

AN EXPLORATION OF THE SUBJECTIVE LIVED EXPERIENCES OF PREGNANT  
SURVIVORS OF CYBER INTIMATE PARTNER VIOLENCE

by

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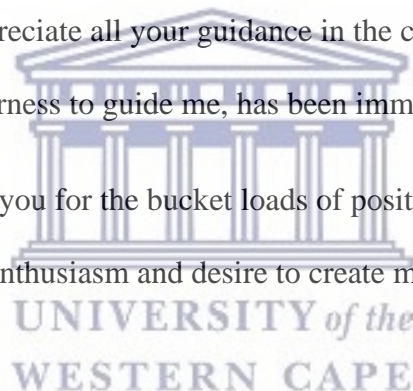
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## DECLARATION

I hereby declare that this thesis, *An exploration of the subjective lived experiences of pregnant survivors of cyber intimate partner violence*, is my own work and has not been submitted before to any other university for any degree or examination. All sources used in the thesis have been accurately indicated and acknowledged by citations and full references.



**Sabrina Maharaj**

**14 November 2022**



## ABSTRACT

Focussing on interpersonal relations, this research project aimed to investigate subjective lived experiences of the newer form of gender-based violence (GBV), that is cyber intimate partner violence (cyber IPV) in the pregnancy period of South African women - an area with scarce research output.

Ethical clearance was received from the Biomedical Science Research Ethics Committee of the University of the Western Cape. Thereafter, approval from the Department of Health's National Health Research Database (NHRD), and a Community Health Centre to conduct research at the medical facility followed.

In line with the objectives, a qualitative methodology was used to explore the subjective lived experiences of cyber IPV during pregnancy. A total of 6 participants completed the face-to-face interview process, where semi-structured interviewing was utilised to collect data. The analysis of the data yielded was completed using interpretive phenomenological analysis (IPA), in order to illuminate the lived experiences of the participants.

It was found that the experience of cyber IPV during the pregnancy period is complex and may be experienced in varied ways. Exertion of control and verbal aggression were highlighted as the primary methods in which cyber IPV was perpetrated. The emotional and psychological responses encompassed stress, fear, lowered self-worth, and lack of attachment with the pregnancy and with the baby. Removal of power and the internalisation of self-doubt were key meanings drawn from the analysis. Moreover, stress was noted to be associated with negative health effects such as altered blood pressure levels leading to multiple hospitalisations during the pregnancy.

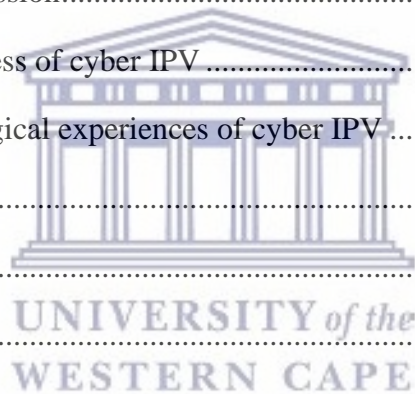
The findings yielded in the project were significant in assisting with elucidating the lived experiences of pregnant women who experience cyber IPV, therefore, contributing to the growth of this academic domain which is currently limited.



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## CHAPTER 1: INTRODUCTION

The research project is grounded on the pursuit to explore how intimate partner violence takes place in cyberspace and to gain a deeper understanding of the lived experiences of pregnant women who faced cyber IPV. To this end, the aim of this chapter is to provide the framework within which this study is located as well as the background and the rationale. Coupled with the above, the research question, aims and objectives and the significance of the project is outlined, thus, bringing the chapter to a close with the outline of the chapters presented in the project.

### 1.1 Background

#### 1.1.1 Intimate partner violence (IPV)

Environmental factors play a crucial role in pregnancy, for both the mother and the developing foetus, and often these factors are minimised or even ignored within society (McCauley, Bonomi, Maas, Bogen, & Malley, 2018). Some of these factors being nutrition, stress, access to healthcare in addition to interpersonal relations – each having a different and unique impact on every pregnancy in the world. With interpersonal relations comprising of familial and co-worker relations, as well as friendships, interdependence present in these relationships may have an impact on how one feels, thinks and behaves (Taylor, Peplau & Sears, 2006).

Intimate partner violence (IPV) may distinctly be defined as abuse occurring within the context of a romantic intimate relationship (Winstok, 2016), either current or past in nature (Román-Gálvez, Martín-Peláez, Martínez-Galiano, Khan, & Bueno-Cavanillas, 2021). The myriad of IPV manifestations, specifically, physical, sexual, psychological, emotional, economic and social, is a public health concern (Román-Gálvez et al., 2021) and

susceptibility to poor health outcomes tend to intensify (Chisholm, Bullock, & Ferguson, 2017; Mokwena & Adeoti, 2014; Baty, Alhusen, Campbell & Sharps, 2008).

Various studies have discussed national and international IPV prevalence rates with the aim of putting into perspective the pervasiveness of this type of violence. Intimate partner violence is not exclusive to one member in a relationship and bi-directionality of partner violence has been noted by researchers (Mokwena & Adeoti, 2014). In heterosexual relationships, Mokwena and Adeoti (2014), however, indicated a higher frequency of perpetration against females by their male companions. Every eight hours a woman is killed by her intimate partner demonstrating the magnitude of violence against females by their partners (Abrahams, Matthews, Jewkes, Martin & Lombard, 2012 as cited in Barnett et al., 2018); fundamentally indicative of the term 'intimate partner violence'.

Another form of intimate partner violence has developed out of the realm of the increasingly popular cyberspace. According to Wolford-Clevenger et al. (2016) and Melander (2010), cyber intimate partner violence (cyber IPV) is the utilisation of information and communication technologies (ICT's) in an intimate relationship, to monitor, control, stalk, impersonate or harass the other partner.

### **1.1.2 Cyber intimate partner violence**

Technology is ubiquitous, forming an imperative construct for communication in the twenty-first century (Flach & Deslandes, 2017), creating an intangible yet limitless space for verbal interchange. Dialogue can be instantaneous without the need to be situated in the same geographical area and the ease to which this occurs is enticing (Melander, 2010). On the constructive side of cyber communication, WhatsApp, Facebook, email and even SMSing are used for positive communications, such as emailing important information or for general banter sessions.

Whilst following the above trajectory, instantaneous interchanges without a geographical barrier promotes in some cases less inhibited dialogue (Melander, 2010). A contributing factor to this may be the lack of nonverbal communication from the sender. Likewise, the same communicative constructs may be used destructively, consequently having adverse influences on women's health outcomes and on the perpetration methods of abuse in intimate relationships.

As noted by Wolford-Clevenger et al. (2016, p. 156), cyber intimate partner violence [cyber IPV] entails “harassing, threatening, monitoring, impersonating, humiliating, or verbally abusing one's current partner through the use of technology”. Several terms have been used by researchers to capture the essence of cyber IPV. This phenomenon has been captured by authors using a variety of terms such as electronic aggression and cyber harassment (Brem et al., 2017; Wolford-Clevenger et al., 2016).

Emotional detachment derived from online communication lessens guilt behind cyber IPV perpetration and may indicate an association between dominance and physical IPV (Schnurr, Mahatmya, & Basche, 2013). For instance, cyber monitoring which entails surveillance of a partner's online activity on social networking sites (SNS's), can unveil private information, leading to confrontation and possible quarrels between partners. It may therefore be hypothesized that the multiple forms of contact IPV (physical, sexual, verbal, social) may be initiated or prompted by cyber IPV engagement (Backe, Lilleston, & McCleary-Sills, 2018; Brem et al., 2017; Duerksen & Woodin, 2019; Schnurr et al., 2013).

### **1.1.3 Pregnancy and IPV**

Pregnancy is a delicate time for women, requiring a lot of care and patience from the self and significant others. One of the reasons behind this is the healthy growth of a foetus that needs to be cared for. An additional reason according to Van Parys, Verhamme, Temmerman and

Verstraelen (2014), is the attainment of couple-based milestones through pregnancy. This period which is characterised by alterations in a women's physical, social, emotional and economical requirements create an atmosphere of vulnerability (Van Parys et al., 2014) and sense of physical and emotional dependence (Román-Gálvez et al., 2021).

Pregnancy is a particularly vulnerable time period for a woman. As noted by Van Parys et al. (2014, p. 1), "the risk factors for IPV associated with pregnancy encompass the timeframe of one year before conception until one year after childbirth". Accordingly, Román-Gálvez et al. (2021) and Van Parys et al. (2014), made a noteworthy indication stating that the prevalence of partner violence is greater than that of maternal health conditions, such as pre-eclampsia, in the perinatal period.

In some cases, the frequency and intensity of partner violence escalates during pregnancy (Turner & Honikman, 2016). It was reported by Wadsworth, Degesie, Kothari, and Moe (2018), that 22% of pregnant women have endured IPV during their pregnancy. Furthermore, poor health outcomes for the foetus and mother are influenced by the mother's exposure to IPV during pregnancy (Martínez-Galiano, 2017; Román-Gálvez et al., 2021; Van Parys et al., 2014). Preterm labour and birthing complications, low birth weight and an increased risk of miscarriage in addition to stillbirth have been associated with IPV during pregnancy (Barnett et al., 2018; Mokwena & Adeoti, 2014). Emotional and psychological experiences thus become a reality for many pregnant women. For the pregnant mother, the experience of depression, anxiety and post-traumatic stress disorder (PTSD) are exacerbated by partner abuse, lack of support (Turner & Honikman, 2016) and more specifically, by psychological violence in the form of intimidation, humiliation and isolation (Gómez-Fernández, Goberna-Tricas, & Payá-Sánchez, 2019).

Reproductive coercion and cyber dating abuse have been gaining momentum in recent times (Flach & Deslandes, 2017). Within the adolescent population, Backe et al. (2018) made notable reference to the possible association between cyber IPV and risky sexual behaviour. Here, the use of manipulation or coercion over smartphones (online behaviour) may be the potential link to sexual behaviour or coercion (offline behaviour). A finding reported by Taylor and Xia (2018), supports this potential link, “victims of sexual CPA [cyber partner abuse] have experiences of offline sexual coercion that are seven times greater than those who do not experience sexual CPA” (p. 1003). Furthermore, the lack of any contraceptive use is two to four times higher following cyber IPV perpetration (Flach & Deslandes, 2017). The synergy of online and offline behaviours is thus illuminated by the findings recorded by the researchers. It may be hypothesized that cyber IPV continues into the pregnancy period.

## **1.2 Rationale**

Cyber abuse within intimate relationships is a new expression of IPV which has developed alongside the advent of ICT's (Flach & Deslandes, 2017). With prevalence rates reaching 92%, the pervasiveness of the phenomenon is illuminated, however, exploration by researchers remains limited in this regard (Wolford-Clevenger et al., 2016). Correspondingly, Van Ouytsel, Ponnet, Walrave and Temple (2016, p.147), reported that “only scant research is available on the associations between health risk behavio[u]rs and online forms of victimization.” This statement thus creates a need to explore cyber violence.

Currently, the focal point of cyber IPV output seems to lie within the adolescent population (Flach & Deslandes, 2017), subsequently, restricting the understanding of the phenomenon taking place in other cyber using populations. In her work, Melander (2010), argues for the use of diverse populations in future studies to elucidate a better understanding of partner violence occurring over the platform of technology. Combining the notes of the authors

above, a clear need to diversify the population variables is mandatory if cyber partner abuse is to be understood in greater depth within academia.

Furthermore, during pregnancy the rates of IPV directed towards women escalate (Moghaddam Hossieni, Toohill, Akaberi, & HashemiAsl, 2017). Exploring within this population would therefore be appropriate. A need to understand and capture subjective experiences of cyber IPV is warranted as a large sum of the current published works on cyber IPV centre on quantitative research designs (Taylor & Xia, 2018).

The rationale for completing the research project was founded on these points. A qualitative design was employed to explore the emotional and psychological experiences of cyber IPV by women who are pregnant. A qualitative design permitted the meaning-making process to be given an outlet, hence stretching the field of cyber partner violence research. Furthermore, interpretive phenomenology (IPA), as the theoretical framework, created the space for the participants, who are the experts in their lives, to describe their lived experiences of cyber IPV. How the participants come to make sense of these life experiences came to the fore, which is the primary element of IPA (Eatough & Smith, 2008). This enabled a new population variable, that is pregnant women, to be explored – therefore broadening the academic field of cyber IPV. In the same light, new research areas may be derived, such as exploring the effects of cyber IPV during pregnancy on the mother-child bond post birth and establishing protective intervention programmes for survivors of cyber IPV. Moreover, the research project has endeavoured to provide a South African landscape of cyber IPV which is deficient in existing research.

### **1.3 Research question**

In light of the rationale provided for this research project, the question guiding this project was:



What are the subjective lived psychological and emotional experiences of cyber intimate partner violence (cyber IPV) of pregnant women in South Africa?

#### **1.4 Aims of the study**

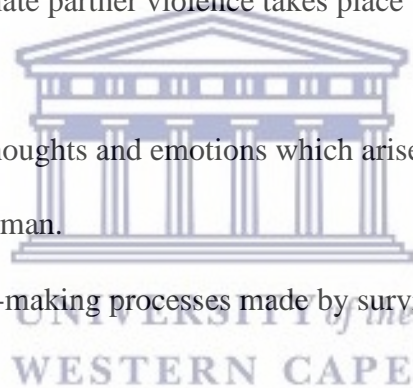
The aims of the research project were informed by the rationale. The aims were firstly to explore how intimate partner violence takes place in cyberspace; and secondly to gain a deeper understanding of the lived experiences of pregnant women who have faced cyber IPV.

The objectives which have been established from the aims and are outlined below.

#### **1.5 Objectives**

The objects were derived from the aims of the research project and have been achieved. The objectives which have been accomplished are:

- To explore how cyber intimate partner violence takes place using technology and social media.
- To explore the subjective thoughts and emotions which arise in relation to experiencing cyber IPV as a pregnant woman.
- To understand the meaning-making processes made by survivors of cyber IPV during pregnancy.



#### **1.6 Significance of the research project**

Cyber abuse occurring in intimate relationships is an emerging field of study and various aspects of the phenomenon remain unknown. This research project endeavoured to enrich the current research body on cyber IPV by illuminating the experiences of pregnant women who are survivors of cyber IPV. The emotional and psychological lived experiences explored gives insight to the journey of pregnancy in the twenty-first century, and more specifically in the South African population. As noted earlier, to the best of the researcher's knowledge, no research specifically targeting cyber IPV in pregnancy has been produced till date, thus an

original and much needed focus area has been brought into the academic field. Furthermore, this project has opened the door to understanding, advocating for, and supporting pregnant women in the digital era – one which is ever growing and bringing new challenges with it. Being able to understand pregnancy in the developing time is crucial to being able to generate support avenues and ultimately empower pregnant women facing cyber partner abuse. Putting an end to GBV starts with understanding it and how it unfolds in the South African context and this project stands at the fore of this goal.

### **1.7 Thesis chapter outline**

The research project is separated into 5 chapters, each detailing a specific element to the project. Each chapter begins with an introduction which frames the chapter, next, the core components of the chapter are explored, and lastly the chapter is brought to a close with a conclusion. The summary below provides the framework of each chapter in the project.

#### **Chapter 1 Introduction**

Chapter 1 presents the framework for the research project. In this chapter, the background and rationale of the project is discussed. The aims and objectives are thereafter presented as a directive for undertaking this project. To add to this, the significance of completing academic research within this focal area is discussed. To close this chapter, a conclusion is then provided.

#### **Chapter 2 Literature Review**

Chapter 2 presents the literature which has been published by academic researchers. Here, the review of literature is focussed on the following themes in aid of discussing the work thus far presented on cyber intimate partner violence and pregnancy. The review provides an in-depth exploration of the literature therefore setting the groundwork for comprehension of this complex phenomenon, cyber intimate partner violence.

To this end, the review commences with an introduction and then delves into the theme of intimate partner violence. A scrupulous look into the theme of cyber intimate violence subsequently ensues, with pregnancy and partner violence concluding the review. To close this chapter, a conclusion is then provided.

### **Chapter 3 Methodology**

Chapter 3 presents the methods employed to assist in reaching the aims and objectives of the research project. The chapter commences with a description of the research design, followed by a thorough discussion on the participants and sampling procedures. The data collection methods are subsequently discussed. Reflexivity and ethical considerations are then explored, with a conclusion bringing the chapter to a close.

### **Chapter 4 Findings**

Chapter 4 presents the key findings from the data collection procedure. Here, themes emanating from the interview data are recorded and described.

### **Chapter 5 Conclusion**

Chapter 5 presents a discussion on the key findings which assists with answering the research question for the project. The limitations and future research avenues are discussed. This chapter is ended with a conclusion and simultaneously the research project is concluded.

### **Conclusion**

The aim of the research project is to gain a deeper understanding of the lived experiences of pregnant women who have faced cyber IPV. To attain this aim, a clear structure detailing the background, rationale and significance of the project is discussed, thus, underscoring the need for this area of research to be completed. Furthermore, the specific aims and objectives which are guided by the research question are outlined. Chapter 1, therefore, presents the research structure which is used to frame this research project. The succeeding chapter, chapter 2, presents a review of published academic work which related to the topic of the research

project. Chapter 3 describes the methodologies employed. Finally, chapter 4 and 5 provide the findings, analysis, discussion and the conclusion of the research project.



## CHAPTER 2: LITERATURE REVIEW

In this chapter, the complexities of cyber IPV are brought forward through literature. To create a foundation to understand the nexus of cyber communication and relationships, a brief introduction on relationships leading to abuse is highlighted. Intimate partner violence is then conceptualised with a note on some of the negative outcomes related to experiences of gender-based violence.

The review thereafter builds from this literature foundation to unpack cyber mediums, the accompanying characteristics in addition to the role of technology in communication of the twenty-first century. More specifically, the types of cyber IPV follows the definition of cyber IPV in the review. Moreover, as the research project is aimed at cyber IPV during pregnancy, literature on IPV and pregnancy will be explored.

The theoretical framework is thereafter provided, with the conclusion bringing the chapter to a close.

### **A. Intimate partner violence**

#### **1.1 Types of relationships leading to abuse**

Human existence is moulded by social relationships and interactions (Taylor et al., 2006).

Intimate relations, familial and co-worker relations in addition to friendships have been the centre of the social climate, and interdependence within any of these categorised relationships indicates the bi-directionality of individual influence on thoughts, feelings and behaviours of those present in these social interactions (Taylor et al., 2006). The importance of individual welfare, namely, emotional and psychological wellbeing is to some degree dependant on the quality of social interactions.

In adulthood specifically, relationships become increasingly characterised by attachment, intimacy and love (Louw, 2009). Countless adult relationships progress to marriage whilst

others into less institutionalised relationships yet keeping love and intimacy an avid aspect of the relationship. Whilst such personal relationships, may bring a palpable sense of trust and closeness, the process of self-disclosure, such as divulging private information, thoughts and emotions, consequently, becomes a vital element of conversation (Taylor et al., 2006). In some relationships, however, self-disclosure may be used maliciously against a partner (Taylor et al., 2006) causing a myriad of negative effects. The existence of such occurrences demonstrates the presence of abuse in intimate relationships.

## **1.2 Manifestation of intimate partner violence**

Intimate partner violence (IPV) may be defined as the exertion of control over a romantic partner using physical, emotional, psychological, sexual, social and economic behaviours (Bhogal, Rhead & Tudor, 2019; Chisholm et al., 2017; Mokwena & Adeoti, 2014).

Individuals affected by IPV are susceptible to poor health outcomes relative to the immense manifestation of abuse in intimate relationships (Baty et al., 2008).

Women's health outcomes have been associated with IPV perpetration in the form of bodily injury such as punching, kicking and choking (Schnurr et al., 2013). Coercion to perform sexual acts, pressure to bear children and unwanted pregnancies have additionally been illuminated as varied ways of perpetrating sexual violence (Baty et al., 2008). Economic abuse in the form of limiting access to money or prevention of undertaking employment increase both isolation and dependency on the perpetrator enabling enhanced levels of control (Lopes, 2016). Psychological aggression, justifying or denying abusive behaviour, insults and swearing are further psychological techniques used to exert control and dominance in a relationship which may diminish levels of confidence (Lopes, 2016). McCauley et al. (2018), broaden the scope of psychological and emotional mistreatment by highlighting humiliation and threats, isolation from family and friends along with stalking or keeping tabs on the partner as the behaviours in which perpetrators engage. McCauley et al. (2018), noted the

frequency of emotional abuse in partner relationships as exceeding that of the physical manifestation of abuse. A sense of individuality to each episode of IPV perpetration is yielded due to the extensiveness of IPV throughout the world. IPV is therefore, not confined to a specific group of people nor to the cases above.

### **1.3 Health outcomes of intimate partner violence**

Experiencing intimate partner violence may be linked to immediate negative health impacts such as bodily injuries sustained from physical IPV in addition to long-term negative mental health consequences (Baty et al., 2008). Physical perpetration may be identified more frequently due to the explicit overt physical signs displayed on the body whereas psychological injury remains more covert, lessening the probabilities of recognition.

Substantial changes in mental health have been noted to ensue from experiencing physical and emotional violence in intimate partnerships and by remaining in violent relationships (Baty et al., 2008). Often perpetrators justify and leave a sense of responsibility on the victim by alluding to the victim having provoked or initiated the abusive episode, therefore leaving behind feelings of fear, self-blame and a diminishing sense of self-image (Rasool, Vermaak, Pharoah, Louw & Stavrou, 2002). “Subsequently, a battered women lives in realistic fear of further beatings, rape, injury and possible death, and the repeated abuses may cause her to battle feelings of trauma-related guilt.” (Baty et al., 2008, p. 43). Depression, anxiety, panic attacks and post-traumatic stress disorder (PTSD) present in many cases as the psychological consequences of having endured IPV; with women having higher risk of experiencing suicidality and related substance abuse (Baty et al., 2008).

## **B. Cyber intimate partner violence**

### **2.1 Understanding cyber communication**

Prior to exploring abuse occurring in cyberspace, it is essential to understand what cyber communication is. Over the last few decades, futuristic communication ideas became a reality ultimately steering human engagement to uncharted waters through the advancement of technology. A new array of daily human engagement was established as a result of technological products such as computers and cellular phones. Accordingly, Draucker and Martsof (2010) furthered this statement by asserting that the revolutionization of the social scene has been due to the progression of electronic technology such as the internet and social networking sites (SNS).

