South Asian Immigrant Women's Experiences of Male to Female Partner Violence in New Zealand

Anoosh Franklin

Doctor of Clinical Psychology

University of Auckland

A thesis submitted in partial fulfilment of the requirements for the degree of Doctor of Clinical Psychology, The University of Auckland, 2021.

Abstract

Male-to-Female Partner Violence (MFPV) is a serious problem that has devastating and far-reaching consequences for women, families and communities. Although MFPV has been documented in many countries and cultures, some researchers suggest that certain groups of women are more vulnerable than others. South Asian immigrant women have been identified as a group of women that may be particularly vulnerable to experiencing MFPV. Research has attributed their vulnerability to an interaction between South Asian cultural mores and the context of migration; which includes status as an ethnic minority group. There is a dearth of research exploring South Asian immigrant women's experiences of MFPV in New Zealand. Furthermore, there is evidence to suggest that their experiences cannot be adequately captured using quantitative methods. This qualitative study aims to explore South Asian immigrant women's experiences of MFPV in New Zealand, and comment on what special needs if any, they may have. Specific aspects of experiencing MFPV that were explored include identity negotiation, coping, navigating formal services and experiences/ perspectives on ethnicity-matching in formal services.

Twelve South Asian women living in New Zealand who identified as having experienced MFPV, were recruited for this study. All women participated in individual, semi-structured interviews where they were asked to speak about their experiences of MFPV. They also reported on experiences of help-seeking, and their perspectives/ experiences of ethnicity-matching in formal services. Thematic analysis was used to analyse the data.

Overall the results from this study suggest that participants' experiences of MFPV were significantly shaped by their sociocultural context and the context of migration. Findings also revealed some similarities with research documenting MFPV in mainstream Western populations, such as the significant role that motherhood plays in decision-making. Finally, within-group variation in participants' experiences of MFPV emphasises the

importance of considering acculturation and intersectional theory when seeking to understand and respond to the issue of MFPV in South Asian communities. This study contributes to the existing body of research exploring South Asian and other immigrant women's experiences of MFPV, and considers limitations, implications for clinical practice and future research directions.

Acknowledgements

A heartfelt thanks to the women who took part in this study. I appreciate the time you gave me and your courage and willingness to share your story to help others, even though it was an emotional experience. Without you this study would not have been possible. I hope you feel that I have treated your words with care and respect. Many thanks also to the key informants and cultural advisors for sharing your expertise and helping with recruitment.

I am extremely grateful to have been supported by three incredible women while completing my doctorate. Firstly, a very special thank you to my supervisor Dr. Susan Cowie, for your unwavering belief in me and encouragement even when I was running out of steam. Secondly, thank you to Dr. Claire Cartwright, for giving your time to help me consolidate and clarify my thoughts. Finally, to my internship supervisor and dear friend Tiina Holton. I feel so incredibly lucky to have you in my life. Thank you for your kindness and love.

To my village: Andrew, Alex, Monique, Anusha, Chris, Tami, Laura, Anya, Natasha, Tom, Mary-Rose and my cohort. Thank you for keeping me sane, making me laugh and grounding me during this process. A special thank you also to Craig Barretto for your guidance and friendship over the years.

To my loving family Ajit, Abi, Nicy, Gerry and our canine children, Benji and Pattie. Thank you for the comforting words and hugs, for setting up study spaces and helping me unwind with board games and basketball.

Last, but certainly not least, to my mother Jyothi, and my loving partner Leon. I will never be able to thank you enough for the unconditional love and support you have showed me over the last five years. This thesis is dedicated to you.

Table of Contents

List of Tables and Figures

Tables

Chapter One: Introduction, Literature Review and Purpose

Brief Overview of this Study

This thesis presents findings from 12 qualitative interviews with South Asian women in New Zealand. The aim was to explore South Asian immigrant women's experiences of MFPV in New Zealand, and comment on whether they may have any special needs. Among international studies there is general consensus that South Asian cultural mores and the context of immigration interact and shape women's experiences of MFPV (Abraham, 2000a; Finfgeld-Connett & Johnson, 2013; Milani, Leschied & Rodger, 2018). However, some research also criticises how ethnic-minority women's experiences of MFPV are more likely to be attributed to their culture of origin (Ahmad-Stout, Nath, Khoury & Huang, 2018; Milani et al., 2018; Sokoloff & Dupont, 2005). This raises questions about how South Asian immigrant women's experiences of MFPV may be distinct, and how researchers navigate documenting these points of distinction without negatively stereotyping or homogenising their experiences. It also raises questions about how women's experiences of MFPV may be similar across ethnic groups. Additionally, the issue of how to address the nuances of South Asian immigrant women's experiences of MFPV within formal services is debated. While some scholars strongly advocate for women being supported by South Asian professionals working for South Asian organisations (Merchant, 2000; Pressier, 1999), others believe that such a solution is overly simplistic (Kim & Hogge, 2015; Milani et al., 2018; Simon-Kumar, 2019).

At present, research investigating South Asian migrant women's experiences of MFPV in New Zealand is scarce. Additionally, there is evidence to suggest that the issue of MFPV within New Zealand's South Asian immigrant community may not be adequately captured by quantitative data due to suspected underreporting (Fanslow, Robinson, Crengle

& Perese, 2010; Sokoloff, 2008; Tjanden & Thoennes, 2000; West, 2005) and problems with recording ethnicity and MFPV (Bograd, 1999; Maker, Shah & Agha, 2005; New Zealand Police, 2017; Simon-Kumar, 2019; Sorenson, 1996; Statistics New Zealand, 2013). Through conducting in-depth, qualitative, semi-structured interviews, the current study aims to address these gaps in the existing literature and gain a more nuanced understanding of South Asian immigrant women's experiences of MFPV. Findings from this study will be able to provide guidelines for cultural safety when supporting this particular group of women.

Chapter One provides an overview of the relevant literature that forms the context for this study. Chapter Two describes the qualitative methodology that was used and following this, Chapter Three outlines the data collection and analysis process. Chapters Four to Six present the results of the thematic analyses including: participants' experiences of the arranged marriage process (Chapter Four), their accounts of negotiating identity through experiences of MFPV in the context of migration (Chapter Five) and finally the strategies used by participants to cope with MFPV (Chapter Six). Lastly, Chapter Seven discusses the results of the study and its contribution to the literature on migrant women's experiences of MFPV. It also considers the clinical implications, the limitations of this study, and the implications for future research directions.

Chapter One will begin by introducing the definitions of terms used in this study, as well as a brief overview of relevant MFPV statistics. Following this I will present qualitative findings on understanding MFPV within South Asian cultures, understanding MFPV within the context of migration, strategies used by migrant women to cope with MFPV and identity negotiation in the context of MFPV. The final section of Chapter One outlines the rationale and aims for the current study.

Definition of Terms

Male to Female Partner Violence

Historically the abuse perpetuated by men against women in heterosexual relationships has been documented in the literature using gender neutral terminology such as 'domestic violence' and 'intimate partner violence' (IPV; DeKeseredy & Dragiewicz, 2009). These terms have been criticised for down-playing the notion that while there are definitely male victims of IPV at the hands of both men and women, the majority of victims are women subjected to violence by male intimate partners or ex-partners (Heise, Ellsberg & Gottemoeller, 1999; Taft, Hegarty & Flood, 2001). The statistical evidence for this will be explored more in the next section. It is also important to address the contradictory findings of some research which claims that women are just as violent as men in heterosexual relationships (Headey, Scott & De Vaus, 1999; Straus, 2007). These studies typically use the Conflict Tactics Scale (CTS) which has been heavily criticised for focussing on overt physical violence as opposed to coercive tactics, leaving out abusive acts where women tend to be overrepresented (e.g. sexual abuse and stalking: Tjanden & Thoennes, 2000), omitting incidents after separation or divorce which has been identified as a vulnerable period for women, and failing to obtain information about the intensity, context, consequences or meaning of the abusive behaviour (DeKeseredy & Dragiewicz, 2009; Hegarty & Roberts, 1998; Taft et al., 2001). For instance, if a man is choking his female partner and she kicks back in self-defence they are deemed equally violent according to CTS. This obscures the fact that women are more likely to use violence as self-defence (context; Kaufman, Aldorondo and Jasinski, 1998); more likely to be seriously injured by men's violence (intensity and consequences) and more likely to feel intimidated and fearful in the context of IPV (meaning). The current study seeks to acknowledge the gendered nature of IPV and define the specific focus of this research by using the term 'Male-to-Female Partner Violence' (MFPV). Research also suggests that this gendered nature of MFPV is congruent within South Asian cultures (Ahmad, Riaz, Barata, & Stewart, 2004) and the New Zealand

context, where women are three times more likely to report offences by a partner than men (Ministry of Justice, 2018).

Consistent with international reports on violence against women (Heise & Garcia-Moreno, 2002; World Health Organisation, 2012) as well as New Zealand's *Family Violence Act 2018*, the definition of MFPV in this study will broadly include physical, sexual, psychological/ emotional abuse, a pattern of coercive control that can cause cumulative harm and dowry-related violence. The recent inclusions of the last two forms of violence are noteworthy. The inclusion of dowry-related violence speaks to an increased awareness of how abuse may look different for South Asian migrant women. The new *Family Violence Act's 2018* recognition that MFPV often includes a pattern of coercive control represents a crucial change from the previous *Domestic Violence Act 1995*. Inherent in this conceptualisation of MFPV is the notion that while single acts of abuse (especially psychological abuse) may seem insignificant in isolation, they are typically part of a significant pattern of coercive control which entraps women in MFPV.

Recognising that MFPV includes a pattern of coercive control aligns with Evan Stark's (2009) theory of domestic violence. Stark argues that the dominant conceptualisation of domestic violence as physical violence, which has led to much of the literature using discrete episodes of physical violence to measure MFPV has not been useful for three reasons. Firstly, it has not reduced the likelihood of women being abused because men have expanded their oppressive repertoires beyond the physical realm. Secondly, according to Stark this conceptualisation fails to explain why women remain 'trapped' in abusive relationships. Finally, it negates the fact that most victims of partner abuse say that chronic psychological abuse is far more damaging than physical abuse (Taft et al., 2001). The notion that MFPV includes a pattern of ongoing psychological abuse used by the perpetrator to

maintain control over their partner is therefore an important addition to New Zealand's *Family Violence Act 2018* that the current study, will adopt in its definition of MFPV.

South Asians

'South Asian' is an umbrella term used to refer to diverse ethnic groups who are divided on the basis of religion, language and nationalities but share a common geographical origin in the Indian subcontinent (Kurien, 2003; Talbani & Hasanali, 2000). Many studies on South Asian immigrant women's experiences of MFPV have unfortunately failed define what counts as 'South Asian'. Although there is diversity among South Asians in terms of language, religion, generational and nationalistic differences, as a population they share many values, beliefs and traditions (Merchant, 2000). The focus of the proposed research is to explore how elements of South Asian cultures, which have been linked to MFPV, are negotiated by immigrant women exposed to MFPV in New Zealand. Therefore, I will only include immigrant women from South Asian countries who share identified South Asian cultural elements that have been linked to MFPV in the literature. For this reason, the definition of a 'South Asian' woman will include women from India, Pakistan, Bangladesh, Nepal, Bhutan and Sri Lanka (Mahapatra, 2012). Indo-Fijians were also included in this study, since existing research describes them as descendants of indentured Indian labourers who have retained Indian patriarchal ideology and family patterns that have been linked to domestic violence (Lateef, Counts, Brown & Campbell, 1999).

The reasons for focussing on this particular ethnic group are three-fold. Firstly, South Asians are one of the two largest and fast-growing Asian subgroups in New Zealand (Tse, 2007) and consequently focused research is warranted to understand the experiences of this group. Secondly, previous literature has critiqued collapsing the diverse Asian population into one category with the consequence that the findings produced lack depth and meaning (Bograd, 1999; Sorenson, 1996). Finally, the patriarchal ideology and customs in South Asian

cultures provide a context for MFPV, which will be discussed further. This is the first research project related to MFPV in New Zealand that focusses solely on South Asians.

Theoretical Underpinnings

This section describes three important theories that have been identified in the literature documenting immigrant women's experiences of MFPV. The current study is guided by these theories which include: a constructionist view of identity and acculturation (Burr, 2003; Bhatia, 2008), intersectional theory (Crenshaw, 1991; Sokoloff, 2008) and Abraham's (1995) ethno-gender theory.

A Constructionist View of Identity and Acculturation

Acculturation is defined as the process of cultural and psychological change that occurs when groups from differing cultural backgrounds engage with one another (Berry, 2008). Research supports a bidimensional view of acculturation, or the notion that identification with heritage and host culture are independent and do not necessarily have an inverse relationship (Berry, 1997; Kim & Hogge, 2015; Ryder, Alden & Paulhus, 2000). Although there is some debate over how acculturation is measured (Celenk & Van de Vijver, 2011), attitudes or preferences (e.g. the extent to which an individual prefers socialising with individuals from the same heritage culture and individuals from the host culture) and behavioural outcomes (e.g. enjoyment of humour, language competence across settings and participation in cultural traditions related to host and heritage culture) are usually included in psychometrics. Research investigating IPV among Asian Indians in the United States generally suggests that female victims/ survivors are more willing to seek help if they have high levels of acculturation and low levels of enculturation (the extent to which an individual identifies with their heritage culture: Kim & Hogge, 2015). Yoshihama, Blazevski, & Bybee's (2014) research with Asian Indian immigrant men and women in the United States

found that the strongest predictor of IPV-supportive attitudes was high levels of enculturation.

Talking about acculturation and identity in terms of levels (e.g. high, low) or categories (e.g. predominantly Western, predominantly Eastern or bidirectional: Kim & Hogge, 2015; Singh, 2009) suggests that it is linear and universal in nature. In contrast, social constructionism rejects conceptualising the self as singular, stable or developing in a linear trajectory, in favour of a view of identity as complex, in flux and constructed through interactions within a particular sociocultural context (Burr, 2003). This is particularly relevant to cross-cultural research with mobile, transnational and diasporic migrant communities (Hermans, 2001) like South Asian immigrants (Chatterji & Washbrook, 2014). The dialogical self model extends on social constructionism by proposing that the self encompasses a "dynamic multiplicity of relatively autonomous" identity positions (Hermans, 2001, p. 248) that are in dialogue with one another and have implications for action, although they need not be congruent. In other words, when making sense of experiences of MFPV the dialogical self model claims that immigrant women can embrace or reject a variety of identity positions based on available scripts within their sociocultural context. There are a number of studies which support a social constructionist view of migrant identity (Arends-Tóth and Vijver, 2003; Bhatia, 2008; Bhatia & Ram, 2009; Ryder, Alden & Paulhus, 2000). For instance, it was originally thought that immigrants orientate to one of four acculturation strategies across time: integration, assimilation, marginalised or separationist (Berry, 1997). However more recent research shows that immigrants can feel simultaneously marginalised and assimilated (Bhatia, 2008) or adopt an integrationist strategy in the public domain and a separationist strategy in the private domain (Arends-Tóth and Vijver, 2003).

The proposed research primarily adopts a social constructionist view of identity however, I will also comment on participants' acculturation levels if deemed relevant to the study's results.

Intersectional Theory

Research on MFPV among immigrant women from ethnic minority backgrounds, has emphasised the importance of using an intersectional lens (Crenshaw, 1991; Ghafournia & Easteal, 2018; Sokoloff, 2008). Hancock (2007) defines intersectionality as a research paradigm which looks at questions that have been unanswered by race-only or gender-only approaches. For immigrant women experiencing MFPV, intersectionality involves understanding how ethnicity, class, race, gender and citizenship intersect and influence the power they hold relative to their male partners and others in society (Abraham, 2000a). According to Abraham, the two dominant theoretical perspectives on MFPV; the family violence perspective and the feminist perspective, both fall short of adequately capturing the experiences of immigrant ethnic minority women because neither sufficiently addresses these intersections.

The Ethno-Gender Perspective

In response to these criticisms, Abraham (1995) developed the ethno-gender perspective: a contextual or intersectional feminist framework for analysing domestic violence in a cultural context. The ethno-gender perspective looks at how "how gender relations are constructed and how cultural concerns are articulated at the individual, organisational, community and societal level" (Abraham, 1995, p.251). Although the intersection between gender and ethnicity is emphasised in the ethno-gender perspective on domestic violence, intersections with class and legal status or citizenship are also given importance (Abraham, 2000a). I have already described a rationale for the importance of a

gendered approach to IPV when justifying selecting the term MFPV for this project.

Abraham's (2000a) reasons for emphasising ethnicity are two-fold. Firstly, because focusing on gender alone ignores how cultural differences in gender relations may contribute to the manifestation of MFPV among immigrant women. Secondly, because ethnicity is often the first, the most visible and the most emphasised marker of differentiation for immigrant women in their respective host countries. Abraham (2000a) says that although differences based on class, religion and subethnic lines do exist in immigrant communities, such differences may become decontextualised through migration, whereas the emphasis on ethnicity is upheld in the way that host countries construct immigrant ethnic minority communities as 'other'. In this sense focusing on ethnicity also enables researchers to explore how majority/ minority ethnic group relations may contribute to the causes, manifestations and solutions to immigrant women's experiences of MFPV.

Since Abraham (1995) published her ethno-gender theory, many studies exploring South Asian immigrant women's experiences of MFPV have used it and attested to its relevance due to the double subordination that South Asian immigrant women experience as a result of patriarchal gender norms in their culture of origin, and norms in host countries that construct their identity as ethnic minority women (Abraham, 1999; Ahmad, Driver, McNally & Stewart, 2009; Chaudhuri, Morash & Yingling, 2014; Merchant, 2000). Over the last thirty years the ethno-gender framework has also been instrumental in setting up numerous community-based agencies for immigrant women experiencing MFPV in Western nations such as United States, United Kingdom, Australia and New Zealand (Simon-Kumar, 2019). The unique difficulties faced by South Asian immigrant women who experience MFPV such as language difficulties, unfamiliarity with services and the law in host countries, and dependence on spouses for financial support, have also been used to emphasise the need for an ethno-gendered approach to research (Menjivar & Salcido, 2002). For these reasons, the

current study will be informed by intersectional feminist theory and more specifically, Abraham's (2000a) ethno-gendered perspective.

Quantitative Research on Male to Female Partner Violence

Male to Female Partner Violence on a Global Scale

MFPV is a major public health problem, human rights issue and the most common form of violence that women experience (Devries et al., 2013; García-Moreno et al., 2013). The under-reporting of all types of violence is widely recognised. Taking this into account a meta-analysis of 141 studies from 81 countries indicated that in 2010, 30.0% of ever-partnered women aged 15 and above had experienced physical and/or sexual MFPV (Devries et al., 2013). The prevalence of MFPV in the South Asian region (41.73%) is one of the highest (Mitchell, Wight, Van Heerden & Rochat, 2016). Emotional/psychological partner abuse and a pattern of coercive control were not included in the WHO global review of MFPV due to a lack of agreement on standard measures and the threshold at which acts that are unkind or insulting qualify as emotional abuse (García-Moreno et al., 2013). However, other studies suggest that an underlying pattern of coercive control is important to identify in order to truly understand the significance of MFPV. This is because women are more likely to be subjected to coercive control than men (Myhill, 2015); men who use coercive control physically assault women more frequently in intimate relationships than those who use physical violence alone (Johnson, 2010); partner homicides in heterosexual relationships are better predicted by the level of control than the severity or regularity of physical assault (Glass, Manganello and Campbell, 2004); and women in intimate relationships who obtained the highest scores for abuse-related symptoms (e.g. fear and anxiety) report never having experienced physical violence in their relationships (Lischick, 2009; Piispa, 2002).

MFPV is the leading cause of death by homicide for women globally accounting for 38% of all murders of women (Devries et al., 2013; García-Moreno et al., 2013). However, death is only the tip of the iceberg. Findings suggests that MFPV can have both immediate (e.g. death and injury) and long-term effects (e.g. chronic health problems due to prolonged stress) on the physical, mental and social well-being of victims (Campbell, 2002; Devries et al., 2013; Garcia-Moreno et al., 2006; World Health Organisation, 2012). Not only does MFPV negatively impact victims, but it can also negatively impact their children. This claim is supported by research which demonstrates a high co-occurrence of child abuse alongside MFPV (Beeman, Hagenmeister & Edleson, 2001; Edleson, 1999; Kellogg & Menard, 2003); male abusers using their children to get back at their female partners (McGee, 2000); the indirect impact of children bearing the consequences of the abuse on their mothers (Buchbinder, 2004; Casanueva, Martin, Runyan, Barth & Bradley, 2008); and finally that witnessing or being exposed to family violence as a child can lead to greater use or tolerance of violence as an adult (Amato, 2000; Guille, 2004; Markowitz, 2001). Additionally, MFPV often puts a significant financial burden on countries. For example, the estimated cost of MFPV in England and Wales is more than £15 billion in 2009 alone (Walby, 2009). Together these findings justify further research into MFPV due to its detrimental and widespread nature.

Male to Female Partner Violence in Immigrant Communities

South Asian immigrant women, live at the boundaries of sociocultural intersections (e.g. immigrant status, female, ethnic minority status and patriarchal norms) that have been identified as risk factors for MFPV (Capaldi et al., 2012; Hermans, 2001; Raj & Silverman, 2002). However quantitative research regarding whether MFPV disproportionately impacts immigrant communities, is mixed (DuMont & Forte 2012). Existing research conducted in the United States suggest that immigrant women have a heightened risk of experiencing

MFPV and MFPV-related homicide (Dutton, Orloff, & Hass, 2000; Frye, Hosein, Waltermaurer, Blaney and Wilt, 2005; Raj & Silverman, 2003). For example, Raj and Silverman (2002) argued that South Asian immigrant women residing in the United States may be particularly vulnerable to experiencing MFPV with 40.8% reporting MFPV in their current relationship and 50.6% reporting low awareness of MFPV services. In contrast, some scholars suggest that the incidence and prevalence of MFPV among immigrant communities is comparable or lower than host populations (Goel, 2005; Madden, Scott, Scholapur & Bhandari, 2018; Menjívar & Salcido, 2002; Tjaden & Thoennes, 2000). For instance, the National Violence Against Women (NVAW) Survey in the United States found that the lifetime prevalence of physical assault for Asian/ Pacific Islander women (12.8%) was much lower than the general population (Tjanden & Thoennes, 2000). Many researchers have hypothesised that the lower prevalence of MFPV among immigrant women relative to their counterparts in the general population of host countries, is likely due to significant underreporting of violence (Fanslow, et al., 2010; Sokoloff, 2008; West, 2005); a suggestion even made by the authors of the NVAW Surveys themselves (Tjanden & Thoennes, 2000). More robust research from countries other than the United States, with larger and more representative samples as well as appropriate controls is needed to fortify the claim that MFPV disproportionately impacts immigrant communities (Menjivar & Salcido, 2002).

These inconsistencies in quantitative research have led to some scholars advocating for a shift away from the question of whether immigrant women are disproportionately harmed by MFPV in terms of prevalence and burden, and alternatively exploring how immigrant women's experiences of abuse are qualitatively distinct (Goel, 2005; Sokoloff, 2008). Along these lines, some studies have theorised how South Asian immigrant women may be particularly likely to underreport MFPV due to specific factors related to their culture of origin as well as the context of migration (Menjívar & Salcido, 2002; Natarajan, 2002; Raj

& Silverman, 2002; Somasekhar, 2016; Tse, 2007). These factors will be discussed in more depth in subsequent sections.

Statistics for South Asian Immigrant Women in New Zealand

Family violence is a serious public health issue in New Zealand (Crichton-Hill, 2010) with an estimated annual cost of 4.1-7 billion dollars (Kahui & Snively, 2014). MFPV is one form of family violence. Findings from Fanslow & Robinson's (2011) study indicate that 55% of ever-partnered New Zealand women experience psychological/ emotional, sexual or physical IPV in their lifetime. Of these women, most (33%) report experiencing two or more types of IPV. Psychological/emotional violence was most commonly reported and often accompanied reports of physical or sexual violence. An earlier study found that 33% of women in Auckland and 39% of women in Waikato reported at least one act of physical and/ or sexual violence by an intimate partner in their lifetime (Fanslow & Robinson, 2004). These rates were higher than physical (15% in Auckland and 17% in Waikato) and sexual violence (9% in Auckland and 12% in Waikato) inflicted by non-partners. Fanslow & Robinson (2004) additionally found that IPV was significantly associated with self-perceived poor health, physical and mental health problems. These statistics are alarming for a small country.

In addition to being a small country, New Zealand is also a multi-cultural nation. Based on the 2013 census 'ethnic' populations made up 13% of the population, of which people from Asia were a majority (Statistics New Zealand, 2013). South Asians are the second largest and one of the fastest-growing Asian subgroups (Tse, 2007). The rise of diversity in Western colonial settler societies like New Zealand has drawn attention to the unique profile of MFPV within these communities: how commonly it occurs, the principal drivers, patterns of disclosure or non-disclosure and the availability and effectiveness of interventions (Simon-Kumar, 2019).

Unfortunately, statistics on MFPV among South Asian immigrant women in New Zealand are scarce and largely unreliable (Simon-Kumar, 2019). There are a few reasons for this. Firstly, statistics tend to focus more broadly on family violence as opposed to MFPV. Secondly, inconsistencies in how South Asian people are categorised in statistical data makes it difficult to obtain an accurate picture of MFPV in this community (New Zealand Police, 2017; Statistics New Zealand, 2013). For instance, Statistics New Zealand's (2013) 'Asian' category is broken down into Asian not further defined, Chinese, Indian, South East Asian (including Filipino, Cambodian, Vietnamese, and Burmese) and Other Asian (including Sri Lankan, Korean and Japanese). In data from the New Zealand Police (2017) however, Asians are categorised separately from Indians. Thirdly, collapsing the diverse Asian population into one category that may or may not include South Asians has also been criticised for producing findings that tend to lack depth and meaning (Bograd, 1999; Sorenson, 1996; Maker et al., 2005). Finally, there are a large proportion of individuals who record their ethnicity as 'unknown' or 'other' in family violence data which may contribute to underestimation (New Zealand Police, 2017). With this in mind I will describe the limited quantitative research that exists on South Asian immigrant women's experiences of MFPV in New Zealand.

In New Zealand, a similar picture is found to statistics of MFPV in immigrant communities overseas, where there is mixed evidence regarding whether immigrant women experience a heightened risk of MFPV and underestimation is highly suspected. In 2002-2006 Asians had a slightly elevated risk of experiencing family violence (not specific to MFPV) and also experienced increased mortality rates from family violence compared with the New Zealand average (Paulin & Edgar, 2013). In contrast, Fanslow and colleagues (2010) found that, among the major ethnic groups, Māori women had the highest lifetime prevalence of physical and/or sexual IPV (57%) and Asian women reported the least (11%). This study by Fanslow and colleagues was especially useful, because it additionally collected qualitative

data on women's attitudes towards disclosure. Findings revealed that Asian and Pasifika women were more likely to hold strong beliefs about domestic violence being a private matter compared to Māori and New Zealand European women, which is likely indicative of higher non-disclosure rates. This difference is further supported by another study in New Zealand where over 75% of women from a sample representative of the general population reported that they had told someone about their experiences of IPV; indicating that it is not a 'secret and private' problem for women in the mainstream population (Fanslow & Robinson, 2010). New Zealand women in this study told informal supports and to a lesser extent, formal sources of support, about this abuse, but did not always feel that the help they received was useful. Over 40% indicated that no one had helped them.

Taken together, these results suggest that MFPV in New Zealand's South Asian community is not, and most likely cannot be adequately understood from quantitative data due to the high likelihood of underreporting and problems with the reliability of data. The proposed research will address this by conducting in-depth, qualitative, semi-structured interviews with participants. Using qualitative methodology aligns with international studies which have advocated for a shift towards exploring how the experiences of MFPV for immigrant women from ethnic minority backgrounds is qualitatively distinct from their counterparts, and a product of multiple, intersecting factors related to migration and the broader sociocultural context (Goel, 2005; Simon-Kumar, Kurian, Young-Silcock & Narasimhan, 2017; Sokoloff, 2008). The following sections will therefore primarily focus on outlining existing qualitative research that is relevant to the aims of this project. The limited qualitative research that has emerged from a New Zealand context will be integrated in the following sections. Before delving into this, it is important to acknowledge that the following findings are limited by small sample sizes, the fact that they predominantly stem from an American context and tend to reflect the experiences of Asian Indian women.

Male to Female Partner Violence and Specific Elements of South Asian Cultures

The fact that MFPV occurs in a number of countries worldwide (García-Moreno et al., 2013; Levinson, 1989) challenges the notion that it is an inherent part of any one culture, including South Asian cultures (Liao, 2006; Milani et al., 2018). However, there is a great deal of cultural variation in how MFPV manifests which suggests that culture likely plays a mediating role (Hunjan & Towson, 2007; Liao, 2006; Milani et al., 2018; World Health Organisation, 2009). This point is illustrated by previously mentioned studies where acculturation and enculturation levels were found to significantly influence Indian immigrants' attitudes towards IPV (Yoshihama et al., 2014) and Indian women's willingness to seek help for MFPV (Kim & Hogge, 2015) in the United States. Specific elements of South Asian cultures that have been associated with MFPV among immigrant women include patriarchy or the positioning of women as subordinate to men; practices of arranged and forced marriages, dowry giving and patrilocality; joint family structures which enable multiple perpetrators; and the stigmatisation of single women and women who speak out about experiences of MFPV (Abraham 2000a; Chaudhuri et al., 2014; Milani et al., 2018; Raj & Silverman, 2002). Additionally collectivism and certain religious beliefs such as karma (destiny) and fatalism are unique to South Asian cultures and have been hypothesised to contribute towards women suffering in silence in the context of experiencing MFPV (Kim & Hogge, 2015; Merchant, 2000; Rahmanipour, Kumar & Simon-Kumar, 2019). The following section attempts to explore and understand how dominant South Asian cultural scripts related to gender roles and sexuality (i.e. how men and women should behave), what families and romantic relationships should look like, and what constitutes 'violence', may mediate South Asian immigrant women's experiences of MFPV. (Abraham, 2006; Ahmad et al., 2004; Chaudhuri et al., 2014; Vandello and Cohen, 2003; Simon-Kumar et al., 2017; Venkataramani-Kothari, 2007; Yoshihama et al., 2014).

The Influence of Patriarchy on Gender Roles

Patriarchy is an ideology that justifies male domination over women (Lerner, 1986). It consequently contributes to large imbalances in power between men and women (MacKinnon, 1983). Patriarchal ideologies exacerbate MFPV through preventing people from recognising it or encouraging people to accept it as 'normal' (Ahmad et al., 2004; Baldry & Pagliaro, 2014; Lelaurain, Fonte, Giger, Guignard and Lo Monaco, 2018). Patriarchy is not unique to South Asian cultures. Research shows that patriarchy has co-opted many cultures across the world and over time; although at different levels and in various ways (Ozaki & Otis, 2017). The literature on South Asian immigrant women's experiences of MFPV suggests that the Western host countries that these women migrate to are more 'egalitarian' and less patriarchal than their heritage culture (Adam & Schewe, 2007). For instance, some scholars argue that overt or severe manifestations of patriarchy have significantly declined in the West (Mintz, 1998), but persists in South Asia as evidenced by honour killings and dowry deaths (Johnson & Johnson, 2001; Prasad, 1999). However, to the researcher's knowledge there are no studies that have explicitly measured and compared levels of patriarchy in South Asian vs. Western cultures. Therefore in this section, I will mainly outline research which discusses the particular ways in which patriarchy has co-opted South Asian cultures and how this may contribute to MFPV.

Many studies have implicated patriarchal societal structures, values, beliefs and practices in the widespread acceptance consequent invisibility of MFPV in South Asian migrant communities (Abraham 2000a; Ahmad et al., 2004; Chaudhuri et al., 2014; Koenig, Ahmed, Hossain & Mozumder, 2003). Research by Ahmad and colleagues (2004) specifically demonstrates how South Asian immigrant women's patriarchal beliefs are linked to their perception of abuse. Findings revealed higher agreement with patriarchal beliefs predicted a reduced likelihood of participants identifying a woman in a vignette as a victim of

IPV, even though this was clearly indicated. A study investigating Indian women's experiences of MFPV in New Zealand, similarly found that patriarchal attitudes and a sense of male entitlement were pivotal in sustaining and tolerating MFPV. In terms of societal structures, activism and attempts to implement policies and laws that reduce gender inequality (and hence MFPV) in South Asia have had limited success (Banerjee, 1999; Kapur & Cossman 1996). For instance, it is a widely accepted fact that male perpetrators of partner violence in India rarely get punished for their crime (Natarajan, 2002) because the same patriarchal culture inherent in MFPV is often mirrored in abused women's interactions with law enforcement (Saxena, 2015).

Femininity in South Asian culture is strongly associated with notions of service, sacrifice and devotion (Abraham, 2000a; Hunjan & Towson, 2007). The 'ideal' South Asian woman is expected to suppress her own needs, desires and individual identity for her community, to meet the demands of her husband and in-laws without question, to produce and care for her children and maintain family cohesion at all costs (Abraham, 2000a; Ahmad et al., 2009, Chaudhuri et al., 2014; Kallivayalil, 2010). Dependency is also a significant part of South Asian femininity. In her lifetime a South Asian woman is expected to be dependent on her father first, then her husband and finally her eldest son (Hunjan & Towson, 2007; Segal, 1991). In contrast, South Asian masculinity is associated with authority, decision-making, aggression and the breadwinner role (Midlarsky, Venkataramani-Kothari & Plante, 2006). These patriarchal discourses within South Asian cultures, create an MFPV-supportive context through normalising men's violence towards women and encouraging women to tolerate MFPV (Liao, 2006). Since a 'good South Asian woman' is responsible for maintaining family cohesion at all costs, women are often blamed for their own marriage dissolution regardless of whether their male partners have been abusive (Midlarsky, Venkataramani-Kothari & Plante, 2006; Somasekhar, 2016). Perhaps for this reason, it is

only in very acute cases of mental, emotional, and often physical abuse or when children are threatened, that a South Asian woman seeks help for MFPV (Lawrence, 1994). The selective abortion of female foetuses, female infanticide (deliberate killing of new-born female children), the dowry system (money or goods that a bride's family gives to the groom and his family to secure her marriage), prioritising the nutrition and education of boys over girls, *sati* (co-cremation of a woman with her deceased husband), honour killings (the murder of family members, most often women, who are perceived to have brought shame to the family) and forced marriages are some practices within South Asian cultures that overtly depict the subordinate status of women relative to men (Alderman & King, 1998; Hunjan & Towson, 2007; Liao, 2006; Borker et al., 2017; Sudha & Rajan, 1999). It is important to note that not all South Asian women have these experiences, and that intersections with class, religion or region (urban/ rural) may explain within-group diversity (Abraham, 1999).

Religion and Faith

The major religions in South Asia are Hinduism, Buddhism, Christianity and Islam (Ayyub, 2000). When looking at how religion can shape South Asian women's experiences of MFPV, scholars have emphasised commenting on cultural interpretations of religion; especially the way in which patriarchy in South Asia has co-opted religious doctrine, (Gangoli, McCarry & Razak, 2006; Milani et al., 2018; Rabbani, Qureshi & Rizvi, 2008). According to Ayyub (2000), one example of this is how in this day and age, it is common for Muslim communities to view divorced women as damaged goods, bearers of bad luck and to blame for their divorce. Consequently, they are often discouraged from attending social events and holy ceremonies. However, Ayyub (2000) points out that in the Qur'an the Holy Prophet Muhammad himself married divorced and widowed women so as to encourage other men to accept divorced and widowed women in marriage. Focussing on how religion has

been interpreted through a cultural lens aligns with the social constructionist approach of the current study (Burr, 2015) and reflects the diversity of views in the literature on this subject.

Hassouneh-Phillips (2003) and Holtmann (2016) have argued that secondary victimisation occurs when interpretations of religious doctrine blame survivors, support abusers and prioritise family cohesion over the safety of women and children. These patriarchal interpretations which promote a tolerant stance towards MFPV have been found in all four of the major religions in South Asia, including Hinduism, Buddhism, Islam and Christianity (Abraham, 2000a; Chacko, 2003; Kent, 2004; Niaz, 2003; Sugirtharajah, 2002). Patriarchal interpretations of Hinduism, Buddhism and Christianity promote tolerating MFPV and the control of women by men, through contrasting images of women (Hunjan & Towson, 2007). On the one hand women are construed as Goddesses to be revered and honoured; however this is tied to patriarchal gender role conformity (i.e. the chaste woman, the life-giving motherhood and the subservient wife: Chacko, 2003; Hunjan & Towson, 2007; Niaz, 2003). On the other hand women are portrayed as whores who can destroy men with their sexuality and thus need to be controlled: restricted to the domestic sphere where they must serve their husbands as Gods. These two contrasting discourses reflect both benevolent and hostile sexist attitudes, which justify victim-blaming and the need for men to control women which is at the core of MFPV.

So far, findings have illustrated how patriarchal interpretations of religious doctrine in South Asian cultures can create barriers to safety for South Asian women experiencing MFPV. However, there are also findings that suggest that faith and prayer are sometimes an important source of strength and a means of coping with ongoing violence (Chaudhuri et al., 2014; Milani et al., 2018). In Chaudhuri and colleagues' (2014) study at least one third of South Asian women experiencing MFPV turned to religion to cope with MFPV. However their comments about how religion helped them cope by making them more tolerant and

patient in response to the MFPV they were experiencing, illustrates how this way of coping ultimately prolongs entrapment through conforming to patriarchal ideals.

Sexuality

Within South Asian cultures, marital rape is often not viewed as a transgression as a result of South Asian men being taught from a young age that sex is their masculine right as a husband (Abraham, 1999). While a South Asian woman's sexuality does not belong to her, she is still held accountable for upholding expectations of chastity and premarital virginity (Hunjan & Towson, 2007). So too are her family and kin, due to the notion that a woman's sexual purity is a measure of honour for her family; especially the men in her life (Abraham, 1999). This illustrates the intersection between patriarchy and collectivist principles in South Asian cultures and the complex layering of stigma (Rahmanipour et al., 2019). Consequently, when a woman is sexually assaulted by a man in South Asian culture, she and her family are blamed and shamed as opposed to the male perpetrator. In some circumstances, the importance given to preserving family honour in South Asian cultures is used to justify honour killings, or violence perpetrated by male family members towards female family members who transgress accepted norms of femininity (Abraham, 1999; Gill, 2009; Rahmanipour et al., 2019). Emphasis on female sexual purity also means that South Asian women may hesitate to report sexual violence or stay in abusive relationships for longer out of fear of being perceived by others in their community as 'damaged goods' (Somasekhar, 2016).

Collectivism and the Notion of 'Saving Face'

Researchers have argued that South Asian cultures' collectivist orientation, which stands in contrast to Western individualism's emphasis on personal autonomy and independence, underlies the underreporting of MFPV in South Asian communities

(Somasekhar, 2016; Abraham, 2000a). Both patriarchy and collectivism emphasise sacrifice. Some researchers argue that the intersection between patriarchy and collectivism contributes to the increased likelihood of South Asian women subjugating their personal goals for the collective, compared to South Asian men (Hui & Triandis, 1986; Kashima et al., 1995; Merchant, 2000). This is supported by findings which show that South Asian immigrant women experiencing MFPV in the United or Canada only leave their male abusers when the situation becomes untenable and the psychological and physical consequences of abuse are severe (Ahmad et al., 2009; Hassouneh-Phillips, 2003). Alternatively, findings indicate that most South Asian immigrant women experiencing MFPV initially employ personal, face-saving strategies, often for several years, before looking to others for help (Abraham, 2000a; Ahmad et al., 2009). These personal strategies enable them to adhere to their prescribed gender role; which includes protecting the integrity of their parents, families and communities (Kim & Hogge, 2015; Somasekhar, 2016; Venkataramani-Kothari, 2007). A parallel process can also occur, whereby a South Asian woman's family and community, in accordance with collectivist principles, may encourage her to conform to culturally prescribed gender norms through turning a blind eye to her experience of MFPV, or explicitly instructing her to tolerate the abuse (Ahmad-Stout et al., 2018; Kim & Hogge, 2015; Liao, 2006; Somasekhar, 2016). This can lead to victims of MFPV experiencing ostracism; especially in the aftermath of help-seeking or disclosing abuse.

