

# **AN EXPLORATION OF POLISH WOMEN'S EXPERIENCES OF MIGRATION AND SUPPORT FOR DOMESTIC VIOLENCE AND ABUSE IN THE UK.**

Alicja Anna BLADA-EDGELEY

A thesis submitted in fulfilment of the requirements  
of the  
Manchester Metropolitan University for the degree of  
Masters of Arts (by Research)

Department of Interdisciplinary Studies  
the Manchester Metropolitan University  
2016

## Acknowledgements

I would like to take this opportunity to express my deepest gratitude for the inspiration, encouragement and motivation from my supervisors Dr Kathryn Kinmond and Dr Lisa Oakley from the Manchester Metropolitan University. The enormous thank you and apologies are for my 'biggest fan'- my husband, who has spent many lonely evenings whilst I was writing up this project. I am extremely grateful for his patience, reassurance and support. Finally, this project would not be completed without the main contributors- the Polish women. Thank you very much for your openness and willingness in sharing with me your experiences.

Alicja Blada-Edgeley  
Winsford  
October 2016

<b>CONTENTS</b>	<b>PAGE</b>
<b>CHAPTER 1 An Introduction to the research</b>	7
1.1 Thesis structure	8
1.2 DVA definition and statistics	8
1.3 A discussion of definitions and terms	12
1.4 An introduction to migration	15
1.5 Summary	16
<b>CHAPTER 2 Reviews of theory, acculturation and support</b>	18
2.1 A review of theory	18
2.2 Women’s experiences of DVA	21
2.3 Experiences of migration	25
2.4 The likelihood of accessing services	29
2.5 Summary	32
<b>CHAPTER 3 Methodology</b>	33
3.1 Theoretical framework underpinning the methodology	33
3.2 Epistemological and ontological position	34
3.3 Qualitative research/ Research trustworthiness	36
3.4 Interview as a method	37
3.5 Participants	38
3.6 Language and translation	39
3.7 Ethics	40
3.8 Thematic analysis as choice of data analysis tool	41
3.9 Reflexivity	44
3.10 Summary	46
<b>CHAPTER 4 Findings and discussion</b>	47
4.1 Theme 1: Experiences of migration	48
4.2 Theme 1 Summary	55
4.3 Theme 2: Service Provision	56
4.4 Theme 2 Summary	62
4.5 Theme 3: The perception of entitlement to support	63
4.6 Theme 3 Summary	68
<b>CHAPTER 5 Conclusions and recommendations</b>	70
5.1 Conclusions and recommendations	70
5.2 Reflexivity and limitations	78
5.3 Implications for practice and policy	79
References	82
Appendices	94

## Abstract

Domestic violence and abuse (DVA) is still a highly prevalent crime affecting millions of lives each year. DVA impacts upon whole families, yet women worldwide are recorded as the most prevalent victims in DVA incidents. Black and Minority Ethnic (BME) groups have been examined in relation to DVA however, there is rather limited research around Polish women and their experiences of migration and support for DVA in the United Kingdom (UK). This research investigates Polish women's experiences of migration and support for DVA and looks at the impact of migration on their experiences through the thematic analysis of five interviews. All five women had been offered support from the domestic abuse organisations, health and children's social care services. A symbolic interactionist framework was employed to explore the impact of migration on the women's lives and the experiences of support they received, because it focuses on human interactions and the understanding people attach to those interactions.

The study findings indicate that all participants received similar levels of support from a variety of organisations in the UK. However, the women's experiences were of two distinct narratives: positive and negative outcomes of received support. Three women's stories were characterised by positive messages including expression of their gratitude and appreciation of received support from services, which enabled them to become empowered and make desirable changes to their lives. The other two participants voiced their negative views regarding their lives and experiences of prejudice and discrimination. These women remained dis-empowered after social interventions, and thus remained negative about their current lives, but made no positive changes in order to alter their circumstances.

The Polish women's responses to DVA varied depending on their perceptions of support available to them and how the impact of migration on their individual lives was differing. Importantly, although experiences may be shared across accounts, the perception of these experiences is noticeably different for each participant. This suggests that the way in which women interpret their experiences of the impact of the migration process on their lives and accessibility of support for DVA is central to understanding the outcomes. The research illustrates that the key factors are personal interpretation and perception rather than any factor linked to their personal identity as a Polish woman or to the level of support offered.

## Preface

This research has been influenced and informed by my professional role as a Domestic Violence and Abuse Support Worker. My professional experience of working with people affected by domestic violence and abuse (DVA) has helped me to understand that human abuse is complex and dependent on a variety of factors; it is a social and health issue (Ahmad *et al.*, 2009; Feder *et al.*, 2011). I have learned that some Polish women access and engage with the DVA support offered to them however, I noticed that there was an absence of academic understanding about Polish women and their experience of support received for DVA. As a migrant myself, I am particularly interested in Polish women who migrate to the UK and how their migration experience impacts their reasons for engaging or not with support for DVA.

It can be argued that the Polish women's experience of DVA can be intensified by the fact that they are no longer in the country of their birth and may no longer have recognised support networks. The women may also be unable to speak the English language. Therefore, the way of accessing support for DVA in the Polish community in the United Kingdom (UK) should be viewed in the context of the social processes associated with their migration experience. Particularly the comprehension of the process of social adaptation by Polish women into British society, not least because it informs the choices they can make in relation to accessing support for DVA (Kasturirangan *et al.*, 2004; Mahapatra, 2012). Therefore, in an area where there is a paucity of research listening to women's voices on the accessibility of specialist support for DVA experience can assist in developing understanding of their needs. If their needs are unknown, this is a potential area of growth in terms of health and social care issues.

Polish born nationals are the second largest white ethnic group in England and Wales (Office for National Statistics, ONS, 2013; Home Office, 2014). In 2013 there were 700,000 Polish nationals residing in the UK (ONS, 2013). The latest figures show that in 2014 there were 831,000 Polish nationals in the UK according to ONS (2016) estimates. Yet, neither the ONS nor Home Office statistics specify how many Polish or other nationalities of migrants are affected by DVA. Whilst experts have reported that there is evidence of DVA in Polish households (Wilcock 2015a; 2015b), relatively little is known about the specific experiences and support required by the Polish women. It can be argued that due to the numbers of Polish

migrants living in the UK, it is essential to gain a more detailed and deeper understanding of this particular community. The number of Polish migrants is continuing to rise, and therefore there could be a growing social and health concern in the UK, particularly if Polish women are not engaging with support services.

I have chosen to focus this project on Polish women's narratives rather than men's, simply because women worldwide are still the prevalent victims in DVA incidents (Davies *et al.*, 2015). I work with Polish women and want to ensure that I understand their way of engaging with services for DVA so that I can provide them with the best support for their needs. My motivation behind this project is to be able to better understand the impact of migration on Polish women's decision making regarding engagement or not with support in the UK.

## **Chapter 1 – An introduction to the research**

The purpose of this chapter is to highlight the aims for undertaking this research and to present statistics and prevalence of Domestic Violence and Abuse (DVA) in the United Kingdom (UK). This chapter also discusses different DVA definitions and the preferred use of terms for this project. It also introduces briefly the topic of migration, which features one of the aims of this research.

The governmental agencies in the UK deliver statistics on the prevalence of DVA for England and Wales. HM Government (2016) highlights that in 2015 there were around 1.35 million women who experienced DVA. Importantly for this project, official figures fail to identify a woman's age, ethnicity, race or country of origin (ONS, 2014). If DVA data remains limited then the specific needs of people are unrecognised (Alhabib *et al.*, 2010). This may have further consequences, such as limiting the creation of efficient interventions and meeting the specific needs of people from a variety of backgrounds (Greene, 2014). DVA is a sensitive topic and requires extended awareness and understanding from those who work with people affected by it. DVA is problematic and there is no simple approach to take in order to resolve it. Therefore, it is paramount that those who create and deliver service provision for DVA take account of minority women's experiences. If their voices are unheard their DVA experiences are unknown. These specific factors are crucial to explore, because some groups may suffer in silence and separation from others if we do not hear their specific experiences (Mahapatra, 2012).

This project investigates the impact of the migration process on Polish women in the UK and the experiences of support received for DVA. It also reviews participants' views and opinions on the accessibility of DVA services for Polish migrants in the UK.

### **Therefore the aims of this research are:**

- To consider the impact of the migration process on Polish migrants' experiences of DVA and their access to support
- To explore the experience of support received for DVA by Polish migrants to the UK

## 1.1 Thesis structure

In order to explore the Polish women's experiences of support for DVA in light of their migration experience this work has been structured into several chapters. Chapter 2 is a comprehensive review of theory that encompasses a mainstream feminist approach, ecological theory, Bowlby's (1969) attachment theory and Erikson's (1968) psychosocial theory are combined with Bledin's (2003) idea of secure base. These theoretical approaches are used as a framework for discussing the existing research investigating women's experiences of DVA, and to introduce research around experiences of economic migration and its impacts on how individuals access professional services. It concludes with highlighting the themes from the existing research. Chapter 3 takes the reader into discussion around thematic analysis within a symbolic interactionist framework and also explores data collection methods and the data analysis process. Chapter 4 discusses the research findings offering an exploration of the analysed material with adherence to symbolic interactionism and in relation to the ecological framework, mainstream feminism, attachment theory (Bowlby, 1969), psychosocial development theory (Erikson, 1968) and secure base (Bledin, 2003). Consequently, this leads to a discussion of how the themes derived from the interview transcripts contributes to the aims of the thesis and the literature review. Chapter 5 presents a conclusion and recommendations, draws on limitations and reflexivity in this research. Lastly, within the chapter, there are comments on the implications for practice and policy, which could be useful for other professionals who may come in contact with Polish women who have been subjected to DVA, and now reside in the UK.

## 1.2 DVA definition and statistics

The UK Home Office (2013, p.2) definition of domestic violence is given below. Although there are other definitions of DVA available this is the one that is used for this project:

'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to the following types of abuse: psychological, physical, sexual, financial and emotional.



Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape, and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.' (Formatting as per the UK Home Office website).

Domestic violence and abuse (DVA) is a highly prevalent and an underreported crime around the world (Feder *et al.*, 2009; Wellock, 2010; Garcia-Moreno and Watts, 2011; White *et al.*, 2013; Bradbury-Jones *et al.*, 2014; Davies *et al.*, 2015). As stated in the introduction DVA exists across all socio-demographic groups and it affects people of all genders and ages; regardless of their ethnicity, race and sexual preference (Bent-Goodley, 2005; Anitha, 2010). However, the highest recorded figures for DVA are for female victims (ONS, 2014; HM Government, 2016). The Home Office (2013) highlights that on average a woman is assaulted 35 times before she seeks help either from the police or women's aid organisations. Police in the UK receive a call related to DVA incident every 30 seconds (Home Office, 2014). However, these are the reported figures of DVA incidents to legal enforcement bodies, whereas the real numbers are unknown.

There are numerous reasons that may contribute to a lack of reporting to police, or to accessing support. Consequently, the statistics on DVA may not be a true reflection of reality. One of the reasons is that the police may lack the relevant training for dealing with incidents of DVA (Home Office, 2014). The abused may feel unsupported by police officers if they do not fully understand psychological tactics used by perpetrators of DVA (Allen, 2010; Ackerman and Love, 2014), and therefore, the abused may lose trust in the process of making people aware of her situation. Similarly, if a woman experiences prejudice or racism from any supporting agencies, it is unlikely that she will continue with seeking support for further incidents (Potter, 2008; Allen, 2010; Bent-Goodley, 2013; Rehman *et al.*, 2013). As a consequence, it is unknown how many DVA incidents including physical are missed from the national data.

In addition, the abused may not always be aware that what she is experiencing is DVA (Rivas *et al.*, 2013). The reason is that many women who experience DVA are not familiar with or perhaps have never seen a definition of domestic violence and what it encompasses (Home Office, 2012). Certainly, women are more likely to react to a physical assault, but when the abuse is psychological or emotional it is more difficult to prove it and often it takes a significant amount of time to recognise that their partner is psychologically abusive (Kulkarni, 2012; Rogers and Follingstad, 2014).

Psychological abuse can be highly damaging for a person's emotional and psychological wellbeing (Follingstad and Edmundson, 2010; Trevillion *et al.*, 2014). It often occurs alongside physical abuse, but it can stay hidden for a long time. Women experiencing psychological abuse report negative effect on their thoughts, feelings and beliefs system, which can be more devastating than the physical abuse itself (Rivas *et al.*, 2013; Ghani *et al.*, 2014). This type of DVA can lead to co-morbidity of psychological disorders, psychosocial impairment, longstanding psychological and emotional problems (Rogers and Follingstad, 2014).

Despite the fact that psychological abuse can have a longstanding effect on women's emotional wellbeing, it is difficult to recognise for many (Schoedl *et al.*, 2014; Trevillion *et al.*, 2014). Humiliation, manipulation, coercion and isolation, are only a few examples of the effects of psychologically abusive behaviours (Rogers and Follingstad, 2014). Rogers and Follingstad (2014) stress that this type of abuse can be difficult to acknowledge because there are no physical signs or symptoms, as there would be for physical or sexual abuse. In fact, without a physical incident women can stay unaware, and therefore, may be more vulnerable to the psychologically abusive behaviours of a perpetrator.

Psychological abuse is often unnoticeable, because it requires the understanding and perceptions of a perpetrator's intentions behind their behaviour (Ghani *et al.*, 2014). In many circumstances a perpetrator is intentionally harming his/her partner. However, the abused may not always understand those negative intentions. This may then lead to a prolonged period of being in an abusive relationship, because the victim is unable to point out that those behaviours are abuse (Rogers and Follingstad, 2014). Hence, it takes more time for a woman to recognise her partner's behaviour is psychological and constitutes abuse (Ghani *et al.*, 2014).

The statistics on domestic violence are also affected by the differing definitions produced in the past by the UK Government (Home Office, 2014). The UK Government expanded the DVA definition in 2013. Previous to this, domestic violence was defined as 'any incident or threatening behaviour' (Home Office, 2012, p.3), whereas, it is now widely established that DVA is often a pattern of incidents and may not be just an individual act of threatening behaviour. The new governmental definition acknowledges that DVA might be a pattern of incidents. Similarly, prior to the new definition, young people between 16 and 18 years of age were not included. Young people can experience DVA at the hands of their peers, siblings or family members. In fact, the Home Office (2013) report highlights that people between 16 and 18 years old are more likely to experience DVA than any other age group. Thus, the official acknowledgement that this age group is affected by DVA is a significant step toward overcoming the problem.

There is a current recognition of prevalence of DVA across UK society, and the UK's Prime Minister Theresa May, recently announced her plans regarding tackling this social and health issue (Mason, 2017). Theresa May is planning on creating a new law, which would combine existing legislation, and introduce new means of health and social care support. Therefore, this law would focus on the practical needs and emotional requirements of the abused. Theresa May explained that by providing a new law, she aims to increase prosecutions for DVA crime against women, but also protect the abused. The law will establish further training for law enforcement bodies, particularly in regards the needs of abused people at the time of reporting incidents, and to help support the abused through a more robust criminal prosecution process (Mason, 2017). The Prime Minister has acknowledged the lack of general understanding of the impact of DVA on the whole family, and she highlighted that attitudes must change in order to support the abused in their journey to be free from violence and abuse. The recognition of the need to improve the responses to DVA incidents by the law enforcement bodies and the prosecution system, is an important step to social change. The implementation of the new law could offer better response to DVA incidents and give victims more tools to use in prosecuting those responsible for violence against them.

In summary, the existence of different definitions over time, impacts on statistics, which are not comparable. The true reflection of the prevalence of DVA will never be accurate, because

this type of experience is problematic not only for the abused, but also her family, friends and society in general (Rivas *et al.*, 2013). As incidents of DVA concerning Polish migrants are not reported in the data specifically, it is impossible to ascertain the true prevalence of DVA occurring amongst this group. In addition, if a type of DVA is unrecognisable by women across all ethnic and race background the level of reporting to police or other organisations can remain unchanged, hence the statistics will continue to appear as estimated figures as is the case currently in the UK. Nonetheless, the introduction of the plans for the new law tackling DVA proposes the transformation of how DVA is viewed and understood by society and shows social changes that need to take place to shift people's perceptions. This may lead to a more efficient response to DVA incidents, and an improvement in reporting to police. Consequently, reporting figures may more accurately reflect the prevalence of DVA in the UK.

### 1.3 A discussion of definitions and terms

For the purpose of this project, the term domestic violence and abuse (DVA) is the preferred way of presenting domestic issues between two partners. Itzin *et al.* (2010) points out that in the UK, the use of the term DVA is preferable to the use of intimate partner violence (IPV). The latter refers primarily to two gender-related violence typologies that are: intimate terrorism and situational couple violence, which has been derived from the extensive work of Michael Johnson (2011) (Itzin *et al.*, 2010; Wangman, 2011). The research and typologies of IPV has its origins from the United States (Wangman, 2011). Therefore, the research using the term IPV has been mostly applied in this part of the world, rather than in Europe, which will affect how relevant the findings are in relation to the UK.

IPV affects both men and women, but the important distinction is that it occurs between intimate or ex-intimate partners (Lourenco *et al.*, 2013). In contrast DVA also encompasses violence and abuse perpetrated against, or by, children and elderly people or simply violence and/or abuse to any member in a family setting (Home Office, 2013). Hence, if that is the case then DVA is still perpetrated, but not necessarily by an intimate partner. The UK's Home Office definition is more specific than the IPV definition, because it explains in detail what is meant by DVA. Also it covers broader topics within intimate violence than the definition of IPV (Wangman, 2011). The Home Office (2013) DVA definition expands on what is viewed as

coercive and controlling behaviour and it has recently been updated to include 16 and 17 year-old people as victims of domestic violence and abuse within their own peer groups.

The terms '*victim*' and '*survivor*' create hotly debated tension between not only academics and professionals but also survivors and victims' themselves. Additionally, it is popular to name those affected by DVA as 'battered women' especially in the North American academic papers. The use of the terminology such as: battered women or batterer evolved from the term 'battered woman syndrome' (BWS). BWS has its origins in work of Lenore Walker in 1970s', who is an American academic and psychologist, as a response to the high prevalence of IPV and its effects on a woman's emotional and physical wellbeing (Craven, 2003). Walker's (2009) theory stresses that BWS has symptoms comparable to people who have experienced the traumatic events in their lives for instance soldiers in war zones. This term was developed at the time when only women were considered victims of DVA. BWS signifies the psychological and behavioural changes occurring for a woman who has been subject to mainly long term physical and sexual abuse from her spouse (Craven, 2003). BWS is now conceptualised as a sub-category of post-traumatic stress disorder (PTSD) (Walker, 2009).

In the UK the term BWS is not used by academics or practitioners, instead other words are implemented with regards to the names given to people who experience DVA. To begin with the word '*victim*' has been attached to a person who has been subject to violent acts or any type of abuse. Thus, as Itzin *et al.* (2010) comment the assumption is made that an abused individual has been victimised by a perpetrator emotionally, physically or socially stronger than a '*victim*'. The victim can be a child, a woman, a man or an elderly member of a family. As such, the word '*victim*' is often associated with a lack of resilience, passivity and the acceptance of one's circumstances (Itzin *et al.*, 2010). The argument holds that being victimised is disempowering, therefore the use of the word '*victim*' by professionals has negative connotations, and hence it has been argued that it is also disempowering (Itzin *et al.*, 2010).

On the other hand, Nicolson (2010) adds to the discussion that both words are not necessarily sending such negative implications. Nicolson (2010) explains that the term '*victim*' should be used simply for people who currently experience violence and abuse within their homes. The term '*survivor*' should then be used for a person who left the abusive and violent relationship.

The term survivor implies resilience, agency, confidence and self-awareness (Alhabib *et al.*, 2010). However, this is also problematic because some women do not associate themselves with the name of survivor (Nicolson, 2010). They argue that being a survivor may bring back thoughts of experiences of the abusive relationship, as well as constantly linking the survivor to the perpetrator. They further argue that it gives a label to a person 'coming out' of an abusive relationship that this person is no longer a woman, mother, daughter or sister, but rather the word survivor has been attached to her in order to identify the particular issues from her past.

For this project, it was deemed crucial to be cautious with the 'label' given to women experiencing violence against them. This project is not labelling people who experience DVA. I am fully aware of the social discourse surrounding labelling people as 'victim' or 'survivor'. There are no impeccable linguistic terms to be applied to people who experience DVA, because they all convey certain often problematic messages not only to victims or survivors but also the implications for social policies and practices are multiple (Klein, 2013). Therefore, I have chosen to use the following way of referring to my participants and others as abused. Abused is a term which captures the experience of all types of abuse, and is not aimed to be derogative or stereotypical (Klein, 2013). Using the term abused, aims to be a neutral way of describing experiences of abuse, therefore it aligns with the aims of this project.

#### 1.4 An introduction to migration

Migration is a sensitive topic, especially if its rates are high in any given country (Baker *et al.*, 2013). Polish migration in the UK has been widely discussed amongst politicians, policy makers, and academics and in the media (Thompson *et al.*, 2013). When Poland along with the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Slovakia and Slovenia joined the European Union (EU) in 2004, none of the Member States expected such a large influx of migrants (Harris *et al.*, 2012). The opening of EU borders enabled Polish migrants free movement between the member states and allowed them the experiences of new horizons and the possibility to begin new careers. The UK has always been a favourite country of residence for Polish migrants (Kaczmarczyk, 2008; White, 2010; Cook *et al.*, 2011). The strong

economic situation in the UK, a plethora of jobs and more importantly the higher wages than in Poland has always been a highly attractive push factor for Polish migrants (Drinkwater *et al.*, 2006; McKenzie and Forde, 2009; Cook *et al.*, 2011; Pemberton and Scullion, 2013; Trevena, 2013).