The transformative advantage to these communicative technologies is twenty-four-hour accessibility by the user (Festl, Reer, & Quandt, 2019; Howard, Debnam, & Strausser, 2019) and this characteristic may be viewed diversely by different schools of thought. Howard et al. (2019), noted that the alluring nature of ceaseless communication takes place through digital platforms which include Snapchat, social media, text messaging and email. Lucero, Weisz, Smith-Darden and Lucero (2014) extend this list of social media by highlighting sexting and video chatting as part of the list of socially interactive technologies (SIT's). Such SIT's are accessed through cell phone and computer devices. According to Lucero et al. (2014), social networking and texting are deemed as the most popular forms of SIT's. For an intimate relationship, continuous contact throughout the day may be advantageous by deepening relationship intimacy. Moreover, the physical distance in a long-distance relationship may be eliminated by technology's continuous service (Brem et al., 2017). The above highlights the non-ceasing availability of cyber platforms through which communication can manifest, but what exactly is cyber communication?



Cyber communication may thus refer to any communication channelled through SIT's or technological devices. Cyber exchanges continuously prove to be socially benefitting as it ignites creative ways of social engagement. Noting these benefits are consequently essential. Flach and Deslandes (2017), noted that whilst shaping communication of the twenty-first century, technology proved that communication channels could span across space and time (Schnuur et al., 2013). This point highlights that the change in characteristics of face-to-face or real-time contact transformed to include an intangible and limitless space for verbal interchange. Geographical location as a consequence became a non-essential factor for communication to occur, making cyber communication increasingly appealing to the user (Melander, 2010).

The process of understanding cyber interactions is influenced by the lack of physical boundaries. Invisible boundaries create the landscape for equalising the social positioning of those communicating. According to Hellevik (2019), power dynamics, status and authority may be exterminated as social signs, for instance titles and clothing, hold little to no place in online communication mediums. Accordingly, psychosocial social development in the form of self-esteem and positive relationship building become beneficial factors borne out of invisible communication.

Draucker and Martsolf (2010) and Gurumurthy and Menon (2009) maintain that new technologies aid in the redefinition in addition to the transgression of social boundaries. Here, the establishment of relationships and new-found networks are navigated (Gurumurthy & Menon, 2009) and this may be done in the absence of the real identities. According to Suler (2004), anonymity is a factor for creating a detachment between personal identity and online cyber behaviours (Hellevik, 2019). By holding an anonymous title or a self-created pseudonym on digital platforms, more introverted individuals may enter a new social scene

without the tension of revealing certain aspects of themselves. Anonymity therefore compliments cyber invisibility.

Another interesting aspect is the loss of visual cues in cyber communication. Posture, facial expressions, and gestures which provide extensive information between the sender and receiver in face-to-face conversations are now however lost through the channel of cyber space (Melander, 2010). Resultantly, new grounds of conversing and interpretation are yielded due to the dissolution of physical boundaries. Symbolism in the form of emoticons and shorthand present as sources of innovative ways to capture certain emotions and bodily gestures that usually present in face-to-face conversations.

With user invisibility over digital platforms, body language which is highlighted above by Melander (2010) remain unseen. This creates the space for misrepresentation and incorrect interpretation by the user as tone and other visual cues remain concealed (Hellevik, 2019). The user is then at liberty to attach their own characteristics and qualities to messages received. Hellevik (2019), refers to this phenomenon as ‘solipsistic introjection’, where features, such as the tone of the person that one is communicating with are based on the receiver’s expectations or needs of the communication. Consequently, personal interpretation and understanding play a pivotal role in the meaning-making process of online exchanges.

Another significant advantage of online engagement is the ability to reply to messages at a later time which is often contrary to the manner in which real-time conversations occur. For instance, a receiver of an email or WhatsApp message may avoid communication by delaying the reply to the message by a few hours or days. Asynchronicity is the term used to describe the practice of avoiding a response to the sender of the communication (Hellevik, 2019). One thus has the power to control communication by either pursuing, continuing, or limiting it.

Cyber platforms have greatly altered the methods and mediums of human communication therefore holding an eminent position (Hellevik, 2019) in daily relational activities (Chen, 2019). Such platforms have also grown to comprise of more than just communication activities. Popular searches of other content, for instance animals and astronomy, may also be located on various social media platforms. Draucker and Martsolf (2010) further this point by noting that educational and recreational spheres may be positively impacted by using SIT's. As evidenced, the domain of digital communication is highly attractive as it brings about a palpable sense of communication in real-time with the exclusion of real-time features. This can clearly be seen in the manner in which social networking sites (SNS's) are utilised.

With reference to relational activities, certain online activities accompany online behaviour. Firstly, self-expression is seen through making a personal user profile, posting of photographs and videos, as well as searching for other contacts or content (Chen, 2019). Secondly, the exchange of messages between users commences (Chen, 2019). All of these activities, according to Chen (2019), constitute imperative features in the creation and maintenance of relations. Hellevik (2019) and Howard et al. (2019) correspondingly acknowledge the developmental and maintenance aspects of social bonding that online engagements provide.

To further the understanding of the role of technology, Stephenson, Wickham and Capezza (2018) explain that communication and relationships may strengthen over social media platforms such as Facebook, Instagram and Snapchat. Baker and Carreño (2016) found that Facebook posts and text messages were the leading methods of technological use in their sample, with Instagram and Tumblr presenting less frequently. A further discovery in their adolescent sample was how technology was made use of – that is, to either initiate or end relationships (Baker & Carreño, 2016). More simply, however, Baker and Carreño (2016) and Howard et al. (2019) state that technologies are often used for basic daily interactions.

Regularly, such basic exchanges comprise the initial stages of getting to know a potential dating companion (Baker & Carreño, 2016).

Whilst many of the features of cyber communication noted above bring to the fore the benefits of placing oneself in the cyber social scene, it is necessary to understand how this space can be misused. Disadvantages accompany the use of these services when cyber behaviours comprising of stalking and perpetual intimidation exist in an intimate relationship (Brem et al., 2017). An indication of similitude between benefits and risks of internet facilitated engagements (Fernet, Lapierre, Hébert, & Cousineau, 2019; Kopecký, Sztokowski, & Krejčí, 2012). Violence in intimate relationships is, therefore, multifarious with the varied methods of cyber intimate partner violence highlighting this characteristic.

## **2.2 Defining of cyber intimate partner violence (cyber IPV)**

Cyber abuse is an emerging form of intimate partner violence (Brown & Hegarty, 2018; Stephenson et al., 2018) which has been gaining recent academic attention (Bhogal et al., 2019). A complete enumeration of terms used to label cyber IPV is vast, thus varied terms have been used by researchers to capture the essence of cyber IPV. Cyber aggression, electronic aggression, technological aggression, electronic surveillance, cyber stalking, online harassment, cyber harassment (Brem et al., 2017; Wolford-Clevenger et al., 2016) and digital dating abuse (Brown & Hegarty, 2018) form the list of terms used frequently by academics to mark the presence of the cyber IPV phenomenon in academia.

Wolford-Clevenger et al. (2016), define cyber abuse as the act of abuse occurring over technological devices towards one's partner. The term, digital dating abuse (DDA), equally highlights the use of electronic-based technology to perpetrate cyber abuse in a dating relationship (Bhogal et al., 2019; Brown & Hegarty, 2018). Noted more specifically however is the concern of an "electronic intrusion in romantic relationships", according to authors

Bhogal et al. (2019, p. 1) when exploring the realm of digital abuse. For such intrusions to occur, technology in its varied forms is used. For instance, the progression of technology introduced cellular phones and electronic correspondences as communicative methods (Wolford-Clevenger et al., 2016). Subsequently, social networking sites (SNS's) began to broaden virtual communicative sites. According to Bhogal et al. (2019), social media platforms and social messaging applications found on devices are used when cyber abuse takes place; thus leaving space for abusive activities to commence.

Harassment, verbal abuse, impersonations, and intimidation now take place both directly and indirectly over digital platforms (Bhogal et al., 2019; Brown & Hegarty, 2018); with virtual monitoring and controlling activities being supported by technological devices, more popularly over cellular phones (Baker & Carreño, 2016; Melander, 2010). In their review, Howard et al. (2019, p. 775), pointed out that the nexus between virtual abuse, stalking and exerting control within adolescent romantic relationships, and the exploitation of “internet-enabled devices” aid such forms of cyber IPV. Taylor and Xia (2018) provide evidence in their systematic review on cyber partner abuse by extending the explanation of cyber IPV. Cardoso, Sorenson, Webb and Landers (2019) and Taylor and Xia (2018) explicitly stated that sharing photographs or videos of a personal nature without permission, in addition to, posting demeaning or threatening messages on social networking sites reveal online behaviours associated with the perpetration of cyber IPV. Cyber IPV, therefore, encompasses a wide assortment of methods to perpetrate intimate partner abuse.

Exploring these examples indicate that psychological abuse towards intimate partners becomes a greater reality and this is generated and exacerbated through technology (Stephenson et al., 2018). Although many of these forms of intimate partner violence have been identified within situations in direct contact, these can be done virtually as evidenced above. Exploring, the scope of cyber IPV is thus a necessary avenue to undertake as this will

assist in having a more holistic understanding of the more recent form of intimate partner violence, cyber IPV.

## **2.3 Types of cyber IPV perpetration**

### **2.3.1 Monitoring and controlling**

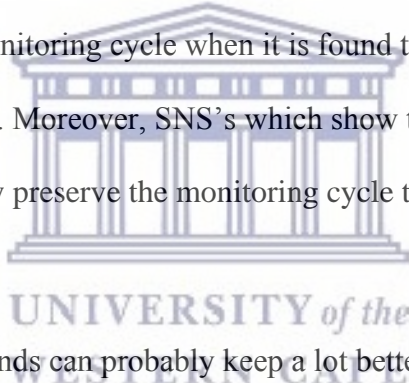
Eliminated geographical borders and boundaries in the current social sphere (Flach & Deslandes, 2019) set the space for a sense of immediacy when communicating digitally such as over social media platforms (Howard et al., 2019). The creation of incessant communicative opportunities additionally establishes “pressures to stay connected all day long and through the night, too” as reported by Howard et al. (2019, p. 785). Whilst this may be an incredibly attractive feature of cyber communication - that is, instantaneous and continuous access - on the contrary this creates an opening for monitoring activities to ensue (Hellevik, 2019). According to Lucero et al. (2014), continuous cyber exchanges provide a fertile ground for psychological abuse to be perpetrated. Escape from the abuse is consequently hampered (Hellevik, 2019) with a clear indication that intimate partner violence continues online by the use of technology (Baker & Carreño, 2016). A “digital leash” as highlighted by Howard et al. (2019, p. 787). Hellevik (2019) noted in his work that acts of monitoring and controlling behaviours by a partner varied, for instance, consistently phoning the partner, reading the partners text messages, or even listening to voice messages left on the partner’s phone. Melander (2010), reported in her work that control behaviours were exerted in communication circles, where partners would dictate those to whom a partner could talk to.

#### **2.3.1.1 Surveillance systems/applications**

Another form of controlling behaviour that can continue online is to monitor the location of a romantic partner (Melander, 2010). Draucker and Martsolf (2010) and Howard et al. (2019) pointed out that seeking out a partner’s whereabouts or following actions are further forms of monitoring behaviour. Here, one would make use of online tools to engage in relationship

surveillance. On this note, Cardoso et al. (2019), identified computer programmes and global positioning systems (GPS) as tools to engage in such monitoring and tracking behaviours towards women in personal relationships. Moreover, other cellular phone applications powered by Android and iOS systems (Flach & Deslandes, 2019) in addition to sleep monitoring applications have been reported as digital surveillance tools (Shephard, 2016). FlexiSpy software facilitates monitoring behaviour as it permits recording of telephone calls, tracking of location in addition to monitoring of social networking activities (Cardoso et al., 2019). Features of an application, such as the FlexiSpy software, indicate the potential of both psychological and emotional abuse to be inflicted on a partner.

Coupled together, a range of tracking methods which are maintained by technological applications support cyber abusive behaviours. Baker and Carreño (2016) stated that tracking SNS's would perpetuate the monitoring cycle when it is found that the partner is engaging online with the opposite gender. Moreover, SNS's which show the time that a user was last using the application potentially preserve the monitoring cycle through digital surveillance (Melander, 2010, p. 265):



“Boyfriends and girlfriends can probably keep a lot better tab on each other with Facebook and MySpace nowadays than they ever could before, unless they’re literally with them all the time. But now, I mean, you’ve got a time thing that says exactly what time you talked to who and whatever.”

### **2.3.1.2 The telephonic device and trust**

In the process of establishing trust in a relationship, sharing personal data can be commonplace and a way to connect with and build an understanding of one another. Amidst the trust that is created, opportunities of more negative feelings can arise. The lack of trust can consequently result in technology-generated monitoring when feeling distrust or jealousy

within the intimate relationship (Baker & Carreño, 2016). These feelings feed cyber IPV behaviours as reported by Lucero et al. (2014, p. 484):

“I’ll steal my girlfriend’s phone or she’ll steal mine once in a while and look and see a text from another girl.”

Jealousy in this regard could often be aggravated when text messages were from the opposite sex, thus resulting in more cyber IPV behaviours, such as deleting a partner’s messages before they had read it (Lucero et al., 2014).

### **2.3.1.3 Password sharing and trust**

Another crucial element to trust is feeling at ease in an intimate partnership. To establish trust in the age of digital communication innovative ways and justifications may present itself.

Some couples may feel more at ease in a relationship when sharing a device or even important passwords. In some relationships though, these practices may not be condoned nor accepted. As evidenced in their study, Baker and Carreño (2016) had a participant who shared that her boyfriend would examine her cell phone to see who she would communicate with via text messages and that he had additionally kept track of her location with a downloaded application. Here, the element of monitoring behaviours are being highlighted.

With reference to sharing personal information, passwords may be exploited for one’s own agenda. A participant from the study of Lucero et al. (2014, p. 484), shared the following excerpt:

“... if you know your girlfriend has your password or you have your boyfriend’s password, they might delete your messages before you could get on, and they might change their password and then you don’t know it.”

Important communications would as a result be lost in circumstances like these above.

Subsequently, interpersonal conflict may be marked as an outcome of such activities



presenting in intimate romantic relationships. Undoubtedly, behaviours of this nature have the potential to have an immense negative effect on a women's wellbeing.

### **2.3.2 Stalking**

SNS's have become important tools in daily communiqué. Chen (2019, p. 80), highlighted its significance by stating that "SNSs are essentially a social platform where users seek and refine interpersonal attachments by managing relationships." Within the context of a personal relationship, such an application could be very helpful in relationship preservation. Users of the Facebook platform can update their relationship status, thus officialising their relationship (Howard et al., 2019). In contradiction to the benefits of virtual communication, cyber stalking may occur in spaces where private becomes public. According to Melander (2010), recurrent forms of intimidation or harassment taking place by means of technology and causing a person to become worried, thus constitutes cyberstalking. Accessing personal material without permission and posting aggressive messages on virtual platforms present evidence of cyberstalking activities (Melander, 2010). Facebook is an online medium where private chatting is done over public chatrooms (Gurumurthy & Menon, 2009) thus making it a medium for cyberstalking to commence.



#### **2.3.2.1 Facebook stalking**

Lyndon, Bonds-Raacke and Cratty (2011, p. 711), described "Facebook stalking" as the incessant monitoring of online-based social information. These stalking behaviours consist of perusing uploaded photographs and posted messages as well as checking statuses and have the potential to lead to more severe forms of cyber IPV, even towards an ex-partner (Lyndon et al., 2011). Lyndon et al. (2011, p. 711), referred to "cyber obsessional pursuit" as a cyberstalking-type behaviour used to obsessively pursue or pressurise one for intimacy. Due to the incessant access to Facebook and other SNS's, cyber stalking can occur at all hours of the day or night.

### **2.3.2.2 Negative health outcomes of cyber stalking**

To this end, giving credence to outcomes linked to cyberstalking activities is thus essential as it is a pervasive phenomenon currently occurring. Cyberstalking experiences (Brown & Hegarty, 2018) and other cyber IPV tactics are potentially associated with negative health outcomes for the victim (Cardoso et al., 2019; Draucker & Martsof, 2010). On this note, former president of the United States of America, Barack Obama, equally emphasized that online communication mediums are used as tools for control and stalking, with distressing effects on the individual (Howard et al., 2019). Thereupon, Cardoso et al. (2019), Brown and Hegarty (2018) and Draucker and Martsof (2010), articulated depression and anxiety as part of the damaging consequences of digital perpetration.

### **2.3.3 Harassing and aggression**

As stated earlier, cyber IPV encompasses a wide range of behaviours. Particularly, aggressive behaviours and harassment present some of the types of intimate partner violence that filter into electronic abuse (Bhogal et al., 2019; Brown & Hegarty, 2018; Baker & Carreño, 2016; Lyndon et al., 2011 & Draucker & Martsof, 2010). According to David-Ferdon and Hertz (2007, p. S2), “any type of harassment or bullying, including teasing, telling lies, making fun of, making rude or mean comments, spreading of rumours, or making threatening or aggressive comments, that occurs through e-mail, a chat room, instant messaging, a Web site, or text messaging” constitute electronic-based aggressive conduct (Draucker & Martsof, 2010, p. 134). Within romantic relationships, however, this may be labelled as lived experiences of cyber IPV.

#### **2.3.3.1 Telephone calls and voicemails**

In one study, a participant stated that she had received up to 80 telephone calls from her partner in a day, whereas another female participant claimed that she would receive homicidal threatening voicemail messages if she did not return her partners telephone calls

(Draucker & Martsof, 2010). The latter had led to persistent harassment although a restraining order was made and eventually her partner had resorted to setting her car alight (Draucker & Martsof, 2010). Here, a clear indication of online partner violence leading to offline or in person violence is illustrated.

Further, excerpts from participants encapsulates the manner in which harassment was executed and how this varied from case to case. In their findings, Draucker and Martsof (2010, p. 139), had two different female participants share the following voicemail messages which were left by a boyfriend:

“F\*\*\* you, F\*\*\* you. I hate you. You are a f\*\*\*ing waste of time. You are a f\*\*\*ing waste of a human being. You’re so f\*\*\*ing worthless. I wish you would just die.”  
and,

“If you don’t return my phone calls, I will hunt you down. I will start at your house, and I will work my way from there.”

Verbal abuse as noted in these cases show how cyber mediums can be utilised to belittle, berate, and intimidate partners who are not in the same place at the same time. That is, the elimination of geographical barriers in social activity. Denigrating behaviours, as described above produce more than just verbal forms of abuse, but also psychological abuse for the victim (Stephenson et al., 2018).

### **2.3.3.2 Websites**

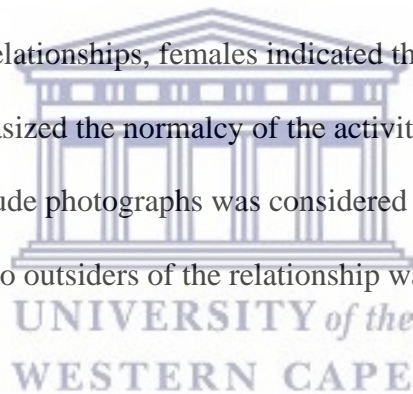
Harassment and cyber aggression are not limited to voicemails, and this was further described by more participants. Another participant in their study had explained how websites can be used maliciously:

“The teen ex-boyfriend of one woman had developed a website titled “I hate [the participant’s name]” and invited other students in their high school to post hateful messages about her.” (Draucker & Martsolf, 2010, p. 139).

Not only are private relationship disputes made public (Gurumurthy & Menon, 2009) as in the case above, the extent of the harassment is intensified (Lyndon et al., 2011).

### **2.3.3.3 Sexting**

Sexting is another activity that is prevalent in electronic communication (Lucero et al., 2014) and is often discussed when exploring the role of technology in courting relationships (Baker & Carreño, 2016). According to Kopecký et al. (2012), the act of sexting involves the use of the electronic media, such as Facebook, and cellular telephones to share or solicit text messages or photographs which are of a sexual stance. In their study, Lucero et al. (2014), reported that within romantic relationships, females indicated that sexting was a private activity whilst the males emphasized the normalcy of the activity. The males further pointed out that even though sending nude photographs was considered appropriate, redistributing these sexting communications to outsiders of the relationship was indecorous (Lucero et al., 2014).



A male participant had shared that a female “sent a picture to her boyfriend, and as soon as he got the picture he broke up with her and sent it to a whole bunch of people.” (Lucero et al., 2014, p. 486).

A nexus between harassment and sexting is seen to emerge from cyber interactions within intimate relationships. Here, a 15-year-old female was being pressured to send more sexually explicit images to her partners friend who had received a photograph of the female’s breast (Hellevik, 2019). The female stated that the image was additionally posted onto a website (Hellevik, 2019). As sexting activities occurred online, this later transferred into offline

abuse. The female disclosed that the trajectory of her relationship changed as she was eventually coerced into sexual intercourse by her partner (Hellevik, 2019). Pressure to sext with a partner is therefore experienced, and more specifically experienced by females (Brown & Hegarty, 2018). Sexting coercion in both virtual and offline instances were thus linked together as abuse (Hellevik, 2019), promoting the possibility that online perpetration eventually leads to offline abusive behaviours.

#### **2.4 Minimising the seriousness of cyber IPV**

Abusive partners can however use manipulation as a method of control by justifying the above surveillance-like behaviours in a relationship. Flach and Deslandes (2019), highlighted this by stating that monitoring activities are often excused by stating that it is evidence of care, love and safety within a relationship. Monitoring is thus being evaluated as an innocuous activity (Baker & Carreño, 2016). These reasonings can be very persuasive and lead to minimising the seriousness of the technology-driven partner violence.

In their sample, Lucero et al. (2014), found that women identified monitoring as a pivotal aspect of a relationship, where fake profiles would be created to observe social media activities of their partners. Likewise, these behaviours were normalised as fundamental elements of adolescent intimate relationships, thereby minimising the seriousness of the power exerted in the relationship (Hellevik, 2019). Subjective interpretation accordingly becomes essential influential factors when exploring cyber IPV, accentuating personal perception as key.

Context similarly presents as an influential factor in the realm of understanding cyber IPV. A playful context was highlighted by victims of cyber partner abuse as the setting in which perpetration would commence (Brown & Hegarty, 2018). Here, identifying a playful context minimises the negativity imposed by cyber IPV. Whilst SIT abuse has been noted as having

high prevalence rates (Lucero et al., 2014), a frequency of only one or two episodes may not necessarily be considered as abuse. Context, subjective interpretation, and frequency hence plays a role in understanding the significance of cyber IPV in intimate relationships.

## **2.5 Emotional and psychological experiences of cyber IPV**

Flach and Deslandes (2019, p. 2), attempt to provide a justification around public hypervisibility by describing what they refer to as the “age of exhibitionism”, which describes the constant desire to divulge personal information publicly in the pursuit of personal promotion. With the feature of cyber hypervisibility and exhibitionism comes a large audience. Accordingly, online violence is depicted as more damaging to an individual than face-to-face violence owing to the large number of online spectators and anonymity (Cardoso et al., 2019; Cava, Tomás, Buelga, & Carrascosa, 2020).

