An exploration of the intrapsychic experiences of male IPV perpetrators through Object Relations Theory

A mini-dissertation submitted in partial fulfilment of the requirements for the degree

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DECLARATION OF ORIGINALITY

I, Lusanda Mateza (15229344), hereby declare that this mini-dissertation (An exploration of the intrapsychic experiences of male IPV perpetrators through Object Relations Theory) is my own work except where I used or quoted another source, which has been acknowledged and referenced. I further declare that the work that I am submitting has not previously been submitted for purposes of another degree or to any other university or tertiary institution for examination.

L Mateza

June 2022

ETHICS STATEMENT

I, Lusanda Mateza (u15229344), have obtained the applicable research ethics approval for the research titled 'An exploration of the intrapsychic experiences of male IPV perpetrators through Object Relations Theory' on 29 June 2021 (reference number: HUM 030/0820) from Prof Karen Harris, in her capacity as the Acting Chair of the Research Ethics Committee, in the Faculty of Humanities at the University of Pretoria.

ABSTRACT

Owing to its devastatingly near pandemic proportion in South Africa, research on intimate partner violence (IPV) has examined victims' experiences and the impact on their psychological well-being. There is a dearth of literature on perpetrators' experiences, especially their intrapsychic conflicts and how that may be significant in their perpetration of IPV. Accordingly, the aim of this study was to explore the intrapsychic dynamics involved in the experiences of male IPV perpetrators. Consequently, object relations theory (ORT) was employed as an interpretive lens through which the perpetrators' internal and thus external object representation was interpreted. Semi-structured interviews were conducted with five male perpetrators to shed light on their emotive and experiential reality in perpetrating IPV. To interpret and understand their experiences, interpretive thematic analysis (ITA) was employed to analyse the data. The findings revealed that the perpetrators experienced remorse, shame, and guilt consequent to the harm they had inflicted on their partners. Furthermore, it was through internalised persecutory objects that they represented and experienced themselves in relation to their external reality. Unresolved psychic conflicts, which originated specifically from self-object relational dynamics, were attributed as being significant in IPV perpetration. The caregiver-child relationships the perpetrators described informed external and internal representations of the self and other. These representations were thus characterised by unfulfilled needs, neglect and aggression. One may deduce that the development of the personality structure in the internalisations of self-other representations influences how life is experienced. IPV is therefore a re-enactment of unresolved early childhood trauma. These findings shed light on the intrapsychic dynamics of IPV perpetrators, which should be considered in the development of effective IPV interventions.

Keywords: *intimate partner violence (IPV), objects relations theory (ORT), male perpetrators, intrapsychic experiences, interpretive thematic analysis*

TABLE OF CONTENTS

LIST OF TABLES

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

ACRONYMS AND ABBREVIATIONS

IPV: Intimate Partner Violence

ITA: Interpretive Thematic Analysis

ORT: Object Relations Theory

SES: Socio-economic status

WHO: World Health Organisation

CHAPTER 1: INTRODUCTION

1.1 Introduction

In this chapter, the background of the study is presented, providing an account of intrapsychic challenges experienced by male perpetrators of intimate partner violence (IPV) and as such, the effect on their external world. The rationale, research questions and overall aim in conjunction with the objectives of the study are provided. Thereafter, the research methods that were employed are described. Finally, the chapters of the dissertation are outlined.

In 2013, the World Health Organisation (WHO), in a review of global data on IPV between 1982 and 2011, found that amongst low to middle income countries in Africa, South Africa had a prevalence rate of 36.6%, the highest in the world. Metheny and Essack (2020), Gordon (2016) and Sellin et al. (2019) concurred with these devastating rates of IPV. While IPV can take the form of psychological abuse, sexual violence, and coercive control, in this study, the focus was on physical violence due to the severity, prevalence and consequences of physical IPV (Spencer et al., 2019). Moreover, physical IPV has detrimental consequences, including physical injury and death. Physical IPV includes hitting, punching, kicking, slapping and using weapons. Compared to Gender-Based Violence which is concerned with various forms of violence against women where the perpetrator may even be a stranger to the victim, IPV focuses on the perpetrator being the victim's partner (Odeku, 2021).

Sere et al. (2021) revealed that South Africa has one of the highest IPV prevalence rates in the world. These rates range from 20% to 50%, where women have reported experiencing IPV at some point in their lives. Sere et al. (2021) also noted South Africa has a femicide rate that is four times higher than that of the global rate. These shocking and devastating findings are an indication of the severity of IPV in South Africa, particularly when it results in the death of victims, which suggests the likelihood of long periods of repeated violence. Because of the profound and far-reaching economic, social and psychological consequences of IPV for women in South Africa, research has primarily examined their experiences as victims of IPV.

Despite the extensive body of knowledge that numerous studies on IPV in South Africa have revealed, there is a scarcity of research conducted on the experiences of male perpetrators in townships, particularly from an object relations perspective. The majority of studies on IPV in South Africa have employed quantitative research designs to examine the

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

experiences of female victims of IPV (van Niekerk & Boonzaier, 2019). Accordingly, in this study, object relations theory (ORT) was adopted to explore the experiences of men who perpetrate IPV in the township of Tembisa. Not only does this study contribute to creating a psychologically holistic and in-depth narrative underpinning IPV perpetration in South Africa but it informs therapeutic and treatment goals in the development of comprehensive, effective, and sustainable rehabilitative interventions for perpetrators of IPV.

1.2 Background

Research on the perpetration of IPV by male perpetrators in South Africa has shown that several underlying intrapsychic factors may be at play such as economic and emotional deprivation. Gibbs et al. (2018) noted that food insecurity, for example, is associated with higher levels of stress and conflict, which, in turn, may have adverse effects on intimate relationships. Poverty places stress on intimate relationships and in particular, on the male in the relationship who may experience added pressure to provide economically amid limited household resources. This belief, which has been entrenched by gender identities, may result in IPV perpetration (Gibbs et al., 2018; Hatcher et al., 2014). Hatcher et al. (2014) stressed that poverty and the gendered pressure to be the economic provider leads men to perceive themselves as failures because of their inability to provide adequately for their financial needs, and those of their families. Psychologically, poverty and IPV may be linked in that men's mental health may decline because of depression and anxiety related to financial provision and unhealthy coping strategies such as alcohol and infidelity (Hatcher et al., 2014).

Moreover, and in accord with the aim of this study, interpersonal relationships seem to suffer when individuals experience unresolved intrapsychic conflicts related to their parent-child relationships in which the adequate provision of material and emotional needs are ineffective (Frankland, 2010). These relationships are seminal in providing the template for subsequent relationships. Furthermore, these conflicts often lead to the perception that their environment does not appreciate their needs and the fulfilment thereof. Consequently, in adulthood, their experience of relationships can be described as hostile and volatile. In his seminal work, Winnicott (1960) explained that environments that effectively provide for an infant both psychologically and physiologically are imperative to ensure that infants' needs are met. This speaks to the act of holding wherein an infant is able to find refuge in the stability and certainty of an environment that facilitates ego-strength. Thus, an individual

does not have to resort to primitive defenses to compensate for impingements in emotional development because of failure in the holding environment.

It is essential to explore excessive alcohol consumption as an IPV contributing factor, which may also suggest maladaptive coping strategies in response to challenges (McCloskey et al., 2016). Birrell (2014) proposed that ego and/or self-deficits, poor regulation and the inability to self-soothe underlie the excessive use of alcohol. This may be attributed to poor early caregiving. The psychic structure of individuals who received effective early parenting can self-soothe when they experience overwhelming emotions. On the contrary, individuals who do not experience effective early parenting are more likely to use an external object such as alcohol to achieve this (Birrell, 2014). When early caregiving does not fulfil children's grandiose and narcissistic needs, their psychic structure may subsequently have deficits that alcohol may meet. Excessive alcohol consumption engenders one's inability to inhibit impulses, self-regulate and make decisions effectively. Thus, it may be a catalyst for perpetration when conflicts arise and are resolved ineffectively and violently

Research on IPV perpetration in South Africa has demonstrated explicitly that IPV intersects with several other challenges that perpetuate it. These challenges exist on a larger societal scale as well as individually. However, light is shed on individual and psychological determinants of IPV perpetration in this study.

1.3 Rationale

The violence that men inflict on their intimate partners is influenced by several societal, psychological, biological and familial risk factors (Whiting et al., 2014), including economic disadvantages, child maltreatment, stress, psychopathology, men's gender role socialisation and alcohol and/or substance abuse. Whiting et al. (2014) explained that male perpetrators of IPV continue to be dangerous. The commissioning of this study was based on this premise and thus, the focus on understanding and exploring internal experiences of male perpetrators of IPV as informed by underlying psychological factors.

Joyner and Mash (2012) found that 62.4% of the interpersonal violence women experience is explained by IPV. Some of the outcomes of IPV include femicide, suicide, anxiety and posttraumatic stress (Joyner & Mash, 2012). Mathews et al. (2011) debated the importance of considering the social aspects of IPV, including social constructions of masculinity and potential preceding factors such as alcohol and/or substance abuse as well as the ownership of firearms. However, there is little insight into individual factors on an

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

intrapsychic level that a psychodynamic perspective may be able to elucidate. This is imperative considering IPV is a complex issue in which childhood abuse and neglect as well as relational trauma seem to be apparent. Friedman (2013) argued that these factors may shed light on why some men are predisposed to perpetrating IPV.

ORT posits that early interpersonal trauma can disrupt the development of an individual's understanding that the other is a whole object as well as a whole and separate being (Spermon et al., 2010). This may be related to the integrated relationship individuals enjoy with their caregivers during childhood, which progressively leads to a healthy separation of whole objects. However, when this process does not occur, individuals are unlikely to develop the capacity to distinguish *me* from *not me* boundaries (Spermon et al., 2010). This capacity is important in subsequent relationships to afford individuals the opportunity to enjoy healthy interpersonal relationships that are not premised on early interpersonal trauma. Szymanski and Springer (2014) found that children who experienced early trauma and were subsequently aggressive and violent perceived and experienced others more negatively. The impact of early interpersonal trauma is significant because of the fewer resources with which they may use to cope and as such may predict deficits in emotional regulation and socially appropriate expressions of emotions (Szymanski & Springer, 2014)

There is a dearth of literature pertaining to the investigation of experiences of perpetrators of IPV in South Africa, particularly in a township such as Tembisa. Makongoza and Nduna (2021) examined IPV in Soweto, specifically young women's experiences and perceptions. Abrahams et al. (2006) investigated the prevalence and risk factors of IPV in Khayelitsha. Research on IPV in South African townships has not focused on Tembisa. Accordingly, this gap was addressed in this study. There is also a paucity in literature that employs ORT as a theoretical lens through which to shed an interpretive light on the descriptions of the perpetuation of IPV, particularly in low-to-middle income countries such as South Africa. Furthermore, research on the experiential and emotive reality of perpetrators of IPV is crucial because existing literature has tended to focus on the accounts of women who have experienced IPV perpetrated by their male intimate partners (Whitaker, 2014). The inclusion of male experiences of perpetrating IPV attempts to provide a more holistically integrative picture of IPV to understand the intersection of multiple factors in the lives of perpetrators from their experiential reality (Peralta et al., 2010). In this study, male perpetrators' experiences were emphasised through the exploration of individual factors as accounted for by ORT.

1.4 Research question

The research question that this study sought to answer was: What are the intrapsychic experiences of male perpetrators of IPV in Tembisa, Gauteng?

1.5 Aim of the study

The purpose of this study was to explore the intrapsychic experiences of men who perpetrate IPV in Tembisa, Gauteng.

In order to realise this aim, the following objectives were set:

- To understand men's psychological experiences in perpetrating IPV
- To explain the role of object relational dynamics in IPV

1.6 Significance of the study

There is a scarcity of research that has adopted ORT to explain IPV, particularly in South Africa. More specifically, how the psychoanalytic perspective can provide an understanding of unconscious motivations of IPV such as internal conflicts between impulses, prohibitions, defenses and early childhood experiences.

This study sought to inform comprehensive programmes and interventions for male perpetrators of IPV in townships and other less-researched areas of South Africa. This is particularly beneficial to ensure that programmes account for intrapsychic dynamics that underlie the male perpetration of IPV, thus highlighting that an exploration of IPV cannot be devoid of an intrapsychic component and how that may be influenced by various socio-economic factors. This is important to afford an understanding that IPV is a complex phenomenon with idiosyncratic psychological nuances and contextual factors. These programmes can adopt self-integrative rehabilitative or therapeutic forms.

1.7 Theoretical framework

As the study endeavoured to understand intrapsychic experiences of male perpetrators of IPV, ORT was considered beneficial because of its emphasis on the psychic dynamics re-enacted in interpersonal relations. This was further substantiated by the commonly used defense mechanisms of splitting, projection, denial and introjection that may be present in IPV perpetration. Hyde-Nolan and Juliao (2012) concurred that the use of these psychic defenses in adulthood hinders individuals from recognising abuse in their adult relationships and maintaining relationships with individuals that resemble abusive and

negligent caretakers from their childhood as well as the feelings of anxiety and rage generated by that. This elucidates how IPV is a pathological expression of aggression because of the false sense of reality seen in the limited ego functioning and intense aggression that the distorted superego endorses (Herron & Javier, 2018).

1.8 Description of research methodology

1.8.1 Participants

Purposive sampling was employed to recruit five participants. To be recruited, these participants had to be part of a specified group (Etikan et al., 2016). The dissemination of advertisements on social media platforms was paramount in recruiting participants. The inclusion criteria required participants to be male, over the age of 18, residing in Tembisa and have perpetrated IPV at least once.

1.8.2 Methods of data collection.

Semi-structured interviews were conducted to explore the intrapsychic experiences of male perpetrators of IPV as coloured by their object relational conflicts and dynamics. Due to the flexible nature of semi-structured interviews, the participants were able to guide the interviews in a manner that highlighted aspects of their experiences that the researcher may have unintentionally overlooked (Bearman, 2019). The participants were afforded the opportunity to communicate their experiences in their own voice, with the researcher only facilitating the interviews (Bearman, 2019). The interviews were audio-recorded once consent had been obtained from the participants, further ensuring that the participants' experiences were captured as closely as possible.

1.8.3 Data analysis

To analyse the collected data, interpretive thematic analysis (ITA) was employed. In conjunction with the interpretive intention of the study, ITA is an exploratory process that makes meaning of identified themes (Braun & Clarke, 2006). Flexibility is required in ITA to ensure that the experiences of the perpetrators are captured meaningfully. ITA also adopts an interpretive standpoint to enable the researcher to search for meaning in the identified themes (Braun & Clarke, 2006). The data analysis process involved transcribing the interviews once they had been recorded. Themes were identified from the transcriptions and organised and coded accordingly. In drawing conclusions, themes that were poignant to the aim and objectives of the study were identified to achieve an in-depth understanding.

1.9 Outline of chapters

Chapter 1 comprises a summative background, rationale, aim, research question, significance and contribution of the study. In Chapter 2, the literature pertaining to the experiences of male perpetrators of IPV in South Africa and abroad is outlined. More specifically, the experiences of male perpetrators of IPV from a psychoanalytic perspective as articulated through the ORT are presented. The research methods employed are discussed in Chapter 3. More specifically, the research design, data analysis employed, setting, sample and recruitment process are described. Furthermore, ethical considerations and an explanation of the researcher's reflexive process are included in this chapter. The results of the study are presented in Chapter 4. The findings of the study are discussed in accordance with the themes that emerged from the data analysis. A discussion of the results as derived from the emergent themes comprises Chapter 5. Relevant literature in accordance with the aim and rationale of the study are integrated into the discussion. Finally, in Chapter 6, the study's limitations are discussed and recommendations for further research are made.

1.10 Conclusion

In this chapter, an overview of male perpetrated IPV related to the experience of these men in the South African context was provided. Furthermore, the study's rationale, research question, aim and significance were outlined. Subsequently, the theoretical framework that underpinned the study was provided. Thereafter, the research methods that were employed were outlined. In the next chapter, relevant literature is reviewed.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

In this chapter, literature related to the experiences of male perpetrators of intimate partner violence (IPV) in South Africa and abroad is reviewed. The focus is specifically on psychological factors that influence male perpetrated IPV in South Africa, including the role played by alcohol use and perpetrators' deeply entrenched psychic issues of control and dominance. Furthermore, parent-child relationships of perpetrators, particularly parenting practices characterised by emotional deprivation and the manner in which this maladaptively (pathologically) finds expression through IPV perpetration are discussed. Furthermore, how male perpetration of IPV can be understood from the perspective of object relations theory (ORT) is integrated.

South Africa has the highest recorded femicide rate in the world: women are killed by their intimate partners (Sere et al., 2021). This exploration is premised on the understanding of the internal workings of men who subject women in South Africa to IPV in the private and intimate space of their relationships and homes (Zembe et al., 2015). Accordingly, IPV refers to all threats and acts of physical, psychological, sexual and emotional violence perpetrated by a former or current intimate partner or spouse (Zembe et al., 2015). This definition of IPV highlights how violence can take many forms and includes the intention and acts committed to cause harm and injury as well as the private nature of this specific kind of violence. As noted previously, this study focussed on physical violence perpetrated by men against their intimate partners in a particular township.

Accordingly, the experiences of perpetrators are considered holistically from the perspective of how their psycho-social circumstances and traumatic self-object experiences impair their sense of self due to disrupted psychic structures, which results in an incapacity for empathy, maladaptive coping mechanisms and self-dysregulation (Whitaker, 2014). Consequently, this study sought to explore the experience of perpetrating IPV, especially the interpersonal and intrapsychic factors that contribute to this phenomenon in South Africa, in Tembisa.

