

Overcoming Abuse: A Phenomenological Investigation of the Journey to Recovery From Past Intimate Partner Violence

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Paulina Flasch,¹ Christine E. Murray,² and
Allison Crowe³

Abstract

To date, minimal research has focused on the recovery process for survivors of intimate partner violence (IPV). This study utilized a phenomenological methodology to understand the lived experiences of survivors of IPV ($N = 123$) who had overcome abusive relationships and created violence-free and meaningful lives. The researchers aimed to understand key factors involved in their recovery processes. Results indicated two main processes in the IPV recovery process: *intrapersonal processes* and *interpersonal processes*. *Intrapersonal processes* included (a) regaining and recreating one's identity, (b) embracing the freedom and power to direct one's own life, (c) healing from the mental and physical health symptoms of the abuse, (d) fostering acceptance and forgiveness with self and abuser, (e) education and examination of abusive relationships, (f) determining whether and how to enter new intimate relationships, and (g) acknowledging the long-term process of overcoming abuse. *Interpersonal processes* included themes of (a) building positive social support and relationships and (b) using ones'

¹University of Central Florida, Orlando, FL, USA

²University of North Carolina at Greensboro, NC, USA

³East Carolina University, Greenville, NC, USA

Corresponding Author:

Paulina Flasch, Department of Child, Family and Community Sciences, College of Education and Human Performance, University of Central Florida, Orlando, FL 32816-1250, USA.

Email: paulinaf@knights.ucf.edu

experiences with abuse to help others. Results of the present study are presented, and implications for practitioners are discussed.

Keywords

intimate partner violence, domestic violence, recovery, abuse, healing

Intimate partner violence (IPV) is defined as “physical, sexual, or psychological harm by a current or former partner or spouse” (Center for Disease Control [CDC], 2015, n.p.) and affects between 30% and 35% of women and about 25% of men at some point in their lives, although women greatly outnumber men as victims of severe violence (National Coalition Against Domestic Violence [NCADV], 2015). IPV victimization, especially in its most severe form of battering, is a traumatic experience for survivors. In light of the high rates of IPV in the general population and in practice settings, there is growing attention to research, prevention, and interventions to address IPV. This attention has enhanced the state of our knowledge about the dynamics of abuse, as well as about the safety risks that survivors face within abusive relationships, while they are in the process of leaving. Most interventions described in the literature focus on the immediate needs often found in domestic violence shelters and agencies, especially those centering around safety and crisis management (Allen & Wozniak, 2010). These are indeed important developments, as it is critical for professionals to know how to address the crisis-focused needs of survivors to engage multidisciplinary community partners to help survivors achieve safety and to hold offenders accountable.

To date, minimal research has been done on the recovery process following an abusive relationship (Allen & Wozniak, 2010). Historically, most research on abuse and trauma has focused on symptoms and pathology (Ai & Park, 2005; Burt & Katz, 1987; Song, 2012). Existing research suggests that survivors may face many long-term consequences from their abuse, including mental health symptoms (e.g., post-traumatic stress disorder [PTSD] and depression), long-term physical health consequences, negative career and educational outcomes, and an increased risk of experiencing additional abusive relationships (Tjaden & Thoennes, 2000; World Health Organization [WHO], 2012). Although topics of resilience and wellness for survivors are beginning to gain attention in the literature (Ai & Park, 2005), much of the existing research has focused on the long-term negative effects of IPV.

Despite the bleak view that research paints of the longer term negative impacts that survivors of IPV may face, many go on to build safe, healthy, nonviolent lives and relationships. Our own research (e.g., Murray & Crowe,

2015; Murray & Crowe, in press; Murray & Crowe, 2016; Murray, Crowe, & Brinkley, 2015; Murray, Crowe, & Flasch, 2015; Murray, King, Crowe, & Flasch, 2015) provides evidence of this and includes hundreds of survivors of abusive relationships. Although many of these participants described ongoing challenges they continued to face at the time of participating in our research, the vast majority also described successes, strengths, and resources they developed in the aftermath of abusive relationships. That so many people face the trauma of abuse and still go on to lead positive, fulfilling lives demonstrates the importance of understanding the factors and processes that can best support survivors in overcoming abuse and minimizing the negative consequences associated with it.

Thus, the purpose of this study was to use a phenomenological qualitative research methodology to identify the lived experiences and individual processes involved in overcoming past abuse. We use the term *overcoming past abuse* to describe the processes experienced by people who have been abused within an intimate relationship as they move forward following the abuse to achieve positive, satisfying lives and relationships, as well as optimal functioning in various areas of their lives. Survivors of past abusive relationships ($N = 123$) who had been out of any abusive relationships for at least 2 years completed a narrative survey about their experiences with overcoming past abuse. To be encompassing, our inclusion criteria for the study did not discriminate between the type and magnitude of abuse that survivors had experienced; this is both a strength and a limitation, as we gained representative experiences of survivors; however, the recovery processes may differ depending on the individual experiences of women, based on the types of abuse and magnitude. Nevertheless, there was considerable homogeneity in the sample, where 98.4% of participants had experienced emotional or psychological abuse, 82.9% had experienced physical abuse, and 70.7% had experienced sexual abuse by their abusive partners. A complete description of participants is found in Table 1.

In recognition of the diversity of experiences of survivors of abuse, our goal was to explore the lived experiences and common processes that long-term survivors of IPV experience, in a large diverse sample of individuals. Before describing the current study, we review the literature on the long-term impacts of abuse, with a particular focus on how survivors overcome abuse.

Literature Review

Three themes in the literature regarding the process of overcoming past abuse include (a) the potential for post-traumatic growth, (b) variability in the extent to which the identity of *abuse survivor* is central to survivors' overall identities,

Table 1. Participants' Demographic Data ($N = 123$).

| Participants' Demographic Information | % of Sample |
|---|-------------|
| Age | |
| $M = 41$ | |
| $SD = 11.5$ | |
| Range = 21-70 | |
| Gender | |
| Female | 95.1 |
| Male | 2.6 |
| Other/not reported | 2.6 |
| Ethnicity | |
| Caucasian/White | 83.7 |
| Hispanic/Latino/Latina | 8.9 |
| African American/Black | 4.1 |
| Other | 3.3 |
| Native American | 2.4 |
| Asian | 0.8 |
| Geographic region | |
| United States (31 states represented) | 83 |
| Australia | 6.5 |
| Other countries | 6.5 |
| Europe | 4 |
| Educational background | |
| Bachelor's degree | 33.3 |
| High school diploma/GED | 30 |
| Associate's degree | 16.3 |
| Graduate degree | 14.6 |
| Other | 4.1 |
| Not reported | 1.6 |
| Household income | |
| <US\$30,000 | 42.3 |
| US\$30,000-US\$59,000 | 30.9 |
| US\$60,000-US\$100,000 | 16.3 |
| >US\$100,000 | 9.8 |
| Not reported | 0.8 |
| Current relationship status | |
| Married | 23.6 |
| Single | 20.3 |
| Committed relationship, living together | 17.1 |
| Divorced | 11.4 |
| Committed relationship, not living together | 10.6 |