For women specifically, safety and wellbeing implications arise from technological innovation with 75% of women experiencing cyber hostility (Cardoso et al., 2019). Picard (2007) noted that teenagers participating in the Liz Claiborne study agreed that abuse occurs over SIT’s more easily and may be kept undisclosed – this may be considered as psychological abuse (Lucero et al., 2014). On the contrary to this finding, Weisz and Black (2009), found that teenagers do not necessarily consider acts of electronic abuse as psychological abuse (Cava et al., 2020; Lucero et al., 2014).

The definition for psychological abuse is multidimensional and may be understood in varied ways. “The Centers for Disease Control (2012) describes psychological abuse as verbal remarks that diminish the receiver’s sense of self-worth.” (Lucero et al., 2014, p. 479). Adding to this definition, Stephenson et al. (2018), acknowledge that threats, isolation and domineering behaviours form components of psychological abuse. As such, these behaviours

which have been present in in-person communication, are now existing within cyber  
communique.

According to Bhogal et al. (2019), negative health outcomes prevail within the context of  
cyber IPV. More specifically, psychological distress, anxiety (Fernet et al., 2019) and trauma  
have been identified as the some of the negative outcomes of psychological abuse  
(Stephenson et al., 2018). Brown and Hegarty (2018) and Draucker and Martsolf (2010), add  
anxiety and depression to this list of outcomes.

### **2.5.1 Anxiety**

Anxiety has been significantly associated with victims of cyber IPV (Brown & Hegarty,  
2018; Cardoso et al., 2019; Cava et al., 2020; Draucker & Martsolf, 2010; Fernet et al., 2019;  
Stephenson et al., 2018). According to Adwas, Jbireal and Azab (2019, p. 580), “Anxiety,  
which may be understood as the pathological counterpart of normal fear, is manifest by  
disturbances of mood, as well as of thinking, behaviour, and physiological activity.” The  
experiences of anxiety as the outcome of digital IPV perpetration have been articulated by  
various authors. Borrajo and Gamez-Guadix (2016), in their study, indicated that higher  
levels of the victim’s anxiety are related to cyber control by their intimate partners. The  
element of control or force thus appears to have a key role in the experiences of cyber partner  
violence.

### **2.5.2 Fear**

Stephenson et al. (2018), had highlighted in their review, that the experience of psychological  
abuse is more challenging to overcome than episodes of psychical abuse. This was  
particularly true in the study done by Lindsay et al. (2016) (Fernet et al., 2019). In their study,  
Lindsay et al. (2016), found that undergraduate females reported fear as a result of their  
experiences of cyber IPV and that fear was further associated to the risk of developing

depression (Fernet et al., 2019). Here, it becomes evident that mental health can be negatively impacted by violence and that links between different outcomes become illuminated.

### **2.5.3 Depression**

Depression is characterised by a low mood, anhedonia, disturbed sleep patterns, low energy and a change in eating habits (Bhowmik, Kumar, Srivastava, Paswan, & Dutta, 2012).

Worthlessness and poor concentration also form part of the symptoms of depression.

According to Bhowmik et al. (2012), women are more susceptible to experience depression making depression a deleterious mental disorder. With reference to digital violence, authors such as Brown and Hegarty (2018); Cardoso et al. (2019); and Draucker and Martsof (2010) noted in their reviews that depression was largely associated to the experience of cyber IPV.

Although these studies did not go in depth with unpacking this relationship, the link was highlighted. In a study done by Cava et al. (2020), a depressive mood was positively related to cyber IPV perpetration. Here, the teenage girls in the study reported greater depressive moods a result of the experience of cyber IPV than the teenage boys (Cava et al., 2020), which echoes Bhowmik et al. (2012) report on gender differences with depression. Another key point is that severe cases of depression can lead to suicide. Annually, 850 000 deaths are attributed to severe cases of depression (Bhowmik et al., 2012).

### **2.5.4 Suicidality**

Youth suicides stemming from accounts of cyber IPV were reported in the Americas and Europe (Fernet et al., 2019). This astounding consequence of cyber partner violence was also noted by Brown and Hegarty (2018) as a result of suicidal ideation; and from Draucker and Martsof (2010) as a result of suicidal attempts. Interestingly, Singh, Smith, Raba and Keller (2016), made the association between IPV and suicidality and they further indicated that women who were victims in their teenage years were more likely to experience suicidality. This displays the compromised mental health of victims through life stages.



### 2.5.5 Jealousy

Jealousy may be described as an internal state which occurs when one perceives a threat against an interpersonal relationship by a third person (Chung & Harris, 2020). Within intimate relationships, jealousy may present itself as a factor motivating GBV perpetration. The feeling of jealousy within romantic relationships is common and may be aggravated when digital interactions with the opposite sex occur (Hellevik, 2019).

Alternatively, possessiveness became a factor initiating cyber violence. In two excerpts from Baker and Carreño (2016, p. 314), jealousy is shared by participants:

“Adele: It [cell phones] was a really big deal in the relationship. He sort of tried to give me the impression that he owned me. So, when we would meet he would actually go through my cell phone to see who I text.”; and

“Malia: He’s really jealous and gets really overprotective. He asks for my password... to see who I am talking, chatting with.”

Moreover, jealousy was alleged by some females who experienced their partners sending defamatory statements over SNS’s:

“And then he started sending ... snaps to me on Snapchat, about me being a whore ... that was following those guys [on social media] and ...it was just jealousy I think, and that was completely insane, the worst of all was that I hadn't done anything to make him jealous (laughs), just following some guys on Instagram ...” (Hellevik, 2019, p. 182).

In the above excerpt, cyber aggression is seen through electronic harassment. According to Baker and Carreño (2016), technology plays a twofold role in relationships, that is, jealousy is caused by cyber interactions and jealousy drives cyber monitoring in intimate relationships. An example provided by Baker and Carreño (2016), was that some partners would

deliberately hide their relationship status on their online profiles and this would create a sense of jealousy for the other partner. Consequently, perpetration of online partner violence would increase and perpetuate the cycle of jealousy. All of the above examples demonstrate different cases where jealousy seemed to influence cyber activities by romantic partners.

In the literature, psychological and emotional aspects stemming from experiences of cyber IPV are limited. There is a predominance of listing the negative health outcomes in the studies, with only a few studies providing more background to these aspects. For instance, self-esteem (Cardoso et al., 2019) and isolation (Fernet et al., 2019; Stephenson et al., 2018) were listed however not discussed as effects of cyber IPV. A dearth of information pertaining to emotional and psychological aspects of cyber IPV therefore appears to prevail in the current academic field.

### **C. Pregnancy**

IPV specifically, is a public health challenge (Alhusen, Lucea, Bullock, & Sharps, 2013; Román-Gálvez et al., 2021), with up to 90% of GBV cases being attributed to IPV cases (Osifo, Fawole, Adejimi, & Sigbeku, 2016). Elevated risk of violence by intimate partners occurs during pregnancy (Janssen et al., 2003).

For pregnant women, violence from intimate partners become a major concern and can yield direct and indirect effects for women. This concern is owed to the alterations in the women's needs, that is, physical, social, emotional and financial needs which exacerbate vulnerability for child-bearing women (Alhusen et al., 2013). Furthermore, GBV in pregnancy may have serious implications for the general health of the woman, her reproductive health and for the developing foetus (Antoniou, 2020).

Specifically physical, psychological and emotional spheres of pregnant women have been reported to be adversely affected by partner violence. Bleeding in the first 6 months of

gestation, infections and hypertension have been noted as some of the adverse physical effects of experiencing IPV during pregnancy (Alhusen et al., 2013). Anxiety, post-traumatic stress disorder (PTSD), suicide and depression comprise the mental health impacts of partner violence (Chisholm et al., 2017).

### **3.1 Substance use and pregnancy**

Co-occurrence of IPV and substance use has been identified. According to Alhusen, Ray, Sharps and Bullock (2015) and Antoniou (2020), women who experience partner violence during gestation may end up harming themselves and their foetuses with increased usage of cigarettes, alcohol and narcotics. Substance use may be perceived as a coping mechanism and thus result in usage of it. In the study by Martínez-Galiano (2017), pregnant women in Southern Spain, had continued use of cigarettes throughout their pregnancies. As such, poor pregnancy outcomes and dire health concerns for the foetus potentially arise (Alhusen et al., 2013). Foetal alcohol syndrome is one of these outcomes.

Whilst substance use may be initiated as a coping mechanism whilst pregnant, substance use preceding the pregnancy may additionally influence usage during the pregnancy. A key finding by Janssen et al. (2003), indicated that substance use prior to pregnancy exacerbates the risk of partner abuse whilst pregnant. Furthermore, reduction of substance use in the pregnancy period appears to become challenging when exposed to intimate partner violence (Janssen et al., 2003). Continued use of substances may thus ensue, causing medical challenges for the expecting mother and developing foetus.

### **3.2 Stress and pregnancy**

The experience of IPV may lead to stress being experienced by the victim. In pregnancy, stress may be closely linked to the psychological wellbeing of pregnant women and on the pregnancy itself. It was suggested in the work of Alhusen et al. (2013), that the stress

associated with the experience of IPV alters the corticotrophin-releasing hormone which in turn could stimulate early labour. Similarly, Valladares et al. (2009) found that low birth weight and premature birth were outcomes for Nicaraguan women who had elevated cortisol levels which were related to experiences of IPV whilst pregnant (Alhusen et al., 2013).

### **3.3 Depression and pregnancy**

Halim et al. (2018), explains perinatal mental disorders as, mental disorders which occur during pregnancy and continue for up to 12 months following birth. According to Pellowski et al. (2019), approximately 11.9% of women experience perinatal depression. Depression within the perinatal period is therefore a common challenge faced by pregnant women. Another factor to be added to this statistic is the effect of GBV on the mental health of pregnant women.

A positive correlation between partner violence and depression was revealed in the study by Pengpid, Peltzer, McFarlane and Puckpinyo (2016). As with the bi-directionality between substance use and IPV noted by Janssen et al. (2003), Pengpid et al. (2016) indicated that a similar relationship between depression and IPV perpetration may exist. Prevailing depression may therefore increase probability of being a victim of IPV whilst pregnant. Depression during pregnancy has additionally been linked to postpartum depression (Halim et al., 2018), thus showing the pervasiveness of these experiences after the pregnancy.

### **3.4 Pregnancy and child wellbeing outcomes**

Various factors may influence pregnancy outcomes. According to Chisholm et al. (2017) and Martínez-Galiano (2017), an amplified risk of pregnancy outcomes prevail when pregnant women experience IPV. Increased rates of preterm labour and low birth weight of the infant have been associated with perpetration of IPV against pregnant women (Chisholm et al., 2017; Halim et al., 2018; Janssen et al., 2003). Martínez-Galiano (2017), found that this was

particularly true as the rates of preterm birth and low birth weight were higher in women who had likely experienced IPV, in his study.

For the infant, reduced cognitive development and psychomotor development in utero and post birth have been associated with maternal depression (Pellowski et al., 2019). For instance, postpartum depression increases the risk of a hindered mother-child attachment process which may therefore filter into caregiving activities as well as child development (Halim et al., 2018). Mezzavilla, Ferreira, Curioni, Lindsay and Hasselmann (2018), furthers this point by stating that the quality of maternal care may as a result be greatly influenced by violence perpetrated by an intimate partner.

Consequently, child rearing responsibilities may be affected when IPV perpetration has been experienced. The inability to care for the self and for their babies may be strongly associated with indirect psychological effects of IPV (Osifo et al., 2016). A decreased desire to engage in skin-to-skin contact or initiate early breastfeeding after the infant is born was indicated by Martínez-Galiano (2017). Finally, malnutrition, incomplete immunisations and even mortality have been noted as poor health outcomes of children born to mothers who have suffered violence by their intimate partner (Slopen, Zhang, Urlacher, De Silva, & Mittal, 2018). It is therefore key to further explore this pervasive phenomenon of IPV during pregnancy as the outcomes for the mother and the child are noted as negative in nature.

### **Theoretical framework**

Interpretive phenomenology (IPA) was the selected framework for the research project. Phenomenology offers a base from which experience can be brought to the fore. As such, Yüksel and Yildirim (2015) note that seeking individual reality comes from the narratives shared by people. Two theories of which phenomenology comprises is existential and hermeneutic philosophy. Existential philosophy – concerned with reflection on lived

experience; and hermeneutics – where interpretation is accentuated (Yüksel & Yildirim, 2015).

As such, there are three influences on IPA, namely, a) symbolic interactionism, which suggests that social interaction is imperative for the emerging mind to develop; b) phenomenology, which states that reality emerges from the perception of conscious experiences; and c) hermeneutics, which examines the analysis and the understanding of messages (Howitt, 2010). Combined, these influences provide the basis of understanding interpretive phenomenological analysis.

Smaller samples IPA focuses on the insider's (participants) perspective, the meaning ascribed to major life experiences and how individuals uniquely come to understand these phenomena affecting their lives (Eatough & Smith, 2008). Here, participants have a safe space free from judgement to express themselves (Alase, 2017). From these descriptions, an interpretive analysis follows (Larkin, Watts, & Clifton, 2006).

What stands out with this framework is the double bind that it provides when conducting qualitative research. That is – giving a voice to the participant to hear how they make sense of their reality, and then making sense of these realities through the researchers interpretation of the participants accounts (Larkin et al., 2006).

Employing IPA as the theoretical framework was fitting for the research project as the participants who are experts of their lives shared the detailed descriptions and insights of their lived personal experiences of intimate partner violence occurring in cyberspace. The shared personal accounts highlight the idiographic nature of cyber IPV experiences during pregnancy which is at the core of IPA (Howitt, 2010). Furthermore, expert insight into subjective experiences of women in Cape Town, South African's were enabled through semi structured in-depth interviewing which is well suited to IPA (Howitt, 2010). Moreover, IPA

was used as a yardstick to construct key elements of the research project such as the research question and the interview schedule.

### **Conclusion**

This chapter sought to illuminate the current work on cyber intimate partner violence. Here, cyber IPV was defined and described using literature from the field. Furthermore, the relationship between pregnancy and intimate partner violence was explored. It is, however, noteworthy to indicate that information on cyber IPV and pregnancy specifically has not been explored, to the best of the student's knowledge, thus far. This therefore positions this research project as key to understanding cyber IPV during pregnancy.



## CHAPTER 3: METHODOLOGY

To reach the aims of the research project, a series of methodological elements had to be considered. These elements laid the foundation for the collection of information with reference to cyber intimate partner violence occurring during pregnancy. A discussion of the research design begins the chapter and simultaneously provides the foreground for the rest of the research projects methodological aspects.

Exploring the lived experiences of survivors of cyber intimate partner violence in pregnancy warranted a design that will capture such rich information and for this reason a qualitative design was selected. As part of the methods, purposive and snowball sampling took place with the objective of collecting the deep-seated experiences of the participants through semi-structured interviews. To maintain an accurate and unbiased analysis of the collected data, elements of trustworthiness and reflexivity were engaged with throughout the process. Likewise, ethical considerations guided the research project from initiation to cessation.

### 3.1 Research design

The world has on offer a multitude of constraints, each having different emotional and psychological impacts on an individual. Qualitative research is directed to ascertaining a deep understanding of such effects and how a person begins to interpret their personal realities (Banister, Burman, Parker, Taylor & Tindall, 1998). By capturing an individual's experience, a deeper insight of a phenomenon may be gained – thus leading to a high quality of information pertaining to subjective experiences (Howitt, 2010). Contrarily, this would lack if statistical methods were to be utilized. Howitt (2010) points to this quality by stating that the less structured techniques employed by the qualitative enquiry, as compared to quantitative, permits rich data to be gained. Here, insights and feelings may be investigated which may provide the basis for understanding phenomena from an individual standpoint.



In relation to the above, a qualitative research design was selected for the project. The qualitative design provided the space for personal thoughts, feelings, and emotions to be captured, which was the purpose of this research project. Ideally, this gave the participants the free space to conceptualise and contextualise their lived experiences of cyber partner violence during their pregnancy in their own words and through their own perceptions – thus catering for the sensitive nature of the research topic.

An additional reason for selecting the qualitative research design was to permit interpretive phenomenological analysis to take place (IPA). Prudent listening by the student researcher enabled understanding of how the participants created meaning of their experiences – a central aspect of IPA (Howitt, 2010). Moreover, having had an open and safe space where the stories of each pregnant woman was voiced and heard, was imperative in this meaning making process as it facilitated the gathering of content-rich information. For these reasons, a qualitative design was considered and utilised to meet the aims of the research project.

### **3.2 Research setting**

The research setting detailed around online platforms, Facebook and WhatsApp, and at one Western Cape Department of Health (DOH) medical facility. Public and private Facebook groups advocating for the cessation of gender-based violence (GBV) and other social welfare pages was the first setting where the research invitation was posted to recruit potential participants.

The secondary research setting was a Community Health Centre (CHC) in the Cape Flats, where the key focus was on the midwife obstetric unit (MOU) or maternity ward. The demographics of the patients were vast, with ages ranging from 16 and above. Both South African and foreign patients accessed the MOU during the time of the recruitment process. Additionally, patients were from the Western Cape, with all residing in neighbouring suburbs

of the Cape Flats. Within this setting, the MOU would have expecting patients wait to access health services related to their pregnancies. Different staff members would thereafter summon patients for consultation. During this time, conversations with potential participants for the project would commence.

Centred around two settings, the online platforms made it possible for the invitation to reach females across South Africa, whilst the medical facility focussed on individuals within the Western Cape province. The table below indicates the Facebook pages and WhatsApp accounts on which the research invitation was posted and the corresponding number of users within each of the respective groups (Table 1).

<b>Table 1</b>		
	<b><u>Facebook Group or WhatsApp account</u></b>	<b><u>Number of members</u></b> <b><u>/followers in the group</u></b>
1	# The total shutdown: Intersectional womxn’s movement against GBV.	70.2K members
2	1000 Women 1 voice.	8,284 followers
3	Youth against gender based violence.	1.2K members
4	Fashion for a cause charity events and shows.	202 members
5	South African women fight back.	35K members
6	Gender based violence.	809 members
7	Virtuous women.	2.5K members
8	Fight against violence and abuse.	28,075 members
9	Stop gender violence: A national campaign.	3,378 followers
10	We will speak out SA.	694 followers
11	Nonceba family counselling centre.	232 followers

12	Sonke gender justice.	24,951 followers
13	Western Capes womens shelter movement.	871 followers
14	Tears foundation.	10,185 followers
15	Mosaic: Support heal train.	1,589 followers
16	Action against abuse South Africa.	880 followers
17	Help get rid off abuse of women and children in South Africa.	526 followers
18	Department of Social Development.	154,299 followers
19	Friends who like fight against violence and abuse.	509 followers
20	FEMME: Women healing the world – Cape Town.	919 members
21	University of the Western Cape (UWC) friends.	10.7K members
22	Counsellors in South Africa.	4.4K members
23	Students personal Facebook profile.	21 friends
24	Supervisors personal Facebook profile.	-
25	Family member 1 of the student posted on their personal Facebook profile.	483 friends
26	Family member 2 of the student posted on their personal Facebook profile.	788 friends
27	Students personal WhatsApp account: Posted on WhatsApp status and broadcast sent.	112 contacts received invitation
28	Family member 1 of the student posted on their personal WhatsApp account: Posted on WhatsApp status.	112 contacts viewed invitation
29	Family member 3 of the student posted on their personal WhatsApp account: Posted on WhatsApp status.	84 contacts viewed invitation

*Table 1: Facebook pages and WhatsApp accounts that the research invitation was posted on.*

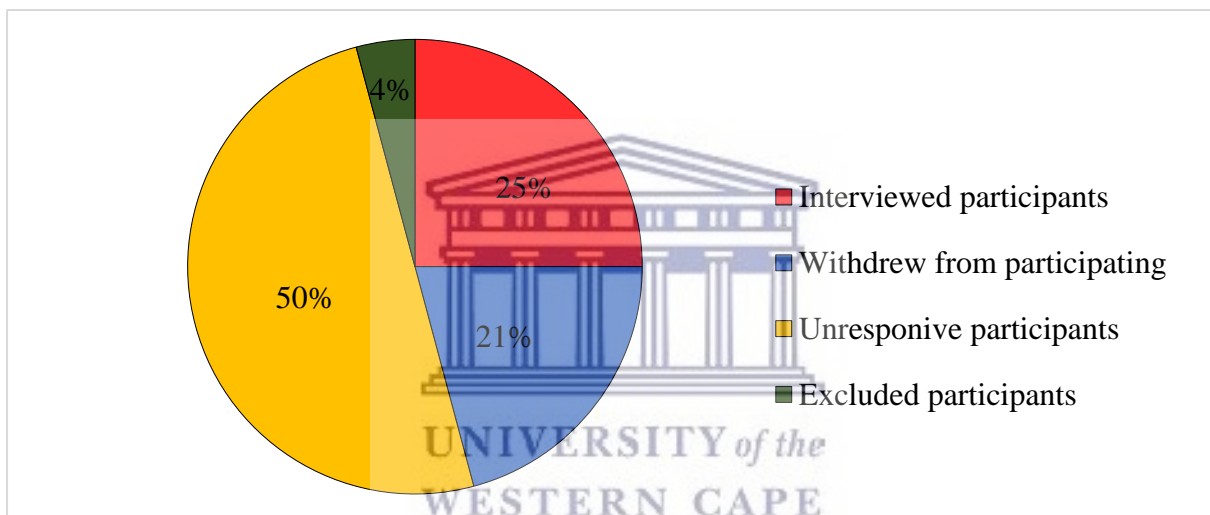
### 3.3 Participants and sampling

Following the theoretical framework for the research project, interpretive phenomenological analysis (IPA), the aim is to produce an examination of phenomena that is detailed and rich. For this reason, participant information sharing was the crux of the information gathering procedure in the project. For this purpose, specific participatory criteria had to be met by potential participants to ensure that the fidelity of the research project was maintained. Eligibility focussed on three areas of inclusion: a) South African female participants, b) who are 18 years and older; and c) who are currently experiencing or have been experiencing cyber IPV during their pregnancy. Potential participants who experienced other forms of domestic violence but did not meet the criteria for the research project were referred to various counselling services (Appendix M).

Purposive and snowball sampling techniques were employed for participant recruitment on online platforms, Facebook and WhatsApp, as well as at the medical facility. Yin (2011) defines purposive sampling as, “The selection of participants or sources of data to be used in a study, based on their anticipated richness and relevance of information in relation to the study’s research questions” (as cited in Gentles, Charles, Ploeg & Mckibbon, 2015, p. 1778).

Snowball sampling was the subordinate form of sampling that was employed to recruit the sample of participants for the project. The referral nature of the snowball technique which is completed by the participants (Noy, 2008), creates avenues for a higher probability of reaching potential participants. The selection of these two sampling types was justified by their benefits of selecting content rich participants (as per the former sampling type) and for reaching a wide range of potential participants (as per the latter sampling type) as the project was tapping into a currently non-researched area within cyber intimate partner violence.