2.2 IPV in South Africa and internationally

IPV perpetration has been strongly linked to childhood trauma and abuse as well as exposure to and witnessing IPV perpetration and institutional violence. This may be related

to IPV perpetrators' psychological health, especially their childhood experiences (van Niekerk & Boonzaier, 2018). ORT espouses that during childhood interpersonal relationships are transformed into internal representations of oneself as well as that of one's relationships (Hill et al., 2012). IPV perpetrators often have fragmented representations of the self and are mistrustful. Hill et al. (2012) noted that this is due to adverse childhood experiences that lead to anxious intrapsychic and interpersonal experiences in adulthood.

van Niekerk and Boonzaier (2019) argued that research conducted from epidemiological and public health perspectives on IPV employ language that absolves men from responsibility as perpetrators of IPV by attributing IPV to external forces such as poverty and unemployment, thereby detaching IPV from the social and gendered context in which it is embedded. While it is imperative to understand IPV from the social context in which it occurs, van Niekerk and Boonzaier proposed that it is also important to highlight individual factors that make IPV possible to account for the individual's intrapsychic and interpersonal dynamics. However, studies on IPV have failed to examine the psychological state of perpetrators of IPV on which the socio-emotional context may have had an influence. In this study, this was addressed by exploring the intrapsychic experiences of male perpetrators of IPV, which are steeped in their object-relational dynamics.

Machisa et al. (2016) supported evidence that exposure to violent childhood experiences and child abuse exacerbate male IPV perpetration. In a study of 416 men in the Gauteng province of South Africa, these authors found that childhood exposure to violence and trauma was a risk factor for poor mental health and IPV perpetration. They further highlighted risk factors and mental health issues that become apparent in male IPV perpetrators. Similarly, in a study of men who were incarcerated for the murders of their intimate partners, Mathews et al. (2011) concluded that traumatic and violent childhood experiences had a significant influence on their conduct as adults in intimate and romantic relationships. In addition to interviewing the men, Mathews et al. (2011) interviewed their families and friends in an attempt to explore their childhood in relation to childhood adversity that may have shaped their masculinity and ultimately, perpetration of IPV. Heightened emotional vulnerability is considered to be a consequence of these adverse childhood experiences that result in insecurity, feelings of being unloved and powerlessness. Although Machisa et al. (2016) emphasised the role of violent and traumatic childhood experiences in male IPV perpetrators, specific endeavours to explore those experiences beyond the narratives of violence and masculinity and their constructivist meanings were absent.

Watt and Scrandis (2013) revealed that there is an increased likelihood of male perpetrated IPV in the United States of America (USA) when there is a history childhood trauma and violence. This concurs with Mathews et al. (2011) and Machisa et al. (2016). Children who have been exposed to such adverse childhood experiences have limited tolerance for stress and suffer overwhelming and distressing emotions, which is apparent in male IPV perpetrators. Peralta et al. (2010) found more than any other substance, alcohol was associated with male perpetrated IPV among a sample of Black men in USA. Waller et al. (2013) reported that 30 – 40% of men perpetrated IPV against their partners while they were intoxicated. While excessive alcohol is not the cause for male perpetrated IPV, it is significant in understanding that those who consume alcohol excessively may be at an increased risk of acting violently in relationships (Waller et al., 2013). While these studies may shed light on the physiological impact of alcohol and how it subsequently influences behaviour pertaining to IPV perpetration, the psychic role of alcohol in an attempt to modulate against the rudimentary experience of one's internal and external world has not been explored.

The completion of this study took place during the COVID-19 pandemic where various lockdown safety measures were enforced in attempts to curb the spread of the virus. These measures included social isolation, quarantine and restricted movement (Dekel & Abrahams, 2021). Women and their partners had to subsequently be confined to the home where their abusive partners had increase opportunities to inflict harm at an accelerated rate compared to prior to the outbreak of the COVID-19 pandemic (Odeku, 2021). This forced co-existence and additional time spent with partners thus saw an upsurge in IPV. Being confined to the home saw women in an abusive relationship had were often trapped with their abusive partners with limited to no means of transport to escape the home or access their support networks and often resulting in further emotional and financial dependence on the perpetrators (Dekel & Abrahams, 2021). The pandemic also worsened already stressful home situations that were plagued with parenting stress and food insecurity, for example. Job loss or reduced working hours added more stress on such homes. These factors and the stress that is caused create fertile ground for IPV perpetration and vulnerability. Social isolation in the home turned homes that should be considered to be safe, into dangerous spaces where women could not escape and thus compelled to tackle alone (Gordon & Sauti, 2022).

From a psychodynamic perspective, IPV reflects a failure of the psychic process of integration responsible for integrating emotional experiences (Di Napoli et al., 2019). It is from this theoretical underpinning that male IPV perpetrators who struggle to cope with

affective experiences are understood to demonstrate fragmented and hostile selves. An internalised sense of fear, self-annihilation and impotence is the driving force of male perpetrated IPV. Di Napoli et al. (2019) suggested that adverse childhood experiences are seminal in understanding that perceived internal threats of annihilation may lead to IPV. When frustration, uncertainty and fear are the emotional backdrops of early childhood in the relationship between a child and primary caregiver, interpersonal relationships marked by hostility are experienced in adulthood (van der Merwe & Swarts, 2014). Intimate relationships in adulthood may become arenas of re-enactment of unresolved childhood difficulties (van der Merwe & Swarts, 2014). The ability to tolerate difficult affect, one of the psychological aspects with which IPV perpetrators struggle, is also compromised.

Flood (2011) recommended that men and boys should be involved in preventative and educational campaigns and programmes related to eradicating IPV. The absence of men in such programmes has implications for how IPV is perceived as an issue for women who suffer the consequences alone. This negates how IPV is largely perpetrated by men, further suggesting the necessity for them to participate in IPV interventions. In accordance with propositions by Flood for increased involvement of men, this study attempted to centre on men and the impact of significant parent and/or caregiver relationships on their perpetration of IPV. van der Merwe and Swarts (2014) asserted that the process of psychic splitting occurs when psychological trauma such as that experienced in early childhood is prevalent. Male IPV perpetrators may exhibit a fragmented sense of self in which a shameful and malevolent self is concealed by what appears to be a socially conforming and false self. This split not only perpetuates a disintegrated self but psychological difficulties too. Interpersonal relationships are likely to suffer because unpleasant internal parts of oneself are projected onto intimate partners (van der Merwe & Swarts, 2014).

Speizer (2010) successfully examined IPV in the manner that Flood (2011) recommended. In the exploration of men and women's attitudes towards and experiences of IPV, Speizer (2010) revealed that witnessing IPV between parental figures during childhood was associated with positive attitudes towards IPV for both men and women. Speizer's study is one of the few conducted in Uganda, an African country south of the Sahara. Lee et al. (2013) found that exposure to family violence during childhood is related to the perpetration of IPV during adulthood. However, this is not always the case for all male IPV perpetrators. Furthermore, exposure to childhood violence does not mean that a pattern of IPV or even abuse will be evident in adulthood (Hoskin & Kunkel, 2020). This suggests that the experiences of male IPV perpetrators are not the same, thus calling for an in-depth exploration of experiences and pathways to IPV perpetration. This will not only afford an

understanding of the psychic structure underlying IPV perpetration but also suggests that interventions in this regard may be effective.

Alcohol and drug disorders increase the risk of poverty, homelessness, low income and unemployment, which can place additional stress on relationships and lead to conflict and IPV (Lee et al., 2013). Hoskin and Kunkel (2020) found that childhood parent-perpetrated violence, approval of IPV and impulsivity were the most important predictors of IPV perpetration. While no single factor or theory explains IPV adequately various risk factors have been consistently associated with IPV perpetration: low income, unemployment, childhood abuse, witnessing IPV as a child, substance use, mental health disorders, including depression, anxiety, personality disorders and bipolar disorder, anger, hostility, poor executive function, low empathy, relationship conflicts, sexist attitudes and those that condone violence, and support for gender-specific roles (Dixon & Graham-Kevan, 2011). Eckhardt et al. (2015) also found that a pattern of excessive alcohol consumption as well as acute alcohol intoxication was one of the factors that are closely linked to male perpetrated IPV.

2.3 The relationship between IPV and alcohol abuse

Lee et al. (2020) found that alcohol has a stronger correlation to male IPV perpetration than other substances. Yaya and Ghose (2019) asserted that excessive alcohol consumption plays a role in IPV, in that it reduces self-control and increases the likelihood of aggression. Excessive discordant alcohol consumption in intimate partner relationships may engender relationship stress, marital dissatisfaction and increase the perpetration of abusive and violent actions against the other (Yaya & Ghose, 2019). Jewkes (2002) noted that this is due to reduced inhibitions, an inability to interpret social cues and control impulses, and thwarting one's decision-making capacity, which may feel annihilatory.

The psychodynamic perspective posits that alcohol abuse is an attempt at defending and protecting oneself from certain affect states such as fear, hopelessness and helplessness, which are potentially directed at interpersonal and socio-economic conditions (Khantzian, 2015). However, Leonard (2005) noted that while alcohol abuse may be a legitimate factor in IPV, it is noteworthy that alcohol should not be used as an *excuse* for aggressive and violent behaviour, and as such perpetrators should be held accountable and culpable. However, alcohol is an external object that can be split into its ability to provide relief and gratification and its hostile and foreign nature. While the former is projected outward, the latter is internalised in conjunction with the destructive perception of the self (Fuchshuber & Unterrainer, 2020). When in the depressive position, excessive alcohol consumption is employed to protect the individual from intrapsychic conflict.

Gilchrist et al. (2019) studied the interplay between substance use and IPV perpetration. Survivors described IPV perpetration during alcohol intoxication as being consistent with their partner's general pattern of behaviour, which was characterised by a desire for control and power. On the contrary, while intoxicated with alcohol, male IPV perpetrators isolated the event and blamed their behaviour on their alcohol intoxication (Gilchrist et al., 2019). Both survivors and perpetrators perceive alcohol as an agent that fuel men to act out of character and turn into *monsters* or *another person.* Gilchrist et al. (2019) argued that IPV is mostly linked to men's ideas related to their superiority, expectations and/or demands for respect. This is often present when the perpetrator is dependent on or misuses alcohol. However, alcohol intoxication exacerbates these notions.

Finally, Gilchrist et al. (2019) revealed an interplay between male IPV perpetration and their psychological vulnerabilities as well as childhood trauma. Some perpetrators attributed their behaviour to negative experiences in childhood and employed alcohol intoxication to medicate those vulnerabilities. Whereas the perpetrators' *real selves* lie

dormant, alcohol intoxication protects their psychological vulnerabilities and becomes a justifiable response to their current anxiety, anger and insecurity. Intoxication allows the perpetrators to escape their reality from unbearable affect (Habibi et al., 2016). Similar to the perpetration of IPV being attributed to alcohol consumption, IPV has been attributed to parenting practices and behaviours.

2.4 Parent-child relationships of male IPV perpetrators according to object relations theory

Childhood exposure to trauma can include child abuse and/or neglect as well as witnessing parental IPV such that children develop hostile and maladaptive coping defenses in response to these traumatic childhood events. Forke et al. (2018) concurred and suggested that when children are witnesses to adult violence in their homes, they tend to be at risk of future violence, specifically in their own relationships as adolescents and adults. The nature of relationships between parents and their children is posited to be a natural phenomenon. Consequently, future relationships of those deprived of such implicitly mediating and functional relationships tend to be adversely affected.

From an ORT perspective, in his seminal work, Winnicott (1960) emphasised that the mother is important in the early childhood development of a child and referred to this as the holding function of the mother. This function is necessary to ensure children are provided for by their environment sufficiently and cared for and protected from potential harm, thus facilitating integration into the world. It is thus evident that parent-child relationships are paramount in the provision of material and emotional needs as well as ego-support in facilitating ego-strength. Parent-child relationships that are not characterised by nurturing are often marked by children who have witnessed violence, which leads to decreased self-esteem (Forke et al., 2018). Similarly, the absence of a functional parent-child relationship may result in emotion dysregulation and aggressive behaviours. In addition, parenting behaviour and practices are often transmitted from one generation to the next such that harsh discipline techniques used by fathers are similar to those that were employed by their own parents (Stover & Kahn, 2013). This suggests that the parent-child relationship, parenting practices, and exposure to violence and IPV are crucial in understanding IPV perpetration. Mental representations of childhood experiences and the caregiving environment between the parent-child dyad are strongly implicated in IPV perpetration. The psyche of male IPV perpetrators is thus characterised by the anxiety of self-annihilation where primary caregivers have failed to create safe holding environments that are able to

contain anxiety and facilitate stable ego development. It is in this holding that object relations are formed (Winnicott, 1960).

Parenting has been identified as a mechanism that influences the overall development of the child (Gustafsson et al., 2012). In IPV perpetration, the parent-child relationship is adversely affected such that the psychological adjustment of the child is compromised along with a relationship that is engaging and providing of emotional needs and emotional connection (Briggs-Gowan et al., 2019). This suggests that in the context of IPV, parenting behaviour is affected as well as the parent-child relationship. Parenting behaviours are important for facilitating self-regulation, which is hampered in households in which IPV is perpetrated (Gustafsson et al., 2012). Thus, parenting behaviours that are devoid of effective caregiving systems and routine, affect the development of self-regulation, empathy and self-esteem, and appear to be implicated in IPV.

One's psychological life comprises mental representations of both oneself and others, in particular, childhood caretakers (Siegel & Forero, 2012). These representations consist of the *good* and *bad* attributes of those individuals. The goal thereof is to assimilate and reconcile those aspects into a mental representation that can both disappoint and please (Siegel & Forero, 2012). Experiences with a significant caretaker shape adults' expectations of relationships with others because of the mental representations that are formed in infancy in the patterns of their caretakers' treatment (Bedi et al., 2013). ORT is distinct in its emphasis on the development of the psyche in relation to others. This reveals how one's internal world interacts with the social and is demonstrated in the manner that adults interact with others (Bedi, et al., 2013). This becomes important in understanding the motives underlying IPV as the social and intrapsychic work together in creating unique circumstances that engender IPV. ORT facilitates an understanding that pathological behaviour in adults originates from pathological relationships with caretakers in infancy (Mullin, 2017). In the case of IPV, these are demonstrated in their maladaptive ways of interacting with significant others in interpersonal relationships during adulthood because of the intrapsychic difficulties that stem from infancy (Mullin et al., 2017).

Accordingly, adults who were exposed to IPV as children were probably also exposed to harsh parenting (Grasso et al., 2016). Stover and Kiselica (2015) provided examples of harsh parenting, including using a sarcastic tone when speaking with children, threatening and/or extensive punishment without explanation, intrusive parenting and child maltreatment. Exposure to harsh parenting and IPV in childhood have been argued to increase the risk for psychological impairment and significant disruptive behaviour such as

IPV. Grasso et al. (2016) posited that verbal aggression and corporal punishment are examples of harsh parenting that are often experienced by children exposed to IPV. Thus, behavioural and emotional development is affected negatively and, in some instances, can be linked to IPV perpetration. The overlap between IPV and harsh parenting involves a conflictual relationship between parents marked by IPV, which may engender harsh parent behaviours. An ensuing parent-child relationship may be similarly harsh. Furthermore, the parent may not provide personal and psychological resources to facilitate the child's psychological health (Grasso et al., 2016). This perpetuates a maladaptive defensive state of psychic function in a child to protect the self from what is experienced as persecutory internal and external objects, as revealed by IPV perpetrators.

2.5 Psychic defenses

When children are brought up in a context of maltreatment, inadequate parenting and caregiving, danger and unsafety, they may view the world as completely unsafe, dangerous and unreliable as adults. Gilbar et al. (2020) argued that this view of the world may contribute to power, control and dominance being the assumed strategy of coping in such a world. This engenders adults who are abusive in intimate relationships, struggle with perceived feelings of helplessness and hopelessness and perpetrate IPV to gain some control and/or power in their intimate relationships. This speaks to the psychic defense of projective identification. Even though IPV perpetrators project intolerable intrapsychic experiences onto their partner, they attempt to control the object from the intolerable experience (Kernberg,1991). In this primitive psychic defense, through interaction, perpetrators lead their partners to experience what has been projected and behave in accordance with that. Thus, the re-enactment of unresolved childhood conflicts occurs. Projective identification is also an attempt to control the object in fantasy. Unlike projective identification, projection is a more mature form of defense and distance is maintained between the projector and the object of intrapsychic material so as to strengthen the defensive effort (Kernberg, 2018). Projection assists in easing anxiety by ridding the ego of it because of the danger and badness in the psyche. While introjection is a normative development across the lifespan where an individual is able to create mental representations of the self and external world, it is problematic when the self and object are not clearly differentiated (Kibel, 2005). These psychic defenses are linked together by their ability to alleviate the anxiety experienced when individuals encounter the unpleasant parts of themselves that originate from self-object relations with caregivers that were not effective in holding and nurturing their children, who are now IPV perpetrators

(Kibel, 2005). Seligman (1999) noted that identification with the aggressor is a reproduction of a relational process and not only that of object representation. ORT in its focus on the interpersonal aspects of intrapsychic dynamics is an apt theory to explain IPV in the context of dominance and control as well as parenting and the foundational relationship between child and parent, and thus child-and-self as well as self-and-others.

2.6 IPV according to object relations theory

ORT is one of the theoretical models of the psychodynamic perspective. The theory is centred on the importance of human relationships, particularly the shift away from drives as per classical psychoanalytic theory (Frankland, 2010). ORT focuses on the object of the drives. The assumption is that individuals need relations considering they are born in a state of dependency on others (Stadter, 2009). Their physical and psychological health and survival are primarily dependent on the care of caregivers. The concept of the self in ORT posits that it is relational and develops in such a context (Frankland, 2010). ORT postulates that self and object representational dyads are the basic units of psychic development.