At first, Polish migration was welcomed and portrayed positively (Robinson, 2012). Mainly because Polish workers filled low-paid positions, which the native population did not want to undertake (Triandafyllidou *et al.*, 2007). However, as an effect of the worldwide financial crisis and the social recognition of the scale of Polish migration to the UK, arguably the attitude towards migrants has now changed (Robinson, 2012). Even though, the migrant labour force is highly valuable for the economy of the country at the same time it has been blamed by some for unemployment, criminality, and is seen as a threat to the host country's identity (Stivachtis, 2008; Baker *et al.*, 2013). Robinson (2012) notes that migrants are often accused of taking up natives' jobs and over-using the welfare system. However, as the research shows the aspirations and motives in migrating to the UK is somewhat different to the one presented by the media (Robinson, 2012; Baker *et al.*, 2013).

For most people migration is viewed in terms of a simple process of leaving the country of origin in order to move temporarily or permanently to a country. However, from the migrant perspective, the migration means more than just changing the country of residence. Some people have to leave their own country in order to seek asylum, because their life can be in danger as an effect of a political situation. These are refugees, who may be fleeing

their own country due to a civil war, or fear of persecution based on their religious beliefs, race or nationality (Mitchell, 2006). To remain in their country of origin is not safe, and often a refugee needs to move in a hurry leaving behind everything and everyone not knowing whether she/he will ever be able to return to their country of origin. However, some people's lives are not in danger when they plan to move abroad, they are seeking economic advancement. These people are economic migrants they leave their country in order to find work to improve their financial situation (Mitchell, 2006). An economic migrant's position is different to a refugee, because a migrant can return home at any point since they have chosen voluntarily to leave their country of origin.

Therefore, it may be suggested that being a white migrant may have its consequences, particularly around the lack of understanding of being a victim of DVA, within the context of migration. Therefore, it is crucial to explore the experience of migration and the way it links to the experience of engagement with services for DVA since migration involves a complete transformation. It means leaving behind everything that is familiar, not only our closest friends and family members, but also all the material, linguistic and cultural elements that give our lives meaning and value that makes us who we are (Grinberg and Grinberg, 1989 in Bledin, 2003).

### 1.5 Summary

DVA affects millions of lives every year across the entire world. The prevalence of the phenomenon is high and the statistics do not capture the data truthfully. The reasons are many, yet whole families still suffer. Available National Statistics fail to explore the gender, ethnicity or national background of people affected by DVA (ONS, 2014). Consequently, there is no data capturing the prevalence of DVA in the minority groups including the Polish community in the UK, yet the crime occurs frequently in Polish households (Wilcock, 2015a; 2015b). The impact of the migration process on people's lives, in terms of emotional and practical changes, can vary between individuals. However, these changes can be significant especially if there is DVA already present in families who have migrated to the UK. Therefore, given the existent brevity in knowledge around the impact of migration process on accessing support services and experiences of support for DVA in the Polish community in the UK the aim of this research is to capture this knowledge and to start to begin to fill the gap.



## **Chapter 2 – Reviews of theory, acculturation and support**

This chapter reviews theoretical approaches to DVA. It discusses fundamental ideas of causation of DVA rooted from the mainstream feminist viewpoint and the ecological framework, which helps to explain the impact of the environment on an individual affected by DVA. In addition, Bowlby's (1969) attachment theory and Erikson's (1968) psychosocial development theory are used to explore positive experiences of the migration process as described by Bledin (2003). This chapter also reviews the research surrounding women from different ethnic and cultural backgrounds and their experiences of DVA. It investigates people's experiences of migration and how this impacts the likelihood of abused people accessing specialist DVA services. The chapter concludes with themes from the existing research, which assist in the interpretation of the empirical data collected in the current study.

### **2.1 A review of theory**

There is a range of perspectives aiming to explain the phenomenon of violent behaviour against women around the world (Sokoloff and Dupont, 2005). One of them is a mainstream feminist view, focusing on the issue of DVA in terms of patriarchy. Patriarchy in DVA, is the intentional pattern of behaviour by men in order to gain power and control over women (Azam Ali and Naylor, 2013). DVA in a traditional feminist view explains violence against women based on the: power imbalance in the society; unequal social roles for women and men; or coercive and controlling violence (Wangman, 2011). It posits that women are the victims and that men command the role of an abuser in domestic affairs, which is based on possessing control over women (Sokoloff and Dupont, 2005; Azam Ali and Naylor, 2013). In addition, DVA takes place only between heterosexual couples.

The mainstream feminist approach focuses on a typical patriarchal society where men are positioned higher in the social stratification hierarchy (Brownridge, 2009). This means that men in a society such as fathers, husbands, uncles, brothers; are superior to women, children, culture and religion; and men may use violence to gain power and control over their partners (Sokoloff and Dupont, 2005; Lourenco *et al.*, 2013). Traditional feminist approaches emphasise the idea of masculinity: stronger physicality; gender; anger; and substance misuse;

which may play a central role in the violence against women (Azam Ali and Naylor, 2013). The patriarchal approach gives women less resources to change the abusive situation and the negative and biased cultural representation of DVA is responsible for violence inflicted on women.

Feminist viewpoints have also been utilised in an exploration of those ethnic groups where patriarchal rules exist such that women are dominated by men (Nosheen, 2011). They are discriminated against in economic, social, financial and political status (Hassan and Malik, 2011; Nosheen, 2011). This then may be connected to the impact of DVA on those women. For instance, as Wellock (2010) reports, South Asian women are less likely to report DVA incidents due to sociocultural or religious beliefs that men are dominant in the family setting. African and African Caribbean women are the highest reported risk groups for crimes associated with DVA around the world (Burman *et al.*, 2004; Bent-Goodley, 2005; Potter, 2008; Flicker *et al.*, 2011; Bent-Goodley, 2013; Lucea *et al.*, 2013; Nowotny and Graves, 2013; Rivas *et al.*, 2013). Whereas, White Irish and Jewish women claim to experience negative and stereotypical attitude from the general public and others towards them due to their nationality (Burman *et al.*, 2004; Allen, 2012)

Whilst it can be argued that mainstream feminist viewpoints have some contribution to make to the discussion of violence against women they do not offer a complete understanding, not least since more recent work has demonstrated that some women perpetrate DVA against their male partners (Dutton, 2011; McKeown, 2014). Traditional feminism also omits the idea of violence in homosexual relationships and it asserts that all women experiencing DVA want to leave their abusive relationships. Dutton (2011) argues that the traditional feminist studies have stereotypical view on the domestic violence and abuse, which is a human issue not a gender issue, and therefore requires an integrated approach of all services coming together in the community settings. DVA has a multi-dimensional nature, and hence the traditional feminist approach of violence perpetrated only by men against women, does not provide sufficient explanation.

The dynamics of DVA in the family setting might also be discussed in terms of ecological theory. Bronfenbrenner's (1994) framework explains how four distinct environmental systems co-exist and impact the individual and his/her family through direct or indirect social

interactions leading to behavioural and emotional alterations (Bronfenbrenner, 1994). These four systems are: microsystem, (the person is surrounded and has direct contact with family members, friends and colleagues at work or school); mesosystem, (includes contact between members of a person's family with his/her school or work place, it is indirect for the person himself); exosystem, (the person is directly affected by decision making or situational social changes to the members of his/her microsystem, but he/she has no direct involvement in any of those situations); and finally macrosystem, (consists of cultural, economic and political background to the person's life (Bronfenbrenner, 1994; Little and Kantor, 2002; Norris *et al.*, 2013).

The ecological theory argues that people's environment, individual differences and risk factors associated with interactions with others in those ecological systems can contribute to DVA (Norris *et al.*, 2013). For instance: low-paid work positions; the relevance of lack of social or familial support in the UK; language barriers; or a difficult financial situation can lead to increased DVA incidents in the family (Little and Kantor, 2002; Watling Neal and Neal, 2013). The combination of social, psychological and personal factors may contribute to abusive behaviours towards women (Pleck, 2007). Ecological theory is helpful in highlighting how the social environment affects people's behaviour and leads to emotional changes in themselves, which in turn can contribute to increase of DVA in the family environment.

DVA is a sensitive topic and requires extended awareness and understanding from those working with people affected by it. DVA is problematic and there is no simple theory providing unequivocal answers to its origins and problem solving. Therefore, it is vital to consider various theoretical frameworks and combine elements from all together into one holistic approach when tackling DVA in society. In terms of the impact of the migration process on the individual's experiences of engagement with specialist services, the process of positive migration is relevant to discuss. The reason is that, migration brings with it a range of difficult decisions and sacrifices needed for a better life (in economic terms, for example). Migration affects people's perceptions and understanding of available services in community settings.

Bledin (2003) aptly illustrates a migrant's situation in comparison to Bowlby's (1969) attachment theory and Erikson's (1968) psychosocial development theory. One of the tenets of Bowlby's (1969) theory was an idea of secure attachment where a child is seeking contact

and maintaining proximity with a significant adult often mother. Bledin (2003) also explains that secure attachment is similar to 'basic trust' described by Erikson (1968). Both secure attachment and basic trust equals the child being able to separate from the mother, because he/she feels safe and is prepared to explore the environment on its own. Experts agree that proximate, secure attachments and relationships of trust can add to positive migration experiences (Sam and Berry, 2010). For those Polish migrants who are actively participating in social interactions with others, the new country can be their secure base as refer to by Bledin (2003) where people feel safe and have satisfying lives. They feel welcome, they are independent and perhaps fulfil their dreams of a higher standard of living (White, 2010). Importantly for the current research they have a clearer understanding of the accessibility of specialist DVA services in their area.

Therefore, the outcome of experience of migration for the Polish women depends hugely on the women's positive experience of adaption into British society (Sam and Berry, 2010). If the migration experience is positive the UK can become the safe place and importantly the separation from the Polish land can be positive, because the women have secure attachment with their previous country. However, for women who do not created a secure attachment with Poland then the UK is unable to offer the secure base they are looking for, because the women are not taking part in the adaption process (Sam and Berry, 2010).

Abuse is a complicated social issue and it needs a multi-disciplinary approach to tackle this problem. DVA is a form of abuse, with huge consequences for the person's health and social life and it causes financial impacts on the social welfare system (McNeely *et al.*, 2001; Ellsberg *et al.*, 2014). It is useful to consider various theoretical frameworks, because they can all provide information for increasing our understanding of DVA dynamics.

## 2.2 Women's experiences of DVA

There is a plethora of literature focusing on DVA and the race and ethnic background of the abused women. Yet these are largely in regard to African, African-Caribbean and Asian groups (Flicker *et al.*, 2011; Bent-Goodley *et al.*, 2013; Rivas *et al.*, 2013; Girishkumar, 2014). These groups are crucial to research, because they belong to Black and Minority Ethnic (BME) communities. However, their needs are not necessarily in line with the white migrant

women's experiences. Every woman affected by DVA regardless of her ethnicity and race will have different experiences, which are important to outline in order to understand their needs (Batsleer *et al.*, 2002; Burman *et al.*, 2004; Burman and Chantler, 2005). However, it is paramount to note the differences in experiences for BME and minority groups that Polish women identify with.

In some ethnic groups DVA can be more unrecognisable and a more unspoken crime than in others, because it is hidden for different reasons (Nosheen, 2011). This can be the result of the cultural, religious and social values present in those cultures (Wellock, 2010). Stereotypical views towards certain minority groups – such as the lack of understanding of women's rights, the language barrier and unsecure and unstable immigration position - are only one of the issues BME women can face (Wellock, 2010). Therefore, women's responses to DVA incidents against them can be delayed or approached differently to those of mainstream society, because their individual needs can be more complex, especially if the women have no recourse to public funding, which will prevent them from accessing services in general (Anitha *et al.*, 2010). The responses, or lack of them, can be associated with negative previous experiences of their ethnicity and gender related issues within society (Kasturirangan *et al.*, 2004). This should be taken into consideration when supporting people from minority and BME backgrounds who experience DVA (Mahapatra, 2012).

For instance, the differences in experiences of coping strategies and the development of PTSD as the result of DVA experience, was noted in the Weiss *et al.*, (2016) study. This research contributed to the understanding of how different ethnicities of Black, Latino and White women avoid or maintain their coping strategies in dealings with psychological and practical demands of abusive relationships. Weiss *et al.*, (2016) study indicates that race and ethnicity warrants different responses in terms of problem solving skills or the impact of social support on a decision making process. Weiss *et al.*, (2016) conclude that different ethnicities and races have their own way of coping, which is related to personal factors rather than cultural. The Black, Latino and White women had different ways of dealing with their personal issues in the way that some were willing to disclose DVA to their friends and family, whereas others preferred to manage their situations on their own, which prolonged help-seeking behaviours. This research can be applied to the Polish women, because it executes the differences in

cognitive reasoning between races and ethnicities and shows varying ways of dealing with DVA by different ethnicities and races.

The continuing work within the minority women's and BME groups' experiences by Rehman *et al.*, (2013) draws attention to the ongoing issues these women face in their daily lives. These are often: cultural differences; gender related issues; immigration status; and language barriers, for some. Rehman *et al.*, (2013) highlight the need for wider understanding and the increased awareness from the general public around the world regarding these individual differences between women. Rehman *et al.*, (2013) argue for the social change to take place to enable an increase in DVA awareness across all societies. This message is relevant to all women across different race and ethnicity. If violence against women continues to not be prioritised by governments and social systems, then the lives of the abused will remain unchanged.

Whilst different ethnic groups have their own experiences of DVA, there are some similarities of experience that can comprise any experience of DVA across all abused people. For instance: physical, sexual, emotional, psychological or financial abuse (Bent-Goodley, 2013; Trevillion *et al.*, 2014). Regardless of ethnicity any woman might be subjected to those types of abuse. The ending of a violent relationship can often be delayed due to a lack of social and familial networks, the guilt that children are being left without a father figure and no financial means for independent living (Brownridge, 2009). Yet, to have social and familial support has been proved to empower women's decision-making regarding DVA (Fusco, 2010; Aysa-Lastra *et al.*, 2012; Mahapatra, 2012). In addition, people from BME groups prefer to seek help from family members or friends (Lucea *et al.*, 2013), although social networks can provide not only emotional support but also practical help for women in abusive relationships (Aysa-Lastra *et al.*, 2012). The Polish women are part of the minority community, and thus it is likely that they also experience similar practical issues and psychological dilemmas regarding ending of an abusive relationship.

Despite the fact that there is some correspondence of DVA experience across race and ethnicity, women's responses, interpretations and knowledge with relation to their individual experience of DVA do not constitute one homogenous experience (Batsleer *et al.*, 2002; Mahapatra, 2012). The acceptance of differences in people's experiences of DVA allows a look

at the sensitive needs of all communities with an open-mind as to what support is appropriate to their needs. Recognising that all minority and BME communities in the UK consist of individual human beings with individual needs and requirements, is the first step to gaining greater knowledge about them and their specialist needs.

Batsleer *et al.*, (2002, p.18) argue:

‘We want to challenge the notion that only ‘black’ peoples are ‘raced’ or have ‘ethnicity’. Hence ‘whiteness’ should also be regarded as a ‘colour’, that is, as having culture, history and diversity.’

Following this idea of Batsleer *et al.*,’s (2002) notion of whiteness as being equally important as black, more researchers should acknowledge these experiences in order to further understanding of social knowledge in a diverse UK society. More consideration should be given to the white migrant groups whose number is growing in the UK, but the knowledge about their DVA needs is underrepresented in academic research (Batsleer *et al.*, 2002; Burman *et al.*, 2004; Burman and Chantler, 2005; Allen, 2012; ONS, 2016).

Ackerman and Love (2014) highlight that minority and BME groups are more likely to experience DVA, but are less likely to report it to the police. This is connected to the social and economic differences amongst minorities, BME and the mainstream society. Ackerman and Love (2014) indicate that people with sufficient access to finances are more independent, hence more likely to leave the abusive relationship sooner. They can accommodate their own and their children needs without the substantial need of abusive partner’s financial support. However, for women who are dependent financially on their abusive partners the escape from the abusive relationship requires longer preparation, planning and securing some finances prior to move. This fact is crucial in the context of this research, which concerns white European migrants, because as stated above knowledge about their specific support needs for DVA remains limited (Burman and Chantler, 2005; Allen, 2011) and if their needs for specialist support are unknown this issue cannot be addressed appropriately.

This project is not a demonstration that DVA is more prevalent across White migrant groups, but it highlights that this is a growing social and health concern in the UK if the impact of migration and support for DVA on Polish women's experiences remains unknown.

### 2.3 Experiences of migration

The process of a positive migration experience is not linear and it depends hugely on several components. Mainly, it is subject to an acculturation process as described by Berry (1997, 2001). Acculturation results in intercultural contact between the host country and the migrant's heritage culture (Schachter *et al.*, 2012). When two or more cultures co-exist, changes can occur to both psychological and behavioural aspects of a person (Sam and Berry, 2010). Theoretically, according to Berry (1997, 2001) the changes should transpire for both cultures, however, it is often the migrants who experience the most challenges. The psychological impacts can include: self-esteem and level of confidence (Sam and Berry, 2010); sociocultural impacts can include: moral values and traditions, clothing, music or cuisine (Phillimore, 2011) and cognitive impacts can include: language proficiency or decision making and problem solving skills (Berry *et al.*, 2006).

There are different aspects of the acculturation process. These depend on the level of adaptation into the host country culture that is: integration (heritage culture and host country culture are integrated together); assimilation (heritage culture is dismissed and only the host country culture is maintained); separation (only heritage values are maintained, avoidance of interaction with native people); and marginalization (no cultural maintenance of either groups often due to social exclusion or discrimination) (Berry, 2001). The results of the acculturation process for Polish women can inform about their experiences of engagement (or not) with specialist support for DVA.

The process of acculturation is challenging and brings significant changes to both ethnic group and host country identity. Migrants are not only impacted by the material side of the migration, for instance new work and new accommodation, but migration is also a test to their moral values, rules, upbringing and cultural beliefs (Berry, 2001). The process of acculturation can be accompanied by feelings of stress due to rapid changes on all sociocultural levels. To face a new culture, different cuisine, lifestyle and differences in spoken



language, may cause negative impact on psychological wellbeing. This is when the migrant may be experiencing acculturative stress (Sam and Berry, 2010; Phillimore, 2011). Acculturative stress occurs when a person is unable to cope or finds it extremely difficult to cope with the new life experiences. Depending on people's own values and the new social situation they are in migrants can participate in the new social circles or stick to their familiarity of people, places and objects (Berry, 2001), which can affect further the feeling of acculturative stress in tandem with not accessing support for DVA.

Non- engagement with specialist support can be particularly relevant to minorities when their own community remains closed to the influence of others. For instance, Polish migrants rely heavily on social networks in seeking support or finding a job (Sumption, 2009). Without the understanding of how a particular country deals with certain issues, migrants are unable to seek immediate help due to a lack of understanding of how the health and social care system works or where and how to ask for help. Similarly, if some women have rather limited social networks they are often forced to rely on their abuser for emotional support (Mahapatra, 2012). The consequences of such circumstances can lead to further isolation and prolonged abusive behaviours. Flicker *et al.*, (2011) highlight the important role of having social networks when a woman is in an abusive relationship. Social networks greatly support a woman by providing emotional and practical support (Flicker *et al.*, 2011). Those supported by friends and family are more likely to end the abusive relationship and access specific domestic abuse services.

In the circumstances where Polish men are the breadwinners the women can become dependent on them financially. This may then result in financial abuse, which can be difficult to recognise. Financial abuse is a form of DVA and it involves financial manipulation and control (Oliver, 2014). Similarly, to other types of human abuse control over finances can be challenging to identify, since it can include signs such as: only one person has access to bank accounts and the spending is monitored very closely leaving the other person dependent financially or the abuser prevents his partner from looking for employment.

At first, this financial manipulation can be misinterpreted due to a lack of recognition of the abusive behaviour (Oliver, 2014). No access to finances can lead to isolation, feeling of low self-worth and debts. Financial abuse in tandem with psychological, emotional or physical

abuse can delay the ending of the abusive relationship (Horley, 2015). On one hand, the Polish women may not have social or familial networks in the UK, which would support them emotionally and practically. On the other hand, without employment and with financial dependency on their partners they have no financial means for independent living (Brownridge, 2009). Hence, their engagement with services can be delayed or in some circumstances never take place.

Ukasoanya (2014) argues about the importance of language acquisition for migrants', which may support migrants' social interactions with others in the community. Language is a powerful tool, which supports basic human interactions (Schwartz *et al.*, 2014). Through those interactions people learn about themselves and others. The symbolic meaning of situations and events is related to language used and people can question behaviours and seek explanations for themselves (Burr, 2003). Language acquisition amongst migrant people is important to consider, especially if they experience DVA. For a non-English speaking woman this can be an additional barrier to obtain a support. Firstly, she may not understand the literature around DVA even if she can access it in public places such as: general practitioners, children centres or schools. Secondly, this may lead to isolation from others in the community (Ukasoanya, 2014).

There are other aspects of the acculturation process, which may prevent in-group members from feeling like fully integrated citizens. Other factors are related to the host country's attitude on migration in general (Stivatchis, 2008). If the migration flow is high and is treated as a threat to the national identity, this can negatively impact the migrants' acculturation process. The process of psychological acculturation by migrants may also be disrupted by the division of labour in this society (Willis, 1982; Cao *et al.*, 2010). For instance, Polish migrants are more likely to take up jobs in low-paid sectors such as: construction; hospitality; or agriculture (Harris *et al.*, 2012; Pearson *et al.*, 2012). These economic sectors employ chiefly foreign nationals, because they are low-paid and they are not attractive for native people (Janta, 2011). Low-paid positions are easily accessible, relatively stable and do not require specific qualifications (Johnson and Duberley, 2010; Janta, 2011). However, long working hours with minimum pay can lead to a negative psychological impact on the migrant's

wellbeing. Migrants may feel devalued in comparison to others due to their ethnicity, race or country of origin.