The significant role that motherhood plays in how South Asian women make decisions in response to experiencing MFPV, may also exemplify the implications of a collectivist sense of self (Ahmad et al., 2004; Ahmad et al., 2009; Ahmad-Stout et al., 2018; Kallivayalil, 2010; Lawrence, 1994). Lawrence (1994) found that one of the few reasons that South Asian women were willing to seek help for MFPV was when they perceived it to be a threat to their children. However, Ahmad and colleagues' (2009) study showed that the

'sacrificial mother' identity can also contribute to South Asian immigrant women staying in relationships characterised by MFPV, and consequently delaying help-seeking. The notion that a child's emotional well-being is compromised in a single-parent household, as well as concerns about being able to financially provide for children alone, were common rationales that participants in Ahmad and colleagues' (2009) study used to justify staying with their abusers.

Although the literature predominantly suggests that collectivism promotes 'a tolerant stance towards domestic abuse in South Asian immigrant communities, there is some evidence of South Asian community members helping abused women (Somasekhar, 2016). Midlarsky, Venkataramani-Kothari & Plante (2006) argue that in such circumstances collectivism can protect South Asian women through community members conceptualizing violence against a South Asian woman as a crime against her family and community. In this way 'collectivism' can be interpreted in two different ways; while the former interpretation is dominant and maintains silence around MFPV, the latter can promote community intervention. In regards to structural barriers, it is also important to recognise that women belonging to collectivist communities in Western countries may not have the same access to services for MFPV as women from individualistic cultures; particularly if those services emphasise individualistic solutions such as divorce and single-parenthood (Pillai, 2001; Yoshioka & Choi, 2005).

Family and Marriage

It is widely accepted that South Asian families are hierarchically organised. The oldest male possesses the most power in a family, followed by his sons in chronological order, the mother-in-law, any older unmarried daughters, and finally, the daughter-in-law (Kandiyoti, 1988; Venkataramani-Kothari, 2007). Within this hierarchy, age-related power (privileging elders over younger people) interacts with gendered power (privileging men over

women), placing a young South Asian daughter-in-law at the bottom of the pecking order. This likely exacerbates South Asian immigrant women's vulnerability to MFPV.

Research documenting South Asian women's experiences of arranged marriages, illustrates how age-related power can intersect with patriarchy, collectivism and socioeconomic status. In South Asian cultures, marriage often represents a life-long union between two families, and is often arranged by the parents and elders of both parties (Bhopal, 1999; Merchant, 2000; Yarhouse & Nowacki, 2007), with varying degrees of involvement from South Asian women themselves (Ahmad-Stout et al., 2018; Borker et al., 2017). This is vastly different to marriage in Western cultures where marriage is viewed as a union between two individuals with little input from extended family (Liao, 2006). In South Asian arranged marriages, a bride is typically 'given away' to the groom's family, who is paid a dowry to look after her (Somasekhar, 2016). As a result of intersection between patriarchy, collectivism and socioeconomic status, the groom and his parents typically have more bargaining power than the bride and her parents during the negotiation phase: particularly when a woman's family is of a lower class or caste (Chaudhuri et al., 2014; Borker et al., 2017). After marriage, a bride is traditionally expected to move into her in-law's house to join her husband (Kandiyoti, 1988; Midlarsky, Venkataramani-Kothari & Plante, 2006). This is called a joint-family structure which has been linked to MFPV as it more readily allows in-laws, particularly mothers-in-law, to join their sons in disciplining their daughters-in-law for failing to comply with gender role expectations (Abraham, 1999; Dasgupta & Warrier, 1996; Levinson 1989; Midlarsky, Venkataramani-Kothari & Plante, 2006; Purkayastha, Subramanium, Desai, & Bose, 2003).

The power that parents and elders have over their children within South Asian cultures is vastly different compared to Western cultures. From a young age South Asian children are taught to respect their elders, often without question. When they reach adulthood,

this is still an expectation in contrast to Western cultures where adulthood is associated with autonomy and independence (Borker et al., 2017). This means that when a South Asian immigrant woman experiences MFPV, her in-laws and parents, as elders, occupy a position of power which they can use to protect her or cause her further harm. As previously mentioned, the research predominantly suggests that South Asian mothers-in-law use their power as elders to cause further harm by encouraging MFPV or becoming perpetrators of abuse themselves (Gill, 2009; Mirza, 2017; Venkataramani-Kothari, 2007). Indeed the frequent co-occurrence of mother-in-law perpetrated abuse alongside MFPV, has been identified as a point of distinction in how MFPV manifests in South Asian migrant communities. However, the way in which a South Asian woman's parents use their power when their daughters are experiencing MFPV, is less straight forward. In Ahmad-Stout and colleagues' (2018) research with South Asian immigrant women who experienced MFPV in the United States, participants provided examples of parents protecting them by brokering a separation on their behalf with in-laws. However, more often than not, studies suggest that South Asian parents put pressure on their daughters to tolerate MFPV (Chaudhuri et al., 2014; Fu, 2014; Somasekhar, 2016). Dasgupta and Warrier (1996) argue that this is often motivated by the way in which the shame and stigma associated with a woman who fails to keep her family together, extends to her parents and extended family, as a result of collectivism. Research also shows that South Asian women themselves internalise this, and consequently hesitate to seek help from family members; not wanting to burden them or bring shame to the family (Ahmad et al., 2009; Chaudhuri et al., 2014).

What Constitutes 'Violence' and 'Consent'?

The argument of cultural relativism contends that certain behaviours that host countries define as MFPV may not be recognised by ethnic minority women as such, and vice versa; thus contributing to the underreporting of MFPV in ethnic-minority communities

(Rahmanipour et al., 2019). However, at the same time, Fanslow and Robinson's (2010) study with a representative sample of women from New Zealand's general population, found that perceiving violence as 'normal or not serious' was the most common reason women stayed in relationships characterised by IPV. While this suggests that perhaps all women in New Zealand would benefit from education about MFPV, it is useful to understand what types of MFPV South Asian immigrant women may struggle to recognise. For instance, non-consensual touching in public which is considered to be sexual harassment and part of the definition of MFPV in New Zealand, may not be taken as seriously by South Asian women for whom 'eve-teasing' (euphemism for sexual harassment in public places) is perceived as normalised masculine behaviour or flirting that does not need to be reported (Mitra-Sarkar & Partheeban, 2011; Rahmanipour et al., 2019). Similarly while emotional abuse, sexual coercion and sexual abuse are part of the definition of domestic violence in New Zealand (*Family Violence Act 2018*) research shows that South Asian immigrant women often overlook or tolerate these forms of abuse, particularly in the context of marriage, due to dominant discourses of violence in their cultures (e.g. 'abuse is physical violence' or 'a woman's sexuality belongs to her husband': Dasgupta, 2000; Kim & Hogge, 2015).

As mentioned, the inverse of this phenomenon is also found, whereby behaviours that are considered part of MFPV for a South Asian immigrant woman may not be recognised as such in the host country she lives in. For instance, a Muslim woman may consider being forced to take off her burqa as an act of sexual violence which may not be recognised in her host country's legislation (Rahmanipour et al., 2019). According to Rahmanipour and colleagues (2019) and Puri (2007) more nuanced conversations around what constitutes 'violence' and 'violation' have been hindered by the stalemate between feminism and multiculturalism. Consequently, mainstream formal services are tasked with the dilemma of needing to recognise diverse cultural practices and uphold women's rights, when these two

things can sometimes contradict one another (Simon-Kumar et al., 2017)

Despite this stalemate there has been some progress in recognising the cultural nuances of MFPV for South Asian immigrant women. Dasgupta's (2000) work for example, looks at how Pence, Paymar and Ritmeester's (1993) Power and Control Wheel, a model commonly used for IPV, may be similar and different in the context of South Asian cultures. Dasgupta (2000) identified the following as culturally unique forms of MFPV or common MFPV behaviours that would have profound or nuanced negative implications for South Asian immigrant women: abuse perpetrated by a woman's mother-in-law; accusations made about being a cultural traitor for channelling independence, speaking out about MFPV or allowing daughters to date; threats of deportation; and threats to ruin a woman's reputation which could provoke honour killings. Similarly within New Zealand, the inclusion of dowry-related violence in the definition of domestic violence as well as providing special visas for an immigrant woman whose visa status is dependent on her male abuser, shows some recognition of how MFPV may manifest differently for South Asian immigrant women (*Family Violence Act 2018*).

Taken together, these findings highlight the importance of understanding how MFPV is embedded within a sociocultural context. The intersection between patriarchy and collectivism is particularly important in understanding South Asian immigrant women's vulnerability to MFPV as a product of the sacrificial role they are expected to fulfil. Existing research has predominantly focussed on how elements of South Asian cultures exacerbate MFPV although some findings emphasise how elements of South Asian cultures such as collectivism and faith can also be helpful to women (Somasekhar, 2016; Midlarsky, Venkataramani-Kothari & Plante, 2006). These mixed findings highlight the importance of viewing culture as complex and having transformative potential in anti-violence interventions for immigrant women, as opposed to conceptualising culture as static and always aligned

against the interests of women (Simon-Kumar et al., 2017).

Male to Female Partner Violence and the Context of Migration

As previously mentioned, contradictory findings over whether MFPV is more prevalent in immigrant communities, has prompted many researchers to alternatively explore how immigrant women's experiences of MFPV may be qualitatively distinct (Sokoloff, 2008). This partly requires looking at how their experiences of MFPV may be influenced by processes and challenges associated with migration and ethnic minority status (Burman & Chantler, 2005; Finfgeld-Connett & Johnson, 2013; Sokoloff, 2008). In this section I will outline qualitative findings that describe how migration may shape South Asian immigrant women's experiences of MFPV.

Qualitative findings consistently emphasise the notion that intersecting processes and challenges associated with migration shape how South Asian and other immigrant women experience and cope with MFPV (Liao, 2006; Singh & Hays, 2008; Somasekhar, 2016). Limited grasp of the host county's language is one such migration-related challenge or acculturative stress factor that can shape MFPV in complex ways (Erez, Adelman and Gregory 2009; Liao, 2006; Simon-Kumar et al., 2017; Sokoloff, 2008). For example, language barriers (Bui and Morash, 1999) as well as holding an uncertain or dependent resident status (Liao, 2006; Dutton et al., 2000; Somasekhar, 2016), are two migration-related challenges that have been found to deter immigrant women from seeking or receiving help for MFPV. Studies also show that language barriers can more generally create problems pertaining to resettlement (Nah, 1993), such as downward occupational mobility and associated financial stress (Erez et al., 2009). Among immigrants who come from countries with traditional gender roles, where the man is expected to be the breadwinner, men's downward occupational mobility or unemployment can be a particularly strong risk factor for MFPV (Capaldi et al., 2012). Scholars argue that the loss of social status as a result of

employment issues for South Asian immigrant men can create incentive to forcibly maintain power hierarchies in the home through perpetrating MFPV (Abraham, 2000a; Chaudhuri et al., 2014; Dasgupta, 2007; Lawrence, 1994). Shifting gender roles (men losing power and women gaining autonomy) is another challenge associated with migration (Dion & Dion, 2001; Lim, 1997) which has more generally been implicated in immigrant women's experiences of MFPV (Yick & Agbayani-Siewert, 1997). For instance, although becoming proficient in the host country's language can help immigrant women access support for MFPV, research by Mehotra (1999) and Nilsson, Brown, Russell & Khamphakdy-Brown (2008) suggests that when immigrant women acculturate more rapidly than their husbands (e.g. through learning the host country's language, establishing social networks or gaining employment) this can elevate their risk of experiencing MFPV if it threatens traditional male-female power relationships.

Isolation is another migration-related challenge that has important implications for South Asian immigrant women's experiences of MFPV (Abraham, 2000b). Social isolation in general, has been linked to wife abuse (Fagan & Browne, 1994; Gelles, 1997; Raj & Silverman, 2003). However, in the context of immigrant women's experiences of MFPV, it is important to recognise how the process of migration precipitate loneliness and social isolation (Kang & Kang, 1983; Wright-St Clair & Nayar, 2020). Multiple intersecting layers of isolation are hypothesised to not only shape South Asian immigrant women's experiences of MFPV, but also render their experiences invisible (Abraham, 2000b). On one level, migration geographically isolates South Asian and other immigrant women from traditional support networks (family, friends and domestic help) that are usually called upon to cope with relational conflict (Abraham, 2000b; Ahmad et al., 2009; Ahmad-Stout et al., 2018; Erez et al., 2009; Singh, 2009; Somasekhar, 2016). On another level, South Asian and other immigrant women often experience limited access and participation in formal (i.e. economic,

legal and political institutions) and informal (i.e. friendships and co-workers) networks in the host country (Abraham, 2000b; Guruge, & Humphreys, 2009; Raj & Silverman, 2007; Somasekhar, 2016). This has been linked to a range of other migration-related challenges such as; uncertain resident status, language, financial and cultural barriers (Abraham, 2000b; Somasekhar, 2016; Raj & Silverman, 2007), as well as oppression from the dominant group (i.e. racism, ethnic stereotyping and pressure to live up to 'model minority' status: Abraham, 2000a; Liao, 2006; Rahmanipour et al., 2019). Finally, research with the South Asian immigrant population in the United States (Abraham, 2000b; Kallivayalil, 2010) and in New Zealand (Somasekhar, 2016) has identified isolation as an abuse tactic used by men to maintain power and control over their female partners in a new country. Isolation as an abuse tactic is not unique to South Asian or other immigrant populations (Follingstad, Rutledge, Berg, Hause, & Polek, 1990; Stark & Flitcraft, 1996). However, in the context of immigration, isolation as an abuse-tactic can look slightly different, because it frequently involves immigrant men exploiting the isolative impact of migration on immigrant women (Abraham, 2000b). Examples of this include immigrant men restricting and monitoring an immigrant woman's phone calls to family in South Asia as well as her interactions with people in the host country; forbidding immigrant women from working, learning to drive or learning the host country's language; restricting her access to finances; or generally not helping immigrant women to overcome isolation in the host country (e.g. ignoring her, not including her in his social circle, not supporting her to make friends or familiarise herself with the host country). In this way, the literature suggests that layers of isolation can create fertile soil for MFPV in South Asian and other immigrant communities, through encouraging women to depend heavily on their male partners and deterring them from seeking help (Ahmad-Stout et al., 2018; Hass, Dutton, and Orloff, 2000).

The notion that structural factors associated with migration (e.g. laws that disadvantage immigrant women/facilitate dependency on male abusers), and oppression from the dominant group can heighten immigrant women's risk of experiencing MFPV, challenges the idea that MFPV is an inherent part of their heritage culture (Burman & Chantler, 2005; Rahmanipour et al., 2017). For example, while patriarchal beliefs have been identified within South Asian cultures (Fikree & Pasha, 2004; Grewal, Bottorff & Hilton, 2005) and this has been linked to MFPV (Dobash & Dobash, 1979; Yllo & Straus, 1990), some scholars suggest that experiences of being viewed as different and/or discriminated against in the context of migration, can contribute to patriarchal norms and associated gender roles becoming rigidified (Liao, 2006; Rahmanipour et al., 2019). This was further highlighted in Rahmanipour and colleagues' (2019) research investigating the underreporting of sexual abuse by ethnic minority women in New Zealand. A dominant theme in this study was the idea that underreporting was a product of the dominant group racialising ethnic minority women's sexuality ('the white colonial gaze'), contributing to 'migrant defensiveness'. 'Migrant defensiveness' in this instance was described as ethnic minority communities putting even greater emphasis on women conforming to expectations of purity or honour within their heritage cultures.

Another form of oppression from the dominant group that is hypothesised to contribute to the underreporting of MFPV in immigrant communities is the pressure that dominant groups in Western societies put on certain migrant groups, to live up to the 'model minority stereotype' (Abraham, 2006; Bograd, 1999; Liao, 2006; Rahmanipour et al., 2019). According to Liao (2006) the 'model minority' stereotype functions as a double-edged sword. While it is a positive stereotype it can also make MFPV in immigrant communities invisible by putting pressure on immigrant communities to deny social problems in order to avoid discrimination and maintain their 'model' status. The notion that Asian immigrants, including

South Asians, represent a 'model minority' (i.e. educated, affluent, successful and well-assimilated: Mudambi, 2019; Saran, 2015; Taylor, Landreth & Bang, 2005) and that this contributes to their heightened risk of experiencing MFPV (Abraham, 2006; Liao, 2006), has been established in American literature. In New Zealand however, there is no research explicitly identifying South Asians as a 'model minority' or linking this to their experience of MFPV. However, Rahmanipour and colleagues' (2019) research generally links the 'model minority' status to the underreporting of sexual violence among ethnic minority immigrant women. Overall, these findings suggest that stereotypes of immigrant women, whether positive or negative, can heighten their risk of experiencing MFPV.

To summarise, the way in which migration shapes South Asian and other immigrant women's experiences of MFPV is indeed complex. On the one hand migration can make it easier for male abusers to perpetrate MFPV through depleting women's resources or isolating them structurally, culturally, socially and financially (Abraham, 2000a; Ammar & Orloff, 2006; Hass et al., 2000; Menjívar & Salcido, 2002; Natarajan, 2002; Raj & Silverman, 2002; Somasekhar, 2016; Tse, 2007). This is supported by research which shows that immigrant women who have fewer resources to cope with migration (increased acculturative stress), are more likely to experience MFPV, stay in abusive relationships for longer and suffer more serious physical and psychological abuse compared to their better resourced counterparts (Dutton et al., 2000; Liao, 2006; Raj & Silverman, 2002; Raj & Silverman, 2003; Somasekhar, 2016). On the other hand, some studies suggest that when South Asian and other immigrant women gain resources and power in the host country and become more acculturated, this can increase their risk of experiencing MFPV if their male abuser and migrant community perceive this to be a threat to patriarchal and collectivist principles within their heritage culture (Abraham, 2000a; Chaudhuri et al., 2014; Kantor, Jasinski & Aldarondo, 1994; Sorenson & Telles, 1991). What both these theories have in common is that

they emphasise the importance of understanding how acculturation shapes women's vulnerability to and experience of MFPV (Liao, 2006). This is captured by Ahmad and colleagues' (2013) 'triple jeopardy' theory which conceptualises South Asian immigrant women's vulnerability to MFPV as a product of how patriarchal and collectivist norms within their culture of origin interact with the economic hurdles and social isolation they experience as a result of migration.

Help-Seeking and Other Strategies Used to Cope with Male to Female Partner Violence

South Asian immigrant women who experience MFPV are often construed as 'passive' due to assumptions that they 'don't fight back' or 'suffer in silence' (Abraham, 2000a). These assumptions may in part be grounded in findings which show that South Asian immigrant women hesitate to seek help from others; especially from formal supports (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018; Finfgeld-Connett & Johnson, 2013; Kim & Hogge, 2015, Mehrotra, 1999). However the linking of assumptions of 'passivity' to South Asian immigrant women's hesitant stance towards help-seeking, has been challenged by researchers that have more broadly explored how these women cope with MFPV (Abraham, 2000a; Ahmad et al., 2009; Mehrotra, 1999). This section will first explore coping strategies used by South Asian immigrant women experiencing MFPV, of which help-seeking is one such strategy. I will then highlight cultural and migration-related factors that are thought to shape help-seeking and the underreporting of MFPV by South Asian immigrant women. Finally, I will summarise research investigating the phenomenon of ethnicity-matching and the role of ethnic-specific organisations when addressing the needs of South Asian immigrant women who have experienced MFPV.

Strategies Used to Cope with Male to Female Partner Violence

Coping has been defined as a continued effort to manage demands (internal or external) that are considered taxing or in excess of a person's resources (Lazarus, 1993). There have been many attempts to codify coping in mainstream domestic violence literature. Examples include cognitive vs. behavioural coping (Holahan & Moos, 1987), approach vs. avoidance coping (Holahan & Moos, 1987; Holahan, Valentiner & Moos, 1995), active vs. passive coping (Meyer, Wagner & Dutton, 2010) and emotion-focussed vs. problem-focused coping (Folkman & Lazarus, 1990; Lazarus, 1993). Some research suggests that there is overlap between avoidance/ passive/ emotion-focussed coping and approach/ active/ problem-focussed coping (Kanagaratnam, et al., 2012; Lazarus & Folkman, 1984; Meyer et al., 2010). While the former is used to maintain a sense of self and reduce negative affect through changing the meaning of the situation/stressor, the latter focusses on reducing violence through altering the situation or the abuser.

Analysis of coping in the current study will primarily be informed by Lee Bowker's (1983) typology of coping which distinguishes between personal strategies, informal support seeking and formal support seeking. There are three reasons for this. Firstly, it has previously been used by Abraham (2000a) to explore how South Asian immigrant women cope with MFPV in the United States; thus providing a point of comparison. Secondly, this categorisation aligns with the current study's aims, which are to broadly explore help-seeking as well as what other coping strategies participants might use apart from help-seeking or permanently leaving their abusers. Thirdly, the use of the 'passive vs. active' categorisation conflicts with allowing participants' themselves to define their own experiences of coping as well as the notion that what is considered an 'active vs. passive' coping strategy, depends on a woman's sociocultural context (Kanagaratnam et al., 2012). Finally, distinguishing between whether a particular strategy constitutes avoidant/passive/ emotion-focussed coping or approach/ active/ problem-focussed coping, assumes that strategies must have a single

function and prevents participants themselves from defining this function. This is evident in the fact that pacifying or placating was identified as a problem-focussed coping strategy in Bhandari's (2018) research with South Asian women; however, in Abraham's (2000a) research South Asian women reported that placating solved problems (e.g. avoided an abusive incident) and conveyed emotional benefits (e.g. strengthens self-worth). In the next few paragraphs I will however, use these categorisations to convey findings in the literature, whilst attempting to maintain this critical standpoint.

Existing research exploring South Asian immigrant women's experiences of MFPV has consistently emphasised how their coping is shaped by their socio-cultural context; including the context of migration (Bhandari, 2018; Kanagaratnam et al., 2012). This is exemplified by how South Asian women who lack a support system and have a visa that is dependent on their male abuser, tend to rely more heavily on personal strategies that involve sacrificing or tolerating MFPV (Abraham, 2000a; Ahmad et al., 2009; Finfgeld-Connett & Johnson, 2013). While generally geared to promote survival, research suggests that the coping strategies used by South Asian immigrant women can serve multiple functions including: halting the abuse temporarily or permanently, communicating a resistant stance, minimising the likelihood of further harm, preserving a sense of self-worth and obtaining help (Abraham, 2000a; Merchant, 1999; Venkataramani-Kothari, 2007).

Personal strategies are cognitive or behavioural modifications in response to the abuse or the abuser. In Abraham's (2000a) research with South Asian immigrant women in the United States, personal coping constituted participants' first line of defence against MFPV. Personal coping strategies that overlap between research conducted with a mainstream American population (Bowker, 1983) and research conducted with South Asian immigrant women in America (Abraham, 2000a; Merchant, 1999) include: placating and avoidance, talking back, challenging the abuser's fiscal control and hitting back. Personal strategies that

are uniquely found in research with South Asian immigrant women experiencing MFPV include challenging the abuser's fiscal control, contemplating suicide and resistance in the domestic sphere (e.g. refusal to cook: Abraham, 2000a; Merchant, 1999). Although research suggests that the use of personal strategies by South Asian immigrant women often only achieves short-term palliative benefits (Abraham, 2000a; Merchant, 1999), Lempert (1996) argues that these can still be an essential part of the empowerment process. Within the category of personal strategies, research shows that South Asian immigrant women use a range of both avoidant/ passive/ emotion-focussed (e.g. diverting the mind, avoidance and relying on faith) and approach/ active/ problem-focussed/ strategies (e.g. pacifying and safety planning); however they appear to prefer the former (Bhandari, 2018; Kanagaratnam et al., 2012).

Many researchers have argued that the way in which South Asian immigrant women use personal strategies challenges assumptions of passivity and submissiveness that are frequently made about women who have not yet left the abusive relationship or are not seeking help from others (Abraham, 2000a; Merchant, 1999; Somasekhar, 2016). Yet, the fact that many South Asian immigrant women frequently rely on personal, covert strategies for a long period of time is thought to reveal their disadvantaged position relative to their male abusers and/or as a result of their unique sociocultural and migration contexts (Merchant, 1999). Abraham (2000a) highlights a dialectic whereby strategy selection is influenced by the power constraints imposed on women at any given time, and yet in some circumstances, South Asian immigrant women take significant risks to resist MFPV in spite of these power constraints.

According to the literature, informal and formal supports need to understand that disclosure and/or leaving an abusive relationship, is a gradual process for South Asian immigrant women (Ahmad et al., 2009; Finfgeld-Connett & Johnson, 2013; Kallivayalil,

2007). South Asian immigrant women typically only begin to look to others for help after several years, upon realising the long-term inadequacy of personal strategies in terms of permanently putting an end to MFPV (Abraham, 2000a; Ahmad et al., 2009). Identified benefits of help-seeking include providing South Asian immigrant women with emotional and tangible support, as well as sending a message to the abuser that others are aware of his abuse; thus establishing a sense of accountability, which can itself deter MFPV (Abraham, 2000a). However, help-seeking can also sometimes lead to an increase in abuse for South Asian immigrant women (Merchant, 1999).

South Asian immigrant women are more likely to seek help from informal supports (e.g. family, in-laws, friends, neighbours or community leaders) than formal supports (e.g. South Asian immigrant women's organisations, lawyers, police, health professionals: Abraham, 2000a; Ahmad et al., 2009; Ahmad-Stout et al., 2018) regardless of IPV type (Kim and Hogge, 2015). Informal supports are often other South Asians (Abraham, 2000a). Although South Asian immigrant women sometimes make multiple attempts to reach out to informal supports, not all are successful. For instance, on the one hand, family members of South Asian immigrant women, the most common source of informal support, can play a vital role in helping them overcome barriers to leaving the abusive relationship through providing financial assistance, encouraging them to contact formal supports and telling them they do not need to tolerate abuse (Abraham, 2000; Ahmad-Stout et al., 2018). However, in some instances, family members also put pressure on women to stay in the abusive relationship through constructing abuse as a normal part of adjusting to marriage and migration. Somasekhar's (2016) study with Indian women who had experienced MFPV in New Zealand similarly found that although members of the Indian immigrant community sometimes helped women, too often they colluded with male abusers and/ or tolerated MFPV. A number of factors have been found to contribute to the success of informal support-

seeking such as: geographic distance from the support person, the support person's attitudes, the type of support they are willing and able to provide and participants' own fears about being the subject of gossip which can contribute towards a cautious approach to help-seeking (Abraham, 2000a; Ahmad-Stout et al., 2018; Somasekhar, 2016). Formal supports are rarely accessed by South Asian immigrant women and if so typically only when the situation becomes untenable (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018). Abraham's (2000a) research suggests that informal supports can play a vital role in linking South Asian immigrant women to formal supports; especially the police.

Why do South Asian Women Hesitate to Seek Help for Male to Female Partner Violence?

According to the literature, help-seeking in the context of MFPV is influenced by a plethora of inter-related socio-cultural, community, interpersonal and individual factors (O'Doherty, Taft, McNair & Hegarty, 2016; Somasekhar, 2016). Individual factors will be discussed further in the subsequent section on identity. In regards to sociocultural factors, research shows that many elements of culture and migration that create an MFPV-supportive context for South Asian immigrant women also contribute to their hesitant stance towards help-seeking (Ahmad-Stout et al., 2018; Somasekhar, 2016; Tse, 2007). I will not go into these in detail as they have been discussed in prior sections relating to South Asian cultures and the migration context. One example however, is the way in which migration-related isolation simultaneously increases a South Asian woman's vulnerability to experiencing MFPV, and deters her from seeking help (Abraham, 2000a; Ahmad-Stout et al., 2018). At an interpersonal level, I have already mentioned how male abusers of South Asian women frequently discourage, mediate or deny access to informal and formal supports through exploiting migration-related isolation (Ahmad-Stout et al., 2018). Being a mother and perceived social support are consistently identified as interpersonal factors that facilitate help-seeking for South Asian immigrant women experiencing MFPV, which could speak to

the emphasis on collectivism and motherhood as a central part of femininity within South Asian cultures (Kim & Hogge, 2015; Tonsing & Tonsing, 2019). At a community level, systemic failure to understand and address the unique reasons that South Asian immigrant women have for not seeking help, can put pressure on them to remain in abusive relationships (Abraham, 2000a; Finfgeld-Connett & Johnson, 2013). Some examples of this include: health professionals failing to adequately screen for MFPV when a South Asian immigrant woman presents with injuries (Ahmad et al., 2009; Anitha, 2008), accessibility issues (e.g. when services are not available for women with a dependent or uncertain visa status: Abraham, 2000a; Anitha, 2011; Raj & Silverman, 2007), misinformation that results from accessibility issues (e.g. fear that police officers will racially discriminate against them or initiate deportation: Abraham, 2000a; Gill, 2004), suitability issues (e.g. when cultural gaps or language barriers exist between service providers and recipients: Abraham, 2000a; Adam, 2000; Anitha, 2011; Gill, 2004; Raj & Silverman, 2007; Yoshioka & Choi, 2005).

Ethnicity-Matching

Research investigating the efficacy of matching clients and professionals based on ethnicity (ethnicity-matching), have produced contradictory findings (Cimbolic, 1972; Florentine & Hillhouse, 1999; Flicker, Waldron, Turner, Brody, & Hops, 2008). This has partially been attributed to inconsistent outcome variables (e.g. service utilisation, therapeutic relationship or treatment outcomes), lack of outcome specificity and methodological inconsistencies (Weekes, 2010). Some findings indicate that ethnic minority women are more likely to use same-ethnicity services (Lipsky, Caetano, Field & Larkin, 2006; Merchant, 2000); drop out of therapy when the therapist is from a different ethnic background (Bryant-Davis, Chung & Tillman, 2009); and describe increased client-reported therapist credibility, rapport and treatment outcomes with ethnically-matched professionals (Farsimadan, Draghi-Lorenz & Ellis, 2007). In contrast Sawrikar's (2013) study investigating ethnicity-matching

between culturally and linguistically diverse (CALD) client families and child protection case workers, identified both benefits (overcoming language barriers and cultural sensitivity) and drawbacks (fear of confidentiality breaches, caseworker over identifying with the client). Sawrikar (2013) concluded that the benefits of ethnicity-matching could only be maximised if the drawbacks were mitigated. However Sawrikar (2013) stated that even when beneficial, ethnicity-matching can be limited by the lack of ethnically diverse professionals.

In the context of ethnic minority women who experience MFPV, findings consistently support the need for cultural sensitivity in formal services (Kim & Hogge, 2015; Merchant, 2000; Milani et al., 2018; Pressier, 1999; Simon-Kumar, 2019). Although there is concern about mainstream services lacking cultural sensitivity, whether cultural sensitivity is achieved through ethnicity-matching and ethnic-specific organisations is less straightforward. Studies that emphasise acculturation and hence cultural diversity among South Asian immigrant women, inadvertently resist the notion that ethnicity-matching and cultural sensitivity are synonymous (Kim & Hogge, 2015; Milani et al., 2018; Simon-Kumar, 2019). However, other researchers argue that ethnicity-matching is the best way to ensure that as many barriers to treatment can be overcome as soon as possible (Merchant, 2000; Pressier, 1999).

Unfortunately research supporting this latter view point has predominantly been conducted by and with women who work for South Asian domestic violence organisations, who may have a vested interest in supporting ethnicity-matching. The perspectives of South Asian victims/ survivors themselves have largely been obscured. Other studies, although not specifically involving South Asian women, have highlighted the risk of ethnic-specific domestic violence services holding homogenous views about culture and creating barriers to engagement by making assumptions about ethnic minority victims/ survivors (Burman, Smailes & Chantler, 2004) or failing to adequately cater to their intersectional locations (Simon-Kumar, 2019). The notion that cultural sensitivity is more complex than ethnicity-

matching is also supported by findings from a study investigating therapist/ client ethnicity-matching in couples' treatment of domestic violence (Horst et al., 2012). Key themes included the notion that understanding and attending to nuanced cultural issues or differences was more important than ethnicity-matching; the notion that issues of violence transcend ethnicity; and that therapist qualities were considered more important than their ethnic background. South Asian domestic violence organisations have undoubtedly made significant contributions through advocacy and legal reform despite facing funding issues (Merchant, 1999). However, these results suggest that more independent research is needed that explores ethnicity-matching in formal services with ethnic-minority victims/ survivors of MFPV themselves.

Identity, Male to Female Partner Violence and the Decision to Seek Help and/or Leave the Relationship

Contemplating help-seeking and/or leaving a relationship characterised by MFPV, often forces South Asian immigrant women to come face to face with potentially experiencing multiple significant losses. This includes the loss of a presumed life partner as well as the risk of losing children, extended family, an immigrant community, economic security and deportation (Finfgeld-Connett & Johnson, 2013; Gill, 2004). Furthermore, the extent of this loss and its meaning is shaped by women's sociocultural contexts. For instance, given that the act of help-seeking and/or leaving a male abuser transgresses gendered expectations within South Asian cultures, it is highly likely to be associated with increased identity conflict and women generally feeling disconnected from their South Asian identity (Adam, 2000; Ahmad, Rai, Petrovic, Erickson & Stewart's, 2013; Gill, 2004). At the same time, the process of migration can expose women to a new cultural context with new norms, identities and possibilities of being (Berry, 1997). How then does a South Asian immigrant woman justify help-seeking and/or leaving her male abuser? What identity shifts make this

possible and how is this influenced by her sociocultural context? First however, I will attempt to summarise research which describes the impact of MFPV on a woman's identity.

Mainstream (Childress, 2013; Matheson et al., 2015; O'Doherty et al., 2016) and South Asian-specific findings (Finfgeld-Connett & Johnson, 2013; Kallivayalil, 2007; Venkataramani-Kotari, 2007), both concur that MFPV, particularly emotional abuse, can fracture a woman's identity and inhibit help-seeking and/or leaving the relationship through lowering self-esteem (Baly, 2010; Tilley & Brackley, 2004) and self-efficacy (Anderson, Renner & Danis, 2012; Cluss et al., 2006). Isolation as an abuse tactic in particular can contribute to lost identification with groups (e.g. family disconnection or religious disconnection through spiritual abuse) or limited opportunities to identify with emergent collectives in the host country (i.e. through work, friends: O'Doherty et al., 2016). Qualitative research by O'Doherty and colleagues with female victims/survivors of IPV in Australia, shows that while identifying with a collective 'abuse identity' (i.e. acknowledging victimhood) is required in order to seek help, many women hesitate to do so due to fear of being stigmatised which manifests in feelings of shame and failure. Women were only willing to unveil their 'abuse identity' when MFPV threatened their most integrated identities. For most participants this was their role as a mother. When tensions between being a good partner and being a good mother reached a peak, most women were willing to unveil their 'abuse identity' through leaving and/or help-seeking. Health professionals responding non-judgementally, helping women compromise aspects of their identity that stigmatise victimhood (e.g. the notion that women are responsible for keeping the family together at all costs) and not reinforcing but challenging the 'madwoman identity' imposed on women through emotional abuse (e.g. not prescribing anti-depressants without acknowledging the context of MFPV) were factors that women felt sustained their help-seeking efforts. All in all, O'Doherty and colleagues conclude that providing a safe environment for women to unveil

their abuse identity is crucial. Unfortunately, findings suggest that victims of IPV in Western countries irrespective of ethnicity, often do not encounter a safe environment where they can disclose abuse (Fanslow & Robinson, 2010; Meyer, 2016; O'Dohrety et al., 2016).

Like other women experiencing MFPV, South Asian immigrant women need to find identity positions that avoid the stigma and shame associated with victimhood in order to justify help-seeking and/or leaving their male abusers (Ahmad et al., 2013; Gill, 2004; Kallivayalil, 2007). Being a mother (Tonsing & Tonsing, 2019) and the perceived negative impact of MFPV on children (Ahmad et al., 2004; Ahmad et al., 2009; Ahmad-Stout et al., 2018; Kallivayalil, 2010) are two related factors that have consistently been linked to South Asian immigrant women's willingness to unveil their 'abuse identity' and confront MFPV. This parallels findings from research with mainstream populations in New Zealand (Fanslow & Robinson, 2010) and Australia (O'Doherty et al., 2016).

Perceived social support, especially from family and friends, is another way that South Asian immigrant women in past research have justified confronting MFPV (Ahmad et al., 2004; Ahmad et al., 2013; Ahmad-Stout et al., 2018; Tonsing & Tonsing, 2019). In Ahmad and colleagues' (2013) study with South Asian immigrant women who had experienced MFPV in Canada, participants intentionally modified their support networks in order avoid being stigmatised for help-seeking and/ or leaving their abusers. For some women, this involved befriending individuals from the host culture and developing a stronger sense of belonging to the host country. This perhaps suggests that South Asian immigrant women may need to renegotiate ethnic identity in the aftermath of confronting MFPV. However, at the same time, the fact that the decision to stay or leave/seek help for MFPV is contingent on support from valued others and the impact of the abuse on children, likely reflects collectivist notions of the self within South Asian cultures. Perceived social support

as a justification for confronting MFPV appears to be less emphasised by women from a representative sample of New Zealand's general population (Fanslow & Robinson, 2010).

Abuse intensification and/or chronicity, developing autonomy or willpower, and staying positive, are other justifications used by South Asian immigrant women who sought help or left relationships characterised by MFPV (Ahmad et al., 2004; Ahmad et al., 2013; Ahmad-Stout et al., 2018). These justifications have also been used by women from New Zealand's general population (Fanslow & Robinson, 2010) and align with Western notions of individualism, or prioritising individual safety and emphasising individual strength (Kim & Hogge, 2015). Thus re-negotiating ethnic identity and aligning with Western values in the host culture, could be beneficial for South Asian immigrant women; especially those who are unable to justify confronting MFPV using South Asian justifications, such as motherhood or family support. However, it is important to remember that in accordance with a social constructionist view of identity (Burr, 2003), women can hold multiple and conflicting identity positions. Although social constructionism contests conceptualising acculturation on a linear continuum (Burr, 2003), there is some evidence to suggest that Asian Indian immigrant women with higher acculturation and lower enculturation levels, are more willing to seek help for MFPV (Kim & Hogge, 2015). This is likely because higher acculturation goes hand in hand with fewer migration-related barriers. This invokes further questions about what pressures the host country puts on immigrant women to adopt a more Westernised identity position in order to fulfil 'ideal victim' status and how the intersection of identity positions (gender, socioeconomic status, resident status) may make this more available for some women than others (Gill, 2004; Kim & Hogge, 2015). More research is needed to explore these questions.

Rationale for this Study

The evidence that has been presented so far supports the notion that South Asian immigrant women in New Zealand may be particularly vulnerable to experiencing and navigating MFPV, as a result of how elements within their cultures of origin interact with the context of migration. The high likelihood of underreporting of MFPV in South Asian immigrant communities due to migration and cultural factors (Fanslow et al., 2010; Sokoloff, 2008; Tjanden & Thoennes, 2000; West, 2005), as well as the problems with reliably recording ethnicity and MFPV in New Zealand statistics (Bograd, 1999; Maker et al., 2005; New Zealand Police, 2017; Simon-Kumar, 2019; Sorenson, 1996; Statistics New Zealand, 2013), highlight limitations of quantitative methods. These inconsistencies have led some researchers (Goel, 2005; Sokoloff, 2008) to advocate for a shift away from simplistic questions about whether immigrant women experience more MFPV or are more negatively impacted by MFPV; alternatively seeking to understand how their experiences of MFPV may be qualitatively distinct. The current study's aim aligns with this recommendation and also responds to the international call for more research on immigrant women's experiences of MFPV using an intersectional lens (Crenshaw, 1991; Sokoloff, 2008).