(continued)

Table 1. (continued)

| Participants' Demographic Information | % of Sample |
|---|-------------|
| Separated | 6.5 |
| Dating but not in committed relationship | 4.1 |
| Other | 4.1 |
| Legally recognized civil union or domestic partnership | 1.6 |
| Not reported | 0.8 |
| Children | |
| Children (total) | 73.2 |
| Children with abusive partner | 50.4 |
| No children | 26.8 |
| Number of past abusive relationships | |
| <i>M</i> = 1.83 | |
| <i>SD</i> = 1.12 | |
| Range = 1-7 | |
| Mode = 1 | 51.2 |
| Abusive partner's sex | |
| Different from participant | 93.5 |
| Same as participant | 4.9 |
| Other/not reported | 1.6 |
| Length (in years) of abusive relationship | |
| <i>M</i> = 8.14 | |
| <i>SD</i> = 6.69 | |
| Range = 0-29 | |
| Type of abuse | |
| Emotional/psychological | 98.4 |
| Physical | 82.9 |
| Sexual | 70.7 |
| Other (e.g., spiritual, stalking, financial, cyber bullying, threats to children) | 42.3 |
| Abuser legal punishment? | |
| No | 62.6 |
| Yes | 37.4 |
| Current contact with former partner (e.g., shared custody) | |
| No | 69.9 |
| Yes | 30.1 |

Note. In some categories, participants could select all that applied, so the sum of the percentages is greater than 100%. GED = general education diploma.

and (c) the processes involved in overcoming past abuse. These themes are discussed in the following section, which concludes with a summary of the key findings to date that provide the foundation for the current study.

Posttraumatic Growth Following IPV Victimization

The potential negative consequences of IPV victimization are well documented (e.g., Tjaden & Thoennes, 2000; WHO, 2012) and will not be discussed in detail here. Despite the risk of myriad negative outcomes, Ai and Park (2005) suggested that it is important to focus on the positive growth that can occur following a traumatic experience, even as negative symptoms and consequences are addressed as well. Very few previous studies have focused on optimal health and wellness as outcomes, focusing more on being free from violence and symptoms (Allen & Wozniak, 2010). However, research on trauma has gradually shifted to a focus on more of the positive, growth-engendering processes that can result from trauma (Ai & Park, 2005).

The growth that follows a traumatic experience has been referred to as post-traumatic growth (Ai & Park, 2005). Some of the positive outcomes that may stem from a traumatic experience include the following: more adaptive views on life, stronger coping skills, new or fortified personal and relational resources (Ai & Park, 2005); a sense of thriving (Allen & Wozniak, 2010); a greater understanding of one's needs, increased assertiveness and independence, a greater sense of self-worth, increased awareness of social justice issues, greater feelings of control (Burt & Katz, 1987); and satisfaction with one's life and relationships, personal growth, and motivation to take action to improve one's life (Song, 2012). Examining the positive outcomes of trauma does not mean that trauma is a positive experience; rather, it reflects the potential that growth may occur as a by-product of these experiences (Burt & Katz, 1987).

The Centrality of the Identity as an Abuse Survivor

Survivors vary in the extent to which their experiences with past abuse become a central part of their overall identities. Assuming the identity of a survivor may not always represent the optimal outcome for healing. Wuest and Merritt-Gray (2001) wrote that the term *survivor*

still gives primacy to the abuse in women's lives, even though women in this stage are clearly taking on a new image and no longer see abuse or the survival experiences as the centre of their existence . . . Any label applied by socially defined experts has the potential to take away from the woman's redefinition of herself, and we need to ask ourselves who the label serves. (p. 91)

In short, a primary identity as a survivor still defines the person in relation to the abuse they experienced. An assumption underlying the current study described in this article is that there is no single way to define a positive or

healthy identity as to whether and how one may integrate survivorship into their identity. For some, an ongoing identity as a survivor may feel like a badge of honor. For others, such an identity serves as a constant reminder of past negative experiences and the shame and guilt they faced in relation to them. As we have engaged in research with hundreds of survivors who experienced past abuse within intimate relationships, we have grappled with the appropriate terminology to use in response to the question: "If it is considered progress to move from viewing oneself as a victim to viewing oneself as a survivor, then what, if anything, comes after survivor?" For semantic purposes, we follow Murray and Graves's (2012) use of the term *survivor* to describe "individuals who have become permanently separated from their experiences of battering victimization" (p. 16). However, in our view, people ultimately may reclaim an identity that belonged to them all the time—that of a human being, a complete self, and a unique and valuable individual who has a unique and important contribution to make through their lives. The salience that each person ascribes to the centrality of their past experiences of abuse to their overall identity will vary. From a constructivist standpoint, we advocate for allowing for an inclusive view of positive outcomes in terms of how "successful overcoming" will be achieved. For some, the identity of survivor will be a central indicator of success. For others, the survivor identity will become a distant memory over time that is not central to their overall identity. We advocate for a lens for research and practice that validates individuals' unique opportunity to define this identity for themselves, especially as it relates to their overall health and well-being.

The Process of Recovering and Healing From Past IPV

According to Allen and Wozniak (2010), recovering from a past abusive relationship is "a social, spiritual, cultural, and psychological process" (p. 37). Similarly, Farrell (1996) described this process as "a multidimensional phenomenon consisting of physical, mental, and spiritual components . . . [that involves] . . . reconnecting the fragments of the self by putting into perspective the past experiences of abuse" (p. 31). The healing process is not prescriptive or sequential, but rather it is a long-term process that can vary widely (Farrell, 1996). Unique individual factors can either hinder the recovery process (e.g., a lack of resources) or help foster recovery (e.g., positive social support; Song, 2012).