The clear division of labour within society can impact and influence the changes amongst social class and relationships within society. The minority group is then less likely to continue with the assimilation process and the social solidarity of society is absent (Stivachtis, 2008). For some Polish migrants' feelings of social isolation, loneliness, lack of social and familial support and finally lack of sense of ethnic or national identity can result in separation from the mainstream society. If this is a true experience for them, then finding support in a DVA situation can be challenging. It is more likely that they will remain in abusive relationships or the impact on their lives will be negative. Not only a lack of understanding of DVA experience but also their negative adaptation process can impact the situation they are in.

Schachter *et al.*, (2012) indicate that irrespective of maintaining one's culture or acquiring new language skills the migrant may still endure acculturative stress due to changes occurring to his/her own beliefs, values and culture, which is a result of contact with native people. According to Moscovici's (1980) social impact model the ethnic minority group impacts indirectly the majority group (Brown, 1996). However, at the same time the majority group/host country is influencing the changes in the minority. Both groups make an impact on each other through different underlying processes (Brown, 1996). Moscovici's (1980) model emphasises that the ethnic minority group impacts significantly the majority, because the latter is faced with a social and cultural aspects of acculturation (Brown, 1996). This in turn can create tension in the majority group, which consequently can lead to discussions and shifting of interest about migration on the national level as described by Robinson (2012) and Baker *et al.*, (2013).

To sum up, an acculturation process follows the direct contact of the ethnic minority group with the native people. The ethnic minority group is predominantly affected by the cultural challenges and behaviours due to the acculturative process (Ho and Chiang, 2014). Polish migrants who engage in the acculturation process have more opportunities to integrate into British society. They learn about the wider society and the country's way of working (Taras *et al.*, 2013). They come in contact with other ethnic groups, cultures and religions. By gaining this knowledge, Polish women can expand further cognitive skills such as decision making and

solving problems. Women's beliefs and perceptions on DVA is challenged, hence their understanding can increase (Aysa-Lastra *et al.*, 2012). By engaging with others in the community the women can learn about DVA what type of support is available to them and where to ask for help.

#### 2.4 The likelihood of accessing services

Several researchers (Ahmad *et al.*, 2009; Anitha, 2010; Greene, 2014; Girishkumar, 2014) argue that women's migration status plays a significant role in helping to find support in a DVA situation. A study by Briones-Vozmediano *et al.* (2014) into migrant women's experiences of DVA in Spain highlights some useful information. Their research aim was to outline the issues associated with migrant women lacking in engagement or often declining the support from the variety of public agencies and other organisations available. The findings concluded that women from ethnic backgrounds living in Spain were reluctant to seek help from professionals. Several points have been emphasised. Firstly, migrant women can experience more adverse economic issues than their Spanish counterparts. They can depend financially on their abusers or have no access to public funds, which leads to possible financial abuse and consequently remaining in an abusive relationship. Arguably, this experience is common to women across cultures.

Secondly, migrant women did not feel that the Spanish social, health or legal system were adequate to their needs. If women do not feel supported they are less likely to access any services. Additionally, women in Briones-Vozmediano *et al.*, (2014) study have experienced very different problems from native women. These were outlined as a lack of understanding and recognition of services available for DVA, isolation and loneliness. It can be argued that factors such as financial dependence on the abuser, lack of knowledge of local service provision or lack of support networks as described in Briones-Vozmediano *et al.* (2014) are likely to be familiar to the Polish women who experience DVA in the UK. In the light of growing numbers of Polish migrants to the UK, their life experiences in the context of DVA are vital to capture, so that the appropriate support can be applied to their individual needs.

Another study into the likelihood of accessing services focused on the experiences of the criminal justice system in Canada by minority women as outlined by Tam *et al.* (2016). This

research looked into reasons for non-engagement with the Canadian legal system. Tam *et al.* (2016) state that some of the factors involved in not accessing services by the minority women can be applied across all racial and ethnic backgrounds. This may include factors such as: inadequate outcome of a criminal case; unsupportive court staff; or seriousness of DVA incidents; as the main factors evident in most women experiences. However, other reasons were only applicable to the minority women such as: insecure immigration status; language barriers; or feelings of discrimination or racism (Ammar *et al.*, 2014; Tam *et al.*, 2016). The minority women also experienced isolation and loneliness; and they feared the consequences of calling police, because their understanding of the legal system is inadequate. In addition, the women are more likely to be pressurised by their social environment to stay in their abusive relationship, because the institution of marriage has a significant meaning in certain cultures (Tam *et al.*, 2016).

It is important to note that an additional barrier for some minority women to access services is that their own partners can often provide them with incorrect information regarding the consequences of contacting police or supporting organisations (Tam *et al.*, 2016). The women are sometimes threatened by their own partners about the risk of losing their own children if they speak to people outside of the household (Ahmad *et al.*, 2009). Even though there is a similarity of this experience with other non-minority women, the distinction is that the minority women can experience their partner preventing them from learning the English language, isolating them further and stopping them from integrating into their new environment. If the women are unable to create social networks in the host country, they continue to be dependent on their abusive partner for finances, friendship and translation (Alhabib *et al.*, 2010; Anitha, 2010). This then has lasting consequences on the likelihood of engagement with community services for the minority women.

Similar findings were described by Carbone-Lopez's (2013) study, which emphasises that women from migrant backgrounds and experiencing financial difficulties are at a higher risk of victimization and prevalence of DVA against them. The reason may be that they do not have sufficient understanding of the host country, they may be isolated from their social networks and finally they are likely to rely entirely on their abuser for financial support. In addition, if the women stay at home with the children they may not have enough

opportunities to access community groups and learn about available support to them (Carbone-Lopez, 2013). If this is a true experience for women, they are not likely to access specialist services simply due to insufficient knowledge and/ or language skills to ask for help. Hence, it is deemed crucial to explore their experiences of accessing services in the UK, which then help to develop the understanding of the reasons for non-engagement.

Kasturirangan *et al.*, (2004) point out that DVA may be misinterpreted by some due to individual differences, and in the context of culture which can affect the likelihood of accessing services. To distinguish cultural and individual differences in DVA experiences is an important factor to consider. As already outlined, the cultural beliefs, fear of repercussions, language barrier and the significance of the marriage itself plays an enormous role in people's life, and hence their engagement with local services can be impacted. Therefore, it is important to explore DVA as an individual experience, but in the context of community settings (Gilligan and Akhtar, 2006; Allen, 2012). Due to the levels of complexity within DVA, the experience of the abused tends to be an intensely personal one and it is unlikely that any two people will have shared exactly the same experience. Each person affected by DVA thinks and understands her experience individually. Gilligan and Akhtar (2006, p.3) aptly illustrate the paramount role of individualism within the culture:

‘Individuals within all cultures have individual needs, motivators and experiences. They need assessments and interventions, which take sufficient account of their culture rather than ones based in any preconceived ideas of what their culture means for them.’

Religious beliefs, upbringing or everyday social interactions can play an important part in the likelihood of accessing services by migrants (Mahapatra, 2012). Culture impacts people's perceptions, understanding and cognitions (Gilligan and Akhtar, 2006) meaning that women's response to DVA incidents against them can be delayed or differently approached to mainstream society. Their responses or lack of them can be associated with negative experiences of their ethnicity, especially where migration is high (Kasturirangan *et al.*, 2004). The recognition of the socio-cultural and/or immigration status of women from the minority groups is crucial. Without the understanding of these factors, adequate support for migrant

women is unlikely to be effective and the likelihood of accessing support by migrants may remain low.

### 2.5 Summary

This chapter has reviewed theoretical frameworks in relation to DVA and people's experiences of DVA in the light of the migration process, which led to conclusions in terms of the likelihood of accessing services for the migrant population. The major issues intertwined in the discussed material are as follows:

- Up-to date research focuses mainly on African, African-Caribbean and South Asian women's experiences of DVA, and no research exists specifically regarding Polish women and their experiences of accessing specialist DVA support.
- Migration is a major change to people's lives and their cultural background, moral values and understanding about the new life surrounding them affects their acculturation.
- Depending on whether the migration experience is positive or negative, some migrants take part in the social adaptation process, whereas others may remain separated and marginalised from mainstream society.
- The likelihood of accessing specialist services for DVA by Polish women can depend on a variety of factors. Their experience of migration, whether it is positive and the host country becomes the women's secure base (Bledin, 2003).

Finally, it is clear that having an understanding of Polish migrant women's specific needs is yet to be discovered.

## **Chapter 3 - Methodology**

This chapter is confined to the theoretical underpinnings of the methodology. It highlights and discusses the use of thematic analysis within a symbolic interactionist framework and argues that both approaches are complimentary to one another. This section also outlines epistemology in tandem with an ontological position, the researcher's position in this study, and presents data collection methods and the data analysis process.

### **3.1 Theoretical framework underpinning the methodology**

Braun and Clarke's (2006) and Clarke *et al.*, (2015) thematic analysis was followed within the symbolic interactionism framework (Blumer, 1967). Using the symbolic interactionist framework to interpret the data emphasised the unique sociological approach this theory offers (Blumer, 1967). There are five central tenets to symbolic interactionism (Charon, 2007; Hewitt and Shulman, 2011). These ideas are fundamental to understand the application of the symbolic interactionism to this study. These are as follows:

1. People are social animals. They can best be understood by looking at their interactions with the environment they are living in (Mead, 1934; Blumer, 1969). Symbolic interactionism views the human being as a part of a society instead of trying to understand individual differences. The individual is only a part of the society and the social interactions between both are in the heart of symbolic interactionism (Mead, 1934; Hanzel, 2011). This relationship is relational, because it focuses on the connections between people. The socially constructed individual exists in the social world through the crucial human interactions (Hewitt and Shulman, 2011). The meaning is attached to experiences of these social interactions and the result is a specific behaviour.

2. People are thinking creatures (Garrett-Peters and Burton, 2015). Behaviour and actions are understood through social interactions, but underneath all actions, an internal cognitive process takes place. The conduct of a human being is not conditioned to interactions between peers, but it is a result of a thinking process. The ability to make decisions, solve problems, think and feel differentiates people from other animals. Behaviour is essential to acknowledge, but more crucially people's ability to cognitive reasoning (Garrett-Peters and Burton, 2015). Relationships between people help with understanding the social world. This



way, human beings learn to position themselves within the social world, and have self-awareness of their surroundings.

3. Everyday experiences are essential in order to understand people (Allen- Collinson, 2011). People's views on situations and other people, are defined by their experiences and the way they think about these. Thus, a human's behaviour is driven by the way they understand a given social situation.

4. Since people are the product of social and group interactions, the context of these is important to consider (Ukasoanya, 2014). Whether the UK is the context, or any other geographical position, this will impact people's interpretations of social interactions and how they will act upon these differences.

5. Culture is a significant factor in understanding a socially constructed individual (Calarco, 2014, Ukasoanya, 2014). People are born into different traditions and cultural backgrounds. Hence, culture is a significant factor in shaping people's behaviour. Culture is created by people and has fluid meaning. It changes over time, impacted by social changes in a similar way to human behaviour. Ukasoanya (2014) and Calarco (2014) argue that, people's ability to speak a language, their social position, and their understanding of their role as a minority engaging with a majority, all have a symbolic meaning. These are symbols which contribute to the understanding of an individual as part of society.

Blumer (1969) emphasised another crucial element to symbolic interactionism, which is the human self constructed as an 'I' and 'me'. The former is the subjective self whereas the latter is objective. 'I' is that part of conscious self which is aware of individual differences and internal thinking. 'Me' arises from being a part of a social world and is impacted by the way others view us in the society hence, it is more reflective (Burkitt, 2008). The social world is very powerful in connection to self-understanding (Javaid, 2015), purely as an effect of role-identity negotiations, related to the attribution of symbolic meaning that people, places and situations hold for an individual.

### 3.2 Epistemological and ontological position

The epistemological and ontological position of a research study informs choice about the methodology and methods used by the researcher (Ritchie and Ormston, 2014) with epistemology referring to the relationship between the researcher and the 'knowledge'

she/he is trying to capture or understand (Stroud, 2011) and ontology dealing with assumptions about the nature of reality (Stainton Rogers, 2011). This study adopts an epistemological stance that assumes people are unable to be separated from their level of knowledge (Ritchie and Ormston, 2014). Such that, social phenomena are understood in terms of the meaning in which they are held by people.

Since, the epistemology is concerned with finding the answers for the studied knowledge the constructionism approach has been employed. Constructionists believe that knowledge is socially constructed, as is meaning, through social interactions between people (Ahmed, 2008). Constructionism has its place in the epistemological assumptions of this study, because this research is concerned with exploring Polish women's experiences of support for DVA and the impact of migration on these experiences. Their experiences are socially constructed through the interactions with others. The meaning attached to their experiences is their own individual interpretation of social reality around them, which depends on understanding of the social role in the society women are part of, including any values attached to it such as the language used or cultural background (Ahmed, 2008). This is a small study sample, which represents a 'thick data' as explained by Geertz (1973). Therefore it cannot be applied to the general population. Women's experiences are subjective, and this is how I aim to discuss them.

On the other hand, the ontological stance of this study is about capturing the meaning of the women's experiences, their views, opinions and thoughts (Stroud, 2011). Ontology asks about the nature of reality, hence the use of interview questions deemed highly appropriate to uncover the subjective truth. Therefore, the methodological approach in this research has been the use of the semi-structured interview questions with participants. Whilst the theoretical underpinning of this study is interpretivism, which focuses more on the social phenomena that cannot be quantified but, has to be understood in terms of the meaning held by people. Interpretivists believe that the nature of reality is socially constructed, hence multiple (Goldkuhl, 2012). This approach aims to gain an insight into what people think, feel or deal with issues (Goldkuhl, 2012). As such, it is wholly compatible with the project's aims to explore female Polish migrants' experiences of support for DVA and the impact of migration.

### 3.3 Qualitative approach/ Research trustworthiness

This study uses qualitative research methods, which is compatible with the study aims. Qualitative methods enable examination of a social phenomenon through an exploration studies as opposed to the collection of numerical data (Silverman, 2010). A qualitative approach allows for the uncovering of people's views, opinions and perspectives on a given matter. However, Silverman (2010) highlights that qualitative research is often perceived as being anecdotal, because it is about a researcher interpreting a participant's reality, which is an individual interpretation on its own. Baillie (2015) stresses the importance of rigour in order to avoid qualitative research being named anecdotal. Rigour in the qualitative tradition means that the relevant methodological criteria have been applied and followed in the study (Kitto *et al.*, 2008). If the qualitative research process is designed in the way that it is systematic, follows the original research designs, explains data collection and interpretation, this means the rigour has been established (Houghton *et al.*, 2013).

Unluer (2012) adds that if these criteria are followed up, then the qualitative research has its position of credibility and its findings are trustworthy. This process begins by following the study design, which informs of appropriate and relevant methods to be used in order to attain the transparency in research design (Kitto *et al.*, 2008). In my research I commenced by exploring my epistemological and ontological position in the light of the aims of this research. As an effect of this consideration the most appropriate methodology to the study design was implemented. That is if the aims of this research are to explore the experiences of support for DVA for the Polish women, and to consider the impact of the migration process on their experiences of DVA, then the use of semi-structured questions (open and closed) to uncover their truths was deemed most appropriate.

Further, I describe the way of collecting data and the detailed process of data analysis through the use of the thematic analysis process within a symbolic interactionist framework. I discuss step- by -step the process of conducting interviews and I attach the examples of the semi-structured questions, which can be found in Appendix 1. The confidential and secure storage of the data was outlined and a copy of a part of the interview transcription number one is attached and can be found in Appendix 9. The process of analysing the transcribed material can be found in Appendices 19, 20, 21 and 22. I explain the implications of my findings in

tandem with the discussion, which applies the already existent knowledge of availability of support for DVA and the migration literature and the Polish women. All steps of the study design from the start to the end are explained in a systematic, transparent and clear way. Hence, I believe that the qualitative rigour has been accomplished and this research is credible and the study findings are of a trustworthy value.

### 3.4 Interview as a method

The use of semi-structured interview questions was deemed to be the preferable method for exploring the experiences of migration in the UK for the Polish women together with the underlying meaning of accessing support for DVA experience. An interview is a method of a dialogue between a participant's inner world and the researcher trying to uncover this subjective 'truth' (Kvale, 2006; Andrews, 2013). Interviews as a research method provide the researcher with flexibility in obtaining information (Legard *et al.*, 2003). The interviews were conducted with all five women, they were semi-structured using open and closed questions, but following up topics as they arose. DVA is a very sensitive topic to discuss hence, it was crucial to allow the women the freedom of deciding what was important to them.

Semi-structured interview questions (open and closed) enable the participant to dwell more deeply on their life experiences (Hugh- Jones, 2010). The participants provided me with rich data relating to the research topic. The initial use of the introductory and open questions supports this process. For instance I began my interviews by asking: Why did you come to UK? Do you like living in the UK? This type of introductory and follow-up questions means to encourage participant to begin their story and allow the interaction between two parties (Andrews, 2013). More importantly, these types of questions give freedom to the interviewee, for instance to ask question themselves. A semi-structured interview offers an interviewer a chance to direct the conversation into the area of his/her interest. The interview questions can be found in Appendix 1.

### 3.5 Participants

Participants in this study were found through connections with the Polish Independent Domestic Violence Advocate (IDVA) based in a North West post- industrial town. The purposive sample (Palys, 2008) was chosen based on the subjective judgment of the IDVA. In other words, the IDVA advised which participants may be suitable for the research, those participants who are open and engaging in conversations. The participants chosen by the IDVA represent the sample of clients she was supporting in her role. These women are no different to others in the way that they have experienced DVA and self-referred or were referred to the IDVA for support, because they were at the high risk of further DVA incidents. For more details regarding recruitment of participants see Appendix 12.

I recruited five Polish female participants. They were between 25 and 50 years of age and have either one or two children. I had no social or familial connections with my participants. Three of the women (Ps1, Ps2 and Ps4), had been assaulted physically which led to the immediate involvement of children's social care and DVA organisations. All participants Ps1, Ps2, Ps3, Ps4 and Ps5 experienced psychological, emotional and financial abuse. Ps5 experienced sexual abuse. Each participant had experienced DVA in Poland before moving to the UK, which continued after migration. At the time of interviews the participants were no longer in these relationships. The table on the next page summarises participant's details.

Participants	Emotional abuse	Psychological abuse	Physical abuse	Financial abuse	Sexual abuse	age	Relationship status post DVA experience
Ps1	X	X	X	X		50	Single
Ps2	X	X	X	X		32	In a new relationship
Ps3	X	X	X	X		36	Single
Ps4	X	X	X	X		22	In a new relationship
Ps5	X	X		X	x	30	Single

1. *Table 1 Provides details of the basic personal characteristic of all five participants*

### 3.6 Language and translation

As the participants were Polish and I am also Polish, all participants were given the freedom of choosing the language in which they wanted to tell their stories. All chose to conduct the interviews in Polish due to the lack of fluency in spoken English as stressed by the participants. I speak the same language as my participants this was especially important as four out of five participants did not speak fluent English. It can be argued that conducting the interviews in Polish was beneficial to the research process. Houghton *et al.*, (2013) stress that interviews, which are not conducted in the participant's first language can be short and lacking consistency. Being able to use the primary language in research allows natural expression of views, opinions and feelings. Further, Temple (2006) suggests that stories can remain hidden and inaccessible if language barrier exists.

The interview was tape recorded and the data was transcribed verbatim. The process of transcribing had started in tandem with interpreting material from Polish to English. I was aware of a potential risk of losing meaning during the translation process from Polish to English (Temple *et al.*, 2006). The process of translating from one language to another is

challenging. Whilst dealing with bi-lingual research it is important to take on board cross-cultural difference that is important to the level of the researcher's expertise in translating and interpreting. Al-Amer *et al.*, (2014) argue that the success of meaningful translation largely depends on the researcher and the way she/he follows the accuracy of transcribed data.

It is essential for a bi-lingual researcher to provide an adequate and meaningful interpretation otherwise the rigour of the findings may be poor (Temple *et al.*, 2006). To ensure the accuracy of transcribed material overcomes interpreter bias, cohesive and clear translation of the data was maintained. To combat this I was listening repeatedly to the tape recording to ensure that I captured all the information. I have past personal experience of translating from Polish to English in health care settings. More importantly, my current work with Polish women often involves conveying their messages in Polish to others in English. As Karwalajtys *et al.*, (2010) comment, being a bi-lingual researcher adds an essential value to the research with non-native participants. Additionally, sharing the same cultural, social or religious resemblances supports understanding participants' stories.

Appendix 9 contains a part of an interview one transcription. The sensitivity of the material together with the assurances to participants' about safeguarding their data were behind my approach of not publishing the full transcripts.

### 3.7 Ethics

Ethical issues in qualitative research are crucial to address, because its purpose is to find out about people's thoughts, feelings and beliefs (Resnik, 2015). Therefore, it is important to acknowledge any risks associated with research with human beings. For instance, during the interview Ps2 expressed suicidal feelings. Immediately after the interview I made a phone call to her doctor and she was booked for an appointment the same day. I had also notified her IDVA who spoke to other professionals involved in this woman's case to ensure she receives appropriate help.

I am a Graduate Member of the British Psychological Society therefore I followed the Code of Human Research Ethics (BPS, 2010) and the Code of Ethics and Conduct has been applied

(BPS, 2009). For further details and examples of an information sheet and consent form and other ethics involved in this study see Appendices: 3, 4, 5, 6, 7, 8 and 11. In addition, each participant was provided with the list of local counsellors and psychotherapist in case they want to explore further their experiences after the interview process. The list of local counsellors can be found in Appendix 10.