Over the last few decades a number of ethnic-specific domestic violence organisations have emerged both internationally and in New Zealand; including organisations that specifically cater to South Asian women (Merchant, 2000; Simon-Kumar, 2019). These organisations have emerged based on the premise that immigrant ethnic minority women have special needs that are not adequately met by mainstream services. The current study broadly aims to explore South Asian immigrant women's experiences of MFPV in New Zealand and comment on whether they may have any special needs. The research questions below refer to specific, but related experiences of identity negotiation, coping, navigating the system (captured in coping strategies) and perspectives on ethnicity matching. Identity negotiation and perspectives on ethnicity matching have received less attention in the broader

literature on South Asian immigrant women's experiences of MFPV. When analysing participants' interviews I will investigate how they draw on and reflect their broader sociocultural contexts; including the context of migration. Past research looking at immigrant ethnic-minority women's experiences of MFPV, especially in New Zealand, has primarily been conducted with key informants or professionals who work for ethnic-specific organisations (e.g. Simon-Kumar et al., 2017, Merchant, 2000). The current project addresses this gap by prioritising the voices of South Asian immigrant women themselves. This aligns with Lempert's (1996) recommendations for domestic violence research.

Research Questions:

1. In hindsight, how do South Asian immigrant women in New Zealand make sense of their identity in relation to experiencing MFPV and later seeking help, leaving the relationship and/or establishing life as a separated woman?

2. How do South Asian immigrant women in New Zealand describe coping with MFPV? What coping strategies did they use and how do they describe selecting and performing these strategies?

3. How do South Asian immigrant women navigate formal services in New Zealand and what are their experiences and/ or perceptions of ethnicity-matching in this setting?

It is hoped that this study will be useful to South Asian immigrant women who experience MFPV in New Zealand as well as anyone who supports them in a formal or informal capacity. However, it is important to remember that because this is a small-scale qualitative study, these findings are not generalisable. They do not present facts about South

Asian cultures, MFPV or the migration context, but rather, say something specific about this

group of women's experiences of these things.

The aim of this study was to explore South Asian immigrant women's experiences of MFPV in New Zealand, and comment on whether they may have any special needs. Data from 12 semi-structured interviews with South Asian women who had experienced MFPV in New Zealand, were analysed using thematic analysis. I will now describe the qualitative methodology used in this study, which includes a critical realist ontological position and a social constructionist epistemology.

Situating the Research

Qualitative research facilitates a more in-depth exploration of how individuals make sense of a particular phenomenon within a particular context (Creswell and Tashakkori, 2007; Mason, 2002). It has developed in response to criticism of quantitative methods as decontextualised, ignoring meaning making and lacking real world applicability (Flick, 2009; Guba & Lincoln, 1994). As the literature view has demonstrated, a number of studies to date have used qualitative methods to explore South Asian immigrant women's experiences of MFPV in Western countries (Finfgeld-Connett and Johnson, 2013).

When conducting qualitative research, it is important for researchers to make explicit their epistemological and ontological position. Epistemology refers to what assumptions are made about knowledge: what knowledge we can have and how this is acquired (Nightingale & Neilands, 1997). An ontological position refers to assumptions made about the nature of reality (Creswell and Tashakkori, 2007). Epistemology and ontology are related paradigms as our assumptions about reality are intertwined with our assumption of what we can know.

The current study uses a social constructionist epistemology which criticises the idea that if we observe the world carefully enough, we can uncover an 'objective reality' (Nightingale & Neilands, 1997). Alternatively, social constructionism contends that all

experiences (which are inseparable from thoughts/ perceptions) are mediated historically, culturally and linguistically (Willig, 2001). Language is therefore at the heart of the constructivist process because it provides a framework for making sense of our experiences and can also enable certain actions while constraining others (Burr, 2015; Nightingale & Neilands, 1997). Social constructionism is relevant to studying immigrant women's experiences of MFPV because it acknowledges that gender roles (e.g. men, women, masculinity and femininity) and what counts as violence (Muehlenhard & Kimes, 1999; Willig, 2001) varies across cultures and over time.

Social constructionism has furthered domestic violence research through challenging dominant discourses of violence as 'extreme physical violence' (Muehlenhard & Kimes, 1999) and alternatively constructing domestic violence as 'men exerting power and control over women'; a definition which suggests that domestic violence is maintained by patriarchy (Stark, 2009). Yet social constructionism is not without its limitations. For instance, Nightingale & Cromby (1999) argue that with the discursive turn, social constructionism became preoccupied with language at the cost of embodiment, materiality and power. Such researchers would argue that the physical impact of domestic violence on women's bodies, the materiality of women's lives and power dynamics inherent in social institutions which disadvantage South Asian immigrant women cannot be written off as social constructions. Willig (1999) has additionally criticised social constructionism's over-emphasis on deconstruction and consequent failure to provide comprehensive explanations for phenomena and suggestions for how things could improve.

Adopting a critical realist ontology maximises the strengths of social constructionism while mitigating its shortcomings. It does this by maintaining the constructivist view that language constructs social reality while simultaneously accepting the presence of an underlying reality of the external world which exists independent of our representation

(Braun & Clarke, 2013; Guba & Lincoln, 1994; Nightingale & Cromby, 1999). This is relevant to the proposed research because it is important to conceptualise the power dynamics in violence, racism and gender inequality as real in order to justify a moral obligation to reduce these injustices (Willig, 1999). However, it is also important to acknowledge that people make sense of violence, gender roles and identity in different ways based on their sociocultural context. The proposed research will follow Carla Willig's (1999) suggestions for how to conduct research from a critical realist paradigm. First, she suggests that when gathering participant's accounts of subjective experiences researchers "need to provide detailed and comprehensive descriptions of the discourses available to groups and individuals and the various ways these discourses are deployed and with what consequence" (p. 38). Secondly, Willig advocates the need to explore the historical, social and economic conditions "that gave rise to and/or made possible these documented subjective accounts and the discourses which constitute them" (p. 38-39). The literature review was conducted with these guidelines in mind.

Situating the Researcher

Over the years the notion that researcher subjectivity implicitly and explicitly impacts how the research unfolds and is interpreted, has increasingly been highlighted in qualitative research (Bott, 2010). From this standpoint it is essential for researchers to reflect on their own subjectivity as well as intersubjective dynamics, in order to claim integrity and trustworthiness of findings (Finlay, 2002). This process is called self-reflexivity. From a social constructionist perspective, the aim of self-reflexivity is not to eliminate 'bias' (Finlay, 2002) but rather to be transparent about researcher subjectivity and promote self-reflection as a tool that researchers can use in order to remain flexible and responsive to the research (Bott, 2010). Journaling (Thorpe, 2004) and being part of a research group (Mauthner & Doucet, 2003) are two suggestions for operationalising self-reflexivity that I have used in this project.

Both of these methods as well as obtaining supervision, helped me to reflect on my own identities, values, experiences, politics and beliefs and how these may have shaped the research. I will now attempt to position myself in the current study by briefly summarising some of my personal reflections.

I am a 1.5 generation, Indian immigrant woman in my late twenties living in the Auckland region. I am a New Zealand citizen and have lived in New Zealand for most of my life. I grew up in a middle-class family where English was my first language. I have a Kiwi accent and wear Western clothing. I am not religious although I was raised Christian. While interviewing participants I was in a de facto relationship and did not have children. Although I have never personally experienced MFPV, I have some familiarity with it occurring within my extended family and migrant community. At the time of the interview I was a full-time doctoral student training to be a clinical psychologist. Prior to this research, I worked as a child advocate for a mainstream domestic violence organisation in New Zealand for six months, but did not feel emotionally attached to this organisation. I was not working for this organisation while completing this study, however my interest in South Asian immigrant women's experiences of MFPV in New Zealand stemmed from both personal and work experiences. Finally, I also identify as a feminist and value gender equality.

During data collection, I noticed finding it much easier to understand and connect with participants whom I felt I had more in common with. These were typically women who had a higher level of acculturation, had lived in New Zealand for a number of years, spoke English fluently, had a tertiary level of education and/or shared my personal value of gender equality. Under these circumstances, I believe my personal subjectivity made participants feel more comfortable and facilitated more in-depth discussions. For example, P2 commented on how the fact that I did not assume that she was married to her ex male abuser and did not

judge her for having a child out of wedlock, made her feel like she could be more open about her experiences.

In contrast, I found it more difficult to connect with and comprehend the stories of first generation immigrant women who were less acculturated, did not speak English fluently, who had lived in New Zealand for a shorter time period, were less educated and perhaps more strongly identified with South Asian values. With these participants, I was acutely aware of feeling like even more of an outsider because of the way I dressed, the way I spoke, and the fact that I was asking more clarifying questions due to language and cultural barriers. For example, the fact that P3 felt the need to explain the cultural significance of spousal abandonment to me during our interview, likely exemplifies how she perceived me as different to her. It is possible that with women like P3, the depth of our interviews was limited by our difference. Although I gave participants the option of having an interpreter, they all declined this, even though language barriers did limit my understanding of what they were saying at times. Allowing for participants to have support people who could help them communicate as well as seeking cultural supervision, were some precautionary steps I took in order to try and represent these women's accounts of MFPV to the best of my ability, given the limitations associated with my subjectivity.

Chapter Three: Methods

This section will outline the methods of this thesis. Ethical approval was granted by the University of Auckland Human Participants Ethics Committee on 08th November 2017 for three years (reference number 020213).

Consultations

Five key informants who work with South Asian women who have experienced MFPV in New Zealand were interviewed prior to participant interviews. Although key informant interviews were initially supposed to be analysed in the current project, I chose to focus on the experiences of victims/ survivors themselves. Key informant interviews were alternatively used as part of the consultation process and informed the interview schedule used with participants. Key informants included two South Asian women who worked for South Asian domestic violence organisations, one South Asian woman who worked for a mainstream counselling service, one New Zealand European woman who worked for a mainstream domestic violence organisation and a South Asian lawyer. In addition to this, the researcher sought cultural advice from three individuals throughout the duration of this project, all of whom identified as South Asian and had experience working with the defined participant group.

Recruitment

All participants met the following recruitment criteria: identifies as a South Asian woman as defined in the literature review; has experienced MFPV perpetrated by a South Asian husband/partner/ boyfriend; currently identifies as being safe (no longer experiencing family violence or threats); was 18 or above at the time the violence began.

Participants were recruited from a number of different channels. The advertisement (Appendix A) for the study was put up in community spaces frequently visited by South

Asian women (e.g. supermarkets, spice shops, beauty salons, libraries and hospitals) as well as in South Asian newspapers. I also elicited the help of professionals who worked for domestic violence organisations; both South Asian and mainstream. I discussed the study with these individuals over email and/or in person, provided an advertisement to put up at their organisation and a participant information sheet (PIS: Appendix B), so that they could think of any clients who may fit criteria and be willing to participate. Of the participants in this study seven were recruited through professionals, three responded to the newspaper advertisement, one responded after a friend who worked in social services saw the advertisement in a work email and told her about it, and one participant was recruited through snowball sampling.

Once participants directly contacted the researcher, they were screened over the phone to ensure that they met criteria, provided with an overview of the study and informed about the option of having an interpreter. Some women opted to have this conversation in person which the researcher obliged to build rapport given the sensitive nature of the topic being researched. After this initial conversation, participants received a PIS via email or in person, providing a brief overview of the study as well as the study's inclusion and exclusion criteria. They were advised to read through this and contact the researcher if they had any questions before letting the researcher know if they wished to proceed with the interview. Given ethical boundaries the researcher took care not to interview friends, family or close acquaintances. All participants were given a thirty dollar voucher to thank them for their time irrespective of premature withdrawal.

Participants

Fifteen women expressed interest in participating in this study. However, one withdrew her interest, one was excluded because her abusive ex-partner was not South Asian and one was excluded because she had misunderstood the advertisement and had not

experienced MFPV. This left 12 women who met full criteria for this study. I decided to describe the demographic information of participants in this study as a cohort as doing so on an individual basis may jeopardise confidentiality. All participants were living separately from their male abusers at the time of the interview. Most women said that the MFPV they experienced occurred in their first relationship (10 participants). In terms of relationship status, 5 women described joining their male abusers in New Zealand following an arranged marriage, 5 women reported experiencing MFPV in the context of a love marriage (a non-arranged marriage of their choosing), 1 said that MFPV occurred in a long-term de facto relationship, and 1 said that their experience of MFPV was perpetrated by their boyfriend at the time. Half the women in this study reported comorbid abuse from their mothers-in-law. Nine women in this study were mothers and had children for at least some of the time they were experiencing MFPV.

In terms of ethnicity, 1 participant identified as Sri Lankan, 1 identified as Bangladeshi, 6 identified as Indian and 4 identified as Fiji-Indian. Only one participant was a second generation or New Zealand born immigrant. The rest were first generation immigrants who came to New Zealand as adults, apart from one woman, who came to New Zealand with her parents as a child, and is therefore a 1.5 generation immigrant. The number of years lived in New Zealand at the time of the interview varied greatly (7 months – 29 years), had a mean of 14.3 years and a median of 13.5 years. Participants' status of residency upon arrival in New Zealand (excluding the one woman who was New Zealand-born) were as follows: 4 visitor visas, 3 permanent residencies, 2 work visas and 2 student visas. At the time of the interview 8 women were New Zealand citisens, 2 were permanent residents, one was still on a visitor visa and one was an overstayer.

Participants all lived in big cities in the North Island of New Zealand: 10 from Auckland, 1 from Wellington and 1 from Hamilton. Participants' mean age was 37 years

(range 25 - 49 years, median = 35 years). Only 3 women in this study identified English as there first language. Of the rest, Hindi was the most common first language (4 participants), followed by Punjabi (2 participants). The remaining three women identified Sinhalese, Telugu and Bangla as their respective first languages. In terms of religion 6 participants identified as Hindu, 2 identified as Sikh, 2 identified as not being religious and 1 each identified as Buddhist and Muslim. In terms of highest level of education 2 participants said they had not completed high school, 3 reported finishing high school, 1 held a diploma, 3 held a postgraduate diploma and 3 participants had a master's degree. In regards to current occupation, 6 women were unemployed although 3 of these women identified as full-time mothers. Other occupations included engineering, driving, nursing and working in sales.

Data collection

An interview was scheduled for all participants who met the inclusion criteria and wanted to take part in the study. All participants declined having an interpreter prior to the interview however 2 participants chose to bring a South Asian support person who occasionally helped with interpreting. Interviews took place in a setting chosen by the participant. At the beginning of each interview, I checked the participant's current safety, explained the aims of the study and what the interview process would entail. I went through the Consent Form (CF: Appendix C) with each participant and if they were happy to proceed, they were asked to sign the CF indicating: their agreement to participate, their confidentiality including specified limits, their consent to the interview being audio-recorded, their right to stop the interview at any time without providing a reason, their right to withdraw their results up to four weeks following the completion of their interview. Participants could also indicate if they would like to receive a summary of the study's findings on the CF. Before the interview participants also answered some structured demographic questions (Appendix D) in order to establish a context for their migration and experience of MFPV.

Participants took part in interviews lasting between 42 minutes and 3 hours and 36 minutes. Research shows that allowing participants to have greater influence over the direction of the interview can minimise the researcher's own biases (Ayres, 2008) and facilitate the development of rapport which allows for richer data (Smith, 1995). However, too little structure can also be experienced as intimidating or too ambiguous (Ayres, 2008). Consequently, semi-structured interviews (see interview schedule in Appendix E) were used, where the list of questions served as a guide rather than something to be rigidly adhered to. For instance, participants were generally instructed to describe their experiences of MFPV as a story with a beginning, middle and an end, however they were given the freedom to choose where to begin and how the story was told. Consequently, many women chose to first talk about their migration story or their experiences of the arranged marriage process; likely highlighting the importance of these contextual factors. At the same time there were two topics that all participants were asked to comment on and these were experiences and/or perspectives on help-seeking and ethnicity-matching. At times, participants were prompted by the researcher to gain a more in-depth account of their experiences and how they made sense of this (e.g. tell me more about that, what else, what was that like for you?).

Transcription

The interviews were transcribed verbatim. Four interviews were transcribed by the researcher and the rest were transcribed by a New Zealand European University approved transcriber who signed a confidentiality agreement (Appendix F). The researcher went through all transcripts that were transcribed by the University approved transcriber; especially any words or sentences that the transcriber said they struggled to understand due to accent differences and the fact that some participants did not speak English as a first language. Completed transcripts were emailed to participants who had two weeks to read through interviews and voice any inaccuracies or issues.

Data analysis

      The data was analysed using Braun and Clarke's (2006) six step guide to thematic analysis. Before describing these six steps, Braun and Clarke (2006) suggest that it is important for researchers to explicitly comment on certain decisions they made in regards to how they conducted thematic analysis which consequently dictates the nature of themes. In the current study, the 'keyness' of a theme was determined by whether it captured something important in relation to a particular research question or the broader aim of this study (Braun & Clarke, 2006). Consideration was also given to how many individuals spoke to a particular idea in the data. The data in this study was thematically analysed at a latent level due to the study's social constructionist epistemology (Burr, 2015) as well as the fact that the research was informed by the theoretical concepts of intersectionality (Crenshaw, 1991; Sokoloff, 2008), acculturation (Bhatia & Ram, 2009) and Abraham's (1995) ethno-gender theory.

      The emergent nature of qualitative research gives researchers the flexibility to shift and change throughout the process of data collection (Creswell and Tashakkori, 2007). Consequently, the current analysis was both inductive and deductive; where some themes were more strongly data driven (inductive analysis) whereas others were primarily driven by my own theoretical interests (deductive/ theoretical analysis: Braun & Clarke, 2006). Themes related to participants' experiences of help-seeking and their perspectives and/or experiences of ethnicity-matching, were analysed using a deductive approach. In other words, these themes relate to specific theoretical interests of the researcher which all participants were explicitly asked about in interviews. Themes related to participants' accounts of personal coping, identity negotiation and the arranged marriage process were identified using inductive thematic analysis. In other words, although these themes are relevant to the study's overall aim, they were formulated more in response to the data. While distinctions between data-driven and theory-driven thematic analysis have been made, Creswell and Tashakkori

(2007) emphasise the point that all data is interpreted by the researcher which is why self-reflexivity is prized within qualitative research. The current study's application of Braun and Clarke's (2006) six steps to thematic analysis will now be described in more detail.

Phase 1: Familiarising Myself with the Data

Becoming familiar with the data is the first step of thematic analysis. Braun and Clarke (2006) recommend achieving this through repeated reading in an active way as well as transcribing the data. In the current study, I familiarised myself with the data by listening to each audio recorded interview, transcribing four interviews myself and reading through all transcripts twice. During this process of familiarisation I checked the accuracy of transcripts in addition to noting down possible patterns in the data.

Phase 2: Generating Initial Codes

In phase 2, the data was then uploaded to nVivo where a list of initial codes were created based on my notes during phase 1 (Braun & Clarke, 2006). I then went through each transcript and tagged extracts related to each initial code. This was an iterative process where as previously mentioned, some codes were data-driven and others were theory-driven. Because English was a second language for many participants, I made allowances for longer extracts to ensure that the context and meaning of what was said, was adequately captured (Bryman, 2001). The final product of this phase was a comprehensive list of initial codes which I reviewed with my primary supervisor to discuss potential themes. During this phase codes were also broadly categorised into three distinct data sets: participants' accounts of the arranged marriage process, identity negotiation and help-seeking in the context of experiencing MFPV.

Phase 3: Searching for Themes

Once the comprehensive list of codes had been reviewed, the next step was to consider the relationship between codes, to see if they mapped onto broader themes and explore different levels of themes. Braun and Clarke (2006) suggest that some initial codes may form overarching themes, others may form subthemes and others may be discarded. Nodes and node trees in nVivo as well as hand-drawn mind maps, were used to organise codes into themes and subthemes within each data set. The initial themes were:

- **Patriarchy is a family affair**: Relates to the first data set on women's experiences of the arranged marriage process. Describes how women's accounts of the arranged marriage process reflect the intersection between patriarchy, collectivism and age-related power.

- **Better the devil you know**: Relates to the second data set on identity negotiation and describes women's reports of feeling trapped by MFPV initially, and what they felt contributed to this.

- **The sacrifice was not worth it**: Relates to the second data set on identity negotiation and includes the different ways that women justified seeking help, leaving their abusers or generally living as separated women.

- **Informal support-seeking**: Relates to the third data set on help-seeking. Includes how women described approaching informal supports tentatively and how they felt informal supports faced similar barriers that they faced.

- **Formal support-seeking:** Relates to the third data set on help-seeking. Includes two main ideas. Firstly, how participants felt that privilege as an intersection of various categories influenced how easy it was for them to access and/or navigate formal supports. The second idea relates to how participants felt that ethnicity-matching had pros and cons and that it was more important to be on the 'same wavelength' as a formal support person than share the same ethnicity.

Phase 4: Reviewing Themes

After identifying the initial themes, I followed Braun and Clarke's (2006) two steps for reviewing themes. The first step involved reviewing codes within a theme to make sure they were coherent. The second step involves re-reading the entire data set and coding any additional data that was missed, to ensure that themes 'accurately represent' the data. Of course, 'accurate representation' depends on the analytic approach that a researcher chooses (Braun & Clarke, 2006). A theoretical or deductive analysis guided by the researcher's analytic interests does not necessarily need to 'accurately represent' the data as a whole (Braun & Clarke, 2006). For example, the researcher did not seek to ensure that themes related to the help-seeking data set were representative of the data as a whole, given that these themes were linked to the researcher's theoretical interests which were in turn informed by existing literature (deductive or theoretical analysis). However, it should be noted that most participants contributed to the themes and subthemes related to help-seeking, and hence these were representative of the data as a whole. In contrast, the themes in this study related to identity negotiation were identified through data-driven or inductive thematic analysis; thus, it was important for me to ensure that they were representative of the data as a whole.

When reviewing themes sometimes researchers recognise that there is insufficient data supporting a candidate theme or that a candidate theme needs to be broken down or collapsed into another theme (Braun & Clarke, 2006). In the current study for example, there was insufficient data supporting 'better the devil you know' as a candidate theme because the notion that migration-related isolation contributed to women feeling like it was better to stay with their abusers was almost exclusively reported by women who joined their abusers in New Zealand following an arranged marriage. Instead 'better the devil you know' or 'it's best to stay to a known danger' which it was later renamed, was altered into a subtheme which mapped onto an overarching candidate theme of participants' descriptions of initially

feeling trapped by MFPV. 'Patriarchy is a family affair' was another theme that exclusively stemmed from the stories of the 5 women in this study who described arranged marriages. However, it was included as a theme because it was an overarching idea that appeared to capture an important cultural difference in how South Asian immigrant women may experience MFPV; which directly relates to the study's overall aim (Braun & Clarke, 2006)

Occasionally new candidate themes are identified during phase four (Braun & Clarke, 2006). 'Personal coping' is an example of this in the current study. When reviewing themes, the researcher noticed that participants had provided numerous examples of how they had coped with MFPV personally, without help-seeking or leaving. Moreover, participants seemed to use their accounts of personal coping strategies to illustrate how they survived and did not necessarily view themselves as 'passive' victims when they were not help-seeking or leaving male abusers. After reading further literature on the personal strategies South Asian immigrant women use to cope with MFPV, I decided to include it as a theme for three reasons. First, in order to compare participants' accounts of coping with past literature. Second, because of how pervasively it was documented in the data. Thirdly, because South Asian women seemingly contradicting assumptions of 'passivity' that are commonly made of them in the literature through accounts of personal coping, seemed like an important idea to capture. As such, the data set on 'help-seeking' was renamed as 'coping' in order to include women's accounts of personal coping strategy use.

Phase 5: Defining and Naming Themes

According to Braun and Clarke (2006), when defining a theme, it is important for a researcher to consider the following: 'what is important about this theme', 'why is it important' and 'what aspects of the data does it relate to'. The name of a theme or subtheme must immediately let the reader know what the theme is about in a punchy and concise way. For example, in three words 'I was trapped' captures how women initially felt in response to

their circumstances of experiencing MFPV as South Asian immigrant women. I changed the subtheme 'better the devil you know' to 'it's best to stay with a known danger in a foreign land' because the former name does not capture how participants' felt that migration-related isolation facilitated feeling trapped at a glance. Following Braun and Clarke's (2006) recommendations, I also clarified my themes by constructing a table where the scope and content of each theme were detailed in a few sentences (see Table 1).

Phase 6: Producing the Report

Once themes have been finalised, the final step of thematic analysis involves producing the final report or analysis which is outlined in the next three chapters. There are three main considerations at this stage (Braun & Clarke, 2006). Firstly, producing a concise and non-repetitive account of the narrative told by the data. Secondly, including sufficient and vivid data extracts to capture themes and sub-themes (Braun & Clarke, 2006). The selection of quotes was thus informed by a balance of trying to capture the essence of themes and sub-themes, while simultaneously attempting to ensure that all participants accounts were represented in the analysis. Finally, the analysis must go beyond mere description and produce a cohesive argument based on the study's overall aim. I attempted to achieve this by first selecting extracts that captured the essence of themes and subthemes, keeping the study's overall aim in mind while writing up the analysis, and reading and re-reading the analysis to ensure that it was concise and non-repetitive.

Table 1: Themes and subthemes

Data set 1:

Participants' experiences of the arranged marriage process.

Theme 1: Patriarchy is a family affair

Data set 2:

Negotiating identity through experiences of MFPV in the context of migration

Theme 2: I was trapped

- I did not know that what I was experiencing was domestic violence
- It's best to stay with a known danger in a foreign land
- I did not want to make things worse – especially for my children
- I liked the idea of having it all

Theme 3: The sacrifice was not worth it in the end

- South Asian women are always sacrificing and it's not right… I think like a Kiwi now
- Things kept getting worse and someone could have died
- The one thing I could not fail at was being a good mother
- They said get out now

Data set 3:

Strategies used to cope with MFPV

Theme 4: Personal strategies

- Shutting things out and contemplating suicide
- Placating
- Non-compliance
- Talking back
- Using the body

Theme 5: Seeking help from informal supports

- Testing the waters
- Helpers face the same barriers that we do

Theme 6: Seeking help from formal supports

- The system works for those who are privileged
- It's important to feel safe and understood
- Being on the 'same wavelength is more important than ethnicity matching

---

Results Overview

The results are divided into three data sets which correspond to Chapters Three to Five. Chapter Three relates to data set 1, and describes the experiences of women who reported having arranged marriages. **Patriarchy is a family affair (theme 1)** was a dominant theme from data set 1, which highlights how the intersections between patriarchy, collectivism and respect for elders within South Asian cultures, influenced the way that abuse manifested for the women in the arranged marriage process. Chapter Four presents results from data set 2, which focussed on the way in which participants negotiated identity through experiences of MFPV in the context of migration. This data set informed 2 themes. **I was trapped (theme 2)** includes various explanations and identity positions that women related to the experience of feeling trapped in the early and middle stages of MFPV. **The sacrifice was not worth it in the end (theme 3)** includes explanations and identity positions that participants' felt enabled them to leave and/or seek help for the abuse they were experiencing. Finally, Chapter Six corresponds to data set 3, which focussed on the strategies participants described using to cope with MFPV. This data set informed three themes: **personal strategies (theme 4), seeking help from informal sources of support (theme 5)** and **seeking help from formal sources of support (theme 6).** The last theme includes participants' perspectives and/or experiences of ethnicity-matching in the context of formal support services.

Chapter Four: Participants' Experiences of the Arranged Marriage Process

Nearly half the women in this study described having an arranged marriage. **Patriarchy is a family affair (theme 1)** describes the way in which three elements of South Asian cultures; patriarchy, collectivism and respect for elders, intersected in the arranged marriage process and seemed to influence how the abuse manifested for this group of participants. When reading these results it is important to remember that participants' accounts of the arranged marriage process are not necessarily reflective of all South Asian women or all arranged marriages.

Patriarchy is a Family Affair

P7 illustrates the collectivist nature of South Asian cultures when she explains how in arranged marriages, it is unnecessary for her or her fiancé to attend their own engagement ceremony, so long as representatives from each family are present. In this way individuals belong to families and families have a hierarchy that is determined by an interaction between age and gender. Consequently, when women talked about their experiences of arranged marriage negotiations, they construed patriarchy as 'a family affair', where in addition to a South Asian man holding power over a woman, his parents also had power over his prospective bride and her parents. "They have the upper hand" (P3) and "we have to respect them" (P7) are two statements which illustrate and normalise the dominant position held by husbands and in-laws in arranged marriages. Four of the five women who reported arranged marriages in this study illustrated how patriarchy is a family affair through describing an experience I call 'isolating the prey from the pack'. This involves in-laws trying to isolate women from their parents in order to coerce them into accepting a marriage proposal.

P3: Rajeev's (ex-husband) father said that I've arranged a car. He said Rajeev will take P3 and they'll go and meet. Then we'll see what to do. [...] So I felt very strange. Why they want me to be secluded? Why are they ignoring my parents?

Interviewer: So you thought that the meeting should happen with everyone, not just you and Rajeev.

P3: Yes because it was arranged marriage. It was not me and Rajeev. It was arranged marriage. But I now can see what they were trying to – because when I met him, the photograph I got did not look like him. He had a bald head and the photograph had a boy with full hair.

From a Western lens, P3's father-in-law suggesting that she meet with Rajeev alone may not seem out of the ordinary. However, P3 describes this as "strange" and links this to the fact that it violates the collectivist principles underlying an arranged marriage in South Asian cultures, through undermining the power afforded to her parents to negotiate on her behalf and protect her. Thus participants constructed the strategy of isolating a South Asian woman from her parents and family as a 'power move' which made them more vulnerable to being deceived or taken advantage of. Within this context, women's accounts of feeling coerced and disempowered as a result of MFPV can perhaps be viewed as a continuation of experiences they reported during arranged marriage negotiations. This is similarly depicted by P9's account of how her mother-in-law attempted to coerce her to marry her son when P9 was home alone.

P9: And she (future mother-in-law) was really begging my dad on the phone. It doesn't really matter about the age difference. [...] She doesn't have to work. He's earning good money and stuff. [...] And then she really wanted to come. So my dad said okay, just come and we have a talk you know? It's always good to talk face to face. [...] But my mother-in-law turned up when I was home alone. That day and my parents were actually not

at home when she arrived. And then as soon as she saw me she said I want you to be my daughter-in-law. [...] And straight away she gave me money and said I want you to - and I didn't even know what to do. I was just - and then I didn't say anything. I thought it looks weird when someone comes and really just try to - you know?

Interviewer: Was it a bit inappropriate for her to talk to you alone?

P9: Yeah it was. Because I was alone. And then I said to her – I'm not going to you know, I have to wait for my mum and dad to come.

Having multiple perpetrators of abuse; specifically mother-in-law perpetrated abuse, has been identified in past research as one way that South Asian immigrant women's experiences of MFPV differ from women in Western populations (Dasgupta, 2000). The power that P9's mother-in-law has over her, which is embodied in her account of mother-in-law perpetrated coercion and isolation, likely stems from the fact that she is the groom's mother and an older woman. This reflects intersections between collectivism, patriarchy and respect for elders in South Asian cultures. Mother-in-law perpetrated abuse was reported by half the women in this study, but was particularly common among participants who described having arranged marriages. P9's extract illustrates how her experience of mother-in-law perpetrated abuse preceded MFPV. However, for most women, mother-in-law perpetrated abuse persisted into their married life as both a unique source of abuse, as well as through encouraging or turning a blind eye to MFPV. P11 was the only woman in this study who identified her mother-in-law as a source of support. Her marriage was not arranged.

In the above extract, P9 also describes how in addition to isolating and coercing her, her mother-in-law also tried to coerce her father who initially declined the proposal but was pressured to meet with P9's mother-in-law face to face nonetheless. This illustrates how coercion and isolation are abuse tactics that women and their families were subjected to by men and their families during arranged marriage negotiations. One interesting finding in

participants' accounts of the arranged marriage process was the notion that although women believed their parents could protect them during arranged marriage negotiations; the power their parents held as elders seemed limited. There were some instances where P3's parents were able to leverage their authority as elders to protect her. For instance, when P3 felt uncomfortable about her father-in-law suggesting that she meet with Rajeev alone, she asked her parents to suggest an alternative. She said this was because she knew that she "cannot say no" to her prospective in-laws, but her parents might be able to. P3's parents were also able to call off her engagement due to growing concerns at one point. However, there was strong consensus among participants who described arranged marriages that there were limits to their parents being able to leverage their power as elders to protect them.

P3: And a few years after the engagement was called off, his (groom) mother called me up again. I told her that we need to know about the issues that weren't resolved before. She cut the phone. Then again she called me and ignored my questions. […] Whenever you start talking about that issue, they will side-line and start talking something else. […] And then 'he is coming, would you like to meet him?' I said you first talk to my parents. It's not that I'm dependent on my parents. The reason was there's something fishy going around so the more people are involved, the better. If it's me only, they'll take me for a ride. […] My parents tried asking them, what about the issues from a few years ago? They said, leave that. That is past. Let's start afresh. […] And being girl's side we cannot question beyond a point also. So we said okay. I mean we should not make him feel bad.

Here P3 constructs the involvement of her parents as a protective measure in response to coercion from her mother-in-law. However, she acknowledges that there were limitations to her parents' ability to leverage their power as elders to ask questions on her behalf and buy time. In other words, the power afforded to P3's future in-laws as a result of patriarchy appeared to be greater than the power held by her parents as a result of their age, during

arranged marriage negotiations. "We should not make him feel bad" is a comment made by P3 which illustrates that her parents probably understood that as parents of the bride they occupied a position of less power compared to P3's future husband and in-laws. Taken together participants' accounts of the arranged marriage process highlight the complex intersection between patriarchy, collectivism and respect for elders within South Asian cultures which resulted in multiple perpetrators of abuse (specifically mothers-in-law), and not just women, but also their parents, occupying a position of less power compared to the groom and his parents. Participants' accounts of the arranged marriage process also illustrates how coercion was perhaps normalised to them, even before married life.

Chapter Five: Negotiating Identity through Experiences of MFPV in the Context of Migration

At the time of the interview, all women in this study were no longer living with the men who had subjected them to MFPV. The majority described taking some action towards leaving the abusive relationship through physically separating from their abusers and/or seeking help from formal services such as police, lawyers or social services. Taking action towards leaving a male abuser transgresses South Asian norms that encourage women to be subservient wives, sacrificial mothers and keep the family together at all costs. What identity shifts did participants describe, that enabled them to achieve this? This data set looks at how participants initially represented themselves in light of **feeling trapped (theme 2)** in the early and middle stages of the abusive relationship, and how they later justified their position as a separated woman who sought help for MFPV and/or left their male abusers through deciding that **the sacrifice was not worth it in the end (theme 3).** In this sense, the current analysis highlights the identity shifts that allowed participants to reveal their 'abuse identity' through help-seeking and/or leaving their male abusers, and how this may reflect their broader sociocultural contexts. Re-negotiating ethnic and gender identity in particular, appeared to play a significant role in mobilising the women into pursuing a violence-free life; highlighting the important role of the migration context. While each subtheme reflects an identity position that justifies staying or leaving the abusive relationship, it is important to recognise that women occupied multiple and sometimes contradictory identity positions, which aligns with the social constructionist conceptualisation of identity in this study.

I was Trapped

Most women described initially feeling trapped in response to MFPV. The idea of help-seeking and/or leaving the abusive relationship either had not occurred to them as yet or

seemed too daunting a prospect. Subthemes identified in this section include four common rationales which reflect identity positions participants aligned with or distanced themselves from in order to explain what kept them trapped: 'I did not know that what I was experiencing was domestic violence', 'It's best to stay with a known danger in a foreign land', 'I did not want to make things worse – especially for my children' and 'I liked the idea of having it all'. In discussing each of these subthemes I will attempt to explore how participants' subjective experiences of entrapment may have been influenced by a complex interplay between internalised South Asian cultural norms related to gender, violence and collectivism; migration-related challenges; and MFPV itself.

I Did Not Know That What I Was Experiencing Was Domestic Violence

Many women reported that struggling to recognise MFPV, particularly psychological and sexual abuse, prolonged their experiences of entrapment and delayed help-seeking. Participants identified multiple discourses that contributed to this; such as the notion that 'abuse is when your husband hits you'. When reflecting on her experience of receiving counselling after leaving her male abuser P11 said "There are many things that I didn't realise came under domestic violence. […] Initially I thought domestic violence is when a man hits you." Similarly P3, also reported that the construction of domestic violence as physical violence prevented her from taking psychological and sexual abuse seriously. P3 explicitly situates this discourse within South Asian cultures in the next extract.

P3: I thought if a person is beating his wife that's domestic violence. That's how it is in South Asia. That's why I was unaware that whatever is happening to me is domestic violence […] I only realised after receiving counselling in New Zealand that being forced to have oral sex, banging doors and shouting is domestic violence. […] He used to force me to have oral sex. I want you to know this because oral sex is also a crime.

Interviewer: Did you know that when it was happening?

P3: Leave about crime. I didn't know anything about sex. I didn't know that him not asking my permission was a crime.

In this quote, P3 suggests that it is not just the framing of domestic violence as 'wife-beating', but also perhaps the lack of knowledge that South Asian girls and women have about sex and consent, that may make them more vulnerable to sexual abuse in particular. This lack of knowledge likely stems from the expectations placed on South Asian women to be 'pure virgins' at the time of marriage (Dasgupta, 2000; Hunjan & Towson, 2007; Kim & Hogge, 2015). The notion that sexual abuse must involve penetrative sex or the idea that a husband is entitled to have sex with his wife without her consent, are other South Asian cultural discourses that may have specifically prevented P3 from recognising forced oral sex as part of MFPV (Abraham, 1999). The notion that a wife's body is owned by her husband is further illustrated in P9's account of how her husband responded when she obtained the contraceptive pill to avoid falling pregnant from extensive sexual abuse.

P9: He said regardless if you take the tablet or not I'm still going to continue doing what I want with you. [...] He would force me to watch pornography videos and then do the acts. And then saying you don't need to cry. You are old enough. You should have learnt this.

The notion that P9 "should" be knowledgeable about sex contradicts most women's accounts of lacking knowledge which they linked to South Asian cultural expectations placed on women to be 'pure virgins' at the time of marriage. This could reflect conflicting discourses and expectations regarding women's sexuality as a result of patriarchy co-opting South Asian religions. On the one hand women are expected to be naïve and chaste, and on the other hand they are regarded as sexual temptresses (Chacko, 2003; Hunjan & Townson, 2007; Lindsey, 2014; Niaz, 2003). According to existing research these two discourses work together to justify victim-blaming and the need for men to control women.

Participants also described the idea that 'adjustment is a normal part of early married life', as another South Asian cultural discourse that prevented them from taking their partner's abusive behaviour seriously (Abraham, 2000; Ahmad-Stout et al., 2018). For instance, P4 said that even after finding out that she could call the police, she never wanted to exercise this right because "family tiffs do happen". Here she describes the discourse of 'normal adjustment' within South Asian cultures and how it was used by her parents to encourage her to stay with her husband.

P4: Me and my ex had a massive fight over the phone and I didn't want to go back to him at all. [...] But as Indian parents would expect, I came back.

Interviewer: What did your parents think about whether you should go back or not?

P4: Well they said that, usually it's the initial years that always cause a massive problem -adjustment, because they're trying to learn about you and you're trying to learn and understand them. So initial years are usually like that, and most of the women in South Asian families have gone through the same. [...] After that everything settles down. But that was the wrong perception altogether. It never settled down. Some of the families yes it does, but you know, in the end the understanding has to be from both the sides.