A total number of 24 participants were recruited for the project. All 24 participants were recruited through purposive sampling as snowball sampling yielded 0 participants. From the 24 recruited participants, 18 debriefing sessions were held with a final number of 6 participants completing the interview process. The high fallout rate was attributed to clients being unresponsive to contact. Consequently, 12 participants were unresponsive to communication. Furthermore, 5 participants decided not to participate anymore due to personal challenges being faced at the time. Only 1 participant was excluded from the study as she had later disclosed that she was not a South African citizen. Diagram 1 illustrates the outcomes of the participant recruitment process for the research project:



*Diagram 1: Participant recruitment outcomes.*

Whilst a small sample was finally included into the project in comparison to the large total initially recruited, the small sample held information power. Accordingly, the small sample size was motivated by enhanced information power of the sample (Malterud, Siersma & Guassora, 2016), which was derived from the specificity of the participant inclusion criteria and the exploration of subjective lived experiences. Moreover, the smaller sample size of this project was suited to the theoretical framework, IPA. Accordingly, Pietkiewicz and Smith (2014) noted that samples in IPA are usually small and for this reason, an appreciation of each participants experiences can be made through detailed analysis procedures. Smaller

sample sizes also permit an examination of similarities and differences between the participants experiences of cyber IPV during their pregnancies (Pietkiewicz & Smith, 2014). Richer insight into the phenomenon of cyber IPV for pregnant women was therefore made possible.

The demographic information provided by 6 participants who completed the interview reflected the following information: participants were aged between 18 and 33; all the participants were residing in different suburbs of the Cape Flats; and all participants had recently given birth. All participants were bilingual and opted to converse in English in the interview. 3 participants were currently in an intimate relationship; and 3 participants had terminated the intimate relationship by the time of the interview. Pseudonyms are used to maintain participant confidentiality. Table 2 below illustrates the demographic information provided by participants:

<u>Table 2</u>					
	<u>Participant name</u>	<u>Age</u>	<u>Area of residence</u>	<u>Status of pregnancy (at the time of the interview)</u>	<u>Status of intimate relationship (at the time of the interview)</u>
1	Participant 1: 'Tasha'	28	Bishop Lavis	Baby was born.	Terminated relationship.
2	Participant 2: 'Koki'	18	Bishop Lavis	Baby was born.	Currently in the relationship.
3	Participant 3: 'Melli'	33	Belhar	Baby was born.	Currently in the relationship.

4	Participant 4: 'Danny'	23	Kalksteinfontein	Baby was born.	Terminated relationship.
5	Participant 5: 'Jojo'	31	Belhar	Baby was born.	Currently in the relationship.
6	Participant 6: 'Lena'	31	Bonteheuwel	Baby was born.	Terminated relationship.

*Table 2: Demographic details of the final participant sample recruited.*

### 3.4 Procedures

Prior to commencement of the data collection for the research project, a comprehensive research proposal was firstly submitted to the Biomedical Research Ethics Committee (BMREC) at the University of the Western Cape for ethical approval. Firstly, once ethical approval was granted, the second step was to post the research invitation on multiple Facebook groups and WhatsApp accounts. A letter requesting to post on Facebook pages was submitted to the Facebook group administrators before the post was placed in the group (Appendix N). The research invitation encouraged potential participants to contact the student researcher to indicate their interest in participating in the intended study via any of the following methods: phone, e-mail, or to inbox on Facebook (Appendix L). Although no participants were yielded from the online platforms, a Google forms document was created, and the link was provided in the online posting of the invitations. The Google forms document included the information sheet, the informed consent form, and the participant biographical form.

Secondly, an application to the Department of Health's National Health Research Database (NHRD) online portal was submitted for permission to be granted to conduct research at two medical facilities in the Western Cape. Permission was granted by the NHRD for utilisation

of two facilities for data collection, however, only one facility granted further permission to commence with the data collection process.

A meeting was held thereafter with the facility manager and the nurses of the Community Health Centre (CHC) to provide detailed information about the research project as well as to request referral of potential participants. Information sessions with patrons of the medical facility were subsequently held by the student researcher. These sessions were primarily held in the MOU section of the facility with the intention of informing potential participants of the nature of the research project. Interested participants were thereafter invited to participate. The research invitations were additionally pasted throughout all the sections of the medical facility to aid with recruitment.

Interested participants were furnished with a comprehensive information sheet (Appendix A) detailing the study aims in addition to the requirements from participants. Confidentiality and consent were further explained, and potential participants were requested to complete and sign the Informed Consent form (Appendix D) and the Participant Biographical form (Appendix K). In addition, Counselling resources (Appendix M) were given to participants at this stage of the recruitment process. As the research project was aimed at encompassing a South African sample, the above documentation was prepared in English, Afrikaans and isiXhosa (Appendices B, C, E & F) and was kept on hand for any potential participants who would feel more comfortable conversing in another language. Interpreter consent forms were established in this regard, however, were not utilised due to all participants being comfortable with conversing in English (Appendix J).

According to Banister et al. (1998), informing the potential participants of the content of the study is a determining factor as to whether they will participate in the study. To adequately inform participants of the content and aims of the research, and to alleviate any anxieties or



reservations that participants had, debriefing sessions were completed (Banister et al., 1998). Recruited participants engaged in two or three short briefings, as this varied per participant. The initial briefings were conducted telephonically prior to the interviews to arrange the interview time, date and venue according to the participants preference. The next briefing was done on the day of the interview. Here, the participants emotional wellbeing was evaluated before the interview to ensure that the participant was in a conducive state of mind and was also feeling comfortable to engage in the interview. The interview schedule (Appendix G) was utilised when conducting the interviews. Appendices, H and I list the interview schedule in Afrikaans and isiXhosa respectively. Post the interview session, a debriefing session was completed to enquire how the participant felt after completing the interview. Furthermore, each participant was contacted monthly to check in and enquire if there were any challenges or concerns that may have presented post the interview sessions. None of the clients reported any concerns.

### **3.5 Data collection**

The main aim of the research project was to explore how IPV takes place in cyberspace and to gain deep insight into the subjective experiences of cyber IPV by pregnant women. The word ‘subjective’ suggests a personal perception and outlook of a situation (Howitt, 2010) and these “subjective realities” are expressed in conversation (Henning, van Rensburg & Smit, 2004, p. 52). To capture and frame the uniqueness of each participants’ experiences, qualitative interviewing was selected as being best suited for data collection for the project (Banister et al., 1998). Moreover, thick descriptions of the participants’ encounters were captured through the interviews, thus, leading to richly detailed accounts of the phenomenon of cyber IPV occurring in pregnancy (Henning et al., 2004). This is therefore supported by IPA, which concentrates on an exploration of “mental phenomena” and more specifically

“individual interpretations” (Pietkiewicz & Smith, 2014, p. 10). From the perspective of IPA, interviewing can be a tool for collecting relevant data.

To this end, semi structured interviews of approximately one hour in duration were conducted and audiotaped to gain insight into the subjective lived accounts of cyber IPV. Semi structured interviews ultimately allowed for specific information around the research topic to be explored whilst also providing a space to explore other themes arising during the interview. Pietkiewicz and Smith (2014), therefore, refer to semi structured interviewing as a key method in conducting a research project using IPA. Resultantly, the interview schedule was informed by current literature and covered the following areas; a) understanding and description of what cyber IPV is; b) perceptions of the emotional and psychological experiences that were encountered in their pregnancy due to cyber IPV; c) perceptions of how cyber IPV impacted on the experience of their pregnancy; and d) tools and strategies used during their pregnancy to cope with the perpetration of cyber IPV.

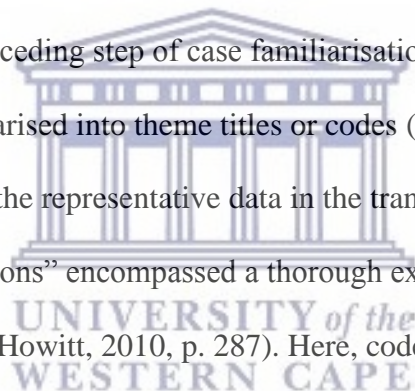
After the interviews took place, the audiotaped interviews were listened to, and written transcriptions of each interview subsequently followed. The transcriptions were shared with participants for member checks to be completed and to ensure accurate recording of the data was completed. All recorded data is currently password protected and is only accessible to the student researcher and the supervisor. A total of 6 interviews were conducted.

### **3.6 Data analysis**

Exploring how individuals start to understand their experiences and the meaning that they attach to their experiences is the principle focus of interpretive phenomenological analysis (IPA) (Eatough & Smith, 2008). IPA equips the researcher with detailed steps on how to illuminate and bring to the fore phenomenal reality (Eatough & Smith, 2008). A pivotal aspect of IPA is the dual interpretation procedure or double hermeneutic. This means that

firstly, participants come to understand and make sense of their world and experiences and secondly, the researcher attempts to interpret this meaning making process of the participants (Pietkiewicz & Smith, 2014) – thus the dual interpretation. By using IPA for the research project, a platform for the participants’ voices to be heard through both interviewing and analysis procedures was offered (Eatough & Smith, 2008).

Once the interviewing procedure was concluded, the transcription of each participant’s audiotaped interview was completed. A six-step analysis as outlined by Howitt (2010, p. 287) was followed: The first step “initial case familiarisation and initial comments” entailed repeated reading of the transcription to ensure familiarity with the content. Here, further insights were reached by each revisit to the transcriptions. Iteration, thus, formed a pivotal aspect in the analysis of the interview data (Eatough & Smith, 2008). “Preliminary theme identification” followed the preceding step of case familiarisation where key themes in the data were identified and summarised into theme titles or codes (Howitt, 2010, p. 287). These codes were written adjacent to the representative data in the transcriptions. The third step, a “search for theme interconnections” encompassed a thorough examination of the themes identified in the previous step (Howitt, 2010, p. 287). Here, codes were grouped together which was owed to the similarity in the content. Step four, a “systematic table of [superordinate and subordinate] themes”, was constructed and listed (Howitt, 2010, p. 288). Here, themes deviating from the structure of the research project were eliminated (Smith & Osborn, 2003). “Analysis of further cases” was completed and examined following the same procedure in the fourth step (Howitt, 2010, p. 288). The final stage, step 6, “writing up the analysis” entailed a detailed description of each theme from the final table. Here, the student researcher’s interpretations of the participants lived experiences and the interrelations between the themes and the literature on cyber IPV in pregnancy were illuminated (Howitt, 2010, p. 289). Extracts from the transcriptions were used to discuss the thematic interrelations



and to draw on the meaning-making processes that were illuminated in step six. Interpretive phenomenology was the selected framework for the analysis thus offering a platform to bring meaning to the personal accounts of cyber IPV by pregnant South African women.

### **3.7 Trustworthiness**

Recording an accurate account of subjective experiences of cyber IPV by women who are pregnant is pivotal in yielding valid and meaningful research output in qualitative research (Banister et al., 1998). In essence, this highlights the necessity of incorporating elements of trustworthiness when producing quality in qualitative research. As such, Lincoln and Guba (1985) articulated the importance of trustworthiness to improve research value through credibility, transferability, dependability and confirmability (Amankwaa, 2016).

#### **3.7.1 Credibility**

Credibility refers to internal consistency (Morrow, 2005). To strive towards credibility, the research supervisor was consulted at each stage of the research project (Amankwaa, 2016). That is, the supervisor was engaged from the initial stages of the project's idea, conceptualisation, to submission to ethical boards and finally to the completion of the research project. Broad summaries for each phase of the project were emailed to the supervisor as part of the engagement. This ensured that the research procedures were appropriate and relevant to meeting the project aims as well as ensuring that the student researcher followed ethical processes. This formed part of the debriefing engagements with the supervisor to check the research procedure as it was occurring in practice. Furthermore, extensive engagement with participants added to credibility for the research project (Morrow, 2005), and this was achieved by debriefing sessions (both telephonic and in person) with participants prior to the interviews taking place. Debriefing sessions varied, with an average of three sessions taking place per participant. Involving participants into the research process was done through member checks. Member checking involves participants verifying the

information and providing any corrections to the information (Stahl & King, 2020). This was conducted telephonically due to all the participants not being able to avail themselves for in person member checking. The transcripts were read out verbatim to participants giving them the opportunity to comment and alter any errors. No corrections were made by the participants in the project. Furthermore, the student researcher's biases were noted through reflexivity.

### **3.7.2 Transferability**

Transferability is concerned with whether the setting of the research project is applicable to other settings. Whilst qualitative research is not generalisable to other populations and settings, it is nevertheless imperative to provide thick descriptions about the research setting (Morrow, 2005). To this end, a section allocated to describing the research setting and procedures was provided earlier in the project.

### **3.7.3 Dependability**

Dependability within trustworthiness is concerned with reliability, (Stahl & King, 2020). To begin with, the research design and procedure was outlined preceding the actual commencement of the research project. This is essential when exploring whether replicability of research is possible. To ensure that a systematic process was followed once the project commenced, an audit trail was utilised (Carcary & College, 2020; Morrow, 2005). An audit trail is “a detailed chronology of research activities and processes; influences on the data collection and analysis; emerging themes, categories, or models; and analytic memos” (Morrow, 2005, p. 252). Here, the chronologic process of research activities, for instance, from making contact with the two Department of Health medical facilities to planning participant recruitment days with the facility manager of the one facility, were all documented, and the trail was shared with the supervisor. Similarly, influences on data collection were noted and the supervisor was resultantly able to guide the student during

periods of difficulty. Correspondingly, the supervisor provided peer debriefing and support in this regard allowing more strengthened procedures to be followed.

### **3.7.4 Confirmability**

Confirmability emphasizes objectivity in the research process and output (Morrow, 2005). To establish confirmability, research procedures were meticulously reviewed and repeated to illustrate consistency and to indicate whether the interpretations yielded were shaped by the participants' subjective lived experiences and not from any bias from the student researcher (Amankwaa, 2016). Interestingly, subjectivity may be seen as a strength within phenomenology as it can hone in on the researchers own perspective of the topic being explored which may be shaped by the literature review. On the contrary, to reach a level of objectivity is necessary when bringing to the fore, the participants lived experiences and not those of the researcher. The cognizance of one's biases, assumptions and predispositions and placing them aside from the research process is therefore fundamental. This is known as bracketing, a term coined by phenomenologists (Morrow, 2005). Reflexivity was employed as a tool to note the student researcher's biases and predispositions related to the research project. Adding to this, member checks were completed post the interview process (Howitt, 2010), to enhance the trustworthiness of the research project. Furthermore, the tape recordings and transcribed data of each interview have been kept in protected files should a return to the raw data be necessary.

### **3.8 Reflexivity**

Through conversation with the researcher, the participant shares their personal realities; the researcher similarly assumes a participatory role in the research through other avenues of influence (Hiles & Čermák, 2008). The researcher affects the research procedures with the potential to bring biases into the processes (Hiles & Čermák, 2008), similarly, the experience of the study may exert an influence on the researcher (Probst, 2015; Banister et al., 1998).

Reflexivity thus becomes a fundamental element of a qualitative research project.

Accordingly, a journal with the research student's thoughts and emotions related to the interviews and the analysis procedure was kept. This allowed a safe space for the student to offload personal subjectivities appropriately without it influencing the research project.

Supervision with an external supervisor was additionally used as a tool to reflect and remind oneself of wearing different hats in different situations (such as a student researcher, counsellor, and a daughter). Exploring potential bias meant going back to conception of the idea and how it relates to the student researcher. So, who is the student researcher?

The student researcher is a 29-year-old South African who may be classified as a working-class Indian female residing in the City of Cape Town, Western Cape. With this historical background, the student researcher has been reared to understand the workings of intimate relationships somewhat differently to how cyber-influenced relationships of the twenty-first century are essentially occurring. Whereas the student researcher has not experienced a pregnancy nor has encountered IPV in a relationship before, having previous knowledge of friends' experiences with cyber IPV may lead to potential subjectivity. Nonetheless, this background led to the interest in the field of IPV. As a result, the student researcher had previously worked as a counsellor in the IPV team at a trauma based NPO in the City of Cape Town. Experience in the IPV team ranged from working with preteens to adults of all genders and sexual identities. Personal attitudes and understandings were challenged here, however, it permitted deep self-reflection with a result of a less subjective approach to the subject of IPV. Equally, a profound desire to increase the knowledgebase in this field sprouted out of this work.

Furthermore, by being a user of social networking applications and SNS's biases may lie in how the applications are used for personal use which may be vastly different to the use by the participants. The student researcher mostly uses SNS's to communicate with family and

colleagues, thus messages are usually short with a specific purpose. General banter is kept to a minimum when utilising online communication applications. This resolve is largely different to how online communication currently takes place, and more specifically within romantic relationships.

Given the above background and self-disclosure, the student researcher had understood herself to be open-minded. Whilst in the data collection process, however, it became apparent that a deep desire to ‘rescue’ participants from their lived realities arose. Here, constantly reminding herself that participants have agency became a mantra to aid with reflexivity. Likewise, reflecting on her current employment background (that is, a counsellor practising within the field of outpatient treatment for substance abuse) prompted an invisible barrier to pause the emergence of subjectivity to some degree. Moreover, emotional reactions arising during the research study were explored using the personal diary to journal experiences of the student researcher. Monthly external supervision sessions were additionally attended by the student researcher to debrief about any emotional challenges experienced. This process allowed biases to be subdued throughout the project whilst enabling the subjective lived experiences of participants to have a safe space to share, to be recorded and thereafter analysed. Being aware of the biases that are held and the potential subjectivity surrounding the research topic has therefore been key when addressing reflexivity in this project.

### **3.9 Ethical considerations**

Upholding ethics principles and guidelines from conception until the completion of the research project was essential. For this project, research commenced after the ethical approvals were granted. The Biomedical Research Ethics Committee (BMREC) at the University of the Western Cape issued ethical clearance and approval for the research project. Thereafter, submission of the research proposal was submitted to the National Health Research Database (NHRD) to request utilisation of two DOH medical facilities in the



Western Cape (Henning et al., 2004). Permission was granted by the NHRD, however, only one medical facility granted permission to complete the participant recruitment process.

Liaison with the medical facility manager further granted access to the facility for 7 days a week for 24 hours a day. Varying national Covid 19 lockdown levels had however posed challenges with the access to the facility for extended periods of time.

To ensure participants were fully informed of the purpose of the research study, information pertaining to participant involvement in addition to the duration of involvement, an information sheet was provided (Appendix A) (Banister et al., 1998). The information sheet which had detailed the voluntary nature of participation and the right to withdraw at any time during the research, with all accompanying materials being destroyed was discussed with each participant (Brinkmann & Kvale, 2008). Permission to engage with participants was subsequently attained through a signed informed consent form by each participant (Appendix D). An interpreter consent form was designed had language interpreters been required (Appendix J).

Strategies were employed to ensure that confidentiality was upheld throughout the project. Firstly, a thorough discussion with participants was held informing them that only the student researcher and supervisor had access to the transcriptions. Secondly, participants were informed that the audiotapes were only accessible to the student researcher and will continue to be stored in password protected files on a secure laptop device. The audiotapes, transcriptions, informed consent forms (Appendix D) and participant biographical information forms (Appendix K) would be discarded after 5 years. Thirdly, participants were also briefed on the use of pseudonyms to ensure their anonymity and their confidentiality were maintained (Banister et al., 1998).

Ensuring emotional support was a vital aspect in this project as this research was of a sensitive nature and was intended to work with the vulnerable population of pregnant females. Accordingly, counselling resources (Appendix M) were made available to all participants and the right to withdraw at any stage during the project was discussed with all participants. Five participants opted to withdraw from the interview process due to challenges being experienced in their personal spaces, separate from the research project. Regular check-in sessions were also held telephonically with each participant after completion of the interview process. Referrals for counselling were made available throughout the duration of the project and one participant who had elected to withdraw her participation prior to the interview had requested extra emotional support through a referral. A referral was then completed for the participant. The principle of nonmaleficence was as a result upheld (Howitt, 2010).

Furthermore, contact details of the researcher and supervisor were furnished in the formal documentation for participants who required any additional information or had any queries regarding their role in the study (Banister et al., 1998).

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## **Conclusion**

To conclude this chapter, it is key to highlight that multiple methodological elements had to be considered under the guidance of the research aims and objectives which were informed by the theoretical framework, IPA. As such, the qualitative design permitted purposefully selected participants to share their lived experiences in a safe space through interviewing. IPA correspondingly was best suited to this qualitative research project. The methods selected for this research project were as a result successful in answering the research

question through ethical means. The next chapter will provide a detailed analysis of the data collected.



## CHAPTER 4: FINDINGS

The previous chapter laid the methodological foundation for attaining the objectives of the research project, namely,

- To explore how cyber intimate partner violence takes place using technology and social media.
- To explore the subjective thoughts and emotions which arise in relation to experiencing cyber IPV as a pregnant woman.
- To understand the meaning-making processes made by survivors of cyber IPV during pregnancy.

This chapter sought to illuminate these objectives by providing a detailed account of the participants lived experiences of cyber intimate partner violence during pregnancy through an interpretive phenomenological analysis. Here, the core themes are presented respectively with each subtheme which is extracted from the interviews. The acts of cyber intimate partner violence; emotional and psychological responses and health aspects during pregnancy constitute the three primary areas presented in this chapter. The meanings made by participants is additionally captured in this chapter. Current literature from the field is drawn upon in relation to the findings.

Diagram 2 below indicates the core themes, which are the acts of cyber IPV, emotional and psychological responses and health aspects during pregnancy. The subthemes are indicated below each core theme.