Likewise, survivors may draw upon a range of strategies and resources to support their recovery process. For example, among one sample of 18 female survivors of trauma and comorbid disorders, women took care of themselves when facing challenges in the following ways: by making connections with

others, drawing upon spiritual beliefs, engaging in bodywork and physical activity, using decision-making skills, and other self-care strategies (Steinus & Veysey, 2005). The acceptability and applicability of these various strategies is likely to differ from person to person. Therefore, experiences of IPV recovery are diverse, so it is important in both research and practice to avoid overly prescriptive approaches (Alexander, Tracy, Radek, & Koverola, 2009). According to Hou, Ko, and Shu (2013), "There is no specific time frame of recovering from IPV. To understand the recovery process of each woman's situation is important" (p. 171). A small number of researchers, using predominantly qualitative methodologies, have studied the recovery process for survivors of IPV. To provide a context for the current study, we review these in chronological order in this section.

The Reclaiming Self model. The Reclaiming Self model, which is based on qualitative research that Merritt-Gray and Wuest (1995) conducted with survivors of IPV in rural Canada, describes the process through which survivors leave abusive relationships and establish safe, nonviolent lives and relationships. The process through which a survivor reclaims oneself involves both internal and external processes, affecting not only how they view themselves but also how they are connected with the world around them. The two stages of the model that address survivors' experiences after they have left the relationship are called *not going back* and *moving on* (Wuest & Merritt-Gray, 1999). In the *not going back* stage, survivors create new boundaries to separate themselves from their abusers, and they establish and maintain features of a life of their own. In the *moving on* stage, survivors create a life that is no longer defined by the past abusive experiences, such as by shifting its role in their identity, by fostering new relationships, and creating a new self-image (Wuest & Merritt-Gray, 2001). This may involve no longer adhering to the identities as a victim or survivor, which is referred to as putting it in its rightful place (Wuest & Merritt-Gray, 2001).

Farrell's themes in healing from IPV. Farrell (1996) conducted a phenomenological study with seven women who had been abused by male partners, all of whom had been out of their abusive relationships for at least 1 year. Farrell identified four themes in the participants' experiences of healing. *Flexibility* involved acknowledging the past, modifying boundaries in relationships with others, and increasing one's resiliency and self-awareness. *Awakening* involved a process of realizing one's ability to make choices and move toward inner strength and peace. The *relationship* theme centered on participants' ability to integrate their sense of self, connect with others, and restore their ability to trust. Finally, the *empowerment* theme addressed participants' abilities to make choices for their lives and move toward personal accomplishments.

Smith's stages in recovering from past IPV. Smith's (2003) qualitative study with 15 survivors of past abusive relationships focused on their experiences with recovering from abuse. Smith identified three stages in the journey of recovery from past IPV. The first phase involved *the abusive past* or leaving behind the relationship. The second phase encompassed the *struggles* the women faced as they moved beyond abuse. Finally, some women moved to the third phase of *healing and growth*. Some of the challenges these survivors faced in their recovery processes included letting go of the past, finding their voices, becoming self-reliant, rediscovering themselves, forgiving themselves and others, and finding a sense of purpose. Smith noted that some participants did not move into the healing phase but remained in the state of non-recovery.

Allen and Wozniak's Rites of Passage model. Allen and Wozniak (2010) proposed a three-phase process of recovering from past abuse, which includes (a) *separation* or moving forward from the past ways of life; (b) *liminality*, which involves a period of uncertainty in which survivors reevaluate their roles and relationships in life; and (c) *incorporation*, in which a newly reintegrated identity emerges.

Hou et al.'s Reconstructing the Self model. Hou et al. (2013) examined the experiences of eight Taiwanese women as they recovered from a past abusive relationship. Based on this research, they described the recovery process as *reconstructing the self*, which encompassed four themes: feeling shame, creating mastery, recognizing the imperfect self, and embodying the self by helping others. This reconstructing process involved self-acceptance of the changes that they experienced internally and through reconnecting with others. Other common experiences among the sample included building autonomy and flexibility in their lives, accepting their personal limitations, reaching out for support, and making meaning of their experiences by helping others.

Summary. Taken together, these prior studies provide an important foundation for understanding the process of recovering from past abusive intimate relationships. Although the specific themes and terminology varied across these studies, each one underscored the importance of viewing recovery from abuse as a set of multifaceted processes. Some of the researchers (e.g., Allen & Wozniak, 2010; Merritt-Gray & Wuest, 1995; Smith, 2003) viewed these processes as occurring in a sequential order over time, although the sequence may vary between individuals. Others (e.g., Farrell, 1996; Hou et al., 2013) focused more on generalized themes across survivors' experiences. Common elements that appeared in multiple studies included addressing and acknowledging the past abuse; promoting positive, meaningful relationships with people in survivors' social networks; developing personal resources; and

moving toward an integrated, new sense of self. While these studies individually provide value to the research on recovery, they were all small, qualitative studies. Furthermore, it is not the goal of qualitative research to generalize findings (Hays & Wood, 2011), but rather to allow the findings to transfer (Creswell, 2013) to the population that was studied. Much of the research on recovery, including the aforementioned studies, typically uses homogeneous samples of primarily Caucasian women within a specific geographical context.

The current study expanded upon past studies by using a larger ($N = 123$) and more geographically diverse (i.e., 31 states and 8 countries were represented) sample. Thus, the current study illustrates findings that are unique and representative, as well as provides a framework for future research that will use more diverse methodologies to continue to expand upon the knowledge base for understanding and supporting long-term survivors of past abusive relationships.

Method

The researchers of the present study chose to employ a phenomenological research methodology to get to the heart of the “lived experiences” (Creswell, 2013, p. 76) of long-term survivors of IPV and the processes by which they were able to overcome, or recover from, abuse, and how they made meaning of such processes. This study was part of a larger study that examined various processes of leaving and recovering from abusive relationships.

Research Team

Two researchers are counselor educators and the other is a doctoral student in a counselor education program. The researchers all have a background of working with victims and survivors of IPV. In addition, the researchers have between 3 and 10 years of experience conducting research, advocacy work, and/or teaching in this area. Researchers' assumptions included views that (a) social stigma affects survivors and victims and affects the recovery process; (b) recovery is a complex process that not only comprised several common themes but is also experienced differently by each individual; (c) social support and resources play a major part in the recovery process; and (d) individuals have the ability to recover and lead peaceful, happy, and nonviolent lives.