### 3.8 Thematic analysis as choice of data analysis tool

Thematic analysis as a method within a symbolic interactionism framework offers the in-depth analysis of the participants' narrative accounts. Both approaches are complimentary to one another, because they focus on people as social creatures and the interpretation of their everyday social interactions (Braun and Clarke, 2006; Allen-Collinson, 2011). Thematic analysis offers flexibility in application to a variety of theoretical approaches and epistemological underpinnings in qualitative research (Braun and Clarke, 2006). Inductive thematic analysis was used to analyse the raw data in this study. This particular analysis derives its findings by beginning the observation of the social phenomenon and concluding in broader generalisations, as opposed to deductive research where the researcher starts from the point of the theory and then works their way down to conclude in broader observations (Boyatzis, 1998). The symbolic interactionist framework explains an individual in the social world and the social interactions between people (Hanzel, 2011; Ukasoanya, 2014). It also enables consideration of the way people communicate with each other through culturally constructed symbols and social interactions (Mead, 1934). People develop their understanding of themselves, others and objects through individual and group interactions.

Thematic analysis is a process in which the qualitative researcher is searching for themes emerging from the data (Boyatzis, 1998), which are linked directly to the research aim. A theme is a set of codes, a pattern captured throughout the raw data symbolising something specific to the questions a researcher is trying to answer (Boyatzis, 1998). Thematic analysis enables an exploration of human being's phenomenology (Clarke and Braun, 2013). Similarly, according to symbolic interactionist framework, people change through social interactions, undertaking new social roles and attaching symbols to objects, events and interactions (Hewitt and Shulman, 2011). Hence, this framework also focuses on a human



phenomenology, because the human being is in the central point of the environment. In addition, both approaches base their findings on observations of a human nature.

Thematic analysis captures themes occurring in the qualitative data (Braun and Clarke, 2013). This method seeks to highlight underlying patterns in participants' stories. On the other hand, a symbolic interactionist framework is concerned with human beings social interactions and how these impact people's behaviour change, beliefs, values and identities. Both approaches are complimentary to one another in the way that they offer an insight into human phenomenology. Thematic analysis uncovers the re-occurring themes in people's stories whereas symbolic interactionist framework aims to uncover the meaning of this personal story.

Thematic analysis process involves six steps as described by Braun and Clarke (2006) these are as follows:

1. The first phase involves familiarising with the data. I began by reading and re-reading transcripts and listening to the voice recorders. This phase took several days during which time I was reading the material, but also allowing myself a few days without it. This time helped me to immerse myself even more into data. This was a very useful and significant part of the analysing process, because at the end I felt fully familiar with the transcripts. Alongside the reading process I was making notes. I followed Clarke *et al.*'s (2015) advice on writing up the familiarization notes. I wrote familiarization notes for each interview and then for all five interviews. My initial analytic observations in the form of familiarization notes of individual transcripts can be found in Appendices 13, 14, 15, 16, 17 and Appendix 18 contains familiarization notes from all five transcripts. This way of starting the analysis allows 'to move the analysis beyond a focus on the most obvious meanings' (Clarke *et al.*, 2015, p.231). Familiarization notes were taken in line with the thesis aims and the symbolic interactionist framework.

2. The second phase involves generating initial codes from the data. A code is capturing a broad idea or a pattern related to the research topic (Clarke and Braun, 2013). Based on the familiarization notes I was taking, which indicated particular subjects, feelings and ideas mentioned by participant's I colour coded each transcript to highlight these various patterns. I had also created an initial coding table for each transcript (see Appendix 19 for an example

of initial coding of interview one). I divided a page into two columns: one column contained examples of my colour coded extracts from an interview, whereas the second column provided a summary of these extracts. Clarke *et al.*, (2015) recommend at this stage to stay very close to the data, continuing to read and listen to voice recordings. The researcher looks for answers to his/her research aims (Clarke *et al.*, 2015). The initial codes in this study were derived within the semantic level as oppose to latent as described by Boyatzis (1998). The semantic level means that the themes are entirely based on the surface level. The researcher is purely focusing on the topics brought up by participants and these are analysed with a view that this is participant's interpretation of their own reality (Clarke *et al.*, 2015), thus the researcher is not searching for understanding beyond the surface level. I highlighted the re-occurring topics in their narratives around the experience of migration and their views on support for DVA in the light of symbolic interactionist theory.

3. Phase three involves gathering together all initial codes and trying to match them with similar others so that a theme can be produced. I had all of my transcripts in front of me, and once again, I created a table divided into two columns: one column contained initial codes; and the second column was initial themes (see Appendix 20). In this way, I was able to clearly see the pattern throughout.

4. This phase focuses on the reviewing and naming of the themes created in the previous phase. Some of the themes may sound similar to others or simply are not themes. Braun and Clarke (2006) explain that a theme is a thorough pattern and a cluster of codes linked to research aims and the theoretical underpinnings of the study. I went through all my initial themes in order to understand whether they reflect my participants' stories (see thematic analysis map in Appendix 21). Clarke and Braun (2013) comment that the researcher in this stage must reflect whether the themes are related to the studied phenomena. With each initial theme I was going back to my research aims and considered these in the light of symbolic interactionism.

5. Phase 5 involves refining and reviewing themes for its final stage. This is when the themes are polished and the researcher is able to easily define each one of them hence, I wrote down the description of themes (see Appendix 22). In addition, I ensured that each theme is named clearly and it is in the line with participant's voices.

6. Finally, at the last phase, all themes were fully produced and I was able to start writing up my report. Generated themes represent participants' stories and relate closely to the aims of the thesis and symbolic interactionism.

### 3.9 Reflexivity

The reflective contemplation was the vital part of my journey in conducting this research. My reflective journey allowed me to explore my own subjective position in this research (Kerstetter, 2012) through critical evaluation of my personal experiences, attitudes, biases and presumptive ideas I hold about DVA in the general community in the UK. This process included taking my own behaviour, feelings, emotions and contemplation into consideration on how these impact my understanding of the participants' world (Glesne and Peshkin, 1992). Berger (2013) argues that the researcher's position in a conducted study depends on a variety of factors. For instance: gender, age, sharing of the same experiences, use of the same language, cultural background or immigration status, which is highly relevant in this study and it should be considered by the researcher in order to ensure that the story is being told as presented by participants. Therefore, I have taken into account these pertinent factors which might have influenced my position towards my research (Kerstetter, 2012; Greene, 2014).

My researcher's position in this study is that I am a Polish woman and a migrant with no personal experience of support for DVA, but I work as a DVA support worker. Given that, I feel that my position is of a dual nature hugely connected and influencing my position in this research. My dual role consists of an insider, because I am a Polish woman and a migrant in the UK (Unluer, 2012; Greene, 2014). I had similar reasons to my participants for permanent migration to the UK, as an economic migrant. I have social, cultural and linguistic resemblances to other Polish people. I speak the same language I was brought up in the culture with values and morals shared with the participants. In addition, my journey of social adaptation into British society had been inspiring, because I had to similarly to my participants find my own way of being. Not only the language barrier but also the lack of knowledge about the British cultural values contributed to my knowledge. I had to create my new life in the UK with my upbringing in Polish culture, but with new behaviours I came in contact with in the host country. The period of social adaptation into British society was occasionally emotionally tense, but nowadays I feel fully integrated into the community. My other role in this research

is that I am a partial outsider; outsider, because I do not share the experience of support for DVA but only partial outsider, because I work as a DVA support worker and I help women on their journey to a household free from DVA. Hence, I possess some understanding and knowledge of DVA and available support in the community, which I believe could potentially have influenced my view for instance on women's disengagement with local support. Instead of trying to uncover the reason for not accessing the support by some of the women I realised that I was potentially only seeing the lack of engagement. This focus actually prevented me from moving forward with my study for a time. However, helpful discussion in supervision addressed this 'block' effectively.

The lack of personal experience of seeking support for DVA did not seem to be an obstacle in conducting interviews with the participants. Whilst I have experience of working with people affected by DVA, I felt confident in asking questions and talking about the support they received. The Polish women did not express an interest in whether I understood and knew what it meant to have an experience of DVA or an experience of engagement with specialist support. They were aware that I was a support worker in the field and it was clear that this 'partial outsider' status facilitated them to discuss issues openly with me.

This position is supported by Dwyer and Buckle (2009) who highlight their qualitative research into parents who lost their child. Similarly, to Dwyer my intention was not to claim that I understand the journey of engagement with services specialising in DVA from a personal perspective. By conducting this research I want to explore this issue, because it is widespread and needs to be highlighted for the Polish community in the UK. Additionally, I know that DVA is highly prevalent amongst the Polish women, because I support many Polish women, yet official statistics fail to recognise women's ethnicity so the real numbers involved remain hidden and our understanding of their specific needs remains unknown.

It was useful to come across the touching narrative account of Watt (2007) in her passage of obtaining a PhD degree. It struck me that there are others who experience similar types of self-doubt and confusion questions. As a Master's degree student I am relatively new to social research. The decision of methodology and a theoretical framework which underpins a study is generally implemented through the discussions with supervisors (Unluer, 2012). However,

the issue of the researcher's position requires looking at the self that is my role in this research, my position and my own understanding of all those roles, which in turn brought up many questions I had to answer before I was able to immerse myself fully in the data. There were moments where similarly to Watt's (2007) I felt lost with the direction this project was going and where I actually stood in regard to it. Chiefly, because this is an innovative project I feel close to the Polish community and the migration issue is highly vibrant in the media nowadays (Robinson, 2012). Yet, I believe that this project has its full implications for research given the current climate of migration to the UK.

### 3.10 Summary

The data in this research was analysed by the use of a thematic analysis process within a symbolic interactionist framework. Five participants were interviewed and data was transcribed verbatim. Only part of an interview one transcription has been published, because of the sensitive nature of the material and the confidentiality of participants. The use of thematic analysis allowed to derive three major themes from the data. These themes adhere to symbolic interactionist framework and contribute towards the participants' experiences and the aims of the thesis.

## **Chapter 4 – Findings and Discussion**

This chapter combines findings with discussion section. It focuses on the analysis, interpretation, and then interpretation within the context of theory and existing research. All three themes were discussed on individual basis with relevance to symbolic interactionism and the aims of this study. In addition, each theme depending on its merit, was also discussed with relation to feminism, ecological theory, secure attachment theory, basic trust and secure base.

In the process of analysing the transcribed material three major themes were uncovered and comprise of the following: 'experiences of migration'; 'service provision'; and 'perception of the entitlement to support'. Each theme was developed through the thematic analysis process (see Appendices 19, 20, 21 and 22) and it is presented here in the light of a symbolic interactionist framework, ensuring that the themes at their final stage contribute to the aims of the thesis (see Appendix 22). Clarke et al., (2015) argue that the themes must represent the consistent and underlying messages in participants' accounts, and represent 'a coherent aspect of the data' (Clarke et al., 2015 p.236). In discussing each theme, I will present participants' narratives contextualised within the symbolic interactionism framework.

Each theme was developed with a consideration of how it links to the symbolic interactionist theory, and how it answers the research aims (Clarke et al., 2015). For instance, the first theme that is 'experiences of migration' evolved from the recognition of the consistent patterns in participants' narratives around their migration experience and its impact on their lives. It became clear by looking at the thematic codes that their migration experiences varied for each participant. The familiarization notes and the examples from the data confirmed the contrasting experiences of migration for the Polish women. Therefore, at the last stage of naming and re-naming themes I realised that the 'experiences of migration' theme offers an answer to the research aims. It is linked to the symbolic interactionist framework as the women use culturally specific symbols in order to make sense of their migration reality, which is different for every one of them. I discuss this in more detail further in the discussion.

Similar process took place in developing the second theme called 'service provision'. The familiarization notes and extracts from the data provided an excellent view on the messages

sent by all participants. Every woman described being offered DVA support regardless of the final outcome of engagement. All women confirmed equal, practical and realistic support given. Therefore, these findings confirmed that all five participants received equal and robust support for DVA issues. However, the difference between participants lies in the fact that Ps3, Ps4 and Ps5 became empowered by this support, and the support for DVA had a positive effect on their lives. On the other hand, Ps1 and Ps2 seemed disempowered; hence, the negative outcome on their lives afterwards is more visible in their accounts.

The last theme: 'perception of the entitlement to support'; symbolises the differences in participants' accounts in relation to the individual understanding the women possessed regarding their entitlement to support as Polish migrants. Exactly the same process of using the familiarization notes and extracts took place. The women discussed their expectations and perceptions of available support, which is directly related to the feelings they encountered. Some participants had realistic expectations of the entitlement to support, which enabled empowerment and decision making process to make changes in their lives. Others had unrealistic viewpoints on their entitlement to support, thus faced variety of negative feelings and were unable to progress with their lives.

For the step-by-step development of themes from the data see Appendices 19, 20, 21 and 22. The definition of each theme can be found in Appendix 23.

#### 4.1 Theme 1: EXPERIENCES OF MIGRATION

'Experiences of migration' captures the women's interpretations around the migration process to the UK and discusses the impact of this process on their lives at the point of migration. This theme represents differences in participants' experiences of migration because across all narrative accounts there is no one linear experience of the migration, but different experiences. This study has established the significant difference in the way the Polish women had dealt with their DVA experience, which is interlinked to their migration experience.

*'It is wonderful I really like it over here' (Ps3 24)*

*'What I also like is that people who are living here are easily meeting ends and are able to follow their dreams for instance travelling. People are not restricted to just one house they can be more flexible/mobile this is what I like.'* (Ps3 29)

*'I believe that this country has turned its back on me.'* (Ps1, 212)

*'I have really had enough we are considering going back to Poland.'* (Ps2 365)

*'I have my own house, my own home and two wonderful children and a new boyfriend'* (Ps5 201)

To build a life in a new country brings many psychological and social challenges to migrant's life (Sam and Berry, 2011; Taras et al., 2013). There is a practical side of moving abroad such as finding a job and accommodation for the family, but also the migrant's psychological wellbeing can be affected by social interactions with members of other groups in the new society (Taras et al., 2013). The Polish women in this study were faced with financial difficulties as a prime reason for migrating to the UK. Once in the UK, they faced a language barrier, and with regards to their experiences of DVA, not knowing what help was available to them. Therefore, the participants' narrative accounts differ hence they can be divided and labelled as two groups: one with a positive experience of migration and one with the negative experience of migration.

The journey towards becoming a member of the British society is associated with the adaptation process, which involves psychological acculturation (Berry, 1997, 2001; Berry et al., 2006). When two or more groups with various cultural backgrounds meet together the changes of sociocultural nature can occur to both. However, it is more likely that the minority group, where the Polish women belong is more affected by this contact (Berry, 2001). Therefore, the Polish women are more likely to experience psychological changes to self, rather than the people from the mainstream society. During social interactions, the Polish migrants can create their new support networks, in a new environment where they meet people with often different ways of thinking and behaving to the way they were faced with previously. Consequently, the women often have to adjust their individual understandings to that of social groups they are part of.



All five women had strong emotional reactions when discussing how migration affected their lives. Each described different experiences, which had either facilitated or hindered their plans and expectations of life in a new place (Bledin, 2003). In particular, this research identified that participants undertook the social processes of assimilation and marginalisation, and the meaning attached to these experiences is chiefly positive or negative (Sam and Berry, 2011; Taras et al., 2013). Three participants, Ps3, Ps4 and Ps5, followed the assimilation process and talked about their positive experiences of migration. These three women showed a willingness to assimilate with others outside of their social group, and therefore found out about the services available to them in the community. Two other participants, Ps1 and Ps2, remained marginalised from the main society hence their experiences of migration are negative. These women were also offered support, but they remained unable to integrate with the wider society, which negatively impacted their experiences of migration:

*'It is very difficult for me I don't have enough work wherever I go no one wants to help me I am in a very bad depressive state. It is very difficult no one wants to help. I think that at this moment there is discrimination towards migrants, because I am Polish and I think that Poles are discriminated there is nothing no one to go to no one to help'. (Ps2 112)*

*'I was attending with (child's name) the different groups in the children's centre and I saw that they are helping out women when someone wanted to talk they were there to support you, you could always go there.' (Ps5 269)*

*'Those two women had sorted out absolutely everything, everything like benefits they were sorting out I had an empty head I did know nothing and they were changing everything into my name'. (Ps3 498)*

*'I was living in the shared house with the Polish family and it turned out that Poles are awful'. (Ps2 136)*

*'I am not hiding that Poles are not kind to each other no one wants to help me'. (Ps2 217)*

*'I have never met people like that in my entire life.' (Ps1 369)*

*'But Poles don't want to help we are not kind to one another. Slovaks, Turks, Kurds and Romanians are supporting each other, but not Poles we are against one another' (Ps2 455)*

Three Polish women (Ps3, Ps4, Ps5) have become part of the general British society, just as they used to be part of general Polish society. Both in Poland and the UK, they participate in social interactions with others, which help to acquire new understandings about themselves and others. They are social actors in the social world with understanding dependent on interpretations of their social position and the role identity negotiations (Garrett-Peters and Burton, 2015). In order to successfully assimilate into a host country society, the women had to adhere to the culture of the UK. Through witnessing different behaviours, new decision making processes, problem solving and cognitive reasoning, the women reassess their identities. They may start as part of the minority group, but through mirroring their surroundings, they learn to change in order to become a part of the major group that is British society (Ukasoanya, 2014; Carter and Fuller, 2016). However, two other participants (Ps1 and Ps2) were unable to make changes to their cognitions, and therefore did not manage to become a part of the British society and their experiences of migration to the UK are negative.

Within a symbolic interactionist framework, the personal meaning the women ascribe to their migration experiences is specific to them. Three participants, Ps3, Ps4 and Ps5, illustrate positive experiences of migration, which link directly to the migration process having a positive impact on their lives. The women with the positive experiences discuss living in the UK in very positive terms. They were excited and full of positive ideas about the creation of a new life in the UK. They describe life as much easier they are better financially and feel that there is more lifestyle choices open to them. The women shared stories with a positive outcome including being content and planning to reside permanently in the UK. Ps3, Ps4 and Ps5 experienced migration to the UK positively and want to continue living in the host country. This is illustrated in the following statements:

*'In the UK people can become more independent not like in Poland' (Ps3 44)*

*'I like it over here I think it is easier than in Poland with the wage and benefits you can live as a family' (Ps5 112)*

Ps1 and Ps2 had negative experiences of migration, which had a negative impact on their lives. Consequently, these women describe their experience of isolation, loneliness and feelings of racism and prejudice towards their nationality as already noted in previous extracts. The experiences of these negative feelings are directed towards others in the Polish community and the British people or the British agencies offering support. Ps1 and Ps2 narratives are characterised with pessimism towards all aspects of life for migrants in the UK. It is also clear that these women had no support networks around them. They find life in the UK very difficult, not only emotionally but financially also:

*'The British government doesn't want to help us they cut back so much at the financial level'.  
(Ps2 378)*

*'I have never really liked British people I always thought that they are maybe, because I had a few female friends and they were visiting me only when they needed something'. (Ps1 372)*

*'I was on my own in the foreign country my daughter later on moved out to live with her boyfriend. I was alone I was scared of living on my own in this country I was frightened of living alone I thought that if we are going to live together for some time that will be easier for me'.  
(Ps2 81)*

The Polish women's experiences of DVA must also be understood in terms of a wider context, which is their UK residency status and their migration status (Ukasoanya, 2014). Yet, their life in Poland and the past experiences around everyday interactions with others must not be omitted. Poland is the women's country of birth. They were born and brought up there according to the social norms and rules (Javaid, 2015). They had their social position and a social role within the community. It is quite likely that they had easier access to their immediate family and friends. However, the UK creates a different context to their experience of migration and accessibility of support (Javaid, 2015). In the way, that they were born outside the UK and they joined the British society relatively recently and are likely to undergo the social acculturation process in order to become or not a part of this general community. Therefore, the migration position and the UK form a context to understand the symbolic meaning of their experience of processes associated with migration.

Since, each new social interaction has a meaning attached to it by the women (Garrett- Peters and Burton, 2015) the way they are portrayed by others in the media or the way they see themselves as a part of the minority group can differ (Robinson et al., 2012). If the symbolic meaning of belonging to the minority group and inside and outside communications remain positive the women are more likely to adjust their previously held morals and values and become a part of the new group (Calarco, 2014). However, if the social interactions within the majority group have negative connotations (like migration), they can be considered as a threat to the national identity (Stivatchis, 2008). The likelihood of then engaging with others (the majority group), or the individual ability to adapt and make changes, is not a priority for some migrant women, placing them permanently in the minority group and possibly remain marginalised and separated from others.

Lack of engagement with others and consequently weak support networks can also result in emotional issues (low mood, depression and anxiety) and finally Ps1 and Ps2 describe life in the UK as an unpleasant experience, and therefore are talking about moving back to Poland. However, this is not an ideal option for them, because they admit that life back in Poland was also difficult on many different levels, but still:

*'It is difficult for Poles now maybe not all of them, but for people like me it is difficult.'* (Ps2 410)

*'Right now this country doesn't want to help me'.* (Ps2 447)

The ability to speak the English language was mentioned by every participant. Most women acknowledged being unable to express themselves proficiently in English (Ammar et al., 2014). Arguably, this was not a major factor in Ps3, Ps4 and Ps5 ability to access support from the various services (Siddiqui, 2000; Home Office, 2011; Rehman et al., 2013; Home Office, 2014). The lack of English for Ps3, Ps4, Ps5 did not prevent them from finding support, because these women used others in their social networks for such purposes. They dealt with the lack of spoken or written English language by using professional interpreters or searching for help in a variety of organisations. In contrast, for Ps1 and Ps2 the lack of spoken English created a major issue in accessing services and community groups (Rehman et al., 2013;

Ammar et al., 2014; Tam et al., 2016). These women were unable to overcome this issue, and hence this added to their general negative experience of the migration process.

The driving factor for adapting to the new social surroundings depends on the meaning attributed to the cultural symbols, chiefly ability to speak the language, the perception of the power balance in the society and the moral values present in different social groups the women belong to (Javaid, 2015). Therefore, their understanding of how the British society is created and maintained enacts either positive or negative meanings attributed to the people, places and objects they come in contact with (Ukasoanya, 2014). Ps3, Ps4 and Ps5 took a part in adhering their understanding to the new circumstances, whereas Ps1 and Ps2 tend to maintain their own previously held values and not willing to make changes to their identities. This then has negative consequences on the process of positive adaption into the British society.