In this extract P4 describes how the discourse of 'normal adjustment' within South Asian cultures prolonged her experience of feeling trapped through minimising her husband's abusive behaviour. When South Asian immigrant women like P4 sought help from friends or family and were told to adjust, or when they had internalised messages that they should adjust to the abuse ("family tiffs do happen"), they often remained in abusive relationships for longer. The 'adjustment is a normal part of early married life' discourse, particularly seemed to contribute to the entrapment of participants who had arranged marriages. Within the context of an arranged marriage, the notion of adjustment may seem even more reasonable compared to a non-arranged marriage given the unfamiliarity between husband and wife.

However P4's last comment in this extract ("the understanding has to be from both sides") illustrates how in regards to the MFPV she experienced, the discourse of 'normal adjustment' masked a patriarchal agenda where P4 and other women in this study, were expected and encouraged to sacrifice more than men. In this sense, participants' experiences of the 'normal adjustment' discourse appear to be more accurately captured by the notion that 'South Asian women should be subservient to their male partners'.

In summary women constructed an identity position of 'the naïve South Asian woman' who did not recognise MFPV, and linked this to a number of discourses within South Asian cultures to explain how they felt trapped. Positioning themselves alongside these South Asian discourses also allowed women to fulfil prescribed gender role expectations of maintaining family cohesion and a favourable community image (Abraham, 2000; Chaudhuri et al., 2014; Kalivayalil, 2010) Although many women described feeling confused, uneasy and/or distressed about their experiences of psychological and sexual abuse, they remained trapped in abusive relationships until their definition of MFPV broadened and enabled them to question the status of these behaviours as 'acceptable'.

It's Best to Stay with a Known Danger in a Foreign Land

The majority of women in this study were first generation South Asian immigrants in New Zealand. These women described how they felt the isolation they experienced as a result of being new immigrants, made them more vulnerable to being trapped in an abusive relationship. Migration not only seemed to isolate them from traditional support networks in South Asia, but language, cultural barriers and unfamiliarity, particularly with formal supports in New Zealand, additionally appeared to deter or inhibit their help-seeking efforts. First generation immigrant women who joined their husbands in New Zealand after an arranged marriage (nearly half the sample), often described feeling particularly disempowered as a result of their husbands being comparatively more familiar with New

Zealand than them. These women frequently said their husbands exploited the fact that they were isolated as a result of migration to the point where they felt it was "better to stay to a known danger" as P7 put it. Here P9 describes the 'loud-speaker experience' where her male abuser and his mother isolated her by monitoring her phone calls to family in South Asia. This experience was reported by three women in this study, and exemplifies how male abusers exploited the fact that women were isolated from traditional supports in South Asia.

P9: The first night, I'm thinking I'm so nervous you know, and I actually wanted to ring my family just to say that I had arrived. But I was not allowed the phone. Never touch the phone.

Interviewer: Who told you that?

P9: The mother-in-law and him. [...] Not supposed to say hi to the neighbour, open the window, get the mail or go anywhere on my own. And I can only call to my family when they are around. So that day, when we called, they straight away put on speaker phone. [...] And sat on either side of me so I couldn't say much. And they just talking over me. Oh she's fine and she's okay and she'll really be looked after. [...] I couldn't actually say it.

P9's description of the 'loud-speaker experience' exemplifies how some participants described feeling that their abusers took advantage of the fact that they were geographically isolated from traditional support networks, and used it to prolong their entrapment. This extract also depicts how most women who arrived in New Zealand following an arranged marriage, provided examples of their abusers going to great lengths to sustain unfamiliarity through social and financial isolation. For many years P9 said she was not permitted to independently socialise, own a phone or obtain employment. She reported not knowing the number of the police when she arrived in New Zealand and her husband, a New Zealand citizen, convinced her that the police would not help her. At one point P9 said she was unsure if her husband's colleagues knew that she existed. P9's reports of feeling trapped in an

abusive relationship with a South Asian man for over a decade are hardly surprising given the extreme isolation she described experiencing.

In this way 'it's best to stay to a known danger' is a theme which links the identity position of an 'isolated new immigrant woman' to experiences of entrapment. This aligns with Kim and Hogge's (2015) research which links high levels of enculturation to delayed help-seeking among South Asian immigrant women. It also supports previous findings emphasising the significance of isolation in South Asian immigrant women's experiences of MFPV and how male abusers use migration-related isolation to instil fear in their victims/survivors (Abraham, 2000b; Kallivayalil, 2010; Somasekhar, 2016). Finally, it is important to highlight how the severe isolation reported by first generation women in this sample also appeared to result in lost social identities (disconnection from family, friends and culture of origin) or opportunities to form new social identities (e.g. through work, friendships); a factor that has been linked to women staying in relationships characterised by MFPV in research from Australia (O'Doherty et al., 2016).

I Did Not Want to Make Things Worse – Especially for my Children

Nearly all participants were mothers and talked about how motherhood had a significant bearing on their decision-making in regards to MFPV. The fear that help-seeking or leaving the abusive relationship would make things worse, especially for the children, was a common explanation given by participants to explain why they felt trapped. This fear included concern about inciting further abuse that would directly or indirectly impact the children, further control (e.g. abusers denying women's access to their children) as well as concern about potential negative material (e.g. not being able to provide for the children) and social implications (e.g. children being judged negatively for having divorced parents) for the children's future. Fear that the abuser might harm the children if they tried to leave, was more commonly reported by women who described extremely isolating circumstances (due to

immigration and MFPV) and whose experience of MFPV was perceived as life-threatening. Under these circumstances, most participants implied that staying with their abuser and keeping a close eye on their children was a better option. For instance, after giving birth P9 said she would "pretend to sleep" because she was so scared that her husband might kill her daughter. Even when her husband broke her hand, P9 said she was scared to go to the hospital because "at the end of the day if I leave Anya with him what's he going to do to her?"

Many women in this study talked about how their male abusers exploited their strong identification with their role as a mother to keep them trapped. Half the study's sample of women said their abusers threatened to not let them see their children again if they tried to leave or seek help. Here P5 describes how her role as a mother was exploited by her husband to stop her from leaving him.

P5: My husband made it very clear that if I leave him he's not going to let me take my boy. [...] He said he will hunt me down. I was scared. Not being able to see my children would make my life miserable. [...] When it got really bad I even asked my boy, 'do you want to leave your father? Because I am done with him.' He would never say yes. I was hoping he would say yes. If he said yes mum let's go once, I would have gone. But he never did.

Interviewer: So it was very much because of your son that you stayed?

P5: Yes and my husband took advantage of that. [...] He begged me for another child. I said no many times. But I gave in eventually because he promised he would be a changed person. But as soon as he made sure I'm pregnant things went from bad to worse. [..] I thought I'm in deep trouble now. How can I get out of it?

This extract illustrates how many participants reported feeling that their abusers frequently manipulated their strong identification with motherhood and associated expectations of unrelenting sacrifice within South Asian cultures (Ahmad et al., 2009:

Lawrence, 1994), to keep them trapped. P5's account of reproductive abuse, where she felt her husband impregnated her to further trap her in the relationship, is an extreme example of male abusers exploiting motherhood, which was also reported by P9.

P1 reported that her husband actually followed through with his threat to stop her from seeing her children at one point by kicking her out of the house. Even though she felt "depressed" under these extreme circumstances, P1 did not leave her husband or access formal support; concerned that doing so would jeopardise her goal of obtaining permanent residency in order to secure a better future for her children in New Zealand. This example perhaps illustrates the great lengths that some participants were willing to go to if they believed that abstaining from leaving their abusers or seeking help would benefit their children. It also highlights how abusers can perhaps more easily manipulate women's identification with expectations tied to the 'sacrificial mother' role within South Asian cultures in the context of migration-related challenges, such as having an uncertain immigration status. Concerns about harming their children's future by help-seeking or pursuing a separation extended to financial provision. This suggests that women were perhaps more vulnerable to feeling trapped as a result of the 'sacrificial mother' role, if they experienced financial abuse and/or feared being unable to financially provide for their children in the aftermath of pursuing a separation, due to socioeconomic and other migration-related barriers (i.e. language barriers, unfamiliarity and lack of educational qualifications all inhibit securing a job).

P9: And I thought okay where I'm going to go with a little child you know? With no house, where am I going to go? And financially, everything is in his name. If I have to see a lawyer - I mean I've got no money.

In this extract, P9 highlights how MFPV, the migration context and socioeconomic privilege, intersect and shape an immigrant woman's ability to seek help or leave her abuser;

especially when she has children. When P9 joined her husband in New Zealand following an arranged marriage she had not finished high school and had a limited grasp of the English language. For many years, she said her husband prevented her from working or accessing the couple's finances. P9 said he exploited her status as a new immigrant by further isolating her from her family in South Asia as well as from society in New Zealand. Even when P9's husband allowed her to work she said she did not have access to her salary or the couple's financial assets, and calls from her work phone were closely monitored. It is not surprising that women in these circumstances reported feeling concerned about being able to afford to leave their abusive relationships and/or seek help, while providing for their children.

Finally, consistent with findings from Ahmad and colleagues' research (2009), participants also reported staying in abusive relationships due to the perception that their children's well-being would be compromised by parental separation and the stigma associated with this in South Asian cultures. This explanation likely depicts strong identification with South Asian cultural norms regarding family, gender and motherhood, which deterred even women like P11, who had the financial means to leave or seek help, from doing so.

P11: If I end up leaving him, which I can. I can survive without him. But I think about my family and kids you know? I still have to go through with my daughter's marriage and all that and that will be harder if her parents are not together. My son – if the father's there of course he will behave. […] So it's not my positive thing that I think about, I think about the whole family in that way.

The notion that a woman needs to sacrifice for her children and family; that sons will "behave" if they have a father figure; and that daughters will be stigmatised for not having a father when they get married, likely reflect South Asian cultural scripts which appear to have discouraged P11 from pursuing a separation until the abuse reached a point where she grew

concerned for her children's safety. Together, these findings show that during the early and middle stages of experiencing MFPV most women thought that leaving their abuser and/or seeking help would do more harm to their children than staying. The intersection between gendered scripts within South Asian cultures, migration-related isolation, immigration status, SES and MFPV itself, in facilitating entrapment is highlighted in this analysis. Firstly, strongly identifying with the mother role and drawing on South Asian cultural discourses to define a 'good mother' as someone who tolerates MFPV for her children's sake, appeared to facilitate entrapment; especially for women who had an uncertain immigration status or low SES. Secondly, migration-related isolation contributed to women sacrificing more in the absence of support. Finally, women's accounts indicate that male abusers were aware of participants' strong identification with the mother role, and exploited their willingness to tolerate MFPV for their children.

I Liked the Idea of Having it All

Most participants alluded to the idea that within South Asian culture, a woman who fails to keep her family together has failed as a woman, a wife and a mother; even if she is a victim/ survivor of MFPV (Abraham, 2000a; Ahmad et al., 2009, Chaudhuri et al., 2014; Kalivayalil, 2010). Therefore, although participants reported staying in abusive relationships for their children, they also described staying because leaving or seeking help would involve identifying with a collective abuse identity (acknowledging victimhood); an identity position associated with shame and potential ostracism from one's family and community in their culture of origin. This is exemplified in the following extract, where P8 describes staying with her abusive husband because she was encouraged to 'save face' or maintaining a favourable family image, by her South Asian family members and friends; a responsibility assigned to women in South Asian cultures.

P8: So I hid everything from everybody really well because they (South Asian friends) were always like 'oh my God, you've got a nice house and the perfect job'. And Jay, man - he's nice as pie, believe it or not. All alcoholics are when sober. They just thought I had it all, and I liked the idea of having it all. But then I would tell my friends that he has a drinking problem, and I slapped him. They'd be like 'don't do that, just go easy on him'. Everything was always about him [....]. When I told my parents about the abuse they also told me to sort it out at first.

There are two things that can be inferred from P8's comment about liking the idea of "having it all", and her family encouraging her to keep her experience of MFPV private. First, is the notion that South Asian migrant communities value family privacy (Fanslow et al., 2010) which motivates them to 'save face' by presenting the image of a husband, wife, children, a house and a good job. While the phenomenon of 'saving face' has been linked to collectivist values within South Asian cultures, research has additionally implicated the pressure on Asian migrant communities to live up to the 'model migrant' stereotype as a factor that may feed the drive to 'save face', and consequently deny social problems like MFPV (Abraham, 2006; Merchant, 2000). A second point that can be inferred from P8's quote is the idea that women are primarily held responsible for protecting the family's image within South Asian cultures, and are therefore more likely to subjugate their personal goals for the collective (Kashima et al., 1995). This is evident in how P8's friends and family instruct *her* to "go easy on" her husband and sort out his alcoholism and abuse away from the public eye, as well as the way in which P8 herself assumes responsibility for maintaining a favourable family image (e.g. "*I* hid everything" and "*I* liked the idea of having it all"). P1 similarly suggested that even though 'saving face' is harmful to women because it sustains MFPV, South Asian women do so to live up to culturally prescribed gender roles and avoid stigma and ostracism.

P1: In our community they are always blaming the woman. No matter what the man does it's always the woman's fault.

Thus 'saving face' allowed participants to continue belonging to their families and migrant communities. Most women in this study eventually separated from their male abusers. Unfortunately, being criticised, ostracised or the subject of gossip or pity in New Zealand's South Asian community, was a commonly reported negative experience in the aftermath of pursuing separation; confirming their anticipation of loss and stigma. For instance, P1 reported having to join a Christian church after separating from her husband in order to escape being the "subject of gossip" at the temple she used to attend. P7 similarly said that the South Asian friends who encouraged her to call the police later criticised her for "going against your husband" and stopped answering her phone calls. Here P2 illustrates how 'saving face' was not only performed in order to avoid the stigmatised identity of a 'failed South Asian woman' but also to publicly align with the respected identity of a 'strong woman'; where strength is defined by drawing on sacrificial femininity within South Asian cultures. However, as P2 explains, while many women aligned themselves with the 'strong South Asian woman' identity in public, in private they experienced a lost or fractured sense of self; primarily because tolerating MFPV and being a subservient wife, conflicted with values of protection tied to their mothering role.

P2: I was in constant denial of the fact that I was trying to save a drowning man and getting drowned myself. You don't want to accept it. By that time I had put ten years into the relationship, and I had imagined my whole life ahead. […] You always think you're stronger than you are, or you don't realise when that strength is depleting. And that was my problem. I always felt like yes, I'm strong, I can take this. If I take this then he'll realise how unconditional my support is, and he'll understand. […]But you lose yourself in the process. You've given so much to the relationship that you come to a point where you can't really

recognise yourself. [...] You're almost ashamed of yourself. Like this was never meant to happen. How have you let things come to a stage where now it could potentially harm your son?

'Saving face' through denying MFPV and the notion that her male partner was abusive, likely illustrates P2's conformity to idealised South Asian femininity in public; where strength is measured by a woman's ability to sacrifice for others. However as tension built between P2's public 'strong woman' identity and her role as a mother, she described experiencing heightened shame and internal turmoil. Within this context it makes sense that in order to leave and/or seek help for MFPV, women like P2 often had to be willing to acknowledge a sense of failure as a mother and/or redefine what it means to 'fail', to 'have it all', to be a 'strong woman' and a 'good mother'.

Overall, this theme highlights how many women described feeling trapped in the early and middle stages of abusive relationships. The subthemes illustrate how the intersection between abuse tactics, migration-related isolation, immigration status, SES and the internalisation of South Asian cultural norms, appeared to shape women's experiences of entrapment. 'I did not know that what I was experiencing was domestic violence', 'I did not want to make things worse – especially for my children' and 'I liked the idea of having it all', were three explanations for entrapment that suggest strong conformity to a South Asian cultural identity including: gendered expectations of women (i.e. women should be simultaneously chaste and knowledgeable about sex, submissive to their husbands, protect the family's reputation and unrelentingly sacrificial as mothers), dominant constructions of violence as physical and sex as penetrative, and family norms (families must include a husband, wife and children). As a result of strongly identifying with these norms, participants were motivated to conceal their 'abuse identity' which within South Asian cultures is associated with shame, a sense of failure and stigma (potential negative judgement or

ostracism from one's family and community). The 'it's best to stay to a known danger in a foreign land' explanation for entrapment, particularly highlights the isolating nature of the migration context, which according to participants, was commonly exploited by male abusers to deter women from seeking help or leaving the relationship. Extreme isolation as an explanation for entrapment was particularly prominent in the narratives of first-generation immigrant women who joined their husbands in New Zealand following an arranged marriage. Finally, although women were conforming to the 'strong sacrificial South Asian woman' identity in the public eye, their narratives suggest that in private they experienced internal turmoil and a lost sense of self.

The Sacrifice Was Not Worth It in the End

The notion that separation is a gradual process was supported by participants' accounts of MFPV and aligns with previous research which has explored South Asian immigrant women's experiences of MFPV (Ahmad et al., 2009). Involving informal supports (e.g. family, friends or neighbours), formal supports (e.g. the police, lawyers or social services) and physically leaving male abusers are some actions towards separation that the women in this study described initiating. As previously mentioned, these behaviours which are an inherent part of publicly unveiling an 'abuse identity', appear to violate a host of South Asian norms related to gender and family. Most participants justified this apparent violation and mitigated the associated stigma, shame and loss, by negotiating identity positions that allowed them to say that 'the sacrifice was not worth it in the end'. Each subtheme in this section represents a nuanced version of this sentence: 'South Asian women are always sacrificing and it's not right. I think like a Kiwi now', 'Things kept getting worse and someone could have died', 'They said get out now' and 'The one thing I could not fail at was being a good mother'. In this analysis I will attempt to explore the cultural and tangible

barriers related to migration that needed to be overcome to access these various identity positions, which facilitated the pursuit of a violence-free life for women in this study.

South Asian Women are Always Sacrificing and It's Not Right... I Think Like a Kiwi Now

Re-negotiating cultural identity and gender roles was a common way that participants appeared to arrive at the conclusion that 'the sacrifice was not worth it in the end'. Women typically achieved this through criticising the notion that a 'strong South Asian woman' is someone who tolerates MFPV and by doing so, sacrifices her own well-being and desires to maintain a favourable image for her family and community. Many women took this one step further, by taking up 'Kiwi femininity' or 'the Kiwi way', as P1 illustrates in the following extract.

P1: I think Kiwi women here have more freedom in the relationship. Because Kiwi man, Kiwi woman, they both know the rules over here. The lady has more space because she also going to work. And if they want to associate friends she's going out. [...] Women are not ruled by men. [...] Then if they're not happy they are just separating. And I think it's good. [...] We (South Asians) stick according to our cultural thing. Still I like to have a nice family life. [...] When my friends going out with their family and kids, I feel like I lost this. But anyway I thought it's better to separate than stay and suffer. At least then everybody can be - not happy, but at least peaceful.

As a separated South Asian immigrant woman who reported calling the police and pursuing legal recourse in response to experiencing MFPV, P1 says that aligning with 'Kiwi femininity' enabled her to feel "not happy but at least peaceful" about her chosen course of action. P1 defines 'Kiwi women' as liberated or having "space", agency and "freedom"; three attributes which destigmatise her position as a separated, single mother. She simultaneously denounces how South Asian women are "ruled my men" and consequently rejects the notion that 'strong women' keep sacrificing and tolerating MFPV in accordance

with South Asian cultural norms; a discourse that stigmatises her position as a separated, single mother. The fact that P1 still describes herself as "not happy" and reports experiencing a sense of loss when she sees her friends going out with their families, perhaps highlights the complexity of identity negotiation; where taking up aspects of 'Kiwi' femininity did not necessarily mean forgoing South Asian norms. This extract highlights the importance of the context of migration which seemed to give participants like P1, access to new possibilities of how to be a woman and relate to men.

P11 described a similar identity shift. While still in the abusive relationship she reported thinking "he's still my husband; I can't take him to court"; a position that aligns with South Asian norms which encourage women to be subservient to their husbands. However, after obtaining a protection order and separating from her husband P11 said "I now think about my whole life like how Kiwi's think […] I did a good job (obtaining a protection order) and it was a good lesson for him". In this quote, P11 suggests that identifying with 'Kiwi femininity' and 'Kiwi culture' empowered her to stand up to her husband and navigate her position as a separated woman within a less stigmatising cultural framework. However, it is important to note that at the time of the interview, P11 was contemplating a reconciliation.

P11: Even though I'm not in love with this man, my husband. I think I would like to give him another chance as long as he proves to me he is a good person now and he's not going to hit me, or shout or scream at anyone in the house. For the children's sake and also our culture says that of course you be with one man. That's it you know? I know there's lots of Hindus that get divorced too but I believe that if you fall in love with one person that's that. Who knows though? Things might change also in the future. I don't know.

Like P1, this quote by P11 illustrates how participants could simultaneously identify as 'Kiwi' and 'South Asian'. While, adopting aspects of 'Kiwi femininity' empowered P11 to stand up to her abusive husband, she still held onto South Asian values of the sanctity of

marriage and the notion that children are better off when parents stay together. Hence the way in which participants navigated separation and how they saw themselves in light of this, seemed to closely parallel the negotiation of cultural identity and femininity.

It is important to recognise participants' decision to distance themselves from South Asian femininity and take up a more Western, individualistic, 'Kiwi' femininity, was often tied to their experiences of how South Asians and 'Kiwis' responded to their predicament. This is congruent with Ahmad and colleagues' (2013) research where South Asian immigrant women intentionally modified social networks in the aftermath of separation to avoid feeling ashamed. For instance, women like P1 and P7 described distancing themselves from South Asian feminine ideals due to experiences of being negatively judged and ostracised by South Asian friends and community members in New Zealand. Here P7 talks about how she felt ostracised by her South Asian immigrant friends after she called the police during a violent incident.

P7: She (South Asian friend) was saying [...] you shouldn't have done this. I said you are the one who told me (to call the police). [...] You gave strength to me and now you're saying that I did wrong? [...] You're not saying that he has done wrong? She said yeah maybe but he is a guy. I thought does that mean boy can do anything and girl can't do? Means she needs to suffer? That's how South Asian society is. Most of the women, especially in South Asia they keep to themselves. They sacrifice. They compromise. And that's not right. [...] That's why I keep a distance from other South Asian people. .

Here P7 suggests that distancing herself from South Asian patriarchal ideals ("boy can do anything and girl can't do? She needs to suffer") and the South Asian migrant community in New Zealand, was a response to the way in which community members ostracised her and reprimanded her for challenging her husband's authority by calling the police; despite initially encouraging her to do this. P7 and other participants' reported experiences of being

ostracised by New Zealand's South Asian migrant community for pursuing a separation, could reflect the 'model minority' stereotype which puts pressure on migrant communities to deny social problems like MFPV, as well as perhaps more rigidly hold onto values within their culture of origin as a result of minority status (Abraham, 2006). Stating that it is "not right" for women to be expected to "sacrifice" by tolerating MFPV, most likely signals an identity shift away from South Asian femininity and towards 'Kiwi' femininity. In the same way that negative judgement and ostracism from other South Asians contributed to women distancing themselves from South Asian migrant communities and South Asian feminine ideals, positive or helpful responses from 'Kiwis' also seemed to encourage women to pursue integration as a survival strategy in the aftermath of separation. P1 demonstrates this in the following extract.

P1: My South Asian friends told me that separation is the Kiwi way. That it is breaking down the family. [...] But they couldn't understand. They are outsiders. We are the ones who are suffering over here. [...] Earlier I was thinking that Kiwi people doesn't like our skin. But after this thing happen, Tina (counsellor) coming and talk to me. She's a Kiwi person. Then I was thinking no, that's wrong. [...] Because I can't go to the temple I start going to the church. And in church so many Kiwi people giving me a hug and just try to talk. [...] They are welcoming us here.

This extract powerfully exhibits how many participants alluded to feeling like more of an "outsider" in relation to their own South Asian migrant community compared to 'Kiwi' people, as a result of pursuing a separation. Non-judgemental, supportive experiences with her 'Kiwi' counsellor and church congregation, appears to have helped P1 challenge assumptions of racism and encourage her to integrate as a way of surviving isolation and stigma. Learning that domestic violence is a "broad spectrum" and not just "when your husband hits you" through counselling post-separation, is another example of how integration

through replacing South Asian definitions of MFPV with 'Kiwi' or Western definitions, appears to have enabled women like P3 to make peace with their identity as a separated woman through realising that "I was sacrificing too much".

As previously mentioned, although women seemed to adopt a more Westernised identity as a survival strategy, they often achieved this in unique and nuanced ways which did not necessarily involve completely abandoning South Asian cultures. P7 for instance, retained some South Asian friends in New Zealand, while P1 appeared to form ties with other 'Kiwis' to a greater extent, and more explicitly described taking up 'the Kiwi way'. This could reflect many things; such as the notion that P1 was less traditionally South Asian compared to P7 to begin with (i.e. P1 had a love marriage whereas P7 had an arranged marriage); the notion that P1 was comparatively more integrated at the time of separation (i.e. had lived in New Zealand for a longer time period and had teenage children in school); and finally, the idea that the need to integrate as a means to gaining support may have been stronger for P1 who had comparatively less extended family support. P10 also spoke to the complexity of cultural identity negotiation and integration when she described how she was currently trying to make sense of how she "hated" South Asian culture because she associated it with MFPV and "had not been educated about the beautiful things in my culture".

It is also important to recognise how taking up 'the Kiwi way' of pursuing separation and/or keeping the South Asian migrant community at arm's length, is a survival strategy that often seemed more accessible to socioeconomically privileged women. For instance P2, P8 and P11 were three socioeconomically privileged women who reflected on how this privilege meant that they were already more integrated in New Zealand compared to other women at the time of separation. Having a tertiary education and being employed meant they could easily find out about formal supports, had more exposure to other 'Kiwis' and 'Kiwi' culture, and had access to financial support. This seemed to allow them to access 'Kiwi' discourses of

femininity with more ease and minimise their chances of experiencing or being as detrimentally impacted by community ostracism (P11: "Just because I'm educated and here in New Zealand I have my say"). In contrast, more traditionally South Asian, socioeconomically disadvantaged women like P12 arguably encountered more barriers to embracing 'the Kiwi way' such as: language barriers, lack of tertiary education and uncertain visa status, which in turn made it harder to obtain employment, and become familiar with New Zealand culture and the supports available. Women like P12 did not appear to have the option of re-negotiating ethnic identity, and therefore seemed to be more detrimentally impacted by experiences of being ostracised by their South Asian communities. This is reflected in how P12 contemplated suicide as a result of being ostracised by the South Asian community in the aftermath of separation.

The need to belong is a fundamental human need (Baumiester & Leary, 1995). From this perspective it makes sense that separation seemed to encourage South Asian immigrant women in this study to re-think femininity and cultural identity. In other words, when the narrative of a South Asian woman who separates from her husband and is supported and accepted by her immigrant community, seems non-existent, becoming more 'Kiwi', is one way to survive.

Things Kept Getting Worse and Someone Could Have Died

Another way that the women in this study were able to arrive at the conclusion that 'the sacrifice was not worth it in the end', was through talking about how "things (the abuse) kept getting worse" (P2) and either reached or could have reached a life-threatening scenario. Women from different socioeconomic backgrounds used this reasoning and did not seem to explicitly link it to identity negotiation within the context of migration. Instead, when women cited safety concerns to justify help-seeking, leaving the abusive relationship and/or their status as a separated woman, they seemed to emphasise their shared humanity with others, or

the notion that it is human instinct to go into "flight mode" when one feels scared; as P10 put it. However, scratching beneath the surface of cultural neutrality, it seems that taking up the "I'm a human being and there is limit to my patience" (P1) discourse, may indeed involve re-negotiating cultural identity and femininity. For instance, early in her relationship, P12 said her neighbour told her that "this is New Zealand. […] We are all equal, we are human and husbands shouldn't treat their wives like that." When she heard this she thought "people in New Zealand are lucky […] I can't go back to my parents' place because they will say you're supposed to go with your husband". In this quote, P12 situates gender equality and the notion that 'women are human beings' within New Zealand's cultural context. Therefore participants emphasising their shared humanity to justify help-seeking, leaving an abuser and/or being a separated woman, most likely represents an attempt to adopt more favourable gender norms from the host country.

More than half the women in this study decided to take actionable steps towards leaving their abuser when they believed the abuse had 'escalated'. Most women defined an 'escalation' in terms of novel threats made against their lives or the lives of loved ones, significant intimidation, novel physical abuse and/or the perception that the abuse was beginning to affect their children. Participants frequently attributed escalations in MFPV to the fact that they were increasingly pushing back against the abuser's power and control. This phenomenon of South Asian women increasingly challenging their male partner's authority post-migration, may be explained by how exposure to Western cultures can result in shifting gender roles where traditional South Asian masculinity is threatened by economic stress and women acquiring more autonomy and becoming more cognizant of MFPV (Liao, 2006). Finally, these results also highlight how fear of the abuser was cited by participants as a rationale for entrapment as well as confronting MFPV. Indeed, fear of the abuser appeared to push many women in this study, to reject expectations of passivity and sacrifice within South

Asian cultures and unveil their 'abuse identity' when they believed it was 'a case of life or death'. For instance P1 said that the intensity of MFPV increased after she pushed back against her husband's power by using her holiday pay to go to South Asia, where she found out that their family business had collapsed because of his affair. This culminated in an incident where P1's husband was physically violent and made novel threats to kill her and her children. For the first time, P1 reported thinking "this is enough now; I tried to cope with it but he's just making drama". She asked her husband to leave and pursued a protection order. This example illustrates how when women perceived that the abuse had escalated to a life-threatening stage they aligned with the collective 'human being' identity which enabled them to set limits to their ability to sacrifice. Even women who were abandoned by their husbands, still used the notion that the abuse would have kept getting worse and may have led to their death, to justify their status as a separated woman. This is evident in P3 ("No point in living and begging for respect […] I have learnt till now, abuser keeps increasing the abuse and takes you for granted") and P7's narrative ("If still this continued […] he may kill me also. He may get aggressive. He can do anything to my daughter").

The One Thing I Could Not Fail At Was Being a Good Mother

Existing research (Abraham, 2006) and participants' narratives, both suggest that there are a number of ways in which South Asian women are expected to sacrifice: through protecting their children, submitting to their husbands' authority and doing whatever it takes to protect the reputation of their families and communities. A common way that participants seemed to arrive at the conclusion that 'the sacrifice was not worth it at the end', was through constructing MFPV as an experience which forced them to choose between being a sacrificial mother and being a sacrificial wife; of which most women chose the latter. This finding aligns with previous research exploring South Asian immigrant women's experiences of

MFPV (Ahmad et al., 2009; Kallivayalil, 2010; Lawrence, 1994), and Western research

exploring Australian women's experiences of MFPV (O'Doherty et al., 2016).

P1: I tried to be a good wife and mother. I sacrificed my whole life for my kids and at the end of the day if they're not happy, it's not worth it.

This quote exemplifies how many participants reported that they were willing to seek

help, leave abusive relationships and/or justify their status as a separated woman, when they

believed that the abuse was negatively impacting their children. For instance, when asked

what prompted her to call the police and obtain a protection order, P8 said "it was really

simple actually. The abuse went from me to the kids." In this way, motherhood seemed like a

culturally acceptable ticket out of the abusive relationship for South Asian women in this

project. Consequently this suggests that participants who were mothers, could renegotiate

South Asian femininity without necessarily replacing it with 'Kiwi' feminine ideals, in order

to cope with the stigma associated with challenging their male abuser's authority. Conversely

this highlights the absent narrative of a South Asian woman who leaves a male abuser for

herself, and does not have to renegotiate cultural identity to some degree.

Renegotiating South Asian femininity appeared to not only involved rejecting the

sacrificial wife role in favour of being the sacrificial mother, but also redefining what it

means to be a 'good mother'. For instance, after motherhood, P2 said she initially "stopped

arguing back" because she did not want to create a "toxic environment" for her son. However

after noticing that "the abuse was becoming worse" even without her retaliating, P2 described

redefining what it means to be a 'good mother'.

P2: What am I showing my son by not fighting back? That it's okay to be treated that way?

In her narrative, P2 said that the idea that a 'good mother' should role model self-

respect through not tolerating MFPV, is what ultimately pushed her to leave her male abuser.

It is important to recognise how when P2 uses her identity as a mother to help her decide whether to stay or leave the abusive relationship ("I could fail at everything except being a good mother"), she simultaneously resists and conforms to patriarchal and collectivist ideals that together place demands on women to sacrifice for others. For instance, justifying leaving her abuser by saying 'I was trying to be a good mother', allowed women like P2 to still see themselves as a 'good South Asian woman' and a 'good mother' while putting limitations on how much they should be expected to sacrifice. P1 illustrates this when she reflects on her decision to separate and says "I am not letting my culture down […] but I felt when it (MFPV) affected my children, it was enough". Socially and emotionally the notion of leaving the abusive relationship or seeking help to protect one's children seemed to foster a sense of resilience that helped women cope with the shame associated with negative judgement and potential ostracism from other South Asians. P7 provided a good example of this when she described responding to her South Asian friend's criticism of her pursuing a protection order by saying "You're saying I did wrong? I protected my mother and daughter. Did I do wrong?"

Using the mother role to justify leaving one's male abuser was less accessible to women like P6, who had children, but experienced multiple migration-related challenges. After joining her husband in New Zealand following an arranged marriage, P6 faced extreme social isolation (isolated from traditional supports in South Asia and supports in New Zealand), unfamiliarity with New Zealand, no tertiary education qualification, financial barriers, uncertain residence status, language and cultural barriers. P6's husband explicitly exploited these barriers which enabled him to perpetrate severe emotional, physical and sexual abuse towards her; including two forced abortions and preventing P6 from seeing her son for many years. This next extract illustrates how P6's disempowered position; a product of the intersections between her ethnicity, gender, immigration status, socioeconomic status

and the abuse itself, prevented her from being able to use her role as a mother to justify seeking help and/or leaving her husband.

P6: My husband moved to New Zealand. Later I had to join him in New Zealand and leave my son back in South Asia. I don't know where I was. I was lost because my son was not with me. [...] But my in-laws and husband said if you don't keep working and sending money you will not be able to see your son forever. [...] When my son came to New Zealand later that was cool. But I never get time to spend with him because my husband force me to work. My husband sent him back after nine month and I had no choice. It was because he thought I am poisoning my son's mind against him. But my son was seeing his father beating me up and sensing my pain. My son would say 'mama leave papa'. [...] I wish my son didn't come here.

This extract shows how P6's strong identification with her role as a mother ("I was lost because my son was not with me") was exploited by her husband and in-laws. She had little power ("I had no choice") to leverage her identity as a mother in order to seek help or leave her husband. At the time of the interview, P6 had not initiated a separation from her husband, but was living apart from him. She also did not have any contact with her son. Although most mothers in this study expressed regret about the perceived impact MFPV had on their offspring, this was particularly pronounced for women like P6, who were unable to actively navigate safety for themselves and their children. Here, P6 and her support person, detail the sociocultural factors that contributed to her powerlessness and how she creatively coped with the loss, sense of failure and regret associated with her perception of being unable to fulfil her role as a mother.

P6: I was so scared all the time. [...]My in-laws and husband make choice come to me. I have no choice. No one ever asked me what I wanted.

Support person: She didn't have any access to money because it's a joint account. […] Only one car so wherever she went she had to go with him. Language issues. Not allowed to talk to neighbours. Where is this person going to go not knowing the culture of the country?

Interviewer: Did you know English at the time?

P6: No.

Interviewer: How did you learn?

Support person: She's smart. She's very creative.

P6: I just found out now didi (respectful term for older woman), I am creative (laughing and smiling). Maybe now I just got time to learn about myself now. I am really like different person. I make clothes for children's charities. I just feel I'm making for someone's child. It's like I miss my son and doing that helps.

In this quote P6 reiterates her position of powerlessness ("I have no choice") and her support person links this to specific migration-related challenges that were exploited by P6's husband and in-laws to prevent her from leaving or seeking help. In contrast to more privileged women who were trying to regain a lost sense of self as a result of the abuse, the extent of P6's lack of privilege is conveyed when she talks about how she never had the opportunity to "learn about herself" prior to living as a separated woman. She goes on to describe how she creatively copes with the loss of being able to fulfil her role as a mother through making clothes for other women's children. The fact that she describes learning about herself through this hobby, exemplifies the centrality of motherhood to the identities of most South Asian women in this study, and how this was stifled and exploited by their male abusers. However P6's inability to use motherhood as a ticket to leave the abusive relationship highlights the importance of understanding privilege through an intersectional framework.

They Said Get Out Now

Half the women in this study said that trusted loved one's instructing them to 'get out' of the abusive relationship helped them decide that 'the sacrifice was not worth it in the end'.

P8, who experienced MFPV for many years, reported that she was initially told to stay with her husband, when she first sought help from family and friends. However as P8 explains in this next extract, the push she needed to finally leave her husband and pursue legal recourse was her parents and siblings changing their mind and encouraging her to "get out of there now" during an abusive incident.

Interviewer: Was there anything else that made you think 'actually this has got to stop now'?

P8: My mum and my dad going, 'get out of there now' because they could hear things escalating on the phone. My brother texted me saying 'leave him and get out now'.

The intersection between collectivism and patriarchy is most likely reflected in women's reports of how support from family and friends made them feel much more confident about help-seeking and/or leaving their male abusers. The notion of a collectivist sense of 'self', may have enabled participants to gain a sense of protection and power from making these decisions with their families. However, the fact that many participants described not feeling as confident about making these decisions on their own, may reflect patriarchal norms within their heritage cultures, and the context of migration which depletes immigrant women's resources. Obtaining the support of close family and friends is arguably all the more important when the decision at hand involves transgressing cultural norms; heightening a woman's vulnerability to negative judgement, ostracism and internalised shame. P3's comment about how a "person can cheat one person" but they "cannot cheat 10 people together", suggests that the concept of involving family in arranged marriage negotiations was something she saw as protective. However, women also appeared to use the

same collectivist principle when justifying the decision to leave the abusive relationship. In terms of identity, like motherhood, leaving a relationship characterised by MFPV because 'my family and friends told me the sacrifice was not worth it', allowed participants to challenge collectivist and patriarchal ideals using an approach that simultaneously supports these ideals. This likely allowed participants to hold onto the belief that they were still 'good sacrificial South Asian women'; an identity position that seemed to mitigate shame in the context of divorce and separation.

Participants in this study cited both emotional and tangible benefits when discussing how the support of family and friends made them more willing to unveil their 'abuse identity' through seeking help, leaving the abusive relationship and/or enduring the arduous separation process. Participants described emotional support as "having someone on your side when you are at your weakest point" (P2). In this way, emotional support likely helped women compensate for a lost sense of self as a result of the abuse. For instance amidst the chaos of leaving her male abuser, P10 reported that she would have returned to the abusive relationship or ended her life if she did not have a supportive friend. P2 similarly spoke about the importance of emotional support from others when she described how lucky she felt to have a mother who told her "I support you a hundred percent whatever you decide"; a friend who gave her permission to "focus on yourself" and a female police officer who reaffirmed her decision to separate. For P2, this support was particularly crucial at her "weakest moment" which came soon after she called the police. At this point she described feeling very unsure about standing up against her male abuser which she attributes to feeling disconnected from her sense of self or "instincts";

P2: I was so lucid you could swing me any way. Because at that point I'd stopped trusting my instincts.

Experiencing disconnection from oneself in the lead up to and immediate aftermath of separation was reported by many women in this study. Consequently, having trusted others acknowledge the seriousness of their experiences of MFPV and/or affirm and support their decision to leave, seemed to help participants cope with feeling disconnected from their sense of self. It also appeared to give them the strength they needed to continue pursuing a separation.