Procedures and Survey Instrumentation

While phenomenological studies typically employ interviews, our study utilized an online narrative survey questionnaire. While the intimate nature

of an interview was sacrificed, we were able to gain extensive, rich narrative data from a geographically diverse sample that answered our research question and aided in transferability of our results. To obtain a large, geographically diverse sample, the researchers created an open-ended narrative survey that addressed participants' experiences of overcoming past abuse. The electronic survey was hosted on the secure Qualtrics Internet-based survey hosting platform. As an incentive for participation, all participants who completed the full survey were eligible to enter a drawing for one of two US\$50 store gift cards. The study was approved by two universities' Institutional Review Boards (IRBs), and participants were required to read and agree to an informed consent document. The survey took about 20 min to complete, and participants had the choice not to answer any questions they did not feel comfortable answering. The survey was developed for this study. Participants who met the eligibility criteria for the study and agreed to the terms of the informed consent document were presented with the full survey, which included three parts: (a) demographic characteristics, (b) background questions about participants' experiences with IPV, and (c) a series of questions about participants' experiences with overcoming past abuse, which was the focus of the larger study through which the data presented here on overcoming abuse were drawn. Based on phenomenological tradition (Moustakas, 1994), our main research question was as follows:

Research Question 1: What are the lived experiences of survivors of past abusive relationships who overcome past abuse and build safe, nonviolent lives and relationships?

The following open-ended questions were asked in Part 3 of the survey to address this question: (a) In your own words, please describe what you think it means to overcome past abuse within an intimate relationship? (b) Some of the survivors of IPV who participated in our past research described the process of overcoming abuse as a "journey." How does that term resonate with you and your own experiences? If you view your process as a journey, what were some key moments along the way since beginning the journey to where you are now? (c) What, if any, changes did you make in your life to overcome your experiences of abuse? (d) What message would you want to send to people who have recently left an abusive relationship? and (e) Please share any additional insights you would like to share about your experiences with overcoming abuse.

Data analysis. The researchers followed the steps outlined for data analysis consistent with the phenomenological research tradition (e.g., Creswell, 2013; Hays & Wood, 2011; Moustakas, 1994; Wertz, 2005). The researchers engaged in a coding process using a hierarchical emergent coding strategy,

where participants' narrative responses were examined. The researchers first engaged in *horizontalization* by reading and re-reading the transcripts and highlighting statements, sentences, or quotes (referred to as *meaning units*) that provided information about *how* the participants experienced the phenomenon. Each researcher completed *horizontalization* independently of each other. The researchers then compared notes, consolidated duplicated or repetitive meaning units, and combined these to create a final list. These were then further broken down into overarching *themes*, which included interpersonal and intrapersonal processes. Using the meaning units and themes, the researchers engaged in writing the *textural* and *structural descriptions*, which described what the participants experienced and the context and setting of the phenomenon. After this process, the *essential invariant structure* of the study was completed, which provided the essence of the participants' experiences or the common experiences.

Trustworthiness. In qualitative research, trustworthiness refers to measures taken to increase the validity of the data (Moustakas, 1994). Several methods recommended in the literature (e.g., Creswell, 2013; Polkinghorne, 1989) were used to ensure trustworthiness in the present study. For instance, the researchers engaged in *epoché* by bracketing their experiences and acknowledging their assumptions and personal experiences with the topic (Husserl, 1939/1954; Wertz, 2005). In addition, researchers did not complete a thorough literature review until after the data analysis process to decrease chances of influence, which may alter or create bias in the data collection procedure (Creswell, 2013; Wertz, 2005). The researchers kept a detailed audit trail by maintaining records of the data process, in addition to maintaining a field journal. *Triangulation* was used by gaining national and international perspectives in addition to regional and local ones. In the data analysis procedures, the researchers conducted *horizontalization* of the data independently of each other to account for bias and to increase trustworthiness.

Participants and Recruitment

Participants were recruited through a purposive convenience sampling method. A variety of electronic platforms were utilized, such as social media sites (e.g., domestic violence service agencies, national domestic violence advocacy organizations, and peer support groups for survivors), emails to personal and professional contacts, and recruitment through listservs. Snowball sampling was also used. Eligibility criteria included (a) having been in an intimate relationship that included some form of IPV (i.e., emotional/psychological, physical, and/or sexual abuse), (b) having been out of any abusive relationship for at least 2 years, and (c) being at least 21 years of age.

Demographic information. The sample ($N = 123$) was demographically and geographically diverse, with participants representing 31 states in the United States, plus the District of Columbia, in addition to nine other countries or territories (including Australia, Canada, England, Spain, and Cameroon). A complete list of demographic data is found in Table 1.

Results

Results indicated that participants experienced a combination of interpersonal and intrapersonal processes in their journey to overcome past abuse. *Intrapersonal processes* included (a) regaining and recreating one's identity, (b) embracing the freedom and power to direct one's own life, (c) healing from the mental and physical health symptoms of the abuse, (d) fostering acceptance and forgiveness with self and abuser, (e) education and examination of abusive relationships, (f) determining whether and how to enter new intimate relationships, and (g) acknowledging the long-term process of overcoming abuse. *Interpersonal processes* included the themes of (a) building positive social support and relationships and (b) using ones' experiences with abuse to help others.

Intrapersonal Processes to Overcoming Abuse

Participants described intrapersonal processes involved in overcoming abuse. Intrapersonal experiences are generally known to be internal to oneself and related to emotion, self-regulation, awareness, and knowledge. Seven categories were intrapersonal in nature.

Regaining and recreating one's identity. A common theme in participants' responses involved regaining and recreating one's identity, post-abuse. This included (a) regaining self-esteem and self-worth that was damaged by the abuser, (b) finding the way back to one's "old self," and (c) creating a new identity, post-abuse. In describing their process of overcoming abuse, participants explained how their abusers had disempowered them to the point that self-esteem and sense of individuality and worth was lost, or, at the very least, severely damaged. One participant in the study explained, "Being in an abusive relationship often shifts your view of yourself. A lot of times you will feel powerless and useless. Your self-esteem is almost non-existent at some points." Having low self-esteem and a sense of worthlessness made the recovery process much more difficult. One participant noted, "At the beginning it was really hard because of all the mental damage he did to me. My self-esteem was so down that I hated myself and did not think I was worth anything."

Participants recounted the process of recovering an identity or sense of self that they had prior to the abuse but felt that they lost through the experience of being in an abusive relationship. As one participant stated, "I felt like as time went by I slowly gained pieces of myself back. I slowly started to see myself as attractive again, loved being around myself, and just loving me." Participants described their experiences of discovering and gaining a new sense of self or identity that may be different from their identity prior to the abuse. One participant recalled the questions she faced as she attempted to discover who she was:

Who am I? What do I love? How do help others? How can I be an advocate? What am I passionate about? I have to act like nothing is holding me back, and push towards making a difference, investing in myself and others, and following my dreams.

Regaining and recreating one's identity post-abuse is a complex process comprised of building up one's self-esteem and sense of worth, described by participants as essential in the recovery process.

