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Abstract

Abuse of women in intimate relationships has gained international recognition as an important social phenomenon which has significant physical and psychological implications for those exposed to it (Heise, Pitanguy, & Germain, 1994). History has repeatedly shown that abuse does not end with separation or divorce but, rather, often increases at these times. This reality, in combination with the deleterious effects of the physical and emotional abuse within the relationship, affects the abused woman's ability to cope with the challenges faced when she leaves the abusive relationship. One of these challenges is to parent the children she may have. The role of mothering is of primary importance to these women. However, the competing issues associated with the abusive relationship and establishing a new life away from the abuser often leaves the women unprepared for the role of a single parent. One intervention that is available to assist women during this period in their lives is a parenting support group. A research study was initiated to evaluate the effect of one particular parenting support group on mothers who had left an abusive relationship.

The methodology of this study was guided by a feminist perspective. Data collection involved the use of focus groups. Participants were drawn from a pool of 16 women subjects who had participated in the parenting support group program. Participants were divided into two focus group sessions. Giorgi's (1975) four stage method of phenomenological analysis was used to analyze the data.
The findings of this study showed that women valued the parenting support group intervention and utilized the insight and skills they gained to move forward in their lives. The description of their experiences resulted in the development of four themes: 1) CONNECTION; 2) CONFIDENCE; 3) REFRAMING; and, 4) SELF-EFFICACY. The areas within these themes warranting further discussion were highlighted, and the implications for nursing in terms of practice, education and research were identified.
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CHAPTER ONE: INTRODUCTION

Background to the Problem

In the last decade, violence against women has increasingly gained recognition as an international social phenomenon that has significant physical and psychological implications for those exposed to it (Heise, Pitanguy, & Germain, 1994). These authors note that while many forms of violence against women exist, probably the most common form is abuse of women by an intimate partner - often referred to as wife battering. Accurate figures on wife battering are difficult to generate; however, the current research indicates that it is a phenomenon which crosses all social, religious, cultural, and economic boundaries (Moss & Taylor, 1991). MacLeod (1987) estimates that almost one million women in Canada are battered each year. Statistics Canada (1993) supports this finding in its survey of male violence against women. In a randomly selected sample of 12,300 women 18 years and older, 29% reported being physically assaulted by a current or former partner since the age of 16; 65% more than once.

Separation or divorce does not end the harassment or violence for women who have been abused (Henderson, 1990; Pagelow, 1984; Shalansky, 1995; Statistics Canada, 1993). Research indicates that the threat of violence actually increases when the woman leaves the relationship. The Statistics Canada (1993) survey found that “repeated or ongoing abuse was more commonly reported in marriages that had ended”. Three-quarters of women who experienced violence by past partners endured repeated
assaults, 41% on more than ten occasions" (p. 5). This same survey found that 19% of the women who reported being exposed to violence from a partner experienced this violence during or following separation from the abuser. One third of these reported cases involved an escalation in the severity of the violence during the separation from the abuser. Zorza (1995) notes that in the United States it has been reported that 75% of all women hospitalized due to domestic violence are separated or divorced. The evidence is strong to suggest that women who have been abused and have left their abusers are at risk for continued exposure to violence and the mental and physical consequences of this exposure (Peled, Jaffe, & Edleson, 1995). This is clearly a major stressor for women who leave an abusive relationship.

It is often difficult for women to openly acknowledge the occurrence of, or seek assistance in escaping, the violence associated with the abusive relationship (Dobash & Dobash, 1987; MacLeod, 1980). Many women do not feel that they would have the support or assistance of family members or friends if they admit to the abuse (Campbell, 1992). The decision to leave the abusive relationship, therefore, requires immense courage and determination for a better existence.

Many factors such as poverty, safety, and legal issues affect whether or not women leave an abusive relationship (Moss & Taylor, 1991). Often, however, women must consider not only their own survival, but also that of their children. In many cases the deciding factor to leave the relationship arises from concern for the children and the influence that the continuing
violence has on them (Bohn, 1990). When women do find the courage to
leave an abusive relationship, some seek the assistance of crisis centers and
transition houses to provide them with the initial support resources of safety,
shelter, counseling, and financial aid (Humphreys, 1993). Shelter workers and
other women who have been abused provide the support and practical advice
required for abused women to survive apart from the abusive relationship.

Over 70% of abused women who enter transition houses have children
who accompany them (MacLeod, 1987). Abused women who are mothers
face the additional challenge of being single parents, often with limited
personal support networks, once they leave the abusive relationship. The role
of mothering is of primary importance to these women; however, the
competing issues associated with the abusive relationship and establishing a
new life away from the abuser often leave them unprepared for the role of a
single parent. In addition, many of the women have been socialized in a
patriarchal culture to the extent that they are unable to envision parenting their
children alone (Bilinkoff, 1995).

Children are often witnesses to the violence associated with the
abusive relationship (Ericksen, & Henderson, 1992; Jaffe, Wolfe, & Wilson,
1990). These children are also at risk for developing physical and mental
health concerns because of their exposure to violent parental role models and
the constant fear of physical abuse directed towards their mother and/or
themselves (Rosenbaum & O'Leary, 1981). Research studies report that the
children experience emotional and behavioral difficulties that have tremendous potential for influencing their adjustment as adults (Hughes, 1986). Research also suggests that children who witness abuse of their mothers are at greater risk for becoming victims or perpetrators of violence later in life, thus perpetuating "the cycle of violence" (Cappell & Heiner, 1990; Kalmuss, 1984).

In a study which examined the children's experience with witnessing abuse of their mothers, it was found that children who had witnessed spouse abuse experienced increased anxiety, altered and ineffective coping behaviors which put them at risk for future mental and physical health problems (Ericksen & Henderson, 1992). The children in this study described feelings of fear, uncertainty, sadness, and powerlessness in directing their lives. In addition, they displayed an alarming acceptance of violence as a method of coping with conflict resolution. Two additional studies also examined the abused women's perceptions of their children's needs after leaving an abusive relationship (Henderson, 1990 & 1993). It was noted that the mothers, while aware of the difficulties that their children were experiencing, were too immersed in their own issues to focus on their children's needs. The mothers appeared to lack confidence in dealing with their own issues and were not receiving organized support to do so. These women's unavoidable preoccupation with their own issues, therefore, detracted from their ability to parent their children effectively, during a time when the children most needed their mothers.
Children who witness abuse often display altered behavior patterns and unique needs as a result of their exposure to an abusive environment, making them difficult children to parent (Henderson, 1993). In fact, the difficulty with parenting continues, even after the women leave the abusive relationship. In one qualitative study involving abused women in a transition house, the women reported that their most difficult initial problem was dealing with the children who had been separated from the abusers (Henderson, 1990). Women who leave abusive relationships, therefore, need support in dealing with the children’s reactions to witnessing violence and to leaving the abusive parent. Mothers also require additional support in dealing with their own feelings related to the challenges associated with parenting these children.

Research related to parenting after leaving an abusive relationship is scarce. It appears, however, that even women who have been out of an abusive relationship for over a year continue to perceive parenting as an ongoing challenge (Henderson, 1993). Women report being unable to meet their children’s needs effectively as they struggle to resolve their own issues related to the abuse.

Nurses are in a unique position to intervene in the cycle of violence associated with abuse of women, both in the acute and community care settings. Contact with women through the emergency department and hospital settings, prenatal classes, postnatal follow-up visits, and well-baby clinics provide nurses with the opportunity for identification of, and ongoing intervention for, the survivors of abuse (Henderson, & Ericksen, 1994).
is also the potential for ongoing nursing involvement with women who have been abused through women's transition shelters, support groups, and private counseling. Nursing's focus on holistic care and the capacity of nurses to initiate and foster a close nurse/client relationship facilitate the building of a trusting and effective relationship between nurses and women who have been abused (Campbell, Smith McKenna, Torres, Sheridan, & Landenburger, 1993; Henderson & Ericksen, 1994). Henderson and Ericksen (1994) suggest that "focusing on wellness and wholeness differentiates nursing from other health care professionals and places nurses in an optimal position to empower and assist families for which violence is a major concern" (p. 12). Chez (1994) states that empowerment of women who have been abused should be the primary goal of intervention for health care providers. To ensure fulfillment of this role, however, nurses must recognize the impact of the abusive relationship on the survivors of the abuse both after the initial separation from the abuser as well as in the long term.

Issues such as ongoing threats or acts of violence from the abuser, custody and access difficulties, financial insecurity, and decreased self-confidence and worth all affect the physical and mental health of women who have been abused. Women recognize that the unique needs of their children should also be addressed, but report feeling too stressed and overwhelmed by the other competing issues to meet this role effectively (Henderson, 1993). These mothers, therefore, might benefit from support and assistance to address the numerous issues associated with leaving the abusive relationship.
Effective intervention regarding parenting support for mothers who have been abused may provide them with more resources to meet their children's needs, thereby reducing the mother's feelings of stress and inadequacy in their parenting roles.

As part of an ongoing study, a parenting support group intervention (Appendix A) has been developed and implemented in response to previous study findings regarding perceptions of abused women and their children who had left abusive relationships (Ericksen & Henderson 1992; Henderson, 1990 & 1993). This parenting support group intervention was designed to 1) decrease the mother's stress in the parenting role and increase their perceptions of support; and 2) decrease the children's anxiety and increase their coping skills. The purpose of this study was to assist women in gaining coping skills to deal with the general issues facing them, which would give them more energy to deal with their children's needs. This in turn would enhance their interaction with their children and improve the children's coping skills and decrease their anxiety. It was hypothesized by the researchers that mothers would be better able to meet the needs of their children if intervention was directed at dealing with the general issues associated with surviving away from the abusive relationship. The enhanced parent/child interaction would reduce the risk of intragenerational transmission of violence.

In this program, both formative and summative program evaluation methods were implemented by the researchers to provide data regarding the participants' perceptions of social support and stress following participation in
the parenting support program as well as the children's perceptions of coping and anxiety. The formative evaluation method consisted of an individual interview with each of the women during the course of the program. The group facilitators also kept individual field notes regarding perceived strengths and weaknesses of each session.

Summative evaluation methods included: 1) the collection of demographic statistics on both the mothers and the children; 2) the administration of questionnaires measuring the mothers' level of stress related to parenting and perceived level of social support and; 3) the administration of questionnaires measuring the children's levels of anxiety, stress and coping strategies. These questionnaires were administered to the mothers and their children upon their recruitment into the research study and again at one and three months after completion of the parenting support program.

I became involved with the above described research study through my role as the research assistant who was responsible for the administration of the summative questionnaires to the mothers and children. During the data collection process I was often able to observe the interactional processes between the mothers and their children. In addition, there were opportunities for informal discussions with the mothers regarding their perception of their current life situation and their perceptions of the changes since participating in the parenting support program. I noticed that the women's perceptions of their lives since participating in the study seemed to vary, as did their experiences with their children. As a result of these sessions, I believed that a qualitative
study that focused on the experiences of these women who participated in the parenting support program study would provide valuable information regarding the effect that such a parenting support group has in meeting their needs. In addition, valuable information regarding their perceptions of their parenting approaches since participating in the parenting support group could be obtained. Such findings would be helpful for health professionals planning future support programs related to parenting support for women who have been abused.

Problem Statement

Research indicates that women who have left an abusive relationship continue to experience ongoing stress from various sources including ongoing abuse from the ex-partners, lack of social support (Ericksen & Henderson, 1992; Henderson, 1990 & 1993; Statistics Canada, 1993), and ongoing custody and access issues (Shalansky, 1995). These women must contend with these issues in addition to meeting the various behavioral and emotional needs of their children. One consistent area of concern that has been identified by these women is the effect that witnessing the abuse has on their children (Henderson, 1990; Humphreys, 1993). How to parent these children effectively is also a concern.

Research related to the evaluation of the effectiveness of support services for women, beyond the initial transition period of leaving the abusive relationship, is limited. There is a need to focus on support interventions, aimed at meeting the long-term needs of abused women as they struggle to
distance themselves from the abusers and recover from the violence (Henderson, 1990). The previously discussed parenting support group intervention had been developed to address the long-term needs identified by women in previous studies. Research focused on the evaluation of this support intervention is also essential to ascertain its effectiveness in meeting the needs of abused women, as often a determining factor as to whether a program continues is the evaluation results. With small numbers of participants, it is important to utilize both quantitative and qualitative methods to develop a full scope of evaluation data.

Research directed at understanding the effect that a parenting support group intervention has on the lives of abused women provides a valuable addition to the limited body of knowledge on the long-term support needs of these women. It is also necessary for the planning and provision of ongoing interventions to support these women. Such evaluation should occur in collaboration with the women, as they are in the best position to determine whether their needs are being met. A qualitative study which elicits the experiences and perceptions of the women's lives following participation in a parenting support group was required in order to develop a more thorough understanding of support interventions for abused women.

**Purpose**

The purpose of this study is to understand what effect participation in a parenting support group has on mothers who have left an abusive relationship. The women's perceptions of their lives following exposure to the
group have not been previously examined. The findings from this study can assist in the evaluation of the parenting support group and, in turn, the planning of future support interventions for abused women.

**Objectives**

1. To explore women’s perceptions of their experiences following exposure to the parenting support group.

2. To identify factors which had an impact on how women experienced the group.

3. To identify implications for program planning for future parenting support interventions for battered women.

**Conceptual Perspective**

A feminist perspective provides the direction for this research study. A feminist perspective advocates “starting with women’s experiences, putting women first, making connections between our experiences as women and analyzing how women live in society. It means recognizing that women are oppressed socially and economically and that all of us are as women affected by women’s oppression” (Barnsley, 1985, p. 8). This viewpoint acknowledges women’s experiences and locates them in the historical context of a patriarchal hierarchy. A feminist approach, therefore, directed me to consider a qualitative methodology that encouraged the “voice” of women in describing issues related to the abusive relationship experience, thereby validating both the women and their experiences (MacPherson, 1988). I believe that the women involved in the parenting support group intervention provide valuable
insight regarding how participation in the group has affected their lives. Furthermore, I believe that choosing a perspective that encourages the women to share their experiences and perceptions provides the opportunity for significant contribution in the planning of future support programs. This sharing process may also validate the women's perceptions and experiences and empower the women involved in this study in their search for meaning in their experiences.

**Research Question**

What perceptions do mothers who have left an abusive relationship have of the effect of a parenting support group program on their lives?

**Definition of Terms**

1) Abuse is defined as:

   the loss of dignity, control, and safety as well as the feeling of powerlessness and entrapment experienced by women who are direct victims of ongoing or repeated physical, psychological, economic, sexual and/or verbal violence or who are subject to persistent threats or witnessing of such violence against their children, other relatives, friends ..., by their boyfriends, husbands, live-in lovers, ex-husbands or ex-partners, whether male or female. (MacLeod, 1987, p. 16).

2) For the purpose of this study an abusive relationship is defined as one where there is an unequal power balance in the relationship between a man and woman, and where the man exercises dominance over the woman through actions of intimidation, violent force, or the threat of violence. The
intent in the abusive relationship is to exercise control over the woman either physically or psychologically through the inducement of fear (MacLeod, 1987).

3) Effect is defined as “the overall reaction or impression produced by something seen, heard, or done” (Landau, 1980, p.202).

4) For the purpose of this study parenting is defined as the nurturing relationship between children and their mothers. This relationship includes the ability of the mother to attend not only to the children’s physical needs, but also to their psychological, emotional, and spiritual needs. The nurturing relationship also includes the interaction that occurs between the mother and her children as this occurs.

5) Parenting support is defined as the provision of assistance to the parent by individuals outside of the parent-child relationship to facilitate the nurturing process of parenting. The assistance can be tangible (i.e. financial, daycare provision) or less concrete (i.e. empathetic listening, practical suggestions).

6) For the purpose of this study the parenting support program refers to a ten week intervention program currently being implemented by nurse researchers as part of an ongoing research study (Appendix A).

