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A Web Model of Domestic Violence and Abuse in Muslim Communities—A Multi Perspective IPA Approach

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Abstract: This paper brings together two qualitative studies exploring how domestic violence and abuse (DVA) manifests within UK Muslim communities. Study one was conducted with UK-based Muslim female survivors of DVA ($n = 10$). Study two was conducted with UK professionals working in a supportive capacity with both DVA victims/survivors and those perpetrating abuse within Muslim communities ($n = 9$). Through a multi-perspective interpretative phenomenological lens, the two data sets were analysed for overarching themes. These themes were subsequently used to develop a graphical representation of the findings. The resulting outcome was the web model of DVA. The model identifies the trajectories and interactions at four levels in relation to DVA in Muslim communities. It is argued that this model has increased capacity for understanding the extended nature of how DVA manifests for UK Muslim communities, with a particular emphasis on the active role of faith and additional nuances often missed by singular methodological approaches. The model is recommended for use by services as a means toward individually tailored client care. Recommendations are made in relation to inclusive and decolonial approaches within gender-related violence research relating to minority communities in the UK.

Keywords: domestic violence; domestic abuse; intimate partner abuse; coercive control; Muslim communities



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1. Introduction

Domestic violence and abuse (DVA) occur across all faith communities (Abramsky et al. 2011). Socio-cultural theories seeking to explain DVA include feminist theory (Dobash and Dobash 1979; Walker 1979) and family violence theory (Gelles 1974). Model approaches have adopted a more singular bio-psycho-social approach (Chiffriller et al. 2006; Dixon and Browne 2003; Holtzworth-Munroe and Stuart 1994). These approaches have been useful for understanding the aetiology of DVA, however, they remain largely silent on varying family structures, communities, and non-Caucasian population groups. Whilst there is some research on intimate partner violence for US Black communities, they primarily feature prevalence and psycho-social factors (Field and Caetano 2005; Wellock 2010). Biglia and i Martí (2017) highlighted the lack of representation of minorities within social research, particularly from a feminist approach. The heterogeneous nature of DVA has been consistently demonstrated within the Caucasian population (Cavanaugh and Gelles 2005). However, such existing research has directly informed perpetrator intervention and survivor support programmes across all population groups (Cantos and O'Leary 2014). The validity and applicability of such research in relation to minority groups is therefore questionable (Green and Morton 2021). The spectrum of these considerations speak directly to gender-related violence (GRV). El-Bushra and Piza Lopez (1993) coined the term GRV in recognition of broader power inequities of patriarchal societies within the context of a wide range of abuse. Further contributions have since extended to considerations surrounding

a range of social power imbalances including, but not exclusive to gender, race, and ethnicity (Allred et al. 2014). This paper focuses on DVA within the UK Muslim population through a multi-perspective lens, thereby factoring in wider areas considered within GRV. This is argued to increase the understanding of nuances in DVA manifestations for this population group. The research is situated within the psychology discipline, with overlaps into social psychology.

Research within Muslim communities typically explores DVA from a theological lens (Ayubi 2019; Isgandarova 2019), or from a victim impact perspective in relation to culture. This includes traditional gender role expectations within UK South Asian communities influencing DVA understanding and therefore approaches (Gill 2004; Purkayastha 2000). Within this, DVA behaviours were overlooked as DVA (and not understood as abuse) and instead regarded as cultural normative practices under the guise of traditional gender roles. This was further supported by Palacio (2021) who demonstrated a distinct differentiation between culture and faith within the lives of Muslim survivors. The related importance of the role of Imams within interventions has been raised by Hammer (2019) and Nowrin (2021). Such distinctions became significant when considering barriers to reporting identified at the individual, family, and social level by Afrouz et al. (2020). The need for further research into structural barriers faced by Muslim women living as minorities was recommended. With family raised consistently within the literature, the applicability of Holtzworth-Munroe and Stuart (1994) labelling family-only violence as low risk comes under question. Whilst the research continues to demonstrate family only violence as low risk (Pettersson and Strand 2020), adequate representation of various family structures within this remains. The extended nature of Muslim families and the collective nature of the community by extension, are pertinent within this. The issue of abuse from in-laws and extended family members becomes discounted if family violence is not understood within the cultural context (Lee 2014; Purkayastha 2000).

White et al. (2013) called for a greater need to adopt community-based participatory research methods in order to fully understand the issues faced by women within ethnic minority communities. They argued that comprehensive understanding was unattainable without knowing what questions to ask. Green and Morton (2021) further advocated the importance of placing marginalised female voices central to DVA research relating to them. Kelly (1996) advocated for the involvement of communities in prevention and treatment, noting the strength held within communities to create change. Whilst Dix (2018) put forward the continued implication of blame and responsibility being placed on victims within community awareness raising work, the role of communities itself remains understudied. Cultural-specific issues faced by Muslim communities identified by Milani et al. (2018) included patriarchy, honour and shame, faith, collectivist and authoritarian cultures, and immigration. These were identified through the experiences of frontline service providers (women's shelters), representing a wide range of Muslim communities. However, understanding these issues first-hand from those directly affected by them, including survivors, is vital for greater DVA clarity. Furthermore, is the need to understand experiences of those who do not seek support from shelters. Day and Gill (2020) further identified the need for an intersectional approach in order to adequately support Muslim female survivors. The need for multiple and intersectional approaches to understanding GRV has additionally been advocated by Russo and Pirlott (2006).

Whilst some of the existing research provides critical insight into DVA for Muslim communities, it remains sporadic and disjointed. Eisikovits and Bailey (2011) argued that multiple models of understanding abuse facilitate increased understanding, thereby enhancing the scope for implementing appropriately informed interventions, with increased potential likelihood of effective outcomes. Likewise, Ward et al. (2006) argued theory appraisal demonstrated one theory alone as not necessarily constituting holistic evidence. This is particularly relevant when considering minority communities within Western contexts. Hussein (2006) emphasised the recognition of cultural pluralism within research

methodologies. These are unique considerations relating to research with Muslim and potentially other minority groups within Western contexts.