In regards to the tangible element of social support, being instructed by family and friends to 'get out now' may have had such a powerful influence on participants because it was often accompanied by assurances of tangible and financial support in the aftermath of separation. This appeared to give many women the confidence to take the first step towards separation knowing someone would be there to help look after the children, cook, clean and help pay the bills, while they attended to expensive and time-consuming tasks such as meetings with lawyers and searching for housing. For example, P9 said that after over a decade of experiencing MFPV she finally decided to call the police in response to an abusive incident because her dad had told her to do so, and assured her that he would provide tangible and financial support in the aftermath. Of course, access to this justification for leaving the abusive relationship was contingent on women having supportive family and friends, being able to overcome barriers that prevented family and friends from seeing the extent of the abuse they were experiencing (isolation), as well as barriers that deterred women from disclosing their experiences of MFPV to family and friends (e.g. cultural stigma tied to a South Asian woman who pursues a separation).

Summary

When participants reflected on their experiences of MFPV in hindsight, they described a shift from feeling trapped in the abusive relationship to deciding that the sacrifices they were making were not worth it. Women's accounts of feeling trapped in the

abusive relationship reflected a strong identification with a South Asian cultural identity and the identity position of a new immigrant. Specific discourses on violence (e.g. domestic abuse is physical, sex is penetrative) as well as gender (e.g. men are entitled to women's bodies, wives should submit to their husbands, women must keep their families together at all costs, women should sacrifice unrelentingly for their children) were implicated in women's accounts of feeling trapped. While women were trying to live up to these cultural expectations in public, many described privately experiencing a fractured or lost sense of self; particularly as tension between being a dutiful wife and sacrificial mother grew. Participants' accounts of entrapment consequently construct seeking help for MFPV, leaving one's abuser and/or generally living as a separated woman, as stigmatised behaviours that violate South Asian femininity; risking negative judgement, ostracism, a sense of loss or internalised shame. In order to perform these behaviours and unveil an abuse identity, participants had to find ways to cope with these perceived negative consequences. The women in this study seemed to achieve this through re-negotiating cultural identity and femininity in ways that allowed them to set limits to sacrificing unrelentingly. Achieving this through emphasising their role as a mother or permission/ support from family, likely depicts intersections between patriarchy and collectivism within South Asian cultures, where women were simultaneously empowered and disempowered by expectations of sacrifice. Taking up 'Kiwi' femininity, emphasising shared humanity and values of gender equality are examples of how the migration context was crucial in enabling women to mitigate stigma through re-negotiating cultural identity and femininity. What is clearly absent from this analysis, is the narrative of a South Asian immigrant woman who is able to stand up to her male abuser without having to re-negotiate her identity in some way. A social constructionist view of identity was upheld by findings that demonstrate how women could simultaneously identify as South Asian and 'Kiwi' or present an image of having it all while privately experiencing a fractured sense of

identity. Adopting an intersectional lens also sheds light on how certain identity positions were more available to some women compared to others as a result of ethnicity and gender interacting with SES variables (e.g. education level, access to finances, fluency in English), immigration status, the presence of children, availability and access to supports and MFPV itself.

Chapter Six: Strategies Used to Cope With MFPV

Consistent with past research on South Asian migrant women's experiences of MFPV, the current study's findings support the notion that the permanent decision to leave an abusive relationship is one of many coping strategies (Abraham, 2000a; Bhandari, 2018; Kanagaratnam et al., 2012). Hence the focus on leaving an abusive relationship, while perhaps the most visible coping strategy, obscures the many other creative ways in which participants tried to cope with MFPV. In accordance with Lee Bowker's (1983) three-fold typology of MFPV coping strategies, which has been used with South Asian immigrant women previously (Abraham, 2000a), participants' coping strategies could be grouped into **personal strategies (theme 4)**, **seeking help from informal supports (theme 5)** and **seeking help from formal supports (theme 6)**. This chapter will include summaries for each theme as opposed to the whole chapter.

Personal Strategies

Consistent with past findings, participants' descriptions of personal coping strategies suggest that they served a wide range of functions, but often only yielded short-term palliative benefits (Abraham, 2000a). Nevertheless, in accordance with Lempert's (1996) assertions, many women still alluded to the notion that personal coping was an essential part of the empowerment process. This was particularly true for women who were unable to leave or left after many years of experiencing abuse. Women in these circumstances did not necessarily see themselves as 'passive' recipients' of MFPV, which is exemplified by P5; a woman who was unable to leave her abusive husband.

P5: I decided to stay with him but not like that. I would just protest whatever is wrong. I have to say it's wrong. He has to know it's wrong. So this is how I was living.

"Not like that" is a phrase that P5 uses which captures how many women in this study reported being aware of the assumption of 'passivity' that is commonly made about South Asian women who are in abusive relationships. However, P5's extract depicts how not actively seeking help or trying to leave the abusive relationship was not seen as 'passive' by most women in this study. This is further illustrated by P9 when she says "Now I think I was strong. I did not argue back. I did not do anything. But I was just hanging in there." P9's quote highlights the paradox of 'passive resistance'; where many participants described either resisting MFPV in indirect ways, without directly confronting their abusers, or expressed an underlying intent to protest MFPV even though they were merely "hanging in there" or coping with its emotional consequences. The assumption that South Asian women are 'passive' and the paradox of 'passive resistance' will be explored in the analysis of participants' accounts of personal coping. I will also discuss how participants' unique experiences of their cultural contexts, migration and MFPV itself, may have intersected and shaped their execution of personal coping in terms of onset, frequency, modifications, functions and consequences. Personal coping strategies described by participants in this study include 'shutting things out and contemplating suicide', 'placating', 'non-compliance with the abuser's demands', 'talking back' and 'using the body'.

Shutting Things Out and Contemplating Suicide

Shutting things out and contemplating suicide are cognitive personal coping strategies described by participants which involve emotional suppression. It was the only strictly emotion-focussed/ avoidant coping strategy. Women usually reported using this strategy when they felt hopeless about being able to alter their circumstances. Participants' use of emotional suppression to cope with MFPV makes sense given that South Asian femininity demands that women sacrifice and prioritise the thoughts and emotions of others over their own. Achieving temporary mental peace and being able to cope with the demands of both

migration and MFPV, were described by participants as the functions of shutting things out. This is captured by P1's account of pursuing permanent residency in New Zealand for her children's future, whilst enduring MFPV. P1 described "living like a thoughtless, feeling-less person" and repeatedly used the phrase "I just keep on going." P2 similarly described learning to "build a mental barrier" in response to her partner's emotional abuse.

P2: Initially it affected me but I kind of built a barrier against that. It was like say what you want to. Just because you say it, it doesn't necessarily mean it happens, right? Now this was all pre-motherhood.

In this extract P2 highlights how women seemed to specifically shut things out in response to emotional abuse. It also suggests that shutting things out may have been easier to use in the absence of children. P2 later described how having a son made it harder to shut things out because of the idea that MFPV could be detrimentally impacting her son. This fits with South Asian femininity's emphasis on the 'sacrificial mother role'. In the next extract, P10 constructs shutting things out as a trauma-response to victimisation and suggests that it could be more heavily relied on in circumstances where South Asian immigrant women are unaware of available supports in New Zealand, or have had negative experiences of help-seeking.

P10: When South Asian women come here they don't know where to get help. Or if we try to get help we get blamed for it. That's what happened to me. I tried to get help from mental health and they said I'm crazy. Because of these things my brain just started shutting things out. Blocking them from my memory. I've got messed up records with the police as a result.

Other women similarly reported feeling that being unaware of available supports and isolated from traditional supports as a result of migration, facilitated a reliance on shutting things out. Although Abraham's (2000a) study focussed solely on the strategy of suicide, she

too found that shutting things out through suicide, was often used by South Asian women in the United States in the absence of an external support system. P10 supports this notion in the above extract where she described shutting out in response to negative experiences with help-seeking. She also points out how shutting things out was not always an intentional choice and could detrimentally impact interactions with police.

Most women eventually reported that shutting things out was exhausting and did not reduce the abuse they experienced in the long-term. P2 explains this well when she says "you always think you're stronger than you are, or you don't realise when that strength is depleting". In order to navigate her way to safety, P2 said she eventually had to forgo shutting things out and connect with uncomfortable feelings of sadness, shame and guilt associated with perceived failure as a woman and mother. Socioeconomic privilege played an important role in enabling women like P2 to connect with these uncomfortable feelings, which appeared to be a necessary part of help-seeking and/or permanently leaving the abusive relationship. Women who did not have access to their own finances and/or lacked external supports tended to shut things out for a longer period of time.

Contemplating suicide can be viewed as an extreme and tragic way of shutting things out. Of the women who contemplated suicide, most described doing this when they had reached 'rock bottom'. This was often after separating from male abusers. However, P4 contemplated suicide while still in the abusive relationship; soon after she gave birth to her second child.

P4: He started abusing me when I asked him to do the dishes. It was really quiet so that the guests couldn't hear. I went back to my room, when everybody had left. I called up my Mum and started talking to her and I was crying. He overheard me crying and came and took the phone away. I could have lost my son that day because he was about to fall out of my arms when everybody was shouting at me; his mum and father included. My kids were crying.

I wanted to call 111 for help. I wanted to go to friend's place. But nobody would allow me to do anything. I just wanted to die that day.

In the context of significant emotional abuse and severe isolation from external supports, shutting things out by contemplating suicide was the only way that P4 felt she could escape her dire circumstances. In other words when participants felt extremely disempowered as a result of MFPV, their sociocultural context and migration-related isolation, taking control of their own mind and their own life was the only control they had left.

Placating

Participants' accounts of placating the abuser often did not involve overtly challenging his power and control. Like shutting things out, it primarily appeared to serve an emotional function of achieving temporary mental peace. However, placating also had a specific problem-solving function: minimising the likelihood of an abusive outburst. In contrast to shutting things out, placating at times involved some interaction with the abuser and was therefore less avoidant. Being silent when experiencing abuse or yielding to the abuser's demands are examples of placating that are illustrated by P1 in the extract below.

P1: Sometimes he's coming very late at night, like ten o'clock. Anyway, I was waiting for him to have the dinner with him. I just put my kids to bed and nothing to do. Then I was watch TV. When he saw I am watching the TV he got really mad and scolding. Several times it happened. He's working hard and I'm watching the TV, like that. But at that time I can't do anything in the factory, because I have taken care of four kids all day, and I am waiting a few hours because I just finished the kids' things. […] And then when I heard he is coming just I quickly switch off the TV like that. Very scared, you know? Always I was thinking I shouldn't do this thing or he will scold me, use bad words or throw things. It hurt so much and also I don't want kids to hear that one.

Many participants like P1, described placating their abusers early in the relationship when they were still learning the extent to which they could safely push back. This is consistent with Abraham's (2000a) in the United States where most South Asian women placated in the early stages of the abuse. In her early married life, P1 reported learning that if her husband found her relaxing he would verbally abuse her. In order to avoid the distress of being subjected to verbal abuse and the guilt of exposing her children to this, P1 said she placated her abuser by yielding to his demands. A number of women talked about how reducing the likelihood of another abusive episode through placating had an added emotional function of allowing them to hold onto their dignity or self-worth.

Perceptions of the abuse, stressful circumstances, socioeconomic factors, the sociocultural context and the migration context intersected and appeared to influence when, how often and for how long participants placated their abusers. Women like P1 who were disadvantaged on a number of fronts, tended to placate earlier in the relationship, more frequently and for a longer time period. Factors that appeared to contributed to this pattern included strong alignment with South Asian femininity including expectations of sacrifice and maintaining family unity; being new to New Zealand and therefore more dependent on the abuser (e.g. financially or having a dependent visa status); experiencing social isolation; socioeconomic disadvantage or perceiving the abuse as life-threatening.

In contrast to P1, women like P2 and P8 were substantially more privileged. They distanced themselves from South Asian feminine norms, had lived in New Zealand for a longer time, had secure resident statuses, were socioeconomically privileged and described experiences of MFPV that were less isolating and persistently life-threatening. It is likely that these privileges enabled them to safely protest or challenge their abuser in the early stages of their relationship. Consequently, they only placated their abusers during abusive incidents or during stressful times (e.g. becoming a new mother); in order to conserve energy and

maximise safety for themselves and their children. Given that abusive incidents tended to occur later on in participants' relationships, this differs from findings from Abraham's (2000a) research where placating was identified as a first line of defence for South Asian women experiencing MFPV in the United States. For instance, during an abusive incident, P8, who was able to protest her husband's abuse throughout her married life, said that she "went submissive […] for the first two minutes in my life". During this time she recalled fearing for her life which prompted her to refrain from her usual retaliation. Instead she decided to "do whatever it takes to calm him down" and hid with her children in the garage. P2 similarly, reflected on how she stopped arguing back and instead began to placate her partner after the birth of her son. Her reasoning for this was that becoming a new mother demanded energy that she felt she was wasting by protesting her partner's abusive behaviour. P2 also said she did not want her son to witness his parents fighting. In addition to silence and conceding to the abuser's demands, P2 described how placating sometimes involved apologising to the abuser even in instances where women disagreed or did not understand what they were apologising for.

P2: But after my son was born I'd stopped arguing back because I was too exhausted and I was like what am I showing my son? What sort of toxic environment am I creating? […] It had become a cycle right? The argument would start, he would accuse me, I would try to make him understand, it wouldn't work, and it would just get more intense. And by the end of it I wanted him to calm down so and I would start apologising even though I did not know what I was apologising for and I was probably never really sorry.

Here P2 explains that she chose to placate her abuser through apologising because it was more effective at diffusing an abusive outburst than talking back. She also relates choosing to placate her partner to her circumstances as a new mother which meant that she had less energy to argue back and was concerned about the implications of her son witnessing

MFPV. When P2 says "What sort of toxic environment am *I* creating?" she assumes responsibility for being in an abusive relationship and its impact on her son. This perhaps speaks to how placating a male abuser or enduring hardship without complaint is a strategy that is consistent with the South Asian feminine ideal of women putting their children and husband before themselves.

Non-Compliance With the Abuser's Demands

Not complying with the abuser's demands was a personal coping strategy described by most women in this study. This is likely because participants could execute non-compliance in a number of ways; from ignoring to more overt refusal. These results therefore challenge the way in which coping strategies have been categorised into approach or avoidant strategies in past research (Holahan & Moos, 1987; Holahan, Valentiner & Moos, 1995). Women described non-compliance as serving both problem-solving and emotional functions; thus also challenging the dichotomy of problem-focussed vs. emotion-focussed coping (Folkman & Lazarus, 1990; Lazarus, 1993). Problem-solving functions that participants identified included gaining access to finances and support, avoiding pregnancy and maximising safety. Temporary peace, retaining a sense of self, dignity, control over one's bodies and/or explicitly communicating an attitude of resistance or protest to the abuser himself, were emotional functions described by the women in this study. Participants' comments about their intent to protest through the use of non-compliance challenges assumptions of 'passivity' that are frequently made of South Asian immigrant women experiencing MFPV (Abraham, 2000a). It also highlights how the paradox of 'passive resistance' may be a culturally appropriate form of resistance for South Asian immigrant women. This is because non-compliance through ignoring allowed women to challenge their abuser's power and control via indirect means; thus avoiding visibly transgressing gender norms. For example, by ceasing to prepare dinner for her husband P1 was able to challenge

her abuser's power without interacting with him. Taking this one step further and secretly arranging counselling for her son against her husband's wishes, is an example of how P1 described using non-compliance to obtain support without her abuser being aware.

P5's account of using non-compliance with an explicit intent to "protest" the MFPV she was experiencing, similarly challenges assumptions of 'passivity' that are made about South Asian immigrant women.

P5: He used to keep my ATM card and never let me use it. I never knew how to use it. And whenever I said why do you keep my ATM card? He'd say you don't even know how to operate the ATM card. You're so dumb. He used to call me dumb. […] So I started using ATM card in New Zealand. It was my protest against his behaviour. […] When he found out he got mad and emptied my account. Three times it happened where I tried to buy coffee for my friend and there was no money. It was humiliating. The third time I went to the bank and said I need to change my pin. That was another protest. I wanted him to know he was wrong.

In addition to practically gaining more financial independence, P5 also described using non-compliance as a way of maintaining a sense of dignity through explicitly communicating a protesting stance towards her husband's abuse. Many participants described using non-compliance to resist financial control; a coping strategy that has been highlighted as somewhat unique to South Asian immigrant women (Abraham, 2000a). Other examples include P1 asking her employer if she could receive her holiday pay directly in cash so she could use it to visit her family in South Asia, P7 using money someone had gifted her to buy her brother a wedding gift after her husband refused to let her use the joint account, and P7 explicitly telling her husband "I have the right to know how you are using my finances". P1's example illustrates how employers and systems have the potential to support women's attempts to resist MFPV.

Unfortunately while overt, confrontational, non-compliance occasionally resulted in women like P5 gaining access to finances, in some cases it led to an escalation in MFPV. Hence, for some women, performing non-compliance in this way was riskier than placating or shutting things out. For instance, when P7 demanded to know how her husband was using her salary she said he became "furious" and this made her back down. In many cases women tended to use non-compliance later on in the relationship; when they were perhaps more familiar with what they could get away with 'not doing'.

The fact that P5 never left her abuser, but described using non-compliance frequently and often in a confrontational way, exemplifies how participants who were unable to leave or stayed in the abusive relationship for a long time, did not necessarily see themselves as 'passive' recipients of MFPV. Non-compliance was also used by participants to maintain a sense of self outside of the abusive relationship and retain control over one's body. This is illustrated in the next extract where P5 describes how she resisted pressure from her husband to take antidepressant medication.

P5: He insisted that I take the depression tablet. [...] When the doctor prescribed it he used it to say I was mad. I refused the doctor because I knew if I said yes he'll force me to have it. The doctor wasn't listening to me. [...]One day I decided I have to find something to get over this depression. [...] So whenever my husband was not home I would start dancing for myself. [...] He thought I would just give up and take the medicine. I didn't. Dancing was my therapy. It helped me to start sleeping again. [...] He would even criticise my dancing sometimes. When he attacked my dancing he attacked my soul. But I said whatever I dance is none of your business. It's mine. You have no right.

Before marrying her husband P5 said she wanted to become a dancer. According to P5, her husband knew how important dancing was to her and therefore targeted her dancing as part of his abuse. In the above extract, P5 describes using non-compliance as a personal

coping strategy by resisting pressure from her husband to take antidepressants, using dance as a form of therapy instead and challenging her husband's criticism of her dancing. P5's non-compliance appeared to help her maintain a sense of self and control over her body, even though she was unable to leave her husband. This extract also illustrates how health professionals can contribute to secondary victimisation by colluding with the abuser's agenda of controlling women's body's through failing to situate a woman's mental health struggles in the context of MFPV, and empower them to make informed decisions about their problems.

Variations in the way in which participants executed non-compliance, likely speaks to how they were attuned to the power they held in light of their sociocultural and migration contexts, which informed their assessment of the risk of triggering further violence. For instance P9, a woman who endured abuse for over a decade, described using more covert, ignoring forms of non-compliance as opposed to overt refusal, because she perceived her experience of MFPV to be life-threatening (threats to kill her, sexual and physical abuse).

P9: I told the midwife that I don't want any of his family, I don't want him.

Interviewer: So you made a stand there.

P9: Yeah I said I don't want, so on the door it said no visitors except for doctors, nurses and midwife. So every time he will come he will demand the doctors. I said to my midwife if he comes I want you to be there. He would knock on the door, I won't answer. I pretend that I'm sleeping. That is the place that I felt I am going to have a good rest you know? He wanted me to come home and work straight away after giving birth. [...]And then he will try to ring me, text me. Then I don't answer the phone and just pretend that I haven't seen it. [...]If I know that he is coming I'll just go to new mum's meetings.

Here, P9 describes not complying with her husband's demands in a number of ways. None of these responses involve directly confronting her abuser because P9 believed that this

could aggravate the abuse and increase the risk of harm towards herself or the baby. Furthermore, she cites the safety of the hospital environment as a factor that empowered her to push back by ignoring and avoiding her husband. As P9 points out, protesting by ignoring her husband also enabled her to have "a good rest" even if it did not directly put an end to MFPV in the long run. In this way, covert modifications to non-compliance could sometimes be used to achieve 'temporary peace', in the same way that placating and shutting things out, did.

Talking Back

Talking back was another personal strategy that many participants reported using. The women in this study described talking back through shouting, swearing, threatening, belittling, questioning, disputing, reasoning, justifying or explaining, bargaining or begging and telling the abuser to 'stop it' or saying 'no'. Participants' use of talking back sometimes overlapped with other strategies such as non-compliance and placating; although these strategies could also be performed non-verbally, without any direct contact with the abuser. While it is beyond the scope of this study to describe all forms of talking back used by participants', a few examples will be used to comment on how the onset, type, frequency, function and consequences of talking back, could reflect women's subjective perceptions of risk and power that are informed by their sociocultural and migration contexts.

Participants' accounts of personal strategy use generally suggests that women who had a secure resident status and came from more socioeconomically privileged backgrounds (i.e. high-paying job, tertiary level of education, spoke English fluently) experienced MFPV as less isolating and less frequently life-threatening compared to their counterparts. This may have in turn, enabled them to perform personal coping strategies like talking back, in more overtly confrontational ways. More privileged women like P8 described talking back earlier

in the relationship, more frequently, in more confrontational ways and often without jeopardising their safety.

P8: I'm pretty harsh on him because I hate being lied to. [...] When we started fighting, I would really belittle him, like my mum used to with my dad. I really put him down and I'm really sorry about that now. I'd be like 'fuck you, you're putting my family down. You work in retail'. That was such a big blow to his ego and I felt like shit after I said it. He never forgot that. He was like you called me just a retail assistant. And I said well, you're so busy putting my parents down for working low-paying jobs even though they are honourable jobs. I'm just saying, what's so special about you then? [...] He's got this massive ego that he was brought up with as a high-caste Indian male. [...]He was like you don't respect me as a man. And I said, I can't fucking respect you, you fucking lied to my face. Ra ra ra. I was pretty mean to him towards the end because I was literally a woman scorned by then.

In this extract P8 describes talking back in a confrontational way through belittling, swearing and disputing her husband's demands for respect. While the act of talking back transgresses the notion that South Asian women should be submissive towards their husbands, P8's insults simultaneously reinforce traditional gender roles where men are expected to be the breadwinner. Perhaps P8's higher level of education and higher-paying job compared to her husband, was a source of power that she had over her husband, which enabled her to talk back. Throughout her relationship, P8's husband would belittle her for her low caste status compared to him. In this sense defending her parents' low paying job through talking back may have served the emotional function of upholding a sense of self-worth for P8, which according to collectivist principles within South Asian cultures, is closely tied to family honour. Unlike other participants, P8 also discussed how talking back was a learned response from her childhood. Finally, it is important to recognise how talking back in a confrontational way did not provoke an escalation in MFPV from P8's husband, which likely

speaks to P8's privileged position as a highly educated, financially secure, English-speaking New Zealand citizen, who rarely experienced MFPV as life-threatening and did not appear to be isolated to the same degree as other women in this study.

Women who were less socioeconomically privileged and/or had an uncertain visa status, often experienced MFPV as more isolating and frequently feared for their safety, which may have contributed to talking back less frequently (i.e. usually only in abusive incidents) and in less confrontational ways due to a greater perceived risk of provoking an escalation in MFPV.

P6: If I say sometimes no to sex because of pain, then he was saying he will bring burning wood and burn inside my vagina so I will stop feel the pain. So I feel I can't say no.

P6 came from a low socioeconomic background. She described not completing high school, being forced to work as a labourer by her husband, not having access to finances, not speaking any English when she arrived in New Zealand on a dependent visa status following an arranged marriage. She frequently feared for her safety as a result of MFPV. In this extract P6's attempt to talk back by 'saying no' to sex, although less confrontational than P8, incited further threats of harm from her husband. As such, women like P6, usually only talked back when they feared for their safety, often did so in less challenging ways and their attempts at talking back were more likely to provoke further violence compared to their more privileged counterparts.

Using the Body

A less common strategy that participants employed to cope with MFPV was the use of their bodies either in defence or as an offensive strategy. Body defensive strategies were far more common than offensive strategies. Like placating, their function was primarily to deescalate the abuse, however specifically through using the body. Body defensive strategies also typically responded to more acute safety concerns such as abusive incidents, which

occurred more frequently towards the end of participants' narratives of MFPV. Body defensive strategies were also more commonly reported by women who perceived their experiences of MFPV to be life-threatening.

Hiding and self-defence are two types of body defensive strategies described by participants. Hiding is illustrated by P10 when she said "I literally had to hide away at my friend's place and break up with him over text because I was scared about how he would react if I told him in person". The use of hiding in this instance, illustrates how personal coping strategies were not exclusively a first line of resistance, and could in fact be used alongside help-seeking in the final stages of the abuse. In her narrative P9 even described hiding and avoiding her ex-husband and mother-in-law post-separation – "whenever I see them I just hide somewhere else in the shop. I stop going church because his mother is going now". In this next extract, P12 illustrates how hiding was a strategy that helped women mitigate the fear and shame they felt in response to abusive tactics.

P12: Without any clothes, no bra, no underwear, he kicked me out from the house. [...] I kept banging the door and then couple drunk people, men, they were walking on there. They were drunk. So to keep myself safe there was underneath basement car-parking. [...] I just hid there. I felt cold, shame and I was crying. I stayed there few times like that.

P12 clearly states that the function of hiding was primarily to keep herself safe, not from the abuser, but from circumstances created by her male abuser (i.e. kicking her out at night without clothes) and feeling unsafe in her neighbourhood because of the intoxicated men. Both P10 and P12's account of hiding highlights how women's perceptions of community safety contributed to either getting others to help them in their efforts to hide from the abuser, or hiding away from communities that are perceived to be unsafe. As a new immigrant, who did not speak English, it is easy to perhaps see how P12 was less likely to

ask others to help her hide than P10, who had grown up in New Zealand and spoke English fluently.

The rare use of pushing or hitting back is consistent with previous findings investigating the strategies used by South Asian immigrant women experiencing MFPV (Abraham, 2000a). Pushing or hitting in self-defence was more common than lashing out offensively. P9 said she "pushed" her husband in the final abusive incident when he told her he was going to come back and "beat you up". She said it was the "first time I have ever pushed him". This happened soon after she had disclosed the abuse to her family and they had told her to phone the police. P9's account of pushing back in self-defence illustrates how it was often used towards the end of the relationship, in desperate circumstances such as abusive incidents, after participants felt empowered by family support. The fact that P9's husband responded to her pushing back physically by grabbing her hair and shoving her against the wall, illustrates how perhaps this strategy was rarely used due to the high likelihood of it leading to further physical violence. Similarly P1 reported using self-defence in the final abusive incident where she stood between her husband and son because she was worried that "my husband will punch my son". While the function of this was to protect her children, it led to further abuse from her husband – "he punch me, he kicked me from his leg".

Rejecting traditional expectations of submissiveness and challenging stereotypes of 'passivity' was perhaps even more evident in the rare instances where participants described physically lashing out in anger. P8 and P11 were two women in this study who described doing this. P11 said that she slapped the woman she thought her husband was having an affair with in front of her husband, because she was "mad" and wanted him to know that "what they were doing is wrong. […] My husband has to abide by the rules that I make because if he wants something that I don't like I still follow that". Here P11 illustrates how she physically

lashed out in anger with the intention of letting her husband know that she disapproved of his actions and required a more equal footing in the relationship. However this provoked serious threats from her husband which ultimately led to P11 calling the police and feeling depressed in the aftermath. The fact that P11 described slapping the woman her husband was having an affair with instead of her husband, may reflect how female aggression towards men is condemned in South Asian cultures. Alternatively, the way in which P11 minimises her husband's use of physical violence in the next extract, perhaps illustrates the normalisation of men being aggressive towards women in South Asian cultures.

P11: He slapped and pushed me a few times. I know that's abuse but it was just in a heated argument where he couldn't control his temper.

P8 and P11 both primarily described experiencing psychological abuse. They were not as isolated as other participants and did not persistently fear for their safety. Both P8 and P10 had secure resident statuses and came from socioeconomically privileged backgrounds where they had high paying jobs, were educated at a tertiary level and spoke English fluently. This could speak to the importance of how the intersections between women's experiences of MFPV, SES, gender, ethnicity and immigration status enabled some women to lash out in anger more easily than others.

Summary

Participants' accounts of personal coping suggest that there was considerable overlap with help-seeking. Although personal coping strategies rarely directly contributed to MFPV coming to an end, they served a wide variety of functions and were an essential part of the empowerment process as Lempert (1996) claimed. In contrast to past research which has typically categorise personal coping strategies as avoidant/ passive/ emotion-focussed or approach/ active/ problem-focussed (Holahan & Moos, 1987; Holahan, Valentiner & Moos, 1995; Lazarus, 1993; Meyer et al., 2010), the current study showed that all strategies except

for shutting out and contemplating suicide, could be executed in avoidant and approach ways, or could address the emotional consequences of MFPV as well as solve specific problems. Less privileged women who often experienced MFPV as more isolating and more frequently had safety concerns, tended to modify personal coping strategies in ways that resembled what has been defined as avoidant/ 'passive'/ emotion-focussed coping in the literature. Their more privileged counterparts seemed to be more able to execute strategies in more confrontational/ approach-based/ problem-focussed ways; perhaps because they had more power to modify their environment. Privilege in terms of SES (e.g. English fluency, access and availability of finances, education level), immigration status, which also reflects the broader sociocultural and migration context, also appeared to have influenced when participants performed certain strategies, how often and for how long. For instance, less privileged women placated their abusers earlier in the relationship and for a long time, whereas more privileged women only placated during abusive incidents which were rare and towards the end of the relationship. In this way, the current study confirms past research's emphasis on how the way in which South Asian immigrant women cope with MFPV is shaped by their sociocultural context and the migration context (Abraham, 2000a; Bhandari, 2018; Kanagaratnam et al., 2012). At the same time participants were willing to take risks which challenges assumptions of 'passivity' that are frequently made about them (Abraham, 2000a). Participants' descriptions of using personal strategies in overtly confrontational ways perhaps more explicitly demonstrates that they did not view themselves as 'passive' recipients of MFPV. However, less privileged women describing an intent to protest despite typically executing personal coping in avoidant/ emotion-focussed ways and sometimes never leaving male abusers, equally illustrates how women in this study resisted assumptions of 'passivity' that are commonly made about them.

Seeking Help from Informal Sources of Support

So far, the subtheme 'they said get out now' in data set 2, has already highlighted the integral role that informal supports appear to have played in helping participants leave their abusers and/or seek help from formal supports. Generally, findings from this study illustrate that despite assertions of apprehensiveness about disclosing MFPV, many participants did attempt to seek emotional and tangible help from informal supports, and informal supports also reached out to them. Participants' linked their apprehensiveness about informal support-seeking to fears of being judged negatively and/or being the subject of gossip, fears of burdening others or bringing shame to one's family, fears of their abusers finding out about their help-seeking efforts and becoming more violent, and migration-related isolation.

South Asian women in this study most commonly reported reaching out to parents and friends for support. Other informal supports included other family members (i.e. siblings and rarely in-laws), neighbours, employers, colleagues and members of the public. Participants' preference for informal supports over formal supports, and for South Asian informal supports specifically, is congruent with previous findings (Abraham, 2000a; Ahmad et al., 2009; Ahmad-Stout et al., 2018; Kim and Hogge, 2015). While past research has focussed more on women's experiences with different sources of informal supports, the two subthemes below elaborate more on the process of seeking or receiving help from informal supports. The first subtheme, 'testing the waters', details how participants cautiously approached informal supports and how this in turn had implications for the response they received. The second subtheme, 'it's tough on helpers too', explores the barriers that women felt informal supports faced when trying to support them.

Testing the Waters

Many women in this study first reached out to informal supports in the early to middle stages of experiencing MFPV. However, their first attempts at seeking help from others often seemed to be characterised by a cautious or indirect approach. For most women, cautiously

approaching informal supports appeared to have more to do with cultural barriers (i.e. fear of being judged, ostracised or perceived as a burden). However less privileged women also reported adopting a cautious approach because they feared an escalation in MFPV; a fear that was likely the product of experiencing MFPV as more life-threatening and isolating, in part due to encountering more migration-related barriers. 'Testing the waters' illustrates the creative way in which participants tried to balance their aforementioned fears, with their desire to gain support from others. Minimising the abuse, concealing the abuser's culpability, asking for help with the negative impacts of the abuse or the abuser's demands are all examples of how women in this study 'tested the waters'. In the following extract P3 describes how she cautiously disclosed sexual abuse to her parents soon after her honeymoon.

P3: I don't remember exact words but I tried telling my mother that we have not been able to do it (sex) very properly and my in-laws and husband, are not happy. Actually they were taunting me. [...] Gradually I started telling them (parents) more and more, because more and more pressure was coming from my in-laws and husband.

Interviewer: And so what did your parents say?

P3: They were very bothered and worried about how they were always focussing on sex. Because for my parents, marriage does not mean sex, it means a companionship and person is there for you throughout life. [...]They started telling me, okay, you follow the steps the doctor has told you in India. The doctor had told me how to go about sex because I didn't know anything about it; I was a virgin. In our culture we don't talk about sex.

When requesting her mother's help P3 appears to minimise her experience of repeated forced oral penetration and attempted penetrative rape by saying "we have not been able to do it very properly". She also seems to down-play her husband's culpability and the "taunting" from her husband and in-laws, when she tells her parents that they were "not happy with me". Instead, P3 reports taking responsibility herself, to meet her husband and in-

laws' demands, and even blames the sexual abuse on her lack of sexual knowledge and experience ("I didn't know anything about sex") which she grounds in the cultural context she was raised in ("In our culture we don't talk about sex"). P3 describes how her mother, despite being concerned, ultimately colludes with the way in which she minimises the problem, by encouraging her to adhere to medical advice and aim to meet her husband and in-laws' demands. In this scenario the support provided by P3's mother may have been limited for two reasons. Firstly, because of the minimisation involved in P3's disclosure. Secondly, because informal supports from the same cultural background were also likely influenced by the same South Asian cultural discourses which made it difficult for participants themselves to recognise and take MFPV seriously.

P1 and P9 both 'tested the waters' by asking others to help with the consequences of the abuse as opposed to the abuse itself. For instance, when P1's husband kicked her out of the house she reported asking a fellow South Asian immigrant woman if she could borrow some money to rent a flat. However, she did not tell this person about the abuse because "I don't want burden others with my problem. They have their own problems". P9, similarly concealed the abuser's culpability through seeking help for physical injuries her abuser had inflicted on her from a neighbour who happened to be a nurse. However, when asked what happened P9 said she told her neighbour she had broken her hand while gardening. P9's comment - "I knew she (neighbour) did not believe me. But I was too scared to tell the truth" illustrates how fear of inciting further violence was an added barrier to informal-support seeking for less privileged women who more frequently described fearing for their safety. In the case of P1 and P9, 'testing the waters' did appear to provide short-term palliative relief from the consequences of the abuse.

P8 talked about how she "hid everything from everyone really well" because "they just thought I had it all and I liked the idea of having it all". However P8 gradually started

telling her friends about the abuse. However, when she did, she described minimising her husband's culpability ("my husband has a drinking problem") while emphasising her own sense of responsibility ("I was pretty harsh with him and slapped him once"). P8's story illustrates how the stigma attached to a woman who fails to maintain a favourable family image within South Asian cultures (i.e. the 'women are always to blame' discourse: (Midlarsky & Venkataramani-Kothari, 2006; Somasekhar, 2016) may have contributed to her cautious approach to help-seeking as well as taking responsibility for her abuser's behaviour. Ultimately P8's friends responded by telling her to "go easy" on her abuser. P8 also reported that when she 'tested the waters' with her family, they told her "It would be really shameful if you got divorced"; thus confirming her fear of being stigmatised and blamed for seeking help for MFPV. While women's 'testing the waters' occasionally conveyed short-term palliative relief from the consequences of the abuse, it was rarely effective in terms of getting help with permanently putting an end to MFPV.

Helpers Face the Same Barriers That We Do

Participants' narratives suggest that support provision was often costly for informal supports, who frequently encountered the same cultural, abuse-related and migration-related barriers, that women reported facing themselves when help-seeking. P5's extract below, illustrates how support provision from South Asian informal sources, also appeared to be limited by the same cultural stigma that deterred participants from help-seeking and/or leaving their abusers.

P5: At some point I had to call my friends over. It was midnight and we were arguing so badly. They were listening and listening. [...] My husband made it very clear if I leave him he's not going to let me take my son. [...] My friends had to make sure that I'm not going anywhere and he's not kicking me out because we have a child.

In this extract P5 implies that she expected her South Asian friends to uphold South Asian values in the way they approached support provision; thus serving as a mechanism for social control. The specific cultural value that appears to have been upheld in this instance is the importance given to maintaining family unity for the sake of the children, irrespective of the presence of MFPV. Unfortunately, responses like this support a tolerant stance towards MFPV and kept women trapped in abusive relationships, often without addressing the abuse. In some cases, participants described how South Asian informal supports may have felt ambivalent about openly providing support due to the fear that they may be stigmatised by association.

> *P7: In South Asian society first they will be protective. Then later they will say you are wrong. My friends who initially helped me to call police afterwards they said I did wrong and started ignoring. That's why I keep distance from South Asian people. I really hate them. Because what they think is my family is fine, my husband is fine. Whatever happens to her is not our concern.*

Here P7 suggests that in the same way that she had to overcome cultural discourses that stigmatise women taking a stand against MFPV, so too did the South Asian immigrant friends she sought help from. Unfortunately, South Asian informal supports were often not willing to risk being stigmatised themselves which resulted in women like P7 deciding to "keep distance" from them. In fact, some women like P7 and P1 reported finding it easier to seek help from non-South Asian informal supports for this reason.

Participants' narratives suggest that it may have been even harder for informal supports to help women who were less privileged in terms of an interaction between socioeconomic status and migration-related barriers (e.g. women who were on a dependent or temporary visa, had no contact with traditional supports in South Asia, were new and thus unfamiliar with New Zealand, did not have access to finances, spoke limited English and/ or

held a lower education qualification). This is because the male abusers of these women frequently took advantage of these barriers to isolate them from sources of informal support. For example, after having an arranged marriage and coming to New Zealand, P12 reported feeling shocked to find out that her husband was unemployed and intoxicated on most days. P12 said her South Asian landlord had a South Asian friend who was willing to employ her illegally for below minimum wage. P12 was initially "excited" about this because it meant "at least I can work and have money and some company as well" rather than staying home and being abused. However, her husband who promised to transport her to and from work, would often fail to pick her up at night. Occasionally she would manage to arrange a ride with a friend, but often she described having to walk for hours to get home in the dark. As a result of being physically drained from walking home from work, and being raped on most nights by her husband, P12 eventually struggled to fulfil the demands of her job. Her husband also turned up to her workplace drunk and "had an argument with my boss as well". Eventually P12's boss felt that employing her was too costly and let her go.

> P12: They were trying to help me so I can work. But it doesn't mean they have to get in trouble. They were worried because I was not working legally and walking home from work late at night. […] If anything happened when I was walking home then it would be investigated and they could be in trouble so they let me go.

In this example, P12 describes how male abusers frequently isolated participants from informal supports by making it costly for informal supports to help them. It also highlights how participants with an uncertain visa status, who did not speak English or know where to go for help, were perhaps more vulnerable to exploitation from informal supports, because it was harder for them to access formal supports. P9's story similarly illustrates how male abusers exploited migration-related barriers to make it harder for informal supports to help women.

P9: My dad finally came to stay for my 21ˢᵗ birthday. My husband had to sponsor him because I couldn't. I didn't have permanent residency. […] Unfortunately when my dad came he was in the same position as me. We don't have anyone. We don't know where to go. […] My dad said he wanted to call the police but he didn't have cell phone and he don't know what number to dial. […] And he was scared to say something to my husband in case things gets worse when he goes back. Even though my dad couldn't say anything he always told him that the way you are talking it scares her. He told my husband if something happens then I (dad) will come. Even if you (husband) don't sponsor, I've got my friends.