Bledin (2003) refers to positive migration experience in terms of a host country being a secure base for their migrants. Secure base combines ideas of secure attachment (Bowlby, 1969) and basic trust (Erikson, 1968). Bledin's (2003) notion of secure base helps to explain the positive consequences of safe and close relationship migrants can create with their own country and environment. If migrants possess secure attachment to their own heritage they are more likely to explore the host country with openness and maintain positive relationships with others. However, these migrants who have no attachment to their own country are unlikely to form proximate relationships and their experience of life in the new country can continue being negative (Bledin, 2003). It is helpful to look at the positive experiences of migration in terms of secure base, because this allows to better understand the significance of creating and possessing secure attachment and basic trust with migrants' heritage culture and environment.

#### 4.2 Theme 1 Summary

As a result of social interactions with others in the community, the individuals within the Polish group can participate in the following processes: integrate with others or assimilate, or become separated and marginalised (Berry, 2001; Sam and Berry, 2010). The social

adaptation process allows women to engage with others hence the women are more likely to acquire greater knowledge about services available to them, which provides them with a variety of help options if they experience DVA. Through social interactions with others the Polish women can gain new support networks. To have social and familial support has been proved to empower women's decision-making regarding DVA crime against them (Fusco, 2010; Aysa-Lastra et al., 2012; Mahapatra, 2012). Family or friends can provide not only emotional support but also practical help for a woman in an abusive relationship. However, the Polish women who do not engage in interactions within the community are likely to be isolated from others. These women can struggle with finding support, because they have weak support networks. This then has its consequences on their experience of support received for DVA. The women with negative experiences of life in the UK portray their situation and others in negative terms. They remain marginalised and separated from the mainstream society.

The significant differences in positive and the negative experiences of migration affect the symbolic interaction of the participants' lives in the UK (Berry, 2001). One group of women that is Ps3, Ps4 and Ps5 had positive expectations regarding life in the UK. The women had realistic expectations towards finding a job in the UK, improving their financial situation and they were willing to get to know the host country culture, learn the English language and understand their financial situation. Yet for Ps1 and Ps2, the new life had a negative meaning, because they had an unrealistic expectations regarding life in the UK. These women immigrated for financial reasons, but once in the UK they did not want to extend their support networks and they put the whole responsibility for their situations on others. This is hugely important to note, because it assists in understanding the women's situation (Berry, 2001).

As Girishkumar (2014) comments these are only a few of many aspects of migration people deal with. Women from the minority groups face additional socio-cultural issues. Their migration status, culture, language barrier and no-recourse to public funding can affect hugely their ability to access support and impact social interactions with other social groups (Allen, 2012; Taras et al., 2013). In fact, it is more likely that some women can never approach appropriate services, because of the consequences of low level of integration and assimilation with the host country (Anitha, 2010). Or, they experience no difference in the standard of their lives once support had been offered as it was for Ps1 and Ps2 women in this study. The

Polish women's lives have been affected by some of the factors outlined above, but the difference exists on the level of individual responding to these characteristics. Therefore, the personal adaptation to the social changes depends on ability to make the change and improve individual situation.

#### 4.3 Theme 2: SERVICE PROVISION

The above theme evaluates the level of support offered to every participant for DVA issues. All women were introduced to health and social care services in the UK adequately to their personal circumstances. For instance, women with the children had accessed children's social care and those without children were provided with the support tailored to their individual needs. The support was defined as emotional, practical, counselling and legal advice. The participants accepted that the support was offered immediately and they were assisted by at least one Polish speaking professional.

*'There are posters in the Polish language everywhere, basically everywhere wherever you go there are posters there are Polish workers when I ring up wanting to speak to someone there is (Polish IDVA's name) I can have a chat with her without any issues'. (Ps3 668)*

*'At one point before I told him that I want to separate I was talking I went there and I was talking to (child minder's name) she said that how do they call it controlling relationship, toxic and etc. and that he shouldn't be treating me like that and we started organising therapy.' (Ps5 280)*

*'We really had many meetings also with the midwife and health visitor and we had group meetings every month and every single time this was about what else have we found out and what else can we do for you and this really helped me to re-build my psychological wellbeing I felt that I can achieve something I honestly found out many friends through the Group meetings and to be honest I stood up on my own legs and psychologically. (Ps4 178)*

*'She helped me a lot she was supportive I own her a lot (about IDVA support)' (Ps1 118)*

The participants attributed different symbolic meanings to people they met, places they visited and situations they were in, which then had an effect on feelings of empowerment or dis-empowerment through the support provided to women (Calarco, 2014). Ps3, Ps4 and Ps5

were willing to develop different social identities in order to become a part of the main social group, whereas Ps1 and Ps2 defined their social position and cognitive state negatively, hence their behaviour had negative connotations towards their own and outside group membership (Calarco, 2014). The Polish women had an equal access to others in the community. They individually constructed and defined their interactions or people they met based on their previous experiences and the understanding already attributed to these processes (Carter and Fuller, 2016). The personal meaning attached to other people, places and objects in the community was continuously re-created by the women, because their social life was ongoing and an active journey.

This theme also discusses the major differences between participants' accounts of the outcome of support received, which was defined as for some women (Ps3, Ps4, Ps5) the support offered to provided them with a personal feeling of empowerment to make changes to their lives on all levels, and more importantly to maintain these changes they applied themselves. For others (Ps1 and Ps2) the support made no difference to their lives and these women stayed dis-empowered in their decision making process. Arguably, all women were offered support and engaged with the women's aid organisations, health care, housing or children's social care. This is crucial to recognise, because this is a part of their journey to be free from DVA.

Ps3, Ps4 and Ps5 not only managed to end their abusive relationships in a safe way, as an effect of joint working with specialist services, but also continued to be independent and satisfied with their lives. Their DVA experience remained in the past for them and they continued to have a positive view on their lives. The women from this group did not blame themselves anymore for their past. These women explored the abusive behaviours against them with no emotional attachment to perpetrators. They appeared to be ready to close this part of their lives behind them. Ps3, Ps4 and Ps5 narratives highlight that these women became empowered after receiving support.

*'So I was saving up, saving up and saving up there were lots of ups and downs and that took quite a while that took around 6 months our moving out process.'* (Ps3 443)



*'And then she gave the number to (IDVA's name), she gave her my number and explained the situation when (IDVA's name) rang me up that was in the morning so I am thinking Jesus great and then everything kind of opened up in front of me'. (Ps3 419)*

Ps1 and Ps2 narratives showed a very different outcome of support received than other women (Ps3, Ps4, Ps5). These women (Ps1 and Ps2) also accessed a variety of organisations in the local community and were supported to end their abusive relationships. However, their narratives symbolise the negative outcome of support received, because these two participants stayed dis-empowered by the support available to them. In the way that Ps1 and Ps2 did not manage to implement sustainable changes to their lives to maintain safety. These women did not take further the advices given to them and the support available to them, even though they were out of abusive relationships other issues became paramount and these women were unable to cope with these problems.

*'I was referred to this organisation where (IDVA) works. They have helped me to rent out a flat so that I could separate from my partner, through the landlord the council. I am not hiding that I still have those debts my landlord took me to court and I was given an eviction notice'. (Ps2 121)*

The women's self-understanding and social perception was questioned as a part of the process of social interactions (Carter and Fuller, 2016). Ps3, Ps4, Ps5 adapted easily to the social and personal changes the new country offers to them by improving their decision making process, problem solving or planning ahead, whereas Ps1, Ps2 remained closed to the outside group membership, and had not acquired new social and personal cognitive skills. Social rules and norms, language acquisition, social adaptation process possess the symbolic meaning (Charon, 2007). These are culturally constructed symbols, which are practised by members of the same group. An exploration of these cultural symbols within the minority and majority group interactions determines women's behaviour and choices, as it was presented in the narratives of the two distinct groups of participants in this study (Javaid, 2015).

It is also important to note that the participants in this study were unaware of the significance of the DVA incidents against them. Hence, their response to the incidents and asking for help was delayed, simply because they were unaware that their experience is named as DVA

(Home Office, 2012; Rivas et al., 2013; Ellsberg et al., 2014; Ghani et al., 2014) particularly if this was psychological or emotional abuse (Follingstad and Edmundson, 2010; Kulkarni, 2012; Rogers and Follingstad, 2014). It was easier for some women to name abusive behaviours as long as these were physical. This can be best evidenced in the following accounts:

*'Yes, but the best part was when I was surrounded by others and I did notice when the man wasn't respecting his woman I was seeing all of that, but my partner I knew he was not respecting me I was aware of him not being respectful, but I wasn't aware that this is called psychological abuse' (Ps3 594)*

*'I was in love so I didn't see some of the things or I didn't want to see it, even though my mum was pointing out to me some of the issues he was very controlling over me.'* (Ps5 127)

*'I had a chance to come over only because my partner wanted me to come he was already working here before, but there was no chance to live with this man, because he was not working I couldn't rely on him financially or emotionally he was abusing alcohol so this relationship was, but this relationship wasn't working so we separated, but then he was promising that he will change and I believed that he will I thought that since he migrated to the UK he is working however, it turned out that this is a person completely irresponsible to lead an adult life'. (Ps2 26)*

In addition, Ps1, Ps2, Ps3, Ps4 described abusive behaviours as a gender related issue (Azam Ali and Naylor, 2013). They explored their experiences as taking partial or complete responsibility for the abusive incidents against themselves. The Polish women were blaming themselves for their partner's behaviour towards them, which concluded in feelings of shame and guilt (Mullender et al., 2002; Brownridge, 2009). This can be demonstrated in the following transcript:

*'Yes you deserve that beggar, troll yes absolutely I believed that I deserved him and I was afraid all the time that I am telling lies just me that this is what others are experiencing that this is normal.'* (Ps3 588)

The Polish women's perception of their social role in intimate relationships was viewed in terms of patriarchy. That is the Polish men were seen as responsible for family finances and

could possibly had reason for being aggressive towards women if they behaved in not culturally expected way:

*'He became very aggressive at first verbally then physically. To be honest this happened without any reason, because I was practically staying all the time at home with the child, because I was pregnant they didn't want to give me a job, because they were afraid of my health and he didn't have reason for being aggressive.'* (Ps4 64)

Other women (Ps1, Ps3, Ps4) highlighted their unemployment status, which links to the financial situation of their family, which was a conflicting issue for some (Briones-Vozmediano et al., 2014). This also led to the discussion of financial abuse experiences by all participants (Horley, 2015). Some women (Ps2, Ps5) worked, others not, yet still men were the main breadwinners and the women were controlled towards spending (Oliver, 2014) and having no access to sufficient finances themselves to care for themselves and the children. Similarly, the division in roles regarding responsibility for looking after children and being the main carer, was existent in their narratives. The women believed to be accountable for issues related to insufficient finances and to be the main carer was entirely their position as mothers (Azam Ali and Naylor, 2013). The notions of power imbalance, control, coercion and manipulation were all present in women's relationships (Wangman, 2011). Some women (Ps3, Ps4) normalised abusive behaviours against them and showed a position of deserving this aggressive treatment, because they were women.

*'Because I believed that all of it was my fault everything he is doing to me is because this is my fault, because I am not working I am lazy I can't take proper care of the child that's what he was telling me'* (Ps3 582)

Power imbalances between men and women, and patriarchal relationships were observed to be present in Ps3, Ps4, Ps5 experiences of DVA. This is crucial to acknowledge if the Polish women viewed themselves as unequal to their male counterparts (Azam Ali and Naylor, 2013). However, all Polish women with the help from others managed to end their abusive relationships and Ps3, Ps4, Ps5 were able to reflect back on their understanding of power imbalance in past relationships. Sokoloff and Dupont (2005) add that these cultural beliefs and differences can create an obstacle for considering separation from an abusive partner.

For the women who are left feeling guilty and responsible for the upbringing of their child the decision to leave their abusive partner can require substantial planning in order to ensure that their child has all basics in place (Brownridge, 2009).

The participants' stories began in Poland, where they experienced DVA and had financial difficulties, which led to the decision of moving to the UK. Therefore, this implies that DVA is not a causal feature of migration. On the contrary, DVA had already begun in Poland then continued in the UK and the severity of abusive behaviours escalated after the migration. Four participants (Ps1, Ps2, Ps3, Ps4) became subjects of physical assaults only after arriving in the UK. None of the women reported physical or sexual incidents whilst they were living in Poland. The Polish women in this study experienced psychological, emotional, physical, financial and sexual abuse. This is in line with other research stressing that regardless of ethnicity or race these types of DVA can occur (Flicker et al., 2011; Aysa-Lastra et al., 2012; Mahapatra, 2012; Lucea et al., 2013).

However, the differences across ethnicities and race are related to people's understanding of their individual social situation, because through social interactions the women's understanding of DVA can increase and change (Flicker et al., 2011; Aysa-Lastra et al., 2012). Feelings of safety and stability after the support varied across all participants, even though they all became free from DVA. Ps1 and Ps2 remained feeling insecure and lonely, with a lack of understanding of the DVA in their previous relationships, but Ps3, Ps4, Ps5 created a new safe and planned lives with their children and for some their new partners. They also voiced a recognition of past DVA and awareness of DVA dynamics and were ready to put this in their past and begin new different lives.

#### 4.4 Theme 2 Summary

To sum up, it is more likely for the women with wider support networks to end their abusive relationships and remain empowered in the decision making process, as was shown in narratives of some participants. Three of the women (Ps3, Ps4, Ps5) became empowered by the received support, because their interpretation of the socially constructed world around them had a significant meaning and a positive value to them, which they learned through

social interactions. These women were dynamically searching for support through the use of a variety of resources (Lucea et al., 2013). For instance, they used other Polish people in their community, they searched for support in the community centres, and hence were willing to make changes to their situations. As a result of searching and receiving the help the Polish women felt safe, supported and their needs were met on all social and health levels. More importantly, this positive outcome of received support was maintained afterwards and they showed improved levels of cognitive thinking.

Ps1 and Ps2 had weak support networks, meaning a lack of close relationships in the Polish community or other minority groups and resulting in continuing dis-empowerment towards their own lives. These women stayed dis-empowered due to a lack of insight and inability to make substantial changes to their circumstances. They remained lonely and isolated even from others in the Polish community expressing negative views towards others (Sam and Berry, 2010). If migrants stay marginalised and separated from others they are unable to seek support, simply because they have no abilities and awareness of the host country (Kasturirangan et al., 2004; Burman and Chantler, 2005; Mahapatra, 2012; Anitha, 2010). Isolated from the mainstream society, these migrants can suffer in silence. Not only not being able to find support for an issue in the future, but also having difficulties with practicalities of living in a host country as seen in the narratives of Ps1 and Ps2 (Anitha, 2010). It is therefore, more likely that those migrants are not aware of the ongoing support in their communities and they will continue to be dis-empowered, because they chose to remain in their own (often small) social circles.

#### 4.5 Theme 3: THE PERCEPTION OF ENTITLEMENT TO SUPPORT

This theme is a summation of the differing expectations and perceptions of support available to the participants in the community settings. Depending on people's expectations whether these were realistic or unrealistic, the participants expressed their views simply as either positive or negative. The outcome of individual perception across the women resulted in different ways of portraying support available to everyone in the UK. There were major differences in women's experiences of their individual perceptions of entitlement to support. Ps3, Ps4, Ps5 became highly motivated on a personal level to implement changes in their lives

as soon as they received support, but Ps1, Ps2 seemed to be stuck in their situations hence their perception on support was inadequate to their needs.

*'And this woke me up to live I started straight away saving money in my account' (Ps3 431)*

*'There aren't enough of them (about support for DVA) there aren't enough of them or they are non-existent'. (Ps2 387)*

*'And this is how it started this is when I started engaging with or I had been given help from the Polish Support Group and from IDVA.'* (Ps4 130)

*'She gave the number to (IDVA's name) she rang her up or something and gave her my number and explained my situation' (Ps3 419).*

Ps3, Ps4, Ps5 talk positively about the level and quality of support for DVA available to women in similar situations. All three women had been moved temporarily after the breakup of their relationships to safe accommodations. Ps3, Ps4 and Ps5 had positive experiences with safe accommodation and the type of support received there. Ps3, Ps4 and Ps5 were very grateful for the given support in overall: *'I received a massive help'* (Ps4 195). Ps5 expressed her positive attitude towards the support in the local area. She was supported by the local housing in helping her to find safe accommodation for her and her daughter. She managed to escape her relationship through the support received from her daughter's nursery:

*'The children centre knew exactly about this situation so when I run away from home I went to pick (child's name) from nursery and I told them to hide me, because he said that he is going to take her (daughter's name) from me'. (Ps5 301)*

*'In children's centre (child minder's name) was helping me she was telling me what, where, how to sort out things'. (Ps5 340)*

*'I wouldn't have changed anything I wouldn't want to add anything so that they could do more, because they are doing everything they can as much as they can and I wouldn't have changed anything'. (Ps4 194)*

*'She had helped me a lot, honestly she did (about IDVA) we were applying for all sorts of different benefits so that I could start to function properly.'* (Ps3 163)

*'The social worker as well as IDVA in my opinion they are helping a lot'.* (Ps4 173)

The way of perceiving their individual entitlement to support was associated with feelings of a happiness and optimism. Ps3, Ps4 and Ps5 became stronger emotionally and they were looking positively into their future. They evaluated their support as positive and they had realistic view on types of support available to them, hence they felt in control of their own life. Ps3, Ps4 and Ps5 narratives are full of positive comments regarding their understanding of the entitlement to support in the UK. These women talk about being happy, content and feeling freedom in their current lives.

Human action is dependent on the meaning people attach to the situation they participate in (Hewitt and Shulman, 2011). People's perception and understanding undergo constant changes, and have different meanings attached to them because of the fluidity of social interactions. At the same time one person's truth and meaning is different to another (Blumer, 1967; Meltzer et al., 1975). The social meaning attributed to others or social understanding changes, because of the social interactions with other groups, and thus the new understanding and perception is attached to these situations. The symbolic interactionism addresses how people's beliefs, values and identities change and become a symbol for people.

*'Thanks to all who helped me so much I have my own house, my own home and two wonderful children and a new boyfriend.'* (Ps4 201)

*'I attend the Polish Support Group as much as I can and I will be attending as long as the group will exist, because it is helpful to attend, it is helpful to listen and it is important to help others. I can somehow make other women feel better emotionally, women who had been in this situation'.* (Ps4 208)

For the Polish women whose perception of entitlement to support is positive, the symbolic meaning attached to their understanding has a significant role. The use of a particular language when describing individual experiences, the perception of the power balance and

the moral values present in the society are part of the women's understanding process (Carter and Fuller, 2015; Javaid, 2015). The women who became empowered talked about their perceptions on entitlement in very positive terms hence their emotional wellbeing remains intact. Their understanding of how social relationships are formed in the UK is viewed positively and therefore, these women took a chance and approached others in the society, ultimately creating positive experiences within social interactions with others. Therefore, these women made a step towards enacting new social roles, which were in line with the others hence they became a part of new social groups, because they managed to negotiate their social identities (Calarco, 2014).

However, it appears that Ps1 and Ps2's perceptions on entitlement to support was different to that of the other participants. Their perception of entitlement to support was unrealistic. These participants blame mostly others for their emotional state and they do not take responsibility for their lives and situations, by expecting and perceiving others in their environment as accountable for their situations and emotional distress. The help did not meet their needs, or arguably, both women did not take the full advantage of support offered to them. Ps1 and Ps2 received the same support as other women, but their perception on this support appeared insufficient to their needs, because even after the support concluded, their lives remained in need of ongoing help from professionals. Ps1 and Ps2 did not benefit from the support of organisations helping them through their journey to abuse free households. Ps1 and Ps2 stated that there is an ongoing need for them to receive support from the British Government to help them deal with issues such as housing or employment. Consequently Ps1 and Ps2 are still searching for a help, even though the help in adapting into British society and support around practical issues was provided, but these women still require support from organisations and others. Ps1 and Ps2 both suffer from depression and anxiety related mental health issues.

*'People like me need more help because the English government doesn't want to help us they cut back so much on the financial level so there should be more organisations helping migrants, for instance us Poles right now.'* (Ps2 378)

On the other hand, the negative outcome group that is Ps1 and Ps2 narratives attached negative symbolic meaning to their experiences. These women's use of language when



describing their entitlement to support in the UK is negative towards support. It is clear that these women had negative experiences of socializing with other groups and the general society. Their understanding and symbolic meaning attributed to the dynamics in the society and the moral values present across different social groups symbolises women's lack of positive adaptation process (Calarco, 2014). These women did not adhere their social position to the norms of the main society, and therefore their position continued to be unchanged within their own small group. This is then directly linked to their unhappiness with relation to how they perceive others and the support available in the British society (Ukasoanya, 2014).

The Polish women's perception of support for DVA was also evaluated in terms of Bronfenbrenner's (1994) ecological framework. The Polish women's narratives were divided into two separate experiences. Three participants (Ps3, Ps4, Ps5) took an active part in engaging with their environments, which led to the behavioural and social changes occurring to themselves and their families. These participants overcame the language barrier, unemployment and the lack of social and familiar networks. They used Polish interpreters, they found paid positions or applied for the relevant welfare benefits, and finally they participated in the positive adaptation process. Bronfenbrenner's (1977) theory helped to highlight how these women and their families were impacted by the four distinct environments, but the outcome of their engagement was positive. Whereas, the other two participants (Ps1, Ps2) were impacted by similar issues which they did not manage to overcome and there were no behavioural or emotional adjustments to their personalities, which has prevented them from moving forward. The DVA no longer exists in their households, but they were left with financial, social and health issues. Therefore, there were significant differences in the way the participants viewed their role amongst others, and thus some contributed to behavioural alterations and others not.

