett, 2010) delivered to at-risk youth by young mothers and people living with HIV, thus not explicitly linked to this thesis, but useful to consider.

Lastly, as discussed in Chapter 5 Part 2, several intervention studies have concluded that healthy relationships education which teaches young people about the signs of abuse can lead to lower victimisation rates (e.g. Draper, 2023; Owens et al., 2016; Pomeroy et al., 2011; Simpson et al., 2017). According to my research surveys, both Black women and Black girls tended to strongly agree that IPPA education has the potential to reduce the number of adolescent girls experiencing abuse. This belief was more pronounced amongst Black women who more frequently agreed or strongly agreed with this belief (87.4%) compared to Black

adolescent girls (53.8%), suggesting that several Black girls generally might believe that IPPA education would be ineffective for victimisation reduction, or that there is another factor at play (e.g. perhaps systemic issues, lack of education surrounding misogyny, normalisation of IPPA, and general issues of violence against woman and girls in England) which if addressed may also significantly contribute to reduced victimisation rates.

Nonetheless, reasons for current-day Black adolescent girls being slightly less confident than Black women in their views that IPPA education would reduce victimisation was not explicitly studied within the empirical chapters in this thesis. As such, to truly know current Black adolescent girls' current views on how to reduce IPPA victimisation rates, future research may wish to utilise qualitative research methods further to study this.

11.3.2 Future Directions. The recommendations for IPPA education drawn from the thesis provide a valuable starting point for developing and improving IPPA education and interventions for Black adolescent girls. These recommendations offer scaffolding for future intervention programs; however, further quantitative and qualitative research should be used to enhance our understanding of these recommendations further - As only Black women had the opportunity to provide recommendations through qualitative methods (whilst adolescent girls could only do so through a research survey and closed-questions), further research should now be conducted to seek further details into Black adolescent girls' views. For example, in Study 2 of this thesis Black women recommended using same sex educators to teach girls about IPPA; however, in this thesis adolescents views on using same-sex educators were not explored. As such further research using a sample of adolescents would be needed to be confident that this is what young people (and specifically Black adolescent girls) want.

In further studies a larger sample of current Black adolescent girls in England could also be used to create a more representative overview of their opinions on IPPA education. Nonetheless, when specifically studying IPPA education in England on a larger scale in the

future, it is worth noting that (as detailed in Chapter 5 Part 2 - How Cultural and Societal Content Impacts IPPA Education), schools across England and Wales have flexibility over how they teach their RSE curriculum. This means that when conducting larger scale studies, young people's views on the actual delivery of RSE/IPPA education, may somewhat contribute to an overall understanding of the landscape of views on IPPA education, however realistically, when interpreting results from a larger scale study steps should be taken to control for or study variability between school settings. In taking the step, this could potentially lead to more targeted and personalised recommendations for schools. By speaking to more Black adolescent girls across more schools in England, we can better understand what aspects of IPPA education currently work for them on an individual school level, but we also may be able to identify trends that may point towards more globalised issues in IPPA education that ought to be addressed on a nationwide level (e.g. improvements to IPPA education guidelines and more accessible resources for schools) rather than at an individual school level.

11.4 Methodological Reflections

At the end of each empirical study presented in this thesis, I have provided commentary on the methodological decisions, including the limitations realised and reflexivity on my positioning as a Black British woman with lived experience of adolescent intimate partner abuse.

Here, I simply wish to highlight the overall strength of the mixed methods used throughout this thesis. Black women were able to share their experiences through interviews, focus groups and surveys, providing choice over how to engage with the topics being explored in my studies. Mixed methods have helped to not only encapsulate data to indicate trends in IPPA experiences and learning, but this approach has also allowed me to present rich and valuable insights

directly from Black women, which generally further supported the trends found from survey results.

Additional measures were also taken in the hope of making participation comfortable for Black women. This involved making intentional decisions over the use of language, the choice to include all types of intimate relationships (i.e. official relationships, situationships, linking and dating), ensuring that there was ample time to fully introduce myself to participants and check in with how they are feeling at the beginning of each qualitative study, and the choice for all interviews and focus groups to be led by me, a Black British Woman. Hopefully these choices (as well as several others) previously described at the end of each empirical chapter, helped to bring about comfort as well as a sense of connectedness between the participants and myself.

To reliably assess the qualitative data presented throughout this research and to lessen issues of single-researcher interpretation, all qualitative analyses were conducted by a team of female research assistants, working together to identify codes, compare codes and agree on final conclusions based on the process of inter-reliability. As such, the insights formed are based on my perceptions and potential biases and a team of researchers with multiple experiences.

11.5 Concluding Remarks

So, we have reached the end of this thesis. On a human level, what has been achieved?

Grief: Through a greater understanding of how Black girls experience IPPA during adolescence, unfortunately, the reality that too many Black women have historically faced IPPA is realised. We see that a lack of education, misinformation and normalisation surrounding intimate partner violence and IPPA, paired with Black girls and women being impacted by gendered-race stereotypes and prejudices, has unfortunately contributed to too many stories of victimisation.

Insight: The findings presented in this thesis provide a new understanding of how IPPA is taught to Black adolescent girl and their experiences of IPPA. The intersectional approach taken in this thesis helps to illustrate how a wealth of insights can be derived when researchers intentionally take steps to deeply understand a specific groups unique and multifaceted experiences and needs, which ultimately has the potential to lead to the development of interventions which cater to more needs of diverse groups of young people.

Hope: Evidence of increased proportions of Black adolescent girls learning about IPPA now (Study 3), compared to in the past (Study 1 and 2) since the introduction of the 2019/2020 relationships and sex education guidelines from the Department of Education (2019), tells us that education on this topic is improving and hopefully this will lead to current Black adolescent girls feeling more equipped to spot the signs of IPPA, and hopefully to seek help if ever faced with IPPA.

Action: The thesis has collated a number of recommendations provided by Black women as well as adolescents about how IPPA education can be delivered and improved to effectively support and meet the needs of Black adolescent girls now and in the future. Overall, the results of this thesis have implications for the improvement and development of formal and informal education and interventions surrounding IPPA, which, with further research, can lead to enhanced IPPA education both inside and outside of school, and by addressing harmful race-gender stereotypes and misconceptions about IPPA which can impact Black adolescent girls' knowledge and experiences of IPPA. Hopefully this will in turn contribute to a reduction in the number of Black adolescent girls facing such abuse in the future.

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