This extract illustrates how participants felt that informal supports were often in "the same position" or faced the similar barriers that they did. This was particularly reported by women who arrived in New Zealand following an arranged marriage, without permanent residency, leaving informal supports behind in South Asia and lacking familiarity with New Zealand. Here P9 describes how her father, like her, depended on her husband to sponsor his visa, did not have access to a phone and lacked familiarity with New Zealand. As a result of experiencing these migration-related barriers P9's father was limited in his ability to support her; afraid that confronting her husband might make things worse for P9 when he returned to South Asia. Despite these fears, P9 says her father did express disapproval over the way P9 was being treated and let her husband know that he could come to New Zealand on his own if need be. However, P9 later described how obtaining a visa without her abuser was difficult for her parents. After her father made this threat her abuser isolated her even further from them, sponsoring and later cancelling their visas on multiple occasions. He was even willing to use his contacts in immigration services to block P9's brother from obtaining a visa independently so he could come to New Zealand and keep an eye on P9. In this way, women in similar circumstances reported feeling that their access to informal supports and the efficacy of informal supports was limited by migration-related challenges that were exploited

by their abusers. Nevertheless, in some circumstances informal supports were able to overcome barriers isolating them from their loved ones experiencing MFPV in New Zealand. For example, both P3 and P4 reported that family members directed them to South Asian domestic violence organisations after looking up these organisations on the internet or asking South Asian friends in New Zealand about what formal supports were available for their loved ones.

Summary

In summary, participants did describe reaching out to informal supports and vice versa. The current findings are congruent with findings from past research (Abraham, 2000a; Ahmad-Stout et al., 2018) indicating that informal supports can play a crucial role in the final stages of MFPV, in terms of helping South Asian immigrant women access formal supports and/or encouraging and helping them to leave the relationship (see 'They said get out now' subtheme in data set 2). Many participants however, also reached out to informal supports in the initial or middle stages of experiencing MFPV. This differs from previous findings, which suggest that South Asian immigrant women look to others for help, only after realising the inadequacy of personal strategies (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018; Kanagaratnam, 2012). While these earlier attempts to seek help from informal sources sometimes garnered short-term palliative benefits (e.g. finances, medical care for injuries) like personal coping, they rarely resulted in women receiving help for MFPV itself, until and unless barriers (cultural, migration-related and MFPV-related) were overcome and women were able to disclose MFPV more directly as opposed to 'testing the waters'. Approaching informal supports cautiously, by 'testing the waters' is a finding which aligns with past research that has been conducted with South Asian immigrant women (Ahmad-Stout et al., 2018; Somasekhar, 2016) and likely reflects South Asian norms that emphasise sacrificial femininity (Abraham, 2000a; Hunjan & Towson, 2007) and family privacy (Raj &

Silverman, 2002; Somasekhar, 2016). An intersectional approach to the analysis also illustrated within-group differences where participants who were more socioeconomically disadvantaged and encountered more migration-related barriers, had informal supports who also encountered these same barriers when trying to provide support. Unlike their more privileged counterparts, this group of women described cautiously approaching informal supports not only because of cultural stigma, but also because they feared an escalation in MFPV.

Seeking Help from Formal Sources of Support

Eliciting the help of formal support services was one strategy that women reported using to cope with MFPV. However, it was far less frequently used than personal strategies or informal support seeking. Formal supports that women described approaching included the police and victim's support, health professionals (doctors, nurses, midwives), lawyers, domestic violence and counselling services (mainstream and South Asian). The police and victim's support services were primarily contacted during domestic violence incidents. Lawyers and domestic violence/ counselling services were often involved in the aftermath of separation however, some women contacted domestic violence organisations when contemplating separation. Health professionals were the one group of formal supports that most women interacted with throughout their experience of MFPV suggesting that this could be a crucial place to intervene. However apart from maternal health services, participants' accounts suggest that health professionals often failed to adequately or appropriately screen for MFPV. For instance, participants said that abusers were often not asked to leave during their health appointments or they were not informed about what supports would be available in the aftermath of disclosure, and therefore refrained from disclosing MFPV. Furthermore, participants described the same indirect approach to seeking support from health professionals that they used with informal supports. For example, more often than not, they

described seeking help to avoid pregnancy (contraception, abortion) and address the negative health consequences of MFPV (injuries, sexually transmitted diseases and mental health difficulties), rather than the issue of MFPV itself.

All women in this study described interacting with formal services. Most women elicited the support of formal services when they were contemplating leaving the relationship (middle to late stages of the abuse), during an abusive incident and/ or in the aftermath of separation. The first subtheme in this section, 'the system works for those who are privileged', highlights how various forms of privilege intersected, and enabled some South Asian immigrant women to access and navigate formal services more effectively than others. 'It's important to feel safe and understood,' and 'being on the 'same wavelength is more important than ethnicity-matching', are the second and third subthemes respectively, and specifically relate to participants' reported perceptions and experiences of ethnicity-matching in formal services.

The System Works for Those Who are Privileged

P11: So the police got involved and then the victim support people came and oh my God it was phenomenal. The amount of support I never knew even existed here. […] In South Asia I know a lot of women have been through what I've been through but because I am educated and I am in New Zealand, I've got my say.

Like P11, most women in this study praised the availability of formal supports for MFPV in New Zealand; and contrasted this to the lack of support in South Asia. However most participants also described some level of difficulty in terms of accessing and/or navigating formal supports. This is indicated by P11's comment – "the amount of support I never knew existed". The fact that most women struggled to access and/or navigate formal services to some degree could speak to common aspects of their experience that are not reported by women from New Zealand's general population (Fanslow & Robinson, 2010),

such as unfamiliarity with formal supports in New Zealand, financial concerns when considering leaving or staying (due to migration and MFPV) and South Asian cultural discourses that discourage formal support-seeking through emphasising a woman's responsibility to maintain family privacy. P11's attributes her delayed access of formal supports for MFPV to her unfamiliarity with formal services in New Zealand (a product of migration) and systemic failure to account for this. She sights her education level (a socioeconomic variable) as a factor that helped her overcome these barriers. In addition to her high level of education however, P11 may have also been able to successfully call the police and obtain legal and victim support in her first attempt, because she could speak English fluently, had worked in New Zealand (i.e. allowing her to become familiar with the number for the police and gain financial capital) and was not afraid of being deported as a permanent resident.

Generally speaking, participants who had a higher level of acculturation (i.e. encountered less migration-related barriers) and were more socioeconomically privileged tended to experience MFPV as less isolating and less frequently life threatening. This in turn appeared to allow them to access and/ or navigate formal supports more easily and effectively. P8 was perhaps the most acculturated and socioeconomically privileged woman in this study. She was a New Zealand citisen who had grown up in New Zealand, completed tertiary education, spoke English fluently and had the highest paying job. In the following extract she reflects on how she felt socioeconomic privilege in particular, enabled her to access and navigate formal supports with ease.

Interviewer: How was going through the court process? Like obviously it worked out in your favour.

P8: It did. But I do wonder how it works out for other people 'cause I had money and I could get a really good lawyer who got me a parenting order, house order, child safety

order, every order I wanted overnight. I found a lawyer within a week. […] I called knowing I could afford a lawyer and just get on with it. I had the initial capital to get into the legal system. How the hell do other women do it who don't have money? That scares me.

P8 clearly felt that accessing formal supports for MFPV was less stressful for her because of her financial privilege. There was a stark contrast between P8's experiences of formal support services and other women's experiences; especially women like P3, P9 and P12 who lacked access to financial capital, had an uncertain or dependent visa status and/or did not speak English fluently. These women reported delayed access to formal supports, the need for multiple attempts or cycling through multiple professionals as a result of lack of finances, feeling misunderstood by professionals and/or experiences of coercion. For example, in this next extract P12 talks about how she called the police multiple times during abusive incidents; however, her help-seeking efforts were limited by her lack of education, inability to communicate in English and the police's failure to account for this.

P12: I couldn't understand English. No proper education. […] I called police more than once but I wasn't know how to explain to police officer. So they keep him just one, two nights and then he come back. I had to make action to show them – he do this (strangling gesturing) to me.

Interviewer: Did they give you options other than –

P12: Probably they try to explain options but I couldn't understand. […] I needed an interpreter. I think if someone don't understand English police shouldn't take that the light way. […] Only later I got lucky because they got a South Asian victim support lady and I was able to explain. Then I got protection order and he went to jail for longer time.

This extract clearly illustrates how P12 felt that police failure to cater to the fact that she could not speak English meant that her experience of eliciting their support was much harder, took longer and to a certain extent relied on luck. P9 similarly described herself as

having a limited grasp of English and lacking financial capital. Although P9 had become a permanent resident at the time of separation she did not qualify for legal aid because she technically shared assets with her husband; even though she reported having no access to these assets. Here she explains how she felt "stuck", cycled through three lawyers and experienced coercion when seeking formal support. She attributes this to a combination of her unfamiliarity with the system and lack of finances, as well as the notion that the system itself is flawed.

P9: The second lawyer said it was too much work. The third lawyer was useless. Honestly it's such an uphill battle because they all just want money and my finances were limited. [...]Because of my old lawyer's bad advice I am stuck here forever. [...] I was pressured ten minutes before the hearing to sign an undertaking. [...] I said I'm not going to and my lawyer walked out, slammed the door and said I'm not helping you at all. [...] She said this is it. If the judge asks you and you can't prove anything your ex-husband will get custody. I didn't want to lose my daughter so I agreed even though I was not fully understanding. But mind you when I told this to the police they said her advice was wrong.

This extract clearly illustrates how P9's "uphill battle" with the system could be a product of an interaction between migration-related challenges/low level of acculturation (e.g. unfamiliarity and language barriers), socioeconomic disadvantage (e.g. lack of finances, low level of education) and systemic failure to understand and address these challenges. This consequently appears to have resulted in less privileged women like P9 experiencing New Zealand's legal system as too complex, arduous, expensive and coercive, and consequently struggling to obtain justice. Additionally, P9 points out how poor systemic integration- as evidenced by police and lawyers saying different things- exacerbated how she felt "stuck". P3 also reported experiencing this this. She said that her first case worker from a South Asian domestic violence organisation advised her not to pursue legal recourse because "your case is

psychological and sexual (abuse). You have no proof. The legal system will favour the abuser". However, her second case worker said "that is not the case and you should go to court". Both P3 and P9's experiences of conflicting advice and coercion may speak to a bigger problem, whereby professionals may have internalised a culture of victim-blaming within New Zealand's legal system, where the burden of proof falls to victims/survivors and is not easily established, especially in regards to psychological and sexual abuse. Other women in this study, similarly reported pressure from lawyers to sign a domestic violence undertaking, which is not legally binding like a protection order. However, P2 appeared to be less vulnerable to this pressure compared to P9.

P2: There were so many things to do. I knew I had a bit of a battle ahead of me and I needed to be strong. [...] When you are going through the courts it's so complicated and you get to a point where you think I should have never started this. It's not worth it. [...] Because you are running out of money and stressed and you have to look after your child and his lawyer was trying to make things hard. [...] They charged me full price because I don't qualify for legal aid. [...] It could have probably been a lot easier. [...] I'm at the end of things but it took a lot of effort and initiative on my part. My lawyer wanted me to sign an undertaking instead of a protection order which is pretty much a protection order that is not legally binding. But I did my own research and insisted on the protection order.

Comparing P9 and P2's experiences of being pressured to sign a domestic violence undertaking illustrates how socioeconomic status and acculturation level shaped participants' power/ vulnerability when interacting with lawyers. Although P2 and P9 both struggled financially, P2 faced less migration-related challenges as a woman who was comparatively more socioeconomically privileged (higher education level, access to finances), more acculturated (i.e. spoke English fluently, was a permanent resident, worked in New Zealand and was aware of existing formal supports), and was not as afraid of her abuser because her

experience of MFPV was less isolating and less frequently life-threatening. This enabled P2 to obtain one good lawyer as opposed to cycling through three. While both women were pressured into signing undertakings, P2 may have felt less vulnerable to this pressure because her education level and fluency in English allowed her to "do my own research" and insist on having a protection order.

In summary, the majority of participants experienced accessing and navigating formal supports as an 'uphill battle'. Participants highlighted a number of systemic issues that may underlie this. While most women reported an 'uphill battle' with formal supports, the extent of this incline varied greatly and seemed to depend on socioeconomic status and acculturation level. Women from lower socioeconomic backgrounds who were less acculturated often accessed formal supports later, had to make multiple attempts and cycle through multiple professionals due to the barriers they faced. Many of these women shared the uncertainty expressed by P3 when she said "I don't know if justice will happen for me in this country". Hence while MFPV does not discriminate, participants' accounts suggest that formal services in New Zealand do not adequately cater to all women equally.

It's Important to Feel Safe and Understood

Over half the women in this study reported experiences of ethnicity-matching; mostly within the context of being supported by a South Asian domestic violence organisation. However, all participants' opinions on ethnicity-matching were elicited and are included in this analysis irrespective of reported first-hand experience. When asked about ethnicity-matching in formal services participants stressed the importance of feeling safe and understood. Overcoming language and cultural barriers were perceived benefits of ethnicity-matching that participants felt helped/ would help them to feel safer and more understood compared to if they were matched with a professional from a different ethnic background. This point was particularly emphasised by participants who arrived in New Zealand

following an arranged marriage. These women more frequently sought help from South Asian domestic violence organisations and encountered/ feared encountering language and cultural barriers with non-matched professionals in mainstream formal services; a point which is articulated by P3 in the extract below.

P3: I had requested a South Asian case worker. Someone who speaks in Hindi so that I am able to convey the things.

Interviewer: So the language was the main reason for that?

P3: And maybe ethnicity also because cultural background makes a difference. I know that in New Zealand living with partners, having children, and abandoning is not a big issue. [...] Like if I tell the police here that he has abandoned me. Police won't take note of it. Maybe they will, I don't know? Because here, abandoning is seen as wrong morally, but not legally. But in India it is legally also wrong because it is common nowadays with foreign guys. They marry in South Asia, then bring their brides to a foreign land and abandon them.

Here P3 describes how she felt that having a South Asian professional enabled her to overcome language and cultural barriers that she would have experienced with a non-ethnically matched professional/ mainstream service. Having a support person grasp the significance of spousal abandonment within South Asian cultures was particularly important for P3; something she felt would be taken less seriously by a non-South Asian professional. P11 and P2 could speak English fluently and sought counselling from mainstream organisations. Both women however, reported appreciating being matched with a South Asian domestic violence counsellor who understood their cultural background and used culturally-relevant metaphors; even though they both said they would also be open to a non-ethnically matched professional. This highlights how in terms of feeling understood, ethnicity-matching may have been perceived as more essential for participants who faced

language barriers, although cultural understanding was also a valued aspect of ethnicity-matching.

Some women in this study described feeling that ethnicity-matching/ seeking help from a South Asian domestic violence organisation would make them feel more unsafe and misunderstood. Participants linked this to concerns about ethnically-matched professionals breaching their confidentiality, perpetuating culturally-mediated blame, lacking adequate knowledge and being uncaring and/or exploitative. Each of these concerns was reported by at least one woman in this study. In the next extract, P4 describes how she felt unsafe when her confidentiality was breached by an ethnically-matched professional working for a South Asian domestic violence organisation.

P4: The person in that organisation, she actually knows my mother-in-law. She promised me confidentiality but I found out that my confidentiality wasn't really there. Anything I ever told them, my ex-husband was using some of those things in the conversation that we were having. […] I wanted to complain but I couldn't because it's not a registered organisation.

In the context of MFPV, formal services breaching confidentiality can have detrimental consequences ranging from exacerbating pre-existing trust issues that stem from MFPV itself, inhibiting future help-seeking and jeopardising a woman's safety; all of which were reported by P4. Some women, like P9, believed working with a professional who was from South Asia, but a different country to them, could circumvent their fear of a confidentiality breach. Perhaps this illustrates the nuances of ethnicity-matching and heterogeneity within the South Asian community.

Given that seeking help for MFPV can require a South Asian woman to transgress patriarchal cultural norms that forbid her from challenging her husband's authority, it is unsurprising that many women expressed fears around being subjected to these victim-

blaming discourses if paired with an ethnically-matched professional. P4 and P2 both described experiences of culturally-mediated blame from ethnically-matched professionals in South Asian domestic violence organisations.

P2: Years back I had called a South Asian domestic violence organisation. I must have gone through a bad phase, and I said I want to break up with this guy. They said no, we will first try to help you reconcile. [...]I did not like the tone of the South Asian person at the other end.

Interviewer: What sort of tone did they have?

P2: Very South Asian. Like 'you don't have to break up; we'll talk to him; let's try and work it out'. And I'm like okay they're not going to understand me. I haven't even told them the whole story. If they come to know that I had a child without marriage they'll definitely think something's wrong with me. Although I'm very clear of conscience. [...] So I shunned it off and the abuse carried on for many, many years.

Here P2 describes how she felt unsafe and misunderstood, as a result of having an ethnically-matched professional from a South Asian domestic violence organisation respond to her request for help by promoting the South Asian value of 'keeping the family together'. She anticipated further negative judgement as a result of this interaction because she identified as an "un-Indian" woman who had already transgressed South Asian norms by having a child out of wedlock. P2's reported experiences of ethnicity-matching appears to have resulted in iatrogenic harm, because it contributed to her tolerating MFPV and avoiding help-seeking for many years. P4, similarly described feeling judged when relaying her experience of MFPV to an ethnically-matched professional from a South Asian domestic violence organisation.

P4: It was like experiencing the abuse all over again. […] My counsellor would shut me down for expressing my opinion. Like if I said I did this because my husband was being abusive, she would say 'you shouldn't have. How could you do that to your husband?'

In order to access formal supports, South Asian women like P4 described having to overcome their own internalisation of South Asian cultural discourses that urge them to tolerate MFPV and maintain family privacy. Hence it makes sense that encountering these culturally-mediated discourses of blame through interactions with ethnically-matched professionals was something participants feared and often experienced as re-traumatising.

Participants also expressed concern about ethnicity-matching being unsafe due to the perception that South Asian formal services lack adequate knowledge. Two participants felt that the South Asian domestic violence organisations they interacted with did not have sufficient knowledge to help them with immigration issues.

P3: Now I'm facing immigration problems and they might not be able to help me. I think maybe they themselves don't have the knowledge because when I first saw them if they knew that we need at least two professionals to say I have experienced domestic violence, and all the declarations required for immigration, I could have done it then.

Here P3 explains how she felt that ethnically-matched professionals from the South Asian domestic violence organisation she worked with, did not give her all the immigration information she required when she first approached them. P3 and P12 both questioned the point of South Asian domestic violence organisations existing if they could not adequately assist with culturally specific issues like immigration. In this way, perceptions and experiences of ethnically-matched professionals from South Asian organisations lacking adequate knowledge, did not make participants feel like they were in safe hands.

Finally, half the women in this study linked their views of ethnicity-matching as unsafe to perceptions or experiences of South Asian domestic violence organisations as not

genuinely caring and/or being exploitative. For instance, both P9 and P12 reported that they were served "rotten fruit" (P9) and simultaneously observed staff taking home donations of fresh fruit, while staying at a South Asian domestic violence shelter. Additionally, P9 expressed feeling that the South Asian organisation she interacted with didn't care.

P9: They just took me as if I was begging for help. Like they were not very helpful. They were not very kind. They were treating me like I am wasting their time.

These examples illustrate how some women reported experiencing ethnically-matched professionals as exploitative or at least not genuinely caring. P4 explicitly linked the poor treatment she received from a South Asian domestic violence organisation to broader systemic issues.

P4: I found that most of the South Asian organisations are here only to make money from your cases. […] These organisations have just come up because they get a lot of funding from the government. So we're just another case number. […] They're not really helping us in any way. There's no right guidance, they don't even know how the system works.

In this extract, P4 identifies a number of systemic issues and links them to her negative experience of ethnicity-matching in South Asian domestic violence organisations. Firstly, P4 identifies a potential 'profit motive', which she links to her experience of feeling like the care that was provided by the South Asian domestic violence organisation she approached, was exploitative and ingenuine ("we're just another case number"). Secondly, P4's comment about how South Asian domestic violence organisations "don't even know how the system works" highlights the issue of poor systemic integration. In her narrative, P4 explicitly linked the issue of poor systemic integration to the need for independent reviews. P4's comment in a previous extract, where she talks about how she wanted to complain about a South Asian domestic violence organisation, but could not because they were unregistered, also perhaps highlights the need for independent reviews to minimise harm.

Together these findings emphasise how feeling safe and understood were important to participants when help-seeking from formal services. Overcoming cultural and language barriers were aspects of ethnicity-matching that participants felt enhanced safety and understanding. However, when ethnicity-matching was associated with concerns/ actual experiences of confidentiality breaches, culturally-mediated blame, a lack of adequate knowledge and/or lack of genuine care and/or exploitation, participants described feeling unsafe and misunderstood. These results are congruent with Sawrikar's (2013) research which has identified both benefits and drawbacks to ethnicity-matching and suggests that the benefits can only be maximised if the drawbacks are mitigated. They are even more troubling given that two participants in this study said that they were sent to South Asian domestic violence organisations without being asked if they had a preference.

Being on the 'Same Wavelength' is More Important Than Ethnicity-Matching

When participants were asked about their thoughts and experiences in regards to ethnicity-matching, a dominant theme that emerged is the idea that, apart from language barriers, having a professional who is on 'the same wavelength' is more important than having someone who is from the same ethnic background. Being on the 'same wavelength' was often defined in terms of sharing similar values or navigating between one's culture of origin and the culture of the host country in similar ways. This suggests that perhaps acculturation-matching was more valuable to participants than ethnicity-matching. For P3, ethnicity-matching was necessary in order for her to feel that she was on the 'same wavelength' as her helping professional. She related this to how having an ethnically-matched professional understand the significance of spousal abandonment in South Asian cultures was important to her. However, for other women like P2, assuming that ethnicity-matching equated to 'being on the same wavelength' was a significant oversimplification which obscured the important nuances of how she made sense of her cultural identity.

Interviewer: I guess I'm kind of curious about the importance of culture when someone's providing you with support.

P2: It's a bit of a double edged sword, right? […] Initially I did not want Firoza (P2's Indian counsellor). I did not want an Indian judging my decisions; questioning me about why I had a child without marriage; how I'd lived with a man when this is not what we do in South Asian culture. I do not want that sort of judgement because that is just not me. So I was always afraid of having cultural specific people come with preconceived notions and give me advice that would affect me negatively or put me on the back foot. Luckily Firoza was great. I had a good experience with her because we had some common ground in the fact that we both were from the same city, we both had the same sort of questions and we rebelled about the same sort of things growing up as young teenage girls. So we already had that, South Asian society is crap kind of (laugh); not always but mostly. […] So she was on the same level as me and it was great. So it's about whether that person matches your wavelength. It's not necessarily about ethnicity at all.

In her narrative, P2 repeatedly described herself as "un-Indian"; sighting having a baby out of wedlock and pre-marital cohabitation as examples of this. Here she explains how her perception of being "un-Indian" made her apprehensive about ethnicity-matching. After already encountering negative judgement from South Asian domestic violence organisations, P2 later described approaching a mainstream service where she was matched with a South Asian woman named Firoza. P2 was able to overcome her initial hesitation after establishing that Firoza had similar values and a similar way of navigating cultural identity and femininity through migration (acculturation). P2's account of her interactions with an Asian cop soon after she had separated with her husband, also highlights the importance of being on the same wavelength.

P2: But I remember telling him (police officer) can somebody call up my ex's father? Because his father has been calling me up and asking for details. Initially he told me harshly, why do you have to talk to him? Don't answer the calls. Like a little rude. I was like no, you don't understand this is a South Asian culture thing. I can't be rude to an older person. He was a Chinese cop. After that he immediately backtracked and was like yes I understand. He softened and said don't worry about talking to his dad. You look after your son and yourself and let us take care of that. He was really good after that.

Although P2 reported fears of being misunderstood by someone from the same ethnic background, the above extract illustrates how she also felt misunderstood by a policeman whom she thought was from a different cultural background to her. From P2's perspective, the policeman not understanding the importance of respecting elders within South Asian cultures, resulted in her feeling like her request was met with a "harsh" and "rude" response. However after explaining things a bit more, P2 was able to get the police officer to be on the same wavelength as her in terms of how she wished to approach her father-in-law. This highlights how 'being on the same wavelength' as a formal support person did not always mean sharing similar cultural values or ways of negotiating cultural identity. Professionals from different ethnic backgrounds were still perceived as 'being on the same wavelength' if they understood elements of a woman's culture of origin that were important to them. P2's extract also perhaps suggests that misunderstandings could be rectified if professionals were willing to listen to participants and understand where they were coming from.

Summary

The 'same wavelength' discourse reflects the complex and diverse ways in which participants made sense of their cultural identity. The results in this section highlight how formal services' prioritisation of ethnicity-matching as a way of ensuring that participants felt safe and understood may oversimplify this and potentially cause harm. Overall intersectional

and acculturation theory were able to shed light on how participants experienced formal services in different ways. These theories also highlight the many unhelpful and potentially harmful assumptions of homogeneity that formal services made about participants which include: the assumption that all women were integrated and wealthy enough to access and/or navigate formal services, and that cultural safety and understanding would be achieved for all women through ethnicity-matching.

Chapter Seven: Discussion

This study aimed to explore South Asian immigrant women's experiences of MFPV in New Zealand, and specifically comment on whether they have any special needs. I was particularly interested in participants' descriptions of identity negotiation, coping, navigating New Zealand's formal services and perceptions/ experiences of ethnicity-matching within this setting. These particular areas will be explored in-depth in subsequent sections of this discussion. First however, I will attempt to situate the current study's findings within the broader literature on MFPV that has been conducted with mainstream populations in Western countries such as Canada, the United States, Australia and New Zealand. In doing so, I hope to summarise similarities, differences and within-group differences as a starting point to identifying any special needs participants may have.

While there were some similarities between participants' accounts of MFPV and the literature documenting MFPV in mainstream Western populations, there were also clear points of difference and associated special needs. The latter point about difference, has consistently been emphasised in prior studies investigating South Asian immigrant women's experiences of MFPV (Abraham, 2000a; Finfgeld-Connett & Johnson, 2013; Merchant, 2000; Somasekhar, 2016) which has emphasised grounding the experiences of this group of

women in the context of South Asian cultural mores and the experience of being an immigrant (Abraham, 2000; Finfgeld-Connett & Johnson, 2013; Somasekhar, 2016). One example of a finding from the current study that has also been identified in mainstream Western literature, is the notion that the mothering role has a significant impact on women's decision-making in regards to the abuse (O'Doherty et al., 2016). However, even this finding, is better understood in light of South Asian gender norms where a woman is expected to put the needs of her community, husband and children above her own (Abraham, 2000; Ahmad et al., 2009, Chaudhuri et al., 2014; Kalivayalil, 2010; Ahmed, Mohan, & Bhugra, 2007). Two ways that participants' experiences of MFPV differed from research exploring MFPV in mainstream Western populations, includes the unique co-occurrence of mother-in-law perpetrated abuse alongside MFPV, and the emphasis on informal support as a factor that powerfully enabled participants to challenge the power and control of their abusers. These two differences likely reflect the intersection between collectivism and patriarchy within South Asian cultures. An example of a point of difference that specifically relates to the migration context includes participants' descriptions of their male abusers indirectly benefiting from or explicitly exploiting the way in which migration isolated the women from support networks in South Asia and available supports in New Zealand.

The current study also highlighted extensive within-group variation in terms of what MFPV looked like, how participants coped with it, their ability to access and successfully navigate formal services and their perspectives/ experiences of ethnicity-matching. These within-group differences illustrate how concepts like intersectionality and acculturation may provide important insights when seeking to identify, understand and respond to diversity in South Asian immigrant women's experiences of MPFV in New Zealand. While prior research exploring MFPV in South Asian (Abraham, 2000a; Merchant, 2000) and other immigrant communities (Simon-Kumar, 2019; Sokoloff & Dupont, 2005) has acknowledged

within-group differences, these studies have emphasised the intersection between gender and ethnicity above other intersections. South Asian immigrant women's reported experiences of MFPV in the context of New Zealand, generally supports Abraham's (1995) ethno-gender theory. However, acculturation and intersections with other variables such as SES and immigration status, are perhaps emphasised to a greater extent. The in-depth exploration of within-group differences in this study, especially drawing on the perspectives of victims/survivors themselves (as opposed to key informants), is a novel contribution to the literature.

Liao (2006) suggests that there are two common pitfalls when researchers or ethnic-specific organisations are trying to highlight points of difference in immigrant women's experiences of MFPV. Firstly, there is the risk of homogenising immigrant women's experiences of MFPV. Secondly, there is the risk of negatively stereotyping immigrant communities by constructing violence as an inherent part of their culture. While the current study has illustrated how South Asian cultural mores and the context of immigration may have mediated and shaped participants' experiences of MFPV, the author wishes to emphasise the point that MFPV is not inherently South Asian, nor caused by migration. Liao (2006) and Purkyastha (2000) argue that constructing immigrant, ethnic-minority women's experiences of MFPV as an inherent part of their culture of origin, obscures the role that oppression from the dominant society plays in exacerbating violence in immigrant communities. Some participants in this study explicitly acknowledged the role of the dominant society in their accounts of MFPV. For instance, they described experiences or perceptions of mainstream services failing to mitigate language and cultural barriers. Some women also linked negative experiences with South Asian domestic violence organisations to a lack of independent reviews of these organisations, government funding issues and the pressure that New Zealand courts may put on women to 'prove' MFPV. Results pertaining to

the current study's specific research questions will now be discussed alongside clinical implications, limitations of the research and suggestions for future research.

Negotiating Identity Through Experiences of MFPV in the Context of Migration

Most participants in this study described a clear shift from **feeling trapped (theme 2)** to deciding **that the sacrifices they were making were not worth it (theme 3).** In their accounts of feeling trapped, participants strongly aligned with South Asian cultural discourses and the identity position of an isolated new immigrant. Later concluding that the sacrifice was not worth it in the end, suggests that participants had to re-negotiate identity in order to justify seeking help for MFPV, leaving their abusers and/or generally living as separated women in New Zealand. Identity positions that enabled women to accomplish this included: adopting a more 'Kiwi' or Westernised identity which emphasises gender equality, feminism and independence; appealing to a shared sense of humanity or the notion that all human beings have limits; constructing MFPV as an experience which forced them to choose being a sacrificial mother over being a submissive wife; and finally, relinquishing individual responsibility through emphasising how the decision to challenge their male abuser's power was collectively made with support from trusted others.

What is clear from these results, is that seeking help for MFPV, leaving the relationship or existing as a separated woman, were behaviours that participants felt were associated with significant stigma in South Asian communities. Therefore in order to perform these behaviours, participants were forced to acknowledge a sense of failure as a woman and a mother and/or redefine what it means to 'fail', to 'have it all', to be a 'strong woman' and a 'good mother'. Re-negotiating femininity in this way, often went hand in hand with re-negotiating cultural identity and modifying social networks to minimise embarrassment. These findings parallel those from Ahmad and colleagues' (2013) research with South Asian immigrant women in Canada.

Participants' accounts also support a social constructionist view of identity (Burr, 2003; Hermans, 2001) and acculturation (Bhatia, 2008) as complex and at times, seemingly contradictory. This is evidenced by how women described taking up aspects of 'Kiwi' femininity in different ways and to various extents depending on whether their supportive networks were predominantly comprised of South Asians or Kiwis. The fact that all participants took up 'Kiwi' culture to some extent suggests that living as a separated South Asian immigrant woman in New Zealand required some level of assimilation. However, participants often simultaneously held onto South Asian feminine ideals in complex ways and to varying extents; highlighting how acculturation is not a linear process. Additionally the concept of a public vs. private identity highlights another layer of complexity to identity. This is depicted in participants' accounts of trying to live up to the 'strong sacrificial South Asian woman' identity in public while experiencing a lost or fractured sense of self in private.

There were some similarities between how women in this study negotiated identity compared to the mainstream Western literature on MFPV and identity. However, there were also some important points of distinction as well as within-group variation. One similarity shared with mainstream Western literature exploring MFPV in Australia, is the notion that isolation as an abuse tactic narrows the range of social identities held by a woman as a result of being cut off from existing relationships and prevented from forming new ones (O'Doherty et al., 2016). There are four findings in this study that are congruent with past research from both mainstream Western and South Asian literature on MFPV and identity: the notion that MFPV inhibits help-seeking through fracturing a woman's sense of self (Childress, 2013; Finfgeld-Connett & Johnson, 2013; Kallivayalil, 2007; Matheson et al., 2015; O'Doherty et al., 2016; Venkataramani-Kotari, 2007), the important role that motherhood plays in women's decision-making with respect to MFPV (Ahmad et al., 2009; Fanslow & Robinson et al., 2010; Kallivayalil, 2010; Lawrence, 1994; O'Doherty et al.,

2016), the notion that immigrant women and women from the dominant culture stay in abusive relationships when they perceive the abuse to be 'normal or not serious' (Dasgupta, 2000; Fanslow & Robinson, 2010), and finally, the idea that women must compromise aspects of their identity that stigmatise victimhood in order to challenge their abuser's power and control (O'Doherty et al., 2016; Ahmad et al., 2013).

There were also a number of differences in the way that South Asian immigrant women in this study negotiated identity compared to mainstream Western findings. Even with overlapping findings such as the important role of motherhood in guiding decision-making, the current study was able to identify specific South Asian cultural discourses that may underlie this; such as the notion that mothers are responsible for keeping the family together at all costs, a woman should submit to her husband's authority, parental separation will cause children to suffer and mothers should sacrifice unrelentingly for their children. Likewise, although mainstream and South Asian research both suggest that women must mitigate aspects of their identity that stigmatise victimhood in order to seek help, leave or pursue a separation (O'Doherty et al., 2016; Ahmad et al., 2013), renegotiating social networks to achieve this and hence the pivotal role that informal supports played in participants' decision-making, was not found in research with women in New Zealand's general population (Fanslow & Robinson, 2010). This point of difference likely relates to the collectivist nature of South Asian cultures. Finally although women in New Zealand's general population and South Asian immigrant women in this study both reported staying in their abusive relationships because they struggled to recognise MFPV; participants specifically identified psychological and sexual abuse as areas where they 'lacked knowledge' and linked this to specific discourses within South Asian cultures (e.g. abuse is physical, sex has to be penetrative, a woman needs to be chaste but also a sexual temptresses, and men have the right to control women's bodies). This suggests that although all women in

New Zealand may benefit from education on MFPV, cultural relativism as to what constitutes 'sexual abuse' and 'psychological abuse' may have specifically deterred participants from recognising MFPV (Rahmanipour et al., 2019). These points of distinction illustrate how the sociocultural context influences identity negotiation.

The impact of migration on identity negotiation was another key difference between participants' stories and the mainstream Western literature on MFPV and identity. For instance, although isolation as an abuse tactic can narrow the range of social identities for any victim/ survivor, participants in this study described facing an added layer of isolation as a result of immigration that was often exploited by their male abusers. Furthermore, South Asian immigrant women in this study had to re-negotiate their cultural identity alongside re-thinking femininity and motherhood because help-seeking, leaving or generally establishing life as a separated woman transgressed South Asian norms. Many women reported finding 'Kiwi' discourses that emphasise gender equality, feminism and independence, useful as a way of de-stigmatising these actions.

Finally, intersectional theory (Crenshaw, 1991; Sokoloff, 2008) provides important insights into within-group differences that emerged. The fact that some women in this study could access certain identity positions while others could not, emphasises the importance of looking beyond ethnicity and gender, to how these variables intersect with other forms of privilege such as availability and access to social supports, the presence of children, socioeconomic factors (e.g. language barriers, access to finances, education level), exposure to the host country, immigration status and the nature of the abuse itself. For example, being a mother conveyed privilege because identifying as a protective and sacrificial South Asian mother allowed some participants to justify challenging their male abuser's power. P3 who was not a mother, did not have access to this, which may have contributed to her being abandoned by her husband. However, as a separated woman, P3 found strength in justifying

her position through emphasising her humanity or the notion that most people would be unable to tolerate the abusive circumstances she was made to endure. Similarly, becoming more 'Kiwi' as a way of justifying help-seeking, leaving or being separated, was a privileged identity position. Women with an uncertain immigration status, who were socioeconomically disadvantaged and whose experiences of MFPV were extremely isolating, often had limited exposure to New Zealand and the 'Kiwi way' and therefore struggled to access this identity position.

Strategies Used by South Asian Immigrant Women to Cope With MFPV in New Zealand

The current study looked at how women coped with MFPV using personal coping strategies, help-seeking from informal sources and formal sources. Previous research exploring South Asian immigrant women's experiences of MFPV in Western countries other than New Zealand, have suggested that they rely on personal coping for many years, and only look to others for help upon realising the inadequacy of personal coping (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018; Kanagaratnam, 2012). In contrast, findings from the current study show that participants did reach out to informal supports early on, however, their approach was often cautious and indirect initially. Participants' accounts also demonstrated significant overlap between personal coping and help-seeking. Participants' preference to seek help from informal supports over formal supports is congruent with other studies that have been conducted with South Asian immigrant women (Abraham, 2000a; Ahmad et al., 2009; Ahmad-Stout et al., 2018; Kim and Hogge, 2015) as well as research that has been conducted with a representative sample of women in New Zealand's general population (Fanslow & Robinson, 2010). However, in contrast to women from New Zealand's general population (Fanslow & Robinson, 2010), participants were hesitant to seek help in general; even from informal supports. This supports results from Fanslow and

colleagues (2010) where the suspected underreporting of MFPV by Asian women in New Zealand was linked to the fact that they reported stronger beliefs than other ethnic groups about MFPV being a private matter.

The current analysis endeavoured to make sense of why South Asian women in this study delayed help-seeking as well as the way they coped in general, considering their experiences of MFPV, their sociocultural and migration contexts. Identified sociocultural and migration-related factors in this study parallel those that have been found in international research investigating South Asian immigrant women's experiences of help-seeking in the context of MFPV (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018; Finfgeld-Connett & Robinson, 2013; Kanagaratnam, 2012). Finally, intersectional theory and acculturation provided important insights into how privilege/ disadvantage appeared to shape within-group differences in participants' coping. I will now discuss these findings and relate them more specifically to personal coping, help-seeking from informal sources and formal sources respectively.

Personal Strategies

Although many of the personal strategies that participants described overlap with those found in mainstream Western literature (Bowker, 1993), strategies that the literature suggests are more unique to South Asian immigrant women include contemplating suicide and specific forms of non-compliance such as; resistance in the domestic sphere and challenging the abuser's fiscal control (Abraham, 2000a; Merchant, 1999). Contemplating suicide perhaps reflects how significant isolation due to male abusers taking advantage of migration-related barriers, made some participants feel particularly helpless. Non-compliance may have also been a common strategy for South Asian women in this study because it could be executed in indirect and confrontational ways, and served an array of functions, both practical and emotional; more so than any other strategy. Non-compliance also appeared to be

a strategy that had worked the best for women in terms of maximizing short-term benefits while minimising risk. It was less risky than talking back or using the body, but also could achieve more than shutting out or placating.

Personal strategies served a wide variety of functions including: achieving temporary peace, conserving energy, maximising safety for self and/or children, minimising the likelihood of an abusive incident, de-escalation, maintaining self-worth/ dignity (closely tied to family honour for some), retaining control over one's body, communicating disapproval or an attitude of protest and gaining access to finances. Although these functions constituted short-term palliative benefits, they appeared to be an essential part of the survival and empowerment process for participants, as previously articulated by Lempert (1996). Perhaps these functions themselves illustrate why women described continuing to use personal coping alongside help-seeking. For instance, placating and hiding, were sometimes used towards the end of the abuse or in the aftermath of separation, which contrasts against previous research where they are described as a first line of resistance (Abraham, 2000a; Ahmad et al., 2009). Some strategies also seemed more effective than others at achieving a particular function. For instance, placating appeared to be more effective at minimising harm than talking back or using one's body.