7) Participation refers to the women’s attendance and completion of the previously defined ten week parenting support program.
Assumptions

The assumptions that underlie this study are as follows:

1) All of the women who participated in the proposed study experienced some effect as a result of their participation in the parenting support program.

2) The women who participated in the proposed study were able to describe their experiences as they related to participation in the parenting support group.

3) The women who participated in the proposed study were representative of all women who have participated in the parenting support group program.

Limitations

The limitations of this study are as follows:

1) The parenting support group study was limited to women who can speak English. The results of this study are, therefore, limited in terms of cultural considerations related to women who have been abused.

2) Due to their exposure to abuse and the isolating nature of this social issue, the women in this study may have limited ability to form a trusting relationship and thus have been less than candid when relating their experiences.

3) The women in this study may have been selective in what they disclosed due to ongoing custody disputes and may have feared that their ex-partners would gain access to information generated from this study and use it for adverse legal purposes.
4) The interactional nature of the focus group may have resulted in biased results due to selected group processes such as domination by a particular participant.

5) The interactional nature of focus groups produced responses from the participants that were not independent of each other. The generalisability of the results are therefore restricted.

Significance of the Study

Literature related to long-term formal support for women who have been abused is limited. It is clear that mothers who have left an abusive relationship continue to have complex support needs that extend beyond the initial separation from the abuser. Research demonstrates that concerns related to parenting and perceptions of social support have been reported by abused women as significant ongoing issues (Henderson, 1990; Shalansky, 1995). Funding constraints for transition houses, however, are frequently cited as restricting the opportunity for follow-up programs (Henderson, 1990; Humphreys, 1993).

Nurses' holistic view of the individual and advanced therapeutic communication skills enables them to effectively assess and address some of the complex needs of abused women and their children. The development of a parenting support group program to address the voiced concerns of the women in relation to their parenting skills falls within the scope of nursing's caring mandate (Ericksen & Henderson, 1992). Findings from a qualitative evaluation of this parenting support program, reported from the perspective of
the women who participated in the program, will have implications for future program development and implementation. Evaluation which is conducted from the perspective of the women may also serve to validate the women's experiences and empower them in their journey from violence to independence.

**Summary**

This study was developed in order to understand the effect participation in a parenting support group has on mothers who have left an abusive relationship. This thesis is organized into six chapters. Chapter One outlines the background and significance to the study and provides the purpose, objectives and conceptual perspective directing the research process. The research question to be addressed is articulated, and the definition of terms, assumptions and limitations of the study are identified. A detailed literature review as it relates to issues and experiences of women surrounding abuse is presented in Chapter Two. Chapter Three outlines the qualitative research design, methods, sample and ethical considerations pertaining to this study. Chapter Four describes the women's perceptions of their lives since participating in the parenting support group, and presents the researcher's interpretation of these stories. Chapter Five provides a discussion of the research findings. Chapter Six summarizes the research study, outlining the study's implications for research, education and practice.
CHAPTER TWO: LITERATURE REVIEW

Introduction

In this chapter, a literature review is presented to briefly describe the various conceptualizations of women's experience with abuse, examine the issues for women after leaving the abusive relationship, explore the various support interventions designed for abused women, and outline the methods utilized to evaluate the support interventions. Although considerable research has been conducted in the area of abuse, there is limited published research related to the long-term effects of abusive relationships on both mothers and their children.

This literature review provides the background and context which directs this research study. The three themes presented are: 1) Abuse - women's experience; 2) Issues for women after leaving an abusive relationship, and; 3) Support interventions and their evaluation.

Abuse - Women's Experience

Considerable research has been directed at analyzing the abusive relationship in an attempt to describe women's experience as they leave or stay in the relationship. One of the pioneer studies was conducted by Parker and Schumacher (1977) who attempted to define the term "battered wife syndrome". The researchers described the symptom complex, identifying specific behaviors that had to occur in the relationship before the syndrome had occurred. It is of interest to note that the syndrome in this early definition applied only to married women, and the wife had to have been physically
beaten deliberately and severely more than three times. In this controlled pilot study, Parker and Schumacher (1977) also identified a separate group of women whom they labeled “violence syndrome averters”, women who were able to reduce the violence by seeking help or leaving the abusive relationship. They noted that women in this group were less likely to have witnessed spousal abuse as children.

MacLeod (1987), in a rare Canadian-based study, was able to provide insight regarding the abusive relationship experience from the women’s perspective. The women in this study described the experience as occurring within an environment of “a shifting, ambiguous type of power” (p.41). Many of the women reported an unusually intense and loving connection with their abuser when they first began their relationship which, upon reflection, also involved the abuser demonstrating behaviors associated with possessiveness and isolation. MacLeod also noted that in many cases where physical abuse occurred, the women were unable to identify exactly when it began, citing instead a gradual increase in verbal, financial and emotional abuse which became a normal part of the relationship. MacLeod noted that after prolonged battering women begin to display similar behavioral and psychological traits. They report decreased self-esteem and an increased sense of powerlessness over their situation. They display emotional dependence on the abuser, blaming themselves for the violence. Often the women report staying in the relationship “for the sake of the family” (p. 44). MacLeod (1987) noted that the majority of the women who reported the violence or left did so out of the hope
that the abuse would stop and the relationship would return to the pre-violent state. It was noted that most women left out of concern for their children, in order to create a violence-free environment. The specific stages of the abusive relationship and the ongoing issues, if the women left the relationship, were not identified in this study. Valuable insight was provided, however, into the emotional and psychological decision-making processes of women who had been abused.

Henderson (1989) examined the use of social support for women who had left abuse to enter a transition shelter. Four stages of support were identified by Henderson following interviews with eight women. The first stage of support was reassurance. During this stage, the women are attempting to gather information to make sense of the past. The second stage of support was analysis, where the women worked to put the past into perspective. The third stage involved reciprocity, during which the women who had worked through the first two stages of support gave support to women new to the shelter. This stage was seen as significant for both groups of women. The final stage was that of independence, where the women adjusted to their new existence and began to experience feelings of self-growth. This study examined women beyond the experience of residing in the abusive relationship and examined the factor of social support as intrinsic to influencing the adjustment of abused women after leaving the relationship.

Landenburger's (1989) study also examined the experience of abuse, including leaving the relationship, from the women's perspective.
Landenburger describes the experience of abused women as having four stages: binding, enduring, disengaging, and recovering. In the first three stages, the abuse is initiated and usually escalates in frequency and intensity until, in the end of the disengaging stage, women remove themselves from the relationship. Landenburger contends that the recovery stage begins when women leave the relationship and begin to formulate a new identity apart from their abusive partner. The women work to meet basic survival needs for food, shelter, and safety, while struggling to overcome and find meaning in their ongoing emotional turmoil related to the ending of the relationship.

During the recovery stage many women who have been abused also feel the need to justify to others the reason for leaving the relationship while concurrently grieving the loss of the relationship. The grieving can be intensified if children are involved, as the women may feel responsible for breaking up the family or may be blamed by the children for this occurrence. Women in this stage, therefore, are attempting to find meaning for themselves and a balance in their lives, often while contending with their children’s reactions to the past abuse, new living arrangements, and ongoing contact with the abuser through custody and access visits to the children. Developing research indicates that the abuse of these women by the ex-partner often continues even after leaving the relationship and may actually escalate in frequency and intensity (Henderson, 1992; Pagelow, 1984; Shalansky, 1995; Statistics Canada, 1993; Zorza, 1995). It is within the fourth stage of the
abusive relationship experience as described by Landenburger (1989) that this study will be addressed.

**Issues for Women After Leaving an Abusive Relationship**

As identified by Landenburger (1989), the work involved in the recovery stage of an abusive relationship requires intense emotional and physical energy. The women need to work through the grief associated with ending the relationship and deal with the physical and emotional losses associated with this process (Turner & Shapiro, 1986). Unfortunately, the general public and the families of women who have been abused may not understand the rationale for the women's grief in this context and may not be supportive of the women's feelings. The isolating nature of the abusive relationship, therefore, may leave these women with limited support persons to listen to their concerns.

In addition to working through the complex issues associated with coming to terms with the end of the relationship, most abused women have an additional stressor to deal with - that of the children that they take with them when leaving the relationship. When the women find the courage to leave an abusive relationship, they do so with the hope of escaping the violence and raising their children in a non-violent environment. As previously alluded to, however, women often find themselves and their children at increased risk for violence and harassment from the abuser (Pagelow, 1984; Shalansky, 1995; Zorza, 1995). In addition, the women are faced with new concerns including custody and access issues (Shalansky, 1995), financial insecurity, and
behavioral adjustments of the children (Henderson, 1990; Peled, Jaffe, & Edleson, 1995)

**Custody and Access Issues**

It is assumed by society that the violence ends when a woman leaves the abusive ex-partner (Sampselle, 1991). As previously stated, however, the risk of violence actually increases for women after leaving the abusive relationship (Statistics Canada, 1993; Zorza, 1995). This often occurs as a result of the abusive ex-partner having access to the women and their children through court-imposed visitation access. It is during the encounter with the exchange of the children that both the women and the children are at increased risk for acts of violence or harassment from the abuser (Shalansky, 1995; Zorza, 1995). Women who have left an abusive relationship are therefore faced with the ongoing stressor of fear for their safety and that of their children as a result of a court-imposed custody and access order. To deny the abuser custody would incite the consequence of legal sanction because “few judges treat her protecting herself from even threatened physical abuse as a legitimate reason for her to refuse him custody” (Zorza, 1995 p.156).

The literature related to court-imposed custody and access issues for women who have left an abusive relationship is limited (Shalansky, 1995; Zorza, 1995). Zorza notes that these women are often disadvantaged and intimidated by the custody action process. The women are often viewed by the court system as less stable than the abuser because of decreased
financial resources, potential homelessness, and inability to maintain employment (Zorza, 1995). Usually these problems are intensified by the abuser. Zorza notes that “many batterers refuse to let their partners work, thus undermining the mother’s self-confidence and leaving them disadvantaged in the workplace” (p. 151). It is also noted that 20% of abused women who are working are harassed by the abusers either at work or on the phone to the extent that they lose their jobs (Zorza, 1995). Finally, the ongoing legal harassment of the abusers exacts a tremendous financial cost to the women in such items as legal expenses, unlisted phone numbers, moving expenses, and counseling services. The women are therefore dealing with numerous obstacles initiated by the abuser which often do not receive consideration by the courts.

Shalansky (1995) conducted a phenomenological study in which five women were interviewed to ascertain their experiences surrounding continuing exposure to an abusive ex-partner as a result of a court-imposed custody order. The findings of this study indicate that the abused woman's ongoing contact with, and potential abuse from, the ex-partner is a significant stressor in woman's ability to function on a day-to-day basis. The women reported continued abuse from their partners made possible by this court-imposed access to the children. This abuse is present in the forms of “harassment, threats, intimidation, and using the children against the mother” (p.132). While the women reported feelings of anger, powerlessness, and despair in relation to the legal restrictions allowing the abuser access to the children, they
expressed the most anger related to the ongoing abuse and their inability to make it stop. The women felt that the law and the legal system did not support them in their struggle to end the abuse, and this lack of support created feelings of powerlessness. The “powerlessness against both their abuser and the legal system led to feelings of despair” (p.132).

Shalansky’s (1995) study supports the need for both formal and informal support interventions which will increase the women’s feelings of empowerment, thereby decreasing their feelings of anger and despair. The introduction of interventions aimed at empowering the mothers will also have benefits for the children. Kline, Tschann, Johnston and Wallerstein (1989) note that “a supportive empathetic relationship with the custodial parent has been found to protect the child against both parental psychopathology and marital conflict” (p.436).

**Behavioral Reactions of the Children**

Considerable research has been devoted to the effects that exposure to maternal abuse has on child witnesses to the abuse (Ericksen & Henderson, 1992; Gage, 1990; Hilberman & Munson, 1978; Hughes, 1986 & 1988; Rosenbaum, & O'Leary, 1981; Wolfe, & Korsch, 1994). In general, the findings of these reports indicate that children who have witnessed abuse of their mothers exhibit behaviors such as depression, withdrawal, low self-esteem, rebellion, and hyperactivity. In addition, the literature indicates that childhood witnessing of maternal abuse is a strong indicator of being a perpetrator of abuse (Cappell, & Heiner, 1990; Kalmuss, 1984; Rosenbaum, &
O’Leary, 1981). It is noted that males who have grown up in an abusive home
commit ten times the rate of wife abuse as do those who grew up in non-
violent homes (Sudermann, Jaffe, & Hastings, 1995). According to
Sudermann et al., females who have been exposed to violence in childhood
are not more inclined to choose an abusive spouse; however, once in the
violent relationship, they are less likely to leave. The mothers of these
children, therefore, are challenged by the various behavioral responses of
their children during a period when they are possibly resolving their own
issues related to the abusive relationship.

The mothers, while attempting to deal with the behavioral and
emotional needs of the children, often must also contend with continual
manipulation of the children by the abuser during access visitation (Shalansky,
1995). The abuser may blame the disintegration of the family on the mother
and encourage the child to “act out” towards the mother. The abuser may also
attempt to force a reconciliation of the marriage by threatening to obtain
custody of, or kidnap, the children (Elbow, 1982). The ongoing connection
with the abuser, therefore, can have an impact on the woman’s ability to deal
effectively with the needs of the children. Subsequently, how to parent these
children effectively is also an ongoing issue for the woman.

Support Interventions and Their Evaluation

It is obvious from the previously described literature that abused
women often require support in addressing the complex issues surrounding
the abusive relationship experience. Mackey (1992) notes that “there is
empirical evidence that suggests a positive relationship between mental and physical health and social networks and social support on the one hand, and between coping strategies and adjustment to subsequent traumas on the other" (p. 50). Ledingham and Crombie (1988) noted that the "social support systems of parents, and perhaps especially mothers, appear to have special significance for child development" (p. 13). The "buffering effect" of social support systems for the mothers would, therefore, help them to address the ongoing issues associated with their battering and empower them to meet their children's needs.

One study examined the impact of a support program on mothers' perceptions of social support and parenting stress (Telleen, Herzog, & Kilbane, 1989). The researchers noted that numerous interventions have been developed to provide social support for parents and to enhance parenting competence. One of the goals of this study was to discover whether a self-help discussion group would provide mothers with a sense of social support. The second goal was to ascertain the effect that the group had on the mother's perception of parenting stress, measured by examining their perception of the child's manageability. The findings from this study noted that parenting support groups do make a noticeable difference in mother's perceptions of social support and have a positive effect on the maternal/child interaction.

The use of group therapy as a method of providing support is used extensively by transition house staff (Humphreys, 1993; Rhodes, & Zelman,
1986). Through the sharing of experiences and successes, abused women are often able to gain insight into and work through aspects of their own experience with abuse. In doing so, they gain confidence in their ability to create a non-violent environment for themselves and their children. While literature regarding evaluation of group therapy as a method of social support for women who have been abused is limited, available literature suggests favorable results (Rhodes, & Zelman, 1986). Use of group therapy appears to be positive “in meeting the following goals: strengthening mutually supportive aspects of parent-child functioning in a period of crisis, enhancing cohesiveness and mental support among families at the shelter,... and assessing the ongoing mental health needs of the children and their mothers” (Rhodes & Zelman, 1986, p. 130).

There is, however; an absence of literature related to the development of support services which address the long-term needs of women who have been abused. One reason cited for this is the lack of funding for transition houses to provide services to abused women after they leave the shelters (Humphreys, 1993). Nursing is becoming more involved in addressing the problem of abuse of women by conducting research in this area of study and providing information and direction to its members (Canadian Nurses Association, 1992). In particular, nurse researchers are getting involved in looking at the support needs of women who have left abusive relationships (Ericksen & Henderson, 1992; Henderson, 1993). Two of the nurses who have identified this need as significant are Ericksen and Henderson, who have
designed the parenting support group intervention, previously described in this study. Qualitative evaluation of this intervention would provide valuable insight into women's perception of the group as a social support intervention and would facilitate future program planning of subsequent parenting groups for women who have been abused. The philosophical commitment of nursing to providing client-centered care and the reality of fiscal restraint for future programs directs nurses to provide solid evidence of program efficacy through qualitative and quantitative methods.