2.7 Internal self and object representations

The focus of object relations is on the complex ways that individuals relate to themselves and others (Flanagan, 2008). An individual's internal world encompasses powerful and complex relationships that are significantly different from their *real* relationships and interactions with individuals outside of that internal world. (Flanagan, 2008). This implies that ORT is concerned with interactions between individuals, how these interactions become internalised and internally represented and subsequently, how they play out in individuals' psychological life (Kernberg, 1995).

This theory affords an analysis of perpetrators' psychological structure pertaining to the relationship that exists with the emotionally significant object (Milivojević & Ivezić, 2004). This implies that through a process of internalisation, children employ external relations and representations of objects to formulate part of their intrapsychic world. Milivojević and Ivezić (2004) noted that the ego is responsible for this process as it evaluates how an object is represented, centred on images of the object as perceived by individuals. Therefore, self-representations are engendered through interactions with the object where processes of introjection and projection are utilised (Milivojević & Ivezić, 2004). ORT posits that the mental representations that children form of themselves and others and the relationships in their infancy and childhood are carried into adulthood and influence their interpersonal

relationships (Hyde-Nolan & Juliao, 2012). Self and object representations constitute an individual's experience of self and become a template for subsequent relationships (Kernberg, 1995). Relationships with significant others such as primary caregivers are mainly responsible for these internal representations (Frankland, 2010). The experience of a caregiver, that is, the object representation or experience of self during an interaction with the same individual encompasses the internal self and object representations. Infancy and childhood are significant stages in children's life where the development of psychological health affects healthy self-esteem and appropriate emotion regulation and sustains healthy interpersonal relationships.

2.7.1 Holding and containment.

The primary caregiver's relationship with the child fosters the child's growth and development. Winnicott explained that *holding* refers to the interaction between caregiver and child (Winnicott, 1960). Emotional holding is conveyed by the caregiver-child relationship that is characterised by the caregiver's provision of an environment that facilitates growth and development. However, containment refers to the internal states of both. When containment is provided, a caregiver introjects the intolerable experiences of the child, for example, anxiety and frustration (Slochower, 2013). The caregiver's introjections are then projected back to the child once it has been modified such that the child may now contain. Effective early relationships involve both holding and containment (Winnicott & Rodman, 2018). Projection and introjection in the caregiver-child dyad during containment provide a positive experience for the child in relation to the template created for subsequent relationships.

Hyde-Nolan and Juliao (2012) revealed that unmet needs in childhood related to nurturing have been associated with men who received inadequate nurturing during infancy and childhood and became IPV perpetrators. Impingements may be experienced when a caregiver is a threatening and hostile object, especially when a child is overwhelmed with intolerable experiences of neglect and abandonment as opposed to a holding environment (Winnicott & Rodman, 2018). A holding environment is imperative for the child's transition to becoming more independent and autonomous. Frankland (2010) argued that it is essential for caregivers to assist children in this process so that they do not suffer sudden neglect and/or abandonment but rather are able to predict, achieve and retain control in their independence from their caregiver. IPV perpetrators may not have experienced holding environments from their caregivers during early childhood to enable children to experience

predictability and safety in the caregiver's provision of physical and emotional safety. Winnicott and Rodman (2018) asserted that although children enter the caregiver-child relationship with the potential to form relationships in their environments, this can only occur with the support of the holding environment. This suggests that perpetrators may have lacked such and may thus experience their adulthood relationships as volatile. Impingements have the capacity to necessitate the implementation of psychic defenses in response to annihilation anxiety that may extend into adulthood, which is evident in IPV perpetrators (Brodie, 2019).

Furthermore, the perpetrators may not have experienced absolute dependence on caregivers, which would allow them to separate from their caregivers gradually and negotiate their independence. However, when children experience loneliness, isolation and maladaptive parenting, their internal worlds may be consumed by fear and emptiness (Frankland, 2010). A caregiver that is unresponsive and chronically unattuned to children threatens their holding environment and sense of safety in the world significantly. Such a caregiver is ineffective in introjecting from children that which is intolerable but rather projects it back in the same rudimentary form (Winnicott & Rodman, 2018). Accordingly, children may become distrustful of their own needs and the environment's ability to fulfil such. Inadequate holding environments not only create frustration and anxiety in children but also fail in equipping them to cope adequately (Winnicott & Rodman, 2018). A holding environment that is not effective may result in children who are inadequate in affect regulation and modulating aggression and impulses. They may also be unable to tolerate discomfort and/or minor stressors (Szymanski & Springer, 2014). The holding environment, containment and caregiver are particularly important resources that children rely on during early childhood to cope with overwhelming experiences and emotions (Szymanksi & Springer, 2014), with transitional objects being crucial in this regard.

2.7.2 Transitional objects.

Children's progression from absolute reliance on their caregiver toward independence within the holding environment speaks to the introduction of transitional objects (Abram & Hjulmand, 2018). During this stage, children attach to the caregiver object and acquire autonomy in their ability to relate to others in the external environment (Tonnesmann, 2018). The transitional experience is important in allowing children to hold the caregiving object even in their absence. Good-enough parenting facilitates this process by assisting children to internalise the caregiver or elements thereof that will be

subsequently soothing and comforting (Tonnesmann, 2018). This integration also affords children the ability to be able to take over other caregiving activities for themselves. Through the development of a mental representation of the caregiver, the transitional experience occurs (Abram & Hjulmand, 2018).

Children adopt a transitional object even in the healthiest holding environments. This object may serve to signify the caregiver in their absence where caregiving qualities are assigned to the object so that it may provide care during the separation that may cause anxiety (Karaman, 2018). Winnicott noted that children develop a capacity to tolerate and cope effectively in emotionally challenging situations with the assistance of a transitional object (Winnicott, 1960). Examples of pathological transitional objects include addictive substances and maladaptive relationships. Although a caregiver is able to soothe children's intolerable feelings, when this does not occur, these objects are used to diffuse the psychological distress in their absence (Birrell, 2014). A failure results in the psychic experience of the internal and external world being split as either good or intolerably bad.

2.7.3 Paranoid and schizoid positions.

Crabtree (2008) explained that when perpetrators of IPV are aggressive towards their partners, they may be in the infantile state of the paranoid-schizoid position. Klein coined this term to describe panic and terror when children's needs are not met, and this is perceived as an attack on their life (Frankland, 2010). In this state, individuals perceive that they are being attacked and persecuted in their external world, thereby splitting between the good and bad in their world (Stadter, 2009). IPV perpetrators who experience significant interpersonal pathology may experience this when most interactions with their partners are perceived as fundamentally threatening to their existence (Crabtree, 2008). In the paranoid-schizoid position, individuals do not exhibit empathy for others and their experiences. They experience neither guilt nor concern for hurting the other. Rather, they experience distress if the other retaliates or the harmed object is lost (Stadter, 2009). Projective identification is a psychic defense that is employed in the paranoid-schizoid position. IPV perpetrators are able to defend and protect themselves from their own feelings of pain and conflict by projecting those as well as other unwanted parts of themselves onto their partner (Crabtree, 2008). Projective identification allows perpetrators to experience their partner as attacking and in so doing, both partners engage in projective identification and counter projective identification. As such, this interaction forms the basis of perpetrators denying responsibility for their own representations of themselves, the interaction, and their partner (Crabtree,

2008). Therefore, pathological object relations become formed, maintained and perpetuated.

The depressive position occurs when individuals encounter their own destructive nature and realise, they harbour hateful feelings towards a loved object, mainly a primary caregiver (Kernberg, 2019). Children begin to perceive their caregiver has both good and bad qualities instead of oscillating between the all-good or all-bad extremes (Frankland, 20101). Klein contended that moving towards the depressive position in the first year of life is important for interpersonal relationships where objects can be realistically perceived as both good and bad (Frankland, 2010). However, parenting that does not support this shift may cause children to remain in the paranoid-schizoid position and cause them to participate in relationships from a primitive and infantile psychic position. The consequences of harsh parenting include resultant feelings of unworthiness that become internalised such that the self is perceived negatively together with external objects such as parental figures. Thus, during adulthood, in essence, early childhood experiences in the oedipal phase remain unresolved (Hadley & Holloway, 1993) with perpetual splitting off of parts of the self and ego.

2.7.4 Splitting

Similarly, IPV perpetrators may employ splitting to protect and defend themselves from overwhelming anxiety that is brought about when interacting with their partners. All that is unwanted and undesirable and projected onto their partner is split off (Siegel & Forero, 2012). Splitting also occurs when they begin to distinguish between the external and internal world (Milivojević & Ivezić, 2004). This happens with objects when individuals notice their limitations and that relational objects are fraught with contradictions. An example thereof is the breast of the mother, which is associated with love and nourishment. However, its *flaws* are revealed when it does not yield the desired results. Splitting protects developing representations of objects until such a time that the *good* is able to outweigh the *bad* and individuals are able to view the object more realistically. However, when this does not happen, particularly among IPV perpetrators, splitting is employed as a maladaptive defense in adulthood (Siegel & Forero, 2012). Thus, the splitting of objects into good and bad takes place, causing great intrapsychic conflict (Kernberg, 2018).

In relation to IPV, splitting, projection, denial and introjection are commonly employed defenses. Psychodynamic theory postulates that IPV perpetrators perceive threat to their own social standing and secure attachments (Herron & Javier, 2018). This speaks to the

process of mentalisation, which is a theory of the mind that explains one's intentions towards another (Herron & Javier, 2018). Distortions of mentalisation occur when there is an insistence and justification of one *correct* view and projection of anger onto another. With regard to IPV, mentalisation distortions occur when social standing and secure attachments are perceived to be threatened such that individuals become angry and aggressively defend their position (Herron & Javier, 2018). Accordingly, empathy is disregarded, and they employ physical violence to assert what they believe to be right and defend themselves against perceived internal persecutory objects.

The psychodynamic theory has undergone attacks from other theorists such as African psychology scholars. They posit that psychodynamic theory is embedded in Western theoretical traditions and as such is ill-equipped to adequately address specific psychological challenges that are experienced by indigenous South African people (Moll, 2002). Psychodynamic theory thus lacks the necessary knowledge systems, identities and epistemologies that are specific to the South African context (Moll, 2002). Ratele (2016) posits that the psychodynamic theory in its Western orientation is not inclined to be considerate of the cultural, spiritual, material, political and metaphysical landscape of the South African people.

2.8 Conclusion

In this chapter, how the socio-economic factors influence the psyche of IPV perpetrators was discussed. The literature revealed that psychosocial factors are imperative in understanding IPV. However, individual and psychological factors are just as crucial in exploring how perpetrators' experiences are dictated by psychological influences, including parental care, emotion dysregulation and thus ineffective conflict resolution capacity, the influence and psychic function of alcohol, the nature of parent-child relationships, and traumatic self-object dynamics. Accordingly, the experiences and psychodynamics of male IPV perpetrators were explored in this study. The research methodology employed in this study is discussed in the following chapter.

CHAPTER 3: RESEARCH METHODS

3.1 Introduction

In this chapter, the research methodology employed in this study is discussed. A qualitative research approach was selected because of its methodological strengths to realise the aims of the study appropriately. Accordingly, in-depth, semi-structured interviews were employed to collect data. Subsequently, interpretive thematic analysis (ITA) was utilised to analyse the data that emerged from the interviews. A detailed outline of the research design employed, including a description of the setting, sample and participant recruitment process is presented. The ethical considerations of this research project are also outlined. Finally, the reflexive processes the researcher adopted are outlined.

3.2 Qualitative research approach

A qualitative research approach was adopted. In this approach, the researcher is the primary instrument of data collection and analysis, which is rich in experiential material (Bearman, 2019). The qualitative researcher presents and interprets the findings while exploring and reflecting on the meaning thereof (Jacelon & O'Dell, 2005). Qualitative research is concerned with garnering in-depth insights into a particular phenomenon. Furthermore, it focuses on an illuminating description in exploring and understanding individuals' experiences while producing a rich and meaningful interpretation thereof (Aspers & Corte, 2019). This approach was suitable because it allowed for IPV to be examined as a subjective experience, wherein intrapsychic processes underlying IPV could be explored. Furthermore, a qualitative research approach made it possible to explore the experiences of male IPV perpetrators by focussing on the meanings that are linked to these experiences (Aspers & Corte, 2019). This implies that a qualitative approach afforded the identification, analysis and interpretation of themes to achieve an in-depth understanding of IPV through object relations (Hennik et al., 2020).

3.2.1 Research design

An interpretive research design was employed, thus enabling inquiry into the participants' subjective reality where the researcher is a tool by which that reality is discovered (Andrade, 2009). This implies that the researcher uses the participants' experiences to construct and interpret their understanding. In seeking to understand and

explore, the researcher relies on their interpretation of the gathered data to make meaning of their experiences (Thanh & Thanh, 2015). An interpretive research design ensures the interaction between researcher and participant is the bedrock of meaning-making in which no facts are generated but only interpretations (Willis et al., 2007). However, this implies that the researcher is not neutral but is involved in the dynamic meaning-making process (Scotland, 2012). Accordingly, the study was interpretive in nature and the psychodynamic ORT perspective was also anchored on interpretations made by the researcher. Thus, it is evident that an interpretive inquiry is aligned with the interpretive nature of the psychodynamic perspective. The purpose of this study was to explore, understand and interpret the subjective intrapsychic world of IPV perpetrators. Scotland (2012) noted that an interpretive research design enables the researcher to participate and experience the participants' subjective realities. Therefore, through this inquiry into male IPV perpetrators the findings are a product of co-constructors of meaning, namely, the researcher and participants.

3.2.2 Study setting

The study was conducted in Tembisa, a township in the city of Ekurhuleni, Gauteng, South Africa. Tembisa means promise in the Nguni language, namely, isiXhosa, isiZulu, siSwati and isiNdebele. In Statistics SA (2011), Tembisa is described as a township that was established in 1957 by the apartheid government to localise people who were forcibly moved from areas such as Alexandra, Edenvale, Kempton Park, Midrand and Germiston. Tembisa has a population of 463,109 people of which 98.9% of are Black African. In relation to household income, while 22.2% have no income at all, 21.8% have a household income between R19,601 and R38,200 Although this area is completely urbanized, 64,5% of the residents have no access to the Internet and only 36.1% of homes have access to running water. Although 53.9% of the Tembisa's population is male and 46,1% is female, 27.1% of homes are female-headed. Moreover, 3.7% have no schooling and only 7.5% have a higher education qualification (Statistics SA, 2011).

These statistics reveal that the socio-economic conditions of Tembisa are quite dire, especially when the average household income rate is considered. Conducting the study in Tembisa enabled an examination of how IPV perpetration is experienced and perceived by individuals who live in such socio-economic conditions, thus justifying the reason thereof. Despite a plethora of literature on other forms of violence in Tembisa, in particular, xenophobia because of the perception that foreign migrants who have settled there pose a

threat to employment opportunities for South African citizens, indicative of the precarious nature of the economy and the living conditions that result from that precariousness (Hungwe, 2014), there is a dearth of research on IPV in the township.

3.2.3 Sample

A non-probability purposive sampling method was employed to allow suitable participants in relation to the qualities they possess to be selected (Etikan et al., 2016). This technique was conducive to assessing whether potential participants were suitable. The sample was specific and was chosen because of its ability to provide the data required for the study. The target population was men who lived in the township of Tembisa. Consistent with qualitative research conventions of having a relatively small sample for in-depth interviewing, the ideal number of participants for the study was deemed to be between five and seven (Trotter, 2012).

3.2.4 Recruitment of participants

A social media account advertising the study (Appendix C) was circulated on Facebook, a social media platform, in community groups for Tembisa. The account was held under a pseudonym with a separate email address that was deactivated once the research was complete. This recruitment procedure was employed because Tembisa does not have organisations or centres that endeavour to provide counselling for male IPV perpetrators or assist men suffering psychological distress, from which participants could be recruited.

To ensure the safety of the researcher and supervisor as well as protect the name of the University, identifying details such as actual names and contact numbers of the researcher and supervisor did not appear on the advertisement (Appendix C). The university's letterhead was removed from any documentation the participants received. These documents were made accessible to the participants on the Facebook group and returned to the researcher by means of the researcher's pseudo email. These efforts ensured the researcher, supervisor and university would not be tracked or traced. Rather, the advertisement only provided the pseudonym the researcher used as well as a vague description of the affiliated university. The advertisement with the researcher's pseudonym encouraged the participants to use the pseudonym, even when they completed the informed consent form. Furthermore, a new SIM card and corresponding number were used solely for this study before it was disposed of and the social media account closed. This guaranteed the researcher would be able to conduct telephonic interviews with the participants. This

also ensured funds or airtime would not be transferred to participants as an incentive to participate in the study.

The researcher contacted those who expressed an interest in participating in the study and informed them about the purpose of the study and what their participation entailed. They were assured that there would be no legal ramifications for participating in the study as they would not be reported for their actions of violence against their partners. The researcher was not professionally obligated to report any acts of violence because she was acting in her capacity as a researcher and not a consulting psychologist. Potential participants were asked screening questions to ascertain whether they had been or were IPV perpetrators. Subsequently, an appointment was set up to discuss participation and what it entailed to make certain they were well-informed and could provide informed consent.

Telephonic interviews were conducted to ensure the researcher was safe, especially in light of the sensitivity of the study. Furthermore, the COVID-19 pandemic and ensuing regulations dictated that the interviews were conducted telephonically. Finally, telephonic interviews afforded the participants the opportunity to feel comfortable considering the subject and assured anonymity.