The aim of this study was to explore DVA within the UK Muslim population, the nature and occurrence, and impacts at a community level. It further sought to understand the barriers experienced in addressing DVA and potential earlier intervention points. This was achieved through a multi-perspective interpretative phenomenological analysis (MP-IPA) approach.

2. Method

2.1. Participants

A total of 19 participants were recruited from two groups. Group one consisted of Muslim female survivors of DVA (N = 10). Group two was Muslim professionals working in a DVA supportive capacity (N = 9). Members of this group were required to have extensive experience working with Muslim communities in relation to DVA, with insider knowledge of different Muslim communities and their cultures. Participant demographic details for both groups can be seen in Table 1.

Table 1. Participant demographics.

Participants	Sex	Age	Ethnicity	Number of Years Since Leaving	Occupation and No. Years' Experience
S1 *	F	35	Bangladeshi	10	n/a
S2	F	41	Indian	20	n/a
S3	F	45	Bangladeshi	9	n/a
S4	F	35	Irish	9	n/a
S5	F	34	Indian	1	n/a
S6	F	34	Pakistani	3	n/a
S7	F	39	Pakistani	1	n/a
S8	F	30	Bangladeshi	2	n/a
S9	F	26	Indian	1	n/a
S10	F	40	Pakistani	9	n/a
P1	F	38	Chinese	n/a	Integrative Counsellor (6)
P2	F	40	East African Asian	n/a	Integrative and Psychodynamic Counsellor (10)
P3	M	50	Pakistani	n/a	Prison Chaplain and Imam (17)
P4	F	53	Indian/Pakistani	n/a	Head of Women's Centre (32)
P5 **	M	45+	English	n/a	Social Worker (21)
P6	F	40	Pakistani	n/a	District Crown Prosecutor (14)
P7	M	50s	Arab	n/a	Imam and Psychotherapist (20)
P8	M	60	Indian	n/a	Hospital Chaplain and Head of Social Enterprise (30)
P9	F	43	Pakistani	n/a	Psychotherapist (7)

* Remained in relationship (abused stopped). ** Not Muslim.

Group One

Of the survivors, five had left the relationship within the past three years (during data collection phase of research). A further four had left the relationship nine plus years previous to data collection. Only one participant had remained in the relationship as the DVA stopped. Mean age of the survivors was 35.9 years (SD = 5.55). From this sample, eight participants had children within the abusive relationship and only one had re-married.

Two identified as reverts (embraced Islam in adulthood), whilst the remaining eight were born into Muslim families.

Group Two

The mean age within the professionals cohort was 46 years (SD 8.22). All professionals were Muslim except for P5. He was, however, included in the study due to meeting the participation criteria of having extensive experience working with diverse Muslim communities within the UK. Additionally, he had extensive international experience. Professionals were from a broad range of ethnic backgrounds and collectively, also worked across a wide range of Muslim communities.

2.2. Participant Recruitment

Participants were recruited through a combination of convenience and snowballing sampling methods across both groups. The researcher utilised existing community contacts to share details of the research. These were then circulated further afield. A homogenous sample whereby participants shared experiences relating to the same phenomena, from differing perspectives, was targeted within recruitment (Larkin et al. 2019).

Participants were provided details of the research prior to informed consent being obtained. Semi-structured interviews were held either face to face in an agreed location (prior to COVID-19), over the telephone, or online. Interviews were audio recorded using a passcode protected dictaphone. Audio files were saved onto a secure University drive and used for verbatim transcribing. Within transcripts, all identifying details were removed. Participant transcripts were allocated a code to ensure confidentiality. Signed consent forms were stored in locked storage away from audio files.

Ethical approval was obtained from Brunel University London Research Ethics Committee (reference 12519-MHR-Nov/2018-14813-2). Risk assessments were conducted prior to interviews taking place.

2.3. Materials

Interview schedules were semi-structured for both groups, allowing flexibility for participants to raise pertinent issues. Semi-structured interviews have been substantiated as ideal for IPA based research due to facilitating space in which participants can reflect on their lived reality (Reid et al. 2005), whilst being gently guided by the researcher.

Group One

Survivors were asked questions related to two broad areas: (a) how the community responded to them as victims and survivors, and (b) how they could have been better supported. The interview schedules were developed in light of the research question, in addition to gaps identified within existing research. Questions pertaining to specific DVA experiences were deliberately omitted in order to avoid causing repeated trauma. However, the majority volunteered information in this regard and wanted a platform for their voices.

Group Two

Professionals were asked questions relating to the type of DVA cases experienced, the community responses witnessed, the role of culture and/ or faith, and what changes they felt were required to effectively address DVA within UK Muslim communities.

2.4. Analysis

The analysis was conducted in two stages. Stage one of the analysis involved detailed idiographic exploration of single data sets for both groups. Superordinate and subordinate themes were elicited as per the expertise of individuals with lived experience (Smith 2003). These were then amalgamated independently within both groups to develop superordinate and subordinate themes for each group respectively. The findings of this stage will be presented in forthcoming papers.

Stage two of the analysis involved the multi-perspective approach to the IPA data from stage one. This was done by drawing together the superordinate themes from stage one and exploring links, interactions, and overlaps between these themes, across the entire data

set. This facilitated identifying trajectories of meaning from the combined data as outlined by [Larkin et al. \(2019\)](#) and thereby the development of overarching inductive themes. The overarching themes were then visually mapped out according to their trajectories and interactions as with [McNally and Gray-Brunton \(2021\)](#), into a model framework for further analysis as per [Dancyger et al. \(2010\)](#). Specific extracts were then identified to support the overarching themes. The model framework was then cross-referenced to the themes in stage one of the analysis, to ensure coherence and accurate reflection of both idiographic and group data. Whilst the overarching themes were clearly established at this stage, the visual representation took several forms prior to the first of the final version being established. This was in order to ensure it accurately reflected the trajectories and interactions identified within the data in the most comprehensive manner possible.