These distinct experiences of entitlement to support lay on two opposing spectrums. For participants Ps3, Ps4 and Ps5, the perceptions and expectations of entitlement to support were realistic. In fact, these women did not expect particular support. On the contrary, they needed help, they looked for it, they found it and they felt satisfied with the outcomes. However, for Ps1 and Ps2, the view on the entitlement for support was rather different. This group had an unrealistic expectation of specific support given to them, and hence remained

unhappy about the outcome of support offered to them. Ps1 and Ps2's unmet specific needs were still around housing, deteriorating mental health, financial struggles, lack of paid work and lack of social networks. However, these issues, as stressed by both participants, can be met by supporting organisations, but they need to recognise that they need to be part of the solution too, particularly in the light of recent changes in the UK welfare system.

*'I don't like it now, because everything has been cut down I have been living here for 11 years I have been paying my taxes I have been working legally I have been spending my money in the UK, but at this moment I believe that this country has turned its back on me. I have been working over here and was spending my money over here not in Poland I am living here I came to reside in the UK permanently, but now everything is done to make our life difficult I am not hiding that Poles are not kind to each other'. (Ps2 212)*

*'When we go to the English organisation we are sent back people are unable to help we are not given I feel right now that the English government had turned its back on us, but I think we have given something from us as well haven't we' (Ps2 390)*

*'I don't want people to judge me, but I would like that those people who are in a tragic situation like me I would like others to help me, to direct me more to help so those organisations could help people like me in tragic situations like mine, because I am not a lazy person I won't be sitting and doing nothing and expecting others to do everything for me that is not what I want'. (Ps2 328)*

*'I am in a very bad depressive state it is difficult no one wants to help I think that at this moment there is a discrimination towards migrants, because I am Polish I think that Poles are discriminated there is nothing, no one to go to, no one to help' (Ps2 113).*

Allen-Collinson (2011:114) argues that people's behaviour is 'socially constrained and actively constructed' therefore the Polish women's experiences of accessibility of support for DVA can only be understood in the context of migration, chiefly the social adaptation process with positive or negative outcome. The women's experience of the migration process can affect their interpretation of support for DVA (Allen-Collinson, 2011). Their perception of support for DVA back in Poland may be different to the understanding they gain by interactions or

lack of interactions with others in the British society. This then can have consequences on the understanding of support for DVA offered to the women and their migration experience can have negative implications. The women who engage with others are likely to have a positive perception on support available to them, but the women who have weak support networks tend to show negative perception of entitlement to support available to them in the local area. Some women attach a positive meaning to their social interactions whereas others attach a negative meaning, hence their perceptions of support differ significantly.

#### 4.6 Theme 3 Summary

'The perception of entitlement to support' theme discussed the major differences between women's narratives. These differences were related to various individual experiences among five participants. Some women possessed realistic (Ps3, Ps4, Ps5) and others (Ps1, Ps2) unrealistic expectations of available support in the UK. The women who had a realistic view on the support for DVA in the UK had also positive migration experience. These women came to the UK with their families to find new employment and start a new life. Through social interactions and engagement with others around them, they experienced new ways of living and learnt about community groups and the support available to them (Berry, 2001; Taras et al., 2013). Consequently, Ps3, Ps4 and Ps5 expressed having a positive perception of entitlement to support for DVA in the UK. However, the other group of women (Ps1, Ps2) who disengaged with social adaptation, and therefore their migration experience was negative, had weak support networks. This was because they did not integrate with others and therefore their perception of support available to their needs was inadequate. Ps1 and Ps2 attitude towards entitlement was largely influenced by personal perceptions, which already were negative and expectations of the UK, which were unrealistic and consequently these women voiced their negative perception of entitlement to support for DVA in the UK.

Ps3, Ps4 and Ps5 became empowered by the support for DVA offered to them and continued making positive changes to their lives (Tam et al., 2016). These women were positive about the responses from many organisations and the help they received after the initial interventions (Siddiqui, 2000; Mahapatra, 2012; Bent-Goodley, 2013; Briones-Vozmediano et al., 2013). Ps3, Ps4 and Ps5 understood interventions as an open door to a safer and abuse free home. Whereas, other participants (Ps1, Ps2) remained negative in their feelings towards

all social changes which took place in their lives, and therefore stayed dis-empowered by the received support. Significant differences in positive and negative perceptions to support and the impact on women's lives, had a consequential impact on their emotional state and their standard of living, after the abusive relationship was brought to an end.

## **Chapter 5 – Conclusions and recommendations**

The aim of this chapter is to present conclusions from the thesis and recommendations for further research. This chapter summarises findings with reference to other research and argues for the use of various theoretical frameworks in understanding the impact of migration on Polish migrants in the UK and the experiences of support for DVA. This chapter also draws on reflexivity and limitations present in this research and concludes with implications for practice and policy.

### **5.1 Conclusion and recommendations**

A primary goal of this research was to explore the impact of migration and to explore the experiences of support received for DVA by Polish migrants to the UK. This project aimed to begin to fill the existent gap of knowledge for those Polish women who experience DVA in the UK, but about whom little is known regarding the impact of the migration process on their way of engaging, or not, with the service provision. There is a paucity of academic research around this subject despite the numbers of Polish migrants in the UK (Wilcock, 2015a; 2015b;

ONS, 2016). This study raises professional awareness on the impact of migration on the ability of abused Polish women to make changes to their lives. It shows how this process may affect every person differently, which is associated with the social adaptation process. By outlining the importance of individual differences in women's experiences, new ways of engaging women can be implemented into practice. Following on from this, it was deemed significant to understand if the needs of Polish women are met by the local services. It was concluded that a qualitative approach would best investigate this as it is concerned with the human beings' inner world (Berg, 2007).

The thematic analysis within the symbolic interactionism framework showed that the impact of the migration process on Polish women's experiences of DVA, and accessibility to support varied between participants. Therefore, there were divergences in the individual experiences of robust service provision offered to all participants. This resulted in a contrast between some of the women's perceptions of entitlement to support. Each individual story is different, and hence, the meaning of women's interactions with the environment and how this affected their understanding and perception of DVA support is unique to each participant. Consequently, this study suggests that even if delivery of service provision was tailored to the individual needs this possibly would bring no difference to migrants' experiences of services.

In addition, several studies (Ahmad et al., 2009; Carbone-Lopez, 2013; Ammar et al., 2014; Briones-Vozmediano et al., 2014; Tam et al., 2016) acknowledge the differences in the likelihood of accessing services for the women from minority backgrounds. This study established that the Polish women tend to access services available to them in the local area, however the difference exists on the level of the outcome of the support received by the women and it depends hugely on the individual's ability to maintain the personal and social changes encouraged by the local support and professionals. The women stated that they all received, and were able to access support locally, which is on the contrary to Carbone-Lopez (2013) and Briones-Vozmediano et al., (2014) findings, which established that migrant women did not access services. There are different experiences of migration, service provision and perception of entitlement to support in the UK across all five participants, which is clear even from this small in-depth sample. It is crucial to acknowledge these differences, because this

adds to the knowledge around experiences of migration for Polish women, and the impact on their lives and accessibility of support for DVA.

This study outlined the importance of the positive migration process for Polish women. It highlighted that depending on the women's way of adapting into British society, the positive or negative experiences of migration took place, which had a different impact on every Polish woman in this study. This study also established the significant dissimilarities in the outcome of support received by the women and their individual perception of entitlement to support varied across all five participants. By socially engaging with the world, the Polish women gain a new understanding of their own social position in the UK (Javaid, 2015). This enables them to learn about themselves, because people's behaviour, emotional wellbeing and cognitions are highly influenced by interactions with others (Mahapatra, 2012). They enact upon their own interpretations about their social roles and positions in society, and as members of different groups. The meaning attached to their social relationships is underpinned by values, morals or beliefs women hold (Sam and Berry, 2010). Based on that, they re-create their own judgements, views or opinions about the world they become a part of in the UK. As a consequence, the women are likely to feel confident about their social positioning and know about others or organisations offering support. Therefore, to adjust individual understanding and perceptions about women's social reality, it helps to undergo a positive migration process. However, the Polish women who disengaged socially and have unstable social positions in the host country, are more likely to feel dissatisfied and have a negative approach towards others and the society.

If migrant women do not undertake a positive migration journey, their outcome of support received for DVA remains negative and the women stay dis-empowered in regards to further choices, as oppose to women who enact role-identity negotiations and become a member of other groups (Javaid, 2015). The reason is that, when negative acculturation takes place the women's understanding of their own social position in the UK is low, because of the lack of social interactions with others in the community (Ahmad et al., 2009; Mahapatra, 2012). Some women are more likely to experience mental health issues and remain isolated even after leaving the abusive partner (Fusco, 2010). The women who stayed dis-empowered suffered from depression, low mood, feelings of isolation and suicidal ideation. The Polish

migrants were seen as unhelpful, and the English people as different - not liked by these women. All of these factors contributed to a lack of control over their own lives and a need for an ongoing support, hence, their perception of entitlement to support was associated with negative feelings. The Polish women who became empowered by the support were socially active and willing to access the wider support groups extending the Polish community.

By having greater social circles the women were more likely to gain knowledge about the availability of support (Kasturirangan et al., 2004; Flicker et al., 2011), which reinforced the need for adapting into general society and asking for help. Equally important, is that these women had a positive perception of entitlement to support, because they had different views on the extent of support available to them in the local area. The women were in need of support for their DVA issues, they asked around in their community, and they found the support. These women took what was offered to them and made the positive alterations to their lives. However, an issue may arise when the Polish migrants who speak a low level of English are not participating in interactions with others (Taras et al., 2013; Ammar et al., 2014). This may appear problematic if Polish women experience DVA and are consequently unable to access local support due to a lack of spoken English. The Polish women who chose not to integrate can be more reliant on others in their own social group. However, if others in that group also possess no knowledge of the host country then the receiving of help will be delayed.

Therefore, to be surrounded by others in the community who do not speak English can add to the negative tension. However, some Polish women had no social or familial connections, even within their own Polish community. This is crucial to acknowledge, because this was a small size study, yet it indicated that Polish migrants' experiences varied across five participants. Therefore, this study confirmed the differences in people's experiences and there is no one general conclusion to be made. On the contrary, this research suggests that the Polish women's experiences of support for DVA and their migration experience had to be examined with a view that there are no homogenous experiences, but human beings are behind each social phenomena (Javaid, 2015).

DVA clearly exists in the Polish community, but it can be misunderstood. Some women may justify their partners' abusive behaviour in terms of alcohol or drugs misuse, ill mental health

or employment difficulties (Little and Kantor, 2002; Norris et al., 2013). By exploring Polish women's experiences within social environments more closely, the implications for general practice and further research can be outlined. The lack of understanding around DVA dynamics was found to correlate with other research. It found that people who experience DVA are often unaware of abusive behaviours against them and the process of ending their relationship is often delayed. There were no differences between Polish women's lack of understanding of the perpetration of DVA in comparison to other BME groups. This is a small study sample that seeks to capture 'thick data' (Geertz, 1972), but that is not intended to form a generalizable account. 'Thick data' as aptly illustrated by Geertz (1973) presents a sample in an observational study within interpretative enquiry. This study offers a phenomenological account of DVA as experienced by the Polish women living in the UK.

DVA is a social problem affecting each person differently (Bent-Goodley, 2013). Irrespective of race, ethnicity and country of origin, DVA is unique to everyone, so there is no simple answer supporting all people's needs (Girishkumar, 2014). However, it has been established that culturally specific services are highly important in supporting people from the minority and BME groups (Ahmad et al., 2009; Wellock, 2010; Cho, 2012; Girishkumar, 2014). To ensure that migrants language needs, religious beliefs and cultural background are taken into account when supporting migrant women, it is paramount to consider people's ethnicity, race and immigration status, and this can assist in the creation of an effective service provision (Burman and Chantler, 2005; Anitha, 2011). Without understanding how those factors impact each individual, their DVA experience can remain hidden and help can be delayed.

Nonetheless, this research indicated that the language barrier and cultural morals and values were not an obstacle or an issue in accessing services by the Polish women. In fact, as a researcher I expected these issues to be highlighted in the women's narratives. I anticipated the language barrier to become a major obstacle in accessing services and impact on women's lives. However, some women showed active help-seeking behaviour in order to find appropriate support, even though most women stated their struggles with English. All women had equal access to Polish speaking interpreters and Polish professionals in a variety of local organisations. For this reason, the women were able to manage their lack of spoken and



written English successfully by having an option for using interpreters and Polish professionals.

Symbolic interactionism was helpful in analysing the study findings, because it clarified the meanings that the Polish women assigned to the impact of migration and their experience of support for DVA. Symbolic interactionist framework interprets the meaning of the past and present experiences, which have a significant impact on a construction of social identity (Garrett-Peters and Burton, 2015). For the Polish women this can be their experience of migration, the process of settling down in the UK and the understanding of the general support offered for DVA. The time spent in Poland surrounded by different societal rules, values and social identities affects the women's self-understanding of how to access help and support once they reside in the UK. Nonetheless, it is paramount to apply these valuable factors to the exploration process, which can enable a better comprehension of the Polish women's journey in the UK in light of the symbolic interactionist viewpoint.

For Polish women, the experience of social adaptation has a symbolic meaning. For instance, women who are isolated from others in the community can enact a negative role-identity negotiation process (Carter and Fuller, 2015), and hence their perception of their position in the host country have negative connotations. As opposed to the women who are integrating into general society and feel a part of it. Their process of role-identity was created alongside the positive experiences of migration process (Ukasoanya, 2014). Similarly, the experience of DVA at home can add to the process of negotiating roles in the social world. To sum up, the women who undergo the social adaptation process are also exposed to the processes associated with the social interactions, which activate different logics (Javaid, 2015). Their situation can be heightened if they are not feeling that they can make constructive changes to their social understanding, which consequently can lead to isolation and a likelihood of not processing with the active role-identity negotiations.

Women's behaviour can be shaped by social interactions; hence, their own actions are socially constrained (Allen-Collinson, 2011; Garrett-Peters and Burton, 2015). Through social interactions, Polish women see how others deal with problems or how they make decisions. These observations and social experiences add to their understanding of the social world around them (Allen-Collinson, 2011). As an effect of the social interactions with others,

women's understanding of DVA can shift (Fusco, 2010) as was the case for some women in this study. The Polish women who experience DVA, attach positive or negative meaning to their experiences, which depends on their individual expectations of life in the UK. If the Polish woman perceives life in the UK in positive terms, she is engaging with others, she is more likely to find and explore all her options for leaving the abusive relationship and to begin the satisfying and independent life. More importantly, she is likely to continue with the changes, because she feels empowered, hence, has ability to make desirable changes (Carter and Fuller, 2015). Whereas, the woman who possesses unrealistic expectations about the life in the UK is likely to perhaps end the relationship with the support of specialist organisations, but she remains dissatisfied and voices experiences of racism and prejudice towards her nationality, because the support offered to her made no difference in regards to taking personal responsibility for the changes.

Symbolic interactionism also points out the importance of the verbal and non-verbal forms of human communications (Blumer, 1967). Human communication and social interactions have symbols attached to them (Hewitt and Shulman, 2011). The social interactions and observations of various verbal and non-verbal symbols allow people to assign a meaning to these situations. Through social engagement, people interpret new social situations and other people's acts or objects, to the symbols they have previously attached to those roles (Hewitt and Shulman, 2011). Consequently, positive or negative experience of interactions with others will then have its own meaning to migrants. The Polish women may base their perception of belonging to the wider community they place themselves in. Similarly, their understanding of themselves as Polish women in the UK with relation to others and the social world they are part of, is constantly changing and is never stable (Calarco, 2014). For those Polish women who engage in the positive integration process they present themselves as equal to others and independent in their choices. On the contrary, the women who have negative experiences of social integration, clearly show their negativity and dissatisfaction with life in general.

The symbolic interactionist framework, traditional feminist approach, ecological theory and secure attachment and secure base, as described by Bledin (2003) are equally fundamental ideas to shift understanding about the impact of migration on Polish women's experiences of

accessibility of service provision for DVA. Each theoretical notion added its own value to this research. Various layers of individual experiences of support and the migration process were uncovered, and they required different frameworks to allow a full comprehension of Polish women's journeys to households free from DVA in the UK. Symbolic interactionism addressed how the Polish women's social world was created and maintained through constantly on-going social interactions and showed the consequences of engaging (or not) with wider society (Javaid, 2015). This then had an impact on the experience of service provision and migration. Feminists' patriarchal view on DVA was applied to the Polish women's view on their position and role as women in this society and within their relationships (Azam Ali and Naylor, 2013). It concluded that some of the Polish women possess a patriarchal understanding of women and men in the society and if not challenged this comprehension can continue.

Similarly, the evaluation of experiences of migration and support was helpful from the ecological point of view (Bronfenbrenner, 1994). This theory added to the discussion points of environmental factors, which may influence women's experiences of DVA and the outcome of support received for it. The ecological framework interpreted experiences of support in terms of accessing (or not) available services outside of family settings. The impact of financial dependency on abusive partners, language barrier and lack of social and familial networks were important parts in understanding the participants' experiences of migration and support. Lastly, the adoption of the notion of secure attachment (Bowlby, 1969) and safe base (Bledin, 2003) helped to understand that for some Polish women, the UK offers security whereas for others the attachment with Poland is broken, but the UK is not their safe base. Given that, all frameworks were extremely valuable and each one brought an element of additional awareness to the overall understanding. However, even though they all contributed vastly to the aims of this research there is no one particular concept explaining fully the impact of migration on the Polish women in the UK and the experiences of support for DVA. Therefore, the application of various views provides critical knowledge on the multi-dimensional nature of DVA.

Inadequate and poor understanding of DVA in the Polish community in tandem with their migration experience can result for some women in separation and marginalisation.

Acculturative stress may add to the strain of issues (Schachter et al., 2014). The consequences of not being able to adapt into British society by Polish women are serious, leading to their social isolation and loneliness. In order for minorities to open up and start engaging a two way process needs to take place. Firstly, the Polish migrants need to actively participate in social interactions with the mainstream society. These migrants need to be challenged constructively and encouraged by professionals working with them about participating in the social inclusion process. In order to do that, the latter need to provide suitable fundamentals for enabling social contacts between all groups. More understanding needs to be shown, and less negative and untruthful media coverage towards people having difficulties with adjusting to new circumstances. When this is accomplished both minority and majority groups can continue interacting, freely empowering one another in decision making towards personal changes.

## 5.2 Reflexivity and limitations

Qualitative researchers must consider their own subjectivity and how this might influence the study findings (Unluer, 2012) in order to avoid biased conclusions about studied subject. Reflexivity in tandem with subjectivity are two crucial tenets to be explored by the potential qualitative researcher as Glesne and Peshkin (1992) comment. As a migrant myself I have a privileged understanding of the difficulty of finding ones' self in the UK. I had to consider my position as a Polish woman and migrant with no personal experience of support for DVA, but as a domestic violence and abuse support worker and how these factors might have impacted my research findings. As a qualitative researcher I am a human being with my own cultural, social background and beliefs. My own past and present experiences and the professional practices are likely to influence the conducted research (Unluer, 2012). Hence, to reflect back on those influences ensures that my research is transparent and credible to other researchers.

After self-reflection, I feel that my role as a support worker in a domestic abuse organisation and a Polish migrant helped me to understand the Polish women even more. I could still relate myself to their migration experience, which turned out to be a significant factor in the women's narratives (Kerstetter, 2012). My underlying knowledge and professional role I hold in the society added to my understanding. The Polish women's aim was to tell their stories

and to share their experiences. The lack of personal experience of DVA made little difference in understanding their narratives. The reason is that, I have experience of working with people affected by DVA, and therefore I have some understanding of the women's issues in overcoming this problem. I am familiar with financial, social, criminal or civil issues the women can struggle with after leaving the abusive relationship. Therefore, my lack of personal DVA experience was irrelevant as my professional role of domestic violence and abuse support worker allowed a better understanding of the participants' stories.

I prepared my research questions, but the attractiveness of the qualitative tradition suggests that the researcher cannot speculate on the study findings (Silverman, 2011). During my supervision sessions I explored my misunderstanding or frustration directed at my research. Simply because, I did not pay sufficient attention to my participants voices (Watts, 2007). More importantly I was expecting to find the Polish experience of DVA, which does not exist. My findings were demonstrating that the Polish women in this study had similar experiences of support for DVA to others. I was surprised by finding that Polish women's experiences were no different to others, and struggled to position those amongst the general and existent knowledge (Breen, 2007). However, I missed the point of the impact of migration on their experiences, which is yet not known in the literature. This lack of understanding limited my progression with this research. Yet, I understand that I am not searching for finding the one and only truth (Breen, 2007). It is never entirely clear what the qualitative research findings can uncover (Lambert et al., 2010). The qualitative truth is by no means homogenous, because every human being is unique therefore his/her interpretation of individual DVA experience is also distinctive only to this person (Sullivan, 2010). Whilst there are some commonalities in the experience of DVA, it is also surely important to note that every person will experience any given situation slightly differently

### 5.3 Implications for practice and policy

Professionals working with Polish women can improve their knowledge through a greater understanding of how the migration process affects individual's responses for engagement with DVA support. This can be achieved by listening to women's voices. The way migrant women adapt into general society and engage with others from minority and majority groups,

influences their attitudes towards support offered by agencies, community organisations and people they come in contact with. It is crucial to acknowledge the impact of migration on all people so that those affected by DVA can freely access the ongoing support they require. This project outlines the importance of the acculturation process by migrants, yet some Polish women will never arrive at the point of positive adaptation into British society. Simply because, they might have felt marginalised or separated from mainstream society, without social connections and relying almost entirely on themselves. However, it is likely that they will come in contact with medical or school professionals in their everyday interactions. Therefore, it is crucial for the front line workers in medical or educational settings to possess knowledge regarding their specific needs and outcomes of support offered previously.