3.2.4.1 Selection criteria

Inclusion criteria

- Males
- Over the age of 18
- Residents of Tembisa
- Perpetrated IPV at least once

Exclusion criteria

- Female IPV perpetrators
- Males younger than 18 years
- Non-residents of Tembisa
- Never perpetrated IPV

3.3 Data collection

In accordance with the interpretive research design, semi-structured interviews were conducted to collect data (Kallio et al., 2016). Semi-structured interviewing affords the researcher the opportunity to collect data from participants while guiding and facilitating the

data collection processes. The semi-structured nature allows participants to share their experiences while the researcher probes and questions certain aspects thereof (Bearman, 2019). Moreover, semi-structured interviews afford the researcher the opportunity to establish an in-depth understanding of the participants' experiences (Kallio et al., 2016). Semi-structured interviews were deemed suitable because of their emphasis on flexibility, which allowed the researcher freedom to ask in-depth follow-up questions. The interview schedule can be found in Appendix B for perusal. As noted previously, interviews were conducted telephonically to protect the identity of the researcher, supervisor and university as well as assure the participants there would be no legal ramifications because of the sensitivity of the subject matter. In this regard, pseudonyms were used by the researcher and participants. A harm reduction strategy that was available for the participants, should they require it, was debriefing. This was key in ensuring that the participants did not suffer harm due their participation in this study.

In addition, telephonic interviews ensured the safety of both the researcher and participants in an endeavour to uphold the COVID-19 pandemic regulations at the time. The interviews, which were audio-recorded, lasted between 45 and 60 minutes. Prior to every interview, informed consent was obtained from the participants who also agreed that their interviews could be audio-recorded.

3.4 Method of data analysis

ITA was deemed an appropriate technique to employ for the data analysis. This technique provides tools to analyse the data in ways that yield rich and detailed themes and patterns (Braun & Clarke, 2006). ITA's ability to analyse data from different participants by focusing on similarities and differences in its focus on themes may be regarded as an advantage of the technique (Nowell et al., 2017). Accordingly, meaning was found and interpreted through the data so as to understand and gain insight into the intrapsychic reality of IPV perpetrators. ITA enabled the identification of salient themes related to the intrapsychic dynamics of their relationships through object relations. Furthermore, the interpretive nature of ITA allowed the generated themes to be interpreted in line with the psychodynamic lens.

The unit of analysis was the individual, specifically, men in Tembisa. The target of the analysis was their experiences of IPV. ITA was employed to determine meaning through the analysis of themes (Braun & Clarke, 2006). Accordingly, meaning was generated from the

interviews in an effort to acquire insight into the psychodynamics underlying IPV perpetrators' perceptions and experiences in Tembisa.

3.4.1 Steps in interpretive thematic analysis.

Braun and Clarke's (2006) six steps of ITA were followed. First, the researcher familiarised herself with the data to ensure immersion therein before being transcribed. Second, initial codes were generated from the data to ascertain what was meaningful to the analysis (Braun & Clarke, 2006). Third, the initial codes were transformed into potential themes that were accompanied by their coded data extracts. Fourth, potential themes were evaluated in relation to their ability to capture the data with extracts meaningfully, with clear demarcations between the actual themes. Braun and Clarke (2006) noted that the fifth step involves ensuring that themes are clear, but not too diverse and complex in relation to what they capture in the data and what each theme is about. In the sixth step, the themes are employed to make meaning of the data in ways that demonstrate the prevalence and relevance of the theme in conjunction with its extracts from the data (Braun & Clarke, 2006).

3.5 Measures to enhance the quality of the research

In order to ascertain the quality and trustworthiness of the study, credibility, transferability, dependability and confirmability were observed.

3.5.1 Trustworthiness

According to Guba and Lincoln, trustworthiness emphasises criteria credibility, transferability, dependability and confirmability (Guba & Lincoln, 1994). Moser and Korstjens (2017) asserted that the researcher's reflexivity is crucial in ensuring the quality of qualitative research.

3.5.1.1 Credibility

Credibility refers to *truth value* and how it can establish whether the results are genuine (Anney, 2015). Obtaining supporting data and findings, namely, triangulation was used. Examining other studies on IPV in South Africa, particularly townships, was particularly important in ensuring that researcher bias was managed, and the participants' experiences accurately interpreted and reported. Credibility was also observed in that the researcher was familiar with the participants' transcripts such that their experiences were represented accurately in the study.

Furthermore, it was essential to present the study's findings that were substantiated by the participants' direct quotations. The findings were analysed systematically by

employing ITA in accordance with Braun and Clarke (2006). Emergent themes from the transcripts were verified by the research supervisor so that any errors in the analysis could be identified. The inclusion of literature for credibility was observed. ORT was adopted as the theoretical framework grounding the understanding of male perpetrated IPV in South Africa.

3.5.1.2 Transferability

Transferability is concerned with whether the findings of the study can be applied to other settings or other participants (Lee et al., 2010). Accordingly, a detailed description of all the processes undertaken and context of the study was provided, including the sampling process, sample, context, steps conducted during the data collection and analysis, and a thorough presentation of findings as recommended by Nowell et al. (2017). This was important so the findings and the context in which they were located could be compared to other potential contexts (Anney, 2015). Readers are afforded the opportunity to study a detailed report to inform their judgement as to whether the findings can be generalised (Jensen et al., 2008). Furthermore, the interpretive use of the ORT informed an understanding of the intrapsychic dynamics of male IPV perpetrators to discern how far to extrapolate from the data (Collier-Reed et al., 2009).

3.5.1.3   Dependability

Dependability refers to the repeatability of the study, so the findings, interpretations and conclusions are similar when conducted in another context (Lee et al., 2010). The process undertaken to develop the themes that emerged from the analysis is available to demonstrate that the steps conducted are traceable. On request, for traceability purposes, the transcripts and audio-recording, which are devoid of any identifying information are available on request. The research supervisor was involved in verifying the accuracy of the collected data, transcriptions and analysis as recommended by Chowdhury (2015).

3.5.1.4 Confirmability

Confirmability refers to the degree to which the results can be either confirmed or corroborated by other studies so as to establish whether the results were derived from the data (Anney, 2014). The researcher kept reflexive data and documents on which to reflect, interpret and plan. These also include occurrences during data collection as well as personal

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

reflections related to the study (Anney, 2014). This assesses whether the researcher's own personal background, preferences, characteristics and history influenced the investigation (Shenton, 2004). Furthermore, Moser and Korstjens (2018) stated that to ensure confirmability, the interpretation should be based on the findings and the manner in which the interpretation is arrived at must be intersubjective. In conjunction with the research supervisor, the findings and interpretations were deliberated on, thus allowing for consideration of other possible interpretations of the data. This served as an external check of the researcher's interpretations (Nowell et al., 2017).

3.5.2 Reflexivity.

3.5.2.1 Epistemological reflexivity.

The significance of epistemological reflexivity is premised on the notion that the researcher's own assumptions about reality may influence the research design and research analysis (Willig, 2019). The researcher assumed IPV perpetrators are mostly individuals that have encountered immense ill-treatment in their childhood, which may have influenced their behaviour in intimate relationships during adulthood.

It was imperative that the study, in particular data analysis, was not contaminated by the researcher's assumptions related to male IPV perpetrators and their intrapsychic experiences. The participants' experiences had to be interpreted and explained as objectively as possible so as to ensure that the interpretations reflected the participants' thoughts. The researcher's supervisor was significant in guiding the research process by reviewing and guiding the data analysis to ensure the researcher's interpretations were based on the participants' experiences rather than her own assumptions.

3.5.5.2 Personal reflexivity.

Personal reflexivity is concerned with the manner in which the research affects the researcher and how the researcher's beliefs and opinions influence the research (Walsh, 2003) The researcher is a female who had to interview men who had perpetrated physical violence against other women. This had to be considered during data collection because the participants' willingness to be honest and participate in the study could have been compromised because of the researcher's identity. During this process, the researcher had to be fully aware that her identity as a female may have been perceived as threatening to the participants. This may have aroused concerns related to the researcher's judgement.

Furthermore, the researcher and participants may have had few shared assumptions regarding their experiences and as such prompting had to be done to ensure a clear understanding while encouraging honesty.

The researcher also had to be aware of her female identity during data analysis. The meanings and themes extrapolated from the data had to be evaluated by the researcher's supervisor to ensure that the meanings remained as close as possible to the those of the participants, with little interference from the researcher's own bias.

The researcher as a female endured feelings of anger, frustration, fear and sadness during the data collection and data analysis. In order to ensure that the researcher's feelings did not impede the research process negatively, the researcher kept a journal that served as an emotional outlet and afforded reflection during the research process. Reflection enabled the researcher to remain as objective as possible while understanding the challenges posed by her female identity.

3.6 Ethical considerations

Adhering to ethical principles is an ongoing process in qualitative research. The researcher obtained approval for the research process from the Department of Psychology Research Committee (Appendix E) and ethics approval (HUM030/0820) from the Faculty of Humanities Research Ethics Committee. The study complied with the WHO's guidelines concerning ethical and safety issues when researching gender-based violence (GBV). The purpose of adhering to ethical guidelines was to ensure that the participants' well-being was protected. Autonomy and respect for people are important and should be upheld in research (Arifin, 2018). Accordingly, the participants were provided with information sheets (Appendix A) that were accessed through the researcher's pseudo email. The same procedure was followed with regard to the consent forms (Appendix A) so as to detail what participation entailed. The ethical principles relevant in this study included voluntary participation, informed consent, confidentiality and non-maleficence/beneficence.

3.6.1 Voluntary participation and informed consent.

During recruitment, the potential participants were informed that there were no intentions to report them and that confidentiality would be upheld in the information they shared. The purpose of the study, which was to understand, explore and potentially influence programmes and interventions, was communicated clearly to the participants. This

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

was to ensure that the participants did not perceive the proposed study would have threatening legal ramifications. The participants were also informed of their right to withdraw participation at any stage (Arifin, 2018).

In upholding transparency, the participants were informed of what participation entailed. Furthermore, the sensitive subject matter of the study was explained clearly to them. The participants who indicated that they were willing to participate were provided with a participant information sheet and an informed consent form (Appendix A). The purpose of the research, expectations of the participants, confidentiality considerations, and possible risks and potential benefits of being a participant in the study were detailed in the information sheet. The voluntary nature of their participation was also explained in the information sheet as well as the fact that the participants had the right to withdraw from the study at any time with no adverse consequences (Babbie, 2010). All the participants were required to complete a consent form (Appendix A) to acknowledge understanding of their participation in the study, that interviews would be audio-recorded, and that data would be stored in secure computer systems for a specified period.

3.6.2 Confidentiality and anonymity.

The participants' identity was kept confidential and ensured that they would not be identifiable when the study was complete and its results disseminated (Gravetter & Forzano, 2010). Confidentiality was upheld as no names and identities were revealed during data collection and analysis. Although anonymity could not be guaranteed, it was controlled for in that only the researcher knew the participants' contact details. The interview recordings and electronic transcripts were stored on password-protected computers and only the supervisor and the researcher had access to them. After the research report was written, anonymised transcripts were archived electronically on a password-protected computer for a minimum of 15 years in the Department of Psychology.

3.6.3 Beneficence/Non-maleficence.

The principles of beneficence and non-maleficence entail an obligation to balance the benefits to the participants against the risks and make it incumbent for the researcher to prevent any possible harm (Townsend et al., 2010). Due to the sensitive nature of IPV, it was anticipated that emotional and/or psychological distress may arise from participation in the study. Therefore, the researcher in her capacity as an intern psychologist offered debriefing for the immediate containment of any distressing emotions that may have been

evoked. If this did not suffice, a referral letter (Appendix D) was prepared for the participants to access further psychological assistance at a local hospital/clinic. Contact details of Lifeline and South African Depression and Anxiety Group (SADAG) were made available for free psychological assistance after hours should the participants need it. However, no participants seemed to experience distress from participating in this study and as such no debriefing was required by the researcher. Furthermore, no referral letters had to be written for the participants to receive psychological assistance following their participation in this study.

3.7 Conclusion

In this chapter, the research processes as well as the ethical principles that were observed in the study were detailed. An argument in support of the choice of a qualitative approach for the study is included. The rationale for the research design being grounded in an interpretive approach was also explained. The data collection, setting, recruitment of participants, and data analysis were also presented. Furthermore, the measures undertaken by the researcher to ensure quality research were detailed. Finally, the ethical principles that were upheld in conducting the study were considered. In the following chapter, the findings of the study are presented.

CHAPTER 4: RESULTS

4.1 Introduction

In this study, the intrapsychic experiences of male IPV perpetrators in Tembisa, Gauteng were explored. The purpose of the study was to understand the experiences of male IPV perpetrators from an object relations perspective. In this chapter, the findings derived from the telephonic semi-structured interviews conducted with five men that were audio-recorded, transcribed and analysed thematically are presented. The duration of each interview ranged between 45 minutes and 60 minutes. The emergent themes and subthemes are presented in this chapter. The presentation of the findings is guided by the following research question: What are the intrapsychic experiences of male IPV perpetrators in Tembisa, Gauteng?

4.2 Description of participants

All the participants in this study were male IPV perpetrators of IPV who were residing in Tembisa and above the age of 18 years. This was established through the screening inclusion/exclusion criteria questions asked before each interview. Pseudonyms are used to protect the identity of the participants. A brief description of each participant follows.

Peter

Peter was a 56-year-old Black male who had resided in Tembisa for 12 years. He had perpetrated IPV in his previous marriage. Peter had re-married and had children from his previous marriage but was currently not living with them. He was unemployed.

John

John was a 36-year-old Black male who had perpetrated IPV in his current intimate relationship. He had resided in Tembisa his whole life, had no children, was unemployed and lived with his mother.

Sibusiso

Sibusiso, a 48-year-old Black male who had lived in Tembisa his entire life, had perpetrated IPV in an intimate relationship before his marriage. He had children and lived with them and his wife. He was currently employed as a security guard.

Sam

Sam, a 31-year-old Black male, had perpetrated IPV in his current relationship. He was a resident of Tembisa and lived with his children and partner.

Tshepo

Tshepo was a 25-year-old Black male who had lived in Tembisa for 13 years. He had perpetrated IPV in his current relationship and lived with his wife and children. Tshepo was employed as a security guard.

4.3 Themes

The participants were asked several questions that were intended to direct them to describe their psychic experiences as male IPV perpetrators. The themes and subthemes that emerged from the analysis of the transcripts are displayed in Table 1.

Table 1: *Summary of major themes and subthemes*

Themes	Subthemes
The influence of alcohol	• A catalyst to IPV perpetration • Alcohol to cope with adverse life circumstances
Harsh parenting experienced by perpetrators	• Punitive parenting and parents instilling fear • Perpetrators experiencing violence during childhood • Perpetrators' exposure to domestic violence during childhood
Ineffective conflict resolution	• IPV perpetration used as a conflict resolution tool • IPV perpetration employed as a tool to gain/maintain control, dominance and authority over partner
The absence of intention to harm physically and relinquishing of personal responsibility for harm caused	• Factors to which perpetrators assign blame for IPV perpetration • No reason for IPV perpetration
Self-representation in light of IPV perpetration	• Assumption of authority/disciplinarian figures in romantic relationships • Monsters created • Poor self-esteem/self-concept.
Nature of perpetrators' family of origin	• Socio-economic status of family and unmet material needs • Emotionally unstable home life during childhood

4.3.1 Theme 1: The influence of alcohol

Excessive alcohol consumption, as noted in Chapter 2, is a contributing factor in IPV perpetration for a multitude of reasons, including coping with life and marital dissatisfaction as well as with the effects of negative childhood and thus self-experiences. Both Peter and Sam related how their excessive alcohol intake had an adverse effect on the quality of their intimate relationships and was a factor in their IPV perpetration.

Peter explained, *"Alcohol is a drug as I would describe it. The moment you are under the influence you zone out. You sort of don't be you."*

The sentiments shared by Peter were similar to those of Sam. These sentiments revealed that individuals are more likely to perpetrate IPV when they are excessively intoxicated. Sam stated, *"Not that I don't hit my wife, I do. But I don't just do it randomly with no reason. If you see a man hitting a woman, there is a reason for that."* The following two subthemes were identified:

4.3.1.1 Alcohol as a catalyst to IPV perpetration.

The participants admitted that their excessive alcohol consumption had been the catalyst for their IPV perpetration. They related that their decision-making faculties were hampered while intoxicated and disagreements often ensued in the relationship about excessive alcohol consumption.

Peter explained, *"You find yourself being another person and doing decisions that are influenced by that alcohol. So, I think that the monster in me will always be unleashed when I am drunk."* Sam reflected, *"I don't want to hide behind alcohol. Do you think a man would hit a woman if he is not drunk? He wouldn't. So, the important thing is alcohol here.""*

4.3.1.2 Alcohol to cope with adverse life circumstances

The participants explained that they had endured negative childhood experiences as well as challenges in their intimate relationships with which they found difficult to cope. Excessive alcohol use has been used to cope with the distress engendered as well as to escape such a reality.

Sam explained, *"It was tough there. The things that happened there were so bad that even as child I wasn't even able to understand or talk about them. It was too painful, now I drink to forget the pain."*

Similarly, Peter shared, *"We used to get beatings for everything that we did as children, my relationship with my ex-wife was not the best and we grew up with the man being the head of the house so I think that has influenced the decisions that I have made with my ex-wife. I can say all those things were bad, alcohol helped me."*

4.3.2 Theme two: Harsh parenting experienced by perpetrators.

Many of the participants had experienced harsh parenting during childhood and believed this was an important contributory factor to their IPV perpetration. The following three subthemes were identified:

4.3.2.1 Punitive parenting and instilling of fear by parents.

Peter explained that the parenting he experienced during childhood could be characterised as being punitive because it was devoid of affection. He related, *"My dad used to beat us so I don't know if that counts as violence. Yoh we used to get beatings. Even at school we used to get a lot of beatings but back at home it was worse. I also used to get slapped in front of my wife by my dad, so yes there was a lot of hidings."* He added, *"You know with our generation we grew up with the man being the head of the house, so we were kind of scared of him."*

John shared the following experience, which demonstrated his fear of his parents because of their punitive parenting during childhood*: "I'll give an example that I had a physical fight at school with someone. I wouldn't tell my mother because she would hit that I wouldn't even sleep inside the house because the school would give a letter to me to give my mother about my fight. I wouldn't give the letter in fear that I would be beaten up."*

The participants related that the punitive parenting they experienced was not only physical but also verbal. Sam shared, *"I could see how difficult things were at home. My parents would speak aggressively or treat us badly."*

4.3.2.2 Perpetrators experiencing violence during childhood.

Peter thus shared his experience of the corporal punishment his father inflicted on him: *"We used to get beatings for everything that we did. Whether good or not good, whether right or not right, we used to get a lot of beatings. I have never seen dad beat mom or mom beat dad but I used to get a lot of hidings. I used to get slapped in front of my wife by my dad so yes there was a lot of hidings."'*

John shared the same sentiments as Peter about the corporal punishment he had experienced during his childhood. Their experiences were common in that they both experienced fear, helplessness and anger that had manifested in how they behaved in intimate relationships and how they resolved conflict.