Embracing the freedom and power to direct one's own life. After leaving an abusive relationship—in which abusers exert power and control, make major decisions, and work to disempower their victims—regaining power is a difficult but important process. This category included statements that reflected (a) participants recognizing their freedom and power to make choices about their own lives and (b) participants taking steps to embrace that freedom, such as by embarking on a new career or making other big and small changes in their lives based on their own choices and freedom to have self-determination. One participant noted the difficulty in finding herself again, especially in the context of the stigma of being a survivor.

For many years, I struggled to regain my power and my voice. The biggest hurdle (and most rewarding triumph) was when I 'came out' as a survivor . . . I no longer have to hold my secrets and let them distill into shame.

Participants described how certain moments illuminated a new reality for them and reminded them that they had the choice to direct their own lives and make their own choices. One participant shared, "I can spray on some perfume in the morning without thinking 'Uh oh—I'm not allowed to wear perfume.' His rules don't apply anymore and you don't even think of them." Participants also shared the actual steps they took to realize their freedom, such as finding jobs, new friends, and becoming engaged in different activities. Participants

explained that taking steps toward independence and becoming autonomous was a key part of the process to regain freedom and power after abuse. One participant noted,

I decided never to give up my independence. I took back my maiden name . . .
I learned to be comfortable not having a date or partner for activities and events
. . . I learned to manage finances, home, car, repairs, etc. on my own . . .
I became involved in women's issues and groups . . . I went back to college for
my MA.

Statements in this category highlighted the difficult process of taking steps toward independence and freedom post-abuse but also illustrated the courage and determination of the participants in the study.

Healing from the mental and physical health symptoms of the abuse. Participants in the current study explained that overcoming abuse meant healing from the abuse and all that it entailed. Thus, this category included (a) survivors' recognition of the physical and/or mental health consequences stemming from the abuse they experienced and (b) the steps that survivors took following abuse to promote positive, optimal physical and health functioning (i.e., not just managing negative symptoms).

One participant explained that recognizing the fact that she was a victim was the first step toward healing: "Having someone *name* that I was a victim of domestic violence started the journey." One theme that was frequently described by participants as essential to their healing process included some form of therapy or support group, in addition to medical care to target physical wounds.

Participants spoke of the seeming rollercoaster ride of emotions that followed the abuse, including anger, fear, sadness, and hopelessness. One participant explained how her journey to healing included "going to the gym, becoming involved in school, giving back to the community, empowering myself, going to counseling, and going to doctors."

Education and examination of abusive relationships. While learning about abuse was a key element in the aforementioned *healing process*, it is listed as a separate category for the purpose of this article, as it is a distinct and essential component. In this category, statements address participants' experiences of (a) learning about the dynamics of abusive relationships and (b) using that knowledge to examine past experiences with abuse. Statements demonstrated a recognition that the perpetrator was responsible for the abuse, realizations that participants had, in fact, experienced abuse, and a greater understanding

of how their experiences related to experiences of abuse among other survivors. A first step in this process was frequently referred to by participants as a recognition and acceptance that abuse had taken place. "First I had to recognize it as abuse, which was very difficult for me. From there, it became easier to overcome. I needed to understand what happened, view it realistically, and forgive myself for being a participant." Participants described their journey of recognizing they needed to leave a dangerous situation with their abuser, and how that journey continues post-abuse. One participant stated, "I am a strong, educated woman. And I am still floored by how much control he [had] and still tries to have over me."

Participants shared that learning about IPV and dynamics of abusive relationships was essential in their healing process and in understanding and overcoming their abusive relationship. One participant stated, "Learning about DV and IPV has helped me to identify the patterns of power and control that ruined my life." Participants explained that knowledge of the underlying patterns of control and power within IPV relationships helped them make sense of their experiences and empowered them to overcome and move forward.

Fostering acceptance and forgiveness with self and abuser. This category reflected a process toward moving forward in one's life and finding peace. Included were statements reflecting (a) participants accepting their own experiences, (b) moving toward forgiveness of themselves, and (c) moving toward forgiveness of their abuser.

To move forward, participants explained that accepting what had happened was essential in discontinuing trying to change the past. One participant stated that moving on meant "to just quit asking 'why' and reliving the past every day for years. I have to let it go even though it is painful." Another explained, "It is easy to fall into a pattern of self-pity and blame." While participants explained that accepting that the abuse had taken place was a difficult process, forgiving themselves was even more challenging. Many participants blamed themselves for not getting out sooner or blamed themselves for the abuse itself. One participant stated, "It is a lifetime process of reflection, learning, and forgiveness. There are many layers to healing and with support, prayer, and determined focus life can change."

For many participants, trying to forgive their abuser was part of their healing process. One participant explained how forgiveness allowed her to free herself from her past: "I have forgiven my perpetrator and I have forgiven myself for thinking that I could be to blame. I have allowed myself to love again and to be loved." Another participant explained that forgiveness, while ideal, is exceptionally difficult: "I am still trying to forgive him . . . but

that is very, very hard to accomplish because of the damage done to my children and me.” While some participants did not find forgiveness of the abuser to play a significant role in their healing, most participants found this to be an important part of their process.

Determining whether and how to enter new intimate relationships. Navigating through post-abuse romantic life was a challenge for many participants who described this process as containing (a) participants’ perspectives toward new relationships, in particular how they decided whether and how to enter new intimate relationships and maintain safety and wellness in the process, and (b) participants’ expressed desire to not repeat patterns found in their past abusive relationships, whether that was through intentionally choosing to remain single or by carefully considering how to safely enter new relationships. For participants who did choose to enter new relationships, statements reflect their views and actions related to how they embraced love and intimacy within new relationships. Statements also addressed challenges they experienced in new relationships. Participants described the difficult process of regaining trust in new intimate partners and also being hypersensitive to red flags: “I can pick up on a man who wants to control me . . . there are plenty of signs. I drop them.” Participants also discussed the difficulty of properly evaluating new relationships and fear of becoming stuck. One participant noted,

I was hypersensitive to abuse-signals and warning signs, which made me prematurely end relationships . . . I think I was just too scared to become stuck, like I had with my abuser.

Another participant explained the safety measures she takes prior to dating: “I double checked who I was seeing to make sure the information was correct—background checks.” Some participants in the study made the choice to not pursue intimate relationships, and instead focus on finding purpose and meaning in other ways. Some were simply too afraid of becoming involved intimately again, whereas others felt that they needed to heal completely before attempting to enter into a relationship. One participant stated, “I gave up the idea of ever dating again. I stay busy and try to focus on work and my children and grandson.” Another one shared, “I cannot even think about dating or marrying again. I feel too damaged. I can only handle taking care of myself right now.” Some participants stated that while they have not excluded the possibility of future intimate relationships, they recognize that journey will take time and will require a lot of work and therapy.