Summary

This literature review has examined the experience of the abuse from the perspective of the women, the ongoing issues for women once they have left the violent relationship, and support interventions and their evaluation. Literature related to the ongoing issues of women following separation from the abusive relationship is scarce. The literature that focuses on issues for women who have left an abusive relationship revolves around the initial transition period immediately following the separation (Ericksen & Henderson, 1992; Humphreys, 1993). Some areas require further development to fully explicate the complex issues of abused women and their children. It is obvious, however, that interventions which address the long-term support needs of these women need to be developed and evaluated.

In summary, the provision of social support has been demonstrated in the literature to enhance the ability of individuals to cope with life experiences. A parenting support group intervention which addresses the previously
identified issues of women who have been abused, therefore, could provide these women with valuable skills to cope with not only the effects of the ongoing issues related to the battering, but also the challenges of parenting their children.

In particular, research directed at understanding the long-term issues for women who have left an abusive relationship needs to be expanded. This research would facilitate the development of more interventions designed to meet not only the needs of the mothers, but also those of the children. Qualitative research which evaluates the effect of interventions, in particular a parenting support program for mothers who have left an abusive relationship, would contribute significantly to the nurse's understanding of the support provision services that these women require to progress through the recovery stage (Landenburger, 1989) of the abusive relationship.
CHAPTER THREE: METHOD

Introduction

The purpose of this study is to understand what effect participation in a parenting support group has on mothers who have left an abusive relationship. A qualitative descriptive program evaluation approach, utilizing a focus group method, has been chosen to address the research question.

Polit and Hungler (1991) delineate descriptive research as aiming to describe phenomena rather than explain them. Descriptive research is often used when a field of research is new or when there are inconclusive findings. Evaluative research is defined as applied research utilized to "appraise the operation and impact of social action programmes" (Luker, 1981, p. 87). A review of a number of nursing textbooks reveals that very little has been reported about the value or implications of qualitative program evaluation methods (Bulkeldee, & McMahon, 1994; LoBiondo-Wood, & Haber, 1990; Morse, 1988 & 1992; Munhall, & Oiler, 1986). I believe that it is important with client-centered care to involve the client as a partner in all aspects of program delivery, including the evaluation component.

In this chapter I will provide an overview of the utility of descriptive research as it applies to program evaluation. The methodology of focus groups is outlined, and the sampling, data collection, and analysis procedures discussed.
Descriptive Research - Use of Focus Groups

The descriptive methodology of this study was guided by a feminist perspective to research inquiry. As mentioned earlier, a feminist perspective encourages the "voice" of women and multiple perspectives of a given experience. Focus groups were chosen as an appropriate research method as they also encourage the interaction of participants in sharing perceptions and experiences surrounding a common theme, and capitalize on the collective experience of group members. Krueger (1994) notes that "the intent of focus groups is not to infer but to understand, not to generalize but to determine the range, not to make statements about the population but to provide insights about how people perceive a situation" (p. 87). Focus groups encourage substantive discussion, in which the exchange of perceptions and experiences serve as the "fundamental data" (Morgan, 1988, p. 26). As such, the results of focus group research can be reported independently or as part of a larger research project.

Sample Selection and Recruitment

Sample

Krueger (1988) notes that with a focus group method "the driving force in participant selection is the purpose of the study" (p. 87). The purpose of this study is to discover what effect participation in a parenting support group has on mothers who have left an abusive relationship. Theoretical sampling procedures were utilized as I was interested in a specific population, with unique perceptions and experiences. Theoretical sampling involves non-
random, conscious selection of subjects for a study by the researcher (Krueger, 1988).

The literature indicates that choice of focus group size is reasonably flexible; the size is determined by practical and substantive considerations including cost, logistics, and group dynamics (Krueger, 1994; Morgan, 1988). Morgan (1988) recommends focus groups contain between four to twelve participants in order to obtain optimum participant interaction. Krueger (1994) notes that smaller focus groups of four to six participants is advantageous with specialized audiences who "may have a great dealt to share about the topic or have had intense or lengthy experiences with the topic of discussion" (p. 79.).

Consideration was given to this criterion as well as recognition of the scope of this study. Due to the intensity of the subject matter, I determined that a sample size of four to six participants per group was optimum to address the research question.

**Recruitment**

The participants were drawn from a pool of 16 women subjects who had participated in the parenting support group program and could, therefore, address the proposed research question. Criteria for inclusion into the sample included: 1) mothers who had left an abusive relationship, and 2) participated in the previously described parenting support program. The participants of this study were known to me from my previous contact as a research assistant in the study involving the women's initial participation in the parenting support group program.
A letter of information (Appendix B) was mailed to each of the women by myself. Women who were interested in being participants in this study were invited to leave their name and telephone number with the referral agency which provides services for women who have been abused and which provided the facility for the parenting support program sessions. If interest was expressed, I then contacted the potential participants and provided further explanation regarding the nature of the study. The date and time of the focus group was arranged during this contact session.

The participants were again provided with a letter of information regarding the study when they attended the focus group session. In addition, I provided clarification of the information to the participants at this time as necessary. The participants were then requested to sign a letter of consent (Appendix C), following explanation of the study, indicating that they understood the purpose and approach of the study and agreed to participate. It was emphasized strongly to each participant, both in the information letter and during telephone contact, that they were in no way obligated to participate in the study as a result of previous contact with this researcher in the parenting support group study. The final sample size consisted of seven women spread over two focus groups who met the above described criteria.

Data Collection

Determining the number of focus groups to be conducted is crucial to the saturation of coding categories in the analysis stage of the study (Morgan, 1988). While one group is never sufficient, as the data produced may be
altered as a result of the dynamics of the group, using too many groups is unreasonable both in terms of economics and time constraints. Morgan (1988) notes that "the more homogeneous your groups are in terms of both background and role-based perspectives, the fewer [groups] you need" (p.42).

While the participants had varied social and economic backgrounds, the common themes of being victims of abuse, having child witnesses to the abuse, and having participated in the parenting support program lended a homogeneity to the group which allowed for fewer groups. Based on this consideration I conducted the study using two separate focus groups. The first group consisted of four participants, and the second contained three. The second group contained less than the ideal sample size previously discussed, despite follow-up letters of recruitment. I decided, however, to proceed with the focus group and remained cognizant that the range of perceptions and experiences within this group could be limited by its size.

The first focus group session took place at an agency which provides services for women who have been abused. This facility previously sponsored the space for the parenting support program and was, therefore, a familiar environment to all of the participants. Due to the unavailability of the agency facilities, the second focus group session was conducted in a hotel room setting. All of the participants agreed in advance to the hotel location.

The focus group sessions took place in the evening and lasted approximately one to one and a half hours. A period of 15-30 minutes was allocated to the enjoyment of light refreshments prior to commencement of the
focus group interview. This served as an opportunity for the women to become familiar or reacquainted with each other, thereby creating the opportunity for more open dialogue.

The focus group sessions were audio-taped using two separate tape recorders. The transcriptionist responsible for transcribing the recorded data was present to facilitate the operation of the tape recorders. The transcriptionist consented to signing a confidentiality form prior to assisting with the data collection. This was necessary due to the sensitivity of the subject matter. The participants were also informed, in the letter of information, that there would be a transcriptionist present during the focus group session. Consent for her presence was included on the consent form which participants had signed prior to engaging in the focus group session.

While focus groups require the presence of a moderator, the level of moderator involvement can be determined prior to implementation of the session (Morgan, 1988). When examining knowledge from the participants perspectives, it is recommended that a low level of moderator involvement be established, in order to encourage a forum in which the participant's views, and not those of the researcher's, are able to be heard. The use of non-directive questions and low level moderation involves a limited amount of input by the group facilitator into the ongoing group discussion. Low level moderation also encourages the participants to speak for themselves in a spontaneous manner and organize their discussion around subjects that are viewed as important by them. A low level moderator approach was chosen for
this study. This is consistent with a feminist approach to data collection, encouraging the 'voice' of women, and enhances the opportunity for data saturation.

The format of the focus group sessions followed the suggestions by Krueger (1994) which are outlined as follows; “1) the welcome; 2) an overview of the topic; 3) the ground rules; 4) the first question” (p. 112). Trigger questions were introduced to stimulate the discussion and give some direction to the participants (Appendix D). I believed that by carefully sequencing the questions during the focus group sessions, the quality of the data would be enhanced; this systematic process encouraged flow of participant perceptions and experiences in a more organized fashion. In addition, however, spontaneous questions were introduced in both focus group sessions. These questions, while kept to a minimum, encouraged spontaneity and group control of the data saturation process. At the end of the focus group sessions, I presented a brief summary of the main perceptions and viewpoints, allowing the participants to judge and correct the accuracy of my perceptions.

Following the focus group sessions, I constructed field notes relating to any factors considered significant in the session, including personal insights which could be incorporated into the analysis.

**Data Analysis**

As with other types of qualitative research designs, data analysis for a program evaluation design occurs concurrently with data collection (Krueger, 1994). Data analysis for this study was conducted using a content analysis
strategy. I initially read the transcripts from the focus group sessions to develop a sense of the data. A second reading of the data occurred with attention to the seven factors suggested by Krueger (1994) when conducting focus group analysis: "1) consider the words; 2) consider the context; 3) consider the internal consistency; 4) consider the frequency or extensiveness of comments; 5) consider the intensity of the comments; 6) consider the specificity of responses; 7) find the big ideas" (p. 149-151). These big ideas were coded as "meaning units" as outlined by Giorgi (1975). During the entire analysis process, careful attention was directed to the words used by the participants as well as the context in which those words occurred. As suggested by Giorgi, the next step in the analysis process involved clarification or elaboration of the meaning units "by relating them to each other" (p. 74). Further steps that were utilized are outlined by Giorgi as follows:

1) The researcher reflects on the given units, still identified in the concrete language of the participants, and transforms them into more abstract language.,

2) The researcher then integrates and synthesizes the insights into a descriptive structure of the meaning of the experience. This final product is then communicated to other researchers for critique and confirmation of the findings (p.75).

The synthesized version of the findings were reviewed by the thesis committee for confirmation.
Reliability and Validity

In qualitative research, reliability is measured by the auditability of a study (Sandelowski, 1986). This is established by the presence of a clear decision trail that can lead another researcher to replicate the study with comparable results, given similar data, perspective and situations. Auditability of this study was maintained by the provision of a clear description of the research process including data collection methodology, data analysis procedures and measures used for interpretation of results. Ongoing consultation with members of the thesis committee also ensured the presence of a decision trail to protect against reliability issues.

"Validity is the degree to which the procedure really measures what it proposes to measure" (Krueger, 1994, p. 31). Internal validity in qualitative research is measured in terms of the credibility of the study. Sandelowski (1986) describes credibility being present in a qualitative study when "... it presents such faithful descriptions or interpretations of a human experience that the people having that experience would immediately recognize it from those descriptions or interpretations as their own " (p. 30). A threat to the credibility of qualitative research exists in the significance of the investigator-subject relationship. Theoretically, it is possible that knowing the investigator from a previous or current relationship may inhibit participant disclosure, especially if there is an ongoing relationship. I assumed that previous contact with the participants would affect the interactive nature of the researcher-participant relationship. I believe, however, that the quality of this relationship
contributed, rather than detracted from the data collection process, as the participants and myself experienced a bond with each other which facilitated an openness in expression of feelings.

Sandelowski (1986) states that “the credibility of qualitative research is enhanced when investigators describe and interpret their own behavior and experiences as researchers in relation to the behavior and experiences of subjects” (p.30). To ensure credibility of this study, my perceptions were summarized to the participants at the end of each focus group session, in order to allow for validation. Furthermore, I constructed detailed field notes outlining my perceptions following each session, and these were incorporated into the analysis as indicated. During the analysis phase, I also kept a journal of my perceptions and beliefs and discussed these with members of the thesis committee.

A further threat to the validity of qualitative research is ‘holistic fallacy’ (Sandelowski, 1986). This is when the researcher attempts to present the data as more patterned or regular than it really is. The findings of the study should be well-grounded in the participants’ experiences and reflect both the typical and atypical elements of their life experiences. “Check ins” with members of the thesis committee assisted in ensuring that the credibility and fittingness of the research study findings were maintained (Sandelowski, 1986).

**Ethical Considerations**

The women who were eligible for participation in this study had previously been subjects in an ongoing research study related to the parenting
support group program. As I was involved in the previous study as a research assistant, a relationship with these women had been established prior to this study. The potential participants were provided with both written and verbal reassurance that this prior relationship in no way obligated them to participate in this study.

The possibility of subject burden was also considered and addressed, as the participants had recently been involved in the previous study. The participants were informed that their participation was voluntary, and that they could withdraw at any point in the research process. The participants were aware that this study was closely connected with the ongoing research study that they previously participated in which was, in turn, linked to the agency that provides services for women who have been abused. The participants were, therefore, overtly reassured that their refusal or withdrawal from participation in this study would not in any way jeopardize future access to services provided by the agency.

As mentioned earlier, women who have been abused continue to be at risk for continuation of the violence from the abuser, even after leaving the abusive relationship. In addition, these women are often embroiled in custody and other litigation with the ex-partners, putting them in a further vulnerable position due to the scrutiny of their lives by the courts and their ex-partners. The women who participated in this study were, therefore, assured strict adherence to measures ensuring their confidentiality and anonymity. These measures included the following: 1) use of a first name only when obtaining
consent from the participants; 2) a master list which identified the participants with a corresponding focus group; 3) allocation of code numbers for each taped focus session interview to identify the audiotapes and the interview transcriptions with the participants; 4) use of fictitious names in the documentation of the findings; 5) dissemination of the findings of this study provided to the participants through the agency which provides services for battered women. The master list was accessible only to myself, for the purpose of tracking of participants during analysis of the tapes and transcripts. This list was destroyed upon completion of the study, and the audiotapes erased following typed transcription. Access to the coded typed transcripts was restricted to myself and members of the thesis committee. All material which was relevant to this study and/or identifies the participants including the consent form, master list of participants, focus group audiotapes and coded transcripts was secured in a locked filing cabinet. Ethical approval of this study was obtained from the University of British Columbia Ethics Review Committee.

Summary

In this chapter, the research design and methodology were discussed. This descriptive program evaluation was operationalised through the use of focus group interviews. An explanation of this process, including sampling, recruitment, and data collection procedures germane to focus group methodology was presented. Data analysis procedures were described in
detail, and reliability and validity issues addressed in the study outlined.

Finally, the ethical considerations relevant to this study were discussed.
CHAPTER FOUR: FINDINGS

Introduction

In this chapter, the women's perceptions of the effect that the parenting support group (PSG) has had on their lives is described through participant statements and my interpretation of the data. A brief description of each participant and relevant demographics are provided as a context to the experiences described by the women. As mentioned in the previous chapter, the steps of Giorgi's (1975) method of data analysis were used to identify central themes arising from the data. The components that make up these themes are discussed to give a descriptive structure to the meaning of the women's experience. I have also incorporated field note observations into the analysis, where applicable, to provide the context for specific narratives.

The Women's Experience - Description of the Participants

As previously mentioned, the sample involved two separate focus groups, consisting of four women in the first group (Group A) and three in the second (Group B).

The participants in Group A were Sheila, Susan, Caroline and Emma.\(^1\) The first three women had attended the PSG during the same ten week period. Emma had participated in a later PSG with other women. All of these women had been out of the PSG for over one year.

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\(^1\) In all cases, the women's names are fictitious and specific details leading to their identification altered to protect their anonymity. The essence of their experience, however, has been maintained.
Sheila had been separated from her abuser for two years prior to her participation in the PSG. She had two children ages eight and twelve.