John stated, *"I was beaten up a lot even when I had done nothing. I was beaten even for my younger siblings. I was beaten a lot by several caregivers. To a point of feeling helpless. Parents are implicated in the monsters that we currently see because of how they treated their children. They refuse to admit, forgetting that they taught us that violence solves issues and conflicts. I was beaten even for younger children and what they would experience, all because I was the older."*

Sam related a similar experience to that of both John and Peter. He noted, *"My father would hit everyone, our mother and us."* In Sam's case, punitive parenting and punishment did not only extend to him as a child but also revealed the presence of domestic violence to which children may be exposed.

4.3.2.3 Perpetrators' exposure to domestic violence during childhood.

Exposure to violence, especially domestic or otherwise during childhood, has a considerable influence on IPV perpetration. This subtheme speaks to the participants' experiences and how that may have contributed to their IPV perpetration as adults.

Sibusiso thus explained that his exposure to violence during his childhood was from outside his home: *"Coming from the township. There are gangsters. They were called the Top O. That's where I fall in. There was the Charming Boys. There were gangster group fights. Before my marriage, the norm to us was that if I am in a relationship with you then I must hit you."*

John shared similar sentiments when he explained how exposure to violence during childhood may influence IPV perpetration. He related, *"My childhood was ridden with violence everywhere. Especially in young boys, it is part of growing up. That is how we would solve petty conflicts. The environment that one grows up in is important. If you grow up where violence is used to solve problems, then you will also do the same. You can also pick up violence up along the way where you see that you are being taken for a fool or for granted especially by women. And once someone shows you that you are explicitly being treated like a fool, you also want to protect your dignity.".*

While different from what Sibusiso and John attributed to the source of the violence, Peter shared a similar experience to theirs in relation to witnessing violence and wanting to emulate it. Peter shared, *"When growing up you want to be like your parents, you want to live the life that they lived and you sort of want to be the best version of them so uhhmm... yeah. It definitely has because my dad used to hit anyone he sees so I think it has."*

Sam acknowledged that domestic violence was rife in both his household as well as in those of his neighbours. He explained, *"Not that we were not seeing violence, we did at home and with neighbours. I would see what would be happening at home and next door and seeing that the person I call papa is acting on this way. So as a child I would say one day things would work out."*

4.3.3 Theme three: Ineffective conflict resolution

The participants also articulated how they coped with conflict in their intimate relationships and how such conflicts were resolved. These maladaptive ways of conflict resolution came to characterise their intimate relationships and when these proved to be ineffective, IPV was often perpetrated.

4.3.3.1 IPV used as a conflict resolution tool

Peter thus explained how harming his ex-wife physically during an argument was an attempt to resolve conflict: *"When she got home and I questioned her about her whereabouts and stuff like that, she started sounding rude and when she kept coming across as rude according to me so with an adrenaline response, I slapped her."*

John shared his experience of a disagreement over dishonesty with his partner, which led him to assault her physically: *"I asked her why she lied to me and insulted me over the phone. She refused to give me any answers and that caused a fight between us, and I ended up beating her up seriously in the shop. So you can see the root cause? When someone does this how should I respond when she started with the aggression, so I did the same."*

An argument related to infidelity between Sam and his partner resulted in him perpetrating IPV because of the anger he felt and his desire to end the argument. He acknowledged, *"She starts shouting that it's not the first time someone has many relationships. I got very angry, and I slapped her once.''*

Similar to Sam, Tshepo and his partner had a disagreement about infidelity. He related, *"I arrive at the bus stop, and it was dark so she and other man didn't see me. There*

I got so angry that I punched them both. The man ran away and I slapped her. She fell on the ground and I kicked her.". The participants explained that their perpetration of IPV was engendered by their partners' dishonesty and infidelity. Furthermore, during disagreements, the participants harmed their partners physically in an endeavour to end the conflict and regain control.

4.3.3.2 IPV perpetration as a tool to gain/maintain control, dominance and authority over partner

In order to gain or maintain control, dominance and authority over their partners, the participants perpetrated IPV against their partners. The participants related how they experienced a loss of control and which fuelled harming their partners physically.

Peter thus explained how a loss of control during an argument with his ex-wife resulted in him escalating the violence he was perpetrating in an attempt to regain control and authority over his partner and the situation: *"She tried to fight back and I slapped her again. When she tried to come again at me or fight with me physically for the third time, I took out my gun on her because I was a policeman, so I took out my gun on her.".*

John acknowledged how in order to acquire dominance he perpetrated IPV: *"When someone does this how should I respond when she started with the aggression, so I did the same."*

Tshepo reflected, *"Then I bump into her in the street with another man and I approach her and we leave together. On our way she couldn't tell me what was happening. I just found myself having slapped her."* In this instance, Tshepo sought control, dominance and authority when he perceived his partner was challenging his authority.

4.3.4 Theme four: The absence of intention to harm physically and relinquishing of personal responsibility for harm caused

As the participants reflected on their experiences as individuals who had perpetrated IPV, they emphasised that it was not their intention to harm their partners physically even though they did so. John acknowledged, *"The intention wasn't to hit."*

4.3.4.1 Factors to which perpetrators assign blame for IPV perpetration

When speaking about the incident(s) where he perpetrated IPV, Peter shared how he made meaning of that experience. He related, *"She started sounding rude and she kept*

coming across as rude according to me." He added, *"So with an adrenaline response, I slapped her*." Peter employed his perception of his partner's interaction with him and his biological response to explain his perpetration of IPV.

John shared, *"It happened because of how she spoke to me*." Thus, John also used the nature of his partner's interaction to account for his perpetration of IPV. He explained, *"No one decides to wake up and hit someone. It only happens when they respond with aggression. So, when it happens I cause her pain so that she knows the consequences of her aggressive responses."*

Sam shared a comparable experience to that of Peter and John. He acknowledged, *"I know that I have a short temper*." He further explained, *"I would be filled with anger, so it happens because of that. It's also to show that I am a man but by the time I relax, and I calm down, I realise that I shouldn't have hit her. I should have let her go."*

4.3.4.2 No reason for IPV perpetration

Unlike most of the participants who related they had no intention to perpetrate IPV and assigned blame to other factors, Sibusiso showed remorse and admitted he had no reason to perpetrate IPV. This was an uncommon theme as he was the only one to show remorse and admit wrongdoing. Sibusiso reflected, *"There was no reason why I hit, I still don't know why*." He added, *"I still don't know why I hit*." Furthermore, he acknowledged, *"When I think, why did I hit her? She did nothing wrong"*. Such realisations may contribute to participants' negative self-perception.

4.3.5 Theme five: Self-representation in light of IPV perpetration

The participants' self-representation in the light of their perpetration of IPV is related to the role that they played in their intimate relationships and how their perpetration of IPV may influence their self-perception.

4.3.5.1 Assumption of authority/disciplinarian figures in romantic relationships

Sam thus explained how he assumed the role of a disciplinarian and demonstrated his care and love for his partner through the perpetration of IPV: *"It's possible to stop but when a man says that he is stopping then it means that he doesn't care about her. When something is yours … let me make an example with an animal. When a donkey is in the field and it is going astray, it gets beaten, pulled and pushed around to get it to be on the right*

track. It shows that you love and care about it because you don't want mistakes to happen. Going back to a person, if I tell her that I will no longer be correcting her when she makes mistakes, it means I don't care anymore that I can stop anytime. On the other hand, what happens on one side the same must happen on the other side. When you hit someone, you hit them with love, to show that when you do something I don't like."

John concurred with these sentiments when he asserted, *"If she doesn't learn using her ears then she will learn through the use of a rod."* He thus also assumed the role of a disciplinarian in his intimate relationship, which found expression through IPV.

4.3.5.2 Monsters created

Two participants revealed how either alcohol or the nature of their relationship with their parents contributed to how they represented and perceived themselves.

John related, *"Parents are to blame in the monsters that we currently see because of how they treated their children. They refuse to admit, forgetting that they taught us that violence solves issues and conflicts."*

Peter disclosed, *"So I think that the monster in me will always be unleashed when I am drunk."*

4.3.5.3 Poor Self-esteem/self-concept.

In this subtheme, the participants reflected on their perception of themselves following their perpetration of IPV. While a poor self-concept was shared in some instances, an inflated sense of self was expressed at other times.

Sibusiso shared, *"I still don't know why I hit''* and *"There was no reason why I hit, I still don't know why."*

Sam shared a weakened self-concept because of anger and hurt. IPV perpetration was employed to mask that reality. He acknowledged, *"I go around pretending like everything is okay, acting like a lion but it's the person inside that is hurting. So, I hit her to satisfy that anger and hurt in my heart."*

On the contrary, John portrayed a grandiose self-concept with the awareness that he possessed control to harm physically. He asserted, *"If she doesn't show that she is sorry and is rowdy then I feel that I served her right. Remorse depends on her behaviour. If she is remorseful then that's when you would feel remorseful. But if she continues behaving like a cowgirl then it makes me think that I should even hit her again."* The participants'

fragmentary and impoverished sense of self may be traced back to their developmental trajectory in their family of origin.

4.3.6 Theme six: Nature of perpetrators' family of origin.

The participants were given opportunities to reflect on how they perceived that their childhood and family background, the nature of their child-parent and parental relational dyads and the fulfilment of their needs may have influenced their perpetration of IPV. This spoke to the socio-economic circumstances the participants endured and/or the emotional and psychological resources that were available to them during childhood.

4.3.6.1 Socio-economic status of family and unmet material needs.

Peter described his family background as one characterised by deprivation where material needs were not met. He shared, *"We grew up very poor. My mom was unemployed and my dad was the only one employed in the house with eight other siblings, nine including myself. So, with the minimum wage that Dad was bringing to the house we had to make means of living. It was a very difficult life and that's why most of us dropped out of school at an early age going to job hunt and that basically how I ended up in Gauteng 'cause I was here trying to make a difference in my life."* He also noted, *"It was painful to live a difficult life, it created anger in me that I took out on my ex-wife."*

Sam also related that during his childhood his material needs were unmet. He explained, *"I don't think we got our needs to our satisfaction. Peer pressure was serious where other children would have what we didn't. We would wear torn clothes. Our only clothes were school uniform and that's what we wore during Christmas. You wore uniform at school and it was the same school shorts that you played with after school. I am still hurt about that."*

On the contrary, John had an opposing view about the influence of unmet material needs during childhood. He related, *"My mother was a single parent. But I don't think that is a contributor to what we are discussing. It has to do with how the women are being raised by their families."* However, he subsequently contradicted himself and agreed with the notion that unmet material needs may influence IPV perpetration. He stated, *"I don't want to blame anyone about my upbringing but maybe it did affect how I solve conflict in the way that I do now."*

4.3.6.2 Emotionally unstable home life during childhood.

John shared that his childhood experiences were characterised by violence and fear. He did not mention any positive emotional experiences. John related, *"I was beaten a lot by several caregivers. To a point of feeling helpless. They [parents] refuse to admit, forgetting that they taught us that violence solves issues and conflicts.*"

Peter's experiences were in line with that of John. He related, *"You know with our generation we grew up with the man being the head of the house, so we were kind of scared of him, so I think that has been influenced the decisions that I have made with my ex-wife."*

Sam articulated a similar experience. He remembered, *"During that time that I would hold on even when I could see how difficult things were at home. It was tough there. The things that happened there were so bad that even as a child I wasn't even able to understand or talk about them."* The participants thus reflected on the gravity of their emotional upbringing and how that affected them as children and psychically shaped their positionality as perpetrators of IPV.

4.4 Conclusion

ITA was employed to analyse the data obtained from the telephonic semi-structured interviews with the five participants. The six themes that were identified encapsulated the internal and external experiences of men who had perpetrated IPV. The findings revealed that alcohol, harsh parenting experienced by perpetrators, ineffective patterns of conflict resolution, absence of intention to harm physically, self-representation in light of IPV perpetration and the nature of perpetrators' family of origin described the participants' self-experiential reality. In the following chapter, the findings of the study in relation to the reviewed literature are discussed.

CHAPTER 5: DISCUSSION

5.1 Introduction

The purpose of this study was to explore the intrapsychic experiences of male IPV perpetrators in Tembisa. In this chapter, the findings presented in Chapter 4 are discussed from the perspective of ORT and integrated with the reviewed literature. The research question that underpinned the study, namely, what underlies the intrapsychic experiences of male IPV perpetrators, is answered in the study. The six themes that were identified are all related to each other even though they are discussed separately in that they cohere in their presentation of conscious and unconscious dynamics of experiences of male perpetrators of IPV. Accordingly, connections are drawn between the major and subthemes throughout the discussion. A review of the study's research aim and objectives precedes the discussion of the themes. Finally, the researcher's reflexive process in which she reflects on how her assumptions and background may have influenced this project is discussed.

5.2 A review of the research aim and objectives

The aim of the study was to explore IPV and shed light on the (intrapsychic) experiences of men who perpetrate IPV in Tembisa, Gauteng. While the first objective was to describe men's experiences of perpetrating IPV so as to illuminate how male perpetrators of IPV make sense of their violent behaviour, the second objective was to assess the role of self-object relations in IPV.

5.3 The influence of alcohol

South Africa has one of the highest rates of alcohol consumption globally. Furthermore, excessive alcohol consumption has been implicated in interpersonal violence, specifically IPV. The participants cited the abuse of alcohol as a major contributor to their perpetration of IPV. Yaya and Ghose (2019) asserted that discordant drinking habits may engender an increase in relationship stress and a decrease in marital satisfaction, leading to a rise in the perpetration of abusive actions. Furthermore, the increased risk and severity of abusive behaviour as well as initiation and escalation of IPV can be prompted by the abuse of alcohol. Yaya and Ghose (2019) also noted that 65% of women who have reported IPV have stated they observed alcohol abuse and intoxication in their partner prior to the abuse. One participant admitted, *"Not that I don't hit my wife, I do. But I don't just do it*

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

randomly with no reason. If you see a man hitting a woman, there is a reason for that. I don't want to hide behind alcohol. Do you think a man would hit a woman if he is not drunk? He wouldn't. So the important thing is alcohol here."

Hatcher et al. (2014) revealed that male IPV perpetrators were able to communicate effectively with their partners and engage in adaptive problem and conflict solving strategies when they reduced their excessive consumption of alcohol. Most notable, men start demonstrating care and concern for their partners and families and participate in these relationships when they reduce their alcohol consumption (Hatcher et al., 2014). Similarly, a participant in Hatcher et al.'s (2014) study related that eliminating alcohol led him to engage in improved decision-making processes related to the welfare of both his family and himself. In accordance with studies conducted, this study found that alcohol is often included in the participants' descriptions of IPV perpetuation in that they were intoxicated prior to harming their partners physically. Abrahams et al. (2006) revealed a similar trend of alcohol being a precursor to the male IPV perpetration.

The psychodynamic theory postulates that substance abuse provides relief or at least a distraction from unbearable experiences. Substance abusers create an escape for themselves that engenders a sense of control that they perceive to lack in reality. They seek to manage intolerable and confusing affect by consuming alcohol because of the psychical tension that it causes (Habibi et al., 2016). Considering the complex relationships with families of origin and/or intimate partners participants have described, it becomes evident that alcohol is used to avoid psychical material that has remained unresolved from the oedipal stage (Habibi et al., 2016). Feelings of unworthiness, vulnerability and emotional and/or physical neglect are intrinsic in this stage of arrested psychological development or fixation in relating. Not only is the excessive use of alcohol indicative of early parenting trauma in IPV perpetration but it speaks to an unconscious yearning for control over uncertain and emotionally challenging life situations in adulthood (Birrell, 2014). The lack of ego strength as well as a labile and fragmented sense of self that is vulnerable to failure and disappointment appears to be reached externally through alcohol in an attempt to self-soothe and self-regulate. The outward reach to alcohol is also indicative of a self that is lacking in psychic reserves that assist in self-regulation and thus seeks external gratification. However, this is unsuccessful because the IPV perpetrator denies their need for others but rather emphasises their false sense of independence and control by abusing alcohol (Birrell, 2014). Denying the need for others and inflicting violence on an intimate partner is the adult presentation of a rudimentary attack that a child ensues on a *bad* object. Paranoid-schizoid functioning is thus implicated. Therefore, the participants abused alcohol to escape their

unresolved conflict related to their harsh parenting environments and a self that was inadequate in relying effectively on its own psychological health to function. Their relational capacity with their partners was thus compromised due to the enactment of pathological mental representations of parental objects against whom the self needs to protect itself.