Despite the challenges, participants shared that they were able to find loving intimate partners, post-abuse. However, a common theme included the

difficulty of navigating these relationships and the importance of the partner's patience, compassion, and understanding. One participant shared what it was like being in a healthy loving relationship, but still facing challenges: "I do not jump as much when he reaches for me or feel afraid. It's always a continuous journey but I'm slowly but surely feeling like a better me." Another participant explained,

My husband had to earn my trust and slowly break down my wall, but he was patient and willing to do it for me . . . He has promised never to hurt me like that and never has. It took years for me to totally trust him.

Another participant explained, "His consistence, understanding and gentleness have been a major contributor to my passage toward healing. This was not an easy task; rather, one that required both of us to be diligent and transparent in ways I often found frightening." One participant explained the continuous work required in a new intimate relationship: "We continue to work through the nuances of survival and trauma—this is an everyday exercise." Navigating through new intimate relationships was a complex and multifaceted process for participants, involving a great deal of trust, fear, risk, and love.

Acknowledging the long-term process of overcoming abuse. This category reflected the notion that overcoming abuse is a long-term process, which many participants described as an ongoing journey. Statements reflecting the *journey metaphor* are included here. The journey was viewed as both (a) positive and uplifting and (b) painful and emotional. Some participants described the process as one that was ongoing even after they had *overcome* the past abuse by establishing safety in their lives. One participant explained, "It is a journey, and a complicated one for sure. It is like a rollercoaster with constant ups and downs. You doubt yourself at times, but you are strong when you need to be . . ." For others, it seemed like the future seemed bleak, with triggering events putting a wrench in the works. This participant described her journey as a grieving process:

I am still overcoming abuse, and probably will be for a really long time. Five years of intense psychological, verbal, emotional, financial, sexual, and physical abuse has scarred me in ways that I don't realize until something triggers a memory, a feeling, or a thought. It is like a grieving process. There is denial, anger, confusion, doubt, sadness, and acceptance. And sometimes you can be all over the place in that process, and sometimes a little thing will start the process all over again.

Triggers from abuse experiences frequented participants' stories in various ways. Some participants described how coping with the symptoms of abuse

changed over time. Some participants initially resorted to destructive coping strategies, such as consuming drugs and alcohol, while others coped through therapy, friendships, and family support. In a metaphor, one participant's statement summarized an enduring theme in participants' stories:

I don't think many people manage to *complete* their journeys after suffering serious abuse. You can try and tarmac over the cracks, but they are still there. To outsiders the road may look smooth, but beneath the surface I believe it is still pretty bumpy. A winding road, full of switchbacks and hump-back bridges that goes on and on.

Participants' experiences bear witness to the disempowering nature of abusive relationships. Furthermore, their journeys reflect the complex processes of recognizing that they had value and a sense of self-worth.

Interpersonal Processes to Overcoming Abuse

Interpersonal processes are generally known as those that occur in relation to others. This may include listening, problem solving, negotiating, and assertiveness, or overall interactions with others. Results suggested that the participants experienced several interpersonal processes. Two themes, in particular, were interpersonal in nature; these included (a) building positive supports and (b) using one's experiences of abuse to help others who are struggling.

Building positive social support and relationships (i.e., not in the context of an intimate relationship). This category addressed the steps that survivors took to build, strengthen, and maintain supportive, positive social support networks, such as friends, family members, co-workers, fellow community members, support group members, professional helpers, and faith communities. Participant statements include (a) regaining trust in others, (b) creating a positive context for parenting, and (c) taking steps to repair, or choose to end, relationships that may have been damaged as a result of their experiences with abuse.

Finding safe and trustworthy individuals was a struggle for many participants who had been isolated and cut off from support in their abusive relationships. Participants shared stories of reaching out to family and friends who minimized the abuse or blamed the survivor. Others still did not understand the extent of the abuse the victim had undergone and were not supportive or helpful. To counteract negative interactions, some participants had to create new networks of support and eliminate negative ones. One participant stated, "I built a new support system of people who love me, make me accountable for irrational decisions, and are committed to my personal growth, not just

their own.” Another one recalled, “I changed the people I hung out with . . . associated myself with positive people . . . started speaking [to] spiritual leaders.” Participants learned to “set boundaries for myself in terms of the friendships that I kept; language that I allowed others to use in my presence . . .” which at times included the difficult decision to break contact with family members.

Overwhelmingly, participants shared in their stories that social support was essential in their process of overcoming abuse, not only in terms of both friends and family but also in terms of counseling and support groups. One participant recalled, “Support, support, support. This is what got me and my children through the initial aftermath of leaving my ex-husband.” Another one explained the importance of connecting with others in a similar situation:

The key points for me were the fact that I was able to gain a support system that understood my fear and what I had been through. I was able to join support groups that had other people affected by violence that could understand and we could relate with each other.

Participants explained that the process of opening up and trusting others was difficult and slow, but rewarding and essential for healing. Building relationships with safe and healthy people was a recurring theme in many categories. While difficult, many participants experienced social support as being an essential component in overcoming abuse.

Using ones’ experiences with abuse to help others. This theme included participants (a) using their own experiences to advocate for other survivors and to share their stories and (b) experiencing personal healing and empowerment by helping others.

A recurring theme included using one’s own experience as a springboard for advocacy. One participant stated, “I went back to school and earned my BA in sociology and social work and worked at a domestic violence/sexual assault agency helping other people like me with overcoming abuse.” Another participant stated, “I realized there were other people who were lost out there in the flurry of abuse. I had done good work to heal myself, now it was time to help others.”