The MP-IPA approach facilitated data exploration at a broader level; identified inter-connections; and examined subsequent impacts on DVA manifestation, understanding, and barriers to addressing DVA. IPA methodologies disclose participant expertise and place it within the foreground ([Smith 2004](#)). This resonates with placing participants at the focal point of knowledge generation proposed by [White et al. \(2013\)](#) as being critical to research methodologies. [Elmessiri \(2006\)](#) asserted human phenomenon as consisting of both objectivity and subjectivity for accurate reflection of human experience. The voice of the participant as the central precedent allows participants to relay pertinent experiences in a manner suited to them ([Smith 2003](#)), whilst making it possible for this to be placed within the wider context through the hermeneutic involvement of the researcher ([Smith 2011](#)). This careful balance is obtained through MP-IPA. [Larkin et al. \(2019\)](#) argued that bringing together different perspectives facilitated both the individual phenomenology and the related systems psychology. Thereby enabling understanding of human experience within larger systems yet remaining reflective of individual contexts. In analysing the contributions of Sigmund Koch, [Morawski \(2001\)](#) noted the advocacy of relating theory to cultural practices in order to develop theories to their full potential. In this regard, [Ward et al. \(2006\)](#) elaborated on the importance of clarity regarding function and scope of theories/models in order to maximise on potential applicability.

Through adopting a MP-IPA approach, both an interpretative and critical approach facilitated maximising the data potential. [Rehman and Alharthi \(2016\)](#) asserted combining research paradigms in order to best reflect the research question, as adding authenticity and avoiding over zealousness towards one research paradigm. [Moe \(2007\)](#) emphasised the importance of marginalised groups being regarded as experts of their lived experiences. This principle formed the foundations of feminist theories dominating the theoretical understanding of DVA to date. [Mansfield \(2007\)](#) argued that challenging gender-based social injustices have been at the forefront of feminist theorists. Whilst there exists a danger of transposing prevailing definitions of feminism onto minority communities and cultures, the foundational principles of giving voice to those without a voice, in the context of gendered social injustice ([Elias 1956](#)), remain applicable.

The lead researcher as a Muslim female insider, facilitated the understanding of nuances and cultural norms within the data. This supplemented the participant expertise being framed within a decolonial approach, thereby enhancing its authenticity ([Hegazy 2006](#); [Hussein 2006](#)). [Greene \(2014\)](#) ascertained benefits of insider research as prior knowledge, ease of access, and fluidity of interaction. [Unluer \(2012\)](#) and [Greene \(2014\)](#) stipulated potential risk of bias and loss of objectivity in data interpretation as likely disadvantages. These were mitigated through ongoing re-reading of the analysis by both authors in order to remove subjectivity and careful consideration of selected extracts to ensure accurate representation.

The term victim is used to describe experiences of DVA whilst still in the relationship. The term survivor is adopted to describe experiences of individuals post leaving abusive relationships. Whilst there is some debate in this area and the potential identity implications arising out of language and terminology ([Mittal and Singh 2018](#); [Schwark and Bohner 2019](#)), it was decided to use these terms in reflection of how the participants addressed

themselves. Participants considered themselves as victims whilst going through the abuse, and survivors post leaving, which held parallels with ongoing debates.

3. Findings

The MP-IPA approach resulted in the identification of four themes:

- I. Rebuilding life after DVA: Challenges at every level
- II. DVA as diffused: “How dare he . . . invite them into my home to play judge and jury”
- III. Denial of Intersectionality: “You’re a feminist”
- IV. Structural barriers to addressing DVA: “You’re a different colour from everyone here so you have to work that much harder to be recognised”

These themes will be explored below followed by the development of the web model of DVA.

3.1. *Rebuilding Life after DVA: Challenges at Every Level*

Throughout the data, both survivors and professionals in the field highlighted the range of challenges victims were required to navigate upon first experiencing DVA and throughout the subsequent trajectory. These spanned beyond the life course of the relationship and ranged across psycho, social, and spiritual factors. Initial challenges were identified as overcoming the first hurdle of accessing support as victims. This, however, was often intertwined with their DVA experiences, with the impact of the abuse itself shaping their ability to engage with meaningful routes to recovery.

Integral to this was all forms of abuse not being recognised as DVA. Without this recognition there was limited understanding regarding the serious impact of DVA from the outset. A consistent narrative of DVA being understood as physical abuse only, which in itself was overlooked, was present across family and social networks, across the data.

Extract 1

So, if she (victim) was to share you know her concern, it might be the case that uh the external family or even her, in her own family would say “well you just get on with it”. (Professional 1)

DVA was accepted as inherent to married life, thereby all forms of abuse became minimised and normalised. An indication that victims were absorbing messages of minimisation, through a process of osmosis or direct enforcement, was present across the data. This led to beliefs surrounding not being entitled to live a life free of abuse. Rather, abuse became obligated and to be endured. Seeking support, therefore, was not considered a plausible option in some cases. Similarly, within US Muslim communities, [Hammer \(2019\)](#) outlined an inherent culture of silence. Such silence was asserted as further normalising DVA and compounding the double stigma of mental health as taboo ([Al-Karam 2018](#)), inclusive of reporting ([Lee 2014](#)). The lived reality of the detrimental impact of DVA did not, however, correspond to the minimisation narrative. Therefore, the ability to understand the significant negative impact on mental health and wellbeing became impeded.

DVA experiences were consistently expressed as being negatively linked to victim faith identities. This was often imposed by family and/or community members and continued into the long term. With faith identified as foundational to everyday Muslim identities ([Isgandarova 2019](#)), the significance of this became apparent.

Extract 2

S5: You know because, when you say that to a Muslim, like I was questioning my Islam all year thinking am I Muslim, am I not, am I Muslim, is Allah (God) going to forgive me, is He not going to forgive me, am I a really bad person, I’ve done and have I sinned you know, and you’re at the edge of your deen (way of life).