5.4 Harsh parenting experienced by male perpetrators of IPV

The participants related that harsh parenting in the form of corporal punishment and verbal aggression, which parents direct towards children, was a distinct characteristic of their childhood. This is supported by the literature. Grasso et al. (2016) noted that children who are exposed to IPV have in all likelihood experienced harsh parenting, which has placed them at risk for engaging in disruptive behaviours in their adulthood. One participant shared, "*My childhood was ridden with violence everywhere. Especially in young boys, it is part of growing up. That is how we would solve petty conflicts.*" Lee et al. (2013) concurred with the notion that childhood exposure to violence and/or IPV is significant. Their findings indicated that perpetrators with a history of violence may present with compromised attitudinal and behavioural factors. Seminally, Winnicott (1960) stated that parental impingement may cause individuals to be overly anxious and relatively conscious of their dependence and helplessness as well as unresponsive towards their environment. The emergence of the ego and its subsequent strength in adulthood may see the development of a false self. The premature and traumatic separation of an individual from their caregiver during early childhood is implicated in the harsh parenting experienced by IPV perpetrators, which may be due to several resultant psychic deficits during that stage such as the inability to appreciate the wholeness of external objects.

A participant shared, "*I was beaten up a lot even when I had done nothing. I was beaten even for my younger siblings. I was beaten a lot by several caregivers. To a point of feeling helpless.*" This participant described a climate of aggression in relation to his childhood as significant such that his psychological and thus state of self has been impaired by this experience of harsh parenting. Minter et al. (2015) proposed that in conjunction with disruptive behaviours, encountering harsh parenting and exposure to IPV engenders children to learn aggressive and violent behaviours. Carveth (2021) stated that this indicates functioning from the paranoid-schizoid position where the environment is perceived to be predatory and life-threatening such that the focus is to survive. The participant described a precarious situation where the attack from the harsh parenting that he had experienced

resulted in persecutory anxiety that he clearly internalised about others and his external world.

The same participant asserted, "*Parents are to blame in the monsters that we currently see because of how they treated their children. They refuse to admit, forgetting that they taught us that violence solves issues and conflicts.*" The participants stated that caregivers who were inconsistent, harsh in their parenting and emotionally unavailable in responding to their children's emotional and physical needs were an experiential reality and further described them as the matrix for their relational capacity. Hostility as well as verbal and/or physical abuse were directed at the participants in their early childhood. From an ORT perspective, the consequences include children who experience feelings of unworthiness related to parental closeness and affection (Hadley, Holloway & Mallinckrodt, 1993). As adults, the participants internalised the perceived negative perception about self that external objects are perceived to hold (Winnicott, 1986). The ability to trust and not have fears of abandonment are challenging to attain when external objects in early childhood failed to demonstrate such. Thus, trust and a capacity for intimacy may be introjected and associated with external objects.

One of the participants admitted, *'' If she doesn't show that she is sorry and is rowdy then I feel that I served her right. Remorse depends on her behaviour. If she is remorseful then that's when you would feel remorseful. But if she continues behaving like a cowgirl then it makes me think that I should even hit her again. Because if she doesn't learn using her ears then she will learn from using the rod on her.*" Another explained, *"It's possible to stop [hitting his partner] but when a man says that he is stopping then it means that he doesn't care about her. When something is yours … let me make an example with an animal. When a donkey is in the field and it is going astray, it gets beaten, pulled and pushed around to get it to be on the right track. It shows that you love and care about it because you don't want mistakes to happen. Going back to a person, if I tell her that I will no longer be correcting her when she makes mistakes, it means I don't care anymore that I can stop anytime.*" The participants' interactions with their intimate partners resembled a parent-child relationship in which a parent has the authority to discipline a child when they have transgressed. When they perpetrated IPV, they enacted their childhood and assumed the role of the parent. Seligman (1999) argued that identification with the aggressor is the reproduction of a relational process and not that of object representation only. The male IPV perpetrator assumes the role of parent where the infliction of physical harm on a partner is a demonstration of love, care and discipline. Violence is thus considered a legitimate component of intimate relationships employed to bring about the desired behaviour in

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

intimate partners, similar to parents with their children (Simons et al., 2008). Furthermore, this participant described a fixation on the paranoid-schizoid position. The partner's badness was emphasised with no awareness of her good to the extent that all the participant considered was her badness. Therefore, the partner was not considered to be a multidimensional being, a combination of both good and bad features (Kernberg, 2019). This fixation represented the participant's inability to be realistic in his perception of internalised representations. Rather, he emphasised persecutory aspects.

Hadley et al. (1993) proposed that individuals who experienced unresponsiveness, abandonment and neglect and ultimately, harsh parenting perceive intimate relationships negatively and thus, behave in ways that garner continued similar responses. This is by virtue of the participants' psyche and what it holds as being appropriate conduct in a relationship due to external and internal object experiences. Object relations with parental figures that have either been repressed or dissociated become activated such that these past relationships are enacted in the present (Kernberg, 1991). Oedipal conflicts are therefore not resolved. In addition, through the progression of the participants' life span, they demonstrated that they were not able to relinquish the internalised other in developing a mature sense of self adequately, one that is not stuck in oedipal stage (Yaacob, 2006).

5.5 Ineffective conflict resolution

A participant related: *"That night when the incident happened, I was drunk trying to get a hold of her and I wasn't getting a hold of her. When she got home and I questioned her about her whereabouts and stuff like that, she started sounding rude and she kept coming across as rude according to me so with an adrenaline response, I slapped her. She tried to fight back, and I slapped her again. When she tried to come again at me or fight with me physically for the third time, I took out my gun on her."*

Another participant shared, *"I asked her why she lied to me and insulted me over the phone. She refused to give me any answers and that caused a fight between us and I ended up beating her up seriously.*" The overarching similarity in what the participants revealed is that conflict resulted in them resorting to physical violence to assert and maintain dominance and control over their partners and possibly their internal persecutory objects.

The experience of the death instinct and its manifestation of aggression and/or violence in the case of IPV may be experienced as an attack and thus, fear of persecution (Kernberg, 2018). The same fear is either projected onto an object or the object is feared. When individuals experience frustration of bodily needs, tension, discomfort and/or any

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

experience that is perceived as being persecutory, the psyche seeks to reduce the subsequent psychical tension (Kernberg, 2018). However, this occurs maladaptively through the violent outward expression towards an external object, that is, an intimate partner. In this way, IPV perpetrators have likely perceived themselves to be powerless in their relationships. Consequently, violence and aggression appear to be the appropriate manner to cope with negative experiences and feelings of the perceived persecution by an external object. Thus, violence and aggression are employed to reassert the perceived loss of power against the psychical tension experienced. A participant shared, *"Currently, men are stressed, with all their responsibilities and they can't keep up so they take it out on their wives."* This participant's experience is accounted for by ORT in that the psyche of an IPV perpetrator is fraught with psychical tension of a fragmentary self that is often directed outward towards intimate partners in the form of violence.

The external and/or internal *badness* of an object is derived from individuals' own inherent destructiveness and projected onto others (Carveth, 2021). This is indicated by the perpetrators' inability to resolve conflict effectively but rather perceive persecution and characterise external objects as *bad.* Conflict and subsequent IPV in intimate relationships are thus reminiscent of perpetrators' ability to cause harm to a loved object (Kernberg, 2019). Persecution is thus a characteristic of most relationships in which IPV is perpetrated because of a pathological relational dynamic that ORT emphasises in formulating the relational blueprint that is adhered to. The *badness* that is assigned to the self-object as well as other external objects complicates the manner in which relationships are approached and engaged (Kernberg, 2019). Accordingly, the external world is assumed to be inherently bad and denotes a paranoid-schizoid functioning that is neither adaptive nor realistic. Due to the unconscious nature of this process, IPV perpetrators may lack the awareness or understanding of the intrapsychic dynamics that underlie their perpetration of IPV.

5.6 Absence of intention to harm partner physically

Although male IPV perpetrators have related that harming their partner physically is never their intention, they have reported perpetual internally conflicting affective states because of their perpetrated violence. Feelings of sadness, feeling bad because of the way they have treated their partner and worrying about their family's integrity have been reported (Walker et al., 2010). Anxiety and overall emotional distress are often the results of their IPV perpetration. A participant explained, *"The intention wasn't to hit but it happened because of how she spoke to me … It's those provocations I am speaking about."* Another shared, *"I*

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

feel bad but I would be filled with anger so it happens because of that." While this does not excuse IPV perpetration, it suggests that IPV has a psychically traumatising impact on the perpetrators too.

A participant thus justified his actions: "*And I want to be satisfied in the bedroom, but you deny so I end up hitting you*." Another related, *"She started when she slapped me and when I turned to return it she had a bottle to hit me with it but she was stopped*." These participants' responses reveal a low frustration tolerance and thus a dysregulation of emotion/self-states. In examining the accounts of male IPV perpetrators, who were incarcerated, Wood (2004) identified themes of justifications, dissociations and remorse as being most prominent. The participants in this study gave similar reasons for their perpetration of IPV, including disrespect and disregard for the perpetrator's manhood, separation of their actions from themselves and expressions of regret and remorse. In providing justifications, the participants accepted responsibility and provided reasons why their actions were necessary and appropriate. A participant explained, *"When someone does this how should I respond when she started with the aggression, so I did the same*." Another participant maintained that he did not know why he perpetrated IPV and did not believe that was who he was, particularly because the perpetration occurred during his youth and ceased as an adult. The participant thus expressed his remorse: "*I feel like a bad person because I took their dignity away from them by hitting them*." The participants did not appear to identify themselves as abusers and/or violent individuals but rather as individuals who responded maladaptively to highly stressful and challenging situations that required a response, which was deemed appropriate at the time.

A false self that had progressively internalised a feared and essentially negative caregiving object appeared in the participants' descriptions (Newman, 2013). The false self emerges when a caregiver continuously fails to provide an effective environment such that the true self is repressed. The false self's main objective is to defend and protect through the projection and repression of the true self (Ehrlich, 2021). This is not only due to failure of the holding environment but also the projection and introjection of individuals' desires and emotions, especially those that are intolerable and overwhelming (Ehrlich, 2021). The true self is spontaneous in its relation to the external world because it functions from a self-experience of understanding the world is responsive to its needs and the fulfilment thereof (Newman, 2013). However, failure to achieve this results in a false self that adapts itself to suit its environment in an attempt to protect and defend itself from an unsafe and unstable situation. IPV perpetrators demonstrate that their true selves have undergone repression over time to the extent that their functioning is not from an understanding that their world is

sensitive to them. They demonstrate a lack of awareness of their true self and its desires but portray the false self with its poor emotion regulation and self-esteem. The false self is also performative and results in the individual feeling unsatisfied and depleted. The participants in this study also expressed this. One explained, *"I go around pretending like everything is okay, acting like a lion but it's the person inside that is hurting. So I hit her to satisfy that anger and hurt in my heart."* Another admitted, *"There was no reason why I hit, I still don't know why."*

Guilt surfaces in the depressive position due to an attack of the external object during a preceding paranoid-schizoid position. Aggression is projected onto the external object or directed against the persecutory object when objects are experienced as partial objects as opposed to whole objects, which are sources of both gratification and pain (Lesmeister, 1998). The participants oscillated between the depressive and paranoid-schizoid position. Splitting and projection were employed to cope with perceived persecutory objects as well as their aggressive and violent response in the paranoid-schizoid position. Fear followed as the participants endeavoured to make reparations for earlier hostility and aggression as they feared the loss or destruction of the good objects. The intrapsychic destructive impulses propelled the participants as they related having no conscious intentions of harming their partners.

5.7 Self-representation in light of IPV perpetration

Most of the participants related experiencing feelings of guilt and shame because of their perpetration of IPV, particularly the physical pain that they inflicted on their partners. Their ability to self-reflect and be self-aware when feelings are not heightened allowed the participants to evaluate their behaviour and accordingly, feelings of remorse and regret emerged. Kivisto et al. (2011) posited that the experience of shame is so profound that it may shift to the projection of anger so as to protect the ego and disguise the sense of compromised authority. A participant argued, "*So there are mainly two reasons that influence men to physically harm their partners. The first reason is the many rights that women have, that is the first reason. They constantly want to exercise their rights even when it is not necessary. Even when they are wrong and they should just say I am wrong, I am sorry, they want to exercise their rights. The second reason is that women are quick to report things to the police and say that they are being abused. However, the root cause of this is that women have many rights that they want to exercise.*" Another thus concurred, "*Women are always victims, right? I have never heard of men being the victims … I often think that*

men are never the victims. There is never a point where men can agree to being victims or oppressed by the law. We just accept it and pretend that we don't see it and live as normally." Both participants spoke about employing violence and aggression to feel powerful when they perceived a loss of power and experienced shame and helplessness in their relationship.

Guilt and shame were also instrumental in how one participant thus described himself: *"I go around pretending like everything is okay, acting like a lion but it's the person inside that is hurting. So I hit her to satisfy that anger and hurt in my heart.*" A distinct description of self was revealed when two participants gave accounts of how their perpetration of IPV could portray them as monsters. The first participant asserted, *"Parents are to blame in the monsters that we currently see because of how they treated their children.*" The second participant admitted, *"So I think that the monster in me will always be unleashed when I am drunk''.* Both these participants gave insight into the extent of their shame in their perpetration of IPV as influenced by impingements in self-object psychic development of harsh parenting, with alcohol abuse exacerbating impaired self-regulation and thus equating them to monsters. Specifically, this is the case with men who do not express negative emotions resultant from negative experiences so that aggression and violence are resorted to, considering their inability to be vulnerable enough to articulate rage, humiliation, hurt and inferiority.

ORT posits that individuals seek to maintain the integration of a fragile self, especially in light of the schizoid-paranoid and depressive internal positions. An attack on this endeavour can cause a *bad self*-perception (Guntrip, 2018). This was the case when this study's participants experienced several incursions on their developing sense of self to the extent that intense feelings of shame led to phantasies of being abandoned by primary objects. The participants experienced the notion of *I must be bad for me to have been abandoned*, which is consistent with the perception that their caregivers did not fulfil their emotional needs. Shame and guilt were linked in that the participants lamented the harm that they caused the objects who were perceived as capable of withdrawing their affection in retaliation, much like the primary objects who were their caregivers (Guntrip, 2018).

In their descriptions of themselves, their perpetration of IPV and the influence of their caregivers, the participants related a process of psychic splitting, which may be explained as a disavowal of parts of themselves with which they were most uncomfortable such as hurt, abandonment, anger, guilt and shame resulting from their relationships with their caregivers, which they projected onto their partners. The partners eventually adopted those

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

split characteristics and acted them out. It is evident that their present relationships became ground for the unconscious conflict from the representational world of primary objects to re-surface and become re-enacted (Zosky, 1999). None of the participants were able to speak positively about themselves, in fact, they demonstrated internalised negative self-representations as seen in their use of *monsters* to portray themselves. The participants appeared to have had self-object representations in which the bad was more abundant than the good and accordingly, they internalised those. Their portrayal of themselves as *monsters* was the result of their self-esteem being evidently compromised, which resulted in a sense of self that did not cohere. As well as protecting themselves through splitting, explosions of rage and aggression were also employed to shield themselves from the fragility of their ego as it continued to perceive re-enactments of bad primary object relationships as attacking and persecutory (Zosky, 1999). Therefore, the participants' internalised sense of *badness* was the result of primary object relationships that were not nurturing but rather created anxiety that the participants attempted to defend themselves from through splitting and violence. The participants also seem to be preoccupied with the harm that they could cause their partners, much like the depressive position that infants may endure in an endeavour to resolve their internal conflict with internal objects/representations (Szymanski & Springer, 2014).

One participant asserted, "*Men are being oppressed with their rights being threatened… I find that women and their rights are being prioritized. When women exercise their rights, they are listened to but when men try to do the same then we are not listened to. I also have the right to be treated with respect however that is not the case.*" This highlights the persecutory and rejecting interactions that participants had endured from their primary caretakers so that they perceived themselves as being under siege. As children, the participants had internalised their objects pathologically to control them in their psychic world, with no ability to alter the object in reality (Zosky, 1999). This was the result of interactions that became repressed and retained as introjected self-representations.

5.8 Nature of perpetrators' family of origin

Dawes et al. (2004) asserted that both the economic and emotional contexts in which individuals are situated have an influence on their proclivities in using violence in intimate relationships. When the levels of economic inequality and stresses that are involved in poverty are high, IPV is exacerbated. Individuals whose families of origin have a low socio-economic status (SES) fail to establish human and social capital necessary for forming

intimate relationships that are both satisfying and stable. Thus, these individuals are likely to be involved in IPV (Smith et al., 2015). Most of the participants in this study related that their material needs had not been met because of their family's low SES. One participant explained, *"We grew up very poor. My mom was unemployed and my dad was the only one employed in the house with eight other siblings, nine including myself. So with the minimum wage that Dad was bringing to the house we had to make means of living … It was painful to live a difficult life, it created anger in me that I took out on my ex-wife."* Another shared, *"I don't think we got our needs to our satisfaction. Peer pressure was serious where other children would have what we didn't. We would wear torn clothes. Our only clothes were school uniform and that's what we wore during Christmas. You wore a uniform at school and it was the same school shorts that you played with after school. I am still hurt about that.*" Both participants revealed how their unfulfilled childhood material needs were implicated in their subsequent perpetration of IPV as it was interwoven with emotional deprivation and thus, general emotional malaise. Low SES thus engenders an experience of economic disadvantage and victimisation that the participants experienced during their childhood, which may persist into adulthood. The psychological effects of this may include a diminished sense of self-efficacy (Capaldi et al., 2012). This suggests the importance of a family's ability to buffer children' developmental psychical apparatus against unmet material needs in an endeavour to mitigate the influence that a low SES has in predicting IPV perpetration.