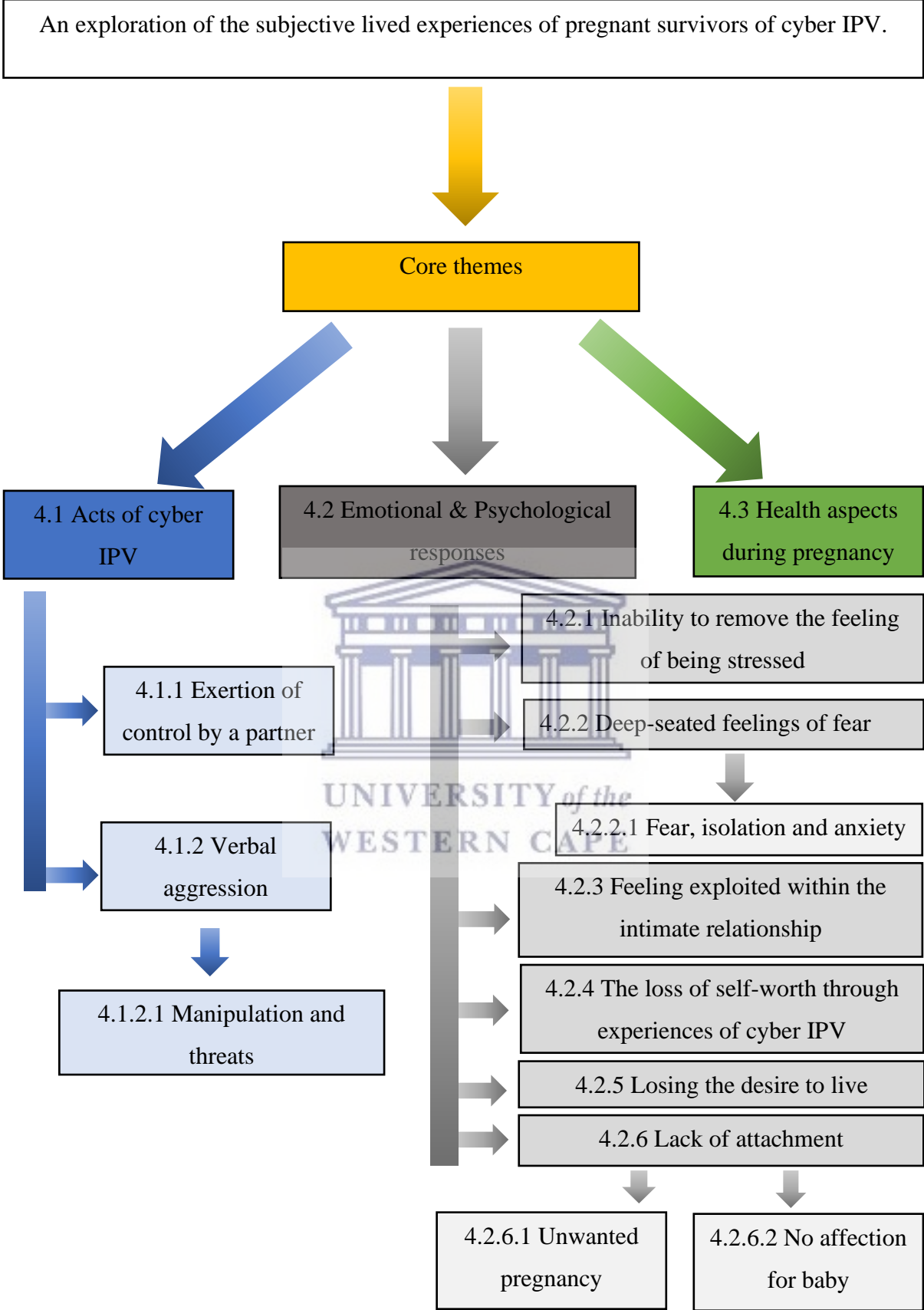


Diagram 2: Illustration of the core and sub themes.

## 4.1 The acts of cyber IPV

The perpetration of cyber partner violence is multifarious (Hellevik, 2019) with each encounter being either homogenous or dissimilar to others. The dominant themes of cyber IPV perpetration that arose in the interviews were exertion of control by a partner and verbal aggression. Subthemes are presented within the respective core theme.

### 4.1.1 Exertion of control by a partner

Many of the participants shared the several ways in which cyber control was enforced by their intimate partners. The control included using the participants phone without permission, deleting social media from the participants phone without informing the participant and keeping the phone away from the participant. It was noted that participants were distressed as the controlling behaviours were enforced rather than discussed with them.

Two of the women interviewed expressed how their phones were removed and used without any permission being sought by their partners.

*He did not have the phone, the phone. So, I did see the time and all that stuff. He did keep the phone, he sleep, the phone is still by him. The next day I did see the Facebook. So, he come and he take the phone so he did delete Facebook. (Koki).*

*Cause he would actually take my phone with him and leave his phone there. (Lena).*

Lena further expressed how communication for work purposes was interrupted by not having access to her phone:

*I need to communicate. So, I wouldn't get messages. And then when I get in [at work] the next day and I'm seeing the day is going and the day is going, Tem is not there. Aya is not there. They communicated with me, but I didn't get to see the messages because he went to work with my phone deliberately. He would take my phone.*

(Lena).

Control was further exercised whereby messages would be sent to a work WhatsApp group to stop contacting Lena as well as where these messages would be deleted before Lena would see it:

*So, he would say, he would send a message like in the group for everyone to see my boss also, to say, "I say, stop messaging. My wife, um, stop messaging my wife at night. If she's not at work, if she's not at work, stop messaging or stop greeting or stop calling her, sweetie..." (Lena).*

*So, I wouldn't see it. Cause when I go on my phone, I, first thing I do, I go on my group to check it has messages. So, there would be no messages of what he's, there'd be no messages of what the staff said. He would basically delete it, which means he cover his tracks. Right. So, I wouldn't know about it. So, when I get to work, when I get to work, I would just see, I would just see, um, I would just hear "Lena, what happening? I heard him, Marv, send a message to the group." What, what then I would say, let me see. And then that's when I see it. Cause I could just ask any staff member to see. And then I would see all the things that was said because he was so silly. Didn't know he has to delete it from everyone, but he just deletes it from me so I can still see it on the other end what the conversation was about. (Lena).*

Two respondents had expressed how their ex-/partner(s) would attempt to control what she sees in his cyber activity:

*What I mean is like there's chats deleted in between that doesn't make sense what that person is and what you are saying. It doesn't correspond. So, it means chats were deleted. You know. (Tasha).*

Lena had a similar experience with her partner who had placed password codes on his own device to limit her accessibility to his social interactions:

*During the pregnancy, his phone wasn't there. Phone was going with him to the bathroom. His phone was going to shower with him... He had codes for messages. He had codes for Facebook. He had a different code, pattern, different pattern for WhatsApp. He had a different pattern for gallery. (Lena).*

In a study done by Lucero et al., (2014), it was noted that an indicator of trust in a relationship is to be able to share passwords. Accordingly, this suggests that access to a partner's phone was granted rather than forced. Findings from the interview's however indicated control was imposed and a sense of control was subsequently lost over their private communicative avenues. Intensity of cyber control increases when the perpetrator feels they have not attained their preferred level of control (Schnurr et al., 2013). This was similar in the findings from the interviews. As noted by Schnurr et al. (2013) creating distance within the social network of a person is easily done through technology and as seen in the exercise of control for participants in this research project where the work facet was a secondary receiver of cyber IPV perpetration.

#### **4.1.2 Verbal aggression**

In the work of Draucker and Martsof (2010, p.140) it was found that "For many participants, technology - especially the use of cell phones - was the modality for carrying out verbal aggression". Such instances materialised into behaviours where berating comments and threatening messages were digitally sent to partners (Draucker & Martsof, 2010). Respondents shared how verbal aggression took place over the phone through name calling, profanity and arguments over voice messages.

*Violent, not in a way, he wouldn't hit me, but he would say hurtful things. So, I still call it abusive, even though he didn't hit me. (Lena).*



*But that Saturday they were drunk and everything. So that's when they started arguing again. [On] Voice notes also. (Danny).*

*In cyber I've experienced them. Like he was rude to me. We would argue not all the time, but whenever there's a message. (Lena).*

*Okay. Telling me, "My ma se 'P'", and "Ek is a 'P'" [inaudible] "I, you know", stuff like that. (Tasha).*

Jojo, one of the participants, indicated how the online communication presented itself in her intimate relationship:

*He was, um, like he tell me very bad stuff over the phone. Very, very bad stuff. So, when he sent me this messages... He tell me I'm a Jessabelle this. Like, um, do you say, he swear at me man. Swear at me and he's telling me that he wanted, doesn't want my kids and why did I get pregnant and all that stuff. (Jojo).*

Whilst sharing these experiences, Jojo was emotional and lowered her gaze.

*So, if a men calls you that, it makes you, it hurts you. It's like he catch you with a man, or you maybe, you know that you not right, you sex here and you sex there. You see? I was feeling very sore you see, because I know it's not a person and you get this? I am not that person. (Jojo).*

As seen in Jojo's experience, a common theme that jointly arose with verbal aggression was questioning of the pregnancy during her gestation period. It was reported that the tone of messages on Facebook was often hostile and argumentative in nature. Furthermore, such online aggression filtered down to the ex-partners new female partner, who would also perpetrate cyber violence:

*So, in that six months [into the pregnancy] he he and his girlfriend, they actually tortured me. They tormented me. I had to hear that I slept with many guys and it was not true because he know for a fact he came, he got me a virgin. And to tell stuff like that he couldn't tell her to stop it because he already gave her the upper hand, she can do what she want. She told me it's not this child. And I slept with many guys, gangsters and I'm a whore. I was like, okay, fine... So, I told him tell your girlfriend to leave me alone and leave my name out of her mouth cause I'm not bothering her. That's when she came and she added me. She told me, "Yeah, you a whore, you want to talk nonsense here and now you soek a pot for your dixel." So, in English, she said, you look for a daddy for your child now. (Danny).*

Melli's experience of cyber verbal aggression was related to arguments over messages. Melli maintained that a strong argumentative tone was clear in the messages she would receive and that these online arguments would transfer to in-person quarrels.

*He was telling me, "But how can you tell me that I didn't tell him?" And so, I'll ask him now, why will your brother say you told him he can take it? ... So, I'll ask him, are you lying to me now? Just telling me the truth. Is it like your brother say, or is it the way you say? (Melli).*

At this time, Tasha was still in a personal relationship with her partner.

*... that one specific night, I think I was a month and a half pregnant with her. And then he left me with, with that lady. And um, this one night he had this thing in his mind that I'm seeing someone else because he's doing it... So, we were arguing that night and he started hitting me, he started hitting me. I was being smacked from one side to another. And even if it was, if I didn't even cover that night, he wanted hit me with the fist, in fact he did, hit me with a fist, and because he smack me on the side, I*

*was keeping my cheek and then he was hitting me and then he hit against my hand. So, if my hand wasn't there, I would've had a blue eye, but what I did have was, um, blood coming out of my eye because he smack me and this jaw, it was locked. I couldn't even open my mouth to eat the way he was hitting me that night. And he even wanted to stab me. (Tasha).*

The range of verbal aggression as noted by the participants, details the range and varied ways in which perpetration would commence. There is also a pattern emanating from the shares of the participants – online chatting moves to online verbal aggression, which then transfers into in person arguments and physical abuse. Cyber intimate partner violence thus holds a tremendously dangerous reality for pregnant South African women.

#### **4.1.2.1 Manipulation and threats**

Lucero et al. (2014), had reported in their work that digital sexual abuse was frequently perpetrated by males. Soliciting sexual engagement, making explicit sexual video recordings and threatening to share such media comprise of the many ways in which cyber IPV and sexual violence overlap. Sexual coercion and manipulation thus seamlessly transcends between online and offline intimate contact (Hellevik, 2019). Moreover, it was found that cyber threats of sexual and physical harm towards females was a pervasive negative implication of the digital arena (Cardoso et al., 2019). This phenomenon of manipulation and threats were echoed in the interviews by three women during their pregnancies.

*Even yesterday, he made one [sex video]. He's going to send it when he want to come again, "Like don't you miss me? See here" [the sex video] and what what. I didn't see, but I just see the phone, he keep it that side. You see, but I can see that he start making a video. The other time I did, I didn't see him make a video of me. I just saw he sent it to me... It would be better, yes, asking, but you know, sometimes I'm so busy*

*then I don't know he make a video. I just see he sent it to me. And that feels like, I didn't know why he do it. (Jojo).*

Jojo's body language during this time of the interview indicated a sense of helplessness as she shrugged her shoulders and shook her head in disapproval. Jojo further highlighted that the sexual manipulation eventually ends up in undesired sexual contact on her part of the relationship.

Tasha shared her experience of manipulation after she had unblocked her ex-partner's number, thus allowing him to make contact with her for a short period. Here, Tasha shared that after she had rejected his proposal to reunite as they had recently separated, her partner become belligerent in his messaging style. Homicidal threats were subsequently made.

*And then I was like, no, don't even try come close to me. I don't want you here. I don't want you around my child. And then he was like, yeah, "I'm gonna burn down your house." And I'm like, okay, are you threatening me? (Tasha).*

After informing her ex-partner's family of his homicidal threats, she noted a change in the tone of the messages that he started sending to her:

*So yeah, he was threatening me and then I told him listen here, I'm going to the police station. Um, if you wanna continue, continue, I'll be showing them the messages. And then he stopped and he was like, "I just miss you. I just want you with me". And then the whole tone of voice changed after I told him I'm at the police station (Tasha).*

In Koki's experience, homicidal threats were not made directly to her, however, were made to her ex-partner over her Facebook account by her current intimate partner.

*So, he did tell that, my ex-boyfriend, when he catch him, he's gonna to kill him or wherever he get him, put people after him and all this stuff. (Koki).*

The experiences of cyber IPV as noted from the interview data assists with explicating the relationship between the world of cyber communication and traditional gender-based violence within intimate relationships. Control and aggression as the core themes generated from the interviews bring to the fore the pervasiveness of cyber IPV for pregnant women. The multitude of avenues used to perpetrate within each of these themes further underscores its collective extensiveness.

In congruence with literature, Fernet et al. (2019), noted that cyber partner abuse can also occur in the context of a relationship separation, as was seen with Tasha and Danny.

While these acts of cyber IPV are becoming more widespread, there is a concern that it is mostly the physical abuse that gains public attention and defence (Gillett, 2018). Gillett (2018), further indicates this inconsequential attention makes self-identification and prevention of abuse supremely challenging. In response to the works of Gillett (2018), the interviews resembled a crucial phenomenon, where body language of the participants during the interview spoke volumes in relation to the psychological and emotional effects of cyber IPV. This finding echoes the necessity to consider the lived psychological experiences of cyber IPV - resultantly, this research project has sought to close this gap.

#### **4.2 Emotional and psychological responses**

In the context of the research project, emotional reactions experienced after episodes of cyber IPV are referred to as emotional responses. Stress, fear and feelings of being exploited encompassed the main emotional responses whereas psychological responses comprised of low self-esteem, suicidal/homicidal ideation, and a lack of bonding with their babies. This section analyses the emotional and psychological responses of the women who experienced cyber IPV whilst pregnant drew meaning from these experiences.

#### 4.2.1 Inability to remove the feeling of being stressed

In describing their responses to cyber IPV in pregnancy, many respondents noted stress to be the most prevalent. Stress is a biological response made in relation to a demanding or threatening situation (Fink, 2010) which can have negative effects on a person's emotional and psychological wellbeing. Here, respondents articulated how different elements of cyber abuse caused stress to develop throughout their pregnancies.

At the time of the interview, Melli was staying at the hospital as she had recently given birth and the infant needed extra medical care due to being born with yellow jaundice. Melli shared that during her time at the hospital preceding the birth of her baby, repeated telephone calls every few minutes became excessively stressful for her.

*And so, I told you about, since Thursday he was phoning the whole time. Am I okay? not in labour yet? Then I told him, to please don't phone too much, because you are putting me in the like stress mode. (Melli).*

Interviewer: *And what made you feel like you were starting to stress about so many, multiple, phone calls?*

*Because every time, "Are you fine? No baby, yet? Can I bring you something?" And I told him, I don't have even the energy to eat anything or to drink anything. Like three to four phone calls, not evens a half an hour apart, just two quick, two quick yes. (Melli).*

For Jojo, she communicates when her stress level begins to increase with her older children.

*Like I tell them when the stress is coming (Jojo).*

Calmette's and alcohol are utilised when she feels that her stress has escalated making it challenging for her to interact calmly with her children:

*... when I feel I need to rest tonight, you see, then I buy me one Strongbow or two. And I sit in the toilet, just next to my room there... I drink this Strongbow just to relax my mind and I took the two, I sleep... The Calmette's keep me calm. When I take two in the morning, I'm calm for the whole day (Jojo).*

For Koki, the stress was related to her partners accusations that she memorises telephone numbers and loads them onto her phone and then proceeds to chat with other boys over Facebook. These accusations led to hostile arguments as well as her partner deleting her Facebook without her permission. Koki shared that this caused stress as it led to multiple hospital admissions:

*Well, when I was pregnant, I did stress a lot and I was hospital, in hospital [and] out and about [because of] this Facebook. (Koki).*

Lena expressed how her experience of stress led to disruptions in her daily routine:

*I was so stressed out. I would, um, I wouldn't eat the way I was. I'm stressed. So, I'm stressed. I don't eat. And I was so, I was so stressed. I didn't eat. Um, I didn't sleep well. I didn't sleep well. I was stressed out. I would forget things at work. (Lena).*

During the analysis of the data, it became evident that demands placed on the participants through cyber communication from their partners led to feeling distressed. The participants were able to identify the disruption this had on their daily lives, however, there seemed to be a lack of awareness of how to effectively manage this during gestation. Internal understandings also indicated that the stress response was more than just having demands placed on them but rather included the removal of their sense of agency within the relationship and with the pregnancy.

Furthermore, through the analysis, it was found that stress during pregnancy travels to post pregnancy experiences of stress. This was evidenced through the repetition and mumbled

speech which were present when the participants shared on their lived experiences here. For each woman, it seemed they still experienced immense emotional discomfort when sharing these experiences of stress during their pregnancies. Thus, it may be interpreted as an indication that the dangers of cyber IPV, such as emotional discomfort, appears to be more extensive than understood by the participant's. This finding concurs with the findings in the review done by Fernet et al. (2019) – that is, increased distress is faced when cyber intimate partner violence is encountered.

#### **4.2.2 Deep-seated feelings of fear**

The feeling of fear was voiced for varied reasons by participants. Fear that cyber IPV would be further perpetuated was expressed. The linkages between fear and other emotions such as isolation and anxiety for some participants became clear.

Jojo expressed her fear that the sex videos which were taken by her partner, without her consent, would be disseminated to others.

*Because, if he make the video, his face is not in, its only my face that's in. That's why I think, sometimes I think maybe this man will send it to someone else or whatever the case may be. (Jojo).*

##### **4.2.2.1 Links between fear, isolation and anxiety**

Identification of fear by the participants was noted in the interviews, however, the deep-seated associations to alternate behaviours were amiss for some. These associations became more apparent as the inherent meanings were brought to the fore through the analysis.

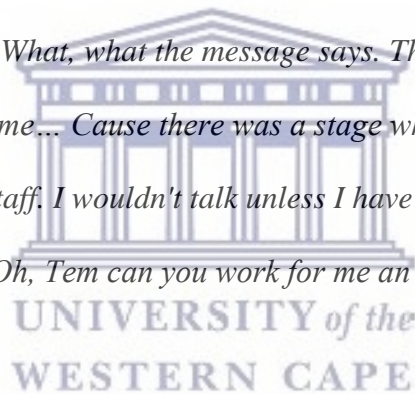
In fear of escalating her partners digital control over her, Lena would find herself avoiding external social relations.

*I isolated myself just to satisfy him and it didn't work because it got worse. It got worse, it got worse. (Lena).*



Lena's fear seemed to flow into further psychological responses such as isolation and 'people pleasing' behaviours during her pregnancy. Laughter present during this part of the interview was noted by Lena as recognition of how aberrant her behaviour became due to the control enforced by her partner. The change in her behaviour was reported to assist in avoiding further cyber & face-to-face arguments with her partner. The changed behaviours took place at her workplace as well.

*There's a time where I wouldn't even talk to people on my phone. I isolated myself at that stage, but people would greet me. I wouldn't even greet back. Cause I was so scared. <Laugh> Cause I wanted to keep him up [avoid angering him] because if my phone goes off - I even made my phone on silent on my break - because when my phone goes off, he would look at me to see <laugh> like it was to read in my expression, on my face. What, what the message says. That's how, how, that's how, um, controlling he became... Cause there was a stage where I wouldn't even communicate with the staff. I wouldn't talk unless I have to know. I wouldn't even message them to say, "Oh, Tem can you work for me an extra shift?" I was so scared.*  
(Lena).



Lena further expressed herself by stating:

*So, it's really, it's bad. It affects you emotionally. And your, your peace of mind, it affects your life forever.* (Lena).

The link between cyber control, isolation and fear are highlighted in Tasha's experience:

*So, he just checks up, he calls me randomly doesn't even let me know he's gonna call me. And now for that sake, it's like, because I know he does that, I'm just, inbound, okay. I'm just at home because at any time he, you could call and then I'm out and about, and then it's gonna be a problem in our relationship. And then we're gonna*

*start scaling and all this type of stuff. So, I would rather, if I go out, I'm going to a friend of mine, I have to like, say a day or two, before that time, listen here, I'm going to my friend, she wants me to come, stuff like that. (Tasha).*

Danny shared that her community had witnessed the cyber abuse and eventually had started harassing her when she would walk down the streets. Depression became a psychological challenge for Danny. For Danny, her fear of being attacked publicly was exacerbated by depression and thus led to isolating from the public scene:

*I was sad, I didn't want it to come out. I would just want it to be in a room the whole day. Don't want to talk to anyone. (Danny).*

In Koki's experience, creating cyber distance from her partner was not enough to lessen the fear that she had. Koki resorted to physical distance and self-isolation from her partner and her family due to the intense fear she experienced.

*I did lock me up in the room just to be a distance from him I did lock me up for two weeks in the room. Just go to the toilet, eat, sleep whole day. (Koki).*

Tasha additionally shared that fear resulting from the cyber IPV and physical IPV led to anxiety attacks whilst she was pregnant.

*Because then, then fear kicks in. So, um, because previously, while I was pregnant with her, um, there was abuse involved, it, it started, I started getting, um, anxiety attacks. (Tasha).*

Fear, as established from the interviews, did not occur in seclusion. It linked with entrenched negative emotions and a change in behaviour. The changes in behaviours, were not explicitly recognised by all the women. Thus, with further probing and interpretation from the student researcher, it became clearer how the deep-seated effects of fear led to some of the women

using isolation as a coping mechanism during their pregnancies. Whilst isolation may be characterised as a maladaptive mechanism, a temporary removal from their cyber and familial realities appeared to release some sense of comfort during episodes of IPV. Fernet et al. (2019), equally noted in their review that fear was a determining factor to indicate why cyber IPV should get its own label. Whilst this finding from the interviews of this research project gives supplementary evidence to the work of Fernet et al. (2019), it additionally demonstrates its relevance within the South African context.

#### **4.2.3 Feeling exploited within the intimate relationship**

The relationship between feeling exploited and feeling as though they were not loved was brought forward by two of the participants.

*I didn't feel right. I was just feeling very bad, like bad, bad. I was feeling like, he just use me for sex. And even now I just, I still feel the same. He was using me because of this messages. He shows me was never love me. You see? (Jojo).*

Shortly into Danny's pregnancy, her partner had ended the relationship. Danny reported that she had given her virginity to her ex-partner at the time of their relationship thus she felt exploited when the ex-partners current partner sent Facebook messages stating that the baby was not his biological child. Danny reported that these online communications with her ex-partner and his current partner made her question if he was with her just for the intimacy. Danny voiced feeling exploited by her ex-partner.