I: Mmm

S5: And then for someone to come along and just say you’ve got weak imaan (faith), that can just make you, push you over the edge and say well you know what, you’re right, sod it, I give up. (Survivor 5)

The conflation of faith misunderstanding with lack of DVA understanding was described as having an additional devastating impact. Particularly when it resulted in external labelling. The emotional and psychological abuse, intertwined with spiritual-based abuse, resulted in substantial internal conflict. This internal identity conflict was endured over significant periods of time after leaving abusive relationships, echoed by both survivors and professionals working in the field. For survivor five, being described as weak in her faith was almost enough to make her lose all hope. Across the data, linking the DVA to one's spiritual status resulted in deep distress. It was only in being able to distinguish the abuse for what it was, and the resulting psychological impact of DVA, as being separate to faith identity, which provided a platform for increased clarity. Such initial cognitive conflicts, however, significantly hindered the ability to access help and therefore progress towards recovery. [El-Khoury et al. \(2004\)](#) presented the positive utilisation of faith within the recovery process for female victims from minority communities in the West. [Chowdhury \(2021a\)](#) further outlined the need for faith-informed DVA recovery programmes as a means of catering to the needs of Muslim female survivors. However, very little exists by way of exploring the impact of DVA upon faith itself.

The daunting challenges encountered in the recovery process, often relating to re-learning basic life-skills, were also highlighted.

Extract 3

I think that whole concept of having control is really difficult as well. (I: Yeah) Because I literally got the khula (divorce) and thought how am I even gonna cross the road, I stopped at the pavement cus I'd forgotten how to cross the road. (I: Mmm) I think even that, having control of your life, it actually causes some major anxiety. (Survivor 5)

The need for continued support post abusive relationships was raised across the data. The anxiety caused by having to relearn normal everyday tasks extended to basic activities such as crossing a road. Therefore, the question of broader community DVA understanding, coupled with how services holistically engage with survivor vulnerabilities, was highlighted. It further raised questions in relation to the potential exploitation of such victim vulnerabilities upon leaving abusive relationships. This vulnerability was brought to a height during the COVID-19 pandemic, where a global increase in DVA was reported ([Bradbury-Jones and Isham 2020](#); [UN Women 2020](#)). Leaving the abusive relationship removed some of those vulnerabilities, but equally presented new challenges to overcome. These challenges were portrayed within this data as often unforeseen and underestimated.

The accommodation of such psycho-social-spiritual factors was raised as essential in order to enable victims to access initial support and work towards recovery thereafter. Without this, the possibility of continuing beyond DVA experiences in ways that left survivors intact of their identity and selfhood became diminished.

3.2. DVA as Diffused: "How Dare He . . . Invite Them into My Home for Them to Play Judge and Jury"

Throughout the data, a strong presence of additional individuals being involved in DVA situations was consistently raised. These individuals ranged from family members, to friends, to wider community members. The role of such external individuals was described as positing both negative and positive influences.

Extract 4

Um (.) some were physical um but there was a lot of emotional psychological domestic abuse. And it wasn't particularly just come from their partner. (I: Ok) it could come from a number of family members. (I: Mm hmm) And then they would do it collectively. (I: That's interesting) So they would be you know uhh they would coerce together. (Professional 1)

The role of wider family and community members was sometimes intertwined with the primary abuse and described as being collective in nature. Bystander theory has been put forth as being inclusive and positive, with powerful potential as an agent of change

(Fenton and Mott 2017). Latané and Darley's (1970) five-step process towards bystander intervention proposed that bystanders must recognise the problem in order to intervene. Within this study, some bystanders not only failed to identify the problem but were actively part of the problem. Hence, they became active stakeholders within the DVA.

In other cases, the involvement of external individuals was described by both survivors and professionals as being imposed onto victims in numerous ways. Across the data, victims were made to answer to these individuals, usually for seeking divorce or speaking out against the abuse. For survivor two, extended family members were permitted by immediate family to question her on more than one occasion for seeking divorce.

Extract 5

I've lived in the heart of the (ethnicity) Muslim community, had nothing to do with them, how dare he go to a community that I barely had anything to do with, to invite them into my home for them to play judge and jury. (Survivor 3)

For survivor three, whether or not she normally engaged with her local community became irrelevant. Her then husband involved external community members in order to hold her to account for seeking divorce. Invisible and powerless victims being put on trial was alluded to. Whilst this held parallels with secondary victimisation (Gracia 2014), the data demonstrated that it went further than this. Such interactions were inbuilt into the primary DVA experience. Within this, there was consistency in abusive partners being given precedence over victims and their needs. Furthermore, victims were pushed to the background and additional stakeholders placed at the forefront.

Parallel to this, the simultaneous involvement of external individuals in a positive context was relayed within the data. Critical support received from family and wider community members was a stark divergence to those who presented barriers and impediments. Such support was described as essential to leaving abusive relationships and rebuilding life post-abuse. Knowledge that provided strength and empowerment, particularly from spiritual sources, were critical to creating change within this. Such support provided victims crucial advocacy and protection.

Extract 6

Erm, but also I had a lot of supportive friends at work, so I worked in an Islamic school in (city name) and erm I had friends and colleagues who were very knowledgeable, erm I had access to a scholar who was also very knowledgeable. (Survivor 2)

Both social and spiritual support were found by Anderson et al. (2012) and Jacinto et al. (2010) as being central to resilience and recovery post abuse. Within collective and close-knit communities, the pertinence of such support was significant. Wide support networks, spanning various elements of victim's lives, were deemed the most effective in providing tangible means out of abusive relationships. Central to such support was the presence of culturally appropriate tools and faith-based leverage for leaving abusive relationships. This included Imams (religious leaders) who actively supported victims and reassured them of their religious rights to live a life free of abuse.

With faith being intertwined closely to identity, ensuring actions and advice were in accordance with faith principles became a foundation upon which support was accessed and provided alike. Professionals who had an insider understanding of their faith and culture were often sought out by victims. Equally, professionals themselves drew on faith-based principles in order to provide holistic support desired by victims. Faith-based resources thereby became a protective aid with which individuals could safely exit abusive relationships, in addition to utilisation within the recovery process. Supplementing the research by Anderson et al. (2012) and Jacinto et al. (2010), African-American women have been found to utilise faith as a resource for DVA recovery in comparison to their Caucasian counterparts (El-Khoury et al. 2004). Preference for faith-informed mental health service provision was further found for UK Muslim communities (The Lantern Initiative CIC et al. 2021).