Susan had been separated from her abuser for less than one year prior to her participation in the PSG. She was beginning legal proceedings related to custody and access just prior to the start of the PSG. She had four children, ranging in age from seven to twenty years of age.

Caroline had been separated less than one year from her abuser prior to the PSG. She had been involved extensively in legal proceedings related to custody and access issues, restraint orders, and criminal charges against her abuser. Prior to and following the PSG, Caroline lived in constant threat of physical violence from her abuser, despite the presence of an order of restraint against him. The level of danger to her was so significant that the police expressed concern for her safety and provided her with specialized alarms and informal surveillance of her home. She had two children ages four and ten years.

Emma had been separated from her abuser for over two years. She had a legal custody and access arrangement with her abuser prior to joining the PSG. She had three children ranging from three to nine years of age.

Group B consisted of three women, Katrina, Heather, and Vicky. These women had participated in the same PSG and had been out of the group for less than six months.

Katrina had been separated from her abuser for two years. She had completed legal proceedings related to custody and access prior to
participating in the PSG; however, she was awaiting a court date to resolve issues re: financial support from the abuser. She had one three-year-old child.

Heather had been separated approximately one year from her abuser prior to joining the PSG. Like Katrina, she had completed legal proceedings related to custody and access, but had not received a legal decision regarding financial support from her abuser. She had two children ages one and five years of age.

Vicky had been separated from her abuser less than one year prior to joining the PSG. Throughout the time of the PSG group, and up to the focus group session for this study, Vicky was involved in legal proceedings against her abuser related to custody, access and financial support. She had two children ages five and eight years of age.

Prior to joining the PSG, the women in both focus groups perceived themselves as not being in control of their lives in relation to their role as a parent, their ability to remove themselves from the abuser, and their ability to control their future. The women reported that when they joined the PSG they were feeling various levels of guilt, low self-esteem and powerlessness.

The women in both of the focus groups described experiences that were significant to them as a result of their participation in the PSG. The women generally perceived that many of the changes that had occurred in their lives following participation in the PSG had evolved as a result of changes within themselves - not as a result of a change in their external world.
Heather described the change in herself with the following example, "I'm more sure of what I'm doing...I mean that's a huge change in me."

In describing their experiences with the parenting support group, four themes were apparent: 1) connection, 2) confidence, 3) reframing, and 4) self-efficacy. These themes are non-linear in nature, with both backward and forward movement. Specifically, women who had participated in the PSG found that the feelings of connection experienced during the PSG experience led to subsequent feelings of confidence, the ability to reframe the experience and to feel in control of self.

Each of these themes will now be described with supporting narratives from the women. The narratives presented within the description of each of these themes are meant to illustrate the women's perceptions and represent their voice. This is in keeping with a feminist perspective to research which encourages the researcher to recognize the women's perceptions as the "truth" and the most accurate interpretation of their experience (Campbell, & Bunting, 1991).

Through the forum of the PSG, the women formed a connection with each other. The sharing of experiences and the meanings that these experiences held for them facilitated the emergence of the subsequent thematic processes described in this chapter (see Figure 1).
Figure 1: Conceptualization of the Women’s Experiences Following Participation in a Parenting Support Group

- **Self-Efficacy**
  - Planning for the Future
  - Defining Ongoing Support Needs

- **Reframing**
  - Self-acceptance
  - Boundaries with Abuser
  - Assertiveness with External Forces

- **Confidence**
  - Intimate Relationships with Children
  - Parenting Skill

- **Shared Meaning**
  - Shared Experience

**Parenting Support Group**
- provides a forum for shared meaning and shared experience
Connection: Shared Meaning and Shared Experience

Connection is described in the literature as a relational process and a state of being within a relationship. Connection occurs as a result of relational and behavioral factors and involves the knowing of self and others in relation to self. The "recognizing of similarities" (Perry, 1996, p. 9) or "finding the common bond" (Davies & Oberle, 1990, p. 89) are a part of the knowing that serve as an impetus for the occurrence of connection. The actions of knowing that support connection include valuing of the other, spending time, presence, being there, engagement and communication (Davies & Oberle, 1990). These actions support the formation of connection both at the individual and at the group level.

The women described these actions when talking about their PSG experience. They felt that the PSG provided a forum for shared meaning and experiences leading to feelings of connection. Caroline indicated that the PSG was different from any other group she had participated in as, "I perceived that we were in the same boat, and that was really helpful...and that you know that every person in the group goes through the same thing...". Vicky also commented on how she felt the PSG provided the means for allowing the women to share their experiences, and as a result, "I felt connected to you all". All of the women emphatically stated that, as a result of being able to share meaning and experiences in a manner that created feelings of connection to each other, the PSG was unique.
The women stated that, prior to participating in the PSG, they did not have people to talk to who could understand their past history with abuse and the effect that it still had on their lives. They believed that the abuse had somehow separated them from others and they were unable to explain their lives. They believed that the experience of their abusive relationships had not only isolated them from friends and family, but also affected how they had viewed themselves. Vicky related the feelings of many of the women in her focus group in the following example:

I find that abuse really changes your life and it really separates you from other people in a lot of ways. You need to feel normal. You need to feel that you’re okay. I think that’s what the group did for me.

While the perception of being isolated did not change as a result of participating in the PSG, the women perceived the group as having provided them with the opportunity to share experiences, not previously voiced or understood, in an environment that facilitated shared meaning. All of the women related vignettes about participation in the PSG in which the feeling of “being heard and understood” framed their perception of their subsequent life experiences. The women felt a connection to each other as a result of having experienced the common denominators of being mothers and having left abusive relationships. All of the participants perceived a greater and more immediate level of understanding and acceptance from the other members of the group than they could achieve with either family members or friends.
The women felt that they could tell their story to women in the PSG without providing the same amount of background as they would to others who had not experienced abuse. Many of the women perceived that being able to start their story at a point that they considered important was a liberating experience unique to this PSG. Sheila described her perception of this experience in the following example:

Being abused was like a full time job. Like how do you explain ten years of your life in a social situation when people ask you if you’re divorced...I still feel somewhat set apart like almost as if I’ve had this experience but it’s a common experience with these ladies.

Susan related an example of her sense of shared meaning when she described her experience in the PSG after a custody hearing with her abuser. She had been preparing for the court custody hearing prior to participating in the PSG, and, on one occasion, had shared her fears related to the outcome of this hearing with the group:

When I talked to other people around me, they didn’t have that experience. They didn’t understand the legal terminology and what the process is or it’s very different from what is normal logic....When you talk to a friend about it and the friend says well I don’t understand. Why don’t you just do this. It doesn’t work like that, you know. [In the PSG]...I could tell my story in a short form and they’d understood what was going on because you’ve all been there. That made a big difference. And then when I won that was...This was the first place I
wanted to tell because there was an understanding. Other people around me weren't going to understand what I had won and how great that in fact was, so that made a huge difference.

The sense of shared meaning, regardless of age, socioeconomic background, or degree of previous abuse appeared to help normalize the women's struggle to make sense of their lives. Vicky identified herself as significantly older than the other two women in her PSG. Initially upon joining the PSG, she had believed that her age and difference in background would be factors deterring from her identifying with others in her group. She was surprised to find that the commonality of the abusive experience transcended other differences. She explained:

I mean like probably I'm older than you guys, but that doesn't mean anything. But it's just like you know, we didn't grow up together. We don't live in the same neighborhood. We would never really ...like I've walked by you on the street I don't know how many times and not known you. Now I know you.

Vicky, Heather, and Katrina continue to live very different lives; however, following the PSG, they have maintained regular contact with each other. They indicate that the past abuse, their lives as mothers, and the bond formed while in the PSG serve as the "glue" for their continued friendship. Heather described her feelings related to these relationships very passionately:

We have one thing in common above anything else, and we're moms who have been through abusive relationships. But all this still keeps
happening. So we’re connected that way and it’s no matter what, we have that. Doesn’t matter anything about us, it’s special.

All of the women appeared to value the connection that they were able to establish with each other in the PSG. The sense of shared meaning was perceived by the women as essential to the development of a group atmosphere in which they could discuss common issues and explore new strategies to use in various aspects of their lives.

Susan described her perception of the PSG atmosphere and how it facilitated her ability to “open up” to the other women:

This was the first time I’ve done support group. I think I was hesitant. I like to keep things very, very private, so this was really difficult for me to do...I got more out of this than I have through counselors that I’ve dealt with one on one.

Confidence

A common issue for all of the women prior to joining the PSG was their ability to effectively parent their children. The women were able to discuss their concerns in an accepting atmosphere and share their experiences. From these discussions numerous strategies and ideas related to parenting were presented by the women and the PSG facilitator. The women perceived that this sharing experience generated many positive changes in their ability to develop intimate relationships with and effectively parent their children. This section outlines these components within the theme of confidence.
An increased sense of confidence was one outcome described by the women that resulted from their shared experience and subsequent connection in the PSG. Confidence can be described as a feeling of self-assurance or certainty in one’s ability (Bullock, & Pridham, 1988; Gross, & Tucker, 1994). Furthermore, confidence often involves a sense of accomplishment as a result of successfully achieving a predetermined goal or outcome (Bullock, & Pridham, 1988). All but one of the women in the study reported various examples of increased confidence since participating in the PSG. The one woman who perceived that her confidence had decreased believed that the ongoing harassment from her abuser had interfered with her ability to move forward in her life. The kinds of situations where confidence was evidenced are described within the components of: 1) intimate relationships with children; and, 2) parenting skill. These components are presented and discussed with examples provided from the women.

**Intimate Relationships with Children**

Several of the women discussed the relationships that they had with their children prior to joining the PSG. They verbalized feelings related to their children and how they addressed those feelings following support and/or suggestions from the PSG. The women described the difficulty they had experienced in establishing or maintaining intimate relationships with their children prior to participating in the PSG. Following participation in the PSG, many of the women achieved some understanding of their relationship difficulties with their children. This understanding often led to improved
intimate relationships. For example, Sheila stated that prior to the PSG, she often felt ill-equipped to effectively deal with her daughter’s temper tantrums and to provide support to her daughter during those periods. She went on to describe how the PSG provided her with some insight to relate to her daughter with more positive results:

I started thinking a little bit about what we had done in group which was a bit of a self-acceptance thing...I just suddenly said to my daughter, “You know, we all have our place in this life and you’re okay by me”. After that, things just started to change... It was a pivotal point!

Two of the women, Emma and Sheila, described situations in which one child in each family was perceived as interfering with the possibility of family balance, and how participating in the PSG gave them insight into this situation. Emma described how she felt alienated from one child and ill-equipped to connect with him in a constructive manner prior to the PSG, and how coming to the PSG and discussing these issues assisted her in addressing her feelings:

My boy,...I was going through a really, really hard time with him...not because I had left his father or but probably that affected him too...Coming to the group...like I’d come feeling like I hated him...So I got a lot of support coming here to do with him...stick it out and wait it out and...It’s taken two years but...that was sort of affecting the whole family, my relationship with the girls....I couldn’t talk to my girls because he was so disruptive...So we were really down on him and if he weren’t
here we would be able to have fun and do things that we would like to
do because we were the three females and we were all older. So I
guess coming helped me vent a little bit about him and have people
say that's normal...

Sheila described her relationship with her daughters before
participating in the PSG. As mentioned previously, she perceived that one
daughter had completely disrupted the family dynamics with her temper
tantrums. Sheila raised this issue during the PSG and practiced strategies that
she was subsequently able to use with her daughter at home. She perceived
that following participation in the PSG she was able to recognize her role in
addressing these dynamics, strengthening the intimacy bond with her
daughter:

I started to think that P.[other daughter] and I were getting down on her
all the time because she had, she wielded this incredible power over
the household with these temper tantrums and she was always the
person out of the circle. And when I went forward and said "hey you're
the same as the rest of us", things really started to change. I never
thought I'd see the day...It's like seeing this blossom happening like
she's so vibrant now.

In both situations, the women perceived that participating in the
discussion with the PSG and sharing their experiences and strategies
facilitated their understanding of their children and diffused the episodes of
confrontation in these relationships.
Many of the women believed that they were more confident in their communication patterns with their children following the PSG, and they felt that this had subsequently strengthened the intimacy bonds with their children. Caroline discussed the communication patterns she had with her son, describing it before joining the PSG and the improvement in their relationship that occurred over time:

We lived in a household where you just didn’t say how you were doing or anything. You just kind of kept everything to yourself and kept quiet. B. is still very private. I think that I give him lots to think about anyway even if he doesn’t vocalize it. He still is a bit more open than he was before and I don’t think he’s as angry at me as he was before because for a long time he was really, really angry and he thought that it was all my fault. Our relationship is a lot better now. It’s still not wonderfully open or anything like that, but it’s a lot better.

Many of the women perceived that the ongoing contact their children had with the abuser threatened the intimacy relationship the children had with them as mothers. They often described feelings of resentment towards the abuser related to practical issues such as missed support check payments, custody and access issues; more specifically, they described the eroding effect the abuser had on their authority as a parent.

Caroline related how she felt threatened by the influence that her abuser had over the children and described her actions prior to participating in the PSG as being driven by feelings of inadequacy as a mother and single
parent. These feelings were as a result of the frequent episodes of harassment from her abuser in the form of written letters to her friends accusing her of psychologically harming the children. Caroline perceived the PSG as instrumental in helping her to separate the acts of her abuser from her role as a parent. Subsequently, her level of anxiety related to maintaining an intimacy bond was reduced:

I feel a lot stronger than I did before. I feel like I'm a better parent...
The family is going to stay together. We're not going to all break apart...I feel more comfortable handling situations, that would have really put me in a crisis before...temper tantrums and things like that. I'm more capable of dealing with it now that I was before. So no matter how hard it gets, it's better.

**Parenting Skill**

Many of the women related stories of situations in which they had felt ill-equipped to parent their children prior to the PSG. Several of the examples related to episodes where their children had displayed outbursts of aggression or anger. The women reflected on how the PSG had provided them with the tools and confidence to deal with these situations. Katrina related her experience with her son prior to joining the PSG. She noted that there were numerous situations in which she felt inadequate in her ability to set boundaries or deal with his behavior. She believed that the secure atmosphere of the PSG allowed her to verbalize her frustration and anxiety
without fear of censure. The support of the group members and facilitator provided her with the confidence to try new parenting strategies:

I learned a lot about discipline...things to do and you know like spank. I spank my child three times in a row and its like, like I was angry. Well, at least you stopped at three...those things are the kinds of things that they [the group] would say, or at least you apologized for yelling...Or at least you stopped yelling and talked to him and just things like that, that you feel guilty for. Like, you know, locking him in his room...and if you keep banging your toys against the door and throwing them and kicking the door, I'm going to come in and spank you because I have other control over you. And then K. (the facilitator) said to me, she says, "Well, he's got to get his anger out and anger is healthy." And we learned that, that anger was very healthy, but its just what you do with it that can be not healthy.

Susan described a situation in which she incorporated some of the strategies that she had learned in the PSG to deal with her own feelings of guilt and lack of confidence in parenting. She related her story in a chronological manner, describing her feelings and relationships with her children before entering the PSG, and the improvement that she saw following the group:

I was feeling so guilty about the kids and feeling so sorry for them that discipline just sort of went out the window and it was just total chaos all
the time... For months it was just, everything was just kind of all over the place and no discipline whatsoever.

She continued by providing an example of how she utilized a specific strategy she had learned from the PSG to assist her daughter in dealing with her anger towards her older brother:

Her big brother... was always harassing her... so I showed her how to do the balloons one day when they were bugging her and she really liked that... She pulled out a balloon and blew it up really big and she put a face on either side and one was [her brother] and one was (his buddy) and she popped it... It was a wonderful side effect... It wasn't something that had to be repeated.