In the psychodynamic theoretical framework's focus on psychic trauma, life events such as material deprivation are not ignored (Zornig & Levy, 2011). Individuals' psychical apparatus in how the psyche is able to process traumas is emphasised. The lack or loss of a supportive holding environment can result in children being left to their own immature devices to which a considerable deal of impingement has to be reacted to as opposed to psychic energy being focussed on the construction of a true self (Zornig & Levy, 2011). Ultimately, adults who may have experienced impingements in their emotional development are the results of a holding environment that neither protects nor provides. Roberts et al. (2010) argued that emotional support from the family of origin is significant in mitigating the effects of witnessing or experiencing violence during childhood and protecting against future perpetration of violence. Hoskins and Kunkel (2022) noted that emotional support assists in establishing self-reliance by developing adaptive tools to handle aggression. However, male IPV perpetrators often believe emotional support is inaccessible. A participant related, *"I'll give an example that I had a physical fight at school with someone. I wouldn't tell my mother because she would hit that I wouldn't even sleep inside the house because the school would give a letter to me to give my mother about my fight. I wouldn't give the letter in fear that I*

would be beaten up." Therefore, because emotional support is instrumental in ensuring that individuals are able to withstand adverse life challenges, in its absence the self-object experience of being isolated and neglected may lead to increased IPV perpetration.

ORT is concerned with the infant-caregiver relationship, particularly how the cognitive and affective patterns thereof motivate intrapsychic and interpersonal functioning throughout the life cycle (Blizard & Bluhm,1994). The participants in this study related experiences where relationships with their caregivers informed internal and external representations of the self and other that were characterised by abandonment, rage, neglect and unfulfilled needs. Consequently, the development of the personality structure in the internalisation of self-other representations influenced the lens through which they experienced life. The notion of *I am so bad that my caregiver did not care for me such that I was left vulnerable, I should therefore take control of all relationships that have me feeling similarly* was assumed. Helplessness, anxiety, hopelessness and fear were thus the lens through which the participants perceived intimate relationships, with resultant damage to the psychic and thus self-structure that leads to devasting IPV perpetration.

5.9 Reflexivity

The pursuit of this research was prompted by several reports on various platforms related to the physical harm and/or deaths of women at the hands of their partners. The assumption that I hold regarding the abuse and abandonment that perpetrators may have encountered in their early childhood being seminal in later IPV perpetration impelled my interest in the study. As a woman myself, feelings of fear and anger were aroused at the atrocities that women face in their most intimate spaces, thought to be safe. Curiosity was also aroused in expanding the narrative about IPV in relation to a perpetrator's experience, which is often neglected. Accordingly, careful consideration had to be given so as not to excuse their destructive behaviour but enable an enhanced understanding of perpetrators to ultimately assist them comprehensively.

However, this was not without several challenges. The most difficult was the process of data collection and analysis in which IPV perpetrators' experiences had to be explored. This was particularly difficult regarding the manner in which participants shared their views on women and the perpetration of IPV. While some were very remorseful and demonstrated understanding about their harmful behaviour, others were candid in their perception of their *right* to rule over women and their bodies. One of the participants equated women to animals in his justification of his perpetration of IPV. Another spoke confidently about women bringing

physical harm inflicted by their partners upon themselves. These sentiments and more shared by the participants enraged me in the bravado in which they expressed their views given the plight of women in basic physical and emotional safety in intimate relationships. It is in this that being reflexive in how I processed feelings elicited in me was significantly important so as not to have my own judgements of the participants hinder the credibility of the research.

5.9.1 Influence on research findings and analysis

The findings of this study are a co-construction of my realities as well as those of the participants. This is by virtue of my determination to capture and present the participants' feelings in a way that communicated their experiences as individuals who had endured considerable trauma that transcended beyond their childhood to their intimate relationships as adults. Thus, my involvement enabled me to become a co-creator of the participants' experiences in the manner that they are reflected in the study. The study's research design was interpretive and accordingly, because I relied on my own interpretations of the experiences they shared, emphasises how the findings are not solely the product of the participants, but the result of the relationship created between researcher and participants.

The analysis of the data that emerged from the interviews was a challenging process in that I had to manage my personal interpretations and my feelings that arose from the interviews because of the experiences that the participants were sharing. This was remedied by the understanding that the participants were experts on their realities and were capable of articulating their experiences. Furthermore, my role as a researcher was not to alter but rather to collect the data, analyse and present it. The understanding that the participants were complex and dynamic individuals who had suffered adverse experiences to the extent they may not have been equipped to conduct themselves adaptively in relationships may have influenced the data analysis process. The participants' stories engendered a heightened awareness and empathy for their experiences. In order to mitigate the impact of this, I attempted to treat the data as professionally as possible and allow the participants to speak for themselves with minimal interference from my personal biases.

5.10 Conclusion

In this chapter, the themes that emerged in the exploration of the intrapsychic experiences of male IPV perpetrators were discussed. The major themes that were identified are as follows: alcohol, harsh parenting experienced by perpetrators, ineffective conflict

resolution, absence of intention to harm physically, self-representation in light of IPV perpetration and nature of perpetrators' family of origin. The research question that underpinned this study was concerned with the intrapsychic experiences of male IPV perpetrators. While each of themes alone is implicated in the perpetrators' experiences, when considered together they offer a more comprehensive and full account of how the psychodynamics of the perpetrators could influence IPV perpetration. Thus, one may deduce that male perpetrated IPV cannot be attributed to only one dimension. This also highlights how complex the exploration of male perpetrated IPV is and ultimately, the development of integrative interventions to mitigate it. Furthermore, the intrapsychic experiences of IPV perpetrators implicate unmet primitive needs that continue to motivate their adult behaviour in intimate relationships. The intrapsychic process that occurs is characteristic of internalised primary caregivers in conjunction with their persecutory actions, resulting in detrimental developmental outcomes in adulthood. IPV perpetration is often a re-enactment of unresolved developmental trauma experienced. An account of the researcher's subjective position in conducting, analysing and interpreting this study concluded the chapter. In the final chapter, the study is concluded and the limitations and contributions thereof, as well as recommendations for future research are outlined.

CHAPTER 6: CONCLUSION

6.1 Introduction

This final chapter comprises an overview of findings and concluding remarks. Furthermore, the limitations and contributions of the study are offered. Finally, recommendations for future research are provided.

The research question, aim and objectives of the study were outlined in Chapter 1. A literature review of male perpetrated IPV in South Africa and globally was discussed in Chapter 2. Furthermore, ORT in relation to IPV was detailed in the chapter. In Chapter 3, the research process and ethical principles that were maintained throughout are explained. The research methods that were employed were also justified. The findings of the study, specifically the six major themes that were identified, were presented in Chapter 4. ITA was employed to analyse the data. The findings revealed that the male IPV perpetrators' experiences were characterised by excessive alcohol consumption, harsh parenting experienced by perpetrators, ineffective conflict resolution, the absence of intention to harm physically, the perpetrators' self-representation and the nature of their family of origin. In Chapter 5, the findings are discussed, and the researcher's personal reflections outlined.

6.2 Overview of the findings and concluding remarks

The purpose of this study was to explore the intrapsychic experiences of male IPV perpetrators through the theoretical framework of ORT. Accordingly, interviews were conducted with five self-reported male perpetrators of IPV to shed light on the internal worlds of the five participants, in an attempt to elucidate their object relational intra-and-interpersonal dynamics. The findings revealed that the experience of IPV perpetration is characterised by remorse, shame, fear and guilt in relation to the harm that the participants caused their partners, the subsequent negative perceptions they had of themselves as perpetrators and their adverse childhood experiences, which had repercussions for their psychic apparatus. The intimate relationships of the IPV perpetrators were characterised by uncertainty, aggression, violence, abuse and helplessness. This was similar to the caregiver-child relationship that they experienced in their formative years, which was responsible for the internal and external representations of the self and other. Accordingly, the self-object relational representations of IPV perpetrators are a significant aspect that this study was able to explore. The findings further revealed that the intrapsychic world of the IPV perpetrators was fraught with unresolved early childhood conflicts, including the neglect

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

of emotional and/or physical needs by external objects such as caregivers, which were represented internally as persecutory or split into either good or bad objects. Anxiety surfaced from their awareness of their ability to harm and destroy loved objects. The under-developed capacity of holding the ambivalence of objects as being both good and bad was also experienced as anxiety provoking. The oscillation between the paranoid-schizoid and depressive positions as well as unresolved conflicts of early childhood intra-and-interpersonal traumas demonstrated how the object relations of male perpetrators of IPV is paramount in understanding their emotive and experiential reality and how these relational traumas were re-enacted in their current intimate relationships.

6.3 Limitations and contributions

The study comprised a small sample of only five participants. It is acknowledged that the sample may not be representative of the entire population of male IPV perpetrators in the township of Tembisa. Furthermore, it is unknown whether the study's participants were different to individuals who chose not to participate. While the study employed the ITA to analyse the data, this process was based on the researcher's interpretations of the participants' conscious and unconscious experiences. In light of this, the researcher was rigorous in following the steps of ITA as closely as possible so that the study could be replicated. While the study recruited participants from a particular geographical area, it is unknown whether the findings could be generalised to male IPV perpetrators in another area.

Despite its limitations, this study has contributed to the body of knowledge in its emphasis on the intrapsychic experiences of male IPV perpetrators. The self-object relational representations of the participants have been particularly significant by shedding light on how these manifest in maladaptive violence in intimate relationships. Insight has been gained into IPV perpetrators' experiences in that their intrapsychic world was characterised by uncertainty, distrust, rage, humiliation and feelings of unworthiness. This understanding can be integrated into therapeutic and/or rehabilitative interventions aimed at perpetrators of IPV.

6.4 Recommendations for future studies

It is recommended that future studies should administer projective and personality psychometric assessments in an endeavour to explore the intrapsychic world of participants further beyond an interview that relies on self-reported experiences. The Thematic

Apperception Test and Millon Clinical Multiaxial Inventory-III personality assessment, for example, may be beneficial in this regard. The unconscious projection and introjection of self-object experiences could be investigated through these tests as well as afford an understanding of how the self and interpersonal relationships formed are impacted to an extent of decompensating into clinical presentations. It is also recommended that employing a larger sample will be advantageous to expand on other factors that may be important in exploring IPV perpetrators' experiences. Similarly, this study included participants of varying ages. It is recommended that future studies should include a heterogenous group of participants in terms of race, for example. This would ensure a more representative sample.

6.5 Conclusion

This study set out to highlight the experiences of male perpetrators of IPV grounded in an exploration of their self-object relational representations. In order to achieve an in-depth understanding of the underlying psychodynamics, a qualitative research approach was employed. The research question that underpinned the research was: What are the intrapsychic experiences of men who perpetrate IPV in Tembisa, Gauteng? Semi-structured interviews were conducted with five participants about their experiences as male perpetrators of IPV. ITA was used to analyse the data that emanated from the interviews. The results of the study highlighted that excessive alcohol consumption, harsh parenting experienced by perpetrators, ineffective conflict resolution, the absence of intention to harm physically, the self-representation of the perpetrators and the nature of their family of origin describe the experiences of male IPV perpetrators. Remorse, shame, fear and guilt underlie these experiences. Male IPV perpetrators' experiences are significant as embedded in intrapsychic conflicts that remain unresolved and thus maintain compromised persecutory self-object relations.

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Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

APPENDICES

Appendices A to F on pages 71 to 89

PARTICIPANT'S INFORMATION & INFORMED CONSENT DOCUMENT FOR AN INDIVIDUAL IN-DEPTH INTERVIEW RESEARCH STUDY

Study title: **An interpretive study of the experiences of perpetrators of intimate partner violence**

Principal Investigator: Ms. Gugu Gumede

TELEPHONE NUMBER(S):

Daytime & Afterhours numbers: 0795795269

DATE AND TIME OF FIRST INFORMED CONSENT DISCUSSION:

				:	
date	**Month**	**Year**		**Time**	

Dear Prospective Participant

Dear Mr.........................…………………….

1) INTRODUCTION

You are invited to volunteer for a research study. I am doing this research for Master's in Counselling Psychology degree purposes at a university, in the north of South Africa. This document gives information about the study to help you decide if you would like to participate. Before you agree to take part in this study, you should fully understand what is involved. If you have any questions, which are not fully explained in this document, do not hesitate to ask the investigator. You should not agree to take part unless you are completely happy about what we will be discussing during the interview.

2) THE NATURE AND PURPOSE OF THIS STUDY

The aim of this study is to explore the experiences of men who are perpetrators of intimate partner violence. This exploration will be into the relationships of these men with their intimate partners as well as their parents/caregivers.

By doing so, I wish to learn more about what it is like to be a perpetrator of intimate partner violence in Tembisa and potential avenues for rehabilitation and psychological services that could alleviate intimate partner violence.

You will be interviewed by the researcher in a place that is private and easy for you to reach.

3) EXPLANATION OF PROCEDURES AND WHAT WILL BE EXPECTED FROM THE PARTICIPANTS

If you agree to participate, you will be asked to participate in an individual interview, which will take about 60-90 minutes. The interview is an individual interview that will take place telephonically. I will ask you several questions about the research topic. This study involves answering some questions such as ''Why do you think that you physically harm your intimate partner/s?''

With your permission, the interview will be recorded on a recording device to ensure that no information is missed.

4) RISKS AND DISCOMFORTS INVOLVED?

We do not think that taking part in the study will cause any physical or emotional discomfort or risk. The only possible risk and discomfort involved is being asked questions that may arouse feelings of shame, anger and guilt.

During the interview, you may find that some questions are sensitive; for instance, questions about your conduct in your romantic relationship/s.

There are also some questions about things that have happened to you in the past and this may bring back sad or fearful memories. If questions feel too personal or make you uncomfortable, you do not have to answer them.

If you need psychological support or counselling during or after the interview, I will be able to provide this for you in my capacity as an intern counselling psychologist. Another option is to refer you to cost free psychological services, namely, The South African Anxiety and Depression Group as well as Lifeline that you would be able to receive even afterhours. Furthermore, should you indicate a need for an therapeutic intervention, a referral letter will be made available to you to access psychological assistance at a local clinic/hospital.

5)   POSSIBLE BENEFITS OF THE STUDY

You will not benefit directly by being part of this study. But your participation is important for us to better understand what it is like to be a man who perpetrates intimate partner violence. The information you give may help the researcher propose interventions in Tembisa that are designed for male perpetrators of intimate partner violence.

6)   COMPENSATION

You will not be paid to take part in the study. There are no costs involved for you to be part of the study.

7)   VOLUNTARY PARTICIPATION

The decision to take part in the study is yours and yours alone. You do not have to take part if you do not want to. You can also stop at any time during the interview without giving a reason. If you refuse to take part in the study, this will not affect you in any way. You will still receive standard care and treatment for your illness.

8)   ETHICAL APPROVAL

This study has been submitted to the Research Ethics Committee of Faculty of Humanities, of a university in the north of South Africa.

9)   INFORMATION ON WHO TO CONTACT

 If you have any questions about this study, you should contact 'Ms. Gugu Gumede' on Cell number: 0795795269

10)   CONFIDENTIALITY

We will not record your name anywhere and no one will be able to connect you about the answers you give. Your answers will be linked to a fictitious code number or a pseudonym (another name) and we will refer to you in this way in the data, any publication, report or other research output.
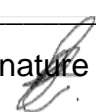
All records from this study will be regarded as confidential. Results will be published in academic journals or presented at conferences in such a way that it will not possible for people to know that you were part of the study. You are also encouraged to use a pseudonym (another name) so that you can remain anonymous

The records from your participation may be reviewed by people responsible for making sure that research is done properly, including members of the Research Ethics Committee. All of these people are required to keep your identity confidential. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records.

All information will be archived in a password-protected format at The Psychology Department at the University, for a minimum of 15 years and only the research team will have access to this information. Electronic information will be kept on a password protected computer in the Psychology Department for a minimum of 15 years.

11) CONSENT TO PARTICIPATE IN THIS STUDY

- I confirm that the person requesting my consent to take part in this study has told me about the nature and process, any risks or discomforts, and the benefits of the study.
- I have also received, read and understood the above written information about the study.
- I have had adequate time to ask questions and I have no objections to participate in this study.
- I am aware that the information obtained in the study, including personal details, will be anonymously processed and presented in the reporting of results.
- I understand that I will not be penalised in any way should I wish to stop taking part in the study and my withdrawal will not affect my treatment and care.
- I am participating willingly.
- I have received a signed copy of this informed consent agreement.

_____ _____ _____

Participant's name (Please print)   Signature   Date

Gugu Gumede   _____   **3/6/2021**

Researcher's name (Please print)   Signature   Date

I understand that the focus group or discussions will be audio taped. I give consent that it may be audio taped.

☐ YES   ☐ NO

**AFFIRMATION OF INFORMED CONSENT BY AN ILLITERATE PARTICIPANT
(if suitable)**

I, the undersigned, …………………………………..…, have read and have explained fully to the person named ……………………, the participant informed consent document, which describes the nature and purpose of the study in which I have asked the person to participate. The explanation I have given has mentioned both the possible risks and benefits of the study and the alternative treatments available for his/her illness. The person indicated that they understand that they will be free to withdraw from the study at any time for any reason and without jeopardizing their standard care.

I hereby certify that the person has agreed to participate in this study.

_____   _____   _____
Participant's name (Please print)   Signature/Thumb Print   Date

Gugu Gumede   _____   **3/6/2021**
Resarcher's name (Please print)   Signature   Date

_____   _____   _____
Name of the person who witnessed   Signature   Date
the informed consent (Please print)

Appendix B: Interview Schedule

Opening

A.   [Greet] My name is 'Gugu Gumede'. I am a Master's in Counselling Psychology student conducting research on the experiences of male perpetrators of intimate partner violence who live in Tembisa.

B.   [Purpose]I would like to ask you some questions about your background as it pertains to your childhood and your relationships with your parents or caregivers, if you have been exposed to violence, the living conditions under which you grew up and your current living conditions, why you think you physically abuse your partner and how that abuse has influenced the relationship and yourself.

C.   [Motivation] I hope to use this information to help influence policy as well as resources and interventions that cater for men in townships with the issues they may be experiencing that influence them to abuse their intimate partner/s physically.