*I'm going to take the punishment. Then she said, "Yeah, and if you gave birth, he's going to do it, DNA test, because it's not his child." I said fine. So, I took him to what they want to do [conduct the DNA test]. At the end of the day, it's not going to hurt me, but it did hurt me. Actually, it made me sad because to think a guy I actually thought love me would do something like that. (Danny).*

Feeling exploited was similarly found in the work of Draucker and Martsolf (2010), where they noted that a participant felt that she was used for intimacy and transportation by her partner. Likewise, the findings of this research project indicates that the meaning making process included the understanding of being misused in their intimate relationships.

#### **4.2.4 The loss of self-worth through experiences of cyber IPV**

An abated self-worth was one of the hidden consequences of their experiences of cyber IPV. Mainly, cyber IPV was viewed either in the light of lack of respect or as the disbelief of their situation for most participants. This understanding emanated from their individual perceptions of their lived realities.

*I felt violated in a sense, whereby someone, who's someone, who's your partners supposed to trust you and supposed to protect you is now is violating you because at this same way he is making you feel like, um, it makes you feel unloved, right? It would go to a sense where you say, oh, I'm not being loved. I'm not being respected. Mostly that I felt disrespected because this is my partner. I'm with every day. There's not a day where you could say I'm not coming home. Or um, I'm hiding my cell phone like he was doing... So, I felt disrespected. I felt violated. I felt bit insecure because now was thinking, what is the staff thinking? (Lena).*

Self-doubt became a common phenomenon for Lena which culminated in constantly questioning herself, thus leading to low self-worth:

*They come time when you think was it the right thing I did. And then you think, oh maybe I, maybe I was wrong. Maybe I could have done things the other way around. (Lena).*

Jojo would reread WhatsApp messages due to her disbelief in the content of the messages from her partner. Seeing herself as less than worthy of love was the meaning that she derived from her encounters with digital partner abuse.

*... sometimes when I get sore, I started reading it over and over. Is it that true, I can't believe it, it is true that this man send me this messages? You know, when you are hurt and you're loving someone, you go over it. (Jojo).*

Danny's lowered sense of worth was tied closer to the lack of attention that she received from her ex-partner whilst she was pregnant with his child. Furthermore, a sense of disbelief that she and her unborn child were devalued by her ex-partner was articulated through his shared piece:

*... when I was three months pregnant, the first time I fall because I never fall, but I saw he uh, tattooed her [new partners] name on his hand. And I was like, okay, you couldn't, you can't do that for your child, but you want to do it for her. Although the child is not born yet you could have wait. And that's when I was stressing, start throwing stuff around. (Danny).*

For Tasha, feeling less than worthy came from the mixed WhatsApp messages she would get from her ex-partner. Here, the mixed messages would include online arguments directly followed by messages of affection:

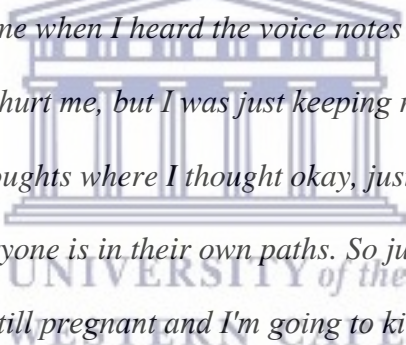
*... I feel like insecure. I feel I'm not worthy of it. You know, unappreciated. Um, and if I'm telling him this and he would be like, "You are unnecessary to feel like that, you know, I love you. You know, I just wanna be with you." (Tasha).*

Lowered self-worth was felt through insecurities and feeling undervalued. According to the Centers for Disease Control (2012), the lessening of self-worth is often influenced by psychological abuse (Lucero et al., 2014), and as seen in the analysis of the interview data so

far, the crux of cyber IPV is psychological perpetration. Howard et al. (2019), highlighted that in teenage relationships, cyber communication can enhance self-esteem. On the contrary, evidence in this analysis directs attention to the negative aftereffects of cyber IPV acts, that is, feeling insecure and having low self-worth. Parallel discoveries regarding diminishing self-value have been noted in other studies (Cardoso et al., 2019; Draucker & Martsof, 2010).

#### **4.2.5 Losing the desire to live**

A build-up of negative emotions coupled with feeling isolated and having no emotional support was interpreted as the root of suicidal thoughts emerging. Two respondents felt that they did not know how to cope with the cyber IPV and this culminated in the presence of suicidal thoughts in their pregnancies.



*Honestly, for me, that time when I heard the voice notes or read the messages, I felt like killing them... An it hurt me, but I was just keeping me strong. I didn't cry, but mostly I had suicidal thoughts where I thought okay, just take your life because no one is noticing you, everyone is in their own paths. So just take your life but then, I had to think about, I'm still pregnant and I'm going to kill both me and my child... So, I thought I'm going to take my life. I was drinking a lot of pills, lots of pills, but the pills actually made me sick. (Danny).*

*There was a point where I felt like I wanted to hurt myself. I thought of, um, I thought of taking tablets... I just thought of sleeping and not waking up. Because I felt like it was just too much. But at the end of the day, I didn't want to give up this guy. (Lena).*

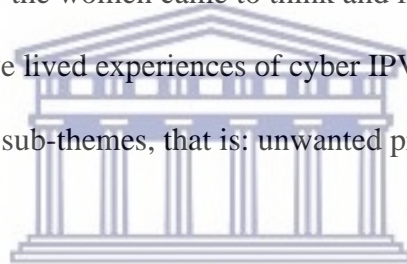
As seen from the excerpts of Danny and Lena, suicidal ideation became a health-related risk associated with cyber intimate partner violence. This finding is supported by the works of Draucker and Martsof (2010) and Fernet et al. (2019), however, their focus is primarily on

the adolescent population whereas this research project focuses on female adults, and more specifically on pregnant females. In this research project, emotional instability of the women was extensive and dangerous for their wellbeing. Suicidal ideation appeared to have been rooted in negative beliefs held about their altered role in the relationship. To this end, the deeply entrenched emotional pain seemed to be closely related to feeling abandoned in their personal relationships due to cyber perpetration by their partners.

Importantly, the pervasiveness of psychological distress was evident in the life stages, thus, affecting the experience of the pregnancy and motherhood.

#### **4.2.6 Lack of attachment**

Challenges with bonding with the baby pre and post birth is a theme that presented itself throughout the interviews. How the women came to think and feel about their pregnancies was informed by their subjective lived experiences of cyber IPV. The analysis of this section is further divided into the main sub-themes, that is: unwanted pregnancy and no affection for the baby.



##### **4.2.6.1 Unwanted pregnancy**

Not wanting the pregnancy stemmed from the experiences of cyber IPV in conjunction with a lack of partner support for the pregnancy. For some women, the pregnancy served as a reminder of the cyber abuse. A desire to rid themselves of this deep-seated psychological pain materialised into thoughts of abortion and adoption.

*I Googled how things, how, how, how can you terminate? How do you do it? And they would say, you need to go to the clinic to the day hospital... But the fact remains. It was so bad. The abuse was so bad that I had to actually think of killing my own baby, because it's the only thing that linked me to him. (Lena).*

*I just didn't want this child. I was very regretful. I was hurt. <Tearful> Um, sorry... I didn't tell my parents because I knew I didn't wanted to have this child, my plans was, um, to go for an abortion because like of the frustration that I had, what I went through. (Tasha).*

Tasha explained how depression and anxiety played a role in her first trimester, where she eventually looked for other ways to deal with her emotional and psychological discomfort. It was identified in the analysis that a sense of aloofness and detachment was coupled with the progression of the pregnancy. At this time, she expressed that she could not go through with the abortion despite not wanting her pregnancy, thus, she used narcotics as an aid for prompting a miscarriage. The use of narcotics was therefore twofold - to deal with her mental health and to initiate a miscarriage. Moreover, the desire to rid herself of the burden of pregnancy became pronounced by the intense methods she explored to remove herself from motherhood.

*I decided to turn myself to drugs. Um, I started using ecstasy. I was pregnant, remember I was pregnant, I was about a month when I took my first ecstasy tablet. Cause I just wanted this child to come off [miscarry]. I just wanted to feel a certain way. Cause I didn't want to feel how I felt <tearful> um, so I went to a party it's called trans parties. And so, I just wanted to feel a certain way... There at the KFM party I used ecstasy there as well, pregnant two months, um, and it went on and it started to become a habit. And I was just wishing and I was just wishing, I miscarry because I don't have that in me for the abortion. But now at this point, the child is just stuck and I'm feeling miserable because I'm having morning sickness and I'm feeling depressed. And I have anxiety at any given time. And I just think about certain things then I would get an anxiety attack. And then I started using Coke [cocaine] and it went on and, and this child is just stuck in. Like she is going nowhere. (Tasha).*



After struggling to get an abortion done, adoption became the next avenue that Tasha explored as a means to delink herself from her unwanted pregnancy. Tasha had asked a friend who was experiencing difficulty conceiving, if the friend would adopt her child once the baby was born:

*... I still had that anxiety and I spoke to her and I was like, listen here, you, you and your husband are struggling. Why don't you just take this child? Cause I don't want it. I don't want this child at all. I have no attachments to this child. I have no attachments to my pregnancy. I was still doing whatever I wanted to do. I was still using the coke [cocaine] and um, I think I was about five and a half months. (Tasha).*

Jojo articulated the pain and lack of bonding that she experienced in her recent pregnancy:

*I didn't feel my pregnancy and I didn't enjoy it. You see the first one I enjoy it but this one, uh uh, I didn't enjoy it. I just want it out. I just want it done. And thanks God, it's out now. But it wasn't nice, this pregnancy. I wasn't excited, like the way I feel before, excited with my little girl and my little boy. This one, it was not excitedness for me, it was just sore. I want to give the child away... My friend told me to give it away, so I was on my way to give my child away, for adoption. (Jojo).*

#### **4.2.6.2 No affection for the baby**

All the participants in the research project had given birth at the time of their interviews and thus shared on their experiences of the pregnancy and post-birth. Here, a lack of bonding was not only present during the pregnancy but also after the baby was born. It was articulated by some of the participants that the bond with their babies was disrupted by the emotional turmoil endured in their pregnancies. A lack of bonding with the pregnancy was seen as a core contributing factor to feeling no or very little affection for their babies post birth. Little affection was tied to a lack of attachment with the baby.

*But for me, it was like, they pushed me away from my child and it did hurt me because I couldn't keep her... I can't bond with her really. When she cry, it's a, it annoy me. She mustn't cry, she must keep her mouth the whole time. (Danny).*

*It was because I was like, I, I removed myself at the stage from the baby. I, I wouldn't speak to the baby. I wouldn't, I would, in a way I, I resented the baby. I, I, I, I, I didn't love the baby. I just felt like, oh, this is him. This is all part of him. And it's like, I didn't want it. So yes, it did affect my bonding with the baby. (Lena).*

*I don't talk too much with my baby... You see? Because it's still sore. Like, you know, like a mother talk to her baby. I just talk a little and stop. While he is laying there, I give his bottle, I make sure he is dry. I make sure he's clean. (Jojo).*

Stephenson et al. (2018), noted in their work that online communication may create avenues for abuse to occur, thus increasing the field of psychological abuse. This research project furnishes evidence that psychological abuse does take place over cyber platforms and that the mental health repercussion of such abuse is widespread. The emotional and psychological responses described by the women highlight how their thought processes, perceptions and behaviours were altered by their experiences of cyber IPV during their pregnancies.

Furthermore, a lack of desire to keep the pregnancy to full term became a reality for some women – thus disrupting the maternal bonding process.

#### **4.3 Health aspects during pregnancy**

Stress is one of the cardinal points in the analysis thus far and has shown to have stemmed from various acts of cyber IPV. From experiences reported by the respondents, the stress not only caused psychological discomfort but also health challenges during their pregnancies.

The health concerns were wide-ranging, and all were reported as being a result of stress. Each respondent had expressed that it was either the MOU nurse or doctor who had indicated that

stress was the source of their medical concerns during the pregnancies. Each participants' health effect is highlighted:

Jojo voiced how stressful her prenatal visits were as she was informed that the excessive stress was causing challenges in the baby's development.

*They said, I must stop stressing and um, my bloods, sometimes a bit high, sometimes it's low. It did make like this make the child like slowly, you see. It don't want to turn, can't see what it is and all that stuff. I must relax at home and not stress too much.*  
(Jojo).

Lena described how she had continuous bleeding in her first trimester. The MOU nurses had informed her that if she was to continue to bleed, she would then miscarry and the potential to miscarry was high at this time. The MOU nurses had also identified that stress was the cause of the bleeding and had suggested that Lena receive support services.

*Cause I started bleeding for two to three weeks. I bled, I bled, I was just so stressed until I got by the clinic and the sister [said], "If you want to lose your baby, I don't know what's going on".* (Lena).

For Koki, her stress presented health challenges for the pregnancy. Koki found herself going to the hospital multiple times due to her stress level being too high for her to manage alone. The stress affected the heart rate of her unborn child. The MOU staff had informed her that not only would her stress affect the baby's growth and health during the pregnancy but will also affect the baby after birth as stress affects the milk production. This new information caused even more stress for Koki when she was pregnant.

*Just baby's heart beating was low about [because of] the stressing.* (Koki).

*This stressing is not good for for her because she must drink that milk and all that stuff. So, I just sit an focus on her. I don't stress because I'm breastfeeding her in the milk, breastfeeding and stressing is not good she can get sick and all that stuff.*

(Koki).

The health effects described by the participants are varied and individualistic, however, the grounding factor for all was the factor of stress which originates from their personal experiences of cyber IPV.

## **Conclusion**

The analysis of data describes the lived realities of pregnant women of the twenty-first century in South Africa. Under the guidance of the research aims and objectives, the analysis focussed on the experiences of cyber intimate partner violence and on the emotional and psychological experiences thereof. Exertion of cyber control and verbal aggression culminated in threats and manipulation for some of the women. The mental health was furthermore impacted in various ways for the women in the reach project. Fear, appeared to be strongly linked to the behavioural pattern of isolation, whereas, feeling exploited was associated with lowered self-worth. Suicidal ideation as well as a feeling of detachment to the pregnancy became a further challenge.

Whilst answering the research question of this project, the findings created another key aspect: health aspects during pregnancy. These health aspects which were brought to light in the analysis, show the relationship that stress has on the physical wellbeing of pregnant women and their unborn babies. Evidence from the findings supports previous literature on cyber IPV, however, the association between cyber IPV and pregnancy as explored in this research project bring to the fore the emotional, psychological and health implications of pregnant women in South Africa – a novice academic field.

## CHAPTER 5: CONCLUSION

In this final chapter, the research project is brought to a close. Salient findings are summarised and presented according to the objectives of the project. The lived experiences are enunciated, bringing understanding to the newer form of domestic violence - cyber intimate partner violence in pregnancy. The significance of the project and the limitations thereafter follow, with the recommendations concluding the research project.

### 5.1 Summary and discussion of findings

The summary is positioned according to the core findings in the research project - the acts of cyber IPV, emotional and psychological responses, and the health aspects during pregnancy.

#### 5.1.1 The acts of cyber IPV

In this research project, control was highlighted as one of the main activities of cyber IPV over social media applications. For the participants in the project, removal of their personal phones caused them distress as this was done forcefully by their partners. The secret removal of social media from the participants device and sending impolite messages to WhatsApp groups were additional methods of digital control that surfaced in the data. Such control led to further disruptions for one specific participant who indicated that her work communication had been negatively affected as a result. This finding was similar to Lucero et al. (2014) finding which indicated that messages would be deleted by their partner before they could read it.

Contrary to the domination that was exercised over the participants SNS's, the participants found that they were being restricted in terms of what they could observe on their partners phones. Passwords and the ability to delete messages made this a possibility for some.

Mistrust from the partners side was thus fuelled by their monitoring behaviours as noted by Baker and Carreño (2016). Jealousy from the partners seemed to feed cyber abuse instances toward the participants, however, in this research project the experiences of pregnant women

were illuminated. For participants, a deeper meaning extracted from these instances of digital control is the loss of individuality in the personal relationship. Removal of ownership of their personal communication with others outside of their intimate relationships therefore surfaced as another repercussion of cyber IPV.

The second salient act of cyber IPV noted by most of the participants was verbal aggression. Verbal aggression displayed itself through profanity and aggressive tones over SNS's. An element that surfaced in the project was that verbal aggression was not limited to the current partner but rather moved to aggression coming from the partners new girlfriend/intimate partner. The experience of cyber IPV was thus double fold for some of the participants as cyber bullying became the secondary form of cyber abuse that they experienced. With this being noted, manipulation and homicidal threats formed part of the online aggression that was endured by some participants. For one participant, Tasha, homicidal threats were overtly communicated:

*And then he was like, yeah, "I'm gonna burn down your house." And I'm like, okay, are you threatening me?* (Tasha).

Similarly, Draucker and Martsof (2010), found homicidal threats to be linked to aggressive communication from a disgruntled partner.

Soliciting of sexual engagement was facilitated by recordings of a sexual nature being made and sent by a participant's partner. These recordings were done without consent or knowledge of the client. Manipulation into unwanted sexual activity then become a more frequent phenomenon. It was clear that this was a sensitive topic as the client's body language indicated a sense of shame and guilt as she shared. Furthermore, two participants emphasized the fear linked to homicidal threats which were made by their unhappy partners. Such threats brought along terror as they felt a sense of vulnerability.

For the participants, these wide-ranging experiences remained at the surface of their minds. For some, negative thought processes superseded their rational and positive thought processes. In relation to this, an urge to isolate appeared to be a way in which mental health was somewhat protected. Protection – a meaning that was not explicitly recognised by the participants. Body language and emotional signals were poignant throughout the interviews and are indicative of the unremitting emotional and psychological repercussions of cyber IPV during pregnancy.

The participants interpretation of their circumstances highlighted the removal of power in their relationships. This finding was in contradiction of Hellevik's (2019) note that online social communication is an equal playing ground. With the removal of power, a sense of vulnerability opened up. Disparities in the individual roles of partners resultantly appeared to be a catalyst to the inequality within intimate relationships. Powerlessness therefore translated into one of the fundamental deep-seated meanings derived from the experiences of experiencing cyber IPV during pregnancy.

### **5.1.2 Emotional and psychological responses**

Stress was noted as a key response for many of the participants. Excessive telephone calls and accusations of memorising peoples telephone numbers were examples of cyber IPV that led to feeling stressed. A disturbance in routine, such as eating and sleeping patterns resulted from the experiences of stress during the pregnancy. Here, one participant found herself not eating, having disrupted sleep and even experienced forgetfulness. Repeated hospitalisation became a reality for another participant as her experiences of cyber IPV increased her stress level which in turn affected her pregnancy. Resorting to coping strategies was a key tool for some participants, however, in relation to stress, some maladaptive strategies were used. For instance, using alcohol and illicit substances.

Fear was associated with anxiety and isolation. Some of the participants highlighted that it was necessary for them to stay indoors and to avoid social interactions rather than to face further instances of partner violence. Psychological effects such as anxiety attacks and depression were expressed as the effects of intense fear. This finding corresponded to the study done by Borrajo and Gamez-Guadix (2016), where cyber IPV and the psychological experience of anxiety were correlated.

Exploitation was perceived as being misused in their intimate relationships. The meaning made by two participants was that they were used for sexual gratification by their partners rather than for a deeply meaningful relationship. Feelings of being devalued correspondingly surfaced as part of the understandings that were linked to their perceived realities. For one participant, feeling exploited was furthered by the comments she received from her ex-partner's new partner. These comments questioned the paternity of the infant that she was pregnant with, and this led to her questioning the basis of the relationship that she had with her ex-partner. Moreover, the feeling of being exploited was added to her perceived reality.

One of the key meanings drawn from the participants self-reported experiences, was the internalisation of doubt. Self-doubt seemed to be particularly associated to the feeling of exploitation in the partnered relationship. Disbelief with the messages received led to re-traumatization through the act of rereading messages – for one participant, the pain culminated into lowered self-worth as she started to internalise the negativity from her intimate partners digital messages. Self-doubt and insecurity were further heightened by mixed cyber texts, where affectionate messages would immediately follow texts which displayed cyber psychological abuse. Such displays created the platform for being devalued and ultimately negatively affecting self-worth as a pregnant woman and as a mother at the present. The consensus of the participants is that despite having given birth and caring for



their babies, their sense of confidence and worth did not improve. This highlights the pervasiveness of psychological abuse emanating from cyber IPV during pregnancy.

Emotional build-up, coupled with isolation and the absence of support culminated into suicidal ideation. For one participant, keeping the dangerous emotions to herself was linked to the changed behaviours that arose during episodes of cyber IPV whilst she was pregnant. This participant indicated that she would isolate from all social contact including her family and this contributed to feeling disconnected from all supportive avenues. For another participant, conflicting feelings of being overwhelmed by the cyber abuse and simultaneously wanting to stay in the relationship gave birth to suicidal ideation. For both participants, plans to end their lives whilst being pregnant were present, thus revealing the intensity of emotional and psychological discomfort during their pregnancies – a finding that related to the work of Singh et al. (2016). A deep sense of wanting to discharge themselves of their lived realities of cyber abuse during their pregnancies seemed to be closely entwined with the emotional pain that they experienced within their intimate relationships. An escape route from their lived experiences of cyber IPV whilst pregnant.

Lack of attachment to gestation filtered from the cyber IPV abusive episodes. An unwanted pregnancy became a desire of some of the participants. The memories and negative emotions connected with the cyber abuse moved the thinking processes for some of the participants to being dismissive of their pregnancy's. The pregnancy seemed to serve as a reminder of their cyber abuse experiences and a means to deal with this deep-seated pain was to contemplate either termination of the pregnancy or abortion. Whereas joy lacked in the experience of the pregnancy, regret and pain served as prominent aspects driving the thoughts of no longer wanting their pregnancies. For one participant, the emotional and psychological discomfort that she sat with during the pregnancy moved her from considering abortion through medical means to using ecstasy and cocaine as a method to initiate the abortion. The intensity of

psychological and emotional discomfort was therefore highlighted through this participants experience. A clouded sense of detachment therefore became another meaning derived from the participants subjective accounts.

Similarly, an urge to have the pregnancy completed and to rid themselves of their distress developed. The decision to physically detach the self from the pregnancy and the baby was key in the meaning-making process for two participants. Here, adoption was discussed and considered in correspondence to the absence of attachment to the pregnancy. Although none of the participants terminated their pregnancies nor had given their babies up for adoption, the decision to raise their babies has not been without challenges.