The data demonstrated that DVA was often not limited to two primary individuals within a relationship. Additional individuals from various groups were openly involved to differing degrees. Their roles were described as being a parallel process. In some cases, presenting as an impediment to leaving abuse and exacerbating the trauma. In other cases, actively facilitating leaving abuse and enabling recovery.

3.3. Denial of Intersectionality: “You’re a Feminist”

Throughout the data there was a common thread of Muslim female DVA victims facing barriers directly related to intersectionality. [Crenshaw \(1990\)](#) posited intersectionality theory within the context of race, gender, socio-economic status, sexuality, and disability within Black communities. [Bowleg \(2012\)](#) expounded upon various social intersections interacting with each other in order to pave the way for disparate outcomes within certain sections of society. [Nash \(2008\)](#) proposed broadening the theoretical scope to capture the lived reality of other minority groups. As with [Bowleg \(2012\)](#), a greater emphasis on interactions, particularly relating to social processes, was advocated.

In line with this, the data herein encapsulated three distinct social junctions related to core identity. These were faith, cultural normative practices often in line with ethnic backgrounds, and DVA education and understanding. The impact of the conflation of all three areas was demonstrated within the following extract.

Extract 7

... It’s a very male perspective of Islam and it’s quite misogynistic in its approach at times and it’s always about male rights, men’s rights, not women’s rights, not how you should treat women, and there’s not much of that going on and I think the men need to be educated. Ok, you’re claiming you’re Muslim but these are the traditions of Islam and how you treat women, this is how you know, these are women’s rights. I mean I see it, I’ve seen it in the community if a woman says this is my right or that’s my right, if she stands up for her right she’s then called a bit feminist. (Survivor 7)

Survivor seven raised several trends that echoed throughout the data. [Rassool \(2015\)](#) outlined five universal human rights established under the Islamic faith; the right to be treated respectfully and with dignity, right to life and maintenance of life, right to equity, right to excel, and the right to not cause or reciprocate harm. In place of this faith-centred recognition of human rights, Muslim female victims standing up for their basic rights, however, were labelled by some sections of communities as following feminist principles. Negative connotations were denoted within this, implying that females standing up for their rights amounted as contrary to the faith. It further exemplified a lack of understanding regarding DVA and its impact.

Extending beyond this, textual interpretation and development of the field of hermeneutics within the Islamic tradition was raised by both survivors and professionals. These were identified as being ‘misogynistic’ in nature due to the prevalence of male voices with one dominant perspective. Such narratives were distinguished as fundamental to DVA discourses, further identified by [Isgandarova \(2019\)](#) and [Ayubi \(2019\)](#). They posited it as governing how women were viewed and continue to be viewed within some Muslim communities. In contrast, across the data a strong presence of the positive consequences arising from informed voices was raised. This related to a holistic understanding of DVA within a faith framework and thereby challenging harmful cultural normative practices.

Extract 8

You know an Imam who is very well known and very well respected in (place name) and often does khutbahs (sermons), and I thought Ya Rabbi (O my Lord) you know what, this is it and (.) this was it you know, people are educating themselves, people do realise that actually patience isn’t persecution, persecuting yourself and depriving yourself of, of what is actually ordained by God to be yours and it’s halal (permissible) for you, and you’re depriving yourself of sukoon (tranquility), of happiness, of genuine love, of intimacy, of being safe first and

foremost, you know even in terms of physical and mental form and spiritual form, then you know, who are you doing it for, so yeah I think it's been an eye opener. (Survivor 6)

Prominent vocal Imams who were able to explain the foundations of DVA as being against core Islamic teachings featured as key influencers. Contextualised furthermore within the purpose of marriage and the family unit as one of attaining tranquility, served to add further clarity. For all survivors who were able to access such clarity, this was a deeply profound moment. Professionals further demonstrated that it offered an alternative that was consistent with what victims had doubted or been led to doubt, regarding their own faith understanding. There was an indication that such voices were not reaching wider communities, rather they were few in number and so their narratives were also obscured from the mainstream. The potential for faith-informed interventions to contribute towards radical change for both individuals and communities alike was alluded to. Within their model of the soul, [Rothman and Coyle \(2018\)](#) expounded upon the role of spiritual wellbeing as central to Muslim identity. They argued that balance could only be attained through holistic approaches to wellbeing, which by default required consideration of the spiritual nature of Muslim identity ([Ahmed and Amer 2012](#); [Al-Karam 2018](#); [Keshavarzi et al. 2020](#)).

The underlying implication was the necessity for exploring DVA within a holistic framework for Muslim communities, inclusive of faith identities. Integral to this was a core focus on the universal human rights in particular ([Kamali 2002](#); [Rassool 2015](#)). The potential positive impact of informed narratives, by individuals in positions of religious authority, was magnified within the data. Professionals within this study, some with dual roles of Imams and therapeutic roles, further identified with this.

3.4. Structural Barriers to Addressing DVA: "You're a Different Colour from Everyone Here so You Have to Work That Much Harder to Be Recognised"

The final theme centred around structural barriers encountered and the resulting implications upon addressing DVA. Such barriers were identified as existing in various forms. They further stemmed from both within Muslim communities and extended out to macro-level structures within wider society.

At a community level, culturally appropriate services were raised in terms of accessibility concerns. This was deemed as the first hurdle for many victims to overcome, both within this study and existing research ([Usher et al. 2020](#)). Accessibility in this case referred to structurally related impediments. Examples included level of education and therefore ability to engage with the service. Socio-economic status further impacted both the ability to afford such services and physically attend the provision. Having the ability to seek out support and represent oneself in such circumstances was alluded to as being rare across the data, hence linking back to psycho-social-spiritual elements. The data indicated Muslim DVA victims facing additional individual barriers to accessing and engaging in potential support, even within their own communities. Being surrounded by layers of barriers was denoted across the data. [Oyewuwo-Gassikia \(2016\)](#) identified similar barriers for US Muslim female victims. The issue of Muslim communities being seen as different was raised as resulting in additional barriers.