Participants also recalled experiencing a sense of personal healing and empowerment through the process of helping others and sharing their own stories. One participant stated, “I am now a DV advocate and this has been very therapeutic and has forced me to deal with some of my ‘stuff’ to better serve my clients.” Many participants used their experiences to not only help others but also to become empowered in the process. Advocacy is a main

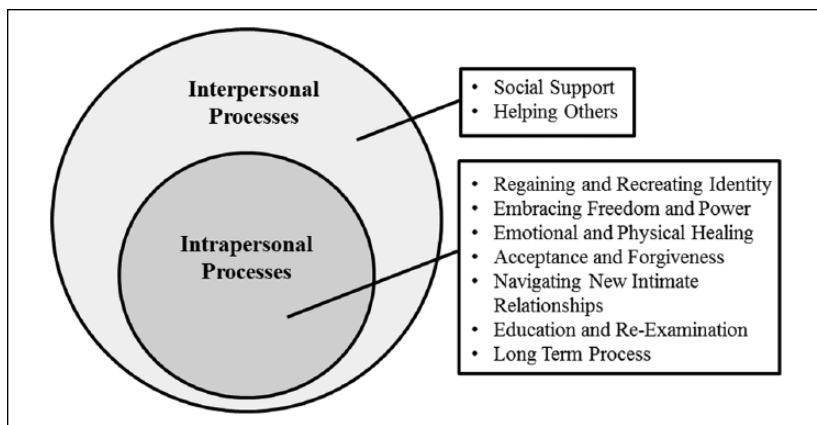


Figure 1. The Triumph Process Model of Overcoming IPV.

component of overcoming IPV, which is further elaborated in a separate article by these authors (Murray, King, Crowe, & Flasch, 2015).

Discussion

The goal of the present study was to better understand the lived experiences and complex processes that survivors experience as they overcome past abuse. Results revealed interpersonal and intrapersonal processes that guided survivors' recovery. The findings of the study are illustrated with The Triumph Process Model of Recovering From Past IPV (see Figure 1). *Intrapersonal processes* were defined as internal experiences and included (a) regaining and recreating one's identity, (b) embracing the freedom and power to direct one's own life, (c) healing from the mental and physical health symptoms of the abuse, (d) fostering acceptance and forgiveness with self and abuser, (e) education and examination of abusive relationships, (f) determining whether and how to enter new intimate relationships, and (g) acknowledging the long-term process of overcoming abuse. The core part of the intrapersonal processes was participants' description of finding their "old self" or recreating a new identity, which encompassed becoming empowered and moving forward in an abuse-free and trusting context.

Interpersonal processes were defined as processes that occurred within a social context or in relation to others, and included themes of (a) building positive social support and relationships and (b) using ones' experiences with abuse to help others. Themes in this category reflected the importance of

establishing a safe and trusting support network, connecting with other survivors, and helping others by becoming an advocate. Participants discussed the complex processes that were experienced post-abuse and in the recovery time thereafter. They talked about the importance of social support, education about IPV, and rebuilding the self. In addition, participants experienced a need to accept and forgive, move on, and use their experiences to advocate and help others in similar situations. While healing from emotional and physical abuse is an intricate process which most participants related to as a continuous journey, the process was one through which many participants created meaning and found peace.

Understanding Factors of Overcoming Past Abuse

Consistent with previous research on post-traumatic growth (Ai & Park, 2005), survivors in the current study reported finding meaning in their lives following their abusive experiences. In fact, many went on to become advocates for others, for themselves, and found ways to reclaim their identities in ways that enhanced their strengths and quality of life. Furthermore, as previously found by Allen and Wozniak (2010) and Farrell (1996), participants in the present study also experienced their recovery as a process involving numerous internal and external factors, including psychological and social elements.

Several models were proposed in previous literature on IPV recovery, including the Merritt-Gray and Wuest (1995) Reclaiming Self model, which was comprised of the two themes of *not going back* and *moving forward*. Results from the current study mirrored this model, in that survivors explained their processes of establishing a physical distance from their past (e.g., new employment, housing, and education) in addition to creating a new future where they build themselves up (e.g., regaining identity and self-esteem, and creating new social supports). Hou et al.'s (2013) Reconstructing the Self model also reflects many of the participants' experiences in the current study. For instance, Hou's et al. model includes themes of shame, empowerment, acceptance, and helping others, which were identified in the current study, as participants navigated the complexities of recovery. Furthermore, Farrell's (1996) stages of flexibility, awakening, relationship, and empowerment can be distinguished in the results of the current study. For example, social relationships played a significant role in survivors' ability to rebuild trust, set boundaries, and receive support, whereas awakening and empowerment were part of survivors' process to gain self-esteem and build up their post-abuse identities. The participants in the current study also underwent a healing process similar to that outlined in Smith's (2003) Stages in Recovering From

Past IPV model, where survivors embarked upon both psychological and physical healing in a stage-like manner. This was also similar to the process outlined by Allen and Wozniak's (2010) Rites of Passage model, where three stages identified the recovery process (i.e., separation, liminality, and incorporation).

A common theme in previous models included stage-like processes of recovery, which incorporate some sense of "leaving behind the abusive relationship" prior to embarking on healing and regaining oneself. However, contrary to the models where survivors move from one stage to another (e.g., leaving behind abuse, struggle, healing, and growth; Smith, 2003), the results from the current study indicated that recovering from abuse is not a linear process that occurs in a systematic order, but rather one that is intertwined and cycles through various junctures over time. To illustrate this phenomenon, some survivors explained that, for example, triggers brought up years into the recovery process could catapult them back to where they needed to re-experience parts of the recovery process that they previously felt were complete. Thus, the recovery process is neither one that has a predetermined beginning nor an end, but rather is composed of numerous factors that cycle through as survivors move through life.

Underrepresented in previous literature is the notion of navigating through new intimate relationships as well as becoming an advocate to others. These two themes represented important components of participants' stories in the current study, but were either limited or lacking in previous literature. For instance, some survivors decided that personal healing and recovery was more important than choosing to ever enter into romantic partnerships. Others were too frightened to do so, despite having a desire to find a healthy partner, in fear that the partner would end up being abusive. Further still, some survivors struggled to distinguish healthy from unhealthy relationships and found themselves prematurely ending healthy relationships due to past triggers. In addition, finding ways to trust loving intimate partners was a journey in and of itself, as it required support, patience, and understanding. Still, survivors were able to find love and be part of healthy and safe partnerships. Advocacy and helping others were also a major part of survivors' recovery process. Survivors found peace by helping others who had been in similar situations, and through that, they found purpose and meaning in their own experiences and in their own lives.

In sum, IPV victimization carries a risk of long-term consequences that can affect survivors for years to come. And yet, it is also important for researchers, practitioners, and survivors themselves to understand that positive outcomes are possible following abuse as well. Certainly, experiencing abuse within an intimate relationship need not be a lifetime sentence to

negative physical and mental health consequences, repeated victimization, and a substandard life course. Rather, survivors of past abusive relationship can achieve optimal health, positive intimate and other social relationships, and fulfilling work and lives. Although the participants in the current study were diverse in the extent to which they viewed themselves as having overcome their past abuse, their experiences offer insights into the processes that survivors encounter as they move toward positive outcomes in the aftermath of abuse.