First line workers should be equipped in cultural and social competency so that they are not afraid to ask questions regarding the requirement for support for DVA in Polish households. As the findings of this study present, the Polish women did not understand that abusive behaviours towards them fall under the definition of DVA in the UK. This lack of understanding should be challenged by professionals working directly with women's health or social care issues. Health professionals can signpost and direct the women into specialist services where Polish speaking staff are present. Then Polish staff can challenge some of the women's perceptions and understandings regarding life in the UK. In order to do that the women should have been provided with the relevant literature such as leaflets or newsletters explaining the local services available in the area. At the same time, the literature should focus on explaining step-by-step to all migrant groups the processes for referring to relevant organisations and the requirements to receive a particular service.

Those Polish women who undergo the negative adaptation process should be encouraged to attend a variety of community groups in local libraries and community centres in order to become more familiar with the members of other ethnic groups, and thus expand their own networks. These women need to take responsibility for their own wellbeing and a way of living, which can be achieved by actively participating in the lives of others. Additionally, the creation of DVA awareness campaign in the Polish community could help to educate Polish people on this matter and explain the support available. DVA in the Polish community is a hidden issue and people possess low understanding on the dynamics present in abusive

relationships. For the change to take place in future generations of Polish people in the UK, their increase of knowledge and awareness in this subject should be tackled. In this way, the Polish migrants' recognition of human abuse can be outlined. At the same time, their awareness of availability of DVA support could be significantly raised.

The scope of DVA and additionally the vastly expanding Polish community in the UK requires scientific investigation into people's understanding of abuse. Regardless of the perspective DVA is a complex, hidden and worldwide issue and there is no one answer as to how to tackle this social problem (Alhabib et al., 2010). Once this issue is explored and highlighted, then the professionals, academics and policy makers can act accordingly to the needs of one of the biggest ethnic minority groups in the UK (ONS, 2016). The migrants have always found the UK to be an attractive and a rich country to live in, hence, the migration will always exist. In the current climate of political changes across the whole of Europe, it is time to acknowledge that migrants, asylum seekers and refugees are becoming a visible and irreplaceable part of our modern British society.

This project is only the starting point for an exploration of migration and its impact on support for DVA in the Polish community in the UK. Polish men and their position within DVA crime against their partner(s) should be acknowledged in future studies. If the individual issues of every member of the family affected by DVA are not tackled, their journey together towards freedom from DVA is unlikely to be effective. Every member of a family affected by DVA has their own needs and understandings of the effect of DVA on themselves. Therefore, it is crucial to offer the integrative approach and to remember about the multi-dimensional nature of DVA so that the needs of all family members are addressed appropriately.

## References

- Ackerman J., Love P.T., (2014). 'Ethnic Group Differences in Police Notification About Intimate Partner Violence.' *Violence Against Women*. 20(2): 162-185 [http:// DOI: 10.1111/j.1545-5300.1990.00343.x](http://doi.org/10.1111/j.1545-5300.1990.00343.x)
- Ahmad F., Driver N., McNally J.M., Stewart E.D. (2009). "Why doesn't she seek help for partner abuse?" An exploratory study with South Asian immigrant women'. *Social Science & Medicine*. 69: 613-622 [http:// Doi: 10.1016/j.socscimed.2009.06.011](http://doi.org/10.1016/j.socscimed.2009.06.011)
- Ahmed A., (2008). 'Ontological, Epistemological and Methodological Assumptions: Qualitative versus Quantitative.' *TESOL QUARTERLY*. 1-13
- Al-Amer R., Ramjan L., Glew P., Darwish M., Salamonson Y. (2014). 'Translation of interviews from a source language to a target language: examining issues in cross-cultural health care research.' *Journal of Clinical Nursing*. 24:1151-1162 [http:// Doi: 10.1111/jocn.12681](http://doi.org/10.1111/jocn.12681)
- Allen-Collinson J.,(2011) 'Assault on Self: Intimate Partner Abuse and the Contestation of Identity'. *Symbolic Interaction*. 34(1): 108-127 [http:// DOI: 10.1525/si.2011.34.1.108](http://doi.org/10.1525/si.2011.34.1.108)
- Allen M. (2012). 'Domestic Violence within the Irish Travelling Community: The Challenge for Social Work'. *British Journal of Social Work*. 42 : 870-886
- Alhabib S., Nur U., Jones R. (2010). 'Domestic Violence Against Women: Systematic Review of Prevalence Studies'. *Journal of Family Violence*. 25:369-382 <http://dx.doi.org/10.1007/s10896-009-9298-4>
- Ammar N., Couture-Carron, A., Alvi, S., & Antonio, J. S. (2014). 'Experiences of Muslim and non-Muslim battered immigrant women with the police in the United States: a closer understanding of commonalities and differences.' *Violence Against Women*, 19(12): 1449–1471.
- Andrews J. (2013). 'It's a very difficult question isn't? Researcher, interpreter and research participant negotiating meaning in an education research interview'. *International Journal in Applied Linguistics*. 23(3): 316-328
- Anitha S., (2010). 'No Recourse, No Support: State Policy and Practice towards South Asian Women Facing Domestic Violence in the UK.' *British Journal of Social Work*. 40: 462-479
- Aysa-Lastra M., Rojas P., Dillon R.F., Duan R., De La Rosa M. (2012). 'Family Closeness and Domestic Abuse Among Caribbean and South American Women in South Florida'. *Journal of Family Violence*. 24: 547-559 [http:// DOI: 10.1007/s10896-012-9445-1](http://doi.org/10.1007/s10896-012-9445-1)
- Azam Ali P., Naylor P.B. (2013). 'Intimate partner violence: A narrative review of the feminist, social and ecological explanations for its causation'. *Aggression and Violent Behavior*. 18: 611-619
- Baillie L., (2015). 'Promoting and evaluating scientific rigour in qualitative research.' *Nursing Standard*. 29(46): 36-42
- Baker S.A., Madoc-Jones I., Parry O., Warren E., Perry K., Roscoe D.K., Mottershead R., (2013). 'More sinned against than sinning? Perceptions about European migrants and crime.' *Criminology & Criminal Justice*. 13(3): 262-278



- Batsleer J., Burman E., Chantler K., McIntosh S.H., Pantling K., Smailes S., Warner S., (2002). 'Domestic Violence And Minoritisation- supporting women to independence'. Media Services: Manchester Metropolitan University. Pp.3-234
- Bent-Goodley B.T. (2005). 'Culture and Domestic Violence. Transforming Knowledge Development.' *Journal of Interpersonal Violence*. 20(2): 195-203 [http:// DOI: 10.1177/0886260504269050](http://doi.org/10.1177/0886260504269050)
- Bent-Goodley B.T. (2013). 'Domestic Violence Fatality Reviews and the African American Community.' *Homicide Studies*. 17(4): 375-390
- Berger R., (2013). 'Now I see it, now I don't: researcher's position and reflexivity in qualitative research.' *Qualitative Research*. 0(0): 1-16
- Berry J.W. (1997). 'Immigration, Acculturation, and Adaptation'. *Applied Psychology: An International Review*. 46(1): 5-68
- Berry J.W. (2001). 'A Psychology of Immigration'. *Journal of Social Issues*. 57(3): 615-631
- Berry J.W., Phinney S.J., Sam L.D., Vedder P., (2006). 'Immigrant Youth: Acculturation, Identity, and Adaptation.' *Applied Psychology: An International Review*. 55(3): 303-332
- Bledin K. (2003). 'Migration, Identity and Group Analysis'. *Group Analysis*. 36 (1): 97-110
- Blumer H.(1969). *Symbolic Interactionism*. London: Prentice-Hall, Inc
- Birbili M. (2000). 'Translating from one language to another'. *Social Research Update*. Issue 31. Surrey: University of Surrey.
- Boulineau T., Fore C. III, Hagan-Burke S., Burke M.D., (2004). 'Use of Story Mapping to Increase the Story-Grammar Text Comprehension of Elementary Students with Learning Disabilities.' *Learning Disability Quarterly*. 27: 105-121
- Bowlby J. (1969). *Attachment and Loss*. Volume 1. London-Pimlico
- Boyatzis R.E. (1998). *Transforming Qualitative Information. Thematic Analysis And Code Development*. London. SAGE Publications
- Bradbury- Jones C., Taylor J., Kroll T., Duncan T. (2014). 'Domestic abuse awareness and recognition among primary healthcare professionals and abused women: a qualitative investigation.' *Journal of Clinical Nursing*. 23: 3057-3068 [http:// DOI: 10.1111/jocn.12534](http://doi.org/10.1111/jocn.12534)
- Braun V., Clarke V. (2006). 'Using thematic analysis in psychology'. *Qualitative Research in Psychology*. 3 (2):77-101 <http://dx.doi.org/10.1191/1478088706qp063oa>
- Breen J.L.(2007). 'The researcher 'in the middle': Negotiating the insider/outsider dichotomy.' *The Australian Community Psychologist*. 19(1): 163-174
- Briones-Vozmediano E., Goicolea I., Ortiz-Barreda M.G., Gil-Gonzalez D., Vives-Cases C., (2014). 'Professionals' Perceptions of Support Resources for Battered Immigrant Women: Chronicle of an Anticipated Failure.' *Journal of Interpersonal Violence*. 29(6): 1006-1027

- British Psychological Society (BPS, 2009). Code of Ethics and Conduct. Guidance published by the Ethics Committee of the British Psychological Society. [Online] [Accessed on the 12th March 2015]
- British Psychological Society (BPS, 2010). Code of Human Research Ethics. [Online] [Accessed on the 12th March 2015]
- Broesch J., Hadley C., (2012). 'Putting culture back into acculturation: Identifying and overcoming gaps in the definition and measurement of acculturation.' *The Social Science Journal*. 49: 375-385
- Bronfenbrenner U., (1977). 'Toward an Experimental Ecology of Human Development.' *American Psychologist*. 513-531
- Bronfenbrenner U., (1994). ' Ecological models of Human Development.' *International Encyclopedia of Education*. 3(2): 1643-1647
- Brown H. (1996). 'Themes in experimental research on groups from the 1930s to the 1990s' In (Ed.) M. Wetherell *Identities Groups and Social Issues*. London: SAGE
- Brownridge D.A. (2009). *Violence Against Women. Vulnerable Populations*. New York & London: Routledge.
- Burkitt I. (2008). *Social Selves. Theories of Self and Society*. 2nd Edition. London: SAGE
- Burman E., Smailes L.S., Chantler K. (2004). 'Culture' as a barrier to service provision and delivery: domestic violence services for minoritized women'. *Critical Social Policy*. 24(3): 332-357
- Burman E., Chantler K., (2005). ' Domestic violence and minoritisation: Legal and policy barriers facing minoritized women leaving violent relationships.' *International Journal of Law and Psychiatry*. 28: 59-74 [http:// DOI: 10.1016/j.ijlp.2004.12.004](http://DOI: 10.1016/j.ijlp.2004.12.004)
- Burr V., (2003). *Social Constructionism*. London: Routledge
- Calarco J M (2014). The inconsistent curriculum: Cultural tool kits and student interpretations of ambiguous expectations. *Social Psychology Quarterly* 77(2): 185-298
- Cao L., Zhao R., Ren L., Zhao S.J., (2010). ' Social Support and Anomie. A Multilevel Analysis of Anomie in Europe and North America.' *International Journal of Offender Therapy and Comparative Criminology*. 54(4): 625-639
- Carbone –Lopez K., (2013). 'Across Racial/Ethnic Boundaries: Investigating Intimate Violence Within a National Sample.' *Journal of Interpersonal Violence*. 28(1): 3-24
- Carter M J., Fuller C., (2016). Symbols, meaning, and action: The past, present, and the future of symbolic interactionism. *Current Sociology Review*. 64(6): 931-961
- Charon M.J., (2007). *Symbolic interactionism: an introduction, an interpretation, an integration*. 9th Ed. Pearson/Prentice Hall
- Cho H. (2012). 'Racial Differences in the Prevalence of Intimate Partner Violence Against Women and

Associated Factors'. *Journal of Interpersonal Violence*. 27(2) : 344-363

- Clarke V., Braun V., (2013). 'Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning.' *The Psychologist*. 26(2): 120-123  
[http://www.thepsychologist.org.uk/archive/archive\\_home](http://www.thepsychologist.org.uk/archive/archive_home)
- Clarke V., Braun V., Hayfield N., (2015). 'Thematic analysis' In J.A. Smith (Ed.) *Qualitative Psychology. A Practical Guide to Research Methods*. 3rd Edition. London: SAGE
- Cook J., Dwyer P., Waite L., (2011). 'The Experiences of Accession 8 Migrants in England: Motivations, Work and Agency.' *International Migration*. 49 (2): 54-79
- Craven Z. (2003). 'Battered Woman Syndrome'. *Australian Domestic and Family Violence Clearinghouse*. Pp.1-14
- Davies L., Ford-Gilboe M., Willson A., Varcoe C., Wuest J., Campbell J., Scott-Storey K. (2015). Patterns of Cumulative Abuse Among Female Survivors of Intimate Partner Violence: Links To Women's Health and Socioeconomic Status'. *Violence Against Women*. 21(1): 30-48
- Dilshad R.M. & Latif M.I. (2013). 'Focus Group Interview as a Tool for Qualitative Research: An Analysis.' *Pakistan Journal of Social Sciences*. 33(1): 191-198
- Drinkwater S., Eade J. Garapich M. (2006). 'Poles Apart? EU Enlargement and the Labour Market Outcomes of Immigrants in the UK'. *International Migration*. 47 (1):161-190
- Dutton D.G. (2012). 'The case against the role of gender in intimate partner violence.' *Aggression and Violent Behaviour*. 17(1): 99-104
- Dwyer Corbin S., Buckle L.J. (2009). 'The Space Between: On Being an Insider-Outsider in Qualitative Research.' *International Journal of Qualitative Methods*. 8(1): 54-63
- Ellsberg M., Arango D.J., Morton M., Genna F., Kiplesund S., Contreras M., Watts C. (2014). 'Prevention of violence against women and girls: what does the evidence say?'. *The Lancet*. 385 (9977): 1555-1566 [http:// Doi: 10.1016/S0140-6736\(14\)61703-7](http://doi.org/10.1016/S0140-6736(14)61703-7)
- Erikson E. (1968). *Identity: Youth and Crisis*. New York: Norton
- Fassaert T., De Wit M.A.S., Tuinebreijer W.C., Verhoeft A.P., Beekman A.T.F., Dekker J. (2011). 'Acculturation And Psychological Distress Among Non-Western Muslim Migrants- A Population-Based Survey'. *International Journal of Social Psychiatry*. 57(2): 132-143
- Feder G., Ramsay J., Dunne D., Rose M., Arsene C., Norman R., Kuntze S., Spencer A., Bacchus L., Hague G., Warburton A., Taket A., (2009). 'How far does screening women for domestic (partner) violence in different health-care settings meet criteria for a screening programme. Systematic reviews of nine UK National Screening Committee criteria.' *Health Technology Assessment*. 13(16): 1-133
- Fitzgerald I. Hardy J. (2010). 'Thinking Outside the Box?' Trade Union Organizing Strategies and Polish Migrant Workers in the UK.' *British Journal of Industrial Relations*. 48 (1): 131-150
- Flicker M.S., Cerulli C., Zhao X., Tang W., Watts A., Xia Y., Talbot L.N. (2011). 'Concomitant Forms of

- Abuse and Help-Seeking Behavior Among White, African American, and Latina Women Who Experience Intimate Partner Violence'. *Violence Against Women*. 17(8): 1067- 1085
- Follingstad R.D., Edmundson M., (2010). 'Is Psychological Abuse Reciprocal in Intimate Relationships? Data from the National Sample.' *Journal of Family Violence*. 25(5): 495-508
- Follingstad R.D. (2011). 'A Measure of Severe Psychological Abuse Normed on a Nationally Representative Sample of Adults.' *Journal of Interpersonal Violence*. 26(6): 1194-1214
- Fusco A.R., (2010). 'Intimate Partner Violence in Interracial Couples: A comparison to White and Ethnic Minority Monoracial Couples.' *Journal of Interpersonal Violence*. 25(10): 1785-1800
- Garapich M.P. (2008). "The Migration Industry and Civil Society: Polish Immigrants in the United Kingdom Before and After EU Enlargement". *Journal of Ethnic and Migration Studies*. 34(5): 735-75
- Garcia-Moreno C., Watts C., (2011). 'Violence against women: an urgent public health priority.' *World Health Organisation*. 89(2): 2-3
- Garrett-Peters R., Burton L.M., (2015). 'Reframing Marriage and Marital Delay Among Low-Income Mothers: An Interactionist Perspective.' *Journal of Family Theory & Review*. 7: 242-264
- Geertz C., (1973). *The Interpretation of Cultures. Selected essays*. New York: Basic Books, Inc., Publishers.
- Ghani M.A., Husin S., Elias N., Zain A.M. (2014). 'Psychological Impacts on Victims of Domestic Violence: A Qualitative Approach'. *Australian Journal of Basic and Applied Sciences*. 8(10): 5-10
- Gill A., (2004). 'Voicing the Silent Fear: South Asian Women's Experiences of Domestic Violence.' *The Howard Journal*. 43(5): 465-483 [http:// DOI: 10.1111/j.1468-2311.2004.00343.x](http://DOI: 10.1111/j.1468-2311.2004.00343.x)
- Gill A. (2009). 'Honor Killings and the Quest for Justice in Black and Minority Ethnic Communities in the United Kingdom'. *Criminal Justice Policy Review*. 20(4): 475-494
- Gilligan P.A., Akhtar S. (2006). 'Cultural barriers to the disclosure of child sexual abuse in Asian communities: Listening to what women say.' *British Journal of Social Work*. 36(8): 1361-1377
- Girishkumar D. (2014). 'From Multi- to Interculturalism? Domestic Violence and British South Asian Women.' *Human Welfare*. 3: 53-70
- Glesne, C.& Peshkin (1992). *Becoming qualitative researchers: An introduction*. White Plains, NY: Longman
- Goldkuhl G. (2012). 'Pragmatism vs interpretivism in qualitative information systems research'. *European Journal of Information Systems*. 21: 135-146
- Greene J.M., (2014). 'On the Inside Looking In: Methodological Insights and Challenges in Conducting Qualitative Insider Research.' *The Qualitative Report*. 19(15): 1-13
- Hanzel I., (2011). 'Beyond Blumer and Symbolic Interactionism: The Qualitative-Quantitative Issue in Social Theory and Methodology.' *Philosophy of the Social Sciences*. 41(3): 303-326

- Harris C., Moran D., Bryson J.R. (2012). 'EU Accession Migration: National Insurance Number Allocations And The Geographies Of Polish Labour Immigration To The UK.' *Royal Dutch Geographical Society KNAG*. 103 (2):209-221
- Hassan S., Malik A.A., (2011). 'Factors For Intimate Partner Violence (IPV) In Urban Pakistani Families.' *Pakistan Journal of Clinical Psychology*. 10(1)
- Henderson A.C., (2011). 'Post-Positivism and the Pragmatics of Leisure Research.' *Leisure Sciences: An Interdisciplinary Journal*. 33(4): 341-346
- Hewitt J.P., Shulman D., (2011). *Self and Society. A Symbolic Interactionist Social Psychology*. 11th Edition. London: Allyn & Bacon
- HM Government (Her Majesty Government) (2016). Ending Violence against Women and Girls. Strategy 2016-2020. [Online] [Accessed online on the 26th September 2016]
- Ho H.M.K., Chiang C.L.V., (2014). 'A meta-ethnography of the acculturation and socialization experiences of migrant care workers.' *Journal of Advanced Nursing*. 71(2): 237-254
- Home Office (2012). Cross-Government Definition of Domestic Violence- A Consultation. Summary of Responses. Home Office [Online] [Accessed on the 22nd February 2015]
- Home Office (2013). Information for Local Areas on the Change of the definition of Domestic Violence and Abuse. Home Office. [Online] [Accessed on the 13th January 2015]
- Home Office (2014). Everyone's business: Improving the police response to domestic abuse. Home Office. [Online]. [Accessed on the 17th November 2014]
- Horley S. (2015). 'My Money, My Life- A Rallying Cry Against Financial Abuse'. The Huffington Post. [Online] 14th December 2015 [Accessed online 5th June 2016]
- Houghton C., Cassey D., Shaw D., Murphy K. (2013). 'Rigour in qualitative case-study research. *Nurse Researcher*. 20(4): 12-17
- Hugh- Jones S. (2010). 'The Interview in Qualitative Research', In M.A. Forrester (Ed.). *Doing Qualitative Research in Psychology. A Practical Guide*. London. SAGE Publications Ltd.
- Itzin C., Taket A.R., Barter-Godfrey S., (2010). *Domestic and sexual violence and abuse: tackling the health and mental health effects*. London: Routledge
- Janta H. (2011). 'Polish migrant workers in the UK hospitality industry'. *International Journal of Contemporary Hospitality Management*. 23 (6): 803-819
- Javaid A. (2015). The dark side of men: The nature of masculinity and its uneasy relationship with male rape. *Journal of Men's Studies*. 23(3): 271-292
- Johnson P., Duberley J., (2010). 'Anomie and Culture management: reappraising Durkheim.' *Organization*. 18(4): 563-584
- Johnson P.M., (2011). 'Gender and types of intimate partner violence: A response to an anti-feminist literature review.' *Aggression and Violent Behavior*. 16:289-296