Susan also perceived that the PSG had had a direct impact on her relationship with her children in terms of her confidence in her parenting skills:

Since the last year and a half, I feel strong in my relationship with my kids. I feel a little more confident and maybe I'm calmer around them and some of the behavior that they were going through, some of stuff they were doing... I feel stronger as a parent on my own... maybe a little bit closer to my kids and more able to handle that, and... maybe not as guilty feeling that I've inflicted something on them or taken something away from them.

All of the women acknowledged that their children had witnessed some form of abuse, and they expressed concern as to how the children's development would be affected. The women discussed being overly vigilant of their
children's behavior prior to joining the PSG. Susan perceived that, as result of being in the PSG, she was learning to distinguish between the healthy angry behavior of her children and the anger projected as a result of witnessing the abuse:

I feel more confident about it. I'm more likely to kind of shrug my shoulders and walk away from something my son has done...and I'm not panicked and I have to solve it right now...I feel much better that it's not a reflection on me that some of the things he does he can deal with. I give him more credit. It's certainly more compatible with it .... I haven't done something that's causing permanent damage.

Many of the women had been manipulated by their abusers to feel inadequate in their ability to parent their children. Emma described the subtle erosion of her confidence in her ability to parent her children that occurred during her abusive relationship and following her separation from her abuser. She also described the positive influence the PSG had on her level of confidence in parenting:

He always found ways to let me know that I was a bad mother, a negligent mother, and that every time a child fell down and hurt their head or scraped their knee it was because I had not prevented it. Or I had done something to cause it or to not prevent it...But it's so subtle that it does get in there...So coming to a group like this...I needed to be reaffirmed that I was a good mother, because I wasn't really sure...This is the essence of abuse...It's so subtle and so manipulative
that you end up thinking the thing about yourself because he never comes right out and says it.

Following participation in the PSG, Sheila described her increased confidence in her parenting skills as a growing process which required time and support:

I think because I trust myself as a parent now. It isn’t the issue anymore. It’s like putting on your clothes in the morning to go to work…I feel confident and comfortable with it. I know that I’m there for my kids.

A perception of confidence in parenting, both in intimacy formation and skill, was considered by all of the women as an essential component of recovering from the abusive relationship. Despite the belief that the PSG provided them with tools to enhance their relationships and parenting abilities with their children, the women expressed ongoing concern related to their abilities to foster intimate relationships with their children and provide them with a secure environment.

Reframing

Reframing is described as a healing process in which individuals review an event or period in their lives and construct a new meaning for it. The new meaning allows for redefining their lives in a way that promotes positive outcomes and growth (Draucker, 1992; Taylor, 1983). The women described examples that addressed the characteristics of reframing within the context of their own experiences with abuse. The work of reframing described by the
women will be discussed within the components of: 1) self-acceptance; 2) boundaries with the abuser; and, 3) assertiveness with external forces.

**Self-Acceptance**

The women in this study reflected on their experiences both before participating in the PSG and since its ending. As mentioned previously, most of the women reported feelings of decreased self-esteem, guilt and powerlessness prior to joining the PSG. They were positive about the changes that had occurred following participation in the PSG and recognized areas of growth in themselves. This growth, described in terms of self-acceptance, encompassed their parenting abilities, their lifestyle, and their abilities to effect change in their lives. Most of the women related examples of what the process of self-acceptance meant for them.

Some of the women perceived that the PSG gave them the support and affirmation to assume control of various aspects of their lives. Heather described her life before entering the PSG and how she felt in a state of turmoil, ill-equipped to help her children:

> When you're in crisis yourself, you're going through things and your kids are going through things, but you've got to deal with both at the same time and you're not completely there yet.

Sheila, who had been separated from her husband for two years prior to participating in the PSG, described how she continued to experience emotional abuse from her husband which made her feel inadequate as a
mother and guilty for leaving him. She also described the positive impact of
the PSG on her journey towards self-acceptance:

I know now... really thinking honestly about my mothering skills. I did
question myself many times and apologize and make amends...skirt
around him all the time to try and convince him all the time that yes, I
am a good mother...And I never was...So you see, I came with all that
baggage to the group and I needed to be reaffirmed...I needed to be
told that it was O.K....I started thinking about what we had talked about
and done in group...accepting that you make mistakes...knowing that I
was not alone made a big difference.

The validation that Sheila described was mentioned by other women in
both focus groups and it appeared to allow them the freedom to explore their
lives without fear of censure from other members. The women perceived
themselves as being in a place where they could focus on themselves and
develop a sense of who they were. They viewed this process of finding a
"sense of themselves" as beneficial in gaining control over their lives and
strengthening the intimacy bonds with their children.

Susan had developed a sense of self-acceptance to the point where
she recognized strength not only in herself, but also as a potential in her
children:

I feel stronger and it sort of feels like battle wounds or something. I also
feel like I can take on a lot more, but as well I think that for awhile
initially...you feel like, look at what you've done to your kids. You've
hurt them...You've taken something away from them. They've lost something, or I've made them less than I could have.....I think I recognize that my children have been different because of this. They're not necessarily going to be any worse or any better than whatever they might have been...But they're going to be stronger people and very different people because of the experience. I know that...I've gotten stronger. I feel better about the strength that they've gotten out of it...

The women perceived that absolution of guilt and acceptance of self were necessary in their recovery from the abusive relationship.

Katrina had experienced a decreased sense of self-worth and a perceived inability to effectively parent her son prior to the PSG. She related that, following her participation in the PSG she was able to accept and find pride in her accomplishments:

Yeah, I'm proud to be who I am and I'm proud that I look after my son everyday. And I'm proud that I look after the children I do, because they need it.

Many of the women perceived their lives as being less chaotic and crisis driven following participation in the PSG. They attributed this sense of stability to an acceptance of their limitations and recognition of their strengths in dealing with their situations. Prior to the PSG, Sheila felt out of control and unable to deal with day to day issues. She described her time in the PSG as one where she learned to “not feel as responsible and guilty for everything”.

Sheila described her self-acceptance as a process of making sense of the chaos associated with her previous parenting patterns:

I'm not in crisis every other day, you know. Even though there's a lot happening especially with the kids, it's not so critical anymore. They're not going to die every six minutes if I don't get it figured out....[I'm] more forgiving of myself, I think. I felt guilty that I couldn't fix things all the time for them. And then I started to realize that there are some things beyond your control and...just try and fix things you can to make a change. Start with yourself first, you know. But it's been really good, positive for them. It's positive for them to see that I can stumble and fall and still stand up, get up again...

The women discussed how they felt more capable of interacting positively with their children once they had first sorted through and made sense of their own issues. Many of them identified with the example provided by Susan, who explained how her confidence and acceptance of herself had created an existence in which she felt more positive in her relationships with her children and others:

I think that makes them [the children] feel more secure...I'm more likely to end a discussion with them, not having to justify myself. You know, they can deal with that and that's fine.

Self-acceptance appeared to be enhanced by positive re-enforcement from others outside of the PSG. Although all of the women felt a sense of unconditional acceptance from members of the PSG, many of the women
perceived that they were misunderstood by other members of society. It appeared, however, that positive comments made by significant people in their lives were treasured and served to enhance their own feelings of self-worth and acceptance. Sheila appeared to reflect the feelings of others in her focus group when she related her example:

You know, somebody did that to me the other day. It's a teacher who doesn't teach my kids. I had never ever spoken to her before, but I see her all the time...she said, "I wanted to say that I've been observing you and I've been in this business a long time. I'm an educator and I'm a nurse. I know what I'm talking about, and I think you're a fabulous parent. A fabulous mother, the way you are here for your kids". I said to her, "Tell me more, tell me more!"

**Boundaries With The Abuser**

Many of the women perceived that their self-acceptance assisted them in being less susceptible to the abuser's continuing attempts at manipulation. Following the PSG, they were more often able to place blame for past events and current situations with the abuser rather than with themselves. The women reported, however, that although the physical abuse was no longer present, the abuser constantly used other avenues to try to upset the new found balance in their lives. The most frequently reported episodes surrounded custody and access issues:
That's what is the hardest thing, is the children. Because if it wasn't for the child, you wouldn't have to answer the phone again. You would never have to, you know, see them again or whatever.

This perception was shared by many of the women. Access visitation periods were identified by all the women as the most stressful time when the abuser would initiate harassment or manipulation.

The women reported that the PSG gave them opportunities to try new strategies to thwart the abuser’s attempts at manipulating them during access visitation periods. Katrina arranged to meet her abuser in the park for drop-off and pick-up access periods, as she wanted to create a situation that was impersonal and public. While this type of situation decreased the opportunity for ongoing harassment and abuse, Katrina still believed that the abuse would continue:

The only reason why my ex comes to see S. is because he can see me and he's not supposed to see me. But I can meet him at the park and he's always got something to say...And it will go on forever.

The women noted how they had learned in the PSG group to handle these access periods in a manner that they perceived was less disruptive to their children’s lives. This use of new strategies armed them in developing boundaries with the abuser. Vicky described how prior to the PSG, her abuser would place her children in a situation of conflict by manipulating both her and her children into a state of high anxiety during access periods. She related how, through the sharing of her experience and hearing those of others in the
group, she was able to reflect on past access experiences and recognize patterns in her abuser’s attempts at manipulation. She subsequently tried new strategies discussed in the PSG to sabotage the abuser’s manipulative attempts. Vicky acknowledged that this practice requires tremendous energy, as she struggles to overcome past patterns of responding:

You bite your lip because they pre-warn the children...Your mum’s nuts and we’re an hour and twenty-five minutes late, but that’s no big deal. She’s going to be really mad at me. And preparing for all of it. And then, when your kid says, “Are you mad at daddy because he’s late?”...it took every ounce of strength to say, “Oh no, anybody can get stuck in traffic” (laughter). And that took a lot for me to do that.

Katrina, the woman who arranged child access drop-off and pick-up at the park, found that ignoring her abuser and directing her comments to her child gave her more confidence and control over access periods, “Now I just go. I don’t even direct the questions to [the abuser]. I say, “S. I’ll see you back at the park at five o’clock, okay? Have a nice day. Bye”.

Women who had been out of the PSG for a longer period talked about the action of “setting boundaries” as a conscious method of maintaining control on the effect of the abuser’s ongoing harassment. Sheila felt that, prior to the group, she had limited control over her life in terms of boundaries with her abuser. She explained that, as her confidence in her relationship with her children improved and her confidence in her ability as a mother stabilized, she felt more secure in setting boundaries:
I started setting boundaries for myself and what I was going to tolerate, and what I was going to accept and not accept. I started getting results which was amazing, with my ex-husband (laughter)...It's not about setting boundaries for other people. It's about setting boundaries with what you're comfortable with and it worked.

Emma related the ongoing subtle attempts of her abuser to manipulate her activities. She described her reaction to these events and the limits she now puts on their relationship in order to maintain a sense of control. She related her ability to set limits resulting in her feeling less guilty and more confident in herself:

I haven't lived with him for two years. He still asks me where I go and I say it's none of your business and he says okay. But he still needs to ask me where I'm going.....I need to keep coming out and reaffirming and saying yes, I can come out. I'm doing this on my own and nobody is telling me no. And the icing on the cake is that I'm learning!

The setting of boundaries was perceived by the women as an important step in taking back control of their lives and distancing themselves from their abusers. The distancing appeared at times more emotional than physical, due to court imposed access visits to the children:

Well I've gone through crap with him today on the phone and he's been here at the door and he's done this and he's done that about the kids and the access...I'm seeing him once a week, but at least at the end of the day I close the door and he goes away...That in itself is a major
accomplishment, even though I've got all the crap to deal with during the day, during the week.

Sheila shared an extraordinary vignette related to her perception of the effectiveness of 'setting boundaries' with her abuser. She felt that the setting of boundaries provided her with a sense of control previously unimaginable:

I mean my ex, we haven't talked. I had set all those boundaries. I think I remember telling you about the court order and we're not supposed to talk...he was actually the pall bearer at my father's funeral in March (laughing). I thought I'd come a long way that I could tolerate his very presence in the room; and actually, we had a few civil words to say to each other...but that I wasn't shaking in my boots was amazing!

Because just the mere thought, just getting on the phone with the man was enough to get my heart palpitating and sweat...And my mind going blank. So that's coming a long way!

All of the women believed that being able to emotionally detach from their abuser was an integral part of moving on in their lives and regaining control. They discussed this within the PSG environment and shared personal strategies for detaching themselves both emotionally and physically from the abuser. Vicky described the mental exercise that she now utilizes to reduce her reactions to her abuser's attempts at manipulating her:

If I just talk in monotone and if I look at him like he's just a sperm bank, as weak as it may be, it works. But it works...if I just keep an even keel...but if I don't do that, then I just go way off.
Although none of the women saw themselves as being free from their abuser, only Heather perceived her situation as having deteriorated to the point where she had limited control. This was due to a court order forbidding her from leaving town:

I'm the prisoner in the Lower Mainland. I can't even move back to my parent's home [due to the] court order. I have to stay here. I live in a free country and I'm a prisoner.

The women report that the energy exerted in maintaining control of and setting boundaries is exhausting. It appears, however, that the women value the sense of control that they feel and view this process as a necessary component of successfully surviving away from the abusive relationship. The ability to maintain boundaries, however, appears contingent on their feelings of confidence related to parenting and a perception of ongoing support.

**Assertiveness With External Forces**

The women perceived that another dimension in reframing their experiences was related to their ability to assert themselves effectively with others. Many of the women, prior to the PSG, saw themselves as having come from a position of powerlessness when interacting with others. They felt that the PSG provided them with skills and confidence in their ability to effectively assert themselves in a variety of situations.

The legal system was perceived by most of the women to augment these feelings of powerlessness. The feeling of 'being abused all over again' was echoed in many of the women's stories as they related their perceptions
of their lives following the parenting support group. Vicky, who as mentioned earlier was experiencing continuous harassment via legal manipulation from her abuser, explained the frustration she felt in dealing with the legal system prior to joining the PSG:

They make you crazy with all this stuff, and you're through enough as it is. Then you have to go find things to help you and your children out and then you have to fight little systems here and there because you don't know how this works, because you're not familiar with any of it. And there's no one out there guiding you along.

She provided an example related to her feelings of frustration in dealing with the legal system, and how, after learning to assert herself in the PSG, she practiced these new-found assertive skills on a social worker who had been assigned to her child custody case. After becoming very angry at her sense of powerlessness when interacting with the social worker and perceiving that she was being verbally abused, Vicky lodged a complaint with the social worker's superior:

It took me a week. It took me sitting there with not losing sleep, but fretting that this woman could say something bad about me and I could lose my kids or whatever. And I had to get that off my chest and I did, and I think the group helped me do it in a really positive way instead of me phoning up and yelling. I phoned up and went right to the top of the command because I didn't even trust her to let him know. I needed to do it myself, and that's the strength I got from that.
Caroline related her experience of engaging legal advice. As previously mentioned, Caroline was living in constant threat of such extreme physical violence that the police had expressed concern for her safety. In addition, Caroline was continually harassed by her abuser by telephone and during access periods. Caroline was existing in a constant state of vigilance as well as being overwhelmed by her children's reactions to her separation from the abuser. She had not been satisfied with her lawyer's advice but did not know how, nor had the emotional energy, to change the situation. Susan had maintained contact with Caroline following closure of the PSG. Susan contacted Caroline and supported her in her transition to another lawyer who better met Caroline's needs. In the following dialogue, Caroline relates how significant this change was in terms of her ability to assert herself:

That was a huge thing. It took some nerve to change lawyers after going along with that one lawyer for such a long time and it was almost like an abusive relationship, where I used to burden myself enough to make it like that anyway. To get up enough nerve because other people were going through it, you know.

The women in this study identified other areas of their lives where they had become more assertive with positive results. Sheila described how she had previously felt like she was continuously defending herself to others. She perceived the support that she gained from the PSG, and her own reframing of her situation, as integral in her ability to assert herself effectively:
I found I became more firm... I started setting boundaries for myself and what I was going to tolerate and what I was going to accept and not accept with my kids, with people I was dealing with... with the school... and I started getting results which was amazing!