Findings from the current research also challenge the dichotomous categorisation of personal strategies proposed in previous studies as either emotion-focussed/passive/ avoidant or problem-focussed/ active/ approach based (Holahan et al., 1995; Holahan & Moos, 1987; Lazarus, 1993; Meyer et al., 2010). Apart from shutting out and contemplating suicide which exclusively served an emotional function (achieving temporary peace), all other personal strategies encompassed functions that traversed this dichotomy. For instance, participants described using talking back to both maximise safety (problem-focussed) and maintain self-worth and family honour (emotion-focussed). Furthermore, an interesting finding in this

study was how less privileged women tended to modify personal coping in ways that resembled what has been defined as avoidant/ passive/ emotion-focussed coping, whereas their more privileged counterparts described being able to execute personal strategies in more confrontational ways because they had more power to modify their environment. Less privileged women were typically those women who had arrived in New Zealand following an arranged marriage, who did not speak English fluently, did not have access to finances, had a lower education level, and an uncertain or dependent immigration status. Less privileged women also typically experienced MFPV as more isolating and feared for their safety more frequently. In this way, the intersections of privilege reflect an interaction between a participant's experience of MFPV, migration and their cultural context, and influenced not only how the women reported modifying personal strategies but also strategy selection, onset, frequency, functions and consequences.

Finally, women's accounts of personal coping with MFPV challenge assumptions of 'passivity' that are frequently made about South Asian immigrant women in two ways. First, some of the women described challenging the abuser's power and control in confrontational ways such as slapping, pushing or belittling. This perhaps more obviously contradicts assumptions of 'passivity'. Secondly, descriptions of intentionally stating a motive to resist one's abuser via seemingly 'passive' means such as shutting things out or non-compliance, not only challenges assumptions of 'passivity' but also demonstrates how women creatively found culturally appropriate ways to 'resist' MFPV so that they were not visibly transgressing South Asian gender norms. The way in which participants emphasised being active agents in navigating and coping with MFPV in hindsight, could reflect internalised stigma attached to victimhood or the identity of a 'passive victim' (O'Doherty et al., 2016); especially in light of their accounts of adopting 'Kiwi' femininity which was defined in terms of feminism, independence and gender equality.

Seeking Help from Informal Sources of Support

Participants described seeking help from informal supports and informal supports reaching out to them. The 'they said get out now' subtheme in the analysis of identity negotiation, illustrates how emotional and practical support from informal sources, especially family, played a crucial role in helping some participants leave their abusers and encouraging/ connecting them to formal supports. Hence, while help-seeking from informal supports, like personal strategies, provided short-term palliative benefits (e.g. help with injuries, financial assistance), it could additionally help participants put a more permanent end to MFPV. Identifying family and friends as preferred informal supports, and highlighting how informal support was not always helpful, were common to both participants in this study and Fanslow and Robinson's (2010) study with a representative sample of women in New Zealand. Drawing on participants narratives, the current study identified potential explanations for what may have hindered or limited the efficacy of help-seeking from informal sources. Two explanations were identified: participants' minimizing MFPV during disclosure and informal supports encountering similar barriers compared to participants themselves.

Fears related to South Asian cultures (e.g. fear of negative judgement, ostracism, bringing shame to the family and burdening others) appeared to be the most pervasive reason given by participants for cautiously disclosing MFPV to informal supports. However less privileged women additionally cited fears of the abuse escalating. 'Testing the waters' was a creative way of balancing the need for support, with participants' fears of negative consequences. It was also a culturally congruent approach to informal support-seeking given that minimising the abuse, concealing the abuser's culpability, and emphasising a woman's responsibility to respect her husband, fit with expectations of sacrificial femininity within South Asian cultures (Abraham, 2000a; Hunjan & Towson, 2007). Unfortunately, for several

women informal supports were described as responding by also minimising the abuse or victim-blaming. In part, this could be because the use of minimisation in disclosure prevented informal supports from seeing the whole picture and thus directly helping participants with the MFPV they were experiencing. However, because most informal supports were South Asians, their unhelpful responses may have also been influenced by the same cultural stigma that contributed to participants' minimising MFPV in the first place.

Along these lines, the second subtheme, 'Helpers face the same barriers as we do', highlights how the efficacy of informal supports was limited because they encountered similar cultural and migration-related barriers that participants faced themselves; barriers that were frequently exploited by male abusers. Therefore, privilege in terms of the number of barriers women and their informal supports faced contributed to within-group differences in the efficacy of informal support provision. Together, these results paint a more complex picture of coping using informal supports, than has been found in past research with South Asian women who have experienced MFPV in other Western countries (Abraham, 2000a; Ahmad et al., 2009).

Seeking Help from Formal Sources of Support

Participants in this study typically sought help from formal supports towards the end of the abuse, when they were able to recognise and take MFPV more seriously. This was aided by trusted others validating the seriousness of the abuse, the perception that MFPV was negatively impacting their children, their definition of MFPV expanding and/or the nature of MFPV changing to fit their definition of domestic violence as physical abuse. These findings are consistent with existing literature on formal support seeking for MFPV among South Asian immigrant women (Abraham, 2000a; Ahmad et al., 2009; Bhandari, 2018; Finfgeld-Connett & Johnson, 2013; Kim & Hogge, 2015, Mehrotra, 1999).

The literature on MFPV suggests that it occurs across cultures and socioeconomic divisions (Devries et al., 2013, Levinson, 1989). However, while MFPV does not discriminate, the findings from the current study suggest that New Zealand's formal supports may not cater to all victims/ survivors equally. The fact that most participants described struggling to access and/or navigate formal supports to some extent, could be due to some underlying commonalities such as the expectation placed on South Asian women to maintain family privacy and a favourable family image, unfamiliarity with formal supports in the host country or socioeconomic concerns (e.g. worrying about being able to financially provide for themselves and their children or find housing). These barriers to accessing and/or navigating formal supports were not found in a study exploring MFPV among women in New Zealand's general population, and thus potentially constitute a point of distinction (Fanslow & Robinson, 2010). However, systemic barriers to accessing and/or navigating formal supports were reported by both women in this study as well as women in New Zealand's general population (Fanslow & Robinson, 2010). Specific systemic factors identified in the current research include formal supports failing to mitigate migration-related and socioeconomic barriers (specific to South Asian women), poor systemic integration resulting in conflicting advice, and a culture of victim-blaming that puts the onus on women to 'prove' MFPV; a task that was often perceived as difficult in the context of psychological or sexual abuse.

Although most participants reported difficulties with accessing and/or navigating formal supports, some appeared to struggle more than others. Participants who encountered more migration-related barriers/ acculturative stress and socioeconomic barriers appeared to find formal support-seeking more challenging. They were more likely to experience coercion, had to make multiple attempts at getting support, cycled through multiple professionals and described feeling more disillusioned by the system. It is perhaps no wonder, that participants report becoming more 'Kiwi' or Westernised, given that their narratives suggest that the

system works better for women who are more 'Kiwi'. These results corroborate findings from past research which suggest that immigrant women who have a lower level of acculturation stay in abusive relationships for longer (Hass et al., 2000; Liao, 2006; Somasekhar, 2016) and are less likely to seek help (Kim & Hogge, 2015). This also speaks to how the concept of acculturation levels, although not aligned with a social constructionist view of identity, can perhaps be useful when seeking to understand within-group differences in formal help-seeking.

How do South Asian Women Who Experience MFPV in New Zealand Perceive/ Experience Ethnicity-Matching in Formal Services?

By asking South Asian immigrant women about their perspectives and experiences of ethnicity-matching in formal services for MFPV, the current study sought to address a gap in the literature given that very little research has explored this question, and even less so with South Asian victims/ survivors themselves (Merchant, 2000; Preisser, 1999; Weekes, 2010). Consistent with mainstream research (Fanslow & Robinson, 2010; Meyer, 2015; O'Dohrety et al., 2016), participants agreed that feeling safe and understood were critical aspects of the therapeutic relationship with formal support people. However, current findings support past research which cautions against assuming that ethnicity-matching in formal services achieves cultural safety and understanding for everyone (Burman et al., 2004; Horst et al., 2012; Milani et al., 2018; Sawrikar, 2013; Simon-Kumar, 2019). Participants' accounts identified overcoming language and cultural barriers, as aspects of ethnicity-matching which they believed promoted feeling safe and understood in their relationship with formal supports. Participants described confidentiality breaches, culturally-mediated blame, a lack of adequate knowledge and a lack of genuine care and/or exploitation, as aspects of ethnicity-matching that made them feel unsafe and/ or misunderstood. Similar to findings from Sawrikar's (2013) research, participants' narratives appear to suggest that the benefits of ethnicity-

matching can only be maximised when the drawbacks are mitigated. This was further highlighted by the 'same wavelength' discourse in the current study, where most participants described how having formal supports share or at least understand their values and how they make sense of their cultural identity (acculturation) was more valuable and complex than ethnicity-matching.

Limitations

A number of limitations need to be considered when interpreting the results from this project. Firstly, the small sample size and over-representation of Indian women limits the generalisability of findings. Secondly, there are cultural and methodological factors that may have contributed to an overrepresentation of South Asian women who were more highly acculturated. For instance, the fact that the study's advertisements were in English meant that the few participants who responded to advertisements had to at least be able to read English. Secondly, participants were required to volunteer if they had experienced MFPV, but were currently no longer experiencing violence or threats of violence. This may have resulted in an over-representation of women who had chosen to separate from their male abusers. Participants may have been more likely to be highly acculturated, given that becoming more 'Kiwi' was a common way that women in this study described coping with the status of being a separated woman. In other words, South Asian women in New Zealand who experienced MFPV but did not speak English and/ or identified strongly with South Asian values, were perhaps less likely to volunteer for this project. However, participants' accounts of feeling trapped earlier on in the abusive relationship, the narratives of women who did not explicitly decide to permanently leave their husbands (P3, P5, P7, P12), as well as P11's story of contemplating reconciliation after a separation, may to some extent, capture the experiences of less acculturated South Asian women who did not necessarily want to cope with MFPV by pursuing a permanent separation.

Collecting data via interviews may have led to recall bias, or participants only reporting memorable experiences or experiences they felt comfortable sharing. When analysing participants' accounts of identity negotiation in particular, recall bias made it difficult to differentiate between how women saw themselves at the time that they decided to seek help and/ or leave their male abusers, vs. how they see themselves currently, in light of making these decisions. Furthermore, interviews are an iterative process between participants and the interviewer. Therefore, the fact that I may have been perceived as a more 'Westernised' South Asian woman (i.e. only spoke English, dressed in Western clothing) may have contributed to participants feeling weary about being perceived as 'passive'.

A final limitation is that although the current study details within-group differences in light of participants' acculturation level, a measure for acculturation was not used as recommended by Weekes (2010). Instead participants' acculturation was inferred by factors such as whether they described being able to speak English fluently, whether they had worked in New Zealand, the extent of their exposure to New Zealand and how they described their ethnic identity. This limits the validity of conclusions drawn about how acculturation levels may have shape participants' experiences of MFPV.

Clinical Implications

At the most basic level, South Asian women in New Zealand would benefit from formal services being aware of how sociocultural, migration-related and structural factors intersect and shape their experiences of MFPV in diverse, complex and often dialectical ways. If interventions were to reflect this, they should not be 'one-size fits all'. Findings from the current study suggest that interventions that challenge and mobilise culture, could both be relevant when supporting South Asian women who experience MFPV in New Zealand. Using culturally relevant metaphors, emphasising the sacrificial mother role as a reason to cease tolerating MFPV and helping family members overcome migration-related and/ or structural

barriers to support provision, are some examples of how interventions could mobilise South Asian cultures. Potentially helpful interventions that challenge South Asian cultural norms include challenging the construction of domestic violence as physical abuse in South Asian cultures by educating women about the 'broad' definition of domestic violence in New Zealand, and introducing women to concepts of gender equality/ women's rights and independence. These specific aspects of 'Kiwi' culture were identified by women in this study as factors that enabled them to seek help, leave their male abusers and/ or stay resilient when stigmatised or ostracised by their migrant communities for their status as a separated woman. Interventions that challenge South Asian cultural mores that are perceived to contribute to MFPV may be particularly useful for women who do not have family and other informal supports, and/or have not felt supported by their migrant communities. These women were often forced to integrate as a way of surviving MFPV and required support to do this especially if they were less acculturated. Ultimately, which interventions are selected and how they are delivered should reflect how each South Asian woman chooses to cope with MFPV. Because this was usually a reflection of participants' acculturation journey and the resources/ supports available to them, these are two important factors for formal services to consider.

Participants' perspectives and experiences of ethnicity-matching also reject a 'one-size fits all' approach from formal services. Alternatively, current results highlight the need for systems to understand and reflect how acculturation and intersectionality manifests in within-group differences in regards to ethnicity-matching. This could mean giving women the option of whether they would like to be supported by an ethnic-specific or mainstream organisation, and whether they would prefer to be matched with a professional from the same, similar or different ethnic background. Women in this study also thought that South Asian domestic violence organisations should be able to address barriers that are unique to

South Asian women (e.g. language barriers and uncertain resident status) and thus cater more specifically to socioeconomically disadvantaged women with lower acculturation levels. However, they also said that mainstream formal services and non-South Asian professionals are also responsible for ensuring that language and cultural barriers were recognised and mitigated which may require further cultural training. Lastly, participants' concerns and/or negative experiences with South Asian domestic violence organisations (e.g. confidentiality breaches, exploitation) call for a more large-scale independent review of how women experience these services as well as formal services in general.

Findings from this study suggest that screening South Asian immigrant women in New Zealand for MFPV at health services, particularly maternal services, might be effective for two reasons. Firstly because health services were the only formal services that all women reported accessing, and not just at the end of their relationships. Secondly, because of the significant role that motherhood appeared to play in guiding participants' decision making with respect to MFPV. Based on the results of this study, screening of MFPV in health settings needs to be conducted more frequently and more appropriately (e.g. assure women of confidentiality, ask men to leave the room). Given that many women described being unfamiliar with formal supports in New Zealand, it might be more effective to inform South Asian women of what supports would be available in the aftermath of their disclosure before asking screening questions. This appeared to be even more important for severely isolated women in this study who even when screened for MFPV, hesitated to disclose abuse because they did not know if they would receive adequate support in the aftermath of disclosure.

Educating New Zealand's South Asian immigrant communities about how domestic violence is defined in New Zealand, what supports are available and how to access these supports, may be useful given that participants preferred informal supports to formal supports. Describing how South Asian women tend to disclose MFPV in indirect ways may

additionally help community members better identify disclosures. Interventions with the

South Asian migrant community that increase familiarity with formal supports and explicitly

challenge abuser-perpetuated myths about the notion that formal services will not help them,

might also be valuable given that many informal supports linked participants to formal

supports. Having this information available online and somehow easily accessible to the

families of women who migrate to New Zealand following an arranged marriage, would also

assist with informal support provision. In order to avoid stereotype threat, it would be

important for this information to be delivered by, or in partnership with South Asian

immigrants, with an emphasis on the notion that MFPV is universal and not inherently South

Asian. Unfortunately, the results from this study suggest that community interventions may

not have reached participants who had arrived in New Zealand following an arranged

marriage and were extremely isolated. Perhaps the only way to capture this group of women

is by screening for MFPV at hospital visits, or having a mandatory check in with all

immigrant women when they arrive in New Zealand, to ensure that they at least know what

numbers to contact in an emergency.

Finally, participants, accounts of using personal strategies have a few clinical

implications. Firstly, their emphasis on resisting and protesting MFPV using personal

strategies, perhaps highlights participants' desire for others to recognise how they actively

approached coping with MFPV. Consequently, this may indicate a desire to avoid being

stereotyped as a 'passive South Asian women'. Both of these findings have implications for

formal services; especially for counselling services that are perhaps more focussed on helping

women rebuild a sense of self in the aftermath of experiencing MFPV. Secondly,

participants' accounts of personal coping highlight how the sociocultural, migration and

abuse context determined the power each woman had to modify their environment through

personal coping. Consequently, this suggests that formal services and systems in New

Zealand had the power to help or hinder participants' efforts to cope with MFPV using personal strategies. Ensuring that women have access to their income is one example of how formal services assisted one participant in her attempt to protest financial control.

Future Directions

Future research that is independent and prioritises the experiences of South Asian victims/ survivors of MFPV is needed. This is because as previously stated, much of the existing literature in this area has been conducted by and/ or with professionals who work for South Asian organisations who perhaps have a vested interest in promoting viewpoints that tend to homogenise the experiences of South Asian women in order to justify the existence of the organisations they work for. This has likely resulted in neglecting within-group diversity which was emphasised in the current study's findings. More large-scale research is needed to explore South Asian and other immigrant victim/ survivors experiences of ethnicity-matching in formal services, given the paucity of research focussing on this topic, as well as the way in which current results caution against assuming that cultural safety is achieved through ethnicity-matching.

Perhaps a neglected area of research regarding South Asian immigrant women's experiences of MFPV is exploring how members of South Asian migrant communities, as opposed to victims/ survivors themselves, perceive and respond to MFPV. This could be valuable given participants' preference for informal supports over formal supports as well as the crucial role that family and friends played in connecting victims/ survivors to formal supports and helping them leave abusive relationships more generally. Furthermore, while international research has implicated the pressure to live up to the 'model minority' stereotype as a factor that may contribute to the denial of MFPV among South Asian immigrant communities, whether South Asians are considered a 'model minority' in New Zealand and whether this contributes to community members encouraging women to tolerate

MFPV, has not yet been explored. Future research could explore this by conducting research with members of the South Asian immigrant community in New Zealand and analysing media portrayals of South Asians. At present the concept of the 'model minority' stereotype in New Zealand has only been researched in the context of Chinese immigrants (Chung & Walkey, 1988; Hannis, 2009).

Finally some of the problems women in this study identified with formal supports in New Zealand may be experienced by women in New Zealand more generally. These are namely the notion that SES has a significant bearing on being able to access and/ or navigate formal services, the identification of a victim-blaming culture – particularly in the legal system, and the notion that psychological and sexual abuse are difficult to 'prove' in New Zealand's legal system. Further research investigating these identified problems for women in New Zealand more generally is warranted due to the potential harmful consequences.

Conclusion

The current study aimed to explore South Asian immigrant women's experiences of MFPV in New Zealand and comment on what special needs, if any, they may have. Findings revealed that women's experiences of MFPV, how they coped, and how they saw themselves in light of this experience, were significantly shaped by their sociocultural context and the context of migration, and thus distinct. However, findings also highlighted similarities with the mainstream literature on women's experiences of MFPV, as well as within-group differences which have received less attention in past research. The current study proposes that a key challenge in cultural research and culturally-specific services for MFPV, is recognising and catering to difference without compromising cultural safety by negatively stereotyping ethnic-minority groups or homogenising their experiences. These problems can be minimised by recognising the universal nature of MFPV and simultaneously considering

acculturation and intersectional theory when investigating and responding to immigrant

women's experiences of MFPV.

References

Abraham, M. (1995). Ethnicity, gender, and marital violence: South Asian women's organizations in the United States. *Gender & Society, 9*(4), 450-468.

Abraham, M. (1999). Sexual abuse in South Asian immigrant marriages. *Violence Against Women, 5*(6), 591-618.

Abraham, M. (2000a). *Speaking the unspeakable: marital violence among South Asian immigrants in the United States*. New Brunswick, NJ: Rutgers University Press.

Abraham, M. (2000b). Isolation as a form of marital violence: The South Asian immigrant experience. *Journal of Social Distress and the Homeless, 9*(3), 221-236.

Abraham, M. (2006). Model minority and marital violence: South Asian immigrants in the United States. In R. Mahalingam (Ed.), *Cultural psychology of immigrants* (pp. 197-216). Mahwah, New Jersey: Lawrence Erlbaum Publishers.

Adam, N. M. (2000). *Domestic violence against women within immigrant Indian and Pakistani communities in the United States.* (Doctoral dissertation, University of Illinois, Chicago). Retrieved from ProQuest Dissertations Publishing. (AAT 5326017)

Adam, N. M., & Schewe, P. A. (2007). A multilevel framework exploring domestic violence against immigrant Indian and Pakistani women in the United States. *Journal of Muslim Mental Health, 2*(1), 5-20.

Ahmad, F., Driver, N., McNally, M. J., & Stewart, D. E. (2009). "Why doesn't she seek help for partner abuse?" An exploratory study with South Asian immigrant women. *Social Science & Medicine, 69*(4), 613-622.

Ahmad, F., Rai, N., Petrovic, B., Erickson, P. E., & Stewart, D. E. (2013). Resilience and Resources Among South Asian Immigrant Women as Survivors of Partner Violence. *Journal of immigrant and minority health, 15*(6), 1057-1064. doi:10.1007/s10903-013-9836-2

Ahmad, F., Riaz, S., Barata, P., & Stewart, D. E. (2004). Patriarchal beliefs and perceptions
of abuse among South Asian immigrant women. *Violence Against Women, 10*(3),
262-282.

Ahmad-Stout, F., Nath, S. R., Khoury, N. M., & Huang, H. (2018). Experiences of intimate
partner violence: Findings from interviews with South Asian women in the United
States. *Journal of Interpersonal Violence*, *36*(3), 1941-1964. doi:
10.1177/0886260517753850.

Ahmed, K., Mohan, R. A., & Bhugra, D. (2007). Self-harm in South Asian women: a
literature review informed approach to assessment and formulation. *American journal
of psychotherapy, 61*(1), 71-81.

Alderman, H., & King, E. M. (1998). Gender differences in parental investment in education.
Structural Change and Economic Dynamics, 9(4), 453-468.

Amato, P. R. (2000). The consequences of divorce for adults and children. *Journal of
marriage and family, 62*(4), 1269-1287.

Ammar, N., & Orloff, L. (2006). Battered immigrant women's domestic violence dynamics
and legal protections. In R. Muraskin (Ed.), *It's a crime: Women and justice* (pp. 314-
332). Upper Saddle River, NJ: Prentice Hall.

Anderson, K. M., Renner, L. M., & Danis, F. S. (2012). Recovery: Resilience and Growth in
the Aftermath of Domestic Violence. *Violence Against Women, 18*(11), 1279-1299.
doi:10.1177/1077801212470543

Anitha, S. (2011). Legislating Gender Inequalities: The Nature and Patterns of Domestic
Violence Experienced by South Asian Women With Insecure Immigration Status in
the United Kingdom. *Violence Against Women, 17*(10), 1260-1285.
doi:10.1177/1077801211424571

Arends-Tóth, J., & Vijver, F. J. V. D. (2003). Multiculturalism and acculturation: views of Dutch and Turkish–Dutch. *European Journal of Social Psychology, 33*(2), 249-266.

Ayres, L. (2008). *The SAGE Encyclopedia of Qualitative Research Methods*. Thousand Oaks, California: SAGE Publications, Inc.

Ayyub, R. (2000). Domestic violence in the South Asian Muslim immigrant population in the United States. *Journal of Social Distress and the Homeless, 9*(3), 237-248.

Baldry, A. C., & Pagliaro, S. (2014). Helping victims of intimate partner violence: The influence of group norms among lay people and the police. *Psychology of Violence, 4*(3), 334-347.

Baly, A. R. (2010). Leaving Abusive Relationships: Constructions of Self and Situation by Abused Women. *Journal of Interpersonal Violence, 25*(12), 2297-2315. doi:10.1177/0886260509354885

Banerjee, K. (1999). Gender stratification and the contemporary marriage market in India. *Journal of Family Issues, 20*(5), 648-676.

Baumeister, R. F., & Leary, M. R. (1995). The Need to Belong: Desire for Interpersonal Attachments as a Fundamental Human Motivation. *Psychological Bulletin, 117*(3), 497-529. doi:10.1037/0033-2909.117.3.497

Beeman, S. K., Hagemeister, A. K., & Edleson, J. L. (2001). Case assessment and service receipt in families experiencing both child maltreatment and woman battering. *Journal of Interpersonal Violence, 16*(5), 437-458.

Berry, J. W. (1997). Immigration, Acculturation, and Adaptation. *Applied psychology, 46*(1), 5-34. doi:10.1111/j.1464-0597.1997.tb01087.x

Bhandari, S. (2018). South Asian women's coping strategies in the face of domestic violence in the United States. *Health care for women international, 39*(2), 220-242.

Bhatia, S. (2008). 9/11 and the Indian diaspora: Narratives of race, place and immigrant identity. *Journal of Intercultural Studies, 29*(1), 21-39.

Bhatia, S., & Ram, A. (2009). Theorizing identity in transnational and diaspora cultures: A critical approach to acculturation. *International journal of intercultural Relations, 33*(2), 140-149.

Bhopal, K. (1999). South Asian women and arranged marriages in East London. In R. Barot, H. Bradley & S. Fenton (Eds.), *Ethnicity, gender and social change* (pp. 117-134). New York: Springer.

Bograd, M. (1999). Strengthening domestic violence theories: Intersections of race, class, sexual orientation, and gender. *Journal of marital and family therapy, 25*(3), 275-289.

Borker, G., Eeckhout, J., Luke, N., Minz, S., Munshi, K., & Swaminathan, S. (2017). Wealth, marriage, and sex selection. *Unpublished Manuscript*.

Bott, E. (2010). Favourites and others: reflexivity and the shaping of subjectivities and data in qualitative research. *Qualitative research, 10*(2), 159-173. doi:10.1177/1468794109356736

Bowker, L. H. (1983). *Beating wife-beating*. Lanham: Lexington Books

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3*(2), 77-101. doi:10.1191/1478088706qp063oa

Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*. London: Sage.

Bryant-Davis, T., Chung, H., & Tillman, S. (2009). From the margins to the center: Ethnic minority women and the mental health effects of sexual assault. *Trauma, Violence, and Abuse, 10*(4), 332-357.

Bryman, A. (2001). *Social research methods*. Oxford: Oxford University Press

Buchbinder, E. (2004). Motherhood of battered women: The struggle for repairing the past. *Clinical Social Work Journal, 32*(3), 307-326.

Bui, H. N., & Morash, M. (1999). Domestic violence in the Vietnamese immigrant community: An exploratory study. *Violence Against Women, 5*(7), 769-795.

Burman, E., & Chantler, K. (2005). Domestic violence and minoritisation: legal and policy barriers facing minoritized women leaving violent relationships. *International Journal of Law and Psychiatry, 28*(1), 59-74.

Burman, E., Smailes, S. L., & Chantler, K. (2004). Culture as a barrier to service provision and delivery: domestic violence services for minoritized women. *Critical social policy, 24*(3), 332-357.

Burr, V. (2003). *Social constructionism* (2nd ed.). London: Routledge.

Burr, V. (2015). *Social constructionism* (3rd ed.). London: Taylor and Francis

Campbell, J. C. (2002). Health consequences of intimate partner violence. *The Lancet, 359*(9314), 1331-1336.

Capaldi, D. M., Knoble, N. B., Shortt, J. W., & Kim, H. K. (2012). A systematic review of risk factors for intimate partner violence. *Partner abuse, 3*(2), 231-280.

Casanueva, C., Martin, S. L., Runyan, D. K., Barth, R. P., & Bradley, R. H. (2008). Quality of maternal parenting among intimate-partner violence victims involved with the child welfare system. *Journal of Family Violence, 23*(6), 413-427.

Celenk, O., & Van de Vijver, F. (2011). Assessment of acculturation: Issues and overview of measures. *Online Readings in Psychology and Culture, 8*(1), 1-22.

Chacko, E. (2003). Marriage, development, and the status of women in Kerala, India. *Gender & Development, 11*(2), 52-59.

Chatterji, J., & Washbrook, D. (2014). *Routledge handbook of the South Asian diaspora*. Keele University, Werbner: Routledge.

Chaudhuri, S., Morash, M., & Yingling, J. (2014). Marriage migration, patriarchal bargains, and wife abuse: A study of South Asian women. *Violence Against Women, 20*(2), 141-161.

Childress, S. (2013). A Meta-Summary of Qualitative Findings on the Lived Experience among Culturally Diverse Domestic Violence Survivors. *Issues in Mental Health Nursing, 34*(9), 693-705. doi:10.3109/01612840.2013.791735

Chung, R. C. Y., & Walkey, F. H. (1988). From undesirable immigrant to model minority: The success story of Chinese in New Zealand. *Immigrants & Minorities, 7*(3), 308-313.

Cimbolic, P. (1972). Counselor race and experience effects on black clients. *Journal of Consulting and Clinical Psychology, 39*(2), 328-332. doi:10.1037/h0033417

Cluss, P. A., Chang, J. C., Hawker, L., Scholle, S. H., Dado, D., Buranosky, R., & Goldstrohm, S. (2006). The process of change for victims of intimate partner violence: support for a psychosocial readiness model. *Women's health issues, 16*(5), 262-274.

Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford law review*, *43*(6), 1241-1299.

Creswell, J. W., & Tashakkori, A. (2007). Differing perspectives on mixed methods research. *Journal of Mixed Methods Research, 1*(4), 303-308.

Crichton-Hill, Y., Coker, V., & Taylor, A. (2010). Reviewing domestic violence responses: An analysis of Christchurch Women's Refuge contact data and how women access its services. *Te Awatea Review*, 9, 1-36.

Dasgupta, S. D. (2000). Charting the course: An overview of domestic violence in the South Asian community in the United States. *Journal of Social Distress and the Homeless, 9*(3), 173-185.

Dasgupta, S. D. (2007). *Body Evidence: Intimate violence against South Asian women in America*. New Jersey: Rutgers University Press.

Dasgupta, S. D., & Warrier, S. (1996). In the footsteps of "Arundhati" Asian Indian women's experience of domestic violence in the United States. *Violence Against Women, 2*(3), 238-259.

DeKeseredy, W. S., & Dragiewicz, M. (2009). *Shifting public policy direction: Gender-focused versus bidirectional intimate partner violence*. Toronto: Ontario Women's Directorate.

Devries, K. M., Mak, J. Y., Garcia-Moreno, C., Petzold, M., Child, J. C., Falder, G., . . . Rosenfeld, L. (2013). The global prevalence of intimate partner violence against women. *Science, 340*(6140), 1527-1528.

Dion, K. K., & Dion, K. L. (2001). Gender and cultural adaptation in immigrant families. *Journal of Social Issues, 57*(3), 511-521.

Dobash, R. E., & Dobash, R. (1979). *Violence against wives: A case against the patriarchy.* New York: Free Press NY.

Domestic Violence Act 1995. Available at https://www.legislation.govt.nz/act/public/1995/0086/latest/DLM371926.html (Accessed: 10 January 2021).

DuMont, J., & Forte, T. (2012). An exploratory study on the consequences and contextual factors of intimate partner violence among immigrant and Canadian-born women. *BMJ open, 2*(6). doi:10.1136/bmjopen-2012-001728.

Dutton, M. A., Orloff, L. E., & Hass, G. A. (2000). Characteristics of help-seeking behaviors, resources and service needs of battered immigrant Latinas: legal and policy implications. *Georgetown Journal on Poverty Law and Policy, 7*(2), 1-53.

Edleson, J. L. (1999). The overlap between child maltreatment and woman battering. *Violence Against Women, 5*(2), 134-154.

Erez, E., Adelman, M., & Gregory, C. (2009). Intersections of immigration and domestic violence: Voices of battered immigrant women. *Feminist criminology, 4*(1), 32-56.

Fagan, J., & Browne, A. (1994). Violence between spouses and intimates: Physical aggression between women and men in intimate relationships. *Understanding and preventing violence, 3*.

Family Violence Act 2018. Available at https://www.legislation.govt.nz/act/public/2018/0046/latest/whole.html (Accessed: 15 January 2021).

Fanslow, J., & Robinson, E. (2004). Violence against women in New Zealand: prevalence and health consequences. *The New Zealand Medical Journal (Online), 117*(1206), 1-12. Retrieved from http://www.nzma.org.nz/journal/117-1206/1173

Fanslow, J., Robinson, E., Crengle, S., & Perese, L. (2010). Juxtaposing beliefs and reality: Prevalence rates of intimate partner violence and attitudes to violence and gender roles reported by New Zealand women. *Violence Against Women, 16*(7), 812-831. doi: 10.1177/1077801210373710

Fanslow, J. L., & Robinson, E. M. (2010). Help-seeking behaviors and reasons for help seeking reported by a representative sample of women victims of intimate partner violence in New Zealand. *Journal of Interpersonal Violence, 25*(5), 929-951.

Fanslow, J. L., & Robinson, E. M. (2011). Sticks, stones, or words? Counting the prevalence of different types of intimate partner violence reported by New Zealand women. *Journal of Aggression, Maltreatment & Trauma, 20*(7), 741-759.

Farsimadan, F., Draghi-Lorenz, R., & Ellis, J. (2007). Process and outcome of therapy in ethnically similar and dissimilar therapeutic dyads. *Psychotherapy research, 17*(5), 567-575. doi:10.1080/10503300601139996

Fikree, F. F., & Pasha, O. (2004). Role of gender in health disparity: the South Asian context. *British Medical Journey, 328*(7443), 823-826.

Finfgeld-Connett, D., & Johnson, E. (2013). Literature search strategies for conducting knowledge-building and theory-generating qualitative systematic reviews. *Journal of advanced nursing, 69*(1), 194-204.

Finlay, L. (2002). "Outing" the Researcher: The Provenance, Process, and Practice of Reflexivity. *Qualitative health research, 12*(4), 531-545. doi:10.1177/104973202129120052

Flick, U. (2009). *An introduction to qualitative research*. London: Sage.

Flicker, S. M., Waldron, H. B., Turner, C. W., Brody, J. L., & Hops, H. (2008). Ethnic Matching and Treatment Outcome With Hispanic and Anglo Substance-Abusing Adolescents in Family Therapy. *Journal of family psychology, 22*(3), 439-447. doi:10.1037/0893-3200.22.3.439

Florentine, R., & Hillhouse, M. P. (1999). Drug Treatment Effectiveness and Client-Counselor Empathy: Exploring the Effects of Gender and Ethnic Congruency. *Journal of drug issues, 29*(1), 59-74. doi:10.1177/002204269902900104

Folkman, S., & Lazarus, R. S. (1990). Coping and Emotion. In T. Tom, B. Leventhal, & N. L. Stein (Eds.), *Psychological and biological approaches to emotion* (pp. 313-332). New Jersey: Lawrence Erlbaum Associates.

Follingstad, D. R., Rutledge, L. L., Berg, B. J., Hause, E. S., & Polek, D. S. (1990). The role of emotional abuse in physically abusive relationships. *Journal of Family Violence, 5*(2), 107-120.

Frye, V., Hosein, E., Waltermaurer, E., Blaney, S., & Wilt, S. (2005). Femicide in New York City: 1990 to 1999. *Homicide Studies, 9*(3), 204-228.

Fu, M. (2014). *"Moving On": Structural Violence and Age (ncy) in Young South Asian Women's Lifeworlds Post-Family Violence in Aotearoa/New Zealand.* (Masters Thesis, University of Auckland, Auckland, New Zealand). Retrieved from https://researchspace.auckland.ac.nz/handle/2292/24637.

Gangoli, G., McCarry, M. J., & Razak, A. (2006). *Forced marriage and domestic violence among South Asian communities in North East England*. Bristol: University of Bristol.

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

García-Moreno, C., Pallitto, C., Devries, K., Stöckl, H., Watts, C., & Abrahams, N. (2013). *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Geneva, Switzerland: World Health Organization.

Gelles, R. J. (1997). *Intimate violence in families* (Vol. 3). Thousand Oaks, California: Sage.

Ghafournia, N., & Easteal, P. (2018). Are immigrant women visible in Australian domestic violence reports that potentially influence policy? *Laws, 7*(4), 32.

Gill, A. (2004). Voicing the silent fear: South Asian women's experiences of domestic violence. *The Howard journal of criminal justice, 43*(5), 465-483.

Gill, A. (2009). Honor killings and the quest for justice in black and minority ethnic communities in the United Kingdom. *Criminal Justice Policy Review, 20*(4), 475-494.

Glass, N., Manganello, J., & Campbell, J. (2004). Risk for intimate partner femicide in violent relationships. *DV Report, 9*(2), 30-33.

Goel, R. (2005). Sita's trousseau: Restorative justice, domestic violence, and South Asian culture. *Violence Against Women, 11*(5), 639-665.

Grewal, S., Bottorff, J. L., & Hilton, B. A. (2005). The influence of family on immigrant South Asian women's health. *Journal of Family Nursing, 11*(3), 242-263.

Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (Vol. 2, pp. 105-117): California: Sage Publications Inc.

Guille, L. (2004). Men who batter and their children: An integrated review. *Aggression and Violent Behavior, 9*(2), 129-163.

Guruge, S., & Humphreys, J. (2009). Barriers affecting access to and use of formal social supports among abused immigrant women. *Canadian Journal of Nursing Research Archive, 41*(3), 64-85.

Hancock, A.-M. (2007). When multiplication doesn't equal quick addition: Examining intersectionality as a research paradigm. *Perspectives on politics, 5*(1), 63-79.

Hannis, G. (2009). Reporting Diversity in New Zealand: The 'Asian Angst' Controversy. *Pacific Journalism Review, 15*(1), 114-130.

Hass, G. A., Dutton, M. A., & Orloff, L. E. (2000). Lifetime prevalence of violence against Latina immigrants: Legal and policy implications. *International Review of Victimology, 7*(1-3), 93-113.

Hassouneh-Phillips, D. (2003). Strength and vulnerability: Spirituality in abused American Muslim women's lives. *Issues in Mental Health Nursing, 24*(6-7), 681-694.

Headey, B., Scott, D., & De Vaus, D. (1999). Domestic violence in Australia: are women and men equally violent? *Australian Social Monitor, 2*(3), 1-13. Retrieved from https://fact.on.ca/Info/dom/heady99.pdf

Hegarty, K., & Roberts, G. (1998). How common is domestic violence against women? The definition of partner abuse in prevalence studies. *Australian and New Zealand Journal of Public Health, 22*(1), 49-54.

Heise, L., Ellsberg, M., & Gottemoeller, M. (1999). Ending violence against women. *Population reports, 27*(4), 1-43.

Heise, L., & Garcia-Moreno, C. (2002). Violence by intimate partners. In E. G. Krug (Ed.), *World report on violence and health*. Geneva: World Health Organization.

Hermans, H. J. (2001). The dialogical self: Toward a theory of personal and cultural positioning. *Culture & psychology, 7*(3), 243-281.

Holahan, C. J., & Moos, R. H. (1987). Personal and Contextual Determinants of Coping Strategies. *Journal of Personality and Social Psychology, 52*(5), 946-955. doi:10.1037/0022-3514.52.5.946

Holahan, C. J., Valentiner, D. P., & Moos, R. H. (1995). Parental support, coping strategies, and psychological adjustment: an integrative model with late adolescents. *Journal of Youth and Adolescence, 24*(6), 633-648. doi:10.1007/BF01536948

Holtmann, C. (2016). Christian and Muslim immigrant women in the Canadian Maritimes: Considering their strengths and vulnerabilities in responding to domestic violence. *Studies in religion/Sciences religieuses, 45*(3), 397-414.

Horst, K., Mendez, M., Culver-Turner, R., Amanor-Boadu, Y., Minner, B., Cook, J., . . . McCollum, E. (2012). The Importance of Therapist/Client Ethnic/Racial Matching in Couples Treatment for Domestic Violence. *Contemporary family therapy, 34*(1), 57-71. doi:10.1007/s10591-012-9174-x

Hui, C. H., & Triandis, H. C. (1986). Individualism-collectivism: A study of cross-cultural researchers. *Journal of Cross-Cultural Psychology, 17*(2), 225-248.

Hunjan, S., & Towson, S. (2007). Virginity is Everything: Sexuality in the context of intimate partner violence in the South Asian community. In S. D. Dasgupta (Ed.), *Body evidence: Intimate violence against South Asian women in America* (pp. 53-67). New Jersey: Rutgers University Press.