Extract 9

You're a different colour from everyone here so you have to work that much harder to be recognised. And she (interviewee's mum) said that to all of us. And my mum has continued to say that you have to constantly prove yourself. So I think that whilst it was true at one level, I think it lays the foundations for a level of insecurity about where your status isum I think minority communities are more divided than they've ever been. And I think that's a real shame. So that common history that binds our experiences from the Indian subcontinent are broken, well it's colonialism and it's partition all over again isn't it, basically is partition playing out. (Professional 4)

The implication was that being viewed as outsiders resulted in having to work harder in order to be recognised as a legitimate member of society, with legitimate rights. This was perceived as re-enactment of colonial legacies, which conquered through a divide-and-rule method (Rahman et al. 2018). A sense of injustice experienced through systems working against minority communities was alluded to. The perception that Muslims were treated distinctly within society at large was exhibited across the data. Kunst et al. (2012) proposed Muslims as becoming suspect communities post 9/11, with Hickman et al. (2011) outlining the role of counter-terrorism measures in exacerbating this. The media narrative of Muslims as hybridised threats was further regarded as contributing to intra and inter-community relations, thereby impacting social issues (Jaspal and Cinnirella 2010). Lofland (1969) proposed the salient features associated with social identification resulted in labelling groups and thereby positioning one's own personal identification as being distinct to this. Hence, individuals and groups identified as socially deviant were labelled as such for example, a social deviant, or as mentally ill. The negative implications were expressed by survivors and professionals alike. This ensued in concerns relating to structural discrimination and bias.

Extract 10

Yeah definitely, about radicalisation, so you know the police, if they're looking at every possible way to oppress a family, erm so you'll have a male that might have, not necessarily fought abroad but he would've been involved in something or other abroad and then come back to the UK, erm has been picked up by anti-terrorism or whatever, we had quite a few of these in (place name) and they would be referred in and often the children would be police protected. (Professional 5)

As a Caucasian non-Muslim, professional five evidenced what the remainder of the data indicated in more subtle terms. Having worked with Muslim communities for over 20 years, both nationally and internationally, he described witnessing the presence of structural bias and discrimination. The idea of systemic prejudice being at play was described as first-hand experience across the data. Yet professional five was the only individual to state it explicitly, whilst others alluded to it. An indication of the suppression of minority voices at a collective level was implied, with externally imposed fear of belonging to Muslim identities denoted. The idea of the social curse phenomenon enacting out in the lived reality of Muslim communities was signified. Kellezi and Reicher (2012) put forward group identification and affiliations as normally providing protective elements under a social cure phenomenon. Under social curse, however, these same elements and processes became a social curse, particularly where stigmatised and marginalised communities were concerned (Major and O'Brien 2005). A pervading notion of invisibility resounded throughout the data and by being invisible within society, their needs remained unrecognised, ensuing in inadequate service provision.

In summary, the macro level barriers encountered by the UK Muslim population had a direct impact on how DVA was addressed. A question of adequate service provision and holistic accessibility of services was raised in consideration of structural macro level barriers. Such barriers were identified as being intensified by negative media narratives and political landscapes.

3.5. Web Model of DVA

The themes derived from this study demonstrated the presence of a network of additional considerations surrounding victims/survivors. This is not considered within existing DVA theories and models and was unique to this population group. As outlined within the analysis Section 2.4, four multi-perspective IPA themes were ascertained from the data sets as follows:

- (a) Rebuilding life after DVA: Challenges at every level
- (b) DVA as diffused: "How dare he . . . invite them into my home to play judge and jury"
- (c) Denial of Intersectionality: "You're a feminist"

- (d) Structural barriers to addressing DVA: “You’re a different colour from everyone here so you have to work that much harder to be recognised”

For the purposes of a model, the four above themes were translated into shorter representative theme titles. These corresponded as follows:

- (a) Individual psycho-social-spiritual factors
- (b) Stakeholders
- (c) Intersectionality
- (d) Macro level factors

Utilising these, a visual representation of the themes according to lived experience, and as derived through a MP-IPA methodology, was developed. A Web model of DVA is therefore proposed to demonstrate DVA manifestations within the UK Muslim population.

This can be viewed in Figure 1 Below.