All of the women perceived that they had retrieved some measure of control over external forces in their lives. This perception of boundary control appeared to have a positive effect on their “sense of self” and their confidence in parenting their children. Many of the women perceived themselves as having more control over their interactions with their children or, rather, their responses to their children’s behavior. Sheila described how she had adjusted her way of coping with the ambiguity of her children’s behavior, resulting in her feeling less defensive and more positive about the outcome:

It's like being able to, with your kids say take it just to the point and not carry it on forever. And some things I'm able to tell my kids that just aren't solvable either. It's just the way it is.

As the women related their retrospective accounts of their lives, and their perceptions of how they had changed following the PSG, reframing became apparent as an important precursor to the women’s ability to achieve self-efficacy.

**Self-Efficacy**

Self-efficacy is defined as “a person’s judgments of own capabilities to execute a given level of performance” (Murdock, & Neafsey, 1995, p. 159). Self-efficacy “demonstrates how confident an individual is in the ability to
perform a specific task to successful completion" (p. 159). It is affected by perceptions of past performance, support from others, and level of comfort with self when performing or anticipating performing a task. In addition, a person's level of self-efficacy will influence the planning of and perseverance in future activities and the individual's level of anxiety in approaching new tasks.

In this study, self-efficacy appeared to be a goal that the women were striving to achieve. All of the women perceived themselves as having changed as a result of participating in the PSG. These changes were individually defined; however, similarities in the meanings emerged as the women shared their perceptions. Most of the women were in the process of reframing their past experience in an abusive relationship and were exploring their future. The women who had been out of the PSG for the longest period of time appeared further along in this process and were able to define the types of ongoing support necessary for growth towards, and continuance of, self-efficacy.

Sheila reflected on her experience since participating in the PSG. Prior to joining the PSG, Sheila had perceived herself as "not in control" as a mother and struggling to overcome her abuser's attempts at harassment. She described the process of participating in the PSG as a time when she "let go of the guilt" and allowed herself to recognize her capabilities as a mother and as a survivor of abuse. Sheila described her confidence and reframing as being so much a part of her "way of being" that it was almost unexplainable to people who had not had the experience. She perceived this experience as
something she had grown and emerged from as a stronger person - different from others as a result of her journey:

I feel like I'm starting now to rejoin the human race in a way...On my own terms. But I find myself in social situations where it's always in the back of my mind, and it's almost as if it's a part of how I communicate with people...With some of my friends it's almost like you can go back to that and say, "hey I came from there and I'm still okay but, there's this one thing about my life that's still changed". It's still changed everything for me. It's almost like having ten million dollars in your bank account but wanting to be able to tell people that you came from the bottom you know, to get there...So the group did that for me, and being here now reminds me that I feel proud of having gone through this process and having made it.

Many of the women in Sheila's focus group (Group A) identified with her narrative. They described their lives as having changed and appeared to be amazed at how much they had progressed. Focus Group B did not report as many components of self-efficacy as defined in this study; however, they perceived many positive changes in terms of confidence with their children and ability to reframe their experience. I believe that self-efficacy encompasses some of the components of confidence and reframing, and that the continued feedback with these components is necessary before self-efficacy can be achieved. The following components that I present in this paper are characteristic of what I perceive the women in this study display
when demonstrating self-efficacy. The two components outlined include a
desire to plan for the future and an ability to self-define ongoing support
needs.

**Planning for the Future**

As mentioned previously, many of the women in the groups perceived
the most significant changes in their lives had come from within themselves
and were not as a result of external factors. Generally, their socioeconomic
status had not improved, nor had custody and access conflicts dissipated. All
of the women were on welfare but saw this as temporary. They perceived that
they would only require this type of support until either financial support from
the abuser had been determined and enforced by the courts, or their children
reached school age and the women could seek employment. Katrina
explained the reframing of her perception of this experience, “I learned that no
matter [what], like I’m proud to be who I am and I’m not going to be on welfare
forever, but I need it until he [pays].

Emma reflected on her present situation and reported that the greatest
change in her life had been intrinsic rather than external. Her increased sense
of self-worth and confidence in her abilities had helped her reframe her
perception of her experience and provided her with the tools to consider her
future:

Two years has gone by and that’s a long time. Back then I was new to
this. So the difference between then and now is...I’m feeling
comfortable and secure in my lifestyle now, whereas back then it was
all in the future...And it turned out to be all right. The next scary part is now. The change is coming...I'm hoping that the skills and the tools I've found, been using so far will get me over the next hump which is going to be the next big change...So I feel that this group and the other groups have given me, have backed me up in this process that I've been going through.

The other women from focus Group A agreed with Emma in terms that planning for the future was an intimidating process; however, they felt more equipped to take on this task as a result of having gone through the PSG. Some of the women also identified that custody and access issues were not as prominent, having been settled legally. The women in this group appeared very excited to reflect on how their lives had been before the PSG, and described how they were at times not even aware that they now had confidence to plan for their future; the confidence seemed so much a part of who they were now. They did feel, however, that both formal and informal support was imperative to the success of their continued growth.

**Defining Ongoing Support Needs**

Prior to participating in the PSG, the women in both groups agreed that they had concerns related to parenting their children, dealing with custody and access issues, and trying to make a new life away from their abuser. Most had come to the PSG believing that it would assist them in meeting their children's needs. The women generally felt, however, that they had been unclear as to their own unique needs. Following the PSG, the women were more clear
about their own ongoing needs and those of their children. The general consensus amongst the women was that the PSG needed to continue for longer than ten weeks in order to help them to address ongoing issues associated with recovering from an abusive relationship:

I think that it really needs to be ongoing to take you through the process or the changes with your kids, and it recognizes that situation. There's possibly a two or three year battle, and it can't be just crisis intervention.

Most of the women perceived that they required not only a longer period of parenting support, but also more time during the sessions to address issues that had surfaced during the previous week:

So the group is [done] but our problems don't finish...And it was really supportive and it was really, really nice to have that.....it was only two hours so it wasn't long enough. Like it would have been better if it was three hours.

The women recognized that the recovery and subsequent growth away from an abusive relationship is an ongoing process. Despite recognizing their increased confidence and effectiveness in addressing issues surrounding the abusive relationship, they continued to see themselves as vulnerable to new threats:

You need some support and you're sort of scrambling around trying to find the right support and support that's going to recognize that abuse has been a part of your life, and that it has its ongoing influence in
some way. That you're still going to have that conflict to deal with, that influence.

The women also expressed concern regarding the scarcity of support groups for their children. They viewed their children as continuing to exist in a vulnerable position with the abuser despite the improved maternal-child relationship. The women believed that ongoing and consistent support for themselves and also their children was necessary for them to address future problems confidently. Susan described her perception of her children's dilemma surrounding access visits and the subsequent lack of support for her children in addressing this situation:

I think the kids get stripped of power even more so than we do.

Certainly I don't always have the power that I should have to protect them or do something for them. Then they get shuffled back and forth in access or I'm pushing them out the door and they don't want to go with him and they don't have anybody to bitch to about that. They have to be careful what they say or how some of those things get handled.

All of the women recognized that the abuse will be ongoing and, therefore, will continue to affect the children. Many have attempted to find resources for their children that could support the children, especially when dealing with custody and access issues. Often the abusers were perceived as sabotaging the women's attempts to seek support for their children. Caroline, whose husband frequently interfered with her attempts to seek counseling for
her children, described how by seeking support for herself, she could circumvent her abuser's attempts at manipulation:

I tried to help them deal with some of the stuff. I tried to do that by putting them in counseling but in so many situations, you've got an ex-husband who sabotages all the time. So I felt like there's only certain things I can take home to them that they can maybe use.

All of the women in focus Group A agreed that support services for their children, provided without fear of harassment from the abuser, were necessary for the well-being of their children. The women appeared to link the well-being of their children to their own recovery from the abusive relationship. They felt that the PSG had provided them with some tools to foster their children's unique needs in recovering from the abusive relationship. Emma described her ongoing success with her children as a result of using strategies from the PSG:

We were taught...an approach.. I can apply it even though each case is so different, but at least you've got something that you can refer back to and approach this problem... every single problem and all its diversity and come out at least with a little bit of success.

All of the women agreed that their success in meeting their children's needs boosted their own sense of accomplishment; however, the women believed that they needed ongoing support to ensure continuance of this success when new issues arose.
Women who had been out of the PSG longer felt that their needs had shifted to include issues that had not been addressed in the group. They expressed a desire for "another generation of parenting support group" to address new and ongoing issues which they felt affected their day to day maternal-child interactions.

One example of a new issue was how to address the abuser dating other women. Subsequently, if they also started to date, how to support their children and explore their own feelings in relation to this issue. Susan expressed concern related to supporting her children following their exposure to their father's multiple partners. She also appeared unsure about how to move forward in her own life and extend her boundaries to include new relationships with other men:

Dealing with him dating other women. Having other women around the kids, or many other women around the kids and some of the kids feelings about that. How I should handle it when I'm feeling really sensitive about it. Then me dating and how do I bring that into my family or how are my kids are going to feel about that. That's all new ground, you know and again, I'm sensitive.

Creating a blended family was another issue that some of these women also viewed in their future. They believed that support for this reframing experience was required, but scarce. Sheila discussed her concerns related to her new blended family existence:
Blended families is actually part of a very natural step and you are left there dangling. Trying to figure why even though you've gone in with both eyes open...and I walk into this and I'm left with this whole basket of, like...how do I deal with this. I found one book and it was about ten years old and I left me kind of at that spot.

Most of the women noted that they expected to form new relationships and family structures in the future. They also felt, however, that due to their history of abuse, they would require support in creating these new relationships.

**Summary**

In this chapter the findings from the data analysis were presented and supported by narratives provided by the women. A conceptual diagram of these findings was also presented to provide a visual structure for the reader. Forming the basis of the women's experiences was their perception that, as a result of all being mothers who have left abusive relationships, they had experienced a relationship with each other that was unique. This “shared experience” continued to influence their perceptions of their lives after the group and was intertwined in the themes as they emerged.

The three themes that were described in the experiences of the women were: 1) connection; 2) confidence; 3) reframing; and 4) self-efficacy. Each of these themes were defined and the components of the women’s experiences that supported these themes discussed. As demonstrated in Figure 1, the themes overlapped. As the women gained confidence, they were able to
reframe their situation. Feelings of self-efficacy emerged as a result of positive outcomes and increased confidence. Even though external events may have influenced their ability to sustain their progress, resulting in a slip back to a previous state, there was a general perception of forward movement.

The theme of connection was described by the women in terms of their shared experience and shared meaning while participating in the PSG. The components described appeared to provide the women with an atmosphere of trust and safety in which to disclose their feelings and try new strategies outside of the group.

The theme of confidence was viewed as having two components which were considered important to the women. These components included: 1) intimate relationships with children; and, 2) parenting skill. The women provided examples describing how, prior to joining the PSG, they felt uncomfortable with their abilities to communicate effectively and share themselves with their children. They perceived that they often were unable to separate their feelings related to the abusive relationship from those involved in maintaining a relationship with their children. Their perception of their ability to parent their children effectively was also identified as a component in the theme of confidence. The women perceived that their previous patterns of parenting were ineffective in addressing their children's behavioral outbursts and attending to their needs. Strategies were provided in the PSG that the women integrated into their own situations. Equipped with new tools, the
women perceived that they were more effective and confident in their parenting skills.

The themes of confidence and reframing were considered interconnected and fluid, with characteristics from one theme affecting the other. The characteristics identified in the theme of reframing were: 1) self acceptance; 2) boundaries with the abuser; and 3) assertiveness with external forces. Many of the women had not explored how previous feelings of guilt and powerlessness had affected their sense of control over their lives. The women believed that the group gave them a safe and secure place in which to focus on themselves. They related examples describing how they felt affirmed in their strength to remove themselves and their children from an abusive relationship. Another important area of control identified by the women, related to dealing with the abuser, especially around the issue of custody and access. The women continued to perceive this area of their lives as stressful, but identified strategies that they had implemented to minimize the control that the abuser had over them in this area of their lives. The women also developed new ways of taking back the control that had been seized from them. The work of setting boundaries and taking back control was viewed by all of the women as continuous and exhausting. They all believed, however, that reframing the experience was essential before they could move forward in their lives.

Self-efficacy involved: 1) planning for the future; and 2) describing ongoing support needs. An integral part of reframing the women’s experience
of the abusive relationship was self acceptance. This process was identified as an important step in making sense of their lives and separating themselves from the abusive relationship. Being able to make sense of their past, and present situation, appeared to facilitate planning for the future. Planning for the future involved exploring new situations which might involve risk. The women believed, however, that they required ongoing support to address their future. Support was considered integral to their ability to find balance in new relationships and to support their children in their developmental and situational needs.
CHAPTER FIVE: DISCUSSION OF THE FINDINGS

Introduction

In this chapter the findings from this study will be discussed. Although each of the previously identified themes is crucial to the understanding of the women's story, I will limit this discussion to what I believe are the most significant areas requiring additional exploration. The areas that warrant more in-depth discussion are: 1) the importance of support; 2) the effect of time; and 3) the work of integrating the experience. Each of these areas will be explored in relation to both the conceptual framework of the study and the relevant literature.

The Importance of Support

As previously mentioned, most of the women described their lives as being in a state of chaos and uncertainty prior to joining the parenting support group (PSG). The women reported joining the PSG feeling varying levels of guilt, low self-esteem, and powerlessness in many aspects of their lives. They all believed that their continuing experience with abuse had left them with decreased confidence in their ability to parent their children in an effective way, establish boundaries with their abuser and assert themselves.

The women in both focus groups identified the sense of connection that they developed with each other during participation in the PSG as fundamental to their ability to move forward in their lives. The affinity that they had with each other evolved from the belief that they shared a common bond as a result of being mothers surviving away from abusive relationships. The
women noted that they all had other forms of formal and informal support. The support found in the PSG, however, was different from any other form of support that they had previously experienced due to the sharing of meaning and experiences. It was very important for them to be able to come to the PSG and experience this sense of connection. The women noted that, as a result, they felt safe to talk openly and explore various issues. The supportive atmosphere facilitated the discussion of new skills and strategies to address their issues.

Research focusing on the influence of support group interaction with women who have been abused indicates that intense bonding can occur from the sense of sharing common problems, thus reducing the women's sense of isolation (Varvaro, 1990). The women in this study identified a need to feel "normal" and more in control of their lives. They felt that, in sharing their common problems in the forum provided by the PSG, they felt more normal. The women viewed the relationships that they developed as a result of being in the PSG as unique - different from any other group or one on one counseling that they had previously participated in, different from the connection that they had with friends or family members. Subsequently, they were able to relate to and support each other in a significant way that made sense of the abuse and normalized the experience. According to them, this support gave them courage to try new strategies with their children and others.
The findings in the literature indicate that the supportive processes of a group can facilitate the development of insight and control in women who have left an abusive relationship (Campbell, 1986; Draucker, 1992; Henderson, 1989; Lewis, 1986; Varvaro, 1990; Weingourt, 1985). From what I observed in the women during my visits as a research assistant, the overall movement forward could not have been possible without the support found in the PSG. During the visits I noticed that the women appeared more comfortable interacting with their children. The women also reported “feeling better” about themselves and they appeared more calm when describing their abuser’s attempts at ongoing manipulation. The women stated in the focus group sessions that they had employed many of the strategies learned in the PSG to build improved relationships with their children and to detach themselves emotionally from the abuser. The support found in the PSG, therefore, was fundamental to the women’s process of growth after leaving the abusive relationship. Campbell’s (1986) research supports this assertion by indicating that the components of recognizing one’s strengths, regeneration and growth are possible outcomes of an effective support group process.