Johnson, M. P. (2010). *A typology of domestic violence: Intimate terrorism, violent resistance, and situational couple violence*. New England: University Press of New England.

Johnson, P. S., & Johnson, J. A. (2001). The oppression of women in India. *Violence Against Women, 7*(9), 1051-1068.

Kahui, S., & Snively, S. (2014). *Measuring the economic costs of child abuse and intimate partner violence to New Zealand*: Wellington: MoreMedia Enterprises.

Kallivayalil, D. (2007). Feminist Therapy: Its Use and Implications for South Asian Immigrant Survivors of Domestic Violence. *Women & Therapy, 30*(3-4), 109-127. doi:10.1300/J015v30n03_09

Kallivayalil, D. (2010). Narratives of suffering of South Asian immigrant survivors of domestic violence. *Violence Against Women, 16*(7), 789-811.

Kanagaratnam, P., Mason, R., Hyman, I., Manuel, L., Berman, H., & Toner, B. (2012). Burden of Womanhood: Tamil Women's Perceptions of Coping with Intimate Partner Violence. *Journal of Family Violence, 27*(7), 647-658. doi:10.1007/s10896-012-9461-1

Kandiyoti, D. (1988). Bargaining with patriarchy. *Gender & Society, 2*(3), 274-290.

Kang, T. S., & Kang, G. E. (1983). Adjustment patterns of the Korean-American elderly: Case studies of ideal types. *Journal of Minority Aging, 8*, 47-55.

Kantor, G. K., Jasinski, J. L., & Aldarondo, E. (1994). Sociocultural status and incidence of marital violence in Hispanic families. *Violence and Victims, 9*(3), 207-222.

Kapur, R., & Cossman, B. (1996). *Subversive sites: Feminist engagements with law in India*. Thousand Oaks, California: Sage Publishing.

Kashima, Y., Yamaguchi, S., Kim, U., Choi, S.-C., Gelfand, M. J., & Yuki, M. (1995). Culture, gender, and self: A perspective from individualism-collectivism research. *Journal of Personality and Social Psychology, 69*(5), 925.

Kaufman Kantor, G., Aldorondo, E., & Janinski, J. (1998). *Dynamics of partner violence and types of abuse and abusers*. United States Air Force, NNFR Research Report. Retrieved from http://www.nnfr.org/research/pv/pv_ch1.html

Kellogg, N. D., & Menard, S. W. (2003). Violence among family members of children and adolescents evaluated for sexual abuse. *Child Abuse & Neglect, 27*(12), 1367-1376.

Kent, E. F. (2004). *Converting women: gender and Protestant Christianity in colonial South India*. New York: Oxford University Press

Kim, E., & Hogge, I. (2015). Intimate partner violence among Asian Indian women in the United States: Recognition of abuse and help-seeking attitudes. *International Journal of Mental Health, 44*(3), 200-214.

Koenig, M. A., Ahmed, S., Hossain, M. B., & Mozumder, A. K. A. (2003). Women's status and domestic violence in rural Bangladesh: individual-and community-level effects. *Demography, 40*(2), 269-288.

Kurien, P. A. (2003). To be or not to be South Asian: contemporary Indian American politics. *Journal of Asian American Studies, 6*(3), 261-288.

Lateef, S. (1999). Wife abuse among Indo-Fijians. In D. A. Counts, J. K. Brown & J. C. Campbell (Eds.), *To have and to hit: Cultural perspectives on wife beating* (pp. 216-233). Chicago: University of Illinois Press.

Lawrence, L. A. (1994). Women: brave--and battered: abuse turns South Asian women's new lives upside down in US. *Far Eastern Economic Review, 157*(32), 48-49.

Lazarus, R. S. (1993). *Coping theory and research: Past, present, and future*. New Jersey: Lawrence Erlbaum Associates.

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York: Springer.

Lelaurain, S., Fonte, D., Giger, J.-C., Guignard, S., & Lo Monaco, G. (2018). Legitimizing intimate partner violence: The role of romantic love and the mediating effect of patriarchal ideologies. *Journal of Interpersonal Violence*. doi: 10.1177/0886260518818427.

Lempert, L. B. (1996). Women's strategies for survival: Developing agency in abusive relationships. *Journal of Family Violence, 11*(3), 269-289. doi:10.1007/BF02336945

Lerner, G. (1986). *The creation of patriarchy*. United Kingdom: Oxford University Press.

Levinson, D. (1989). Family violence in cross-cultural perspective. In V. B. V. Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of Family Violence* (pp. 425-455). Boston: Springer.

Liao, M. S. (2006). Domestic violence among Asian Indian immigrant women: Risk factors, acculturation, and intervention. *Women & Therapy, 29*(1-2), 23-39.

Lim, I.-S. (1997). Korean immigrant women's challenge to gender inequality at home: The interplay of economic resources, gender, and family. *Gender & Society, 11*(1), 31-51.

Lindsey, M. A., Brandt, N. E., Becker, K. D., Lee, B. R., Barth, R. P., Daleiden, E. L., & Chorpita, B. F. (2014). Identifying the common elements of treatment engagement interventions in children's mental health services. *Clinical Child and Family Psychology Review, 17*(3), 283-298.

Lipsky, S., Caetano, R., Field, C. A., & Larkin, G. L. (2006). The Role of Intimate Partner Violence, Race, and Ethnicity in Help-Seeking Behaviors. *Ethnicity & health, 11*(1), 81-100. doi:10.1080/13557850500391410

Lischick, C. W. (2009). Divorce in the context of coercive control. In E. Stark & E. S. Buzawa (Eds.), *Violence against women in families and relationships* (Vol. 2). Santa Barbara, California: Praeger.

MacKinnon, C. A. (1983). Feminism, Marxism, method, and the state: Toward feminist jurisprudence. *Signs: Journal of women in culture and society, 8*(4), 635-658.

Madden, K., Scott, T., Sholapur, N., & Bhandari, M. (2016). Prevalence of intimate partner violence among South Asian women living in Southern Ontario. *Journal of immigrant and minority health, 18*(4), 913-920.

Mahapatra, N. (2012). South Asian women in the US and their experience of domestic violence. *Journal of Family Violence, 27*(5), 381-390.

Maker, A. H., Shah, P. V., & Agha, Z. (2005). Child physical abuse: Prevalence, characteristics, predictors, and beliefs about parent-child violence in South Asian, Middle Eastern, East Asian, and Latina women in the United States. *Journal of Interpersonal Violence, 20*(11), 1406-1428.

Markowitz, F. E. (2001). Attitudes and family violence: Linking intergenerational and cultural theories. *Journal of Family Violence, 16*(2), 205-218.

Mason, J. (2002). Designing qualitative research. In J. Mason (Ed.), *Qualitative researching* (Vol. 2, pp. 24-47). London: Sage.

Matheson, F. I. P., Daoud, N. P., Hamilton-Wright, S. M. A., Borenstein, H. B., Pedersen, C. M., & O'Campo, P. P. (2015). Where Did She Go? The Transformation of Self-Esteem, Self-Identity, and Mental Well-Being among Women Who Have Experienced Intimate Partner Violence. *Women's health issues, 25*(5), 561-569. doi: 10.1016/j.whi.2015.04.006

Mauthner, N. S., & Doucet, A. (2003). Reflexive accounts and accounts of reflexivity in qualitative data analysis. *Sociology, 37*(3), 413-431.

McGee, C. (2000). *Childhood experiences of domestic violence*. London, United Kingdom: Jessica Kingsley Publishers.

Mehrotra, M. (1999). The social construction of wife abuse: Experiences of Asian Indian women in the United States. *Violence Against Women, 5*(6), 619-640.

Menjívar, C., & Salcido, O. (2002). Immigrant women and domestic violence: Common experiences in different countries. *Gender & Society, 16*(6), 898-920.

Merchant, M. (2000). A comparative study of agencies assisting domestic violence victims: Does the South Asian community have special needs? *Journal of Social Distress and the Homeless, 9*(3), 249-259.

Merriam, S. B., & Tisdell, E. J. (2015). *Qualitative research: A guide to design and implementation* (4th ed.). San Francisco, CA: John Wiley & Sons.

Meyer, A., Wagner, B., & Dutton, M. A. (2010). The Relationship Between Battered Women's Causal Attributions for Violence and Coping Efforts. *Journal of Interpersonal Violence, 25*(5), 900-918. doi:10.1177/0886260509336965

Midlarsky, E., Venkataramani-Kothari, A., & Plante, M. (2006). Domestic violence in the Chinese and South Asian immigrant communities. *Annals of the New York Academy of Sciences, 1087*(1), 279-300.

Milani, A., Leschied, A., & Rodger, S. (2018). Beyond Cultural Sensitivity': Service Providers' Perspectives on Muslim Women Experiences of Intimate Partner Violence. *Journal of Muslim Mental Health, 12*(1), 49-75. doi: 10.3998/jmmh.10381607.0012.103

Ministry of Justice. (2018). *Topical report: Offences against New Zealand adults by family members*. Ministry of Justice, New Zealand Crime and Victims Survey. Retrieved from https://www.justice.govt.nz/assets/Documents/Publications/9ZU3Q-NZCVS-topical-report-Offences-by-family-members-Cycle-1-2018.pdf

Mintz, S. (1998). From patriarchy to androgyny and other myths: Placing men's family roles in historical perspective. In A. Booth & A. C. Crouter (Eds.), *Men in families: When do they get involved? What differences does it make?* Mahwah, New Jersey: Lawrence, Erlbaum Associates.

Mirza, N. (2017). South Asian women's experience of abuse by female affinal kin: a critique of mainstream conceptualisations of 'domestic abuse'. *Families, relationships and societies, 6*(3), 393-409.

Mitchell, J., Wight, M., Van Heerden, A., & Rochat, T. J. (2016). Intimate partner violence, HIV, and mental health: a triple epidemic of global proportions. *International Review of Psychiatry, 28*(5), 452-463.

Mitra-Sarkar, S., & Partheeban, P. (2011). Abandon all hope, ye who enter here: Understanding the problem of "eve-teasing" in Chennai, India [Technical Paper]. In *Women's issues in transportation: Summary of the 4th International Conference* (Vol. 2, pp. 74-84). doi: 10.17226/22887

Mudambi, A. (2019). South Asian American discourses: Engaging the yellow peril-model minority dialectic. *Howard Journal of Communications, 30*(3), 284-298.

Muehlenhard, C. L., & Kimes, L. A. (1999). The social construction of violence: The case of sexual and domestic violence. *Personality and Social Psychology Review, 3*(3), 234-245.

Myhill, A. (2015). Measuring coercive control: What can we learn from national population surveys? *Violence Against Women, 21*(3), 355-375.

Nah, K.-H. (1993). Perceived problems and service delivery for Korean immigrants. *Social Work, 38*(3), 289-296.

Natarajan, M. (2002). Domestic violence among immigrants from India: What we need to know—and what we should do. *International Journal of Comparative and Applied Criminal Justice, 26*(2), 301-321.

New Zealand Police. (2017). *Recorded crime victims and offender's statistics (RCVS and RCOS)*. Retrieved from https://www.police.govt.nz/about-us/publication/data-and-statistics-user-guides

Niaz, U. (2003). Violence against women in South Asian countries. *Archives of women's mental health, 6*(3), 173-184.

Nightingale, D., & Cromby, J. (1999). *Social constructionist psychology: A critical analysis of theory and practice*. United Kingdom: McGraw-Hill Education.

Nightingale, D., & Neilands, T. (1997). Understanding and practicing critical psychology *Critical psychology: An introduction* (pp. 68-84). California: Thousand Oaks

Nilsson, J. E., Brown, C., Russell, E. B., & Khamphakdy-Brown, S. (2008). Acculturation, partner violence, and psychological distress in refugee women from Somalia. *Journal of Interpersonal Violence, 23*(11), 1654-1663.

O'Doherty, L. J., Taft, A., McNair, R., & Hegarty, K. (2016). Fractured Identity in the Context of Intimate Partner Violence: Barriers to and Opportunities for Seeking Help in Health Settings. *Violence Against Women, 22*(2), 225-248. doi:10.1177/1077801215601248

Ozaki, R., & Otis, M. D. (2017). Gender equality, patriarchal cultural norms, and perpetration of intimate partner violence: Comparison of male university students in Asian and European cultural contexts. *Violence Against Women, 23*(9), 1076-1099.

Paulin, J., & Edgar, N. (2013). *Towards freedom from violence: New Zealand family violence statistics disaggregated by ethnicity*. Wellington, New Zealand: The Office of Ethnic Affairs. Retrieved from https://nzfvc.org.nz/family-violence-statistics

Pence, E., Paymar, M., Ritmeester, T., & Shepard, M. (1993). *Education groups for men who batter: The Duluth model*. New York: Springer Publishing Company.

Piispa, M. (2002). Complexity of patterns of violence against women in heterosexual partnerships. *Violence Against Women, 8*(7), 873-900.

Pillai, S. (2001). Domestic violence in New Zealand: An Asian immigrant perspective. *Economic and Political Weekly,* 965-974.

Prasad, S. (1999). Medicolegal response to violence against women in India. *Violence Against Women, 5*(5), 478-506.

Preisser, A. B. (1999). Domestic Violence in South Asian Communities in America: Advocacy and Intervention. *Violence Against Women, 5*(6), 684-699. doi:10.1177/10778019922181437

Puri, S. (2007). The Trap of Multiculturalism: Battered South Asian Women and Health Care. In S. D. Dasgupta (Ed.), *Body Evidence*. New Jersey: Rutgers University Press.

Purkayastha, B. (2000). Liminal lives: South Asian youth and domestic violence. *Journal of Social Distress and the Homeless, 9*(3), 201-219.

Purkayastha, B., Subramaniam, M., Desai, M., & Bose, S. (2003). The study of gender in India: A partial review. *Gender & Society, 17*(4), 503-524.

Rabbani, F., Qureshi, F., & Rizvi, N. (2008). Perspectives on domestic violence: case study from Karachi, Pakistan. *Eastern Mediterranean Health Journal, 14*(2), 415-426.

Rahmanipour, S., Kumar, S., & Simon-Kumar, R. (2019). Underreporting sexual violence among 'ethnic' migrant women: perspectives from Aotearoa/New Zealand. *Culture, Health & Sexuality, 21*(7), 837-852.

Raj, A., & Silverman, J. (2002). Violence against immigrant women: The roles of culture, context, and legal immigrant status on intimate partner violence. *Violence Against Women, 8*(3), 367-398.

Raj, A., & Silverman, J. G. (2003). Immigrant South Asian women at greater risk for injury from intimate partner violence. *American Journal of Public Health, 93*(3), 435-437.

Raj, A., & Silverman, J. G. (2007). Domestic violence help-seeking behaviors of South Asian battered women residing in the United States. *International Review of Victimology, 14*(1), 143-170.

Ryder, A. G., Alden, L. E., & Paulhus, D. L. (2000). Is acculturation unidimensional or bidimensional? A head-to-head comparison in the prediction of personality, self-identity, and adjustment. *Journal of Personality and Social Psychology, 79*(1), 49-65.

Saran, R. (2015). *Navigating model minority stereotypes: Asian Indian youth in South Asian diaspora*. New York: Routledge.

Sawrikar, P. (2013). A qualitative study on the pros and cons of ethnically matching culturally and linguistically diverse (CALD) client families and child protection caseworkers. *Children and Youth Services Review, 35*(2), 321-331.

Saxena, T. (2015). *Indian Protection of Women from Domestic Violence Act: Stumbling or Striving Ahead?* (Doctoral dissertation, Australian National University, Canberra, Australia). Retrieved from https://openresearch-repository.anu.edu.au/bitstream/1885/104291/1/SaxenaThesis%202015.pdf

Segal, U. A. (1991). Cultural variables in Asian Indian families. *Families in society, 72*(4), 233-242.

Simon-Kumar, R. (2019). *Ethnic perspectives on family violence in Aotearoa New Zealand*. Auckland, New Zealand: New Zealand Family Violence Clearinghouse.

Simon-Kumar, R., Kurian, P. A., Young-Silcock, F., & Narasimhan, N. (2017). Mobilising culture against domestic violence in migrant and ethnic communities: practitioner perspectives from Aotearoa/New Zealand. *Health & Social Care in the Community, 25*(4), 1387-1395.

Singh, A. A. (2009). Helping South Asian immigrant women use resilience strategies in

    healing from sexual abuse: A call for a culturally relevant model. *Women & Therapy,*

    32(4), 361-376.

Singh, A. A., & Hays, D. G. (2008). Feminist group counseling with South Asian women

    who have survived intimate partner violence. *The Journal for Specialists in Group*

    Work, 33(1), 84-102.

Smith, M. W. (1995). Ethics in Focus Groups: A Few Concerns. *Qualitative health research,*

    5(4), 478-486. doi:10.1177/104973239500500408

Sokoloff, N., & Dupont, I. (2005). Domestic violence at the intersections of race, class, and

    gender: Challenges and contributions to understanding violence against marginalized

    women in diverse communities. *Violence Against Women, 11*(1), 38-64.

Sokoloff, N. J. (2008). Expanding the Intersectional Paradigm to Better Understand Domestic

    Violence in Immigrant Communities. *Critical Criminology, 16*(4), 229-255.

    doi:10.1007/s10612-008-9059-3

Somasekhar, S. (2016). *"What will people think?" Indian Women and Domestic Violence in*

    Aotearoa/New Zealand. (Doctoral dissertation, University of Waikato, Hamilton, New

    Zealand). Retrieved from the University of Waikato Research Commons

    https://hdl.handle.net/10289/10592

Sorenson, S. B. (1996). Violence against women: Examining ethnic differences and

    commonalities. *Evaluation Review, 20*(2), 123-145.

Sorenson, S. B., & Telles, C. A. (1991). Self-reports of spousal violence in a Mexican-

    American and non-Hispanic white population. *Violence and Victims, 6*(1), 3-15.

Stark, E. (2009). *Coercive control: The entrapment of women in personal life*. Oxford, UK:

    Oxford University Press.

Stark, E., & Flitcraft, A. (1996). *Women at risk: Domestic violence and women's health*.

Thousand Oaks: Sage Publications.

Statistics New Zealand. (2013). *Ethnic Profiles*. Retrieved from

http://www.stats.govt.nz/Census/2013-census/profile-and-summary-reports/ethnic-

profiles.aspx?request_value=24726#24726

Straus, M. A. (2007). Processes explaining the concealment and distortion of evidence on

gender symmetry in partner violence. *European Journal on Criminal Policy and

Research, 13*(3-4), 227-232.

Sudha, S., & Rajan, S. (1999). Female demographic disadvantage in India 1981–1991: Sex

selective abortions and female infanticide. *Development and change, 30*(3), 585-618.

Sugirtharajah, S. (2002). Hinduism and feminism: some concerns. *Journal of Feminist

Studies in Religion, 18*(2), 97-104.

Taft, A., Hegarty, K., & Flood, M. (2001). Are men and women equally violent to intimate

partners? *Australian and New Zealand Journal of Public Health, 25*(6), 498-500.

Talbani, A., & Hasanali, P. (2000). Adolescent females between tradition and modernity:

Gender role socialization in South Asian immigrant culture. *Journal of Adolescence,

23*(5), 615-627.

Taylor, C. R., Landreth, S., & Bang, H.-K. (2005). Asian Americans in magazine advertising:

Portrayals of the "model minority". *Journal of Macromarketing, 25*(2), 163-174.

Thorpe, K. (2004). Reflective learning journals: From concept to practice. *Reflective practice,

5*(3), 327-343.

Tilley, D. S., & Brackley, M. (2004). Violent lives of women: Critical points for

intervention—Phase I focus groups. *Perspectives in Psychiatric Care, 40*(4), 157-170.

Tjaden, P., & Thoennes, N. (2000). Prevalence and consequences of male-to-female and female-to-male intimate partner violence as measured by the National Violence Against Women Survey. *Violence Against Women, 6*(2), 142-161.

Tonsing, K. N., & Tonsing, J. C. (2019). Exploring South Asian Women's Experiences of Domestic Violence and Help-Seeking Within the Sociocultural Context in Hong Kong. *Violence Against Women, 25*(12), 1417-1432. doi:10.1177/1077801218821443

Tse, S. (2007). Family violence in Asian communities, combining research and community development. *Social Policy Journal of New Zealand, 31*, 170-194.

Vandello, J. A., & Cohen, D. (2003). Male honor and female fidelity: Implicit cultural scripts that perpetuate domestic violence. *Journal of Personality and Social Psychology, 84*(5), 997-1010.

Venkataramani-Kothari, A. (2007). Understanding South Asian Immigrant Women's Experiences of Violence. In S. D. Dasgupta (Ed.), *Body evidence: Intimate violence against South Asian women in America* (pp. 11-23). New Jersey: Rutgers University Press.

Walby, S. (2009). *The cost of domestic violence: up-date 2009*. Retrieved from University of London Institutional Repository: https://openaccess.city.ac.uk/id/eprint/21695/1/

Weekes, J. C. (2010). Race-matching in psychotherapy: Findings, inconsistencies, and future directions. *Graduate Student Journal of Psychology, 12*, 8-13.

West, C. (2005). The "political gag order" has been lifted: Violence in ethnically diverse families. In N. J. Sokoloff & C. Pratt (Eds.), *Domestic violence at the margins: Readings in race, class, gender, and culture* (pp. 157-173). Piscataway, NJ: Rutgers University Press.

Willig, C. (1999). Beyond appearances: A critical realist approach to social constructionism. In D. Nightingale & J. Cromby (Eds.), *Social constructionist psychology: A critical analysis of theory and practice* (pp. 37-51). Buckingham: Open University Press.

Willig, C. (2001). *Introducing Qualitative Research in Psychology*. Buckingham: Open University Press.

World Health Organization. (2009). *Changing cultural and social norms that support violence*. Retrieved from https://www.who.int/violence_injury_prevention/violence/norms.pdf

World Health Organisation. (2012). *Understanding and addressing violence against women: Intimate partner violence*. Retrieved from http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf

Wright-St Clair, V. A., & Nayar, S. (2020). Resettling amidst a mood of loneliness: later-life Chinese, Indian and Korean immigrants in New Zealand. *Ageing & Society, 40*(11), 2393-2409.

Yarhouse, M. A., & Nowacki, S. K. (2007). The many meanings of marriage: Divergent perspectives seeking common ground. *The Family Journal, 15*(1), 36-45.

Yick, A. G., & Agbayani-Siewert, P. (1997). Perceptions of domestic violence in a Chinese American community. *Journal of Interpersonal Violence, 12*(6), 832-846.

Yllo, K., & Straus, M. A. (1990). Patriarchy and violence against wives: The impact of structural and normative factors. *Physical violence in American families: Risk factors and adaptations to violence in, 8*(145), 383-399.

Yoshihama, M., Blazevski, J., & Bybee, D. (2014). Enculturation and attitudes toward intimate partner violence and gender roles in an Asian Indian population: Implications for community-based prevention. *American Journal of Community Psychology, 53*(3-4), 249-260.

Yoshioka, M. R., & Choi, D. Y. (2005). Culture and interpersonal violence research:

Paradigm shift to create a full continuum of domestic violence services. *Journal of*

Interpersonal Violence, 20(4), 513-519.

Appendix A: Advertisement

Appendix B: Participant Information Sheet

Participant Information Sheet

PROJECT TITLE: South Asian Immigrant Women's Retrospective Accounts of Family Violence in New Zealand

PRINCIPAL INVESTIGATOR: Dr. Susan Cowie
CO-INVESTIGATOR: Dr. Claire Cartwright
STUDENT RESEARCHER: Anoosh Franklin

Who is doing the research?

Anoosh Franklin is a student at the University of Auckland who is completing her doctorate in clinical psychology. This research project is part of her degree. Anoosh's project will be overseen by Dr Susan Cowie, Senior Tutor, and Dr Claire Cartwright, Associate Professor from the School of Psychology, The University of Auckland.

What is the research about?

This study aims to develop a goof understanding of South Asian women's past experiences of family violence in New Zealand. Recent research shows that immigrant women who experience family violence have unique challenges due to migration related stress. At the moment there is very little research on South Asian women's experiences of family violence in New Zealand. In particular I want to ask you about any challenges you faced when you migrated to New Zealand, whether they were linked to your experience of family violence. If you accessed or received support from others, I would like to hear about your experience and whether having helpful people that understood your culture was important. If you did not access or receive support I would still like to hear about how you managed things. My hope is that your story will help to improve our understanding and support for South Asian women who experience family violence in New Zealand.

Who can take part?

You can volunteer to be in this study if you are aged 18 and above, identify as a South Asian immigrant (brought up with South Asian values), currently live in New Zealand, have past experiences of family violence in New Zealand but are now safe (no longer experiencing family violence or threats of family violence). You must have a history of experiencing violence by a South Asian husband/ partner/ boyfriend in New Zealand, with or without other forms of violence (e.g. in-law abuse and/or the abuse of children by a family member).

Husband/partner/ boyfriend violence can include any of the following

- *Physical: Slapping, hitting, kicking, beating, someone strangling you or attack using a weapon.*
- *Sexual: This is when someone attempts to make you take part in or watch a sexual act that you have not said yes to (this includes situations where you feel you cannot say yes or no).*
- *Emotional: When someone insults you, makes fun of you, shames you or threatens to harm you.*
- *Controlling behaviour: Cutting someone off from their family and friends, keeping track of their movements (e.g. stalking) and controlling someone's access to finances, jobs, education or health care.*

You must have been 18 or above at the time the violence started. The term 'South Asian' will include women from India, Pakistan, Bangladesh, Sri Lanka, Bhutan and Nepal as well as Indo-Fijian women.

The researcher needs 15 to 20 participants for her study. Once the correct number of participants has been reached the researcher will respectfully say no to any further interest.

What does the research involve?

If you take part in the study, you will be interviewed in person for about 60 and 90 minute. The interview will be audio recorded. If English is not your first language you can ask to have a trained interpreter translate for you. All interpreters will sign a privacy agreement before they can access any of your information. During the interview, you will be asked to talk about your experience of family violence in New Zealand, your migration story and what it's like to be a South Asian woman living in New Zealand. You will also be asked to comment on your experiences of seeking or receiving help for the family violence you experienced.

Interviews will be organized by email or telephone contact by the researcher, Anoosh Franklin, who will also be the interviewer. The interview will be arranged at a time and place that suits you. It can be completed at your home or work place, or at a private space on the University of Auckland grounds.

If you decide that you do not want to take part after the interview has begun, you can tell Anoosh and the interview will stop. You may also ask to stop audio recording at any time. The audio recorded interviews will be written out by the researcher or a University approved professional, who will sign a privacy agreement. You will have two weeks to look over the written out copy of your interview (transcript) to make sure it is correct. Things that you have said in your interview can be deleted from being included in the study up to four weeks after your interview if you change your mind. You can ask to receive a summary of the findings from the research.

Is it private?

The researcher will take all the necessary steps to make sure that your privacy will be protected. Made-up names will be used for identifiable information and access to the audiotapes and transcripts will be password protected and stored in a safe place. Your name will not be on the audio recording or transcript. Instead, you will be assigned a random code, which will be attached to the information you give to the project. Your stories from the interviews will be studied and the results of the study will be published in a thesis and in research articles. Small quotes may be used in these articles from your interview. However, care will be taken to make sure that no participant can be identified from her quotes. No-one, except the researcher, will know that you have taken part in the study.

The researcher may not be able to keep your information private if she believes there are concerns about your safety or someone else's safety. In this situation the researcher will stop the interview and let you know her concerns. The researcher will involve her supervisor and may also have to involve other organisations such as SHINE (an organisation which helps women who are experiencing family violence) or the police if the safety concerns are very serious. If this happens, your story will not be used in the project.

What happens to the information I give to the project after the research is completed?

Any information you give to this study will be stored for 10 years on a password protected computer belonging to the University of Auckland. After this date, it will be destroyed by the Primary Investigator. Information on paper will be shredded and electronic information will be permanently deleted.

How will my culture be respected?

Any research project that involves an ethnic minority group should take steps to make sure that inaccurate things are not said about this group as this can cause more harm than good. As a South Asian immigrant myself, I will share some common ground with you. However, having mostly lived outside of South Asia, I may need some help to understand parts of South Asian culture. Sehar Moughal will give me cultural advice for this project. She is a South Asian migrant woman living in New Zealand who has worked in the area of family violence alongside New Zealand's South Asian community for a number of years. Sehar will be allowed to request a brief summary of the results of this project. Sehar will not be able to access any information that could identify you.

What can I get out of participating?

Talking about past experiences of family violence can be a valuable experience as you will get a chance to think about you have been able to get through difficult times. You may also find the summary of the research's findings useful. All participants will be provided with a supermarket or petrol voucher to the value of $30. This is to thank you for your time and willingness to share your story. You have the right to leave the project at any time, and this will not affect receiving the voucher.

What if talking about this makes me upset or worried?

Talking about difficult things that you have been through may bring up some unpleasant emotions or memories. If after completing the interview, you feel upset or worried, and feel the need to talk to someone professional, you will be given the opportunity to speak to Dr. Claire Cartwright or Dr. Susan Cowie; two registered clinical psychologists. They will talk to you about your experiences in the interview and can refer you to an appropriate healthcare service, should you need it. The researcher will do her best to make sure interviews are conducted in a respectful way.

Here is a list of support services for women who have experienced family violence in New Zealand. We do however; encourage you to talk to the researcher first, if something comes up for you during the interview.

Women's Refuge: 0800 REFUGE or 0800 733 843

Shakti New Zealand: 0800SHAKTI or 0800742584

Shine: 0508-744-633

How do I take part?

If you are interested in completing an interview, please contact Anoosh at afra128@aucklanduni.ac.nz to

---

Researcher: Anoosh Franklin, Doctoral Student, School of Psychology, City Campus, University of Auckland. Email contact: afra128@auckland.ac.nz or 0210658045

Supervisor: Dr. Susan Cowie, School of Psychology, University of Auckland. Ph: (09) 373 7599 ext: 88513 or s.cowie@auckland.ac.nz

Head of Department: Prof. Ian Kirk, School of Psychology, University of Auckland. Ph: (09) 373 7599 ext:

---

express your interest.

Appendix C: Participant Consent Form

Participant Consent Form

(This consent form will be kept for 10 years)

Study: South Asian Immigrant Women's Retrospective Accounts of Family Violence in New Zealand

Researcher: Anoosh Franklin

Supervisors: Dr Susan Cowie, Senior Tutor, and Dr Claire Cartwright, Associate Professor from the School of Psychology, The University of Auckland.

I have read the Participant Information Sheet and have understood the nature of the research and why I have been invited. I have had the opportunity to ask questions and have them answered to my satisfaction. I understand that my participation in this study is voluntary

- I agree to take part in this research which involves a 60 to 90 minute face to face interview.

- I understand that I am free to withdraw participation at any time without giving a reason, and to withdraw any data traceable to me up to four weeks after the interview. Final date of withdrawal: ……..../………./………

- I understand that if I am unable to tell my story to the best of my ability in the English language, then the researcher can arrange to have a university approved interpreter who has signed a confidentiality agreement, help with communication during the research process. I would/ would not like to have an interpreter present at my interview.

- I recognize that my interview will be audio recorded and that I can ask to have the audio recorder turned off at any point without giving a reason.

- I understand that my audio recording will be transcribed by a University approved professional transcriber who has signed a confidentiality agreement.

- I understand that my information will be anonymised and kept confidential, as described in the Participant Information Sheet and that any quotes used in the researcher's thesis, publications or conference presentations will not contain information that could identify me.

- I understand that data will be kept for 10 years, after which time any data will be destroyed.

- I understand that I have the option of reviewing and amending the transcript from my interview for a period of two weeks following its receipt and before data analysis. Final date to review and make amendments ………../………. /………

- I wish / do not wish to receive the summary of findings.

  Email / Address to send summary:

……… ……………………….

Name _____

Signature _____ Date _____

Approved by the University of Auckland Human Participants Ethics Committee on: 08/11/2017 for three years, Reference Number: 020213

Appendix D: Demographic Questions

Participant Demographic Information

Name: _____

Age: _____

Residency Status currently: _____

Residency Status upon arrival to NZ: _____

How would you describe your ethnicity? _____

What is your country of origin? _____

When did you/ your family migrate to New Zealand? _____

How long have you lived in New Zealand for? _____

Religion/ Spirituality: _____

Caste (if relevant) _____

What suburb and city do you currently live in? _____

What is your occupation? _____

What is your highest level of educational achievement? _____

What is your first language? _____

Signature _____

Date _____

Appendix E: Interview Schedule

<div align="center">

INTERVIEW SCHEDULE

</div>

PROJECT TITLE: South Asian Immigrant Women's Retrospective Accounts of Family Violence in New Zealand

Participants will be asked for the following demographic information

- *Name*
- *Age*
- *Residency Status*
- *Current relationship status*
- *How would you describe your ethnicity?*
- *What is your country of origin?*
- *When did you/ your family migrate to New Zealand?*
- *How long have you lived in New Zealand for?*
- *Religion/ Spirituality*
- *Caste (if relevant)*
- *What suburb and city do you currently live in?*
- *What is your occupation?*
- *What is your highest level of educational achievement?*
- *What is your annual income?*
- *What is your first language?*
- *Do you have any children?*
    - *If so please state how many.*
    - *Who is their father?*
    - *When did you have your children?*

Focus on family of origin

- *Can you tell me about your family of origin and what it was like to grow up in your household?*
    - *Who was in your family of origin?*
    - *What was your living arrangement like? (e.g. did you live with grandparents)*
    - *Were there distinct roles in your family? (look for examples of gender roles)*
    - *Do you recall any family violence in your immediate or extended family?*
        - *If so, how was this received by other family members?*
        - *Did this have an effect on you? If so, can you tell me more about how it affected you?*
    - *What did you value about growing up in your family?*
- *Can you tell me about the place where you grew up?*
    - *What is it like to grow up and live there for a woman? (identify any similarities/ differences compared to men)*
    - *What were the expectations for men and women? Were they similar/ different?*
    - *Do you recall any family violence?*

- If so can you give me examples?
- How did others in the community respond?
  - What did you value about growing up in that particular community?

Focus on South Asian culture and family violence

- *What do you know about family violence in South Asia/ your country of origin?*
- *Can you think of any elements of South Asian culture that may contribute towards ...*
  - *Male to female partner abuse?*
  - *The abuse of children?*
  - *In-law abuse?*
  - *Maintaining family violence*
- *Can you think of elements of South Asian culture that may protect against*
  - *Male to female partner abuse?*
  - *The abuse of children?*
  - *In-law abuse?*
  - *The maintenance of family violence?*

Focus on migrating to New Zealand

- *Can you tell me about your migration story?*
  - *What made you decide to leave the country you were staying in? (push factors)*
  - *What made you chose New Zealand? (pull factors)*
  - *How do you find New Zealand and kiwi culture?*
  - *Who did you move to New Zealand with?*
  - *Who is in your social network? (i.e. mainly South Asians or others)*
  - *Where did you settle and have you moved since? If so, what made you move?*
  - *Can you tell me about any difficulties that you/ your family experienced when you moved to New Zealand? (explore migration-related challenges)*
    - *How did you deal with these challenges?*
  - *Was there anything that made settling in New Zealand easier?*

Focus on family violence in the South Asian immigrant community in New Zealand

- *What attitudes does New Zealand's South Asian immigrant community have towards family violence?*

- *What attitudes do they have towards ...*
  - *The abuser*
  - *The victim/survivor*
  - *A South Asian who helps the victim/survivor*
  - *A New Zealander who helps the victim/ survivor*
  - *South Asian family violence organisations e.g. Shakti, NZ Sikh women's association, Sahaayta*
  - *New Zealand organisations that deal with family violence: Women's refuge, Shine, Oranga Tamariki, police, courts*
- *Are there any factors that may make family violence particularly problematic for South Asians in New Zealand?*

Focus on your personal experience of family violence

- *Can you tell me about the abuse that your (ex) partner did towards you. Start from when you first became aware of it. (The following points are guidelines for foci)*
  - *When it started.*
  - *Identify if there was anything in particular that may have triggered the family violence.*
  - *If the participant identified migrant related challenges explore whether the participant believes these were linked to the family violence they experienced and if so, how?*
  - *The status of the participant's relationship with the man that was previously abusive towards them during the abuse. Married/ de facto relationship/ dating/ Other*
  - *Explore if the violence changed i.e. did it get worse/ better at any time?*
- *In what ways was your partner abusive towards you? (Look out for the following in the participant's answer)*
  - *Physical abuse: Slapping, hitting, kicking, beating, strangulation and assault by a weapon.*
  - *Sexual abuse: Forced sexual intercourse and other forms of sexual coercion.*
  - *Psychological/ emotional abuse: Insults, belittling, humiliation, intimidation and threats of harm*
  - *Controlling behaviours: Isolating someone from family and friends, monitoring their movements and restricting access to financial resources, employment, education or medical care*
- *Were there any other family members that were perpetrators or victims/ survivors of abuse? (Check for the following)*
  - *Violence towards children*
  - *In-law abuse*
  - *Did this occur at the same time as the abuse you experienced from your partner and were they linked in any way?*
- *How did experiencing family violence effect you?*

- o *Look for potential effects on social life, spirituality, mental health, identity, physical health and ability to carry out day to day tasks e.g. work, household chores…*
- *How does your experience of family violence as a South Asian compare to local New Zealanders' experiences of family violence?*

Questions about your experience of seeking OR receiving help for family violence in New Zealand

The next few questions will ask you about any help that you might have sought and/or received (without actively looking) when you were experiencing family violence. In this study we want to take a broad view of what 'help' means. Here are a few ideas but you are welcome to add to this list.

- – *'Help' can come in the form of a person or organisation.*
- – *'Help' can also refer to helpful information or helpful attitudes.*
- – *'Help' can be informal (e.g. family, friend, neighbour, church) or formal (e.g. help from WINZ, shelters, police, counsellor and courts).*
- – *It doesn't have to be talking to someone. It can be practical help (e.g. helping with chores, driving you to places) or financial help.*

- *Can you tell me about any help that you may have sought/ received (without actively looking) when you were experiencing family violence? (The following points are guidelines for foci)*
  - o *Whom/ What form of help*
  - o *If the participant sought help explore why they chose specific forms of help.*
  - o *What the experience was like.*
  - o *How did the helper respond?*
  - o *What aspects were helpful/unhelpful and why?*

- *In hindsight is there any form of support/ help that you didn't have but wish you had when you were experiencing family violence?*

- *What do you think would be important to understand about South Asian culture when helping South Asian families experiencing family violence in New Zealand?*
  - o *If it is important, what aspects of South Asian culture are important to understand?*
  - o *Is it important that the helper is also South Asian?*
  - o *If you have a personal experience of receiving culturally appropriate support can you talk about this?*

- *Can you tell me about any experiences (if any) you have had of seeking/ receiving formal support (WINZ, shelters, police, counsellor, legal help and helpful information)?*
    - *What services/info did you encounter?*
    - *What did you find helpful/ unhelpful?*
    - *Are there any formal support services for family violence in NZ that you did not interact with but are aware of?*
    - *In your opinion, how helpful and accessible are these support services for South Asian women?*
    - *Are there any gaps in formal support provision for South Asian women experiencing family violence in New Zealand?*

- *What services/ information would you share with another South Asian woman who is experiencing family violence?*

Appendix F: Transcriber Confidentiality Agreement

TRANSCRIBER CONFIDENTIALITY AGREEMENT

PROJECT TITLE: South Asian Immigrant Women's Retrospective Accounts of Family Violence in New Zealand

PRINCIPAL INVESTIGATOR: Dr. Susan Cowie
CO-INVESTIGATOR: Dr. Claire Cartwright
STUDENT RESEARCHER: Anoosh Franklin

I agree to transcribe the audio-recording for the above research project. I understand that the information contained within them is confidential and that I must not disclose or discuss it with anyone other than the researcher and her supervisors. I shall delete any copies that I may have made as part of the transcription process.

Name: _____

Signature: _____

Date: _____