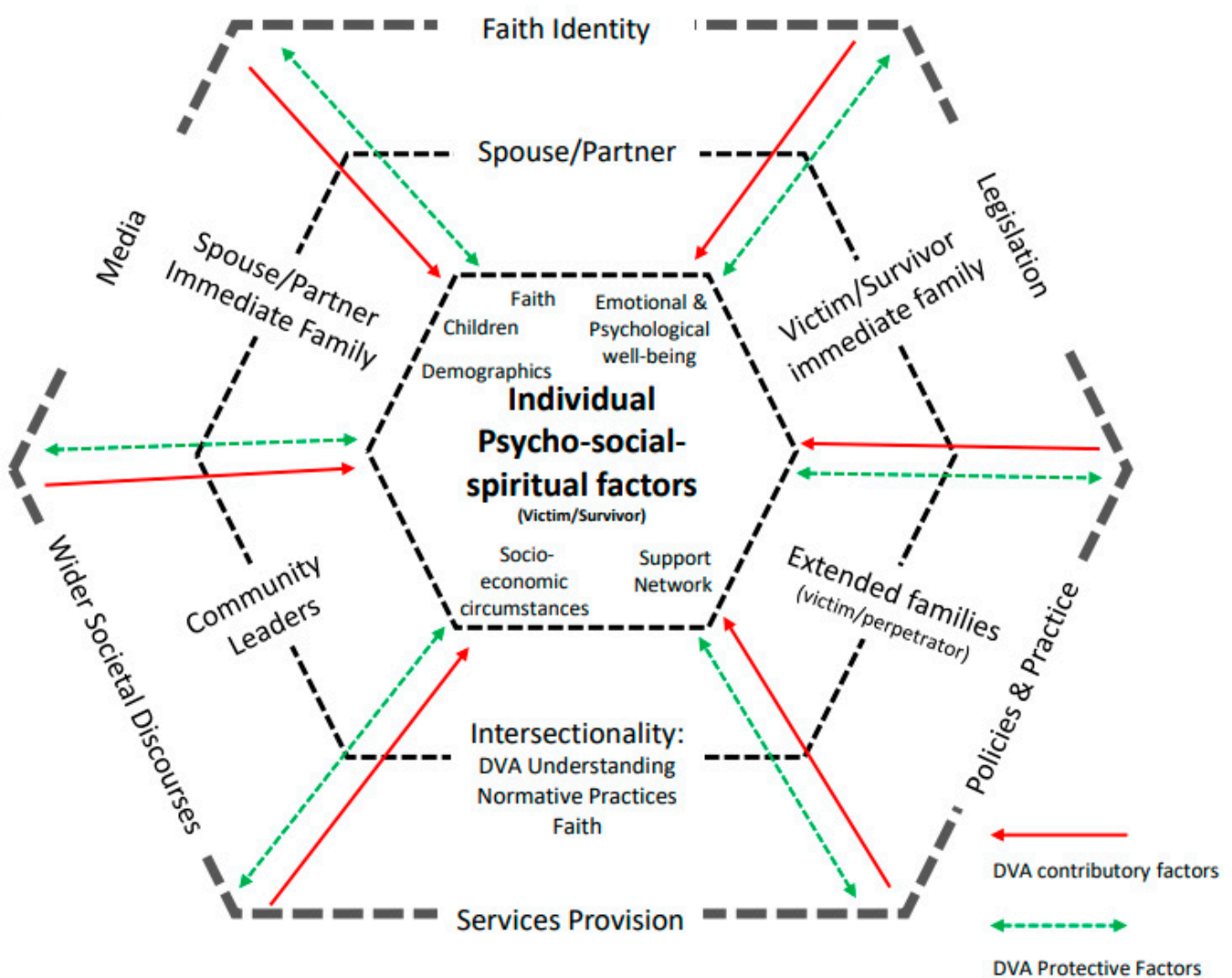


Figure 1. Web model of Domestic violence and abuse (Chowdhury 2021b).

The web-model illustrates the four themes derived from the data, and crucially, their interactions. These themes formed four layers of the model and thereby four layers of considerations in relation to DVA in UK Muslim communities. These layers are considered further as follows:

- a. Individual psycho-social-spiritual factors: At the centre was the individual victim/survivor, thereby placing the DVA according to their lived experience. Vic-

- tims/survivors were identified across the data as being surrounded by various challenges in numerous forms. Individual psycho-social-spiritual factors were alluded to as being governed by how the remainder of the web model responded to the DVA situation and, therefore, how the model was navigated.
- b. Stakeholders: Surrounding the individual were key stakeholders who shaped the DVA experience. Hence, the diffused nature of additional considerations directly impacting the level and type of support, which could be accessed. The presence of additional stakeholders challenges existing theories and models focus on two primary individuals within the relationship. Central to this was victims/survivors primarily seeking support internally within their communities, highlighting the importance of empowering communities.
 - c. Intersectionality: The presence of intersectionality at the bottom of the model was in particular relation to the interaction of intersectionality with macro level factors and additional key stakeholders. This interaction directly impacted DVA experiences. DVA contributory factors within these intersections manifested in poor understanding of DVA across communities, and conflation of harmful cultural normative practices with androcentric and reductionist approaches to faith. In contrast, holistic approaches to faith, removed from oppressive cultural norms and positioned towards the sanctity of all life, personal safety, and dignity, served as protective and victim empowering.
 - d. Macro level factors: This included external perceptions of faith identity at the macro level, provision of adequate services, organisational policies and practices, legislation particularly in relation to securitisation, and media narratives exacerbating stereotypes and macro level discrimination, which further impacted wider societal discourses. The consequences resounded throughout all levels of the web-model with a direct impediment on DVA experiences, reporting of DVA, accessing of services, and more acutely on individual and collective identity.

The idea of both DVA contributory and protective factors being present throughout the DVA experiences across the data is indicated through the red solid and green dotted lines. Of significance was the potential to facilitate protective factors from every aspect, despite the DVA contributory factors. Some of this occurred directly and some, such as those relating to individuals perpetrating abuse, was consequential to the interaction of intersectionality with additional stakeholders. This indicated the possibility of developing collaboratives with community capital in order to harness resources and create change.

4. Discussion

The web model of DVA herein demonstrates the nuances related to how DVA manifests within UK Muslim communities. Previous research has been twofold; a strong focus on DVA dynamics as per DVA perpetration, with one victim and one individual perpetrating abuse assumed to be at the core of abusive relationships (Dobash and Dobash 1979; Pence and Paymar 1993). Research has also focused on victim experiences within the parameters of ethnic cultural identities (Gill 2004; Kim and Hogge 2015; St Vil et al. 2017; West 2004). The research herein placed the lived reality of the victim at the core through a multi-perspective approach, which is in line with advocates of intersectional approaches (Collins 2017; Russo and Pirlott 2006) and inclusion of minorities (Biglia and i Martí 2017) in GRV and gender-based violence research respectively, enabling both an in-depth and broader spectrum of understanding of DVA within Muslim communities. The findings demonstrate the importance of placing the victim's psycho-social-spiritual context at the core, within their cultural frames of reference, and according to who/what they deemed as being critical to the lived reality of DVA. These factors played a critical role in victims/survivors being able to access support and navigate ways out of the abuse. Significant to the findings was the potential positive role of faith throughout. This included at the level of the individual and the interaction of intersectionality with stakeholders. Furthermore, the perception of

faith identity at the macro level, whilst often creating structural barriers to seeking support, demonstrated the potential for positive change.