D.   [Timeline] The duration of the interview will be determined by how long you need. If a follow-up is needed, we can schedule it.

E.   Are you available to respond to some questions at this time?

    If YES = continue   If NO = Try to reschedule and thank the participant)

(Transition: Let me begin by asking you some questions about where you live and your family)

A.   **Inclusion/Exclusion Questions**

(This is to establish if they are suitable for the study and if they meet the criteria for participation).

   a.   Are you a resident of Tembisa?

      If no, exclude from study

      If yes, continue to next question.

   b.   Are you above the age of 18?

      If no, exclude from study

      If yes, continue to next question

c.   Have you ever physically harmed your intimate partner/s?

If no, exclude participant from study.

If yes, continue to transition B.

B.   I would like to move on to questions about the relationship you had with your parent(s)/caregiver(s) in your childhood.

a.   During your childhood, who was your caregiver?

b.   Do you feel that all your material and emotional needs were met by this caregiver?

If yes or no, please elaborate further and give examples if possible.

c.   Do you think your relationship with your parents/caregiver has impacted your conduct in your romantic relationship/s?

(Prompt- Are there things that you identify in your romantic relationship/s as being the same as those in your relationship with your parent/caregiver?)

C.   Transition: Let us move on to talk about exposure to violence.

a.   Were you exposed to any kind of violence during your childhood?

b.   If yes, please explain what violence you may have witnessed or even perpetrated during your childhood?

c.   Does that have an influence on you as an adult today? If yes, please explain.

d.   Does that have an influence on your intimate relationship(s)?

D.   Transition: Let us move on to talking about the incident/s where you physically harmed your intimate partner

a.   Tell me about the first time you harmed your partner physically.

b.   Why do you think you harmed your partner physically?

c.   How does the knowledge that you hurt your partner make you feel?

d.   How many times do you harm your partner physically? If more than once, would you say that this is a pattern in the way you behave?

e.   What do you think causes you to harm your partner physically?

f.   Do you think that you can stop physically hurting your partner?

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

g. If yes, what support would you need for this to happen?

E. I would just like to ask you a few questions about your well-being in light of your childhood and your life currently.

a. In short, describe yourself in light of your relationships with parents/caregivers, your life currently and how you have physically harmed your partner?

F. Transition: Before we end the interview, let me ask you some questions about where you live and your family.

a. How long have you lived in Tembisa?

b. Are you married?

c. Do you have children?

d. Are you living with your family?

Closing

G. Transition: Thank you. Let me briefly summarize the information that I have recorded during our interview.

a. (Summarize) _____

_____

_____

_____

_____

_____

b. I appreciate the time you took for this interview. Is there anything else you think would be helpful for me to know about you or your experience in harming your partner physically that will help towards understanding you better and psychological interventions for you and others like you?

c. I should have all the information I need. Thank you once again. You have been of great help.

Appendix C: Advertisement to participate in study

PARTICIPANTS NEEDED

FOR

A STUDY OF THE EXPERIENCES OF MALE PERPETRATORS OF INTIMATE VIOLENCE

A researcher from a University north of South Africa invite men who have perpetrated intimate partner violence to participate in research. The study aims to explore their experiences. The exploration will be into the relationships of of these men with their intimate partners and caregivers/parents

If you agree to participate, you will be asked to prticipate in a telephonic individual interview which will take about 60-90 minutes

Should you be interested in participating, you are encouraged to use a fake name when contacting the reseacher, Gugu Gumede on 0795795269.

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

Appendix D: Referral Letter

03 June 2021

Psychologist / Social Worker

Dear Colleague

I would like to refer Mr _____. to your clinic/hospital for consultation and further management. He has participated in my research study titled *An interpretive study of the experiences of male perpetrators of intimate partner violence.*

He has received debriefing after his participation and indicated a need for further psychological intervention.

Thank you for seeing this client.

Kind regards

Gugu Gumede'

Appendix E: Ethics Approval from Faculty Committee

Faculty of Humanities
Fakulteit Geesteswetenskappe
Lefapha la Bomotho

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Humanities 100.
Since 1919

29 June 2021

Dear Miss L Mateza

Project Title:	An Interpretive Study of the Experiences of Male Perpetrators of Intimate Partner Violence
Researcher:	Miss L Mateza
Supervisor(s):	Miss SB Sibanda
Department:	Psychology
Reference number:	15229344 (HUM030/0820)
Degree:	Masters

I have pleasure in informing you that the above application was **approved** by the Research Ethics Committee on 27 May 2021. Data collection may therefore commence.

Please note that this approval is based on the assumption that the research will be carried out along the lines laid out in the proposal. Should the actual research depart significantly from the proposed research, it will be necessary to apply for a new research approval and ethical clearance.

We wish you success with the project.

Sincerely,

Prof Karen Harris
Acting Chair: Research Ethics Committee
Faculty of Humanities
UNIVERSITY OF PRETORIA
e-mail: PGHumanities@up.ac.za

Interview transcript & Analysis

Initial codes

1. **Perseverance of difficult upbringing**

2. **Family background and its nature and socio-economic status**

3. **Exposure to violence**

4. **Alcohol being one of the reasons for physically harming of partners**

5. **Importance of respect**

6. **Men vs women as victims and oppression of men**

7. **Always a reason for physically harming partner**

8. **Importance of family cohesion**

9. **Relationship between man and wife in the home**

10. **Unmet needs by caregivers**

11. **Slapped**

12. **Feeling after physically harming partner**

13. **Reflection into how he feels**

14. **Infliction of physical harm on partner as demonstration of love, care and discipline**

Interviewer: Hello Sam*

Participant: Hello Gugu

I: I am a Master's in Counselling Psychology student conducting research on the experiences of male perpetrators of intimate partner violence who live in Tembisa. I would like to ask you some questions about your background as it pertains to your childhood and your relationships with your parents or caregivers, if you have been exposed to violence, the living conditions under which you grew up and your current living conditions, why you think you physical abuse your partner and how that abuse has influenced the relationship and yourself. I hope to use this information to help influence policy as well as resources and interventions to cater to men in townships with the issues they may be experiencing that influence for them physical abuse their intimate partner/s. The duration of the interview will be determined by how long you need. If a follow-up is needed, we can schedule it. Are you available to respond to some questions at this time?

P: Yes

I: Thank you. Firstly, I am going to begin by asking you some questions about where you live and your family. So, the first question is are you a resident of Tembisa?

P: Yes

I: Are you above the age of 18?

P: Yes

I: Have you ever physically harmed your intimate partner/s?

P: uuhhmm…my ex wife

I: I would like to move on to questions about the relationship you had with your parent(s)/caregiver(s) in your childhood. I would like to move on to questions about the relationship you had with your parent(s)/caregiver(s) in your childhood. During your childhood, who was your caregiver?

P: You know when I was growing up, I was raised by my uncle's wife. This is my mom's sister in law. During that I would hold on even when I could see how difficult things were at home I never thought to speak aggressively with people or treat them badly. I could see how others were growing up and I decided to be different from them. I don't want to be a bull or bully and say its because I wasn't raised by my father. I think matters like these require perseverance and for a person to know who they are. I was raised by my uncle's wife from when I was a child and when I started with school, I was raised my stepfather. Not that we were not seeing violence, we did at home and with neighbours. I would see what would be happening at home and next door and seeing that the person I call papa is acting on this way. So as a child I would say one day things would work out. With my stepfather, things

Lusanda Mateza – MA Counselling Psychology Mini-Dissertation – June 2022

were better than at my biological father's house. It was tough tough there. The things that happened there were so great that even as child I wasn't even able to understand or talk about them. Now as a adult, the answer I get is that then way my parentfather raised is maybe because that is how he was raised or that that he grew up without a father himself. Right now I am a father myself. Not that I don't hit my wife, I do. But I don't just do it randomly with no reason. If you see a man hitting a woman, there is a reason for that. I don't want to hide behind alcohol. Do you think a man would hit a woman if he is not drunk? He wouldn't. So the important thing is alcohol here. He will go drinking and come back home only to have a disagreement with his wife. I drink and when I have drunk I don't talk to much. We know that in the home, everything is controlled by the wife. So I can come back and sit down and she would shouting about my drinking in front of the children. The man should be respected the same way that he is when he his not drunk. So that in the house that there can be civil conversations. For the children to respect me, they see that from the mother. For the children to respect their mother, they see that from me. But if there is disrespect from the children it would be from the mother. I think that partners should be mentally equal regardless of age. Not so long ago there was a visitor at my house and we were drinking. My wife and our children were there too. At the end of the day we accompanied the visitor home. I ask my wife something and she responded wanting to know why I am asking her that while I am drunk. I was confused because I am asking something that happened today and I cant ask that in the presence of a visitor. We cannot show visitors our mistakes. When she responded like that and because I know that I have a short tempered. I am also not quick to raise my hand, I prefer to fight verbally. She reported me to the elders. I was even scared to raise my hand. Women are always victims, right? I have never heard of men being the victims. We can call that the nature of the African culture. I told the elders my side of the story so I often think that men are never the victim. There is never a point where men can agree to being victims or oppressed by the law. We just accept it and pretend that we don't see it and live as normally. The mother and father cannot be both crying. When you see a man hitting a woman there is a reason. We aren't talking about man and women from generations ago, where women were not able to say what they want. Now we have discuss things and the table, not the bedroom but in front if the children so that the family can talk civilly because the children will hear. People sit in the homes during the day laughing and having fun but at night behind closed doors, they fight. Never think that people are completely happy. When I was in school in primary school I failed several times and my classmates were children. The same thing happened in high school. The principal humiliated that in front of the school. I knew that being in matric would help my life. My mother sat me and brothers down only

without the sisters and asked if we had seen the way that our father had treated her. She said that she has never known her husbands respect and asked that we must be respectful. She wasn't saying that there should be balance in the home. It's impossible. The wife and husband cannot be equal there should be an imbalance. If not the one won't listen to other.

I: Do you feel that all your material and emotional needs were met by your caregivers, uncle's wife, stepfather and mother?

P: At my uncle's wife's house is actually my grandmother's house so when my mother failed at her marriage and went back house, my grandmother's house which was then my uncle's house. We mostly got love from my grandmother not in terms of things but in terms of love. We lived with my uncle's wife, grandmother and other cousins where my uncle lived in Joburg. I don't think we got our needs to our satisfaction. Peer pressure was serious where other children would have what we didn't. We would wear torn clothes. Our only clothes was school uniform and that's what we wear during Christmas. You wear uniform at school and it's the same school shorts that you play with after school. I am still hurt about that. Then at my stepfathers house, we went there when we were older. Again needs were not met, they could have been at our real father's house but knowing that he was abusive, there was no way. My father would hit everyone, our mother and us. I thought that I wouldn't hit her and treat her like a queen even if I am not king. I humble myself, listen to what she is feeling. But needs were not met.

I: Do you think your relationship with your parents/caregiver has impacted your conduct in your romantic relationship/s?

P: There are soo many differences. I wish that my father could've treat my mother like I treat my wife. What I do is that I talk to my wife when there is something wrong. I raise my hand but not like my father. I do it because there is a reason. She also can see in my face that what I have done is wrong. She can also stand up and say that I am mistaken. When there are differences it is because the one is not going the right way and the other must bring them back.

I: Were you exposed to any kind of violence during your childhood?

P: I wont talk about during childhood but now where I live where my friend is abusive and is my neighbour

I: Let us move on to talking about the incident/s where you physically harmed your intimate partner. Tell me about the first time you physical harmed your partner.

P: A call came in at night. Where we lived there were dogs that used to bite everyone even us. So my partner's phone rings and she goes outside and the dogs start barking. She comes back to tell me that she wants to go outside for the call but the dogs are barking. I

ask why she cant use the phone inside because the dogs will bite us both. She speaks on the phone and later I hear her tell the other person that she is with someone else. That's when I realise that she is busy. I ignore her and not talk to her. She starts shouting that its's not the first time someone has many relationships. I got very angry and I slapped her once but I could tell that I hurt her really bad. She didn't speak with me the entire week and I didn't care thinking that she can do whatever she wants. She's the one who cheated so I later apologized for hitting her. I promised to think first when I want to hit to avoid my hitting her. That's when I saw that talking is what helps instead of hitting your partner. I failed to do that then. I was only wrong for hitting her but she cheated.

I: How does the knowledge that you hurt your partner make you feel?

P: I feel bad but I would be filled with anger so it happens because of that. Its also to show that I am a man but by the time I relax and I calm down, I realise that I shouldn't have hit. I should have let her go. I go around pretending like everything is okay, acting like a lion but it's the person inside that is hurting. So I hit her to satisfy that anger and hurt in my heart. But after it has happened that's when I think it shouldn't have happened.

I: Do you think that you can stop physically harming your partner?

P: There are 2 sides to this. Its possible to stop but when a man says that he is stopping then it means that he doesn't care about her. When something is yours…let me make an example with an animal. When a donkey is in the field and it us going astray, it gets beaten, pulled and pushed around to get it to be on the right track. It shows that you love and care about it because you don't want mistakes to happen. Going back to a person, if I tell her that I will no longer correcting her when she makes mistakes, it means I don't care anymore that I can stop anytime. On the other hand, what happens on one side the same must happens on the other side. When you hit someone, you hit them with love, to show that when you do something I don't like. But I don't encourage Africans to hit women when they do things that they don't like. The man can talk to the woman when she does something that the man doesn't like or seek help outside. But it doesn't help to completely give up.

I: Before we end the interview, let me ask you some questions about where you live and your family. How long have you lived in Tembisa?

P: For 5 years

I: Are you currently married?

P: Yes

I: Do you have children?

P: Yes

I: Are you living with your family?

P: Yes

I: I appreciate the time you took for this interview. Is there anything else you think would be helpful for me to know about you or your experience in physically harm your partner that will help towards understanding you better and psychological interventions for you and others like you?

P: No that is all.

I: I should have all the information I need. Thank you once again. You have been of great help.

Potential Themes

1.   Perseverance during difficult upbringing

'' would hold on''

'' perseverance''

'' I would see what would be happening at home and next door and seeing that the person I call papa is acting on this way. So as a child I would say one day things would work out.''

2.   Family background and its nature and socio-economic status

'During that I would hold on even when I could see how difficult things were at home I never thought to speak aggressively with people or treat them badly. I could see how others were growing up and I decided to be different from them''

'' It was tough tough there. The things that happened there were so great that even as child I wasn't even able to understand or talk about them.''

3.   Exposure to violence

'' Not that we were not seeing violence, we did at home and with neighbours''

'' My father would hit everyone, our mother and us''

4.   Alcohol being one of the reasons for physically harming of partners

'' I don't want to hide behind alcohol. Do you think a man would hit a woman if he is not drunk? He wouldn't. So the important thing is alcohol here. He will go drinking and come back home only to have a disagreement with his wife. I drink and when I have drunk I don't talk to much. We know that in the home, everything is controlled by the wife. So I can come back and sit down and she would shouting about my drinking in front of the children. The man should be respected the same way that he is when he his not drunk''

5. Importance of respect

''The man should be respected the same way that he is when he is not drunk''

'' For the children to respect me, they see that from the mother. For the children to respect their mother''

'' But if there is disrespect from the children it would be from the mother.''

'' . She said that she has never known her husbands respect and asked that we must be respectful.''

6. Men vs women as victims and oppression of men

'' Women are always victims, right? I have never heard of men being the victims. We can call that the nature of the African culture. I told the elders my side of the story so I often think that men are never the victim. There is never a point where men can agree to being victims or oppressed by the law. We just accept it and pretend that we don't see it and live as normally.''

7. Always a reason for physically harming partner

'' I raise my hand but not like my father. I do it because there is a reason''

'' Not that I don't hit my wife, I do. But I don't just do it randomly with no reason. If you see a man hitting a woman, there is a reason for that.''

'' When you see a man hitting a woman there is a reason''

8. Importance of family cohesion

'' So that in the house that there can be civil conversations.''

'' . We cannot show visitors our mistakes''

'' The mother and father cannot be both crying''

'' Now we have discuss things and the table, not the bedroom but in front if the children so that the family can talk civilly because the children will hear. People sit in the homes during the day laughing and having fun but at night behind closed doors, they fight''

9. Relationship between man and wife in the home

'' She wasn't saying that there should be balance in the home. It's impossible. The wife and husband cannot be equal there should be an imbalance. If not the one won't listen to other.''

10. Unmet needs by caregivers

'' I don't think we got our needs to our satisfaction. Peer pressure was serious where other children would have what we didn't. We would wear torn clothes. Our only clothes was school uniform and that's what we wear during Christmas. You were uniform at school and it's the same school shorts that you play with after school. Then at my stepfathers house, we went there when we were older. Again needs were not met, they could have been at our real father's house but knowing that he was abusive, there was no way''

'' But needs were not met''

11. Slapped

'' I slapped her''

12. Feeling after physically harming partner

'' I feel bad but I would be filled with anger so it happens because of that''

'' I realise that I shouldn't have hit. I should have let her go''

13. Reflection into how he feels

'' I go around pretending like everything is okay, acting like a lion but it's the person inside that is hurting. So I hit her to satisfy that anger and hurt in my heart''

14. Infliction of physical harm on partner as demonstration of love, care and discipline

'' Its possible to stop but when a man says that he is stopping then it means that he doesn't care about her. When something is yours…let me make an example with an animal. When a donkey is in the field and it us going astray, it gets beaten, pulled and pushed around to get it to be on the right track. It shows that you love and care about it because you don't want mistakes to happen. Going back to a person, if I tell her that I will no longer correcting her when she makes mistakes, it means I don't care anymore that I can stop anytime. On the other hand, what happens on one side the same must happens on the other side. When you hit someone, you hit them with love, to show that when you do something I don't like. But I don't encourage Africans to hit women when they do things that they don't like. The man can talk to the woman when she does something that the man doesn't like or seek help outside. But it doesn't help to completely give up''