Limitations

While this study provides rich data describing the experience of a large, diverse sample, it is not without limitations. One limitation is the deviation from typical phenomenological methodology, which usually uses face-to-face interviews with a localized sample. As described in the Method section, the researchers decided that a geographically diverse sample was necessary for the richness and transferability of the present study. In addition, the stigma attached to the population of IPV survivors called for an anonymous, yet narrative, data collection method. As such, participant responses included narrative responses to a select few questions on an electronic questionnaire; thus, follow-up questions, clarifications, and prompts were compromised, as was the personal nature of a face-to-face interview. Despite the fact that online narrative questionnaires, while acceptable, are not ideal for qualitative data collection (Creswell, 2013), the researchers recognized the limitations of the method and found that the benefits of gaining a large representative sample outweighed the limitations.

Another limitation included the fact that most participants were Caucasian/White (83.7%), followed by 8.9% Hispanic/Latino/Latina, 4.1% African American/Black, 2.4% Native American, and 3.3% "Other." These numbers may not be representative of all victims/survivors, and the findings should be interpreted with this in mind. Furthermore, a limitation includes the fact that the present study was part of a larger study, which involved a three-part survey; thus, fatigue could have prevented participants from adequately answering some of the questions. Many participants had been out of their abusive relationships for several years, and thus, their recollections of earlier parts of the recovery process may be affected by memory and psychological distance. In addition, the responses were self-reported, potentially introducing bias and subjectivity on experiences of recovery.

Finally, participants' stories were reported in a way that did not discriminate between the types of abuse they had experienced, magnitude of abuse, years in abusive relationships, or whether they were male or female. In addition, it

is possible that some form of abuse (e.g., emotional) was still ongoing for the 30.1% of participants who had some form of contact with their abuser due to custody arrangements or other needs. Thus, the recovery processes that survivors go through may differ based on these factors, which was not explored in this study. Furthermore, the recruitment of participants may also have had an effect on the findings of this study. Participants were recruited through a variety of methods, including domestic violence agencies, listservs, other online modalities, word of mouth, and snowball sampling. Thus, the recovery process may differ depending on where the participants were recruited from (i.e., whether they had access to services, magnitude of violence).

Implications for Research and Practice

Implications for research. With emerging awareness of IPV in recent decades, research has emphasized pathology, intervention strategies, prevention efforts, and better understanding the immediate crisis and effects of IPV (Allen & Wozniak, 2010). In other words, focus has regularly been placed on *how to leave* and *how to stay out of* an abusive relationship. However, little focus has been placed on understanding the process of what happens *after* someone leaves an abusive relationship and how they build safe, non-violent, and meaningful lives. This process is different from simply avoiding consequent abusive relationships, and is an important one to understand, as survivors of IPV habitually experience long-term mental-health, interpersonal, career, and physical problems as a result of the abuse (WHO, 2012).

To the researchers' knowledge, this study was the first of its kind examining the recovery process of overcoming IPV with a large, geographically diverse sample. Future research might use the framework of the present study to investigate, in depth, the themes identified here. For instance, the role of advocacy and navigating new intimate relationships were essential in survivors' recovery experiences, but have not been extensively examined in the framework of IPV recovery. In addition, the categories identified in the current study might serve as springboards for future quantitative assessments, which could aid in identifying survivors' recovery processes and help practitioners provide resources and counseling accordingly. Future research might also attempt to investigate practitioners' competence working with survivors who may be experiencing specific parts of the recovery process. Finally, future research may examine the different recovery processes for survivors who experienced varying types of abuse, magnitude of abuse, years in abusive relationships, male versus female survivors, and the difference between survivors who recover more successfully than do others. Instrument development on the recovery process may be an area for researchers to explore.

Implications for practice and policy. In the United States, somewhere between 30% and 35% of women report that they have been abused by an intimate partner at some point in their lives, and the number in clinical populations is likely even higher (Murray & Graves, 2012; WHO, 2012). Thus, practitioners need to be prepared to not only properly understand dynamics of IPV and help those who are current victims, but they also need to understand key processes involved in recovery. By better understanding how survivors of IPV recover from abuse, practitioners can more accurately target intervention strategies and support their clients. In addition, better understanding the recovery process may inform policy, legislation, and training and shed new light on implementation of effective treatment, resources, and community support for survivors. A key finding in the present study is the cyclical and highly personal nature of recovery. Thus, it is important that practitioners value and understand the individual nature that survivors experience as they recover from abuse, as each survivor's journey is unique and different from another's. However, the processes involved for survivors of this study may be used as a framework for exploring clients' stories and making sense of their own individual recovery processes. In fact, sharing the experiences of other survivors with clients at differing stages in the recovery process may help them gain insight and awareness into their own situations and may provide a forum for discussion and empowerment.

This study was an essential first step in better understanding the key processes in overcoming and recovering from abusive relationships using a large diverse sample and a qualitative methodology. Survivors' experiences bear witness to the disempowering nature of abusive relationships, but their journeys also reflect the complex, challenging, and heroic processes of recovering and finding meaning and purpose post-abuse.

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Author Biographies

Paulina Flasch, MS, EdS, NCC, LPCA, RMHCI, is a doctoral candidate at the University of Central Florida (UCF) in the Counselor Education program, on track to graduate with her PhD in May 2016. Her clinical experience includes working with victims and survivors of intimate partner violence (IPV) and with at-risk children, adolescents, couples, and families in various community, in-home, and residential settings. Her research interests include intimate partner violence, sexuality and gender, altruism, and Jewish issues in counseling.

Christine E. Murray, PhD, LPC, LMFT, is an associate professor, coordinator of the Couple and Family Counseling Track in the Department of Counseling and Educational Development at the University of North Carolina at Greensboro (UNCG), and co-founder of the See the Triumph Campaign. She teaches graduate-level courses in

family counseling, family violence, sexuality counseling, and counseling research. Her primary research interest relates to bridging the gap between research and practice in the area of not only domestic violence but also IPV prevention, recovery, reducing stigma, community approaches, and more. She is the lead author of the book *Responding to Family Violence*.

Allison Crowe, PhD, LPC, NCC, ACS, is an assistant professor of counselor education at East Carolina University (ECU). She has clinical experience in residential, crisis, community agency, college counseling, and group practice settings. Her research and scholarship focuses on stigma toward adults with mental illness, treatment issues with severe and persistent mental illness, and eradicating the shame that still surrounds seeking mental health treatment in the United States. She is the co-founder of the See the Triumph Campaign.