Depression experienced during pregnancy is noted as perinatal depression (Pellowski et al., 2019) and may increase when exposure to intimate partner violence occurs. This corresponded to some of the participants experiences and was noted to affect the attachment process with the pregnancy. The maternal bonding process was disrupted by the impact of cyber IPV during the gestation period. Limited or no affection for the baby was seen through experiencing anger and annoyance when the baby cried. Here, a need for the baby to stop crying without consoling from the mother materialised into recurrent thoughts and eventually distant behaviour. A removal from the mother-role was shared as not engaging with the baby unless it was for feeding or washing. Similarly, talking with the baby was rare. The understanding that love for the baby was somewhat replaced by resentment and annoyance which is indicative of the how cyber IPV during pregnancy permeates the borders of motherhood. The bonding between mother and infant gets disrupted from pregnancy and this filters into the post birth attachment processes, as highlighted by participants experiences.

From the extensive emotional and psychological experiences of the participants, different meanings were attached to their situations. From these meanings derived by participants,

further interpretation indicated that detachment was a pivotal aspect for the participants.

Detachment presented itself through some feelings of being overwhelmed and even alone. As such detachment from support networks moved further onto detachment to the pregnancy and the baby during early days post pregnancy.

### **5.1.3 Health aspects during pregnancy**

The lived experiences of pregnant women experiencing cyber intimate partner violence is the focal point of this research project. A key aspect that arose in the data was the health aspects related to the lived experiences of the participants. Stress was identified as the chief contributor to negative effects on the pregnancy.

Multiple prenatal medical visits had identified continuous bleeding in the first trimester and rapid fluctuations in blood pressure levels as the initial signs of stress negatively impacting the pregnancy. Participants were informed by medical staff that these factors would endanger their unborn babies' heartbeat and slow down their developmental process. Ultimately, prolonged stress would induce a miscarriage. For one participant, continuous hospitalisation occurred throughout the 9-month gestation period, due to her stress levels being elevated daily by her experiences of cyber IPV. For her, managing the pregnancy was tremendously challenging and being informed by medical staff that her stress will additionally affect her milk production exacerbated her stress levels.

### **Synthesis**

When exploring the core themes, it became strikingly evident that cyber IPV during pregnancy was not isolated to the pregnancy period and had expanded over time. Moreover, the perpetrators were no longer limited to the intimate partner, thus becoming more wide ranging in perpetration. For the participants, cyber IPV as a result rendered a more holistic negative impact for women as mental and physical health were compromised.

Impediments in physical health showed the deeper lying effects related to the trauma caused by experiences with cyber IPV during the pregnancy period. An association between physical health during the pregnancy and the experience of stress was illuminated. The changes in eating and sleep patterns of one of the participants highlighted the powerlessness and vulnerability that was cultivated by having experienced cyber IPV during pregnancy – adding to the feeling of distress.

Distress from the acts of cyber IPV seemed to have altered positive and rational thought processes into more negative processes for all the participants. For instance, an avenue to escape the reality of their situation, was the use of narcotics and alcohol by two participants. For other participants, isolation became a protective way to shield themselves from the deep-seated distress that was experienced. Isolation was additionally an element that furthered the experience of having limited social support throughout gestation – support which is greatly needed during a pregnancy. Distress thus became a central aspect to impacting the social support and coping systems employed by the participants- an indication of the complexity of having been exposed to intimate partner violence through online platforms.

Leading on from the above note, the negative effect on individuality furthermore became evident in the research project. Participants were stopped from demonstrating their sense of self and engaging with their social circles- thus halting the process of self-development through agency. Agency within these circles was resultantly reduced as a result of the cyber abuse. In this regard, learning to take on a new role as a mother would often form part of the evolving individuality through the life span, however, feelings of resentment towards motherhood were rather established due to the deep-seated pain that was associated to the pregnancy. Detachment to the baby and the pregnancy therefore disrupted the mother-role from being established for some of the participants. Here, the implication for child rearing and child development became of great importance.

Trauma as experienced through cyber IPV was not limited to the current or past romantic partner. As seen from the experiences of some of the participants, the perpetrators new romantic partner became another source of bullying and trauma. This was a particularly interesting phenomenon that was found in the project as it indicative of how vast the elements of cyber IPV reach. Cyber bullying (a separate aspect from cyber IPV) can therefore be drawn in as an additional public health concern to be explored in relation to cyber IPV.

The implication of these findings consequently give rise to the need of further exploration by other interests, as the findings indicate that the IPV perpetrated through cyber avenues affect more than only the primary survivor of the experience. The pregnancy as an entirety is affected as both the physical health of the gestation period and the emotional bonding between mother and the unborn child is disrupted by the perpetration of cyber IPV. The ability to make rational choices whilst pregnant is halted or rather altered by the deep-seated emotional responses associated to the occurrences of cyber partner abuse – indicating that interests of child development, trauma management and public health can be brought into this newer form of IPV to explore the vast nature of this phenomenon.

To conclude the discussion, cyber IPV during pregnancy has dire consequences on a women's health and wellbeing. Emotional wellbeing becomes compromised, and psychological health became negatively charged. Not only does cyber IPV affect women in their current abusive situations, their emotional and psychological health suffer after such abusive episodes. Again, behaviour changes become more apparent and start to show more maladaptive coping strategies. The isolation and decreased self-worth in particular, seem to prevail for the women who have been subjected to cyber IPV in their pregnancies. Whilst some of the participants were able to make links between their experiences of cyber perpetration and their psychological and emotional responses, an absence of how understanding was established from their subjective lived realities was present.

The adverse health effects of cyber IPV on the gestation period additionally seemed to facilitate a rapid rise in stress levels as well as open the door to the possibility of a miscarriage. Furthermore, the lack of attachment to the pregnancy and to the baby after birth were noted as aftermaths of cyber IPV for pregnant women in this research project. All of the above gives an indication of the phenomenon of cyber IPV and how pregnant women experience this new form of partner abuse in the twenty-first century.

## **5.2 Limitations**

It is important to acknowledge the limitations for completing this research project.

Firstly, the covid19 pandemic had a great influence on the approval processes for the research project. The delay in the approval processes, set back the completion of the project as approvals to commence with the research project took a lot of time to be received. Inevitably, this prevented starting the project. The Department of Health's National Health Research Database (NHRD) granted approval 8 months after the application was submitted and an additional waiting period was held prior to gaining permission to begin sampling processes at the medical facility.

Furthermore, the NHRD granted permission to utilise two medical facilities however, only one medical facility, a Community Health Centre (CHC), gave permission for sampling to take place at the facility. The above approval process had a significant effect on the duration of the research project.

Secondly, it was found that the awareness of cyber intimate partner violence was exceedingly low. During engagements with potential participants, it became evident that only cyber violence in the form of cyber bullying in schools was understood. Explanations and descriptions of cyber IPV were furnished to potential participants who requested information. The lack of awareness of cyber IPV may have contributed to the small sample size in the

project. Similarly, the high dropout rate may be linked to the above as well as to potential embarrassment and fear of speaking out about their experiences of cyber IPV during their pregnancies – a topic that they do not know much of.

Thirdly, the sample was primarily located in the Western Cape despite the research invitations being posted nationally within South Africa. This may have contributed to the all-English interviews that took place. Had a more diverse sample been reached and with interviews being done in the mother tongue, even more rich data may have been yielded. Nonetheless, this research project was able to gather rich data and reach the objectives set out.

### **5.3 Recommendations**

The objective of this research project was to explore the lived experiences of pregnant women facing cyber IPV. To further illuminate these lived experiences, it is recommended that the psychological and emotional aspects be explored in further depth. Additionally, insight into the psychological and emotional aspects occurring post birth may also create awareness into the pervasiveness of the cyber IPV – noting that the negative effects during pregnancy may continue well after the pregnancy.

Furthermore, insight into current coping strategies of pregnant women experiencing cyber IPV is pivotal. A recommendation is therefore made to gain further awareness of these strategies. Additionally, such research may provide a portal to the current support that is required to support pregnant women. Initiation of support and empowerment programmes may thus commence.

In line with the above, it may be noteworthy to understand the attachment styles that occur after birth and how this may impact the development of the infant. It is thus recommended

that exploratory and observational research be considered with the aim of understanding the impact of cyber IPV during pregnancy on attachment styles in children.

Finally, a more diverse sample, which accounts for all cultural and linguistic differences may extend the richness of information thus adding to the understanding of this widely occurring phenomenon. Interviews held in all the official languages of South Africa may subsequently facilitate this gathering of rich data.

## **Conclusion**

In bringing this final chapter to a close, it is noteworthy to highlight that this research project was able to bring to the surface the deep-seated experiences of pregnancy and cyber IPV. A safe space was opened for the women to share their experiences, and this contributed to the rich information gathered. Similarly, completing this research project enabled the student to reflect in her own ideologies and understandings of the phenomenon. A place to observe the lived realities of fellow females, the interviews became a Pandora's box of the experiences of cyber IPV. Moreover, this Pandora's box illuminated that the unspoken (body language) elements of interviews grasp key information of this dangerous phenomenon that is becoming more widespread and far reaching within the human psyche as technology continues to evolve. Implications for other interests, namely, trauma, public health and child development are similarly key areas that may be able to draw on this topic to provide more insight into the phenomenon and its implications for both mother and child. The research project was not without limitations, however, moving forward, there is hope that there will be further inquiry into this phenomenon. Creating more awareness and understanding of cyber IPV during pregnancy with the hope of support and empowerment for women to follow.



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## APPENDICES



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### Appendix A: Information sheet

#### INFORMATION SHEET

**Project Title:** *An exploration of the subjective lived experiences of pregnant survivors of cyber IPV.*

**Dear Madam**

#### **What is this study about?**

This is a research study being conducted by a Psychology Master's candidate, Miss Sabrina Maharaj, at the University of the Western Cape. I am inviting you to participate in this research study because your experiences of cyber intimate partner violence (cyber IPV) can add to the understanding of how this type of partner violence is experienced during pregnancy. The purpose of this research study is to understand some of the thoughts and feelings that you are having or have had as a pregnant woman experiencing cyber violence from her partner.

#### **What will I be asked to do if I agree to participate?**

The nature of the research will be explained to you and any questions or concerns that you have will be addressed. If you agree to participate, you will be asked to sign an informed consent form which will allow me to ask you questions about your personal experiences of cyber IPV occurring during your pregnancy. Additionally, you will be asked permission to audiotape the interview. You will then be asked to participate in confidential interviews with me. The interview should last approximately 1 hour. More interviews may be held with you if additional information or clarity is needed. The interviews will be held at a safe and secure

place where you feel most comfortable or will be done on Skype. A debriefing session will take place after the interviews. The findings of the research will be presented to you. In the interview, you will be asked about your use of cell phones and social networking sites and what some of the thoughts and feelings that you have had during your pregnancy due to experiences of cyber IPV by your partner. Furthermore, I would like to ask you how you are coping or have coped during your pregnancy with having experienced IPV in the form of cyber violence. If there are any other areas regarding your experiences of cyber IPV in your pregnancy that I have not asked during the interview, you are more than welcome to share these at your will.

### **Would my participation in this study be kept confidential?**

I undertake to protect your identity and the nature of your contribution. To ensure your anonymity, the interviews will not contain information that may personally identify you. Your name will not be included in the interviews; rather a pseudonym will be used during the interview. Through the use of a pseudonym, I will be able to link your interview to your identity; and only my supervisor and I will have access to this information.

To ensure your confidentiality, the recordings of each interview will be password protected and all transcriptions of the data will be kept in password protected files. Only my supervisor and I will have access to the data. After the completion of the research study, all recordings will be deleted. The interview transcripts will be destroyed after 5 years. If an additional report or article is published on this research study, your identity will be protected.

In accordance with legal requirements and/or professional standards, I will disclose to the appropriate individuals and/or authorities' information that comes to my attention concerning potential harm to you or others. In this event, I will inform you that I have to break confidentiality to fulfil my legal responsibility to report to the designated authorities.

### **What are the risks of this research?**

There may be some risks from participating in this research study. All human interactions and talking about self or others carry some amount of risks. I will nevertheless minimise such risks and act promptly to assist you if you experience any discomfort, psychological or otherwise during the process of your participation in this study. Where necessary, an appropriate referral will be made to a suitable professional for further assistance or intervention.

### **What are the benefits of this research?**

This research is not designed to help you personally, but the results may help me to learn more and to understand the deep-seated experiences of cyber IPV occurring during pregnancy. At any time during the interviews you may stop or ask me to skip a question if you feel it is too sensitive in nature or if you do not feel ready to answer it at that time. You will not be pressured to answer any questions that you may feel uncomfortable with. A list of counselling organisations and facilities will be given to you to further assist with any discomfort that you may experience during or after the interview. Through sharing your experiences, you will greatly help me understand the phenomenon of cyber IPV during pregnancy. I hope that, in the future, other people might benefit from this research study through improved understanding of the phenomenon of cyber IPV occurring during pregnancy.

### **Do I have to be in this research and may I stop participating at any time?**

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose any benefits to which you otherwise qualify.

### **What if I have questions?**

This research is being conducted by Miss Sabrina Maharaj at the Psychology Department of the University of the Western Cape. If you have any questions about the research study itself, please contact Miss Sabrina Maharaj on telephone: 076 472 8824 or e-mail:

[3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za).

Alternatively, you may contact my research supervisor, Professor Michelle Andipatin on telephone: 021 959 3092 or e-mail: [mandipatin@uwc.ac.za](mailto:mandipatin@uwc.ac.za).

Should you have any questions regarding this research study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

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## Appendix B: Information sheet Afrikaans

### Aanhangsel B: Inligtingsblad Afrikaans

#### INLIGTINGSBLAD

**Projektitel: 'n Ondersoek na die subjektiewe ervarings van swanger oorlewendes van kuber-intieme maatskaplike geweld.**

**Geagte Mevrou**

#### **Waaroor gaan hierdie studie?**

Dit is 'n navorsingstudie wat uitgevoer is deur 'n meesterkandidaat in sielkunde, mej Sabrina Maharaj, aan die Universiteit van Wes-Kaapland. Ek nooi u uit om deel te neem aan hierdie navorsingstudie, omdat u ervarings van kuber-intieme maatskaplike geweld (kuber-intieme maatskaplike geweld) 'n bydrae kan lewer tot die begrip van hoe hierdie maat van maatskaplike geweld tydens swangerskap ervaar word. Die doel van hierdie navorsing is om sommige van die gedagtes en gevoelens wat u gehad het as 'n swanger vrou wat kubergeweld by haar maat ervaar, te verstaan.

#### **Wat sal ek gevra word om te doen as ek instem om deel te neem?**

Die aard van die navorsing sal aan u uiteengesit word, en u kan vrae of bekommernisse wat aandag kry, aanpak. As u instem om deel te neem, u sal gevra word om 'n ingeligte toestemmingsvorm te onderteken wat my in staat sal stel om u vrae te stel oor u persoonlike ervarings van gewelddadige kubermaat tydens die swangerskap. Daarbenewens sal u gevra word om die onderhoud te oudio-band. U sal dan gevra word om deel te neem aan vertroulike onderhoude met my. Die onderhoud behoort ongeveer een uur te duur. Meer onderhoude kan met u gevoer word as addisionele inligting of duidelikheid nodig is. Die onderhoude word



gehou op 'n veilige plek waar u die gemaklikste voel of op Skype gedoen word. Na afloop van die onderhoud sal 'n debriefingsessie plaasvind. Die bevindinge van die navorsing sal aan u voorgehou word.

In die onderhoud sal u gevra word oor u gebruik van selfone en sosiale netwerke, en wat die gedagtes en gevoelens wat u tydens u swangerskap gehad het as gevolg van ervarings van kuber-intieme maatskaplike geweld deur u maat. Verder wil ek u vra hoe u tydens u swangerskap te kampe het met IPV in die vorm van kubergeweld. As daar enige ander terreine rakende u ervarings van kuber-intieme maatskaplike geweld tydens u swangerskap is wat ek nie tydens die onderhoud gevra het nie, u is welkom om dit volgens wil te deel.

### **Sal my deelname aan hierdie studie vertroulik gehou word?**

Ek onderneem om u identiteit en die aard van u bydrae te beskerm. Om u anonimiteit te verseker, die onderhoud sal nie inligting bevat wat u persoonlik kan identifiseer nie. U naam sal nie by die onderhoud ingesluit word nie; eerder 'n skuilnaam sal tydens die onderhoud gebruik word. Deur die gebruik van 'n skuilnaam kan ek u onderhoud aan u identiteit koppel; en slegs my toesighouer en ek sal toegang hê tot hierdie inligting.

Om u vertroulikheid te verseker, die opnames van elke onderhoud sal met 'n wagwoordbeskerming beskerm word en alle transkripsies van die data word in wagwoordbeskernde lêers bewaar. Slegs my toesighouer en ek sal toegang oor die data hê. Na voltooiing van die navorsingstudie alle opnames sal uitgegee word. Die transkripsies van die onderhoud sal na 5 jaar vernietig word. As 'n addisionele verslag of artikel oor hierdie navorsingstudie gepubliseer word, sal u identiteit beskerm word.

In ooreenstemming met wetlike vereistes en / of professionele standaarde, ek sal die toepaslike individue en / of owerhede se inligting bekend maak wat onder my aandag kom rakende moontlike skade aan u of ander. In hierdie geval sal ek u inlig dat ek vertroulikheid moet verbreek om my wetlike verantwoordelikheid na te kom by die aangewese owerhede.

### **Wat is die risiko's van hierdie navorsing?**

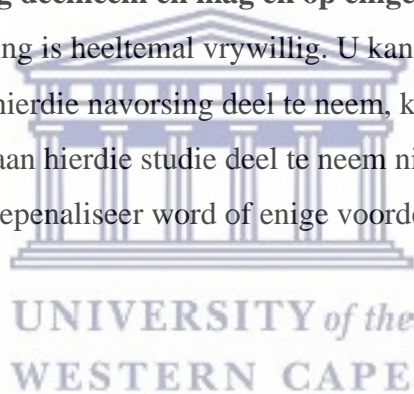
Deelname aan hierdie navorsingstudie kan moontlik wees. Alle menslike interaksies en om oor self of ander te praat hou 'n mate van risiko's in. Ek sal nietemin sulke risiko's verminder en dadelik optree om u te help as u ongemak, sielkundig of andersins ervaar tydens u deelnaam aan hierdie studie. Waar nodig, sal 'n toepaslike professionele persoon verwys word vir verdere hulp of ingryping.

### **Wat is die voordele van hierdie navorsing?**

Hierdie navorsing is nie bedoel om u persoonlik te help nie, maar die resultate kan my help om meer te leer en die diepliggende ervarings van kuber-intieme maatskaplike geweld tydens swangerskap te begryp. U kan enige tyd tydens die onderhoude stop of a vraag slaan as u voel dat dit te sensitief van aard is, of as u nie gereed is om dit op daardie stadium te beantwoord nie. U sal nie onder druk geplaas word om vrae te beantwoord waarmee u ongemaklik voel nie. 'N Lys van voorligtingsorganisasies en fasiliteite sal aan u gegee word om u te help met die ongemak wat u tydens of na die onderhoud kan ervaar. Deur u ervarings te deel, sal u my baie help om die verskynsel van kuber-intieme maatskaplike geweld tydens swangerskap te verstaan. Ek hoop dat ander mense in die toekoms ook voordeel kan trek uit hierdie navorsingstudie deur 'n beter begrip van die verskynsel van kuber-intieme maatskaplike geweld wat tydens swangerskap voorkom.

### **Moet ek aan hierdie navorsing deelneem en mag ek op enige tydstip ophou deelneem?**

U deelname aan hierdie navorsing is heeltemal vrywillig. U kan kies om glad nie deel te neem nie. As u besluit om aan hierdie navorsing deel te neem, kan u op enige tydstip ophou deelneem. As u besluit om nie aan hierdie studie deel te neem nie, of as u ophou om op enige tydstip deel te neem, u sal nie gepeenaliseer word of enige voordele verloor waarvoor u anders kwalifiseer nie.



### **Wat as ek vrae het?**

Hierdie navorsing word gedoen deur Mej Sabrina Maharaj aan die Sielkunde-afdeling aan die Universiteit van Wes-Kaapland. As u enige vrae het oor die navorsingstudie self, kontak

Sabrina Maharaj op telefoon: 076 472 8824 of e-pos: [3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za).

Alternatiewelik kan u my studieleier, Professor Michelle Andipatin, kontak: 021 959 3092 of e-pos: [mandipatin@uwc.ac.za](mailto:mandipatin@uwc.ac.za).

As u enige vrae het rakende hierdie navorsingstudie en u regte as 'n deelnemer aan die navorsing, of as u probleme met die studie wil rapporteer, kontak asb:

Professor Maria Florence

Departementshoof: Sielkunde

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Professor Anthea Rhoda

Dekaan: Fakulteit Gemeenskaps- en Gesondheidswetenskappe

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VERWYSINGSNOMMER: BM20/2/2



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## Appendix C: Information sheet isiXhosa

### Isihlomelo C: Iphepha lolwazi isiXhosa

#### IPHEPHA LOLWAZI

**Isihloko seNgxelo yoPhando:** *Amaxhoba akhulelweyo athe aphila nokuhlukunyezwa ngamaqabane awo kumakhasi onxubelelwano.*

#### Mhlekazi abathandekayo

#### Lunga ntoni olu phando?

Olu luphononongo lophando olwenziwe ngumgqatswa kwiCandelo lezeMpilo yezeengqondo (Master's), ngoNkosazana Sabrina Maharaj, kwiDyunivesithi yaseNtshona Koloni. Ndiyakumema ukuba uthathe inxaxheba kolu phando kuba amava akho obundlobongela kumakhasi onxubelelwano obusondeleyo (cyber IPV) anokongeza ekuqondeni ukuba olu hlobo lodlame lweqabane lumchaphazela njani okulelweyo. Injongo yolu phononongo lophando kukuqonda ezinye zeengcinga kunye neemvakalelo othe wanazo njengomfazi okhulelweyo ofumana olu hlobo lobudlobongela kumakhasi onxubelelwano kwiqabane lakho.

#### Yintoni endiza kucelwa ukuba ndiyenze ukuba ndiyavuma ukuthatha inxaxheba?

Uhlobo lophando luya kucaciselwa wena kunye nayo nayiphi na imibuzo okanye iinkxalabo onokuba nazo zingacaciswa. Ukuba uyavuma ukuthatha inxaxheba, uya kucelwa ukuba utyikitye ifomo yemvume enolwazi eza kundivumela ukuba ndikubuze imibuzo malunga namava akho obundlobongela kumakhasi onxubelelwano obusenzeka ngexesha lokukhulelwa kwakho. Ukongeza, uya kucelwa imvume yokuba lushicilelwe udliwanondlebe. Uya kucelwa

ukuba uthathe inxaxheba kudliwanondlebe oluyimfihlo kunye nam. Udliwanondlebe luyakuthatha malunga neyure enye. Ezinye iindliwanondlebe ezilandelayo ziyakuthi zibanjwe kunye nawe ukuba kufuna ulwazi olongezelelweyo okanye ingcaciso efunekayo.