The need to consider factors beyond two primary individuals within the relationship was a further primary outcome of this research. The role of additional active stakeholders was critical, an area remaining largely absent within current DVA models and theories. Such stakeholders were not passive individuals, rather they held considerable power to shape the DVA experience and outcomes, thereby rendering the consideration of stakeholders within DVA interventions essential to addressing DVA within UK Muslim communities. The interaction with additional elements including stakeholders, intersectionality, and macro level factors further exhibited as additional core components of DVA manifestation. Whilst the ecological model (Heise 1998) also puts forward extended considerations, these remain generic across all communities and do not consider the interplay of intersectionality and additional stakeholders. This results in cultural nuances going unrecognised.

At the macro level, understanding the impact of wider narratives, regardless of whether they were directly linked to DVA, was demonstrated as fundamental to understanding responsiveness within and between communities. It further demonstrated the need for change at the macro level in order to understand and cater to the needs of minority communities. Whilst the UK government did not report evidence of structural racism (Commission on Race and Ethnic Disparities 2021), lived experiences as per Windrush (Hewitt 2020; Taylor 2020), minority communities in prison (Mahoney and Chowdhury 2021; Williams and Durrance 2017), and data within this research all demonstrate a different lived reality for minority communities. Such research relating to direct lived experience suggest a discrepancy between broader systemic understanding and practice at a service provision level. Without accounting for differential experiences at the macro level, the issue of DVA remains partially addressed. Therefore, to place it within the relevant context permitted the identification of better utilisation of existing resources. Critical to this was the consideration of both vulnerabilities and protective elements across all levels of the web model. By identifying both vulnerabilities and protective elements, it presented the opportunity for developing better informed support and intervention plans, with victims/survivors being placed at the focal point.

Istratii (2020) estimated 85% of knowledge production initiating from the Global North, thereby proposing consideration of the resulting impact on methodologies. The advocacy of participatory action research (PAR) as a means of overcoming participants having research done to them has been put forward (Gill et al. 2012; Mohr 2021). Akom (2011) further advocated a movement towards developments in qualitative research whereby collaborations between academia and communities underpin the foundations of research. To date, such a decolonial approach has heavily focused on PAR methodologies actively engaging participants. Within this research, an MP-IPA method was utilised with the added layer of the lead researcher being a member of the communities in question. This facilitated an insider perspective and understanding of cultural frames of reference. This is in contrast to Western scientific approaches focusing on impartiality and distance (Akom 2011). As demonstrated throughout this research, such insights were critical to the entire research process, from conception to dissemination and beyond, whilst still screening for potential researcher bias.

Akom (2011) presented the use of Black Emancipatory Action Research (BEAR) methodologies drawing on both action research and participatory research. Integral to this approach were five fundamental points including a foundational consideration of race and intersectionality; challenging transposing of research paradigms across cultures; utilising communities for both problem identification and problem solving; utilisation of knowledge from experts with lived experience; and adoption of interdisciplinary approaches for increased understanding. Whilst the BEAR method was originally founded upon research with Black communities, its application to other minority groups was advocated by Akom (2011). Within this research, particular attention was paid to these considerations, specifically in relation to listening to experts from minority groups with lived experiences and

crucially, based on their cultural frames of reference. This was as opposed to transposing existing frameworks upon them. In doing this through an MP-IPA method, it facilitated an understanding and visual representation of DVA experiences, as per the expertise of both survivors and professionals. It further highlighted the solutions as identified by survivors and professionals alike, spanning across a range of disciplines including psychology, theology, and sociology.

The web model of DVA illustrates the interconnected nature of relationships and community structures within the broader macro framework. These were all found to be directly or indirectly related to how DVA manifested for UK Muslim communities. Through this increased representation, the potential for earlier points of intervention was apparent both at the level of various stakeholders involved and through the accommodation of intersectionality factors and their interaction with macro level factors. A sense of communities as powerful agents of change arose. In working collaboratively with communities in processes of mutual knowledge exchange, the potential for increased opportunities in addressing DVA was discernible. This included the utilisation of insider expertise and community capital, in combination with external macro level resources.

5. Conclusions

It is proposed that the web model can be used as a tool to identify vulnerability and protective factors for victims and those perpetrating abuse. Through placing the victim central to the DVA dynamics and exploring the networks surrounding them in a holistic manner, a more representative understanding of the lived reality of DVA can be gained. Thereby, resulting in the facilitation of better-informed support plans, both structurally and culturally. This would serve to enhance contributions from current models and theories and resulting interventions. Discussions with a national DVA training institute for the healthcare sector acknowledged the potential for the model to be applied in this manner (MJ, personal communication, 24 June 2021). Whilst the use of the model is clear in relation to GRV, the application to gender-based violence would need to be carefully ascertained. In relation to recommendations for practice within service provision, the web model can be utilised by statutory agencies to assist in mapping out victim vulnerabilities, particularly at the time of leaving abusive relationships. This can be utilised to put into place collaboratively developed safeguarding measures which are better reflective of individual circumstances. Conversely, the model can be utilised to identify protective strengths. Thereby, mechanisms fully engaging with these can be planned for in conjunction with support services at both a community and statutory level. The model can furthermore be used for the identification of protective and vulnerability factors for individuals perpetrating abuse, thereby facilitating holistic approaches to DVA interventions. Recommendations for Academia include adapting the web model for application to other close-knit communities. Examples of terminology that can be adapted include what the individual psycho-social factors are, who the stakeholders are, the specific intersectionality factors, and elements at the macro level. A faith framework can be adopted or omitted as necessary. The web model can further be utilised to gain deeper understanding of intersectional factors involved within GRV.

The model further holds potential for translation in related areas of work with minority and other close-knit communities. At present, the model has been adapted through literature support to develop a reintegration framework for former prisoners from minority communities.

Limitations

Survivors in this study were predominantly from a South Asian heritage. Whilst this is reflective of the majority of UK Muslims, the findings demonstrate the need to ensure all communities are better represented. Counteracting this, professionals involved in the study came from a wider range of ethnic backgrounds and further worked with a broad range of Muslim communities.

This model is based on limited data; however, the flexible nature allows for it to be adapted as required. The literature lends support to individual areas raised within the web model, as does the data within this study. The next stage would be to apply the model within various contexts and test its efficacy.

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