One of the goals of support group work for women who have been in an abusive relationship is to promote the search for meaning and to facilitate growth and self-determination (Campbell, 1986; Lewis, 1986; Varvaro, 1990). The women in this study, prior to joining the PSG, saw themselves as having survived the initial transition period of separating from the abuser and finding new accommodation. They reported to me in my visits as a research
assistant, however, that they were in a state of chaos and uncertainty as to how to deal with their children, the legal system, and the ongoing manipulation from the abuser. They all identified that they needed help to address these areas in their lives. The women felt that the supportive relationship found in the PSG was fundamental in order to develop insight and skills necessary for helping themselves and their children to move forward in their lives.

I was also intrigued by the intensity and duration of the bond that had formed in the PSG. In fact, when the women were reunited again for the focus groups, they demonstrated an intense affection for each other. I observed the women greeting each other excitedly and hugging one another. During the focus group sessions, the women reflected on previous shared moments in the PSG with obvious enjoyment, often crediting each other for making a difference in the lives of others in the group. At the end of both focus group sessions, the women continued to "catch up" with each other, stating that they wished that they didn't have to end the discussion and leave.

It was clearly apparent that the PSG provided something unique and special to these women. The women in this study felt that they had never experienced the type of bonding found in the PSG where they were intuitively understood. The women felt that having someone who understood where they were coming from and what the experience of abuse had been like normalized the experience, making it just that much easier to talk about and strategize how to move forward.
One might hypothesize that if the women benefit from this sense of support and perceived growth in themselves, their children will also benefit from the "spill-over" effects of the PSG intervention. The literature findings suggest that working with the mothers produces a positive impact on the children (Blinikoff, 1995; Ericksen, & Henderson, 1993; Henderson, 1992; Humphreys, 1993; Ledingham, & Crombie, 1988). The women in both focus groups shared stories of how they had taken strategies from the PSG and incorporated them into their parenting with positive results. During my visits to the women's homes as a research assistant, I also noted that some of the children appeared more "settled" and receptive to their mother's directions in the months following the PSG intervention. During these visits, many of the women reported that their children's behavioral outbursts had decreased in frequency and, in some cases, in intensity.

As previously mentioned, the women noted that the PSG provided them with a mechanism to discuss and develop strategies to resolve many of their issues. The findings of this study indicate that once the mothers felt comfortable with new strategies to deal with anger and coping, they would often talk about, and teach them, to their children. The women validated that this process assisted in creating a healthy atmosphere for healing in the home.

The support that the women gained from the PSG had a different meaning for them than that from other kinds of groups because of the expression of mutuality within the group. They perceived a more equal
distribution of giving and receiving of time and support within this group than in the group experiences in transition house situations. Henderson's (1989, & 1995) research surrounding social support in a transition house group experience also supports that, due to the chaotic and often life-threatening events happening in women's lives upon initial separation from the abuse, reciprocity of support is not always possible. It may be that the women who participated in the PSG saw themselves as being at a point in their lives when they were able to engage with each other with a level of mutuality that met their needs.

**The Effect of Time**

There were differences noted in the women's perceptions of their experiences dependent on the time since leaving the abusive relationship and time since finishing the PSG. The women in focus Group A had been out of their abusive relationships at least one year longer than those in Group B. The women in Group A had also been out of the PSG longer than those in Group B. The women from focus Group A appeared to demonstrate more confidence in their intimate relationships with their children and in their parenting skill. They perceived themselves as stronger as a result of their experience with abuse. They had journeyed further in their reframing of the abuse to the point where they could view positive outcomes as a result of their experiences.

The women in Group A could, as a group, more clearly identify areas of their lives where they felt in control and those that they could not control. The boundaries that they had with their abusers were also more easy to delineate,
and they appeared to feel more comfortable with them. Finally, the women in Group A were better able to define what the future could hold, both for themselves and their children. They could also envision more clearly, the types of support that they would require to continue their growth process.

Based on the experience of the two focus groups, I believe that the process of time is an important factor to consider in the women's growth towards self-efficacy and beyond. Findings from the literature support the idea that recovery from a traumatic life event requires energy and time (Campbell, 1986; Campbell, McKenna, Torres, Sheridan, & Landenburger, 1993; Henderson, 1993; Herman, 1992; Landenburger, 1989; Taylor, 1983; Varvaro, 1990). The women participants in Draucker’s (1992) study of recovery from incest described their healing process as “an active, ongoing, complex and time-consuming experience involving ‘hard work’” (p. 5). Inherent in Draucker’s (1992) study was the belief that the participants' work of “constructing” a new place for themselves required time for them to make sense of new information and tools and to integrate it into their new existence. The women in this study provided descriptors very similar to the women participants from Draucker’s (1992) study. The women in Draucker’s study described actions of “constructing a new relationship with the self, regulating boundaries, and influencing one’s community” (p. 6). These processes required tremendous energy, time, and ongoing support from external sources.
While the nature of the violence in Draucker’s (1992) study and this study were dissimilar, the essence of abuse in both studies provides direction for understanding time as a factor in the recovery process of abuse in general. Landenburger’s (1989) study provides further support for the concept of time as an important mediating factor in the recovery from abuse. Landenburger proposes that “the process [of recovery from abuse] is not linear and stable; pieces constantly weave together with the degree and types of behaviors, feelings and thought changing in reaction to a cumulative experience” (p. 215).

As previously mentioned, there were significant differences between the focus groups in relation to where the women were in their growth towards self-efficacy. There were also individual differences amongst the women in each group; recovery for each woman was unique. For example, Heather perceived that the PSG had provided her with some support to address her own issues; however, she continued to feel unsure of herself and her abilities. Heather perceived that she had “relapsed” since participating in the PSG. She attributed this to the relentless manipulation of her abuser and the subsequent erosion of her self-esteem both as a person and a mother:

I have relapsed more...all that time and energy and everything is gone...I’ve gone back to the way it was before.

Despite articulating feelings of low self-esteem and a perception of decreased coping, Heather recognized her situation as having moved forward, "I would
never go back to being a family with him even if it made it that his son's life was the best. I wouldn't do it".

It appears that there are external events that exist in time that can affect the growth of the women towards self-efficacy. These external events were identified by the women as ongoing legal manipulation by the abuser surrounding custody and financial compensation, manipulation of the abuser of the women and their children, and subtle and overt harassment by the abuser. Landenburger (1989) notes that "what happens to a woman is not linear and is full of contradictions" (p. 223). Landenburger's assumption of backward and forward movement in recovery from the abusive relationship is demonstrated in Heather's experience and supports the findings of this study; periods of circularity in the recovery process of abuse are natural and should be anticipated. While it is apparent that time is an important factor in women's recovery from abuse, it is difficult to identify what aspect of time influences the women's experiences. Possible explanations could be that the influence of time allows for the women's acquisition and solidification of new skills and/or mental adaptation to new experiences. Clearly, this is an area requiring further research.

The Work of Integrating the Experience

The women's work of integrating the experience of abuse with the new reality of their lives following participation in the PSG was described in the findings of this study. The integrative experience of finding meaning, making sense of the abuse, establishing boundaries and planning for the future is
similar to the work described in grief and healing literature (Draucker, 1992; Larson, 1992; Silverman, 1986; Taylor, 1983; Wendler, 1996; Varvaro, 1990). The findings from this study, women's experiences following participation in the PSG, appear very similar to the process of healing described in the literature. This process involves a "sense of wholeness, integration, balance and transformation" (Wendler, 1996, p. 839).

The women in this study appeared to have similar expectations as individuals going through the work of grief and healing. These expectations include making sense of and constructing new meaning from the experience, becoming stronger as a result of surviving the experience, and constructing a future which integrates the experience in a positive way (Draucker, 1992; Larson, 1992; Silverman, 1986; Taylor, 1983; Varvaro, 1990; Wendler, 1996). These authors also note that the presence of formal systems of support to facilitate recovery from and integration of traumatic experiences is fundamental to the success of individuals experiencing growth through the processes of grief and healing. An understanding of the concept of healing, therefore, may assist nurses in supporting women at this stage in their recovery from an abusive relationship:

Campbell, Smith McKenna, Torres, Sheridan, and Landenburger (1993) provide support for this finding in their description of the recovery process that women go through after leaving an abusive relationship. They note that the provision of support may be the mediating factor in the success
of a woman finding meaning and positive outcomes after leaving an abusive relationship - in integrating the experience.

Many of the women attributed the growth in their lives to the insight and new skills generated from the PSG. Landenburger (1993) notes that "the ability to learn that her efforts are effective is essential for the [woman's] cultivation of a positive image of self" (p. 383). All of the women also perceived that they had become more comfortable and confident in their parenting skills and intimate relationships with their children. During the focus groups the women described this process as one of the most important outcomes from the PSG in terms of their feeling successful and confident about themselves. It became quite apparent that being successful in their mothering role, by being able to address and meet their children's needs effectively, was crucial to the women's recovery from their abuse. This finding is supported by previous research (Henderson, 1989, 1990 & 1993). Henderson reports that women who have left abusive relationships are aware that their children are affected by the abuse and that they require assistance in recovering from its effects. The women also felt that they could not meet their children's needs due to the overwhelming issues in their own recovery from the abuse. What is important in this study, however, is that following participation in the PSG the women identified themselves as being able to meet many of their children's needs, provided they are supported in this process. This new-found confidence in relation to their mothering role appeared to serve as an impetus for further growth.
The themes identified in this study were overlapping, as the work of recovering from the abuse was constantly affected by external events and the women's perceptions of support and feedback from others. What was apparent, however, was the women's perception that the abuse was ongoing and that they were continually vulnerable to the negative effect of external events. They also perceived that the support offered from the PSG facilitated the development of strategies that often promoted successful outcomes to previously negative or threatening events. The women described to me, both in the focus group sessions and during my visits as a research assistant, how they had tried out new strategies related to interacting with their abuser. In most cases, the women felt that they had achieved an increased measure of control over these situations as a result of the new strategies. After the PSG ended, the women perceived that they had also acquired new skills for dealing with new events and threats to their recovery process from the abuse. This experience of being able to feel successful in dealing with the abuser and other external events is described by Landenburger (1993) as essential to a woman's attainment of "internal endorsement for who she is and her expression of self" (p.383).

Literature related to self-efficacy provides additional support to the integrative process described in this study (Murdock, & Neafsey, 1995; Strecher, DeVellis, Becker, & Rosenstock, 1986). O'Leary (1985) and Strecher et al. (1995) note that a continued perception of control and success in an important area of one's existence facilitates the person's expectation of
success in future situations. Furthermore, individuals who experience high levels of self-efficacy are more likely to address new challenges with confidence, using accumulated strategies from previous successful outcomes. Self-efficacy theory also recognizes the time element required for solidification of skills and the subsequent fluidity of growth. This recognition of fluidity parallels Landenburger's (1993) observation of women in the recovery phase of an abusive relationship. This author notes that there is both forward, lateral, and backward movement in the recovery process. With appropriate sources of support, women will feel more prepared to deal with new situations and more confident in their abilities to have positive outcomes in the future.

Summary

This chapter has focused on significant components arising from the findings of this study that I believe warranted further discussion. The three components expanded upon and supported by additional literature were: 1) the importance of support; 2) the effect of time; and 3) the work of integrating the experience.

The women in this study noted the unique role that the PSG played in their recovery process. They described the intensity of the bond that they developed with other women who had also experienced abuse. This was a normalizing experience; it was also an experience which provided them with the confidence to discuss their situations, as well as to develop new strategies and skills to address their issues. Most importantly, the women noted that the PSG was different and more useful than any other supports they had
accessed, including one to one counseling, friends and family, because of the shared experience and understanding found in this group.

Time was clearly related to the process of recovery for the women in the PSG study. Those that had been separated from the abuse longer were more able to reframe their experience and identify and address their issues as they had moved beyond a survival mode. Further, those who had been out of the PSG longer were more able to articulate their ongoing support needs. This study also highlighted the concept that the process of recovery is not linear. Rather, women often go through a process of moving forward and backwards during the integration of new skills that they learn to assist them in their recovery process. The findings related to the relationship of time and the nature of the recovery process are vital in the understanding of the long term support needs of women who have left an abusive relationship. The complexity of the interactive nature of these influences requires more study.

In every case, the women were eager to progress to a new place in their lives, separate from their abusive relationship. The goals of recovery from abuse were found to be similar to those outlined in the grief and healing literature which include: making sense of and constructing new meaning from the experience, becoming stronger as a result of surviving the experience, and constructing a future which integrates the experience in a positive way. The support found in the PSG was fundamental to the reconstructing process that women went through after leaving the abusive relationship. The women found that one of the most important variables in this process was the increased
comfort and confidence in parenting their children which they derived from their peers in the PSG.
CHAPTER SIX: SUMMARY, CONCLUSIONS, AND IMPLICATIONS
FOR NURSING

Summary

Over the last decade, there is increased recognition that violence against women, as a social phenomena, has significant physical and psychological implications for those exposed to it (Heise, Pitanguy, & Germain, 1994). Separation or divorce does not end the harassment or violence for women who have been abused (Henderson, 1990; Pagelow, 1984; Shalansky, 1995; Statistics Canada, 1993). In fact, research indicates that the threat of violence actually increases when the woman leaves the relationship.

Many factors such as poverty, safety, and legal issues affect whether or not women leave an abusive relationship (Moss & Taylor, 1991) Confounding this is the fact that women who are mothers must consider, not only their own survival, but also that of their children. In many cases, the trigger for women to leave abusive relationships is concern about the influence of the violence on their children (Bohn, 1990) Clearly, the role of mothering is of primary importance to these women; however, the competing issues associated with the abusive relationship and establishing a new life away from the abuser often leave them unprepared for the role of a single parent.

Nurses are in a unique position to intervene in the cycle of violence through their involvement in the acute and community settings. As well, they are in a position to assist in providing support to women during the difficult
transition time following the separation from the abusive relationship. As identified by Landenburger (1989), the work involved in the recovery stage of an abusive relationship requires intense emotional and physical energy. These women need to work through the grief associated with ending the relationship and to deal with the physical and emotional losses associated with this process (Turner & Shapiro, 1986). In addition, the women are faced with new concerns including custody and access issues (Shalansky, 1995), financial insecurity, and behavioral adjustments of the children (Henderson, 1990; Peled, Jaffe, & Edleson, 1995). Women at this stage of their recovery have been found to benefit from some form of support.

Effective intervention in the form of a parenting support group has been developed and implemented in response to previous study findings regarding perceptions of abused women and their children who had left abusive relationship (Ericksen & Henderson 1992; Henderson, 1990 & 1993). This parenting support group (PSG) intervention was designed to 1) decrease the mothers’ stress in the parenting role and increase their perceptions of support; and 2) decrease the children’s anxiety and increase their coping skills. I became interested in the effect of this parenting support group on the women’s lives through my role as the research assistant who was responsible for the administration of the summative questionnaires to the mothers and children. During the data collection process I was often able to observe the interactional processes between the mothers and their children. The women’s perceptions of their lives since participating in the parenting support group
seemed to vary, as did their experiences with their children. As a result, I believed that it would be beneficial to do a qualitative study that focused on understanding the effect that a parenting support group had in meeting the needs of these women and how the group affected their subsequent life experiences. This has not previously been examined. In addition, valuable information regarding their perceptions of their parenting since participating in the parenting support group could also be obtained. Such findings would be beneficial for the planning and implementation of future parenting support groups for women who have been abused.

Participants in this study were drawn from the 16 battered women who had participated in a parenting support group program. Each of the women who participated were mothers who had left an abusive relationship and had participated in the parenting support group program. The descriptive methodology of this study was guided by a feminist perspective to research inquiry and employed the use of focus groups. Consistent with this methodological approach to data collection, a low level moderator approach to the focus group was undertaken to ensure the 'voice' of the women, not the researcher was heard. Two focus groups were conducted; the first with four participants, the second contained three. The focus groups were audiotaped and subsequently transcribed verbatim by a transcriptionist.