Udliwanondlebe luya kubanjelwa kwindawo ekhuselekileyo nenqabisekileyo apho uziva kamnandi khona okanye iya kwenziwa kwi-Skype. Kuyakubakho iseshoni ngengxelo yodliwano ndlebe. Uyakuthi unikwe iziphumo zophando.

Kudliwanondlebe, uyakubuzwa malunga nendlela osebenzisa ngayo umxeba wakho wabucala (unomyayi) nolwezi lwakho ngeesayithi kumakhasi onxubelelwano, kwaye zeziphi ezinye zeengcinga kunye neemvakalelo okhe wanazo ngexesha lokukhulelwa kwakho ngenxa yohlukumezeko othe walifumana kwiqabane lakho kumakhasi onxubelelwano. Ngapha koko, ndingathanda ukukubuza ukuba uye wamelana njani nokukhulelwa kwakho kunohlukumezeko olufunanayo kwiqabane lakho kumakhasi onxubelelwano. Ukuba kukho ezinye iindawo ngokubhekisele kumava akho ngokuhlukumezeke kwakho kumekhasi onxubelelwano ekukhulelweni kwakho ongakhange ndikubuze ngexesha lodliwanondlebe, wamkelekile ukwabelana ngezi zinto ngentando yakho.

### **Ngaba ukuthatha kwam inxaxheba kolu phando kuya kugcinwa kuyimfihlo?**

Ndizimisele ukukhusela iinkcukacha zakho kunye nobume begalelo lakho. Ukuqinisekisa ukungaziwa kwakho, udliwanondlebe aluyi kuba nolwazi olunokuthi luchaze wena buqu. Igama lakho aliyi kubandakanywa kudliwanondlebe; endaweni yoko kuya kuyakusetyenziswe igama elingelilo. Ngokusebenzisa igama elingelilo, mna ndiza kukwazi ukudibanisa udliwanondlebe lwakho kunye nesazisi sakho sokwenene; kwaye iyakuba ndim nomphathi wam kuphela abayokuthi bafikelele kolu lwazi.

Ukuqinisekisa imfihlo ngawe, ushicilelo lodliwana ndlebe ngalunye luya kukhuselwa ngephasiwedi kwaye konke okukhutshiweyo kwidatha kuya kugcinwa kwifayile ekhuselwe ngephasiwedi. Iyakuba ndim nomphathi wam kuphela abayakufikelela kwidata. Emva kokugqitywa kophando, lonke ushicilelo luya kucinywa. Ukukhutshwa kodliwanondlebe kuya kutshatyalaliswa emva kweminyaka emihlanu. Ukuba ingxelo eyongezelelweyo okanye inqaku lipapashiwe kolu phando, isazisi sakho siyakukhuselwa.

Ngokuhambelana neemfuno zomthetho kunye / okanye imigangatho yobuchule, ndiya kwazisa kubantu abafanelekileyo kunye / okanye ulwazi lwabasemagunyeni oluzisa ingqalelo yam malunga nomonakalo onokubakho kuwe okanye kwabanye. Kwesi siganeko, ndiza kukwazisa ukuba kufuneka ndophule imfihlo ukuze ndizalisekise uxanduva lwam olusemthethweni lokunika ingxelo kwabasemagunyeni.

### **Yeyiphi imingcipheko yoluphendo?**

Kunokubakho umngcipheko ekuthatheni inxaxheba kolu phando. Lonke unxibelelwano lomntu kunye nokuthetha ngesiqu sakhe okanye abanye kuthwala umngcipheko othile. Nangona kunjalo ndakunciphisa umngcipheko kwaye ndenze ngokukhawuleza ukukunceda ukuba uziva ungonwabanga, nakuphi na ukuphazamiseka, ngokwengqondo okanye ngenye indlela ngexesha lokuthatha kwakho inxaxheba kolu phando. Apho kukho imfuneko, ukuthunyelwa okufanelekileyo kuya kwenziwa kwiingcali ezifanelekileyo zoncedo olungaphezulu okanye ungenelelo.

### **Zithini izibonelelo zolu phando?**

Olu phando alwenzelwanga ukunceda wene buqu, kodwa iziphumo zinokundinceda ukuba ndifunde ngakumbi kwaye ndiqonde nzulu ngamava obundlobongele kumakhasi onxebelwano neqabane lakho athi enzeke ngexesha lokhulelwa. Ngalo naliphi na ixesha ngexesha lodliwano-ndlebe unokuma okanye undicele ndiwutsibe umbuzo lowo ukuba uziva ubuthathaka okanye awuziva ukulungele ukuwuphendula ngelo xesha. Awuyi kunyanzelwa ukuba uphendule nayiphi na imibuzo onokuziva ungonwabanga ngayo. Uluhlu lwemibutho yokucebisa kunye namaziko uya kuwanikwa ukuze uqhubeke nokuncediswa nangayiphi na imeko yokungonwabi onokuyifumana ngexesha okanye emva kwexesha lodliwanondlebe. Ngokwabelana ngamava akho, uya kundinceda kakhulu ukuba ndiyiqonde inyani ngokuhlukunyezwa liqabane kumakhasi onxubelelwano ngexesha lokukhulelwa. Ndiyathemba ukuba, kwikamva elizayo, abanye abantu bangaxhamla kolu phononongo lophando ngokuphucula ukuqonda imeko yohlukumezo kwiqabane kumakhasi onxebelwano eyenzeka ngexesha lokukhulelwa.

### **Ngaba kufuneka ndibekho kolu phando kwaye ndingayeka ukuthatha inxaxheba nangaliphi na ixesha?**

Ukuthatha kwakho inxaxheba kolu phando ukwenza ngokuzithandela. Unokukhetha ukungathathi nxaxheba konke konke. Ukuba uthatha isigqibo sokuthatha inxaxheba kolu phando, unokuyeka ukuthatha inxaxheba ngalo naliphi na ixesha. Ukuba uthatha isigqibo sokungathathi nxaxheba kolu phando okanye ukuba uyekile ukuthabatha inxaxheba nangaliphi na ixesha, awusayi kohlaywa okanye uphulukane naziphi na izibonelelo ozifaneleyo.

### **Kuthekani ukuba ndinemibuzo?**

Olu phando luqhutywa nguNkosazana Sabrina Maharaj kwiCandelo lezeMpilo yezeengqondo kwiDyunivesi yeNtshona Koloni. Ukuba unayo nayiphi na imibuzo malunga nesifundo sophando uqobo, nceda uqhagamshelane no-Nkosazana Sabrina Maharaj kulo mnxeba: 076 472 8824 okanye i-imeyile: [3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za).

Ngenye indlela, ungaqhagamshelana nomphathi wam koluphondo, uNjingalwazi Michelle Andipatin kulo mnxeba: 021 959 3092 okanye nge-imeyile: [mandipatin@uwc.ac.za](mailto:mandipatin@uwc.ac.za).

Ukuba unemibuzo malunga nolu phando kunye namalungelo akho njengomthathi-nxaxheba kuphando okanye ukuba unqwenela ukuchaza naziphi na iingxaki onazo ezinxulumene nesifundo, nceda uqhagamshelane:

#### Unjingalwazi uMaria Florence

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#### Unjingalwazi Anthea Rhoda

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INOMBOLO YEREFURENSI: BM20/2/2







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## Appendix D: Informed consent form

### INFORMED CONSENT FORM

**Title of research project:** *An exploration of the subjective lived experiences of pregnant survivors of cyber IPV.*

The study has been described to me in a language that I understand. My questions about the study have been answered. I understand what my participation will involve, and I agree to participate of my own choice and free will. I understand that my identity will not be disclosed to anyone. I understand that I may withdraw from the study at any time without giving a reason and without fear of negative consequences or loss of benefits.

I agree to be audiotaped during my participation in this study.

I do not agree to be audiotaped during my participation in this study.

**Participant's name**.....

**Participant's signature**.....

**Date**.....

Biomedical Research Ethics Committee

University of the Western Cape

Private Bag X17

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Tel: 021 959 4111

E-mail: [research-ethics@uwc.ac.za](mailto:research-ethics@uwc.ac.za)



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## Appendix E: Informed consent form Afrikaans

### Aanhangsel E: Vrywarings vorm Afrikaans

#### VRYWARINGS VORM

**Titel van navorsingsprojek: 'n Ondersoek na die subjektiewe ervarings van swanger oorlewendes van kuber-intieme maatskaplike geweld**

Die studie is aan my beskryf in 'n taal wat ek verstaan. My vrae oor die studie is beantwoord. Ek verstaan wat my deelname sal behels, en ek stem om in deel te neem uit eie keuse en vrye wil. Ek verstaan dat my identiteit aan niemand bekend gemaak sal word nie. Ek verstaan dat ek te eniger tyd aan die studie kan onttrek sonder om 'n rede te gee en sonder vrees vir negatiewe gevolge of verlies aan voordele.

\_\_\_ Ek stem in om tydens my deelname aan hierdie studie 'n oudio-band te kry.

\_\_\_ Ek stem nie saam om tydens my deelname aan hierdie studie ge-audiotap te word nie.

**Naam van die deelnemer .....**

**Die handtekening van die deelnemer .....**

**Datum .....**

Komitee vir biomediese navorsing

Universiteit van Wes-Kaapland

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Bellville

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## Appendix F: Informed consent form isiXhosa

### Isihlomelo F: Ifomu yesiqinisekiso sesivumelwano isiXhosa

#### IFOMU YESIQINISEKISO SESIVUMELWANO

**Isihloko seNgxelo yoPhando: *Amakhoba akhulelweyo athe aphila nokuhlukunyezwa ngamaqabane awo kumakhasi onxubelelwano.***

Isifundo sichaziwe kum ngolwimi endiliqondayo. Imibuzo yam malunga nesifundo iphendulwe. Ndiyayiqonda inxaxheba ekumele ndiyithathe kwaye ndiyavuma ukuthatha inxaxheba ngokuzikethela, nangenkululeko yam ndinganyanzelwanga. Ndiyayiqonda ukuba awuzukuchazela mntu ukuba ndingubani na. Ndiyayiqonda ukuba ndingarhoxa esifundweni nangaliphi na ixesha ngaphandle kokunika isizathu kwaye ngaphandle koloyika lweziphumo ezingalunganga okanye ilahleko yezibonelelo.

\_\_\_ ndiyavuma ukushicilelwa xa ndithatha inxaxheba kolu phando.

\_\_\_ andifuni kushicilelwa xa ndithatha inxaxheba kolu phando.

**Igama lomthathi-nxaxheba .....**

**Utyikityo lomthathi-nxaxheba .....**

**Umhla .....**

Ikomiti yokuziphatha ye-Biomedical Research Committee

IDyunivesithi yeNtshona Koloni

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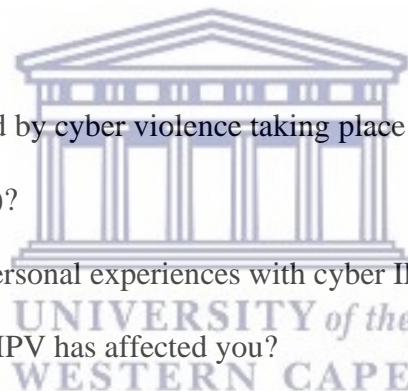
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## Appendix G: Interview schedule

**Research Title:** *An exploration of the subjective lived experiences of pregnant survivors of cyber IPV.*

### Interview schedule

1. What is the role of your cell phone and/or social networking sites in your social activity?
2. What do you understand by cyber violence taking place in an intimate or personal relationship (cyber IPV)?
3. What have been your personal experiences with cyber IPV?
4. How do you feel cyber IPV has affected you?
5. What role has cyber IPV played in your pregnancy?
6. How have you coped with cyber IPV thus far and have the coping strategies been affective/beneficial?





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## **Appendix H: Interview schedule Afrikaans**

### **Aanhangsel H: Onderhoudskedule Afrikaans**

**Navorsingstitel: 'n Ondersoek na die subjektiewe ervarings van swanger oorlewendes van kuber-intieme maatskaplike geweld.**

#### **Onderhoudskedule**

1. Wat is die rol van u selfoon en / of sosiale netwerke in u sosiale aktiwiteit?
2. Wat verstaan u onder kuber-geweld wat plaasvind in 'n intieme of persoonlike verhouding kuber-intieme maatskaplike geweld?
3. Wat was u persoonlike ervarings met kuber-intieme maatskaplike geweld?
4. Hoe voel u dat kuber-intieme maatskaplike geweld u beïnvloed het?
5. Watter rol het kuber-intieme maatskaplike geweld in u swangerskap gespeel?
6. Hoe het u tot dusver die kuber-intieme maatskaplike geweld hanteer en was die hanteringstrategieë affektief/voordelig?



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I-imeyile: [3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za)

## Appendix I: Interview schedule isiXhosa

### Isihlomelo I: Uthotho lwemibuzo yodliwano ndlebe isiXhosa

**Isihloko seNgxelo yoPhando:** *Amaxhoba akhulelweyo athe aphila nokuhlukunyezwa ngamaqabane awo kumakhasi onxubelelwano.*

#### UTHOTHO LWEMIBUZO YODLIWANO NDLEBE

1. Ithini indima edlalwa ngumxeba wakho wabucala (unomyayi) kunye/okhanye nesayithi kumakhasi onxubelelwano kubomi bakho bokuhlala?
2. Uqonda ntoni ngogonyamelo lohlu-kumezo kumakhasi onxubelelwano olwenzeka kubudlelwane obusondeleyo okanye ubuqu?
3. Athetha ntoni amava akho ngobundlobongela neqabane kumakhasi onxubelelwano?
4. Uziva njani ngochaphazeleko olubi othe walifumana kumakhasi onxubelelwano neqabane?
5. Yeyiphi indima ethe yadlalwa ludlame leqabane kumakhasi onxubelelwano ngexesha lokukhulelwa kwakho?
6. Uhlangebezane njani nodlame lweqabane kumakhasi onxubelelwano ukuza kuthi ga ngoku kwaye ingaba icebo lokumelana nobundlobongela luluncedo kuwe?



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## Appendix J: Interpreter consent form

### INTERPRETER CONSENT FORM

**Title of research project:** *An exploration of the subjective lived experiences of pregnant survivors of cyber IPV.*

The study has been described to me in a language that I understand. My questions about the study have been answered. I understand that my participation as an interpreter will involve explaining the research study to the participant in a language that is understood by the participant and explaining the participant's answers to the researcher in a language that the researcher understands. I agree to participate of my own choice and free will. I understand the importance of keeping the information from the interviews and the participants' identity confidential. I understand that I may withdraw from the study as an interpreter at any time without giving a reason and without fear of negative consequences or loss of benefits.

- I agree to be audiotaped during my participation in this study as an interpreter.
- I do not agree to be audiotaped during my participation in this study as an interpreter.

**Interpreter's name**.....

**Interpreter's signature**.....

**Date**.....

Biomedical Research Ethics Committee  
 University of the Western Cape  
 Private Bag X17  
 Bellville  
 7535  
 Tel: 021 959 4111  
 E-mail: [research-ethics@uwc.ac.za](mailto:research-ethics@uwc.ac.za)



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## Appendix K: Participant Biographical information

**Research Title:** *An exploration of the subjective lived experiences of pregnant survivors of cyber IPV.*

This document is intended to capture your biographical details. The information provided in this document will not be shared with anyone else and will be kept under strict confidentiality.



Participant's Name and Surname:.....

Date of birth (dd/mm/yy):.....

Relationship status:.....

Gestational period/age:.....

Area of residence:.....

Medical facility name/

Facebook:.....

**Participant's Signature:**.....

**Date:**.....





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## Appendix L: Research invitation

(on the following pages)



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## Invitation to participate in a research study

*Are you pregnant?*

*Does your cell phone or social networking site sometimes become a source of conflict in your relationship?*

### What is this research study about?

The study aims to explore how intimate partner violence takes place in cyberspace and to gain a deeper understanding of the lived experiences of pregnant women who have faced cyber intimate partner violence.

The research will be carried out under the supervision of the Psychology Department of the University of the Western Cape.

### What does it mean if you participate?

Participation is voluntary. If you choose to participate in the research study, you will be requested to participate in an interview with the researcher.

The interview will be 1 hour long.

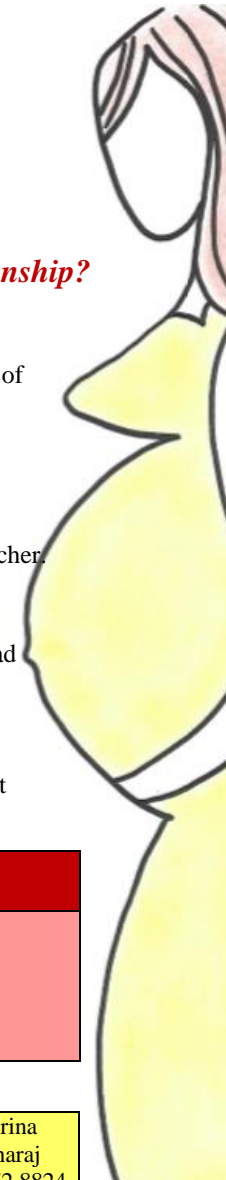
In the interview, you will be asked about your understanding of what cyber IPV is and what some of the thoughts and feelings that you have had during your pregnancy due to experiences of cyber IPV by your partner.

### What if I have questions?

If you would like to participate in the research study or should you have any questions regarding the research project, please feel free to contact the researcher or research supervisor.

<u>Researcher:</u>	<u>Research supervisor:</u>
Miss Sabrina Maharaj University of the Western Cape  Tel: 076 472 8824 E-mail: <a href="mailto:3223131@myuwc.ac.za">3223131@myuwc.ac.za</a>	Professor Michelle Andipatin University of the Western Cape  Tel: 021 959 3092 E-mail: <a href="mailto:mandipatin@uwc.ac.za">mandipatin@uwc.ac.za</a>

Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824	Sabrina Maharaj 076 472 8824
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### *Are you pregnant?*

*Does your cell phone or social networking site sometimes become a source of conflict in your intimate relationship?*

*If you have answered 'yes' to both questions, you may greatly assist in helping me understand the phenomenon of cyber intimate partner violence (cyber IPV) taking place in the intimate relationships of pregnant women.*

### **What is cyber intimate partner violence (IPV)?**

Cyber intimate partner violence entails “harassing, threatening, monitoring, impersonating, humiliating, or verbally abusing one’s current partner through the use of technology” (Wolford-Clevenger et al., 2016, p. 156). Instances of cyber IPV can range from mild to more severe forms of partner violence. Often such instances lead to relationship discord and other forms of violence being perpetrated towards partners. For instance, constantly checking a partner’s ‘last seen’ on messaging applications and as a result questioning them is an example of cyber monitoring behaviours. More severe forms of cyber violence may include, sharing photographs of a personal nature without the permission or knowledge of the partner (Taylor & Xia, 2018). Due to the multiple functionalities of technology, the complexity of cyber penetration increases.

### **Why pregnant women?**

Understanding the psychological and emotional experiences attached to pregnancy is complex and with the advent of cyber IPV perpetration, the journey of pregnancy may be experienced differently. Exploring the thoughts that come to mind of a pregnant woman and the feelings experienced as a result of cyber IPV, will greatly assist in understanding this phenomenon of cyber IPV during pregnancy in greater depth. Furthermore, this research study will serve as a platform to empower pregnant women living in South Africa by providing a safe space to voice their experiences.

### **What if I have questions?**

This research is being conducted by Miss Sabrina Maharaj at the Psychology Department at the University of the Western Cape. If you have any questions, please contact Miss Sabrina Maharaj on telephone: 076 472 8824; e-mail: [3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za) or you may inbox me on Facebook.

### **References**

- Taylor, S., & Xia, Y. (2018). Cyber partner abuse: a systematic review. *Violence and Victims*, 33(6), 983-1011. doi: 10.1891/0886-6708.33.6.983
- Wolford-Clevenger, C., Zapor, H., Brasfield, H., Febres, J., Elmquist, J., Brem, M., Shorey, R. C., & Stuart, G. L. (2016). An examination of the partner cyber abuse questionnaire in a college student sample. *Psychology of Violence*, 6(1), 156-162. Retrieved from <http://dx.doi.org/10.1037/a0039442>



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## Appendix M: Counselling resources

<u>COUNSELLING RESOURCE</u>	<u>CONTACT DETAILS</u>	<u>ADDRESS</u>
<b>TEARS</b>	010 590 5920  SMS Helpline *134*7355#	85 Protea Road Kingsley Office Park Block C Chislehurst Sandton
<b>POWA People opposing women abuse</b>	011 933 2333/2310	Room 10 Nthabiseng Centre, Chris Hani Hospital Soweto
<b>National GBV Helpline (Lifeline)</b>	0800 150 150	-
<b>Lifeline</b>	0861 322 322	23b Waverley Business Park, Wyecroft Rd, Mowbray, Western Cape
<b>SADAG The South African Depression and anxiety Group</b>	<i>SADAG Mental Health Line</i> 011 234 4837	-

<b>Suicide crisis line</b>	0800 567 567	-
<b>National AIDS Helpline</b>	0800 012 322	-
<b>MOSAIC</b>	021 761 7585	66 Ottery Rd, Wynberg, Western Cape
<b>The trauma Centre for Survivors of Violence and Torture</b>	021 465 7373	126 Chapel street Zonnebloem, Western Cape
<b>*The Saartjie Baartman Centre for Women and Children</b>	021 633 5287	Klipfontein Rd, Manenberg, Western Cape
<b>*Mater Domini</b>	021 671 6008 079 891 6749	Claremont, Western Cape
<b>FAMSA (Family and Marriage Society of SA)</b>	<i>OBSERVATORY</i> <i>(Head Office)</i> 021 447 7951	9 Bowden Rd, Observatory, Cape Town, Western Cape



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## Appendix N: Request for Permission Letter

Student number: 3223131

Psychology Department

University of the Western Cape

Phone: 076 472 8824

e-mail: [3223131@myuwc.ac.za](mailto:3223131@myuwc.ac.za)

Date:.....

Facebook Page Administrator

Facebook Page :.....

Good day

### **Re: Request for permission to post a research invitation on your Facebook page**

My name is Sabrina Maharaj and I am a Psychology Master's candidate of the University of the Western Cape. I will be conducting research and need participants to be part of the research process. Research for my master's thesis will be focused on cyber intimate partner violence taking place during pregnancy.

I have seen that your Facebook page seeks to empower survivors of violence and would like to request permission to post a research invitation on your Facebook page inviting pregnant women facing abuse from their partners to be part of my research.

Permission to post the research invitation will be greatly appreciated as it will allow women to share their deep-seated experiences of cyber intimate partner violence, thus leading to understanding this phenomenon in greater depth.

I look forward to hearing from you.

Yours faithfully,

Sabrina Maharaj