As with other types of qualitative research designs, data analysis occurred concurrently with data collection (Krueger, 1994). Data analysis was based on Giorgi’s (1975) approach involving identification of meaning units,
reflection on these units, and synthesis of these units into a descriptive structure. The themes arising during the analysis were described as 1) connection, 2) confidence, 3) reframing, and 4) self-efficacy. The women described these themes as being non-linear in nature, as they found themselves moving backward and forward through these experiences.

The women described a strong sense of connection that occurred within the parenting support group. Prior to the PSG, they noted that they often did not have people to talk to who understood their situation, and the effect that it still had on their lives. They described feeling isolated and different. In participating in the PSG, they found that they had the opportunity to share experiences not previously voiced or understood, in an environment that facilitated shared meaning. This shared meaning that took place regardless of the differences in age, socioeconomic background or level of previous abuse, appeared to help normalize the women's struggle to make sense of their lives. All of the women perceived that this sense of connection was essential to the development of a group atmosphere in which they could discuss common issues and explore new strategies to use in various aspects of their recovery process.

Another common theme discussed was the increased confidence the women felt, which they perceived resulted from their shared experience and subsequent connection in the PSG. In particular, the women described the change they experienced in their level of confidence in 1) intimate relationships with their children, and 2) parenting skill. Following participation
in the PSG, many felt they had a greater understanding of their relationship
difficulties with their children and had some strategies to try to overcome
these difficulties.

The third theme described by the women has been entitled reframing.
The work of reframing described by the women was discussed within the
components of 1) self-acceptance 2) boundaries with the abuser, and 3)
assertiveness with external forces. The women felt that the PSG allowed them
to challenge previously held beliefs in a supportive forum with women who
had similar experiences. They noted that the support they gained from the
PSG was integral to their ability to reframe themselves and assert themselves
effectively.

Through their experiences, the women described the components of
self-efficacy as: 1) planning for the future, and 2) defining ongoing support
interventions. The women felt that the PSG had provided them with strategies
and confidence to plan for the future. Most of the women noted that they
expected to form new relationships and family structures in the future;
however, they also felt that they would require support in creating and
maintaining these new relationships.

The findings of this study highlighted three important areas warranting
further discussion: 1) the importance of support; 2) the effect of time; and 3)
the work of integrating the experience. The women clearly articulated the vital
role provided by the support from other women who had also experienced
abuse. The support found in the PSG provided a normalizing experience that
allowed the women to freely express and strategize about their own issues; to address these issues. Time was identified as integral to the recovery process, as those who had been away from the abuser longer were able to more clearly identify and address their issues and needs. In every case, the women were working towards moving to a new place in their lives, defined apart from their abuser.

Conclusions

The following conclusions have been formulated based on the findings and discussion of the findings of this study:

1. The women derived a sense of connection with each other in the parenting support group (PSG) that supported their development of knowledge and skills necessary for moving beyond the abusive experience.

2. As a result of their participation in the PSG the women were more confident in parenting their children and in dealing with the ongoing manipulation from their abusers.

3. A PSG provides women with support to: a) develop insight into their experience with abuse; b) develop skills to facilitate their growth in the recovery process; and c) recognize the influence of external events on their internal state.

4. The women saw the work that they had gone through since participating in the PSG as positive to their growth, but, they also identified the necessity of ongoing support to continue this process.
5. The women who have participated in the PSG can articulate the kinds of ongoing support that is required to assist them in adjusting to new situations that occur for them and their children.

6. The recovery phase of an abusive relationship is not linear. Women often go through a process of moving backwards and forwards during the integration of new skills.

7. The process of recovery from an abusive relationship involves time. An awareness of the process of time in integrating new skills is necessary when planning, implementing and evaluating interventions with women who have experienced an abusive relationship.

In looking at the conclusions of this study it appears that nurses are uniquely situated to address the needs of these women and their children and to assist them in their growth away from the abusive experience. In this chapter implications for nursing practice, education, and research will be explored based on the conclusions of this study.

Implications for Nursing Practice

The experience of living in an abusive relationship can affect the long-term mental and physical well-being of women and their children. Research (Shalansky, 1995; Zorza, 1995) suggests that, even after women and their children leave the abusive relationship, the abuse continues; therefore, its harmful effects continue as well.
The findings of this study indicate that support needs to be available for mothers who have left an abusive relationship. Furthermore, one of the most effective ways that this support can be provided is within the context of a group. The nature of the nurse-client relationship provides the opportunity for nurses to develop and facilitate support group interventions in a variety of settings that are appropriate to women's needs during their recovery from abuse (Campbell, 1986; Campbell, Smith McKenna, Torres, Sheridan, & Landenburger, 1993; Ericksen, & Henderson, 1992; Henderson, 1995 & 1989; Henderson, & Ericksen, 1994 & 1992). Further, Humphreys & Fulmer (1993) note that, because of the nature of nursing and its predominately female membership, nurses are uniquely situated to advocate for and relate to women who have experienced abuse.

A variety of theoretical perspectives need to be considered by nurses when developing a support group intervention for women at this phase of their growth away from the abusive relationship. Specifically, nurses would benefit from an understanding of the relationship of self-efficacy and healing in the integrative process of recovering from an abusive relationship. Important considerations for nurses planning future support interventions include: 1) recognition of the non-linear process of the women's recovery; and 2) allowance of time for solidification of new skills and strategies learned in the PSG. Furthermore, strategies aimed at empowering should be developed to facilitate women moving through this process. With this knowledge, nurses can further support women in their empowerment and recognize opportunities
for women to direct and control the amount, type, and nature of the support for their recovery.

Nurses must be aware of factors influencing the success of support groups and direct their efforts towards providing specific interventions which facilitate these outcomes. For example, parenting support groups that facilitate opportunities for the development of a sense of connection among members and the acquisition of new skills to help the women grow beyond the abusive relationship should be a priority. By working with other health care professionals and community and volunteer staff, nurses can assist in meeting some of the long term needs of both the women and their children through provision of parenting support group interventions.

**Education**

The findings of this study indicate that women who have been in an abusive relationship found the PSG effective in providing them with the necessary insight and tools for facilitating their recovery from the abuse. The provision of a PSG intervention is clearly within the scope of nursing practice. It is not reasonable, however, for nurses to be expected to provide this type of support intervention without increased educational preparation related to understanding the women's lived experience of abuse. Educational and employment institutions need to recognize and challenge myths surrounding the incidence of abuse and advocate for the necessity of giving more educational time and value to this area of nursing practice.
Nurses need to become aware of the effects on women and their children of living in and recovery from an abusive relationship. Education related to understanding the multifaceted experience of abuse is needed for nurses to meet the unique needs of women who have experienced abuse. Research findings indicate that nurses' participation in addressing and intervening is directly related to their level of education about abuse (Campbell, & Sheridan, 1989; Drake, 1982). Clearly, increased attention must be directed at providing educational opportunities at both the undergraduate and graduate level of nursing curriculum.

The literature indicates that educational preparation opportunities related to family violence is distinctly lacking for both undergraduate and graduate nurses (Henderson & Ericksen, 1994; Humphreys & Fulmer, 1993; Woodtli, & Breslin, 1996). Many reasons exist for this paucity of educational opportunities including a continued emphasis on other health problems and the existence of nursing practice within a patriarchal medical system. One study investigating nursing curriculum content related to wife abuse found that in over half of the nursing programs surveyed, less than two hours of content time was devoted to this topic (Woodtli, & Breslin, 1996).

More educational content and time is needed in order for nurses to become comfortable with working with abused women and to develop the critical thinking skills necessary to plan and advocate for abused women. Denham (1995) indicates that effective critical thinking skills would encourage nurses to develop a "willingness to forsake personal judgment, stereotypic
attitudes, and dogmatic narrow world views in order to assist clients to analyze situations, identify options and risks, and enable them to choose reflectively" (p.18).

The findings of this study indicate that nurses require educational preparation related to developing support interventions for abused women and their children at all phases of their experience with abuse. In addition, opportunities for nurse's self-exploration of values, beliefs and attitudes related to abuse are warranted during the provision of content regarding the dynamics of abuse. Clinical educational opportunities in transition shelters, community groups, and other support group interventions would also enlighten nurses to the complexity of the support needed to assist women and their children in the recovery process and raise awareness as to the available community resources.

The integration of both theoretical and experiential opportunities in a curriculum would also provide insight for nurses as to the courage and determination of women who experience abuse; perhaps facilitating nurses to question previously held beliefs and values and dispel common myths about abuse.

Ongoing inservice education related to assessment and intervention is also needed to reinforce the practicing nurse's knowledge and level of comfort in addressing the immediate and long term needs of abused women and their children. Initial education should allow for exploration of beliefs, values and assumptions related to abuse in order to meet the learning needs of the
nurses. Further education must address not only strategies related to nurses' "case finding" of women and children but also nurses' awareness of appropriate resources and support once they have identified women and children in need.

**Research**

The findings of this study support the need for increased attention to the long-term needs of women who have experienced abuse beyond the transition period of leaving the abusive relationship. Despite the PSG intervention, these women continue to experience ongoing needs that are unique to their experience with abuse. Further exploration of the long-term needs of both abused women and their children using qualitative research methods would provide substantive support to the provision of ongoing interventions. In addition, the use of qualitative research has the potential to empower abused women and provide a reality to their experience of abuse that cannot be achieved by quantitative analysis. As indicated by Draucker (1992), "theoretical formulation based on survivors descriptions of their own healing, rather than on assumptions drawn from only partially relevant theories of victimization or from the clinician's perception, are essential to understanding the process of recovery" (pg. 5).

The findings of this study support additional research focusing on the children of women who have participated in the PSG to ascertain the children's perceptions of their lives since their mother's participation in the PSG. Of particular interest would be the determination of whether a "spill-over"
recovery effect occurred for the children as a result of their mother’s participation in the PSG. A study focusing on the children’s perceptions would provide further evidence as to the efficacy of the PSG as a support intervention in the recovery process from abuse.

A longitudinal study of the women who have participated in the PSG group is also warranted in order to ascertain their perception of their lives and the influence of the PSG over time. As indicated in the findings, the process of recovery is related to the factor of time. I believe that the women who have participated in this study could provide valuable insight for nurses regarding the long-term recovery and healing process from the experience of abuse. Research in this area could also provide nurses with a perspective related to the impact of external events on the recovery process over the long-term. Findings from this research could assist in the lobbying for and the actual development of interventions to address ongoing external events impeding the recovery process.

The findings of this study also support the need for nurses to become aware of the long term needs of abused women and their children. The women in this study identified that they and their children had ongoing support needs that were not met by the PSG. Additional studies are needed to address this knowledge gap and to aid in the provision of appropriate support interventions to assist in the recovery process.

The role of nursing in addressing the experience of abuse of mothers who have left an abusive relationship was discussed through exploration of
the implications of this study for nursing practice, education, and research. It is evident that nursing can make a difference in the lives of this group of women in their recovery process. By providing supportive interventions such as a parenting support group, nurses may also indirectly have a positive impact on the children of these women. Creative and realistic interventions, that address the needs identified by women who have experienced abuse, such as the PSG, need to be developed. Furthermore, attention to the ongoing needs of these women and their children need to be addressed. This can be achieved by nursing research using qualitative methods that encourage the voice of both women and their children. Finally, through supportive educational preparation and awareness of their role as client advocates, nurses can prevent the incidence of abuse and foster the recovery of the survivors of this experience, thus arresting the cycle of violence.
References


Appendix A
Parenting Support Group Information

Ericksen, J. R. & Henderson, A. D. Children in transition: Parenting support groups as a strategy for meeting the needs of child witnesses to wife abuse. BC Health Research Foundation Grant # 5-53248.

The goal of the parenting support program is to enhance the mothers' perceptions of their coping skills by increasing their feelings of social support and decreasing their stress. This is accomplished by identifying issues that are pertinent to the women as affecting their ability to work through the battering relationship. The intended outcomes of this program are to first assist the women to develop coping skills to deal with their identified women's issues, leaving them with more energy to effectively deal with their children's needs. Secondly, the enhanced mother/child interaction will facilitate a positive impact on the anxiety levels and coping skills of the children. The program, which is offered in conjunction with an agency which provides services to battered women, has been conducted utilizing a group discussion format with two facilitators in each session. The program, which encourages women to share experiences and be resources for each other, initially focuses on examining the mother's issues and experiences with their children, with the intent of developing an awareness of the effect that the violence has had on the women and their children. Discussion related to the developmental stages and expected behaviors of the children is also covered. Material and discussion related to utilization of healthy coping mechanisms, accessing
appropriate health and community resources, and positive parenting approaches is also covered. Topic content area for the ten week sessions includes: 1) introduction, 2) effects of living with violence, 3) realities of day-to-day survival, 4) ongoing contact with your children’s father, 5) living non-violently, 6) assertive communication, 7) parenting approaches, 8) coping strategies for mothers, 9) the system; what’s in it for you and your children, 10) wrap-up and summary. Content is covered using a variety of strategies including group-building exercises, small group work, role-playing, short films or videos, and participants maintaining a diary. In addition written material is provided to the women relating to specific content areas.
Participant's Information Letter

Dear: 

My name is Karin Petersen. I am a Registered Nurse and a Master's student in the School of Nursing at the University of British Columbia. My thesis is concerned with examining the effect that participation in a parenting support group has had on mothers who have left an abusive relationship. This letter is to invite you to participate in my research study. The title of my study is: "Mothers Who Have Left an Abusive Relationship: The Effect of Their Participation in a Parenting Support Group".

I initially became interested in exploring the effect that a parenting support group had made in the lives of women who have left an abusive relationship, through my role as a research assistant in the research study concerned with the development of the parenting support group. My role was to collect data from the participants during three scheduled visits, using questionnaires. These visits also allowed me the opportunity to participate in informal discussions with the women who had participated in the group. I became aware that the effect of participating in the parenting support group varied for the women, depending on numerous factors. To perform my research study, I would like to meet with the women who participated in the parenting support program, to have them share their perceptions of the effect that participating in the group had on their lives.

Your involvement will include participation in a one-time focus group discussion with other women who have also participated in the parenting support program. The group session will be held at the North Shore Crisis Services Society facility. The total time commitment will be approximately one to one and a half hours in length. The focus group sessions will be audio-taped and transcribed. The secretary responsible for transcribing the audio-tapes will also be present during the focus group sessions, to ensure the efficient functioning of the tape recorder. She is sensitive to the confidential nature of the focus group session, and will be required to sign a letter of confidentiality prior to her participation in the study.
Your name or those of your children or ex-partner and any other identifying information will not be included in the transcription. Only myself and the members of my thesis committee will have access to the information that you provide. All the data which relates to you will be kept in a locked filing cabinet in my home, and destroyed at the end of the study.

I recognize that a previous relationship exists as a result of my contact with you as a research assistant in the parenting support group study. As a result of our relationship, you may feel additional pressure to participate in this study. I wish to make it abundantly clear to you, however, that you are in no way obligated to participate in this study. If you choose to not participate or to withdraw from the study at any time, you will in no way jeopardize your right to use the services of the North Shore Crisis Services Society. Should you wish to access the counseling and support services of the North Shore Crisis Services Society during or following the interview these will be made available to you. If you are interested in participating in this study, or would like more information, please feel free to contact me by leaving your name and phone number with the North Shore Crisis Services Society at 987-1773.

Yours sincerely,

Karin Petersen
APPENDIX D

Interview Questions

Trigger Questions:
1) What were your reasons for joining the parenting support group?
2) What did you hope to get out of it?
3) Describe what it was like being in the parenting support group.
4) How has being in the group affected you?
5) In what ways have you changed since participating in the program? In terms of:
   - your behavior?
   - the way you think?
   - your feelings?
   - your approach to your child?
6) What suggestions would you have for similar upcoming groups?

Prompts:
- To what do you attribute this to?
- Why was this important?
- What would you have liked to have happened? Why?
  - How did that affect you?