- Kaczmarczyk P. (2008). 'Economic impacts of emigration in Poland and the Baltic states.' Centre of Migration Research University of Warsaw. Fafo Ostforum, Oslo.
- Karwalajtys T.L., Redwood L.J., Fowler N.C., Lohfeld L.H., Howard M., Kaczorowski J.A., Lytwyn A. (2010). 'Conducting qualitative research on cervical cancer screening among diverse groups of immigrant women: Research reflections challenges and solutions.' *Canadian Family Physician*. 56, e130-e135
- Kerstetter K., (2012). 'Insider, Outsider, Or Somewhere In Between: The Impact Of Researcher's Identities On The Community-Based Research Process.' *Journal of Rural Social Sciences*. 27(2): 99-117
- Kasturirangan A., Krishnan S., Riger S. (2004). 'The Impact of Culture and Minority Status on Women's Experience of Domestic Violence'. *Trauma, Violence and Abuse*. 5(4):318-332
- Kiss L., Schraiber L.B., Heise L., Zimmerman C., Gouveia N., Watts C. (2013). 'Gender-based violence and socioeconomic inequalities: Does living in more deprived neighbourhoods increase women's risk of intimate partner violence?'. *Social Science & Medicine*. 74:1172-1179
- Kitto C.S., Chesters J., Grbich C., (2008). 'Quality in qualitative research.' *The Medical Journal of Australia*. 188(4): 243-246
- Klein R. (2013). 'Just Words? Purpose, Translation, and Metaphor in Framing Sexual and Domestic Violence through Language' In R.Klein (Ed.) *Framing Sexual and Domestic Violence Through Language*. Palgrave Macmillan
- Krings T., Bobek A., Moriarty E., Salamonska J. & Wickham J. (2012). 'Polish Migration to Ireland: 'Free Movers' in the New European Mobility Space.' *Journal of Ethnic and Migration Studies*. 39 (1): 87-103
- Kulkarni J.S., Racine F.E., Ramos B. (2012). 'Examining the Relationship Between Latinas Perceptions About What Constitutes Domestic Violence and Domestic Violence Victimization'. *Violence and Victims*. 27(2): 182-193
- Kvale S., (2006). 'Dominance Through Interviews and Dialogues'. *Qualitative Inquiry*. 12(3): 480-500
- Lambert C., Jomeen J., McSherry W. (2010). ' Reflexivity: a review of the literature in the context of midwifery research.' *British Journal of Midwifery*. 18(5): 321-326
- Legard R., Keegan J., Ward K., (2003). ' In-depth Interviews' In J.Ritchie and J.Lewis (Eds) *Qualitative Research Practice. A Guide for Social Science Students and Researchers*. London: SAGE Publications
- Little L., Kantor Kaufman G. (2002). 'Using Ecological Theory to Understand Intimate Partner Violence and Child Maltreatment'. *Journal of Community Health Nursing*. 19(3): 133-145
- Lourenco L.M., Baptista M.N., Senra L.X., Almeida A.A., Basilio C., Monteiro de Castro B.F. (2013). 'Consequences of Exposure to Domestic Violence for Children: A Systematic Review of Literature'. *Paideia*. 23(55):236-271

- Lucea B.M., Stockman K.J., Mana-Ay M., Bertarand D., Callwood B.G., Coverston R.K., Campbell W.D., Campbell C.J. (2013). 'Factors Influencing Resource Use by African American and African Caribbean Women Disclosing Intimate Partner Violence.' *Journal of Interpersonal Violence*. 28(8): 1617-1641
- Mahapatra N. (2012). 'South Asian Women in the U.S. and Their Experience of Domestic Violence'. *Journal of Family Violence*. 27: 381-390
- Mason R. (2017). 'Theresa May: I want to transform how we think about domestic violence'. The Guardian [Online] 17th February 2017 [Accessed online 1 March 2017]
- McKenzie R., Forde C. (2009). 'The rhetoric of the 'good worker' versus the realities of employers' use and the experiences of migrant workers.' *Work, Employment & Society*. 23(1): 142-159.
- McKeown A. (2014). 'Female offenders who commit domestic violence: Aggression characteristics and potential treatment pathways'. *Journal of Forensic Practice*. 16(2): 127-138
- McNeely R.L, Cook P.W., Tores J.P. (2001). 'Is Domestic Violence a Gender Issues, or a Human Issue?'. *Journal of Human Behavior in the Social Environment* . 1: 227-251
- Mead G.H., (1962). *MIND, SELF and SOCIETY. From the Standpoint of a Social Behaviorist*. Chicago and London: The University of Chicago Press.
- Meltzer B.N., Petras J.W., Reynolds L.T., (1975). *Symbolic Interactionism. Genesis, varieties and criticism*. London: Routledge & Kegan Paul
- Menjivar C., Salcido C. (2002). 'Immigrant Women And Domestic Violence. Common Experiences in Different Countries.' *Gender & Society*. 16(6): 898-920
- Mitchell H. (2006). 'The distinction between asylum seekers and refugees'. Migration Watch UK. [Online] 24th January 2006 [Accessed online 5th April 2016]
- Moscovici S., (1980). 'Towards a theory of conversion behaviour' In M. Wetherell (Ed). *Identities Groups and Social Issues*. pp 26-32 London: Sage Publications
- Mullender A., Hague G., Imam U., Kelly L., Malos E., Regan L. (2002). *Children's Perspectives on Domestic Violence*. London: SAGE Publications
- Nicolson P. (2010). *Domestic Violence and Psychology. A critical Perspective*. London and New York: Routledge
- Norris D., Fancey P., Power E., Ross P., (2013). 'The Critical-Ecological Framework: Advancing Knowledge, Practice, and Policy on Older Adult Abuse.' *Journal of Elder Abuse & Neglect*. 25(1): 40-55
- Nosheen H., (2011). 'Violence Against Women.' *The Dialogue*. 6(3)
- Nowotny M.K., Graves L.J. (2013). 'Substance Use and Intimate Partner Violence Victimization Among White, African American, and Latina Women.' *Journal of Interpersonal Violence*. 28(17): 3301-3318

- Oliver J. (2014). 'Financial abuse-or deserved thanks?'. *Nursing and Residential Care*. 16(12): 703-705
- ONS (Office for National Statistics). (2013). Why Did Emigrants Previously Arrive to Live in the UK? November 2013. London. Available from: [www.ons.gov.uk](http://www.ons.gov.uk). [Accessed 18 December 2013].
- ONS (Office for National Statistics) (2016). Polish Population. Exact number of Poles (by country of birth: Poland) in the UK, 2004-2014-Table 1.4. London. Available from: [www.ons.gov.uk](http://www.ons.gov.uk) [Accessed 30 January 2017]
- Palys T. (2008). 'Purposive sampling' In L.M. Given (Ed.) *The Sage Encyclopaedia of Qualitative Research Methods*. 2: 697-698. Sage: Los Angeles
- Pearson J., Hammond M., Heffernan E., Turner T. (2012). 'Careers and talents not to be wasted. Skilled immigrants' journeys through psychological states en route to satisfying employment.' *Journal of Management Development*. 31 (2): 102-115
- Peckover S. (2003). 'I could have just done with a little more help:' an analysis of women's help-seeking from health visitors in the context of domestic violence.' *Health and Social Care in the Community*. 11(3): 275-282
- Pemberton S., Scullion L. (2013). 'The Policies and Politics of Managed Migration: Exploring Mature Labour Migration from Central and Eastern Europe into the UK.' *Journal of Ethnic and Migration Studies*. 39 (3): 443-461
- Phillimore J. (2011). 'Refugees, Acculturation Strategies, Stress and Integration'. *Journal of Social Policy*. 40(3): 575-593
- Pleck H.J., (2007). 'Why Could Father Involvement Benefit Children? Theoretical Perspectives.' *Applied Development Science*. 1194: 196-202
- Potter H. (2008). *Battle Cries: Black Women and Intimate Partner Abuse*. New York: New York University Press
- Rehman Y., Kelly L., Siddiqui H., (2013). *Moving in the Shadows. Violence in the Lives of the Minority Women and Children*. Farnham: Ashgate e-BOOK.
- Resnik D.M., (2015). 'What is Ethics in Research? Why Is It Important?'. Research Gate. [Online] December 2015 [Accessed online 10th Feb 2016]
- Ritchie J., Ormston R., (2014). 'The Applications of Qualitative Methods to Social Research' In J.Ritchie, J.Lewis., C. McNaughton Nicholls., R. Ormston (Eds). *Qualitative Research Practice. A Guide for Social Science Students and Researchers*. Pp:27-44. London: SAGE Publications
- Rivas C., Kelly M., Feder G., (2013). 'Drawing the Line: How African, Caribbean and White British Women Live Out Psychologically Abusive Experiences'. *Violence Against Women*. 19(9): 1104-1132
- Robinson D. (2012). 'Polish Families and Migration Since EU Accession'. *Housing Studies*. 27(4): 555- 556
- Rogers J.M., Follingstad R.D., (2014). 'Women's Exposure to Psychological Abuse: Does That



- Experience Predict Mental Health Outcomes?.' *Journal of Family Violence*. 29(6): 596-611
- Ryan L., Sales R., Tilki B., Siara B. (2009). 'Family Strategies and Transnational Migration: Recent Polish Migrants in London.' *Journal of Ethnic and Migration Studies*. 35 (1): 61-77
- Sam D.L., Berry J.W. (2010). 'Acculturation: When Individuals and Groups of Different Cultural Backgrounds Meet'. *Perspectives on Psychological Science*. 5(4): 472-481
- Schachter A., Kimbro T.R., Gorman T.B., (2012). 'Language Proficiency and Health Status: Are Bilingual Immigrants Healthier?.' *Journal of Health and Social Behavior*. 53(1): 124-145
- Schoedel F.A., Costa P M., Fossaluzza V., Mari J.J., Mello F.M., (2014). 'Specific traumatic events during childhood as risk factors for posttraumatic stress disorder development in adults.' *Journal of Health Psychology*. 19(7): 847-857
- Schwartz S.J., Knight G.P., Zamboanga B.L., Stephens D.P., Benet-Martinez V., Unger J.B., Des Rosiers S.E., Huang S., Szapocznik J. (2014). 'Effects of Language of Assessment on the Measurement of Acculturation: Measurement Equivalence and Cultural Frame Switching'. *Psychological Assessment*. 26(1): 100-114
- Shaw R. (2010). 'Conducting Literature Reviews.' In M.A. Forrester (Ed) *Doing Qualitative Research in Psychology. A practical Guide*. London: SAGE
- Silverman D. (2010 ). *Doing Qualitative Research. A Practical Handbook*. 3rd Edition. London: SAGE
- Sokoloff N.J., Dupont I. (2005). 'Domestic Violence at the Intersections of Race, Class, and Gender. Challenges and Contributions to Understanding violence against Marginalized Women in Diverse Communities'. *Violence Against Women*. 11(1) : 38-64
- Stainton Rogers W. (2011). *Social Psychology*. 2nd Edition. Maidenhead: Open University Press.
- Stevens R.(1996). *Understanding the Self*. London: SAGE
- Stivatchis Y.A. (2008). 'International Migration and the Politics of Identity and Security'. *Journal of Humanities and Social Sciences*. 2 (1): 1-24
- Stroud B., (2011). 'Epistemology, the History of Epistemology, Historical Epistemology.' *Erkenn*. 75:495-503
- Sumption M. (2009). 'Social Networks and Polish Immigration to the UK'. Economics of Migration Working Paper 5. Institute for Public Policy Research.
- Tam D.M.Y., Tutty L.M., Zhuang Z.H., Paz E., (2016). 'Racial Minority Women and Criminal Justice Responses to Domestic Violence'. *Journal of Family Violence*. 31: 527-538
- Taras V., Rowney J., Steel P., (2013). 'Work-related acculturation: change in individual work-related cultural values following immigration.' 24(1): 130-151
- Temple B. (2010). 'Being Bilingual: Issues for Cross-Language Research'. *Journal of Research Practice*. 2 (1): 1-15
- Thompson P., Newsome P., Commander J. (2013). 'Good when they want to be': migrant workers in

- the supermarket supply chain'. *Human Resource Management Journal*. 23 (2): 129-143
- Trevena P. (2013). 'Why Do Highly Educated Migrants Go for Low-skilled Jobs? A Case study of Polish Graduates Working in London' In B. Glorius, I. Grabowska-Lusinska, A.Kuvik (Eds.) *Mobility in Transition: Migration Patterns after 735 EU Enlargement*. Pp. 169-190. Amsterdam: Amsterdam University Press
- Trevillion K., Byford S., Cary M., Rose D., Oram S., Feder G., Agnew-Davies R., Howard L.M., (2014). 'Linking abuse and recovery through advocacy: an observational study.' *Epidemiology and Psychiatric Sciences*. 23(01): 99-113
- Triandafyllidou A., Gropas R., Vogel D., (2007). *European Immigration. A Sourcebook*. ASHGATE. TJ International Ltd, Padstow, CoC
- Ukasoanya G. (2014). 'Social Adaptation of New Immigrant Students: Cultural Scripts, Roles, and Symbolic Interactionism.' *International Journal for the Advancement of Counselling*. 36:150-161
- Unluer S. (2012). 'Being an Insider Researcher While Conducting Case Study Research'. *The Qualitative Report*. 17(58): 1-14
- Walker E.A.L., (2006). 'Battered Woman Syndrome. Empirical Findings.' *Annals New York Academy of Science*. 1087: 142-157
- Wangman J., (2011). 'Different Types of Intimate Partner Violence- An Exploration of the Literature.' *Australian Domestic & Family Violence Clearinghouse*. 22: 1-25
- Ward C., Kus L., (2012). 'Back to and beyond Berry's basics: The conceptualization, operationalization and classification of acculturation.' *International Journal of Intercultural Relations*. 36: 472-485
- Watling Neal J., Neal P.Z., (2013). 'Nested or Networked? Future Directions for Ecological System Theory.' *Social Development*. 22(4): 722-737
- Watt D. (2007). 'On Becoming a Qualitative Researcher: The Value of Reflexivity.' *The Qualitative Report*. 12(1): 82-101
- Weiss N.H., Johnson C.D., Contractor A., Peasant C., Swan S.C., & Sullivan T.P., (2016). 'Racial/ethnic differences moderate associations of coping strategies and posttraumatic stress disorder symptom clusters among women experiencing partner violence: a multigroup path analysis.' *Anxiety, Stress, & Coping* Available from: DOI: 10.1080/10615806.2016.1228900 [Accessed online 8th March 2017]
- Wellock K.V. (2010). 'Domestic abuse: Black and minority-ethnic women's perspectives'. *Midwifery*. 26: 181-188
- White A. (2010). 'Young people and migration from contemporary Poland.' *Journal of Youth Studies*. 13 (5): 585-580
- White W.J., Yuan P.N., Cook L.S., Abbey A., (2013). 'Ethnic Minority Women's Experiences with Intimate Partner Violence: Using Community- Based Participatory Research to Ask the Right Questions.' *Sex Roles*. 69: 226-236

- Wilcock E. (2015a). 'CAADA/DASH Risk Identification Checklist (RIC) Analysis'. April-December 2014. Polski Telefon Zufania dla Ofiar Przemocy w Rodzinie. pp.1-10
- Wilcock E. (2015b). 'Evaluation of the Polish Domestic Violence Helpline pilot project'. May 2015. Polski Telefon Zufania dla Ofiar Przemocy w Rodzinie. Pp.1-5
- Wills L.C., (1982). 'Durkheim's Concept of Anomie: Some Observations.' *Sociological Inquiry*. 52(2): 106-113

## **Appendices**

<b>No.</b>	<b>Title</b>	<b>Page</b>
1	Interview questions	95
2- 11	Ethics forms	96 – 123
12	Recruitment of participants	124
13-18	Familiarization notes	125 – 131
19-22	Development of themes	132 - 142
23	Definition of themes	143

## **APPENDIX 1**

### INTERVIEW QUESTIONS:

1. What made you to come to UK?
2. Can you tell me about your experiences of being a Polish migrant to this country?
3. Did you meet your partner here?
4. Did you think that if you come to UK the DVA would stop?
5. Was this a joint decision to come to UK?
6. Why did you leave him?
7. Can you tell me about the help and support you have had from the DVA organisations?
8. Can you tell me what changes if any, would you like to see in the future for accessing help from DVA organisations?
9. Do you have any suggestions on how to improve the services for Polish victims of DVA?

## **APPENDIX 2- Ethics forms**

Appendix 3- Consent form in English

Appendix 4- Consent form in Polish

Appendix 5- Risk Assessment

Appendix 6- Manchester Metropolitan University Ethics Checklist

Appendix 7- Participant Information Sheet in English

Appendix 8- Participant Information Sheet in Polish

Appendix 9- Part of an Interview 1 transcription

Appendix 10- British Association of Counsellors and Psychotherapists (BACP) list of local Counsellors

Appendix 11- RD1 Form

### **APPENDIX 3**



#### **CONSENT FORM**

**An exploration of the impact of migration on Polish women’s experiences of support for Domestic Violence and Abuse**

Name of Researcher: **Alicja Blada-Edgeley**; email: 11042798@stu.mmu.ac.uk

Please initial by the side of each sentence to show that you have read and understood the Participant Information Sheet and you have had any questions answered satisfactorily, on the purpose of the interview.

1. I have the project explained to me and I have the questions answered satisfactory.
2. I give my consent for the interview to be tape recorded.
3. I give my consent for any of my quotations to be used in this project.
4. I understand that I am free to withdraw from the study at any time without any adverse effect.
5. I understand that I am free to withdraw my data at any time up to 1 month after the interview takes place.
6. I am happy to be a participant in this study.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Researcher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## APPENDIX 4



### PISEMNA ZGODA NA WZIECIE UDZIAŁU W BADANIU NAUKOWYM

#### Przemoc w Rodzinie: Badanie doświadczeń emigracyjnych i wsparcia dla Polek w Wielkiej Brytanii

Imię prowadzącego badania: **Alicja Błada-Edgeley**; email:11042798@stu.mmu.ac.uk

Proszę zaznaczyć przy każdym zdaniu, że zapoznałam się i rozumiem co jest napisane w Informacji dla Uczestnika Badania jak również, że otrzymałam odpowiedź na wszystkie pytania w stopniu zadowalającym.

1. Cel tego badania został mi wyjaśniony i otrzymałam zadowalającą odpowiedź na wszystkie pytania
2. Zgadzam się, żeby nasza rozmowa została nagrana
3. Zgadzam się na użycie jakichkolwiek moich wypowiedzi w tej pracy
4. Rozumiem, że mogę zrezygnować z brania udziału w tym projekcie i nie poniosę z tego powodu żadnych konsekwencji.
5. Rozumiem, że mogę wycofać moje nagrane wypowiedzi do jednego miesiąca po wzięciu udziału w nagraniu.
6. Jestem pewna, że chcę wziąć udział w tym badaniu.

\_\_\_\_\_  
Imię uczestnika

\_\_\_\_\_  
Data

\_\_\_\_\_  
Podpis

\_\_\_\_\_  
Imię prowadzącego badania

\_\_\_\_\_  
Data

\_\_\_\_\_  
Podpis



## APPENDIX 5

### **Research Title: An exploration of the impact of migration on Polish women's experiences of support for Domestic Violence and Abuse**

Researcher's Name: Alicja Blada-Edgeley

Candidate's name:

Risk Assessment: This procedure involves careful examination of possible risks associated with human resources. It is vital to consider the study design and participants involvement. Further, researcher's contribution needs to be taken into account in order to prevent any psychological or domestic harm to both parties.

RESEARCH STAGES	RISKS	SOLUTIONS
1. QUESTIONS	<p>The psychological nature of the research can cause emotional distress. However, all participants in this study have been a subject to a historical abuse. None of the participants is currently experiencing domestic violence and abuse.</p>	<p>Given the sensitive nature of this research:</p> <ul style="list-style-type: none"><li>• A copy of questions will be sent out or personally handed out to participants prior to the interview so that they can familiarize themselves with the nature of questions.</li><li>• Before deciding whether to take a part or not participants can discuss this matter with colleagues or family members as information sheet advises.</li><li>• Participants are free not to answer question/questions.</li><li>• Participants may withdraw from the interview at any time and will not be required to give a reason.</li><li>• Participants may become upset when talking about their past experiences with domestic abuse. Thus, the participants will be given the list of the local BACP counsellors.</li></ul>

		<p>Semi-structured questions enable researcher to engage in a dialogue with a participant:</p> <ul style="list-style-type: none"> <li>• Enables the researcher to explore new ideas in the light of participants' responses.</li> </ul>
<p>2. RECRUITING PARTICIPANTS</p>	<p>The lack of experience in conducting interviews by researcher</p>	<ul style="list-style-type: none"> <li>• The participants will be recruited through the researcher's social connections with the Polish Independent Domestic Violence Advisor (IDVA) for Cheshire East Council. Also through the researcher's working settings at Cheshire Without Abuse (CWA) charity organisation, based in Crewe.</li> </ul> <p>To conduct a pilot interview with a member of an academic staff in order to practice the interviewing skills.</p>
<p>3. PARTICIPANTS ARE NOT FLUENT IN ENGLISH. 4. RESEARCHER IS POLISH</p>		<ul style="list-style-type: none"> <li>• Due to participants having a language barrier, the interviews will be conducted in Polish and then translated into English.</li> <li>• All forms: consent form, risk assessment form, interview questions and participants' information sheet will be translated into Polish. In this way any misunderstandings will be avoided. Participants will be fully aware and will understand the aims and end results of this project and more importantly their role.</li> <li>• Participants expressed a wish to be interviewed in Polish, because they do not feel confident and able to express themselves fully in English.</li> </ul>

		<ul style="list-style-type: none"> <li>• I believe that this gives me an advantage with regards to conducting this study.</li> <li>• The subject of this study cover a sensitive area of DVA however, I have an expertise of working with the victims of domestic abuse.</li> <li>• I facilitate the Polish Support Group, hence I believe that my data will be richer, because all my participants know me for over 12 months and they have a trust in me.</li> <li>• The Group work on the supportive basis. I am treated as a professional not a friend. We only have encounters on the professional levels.</li> <li>• I feel that participants will be more comfortable with me, because I am Polish myself. I feel that they will be more open and deep in their narratives, because they know me as a person.</li> </ul>
5. DATA COLLECTION	Limitations to the study	<ul style="list-style-type: none"> <li>• The interviews will take place during the day time in Wilson building at MMU Cheshire premises (to be confirmed)</li> </ul> <p>The study will be conducted in Polish; therefore in the process of translating into English some essence of the meaning might be lost. However, I have an experience in interpreting and translating in previous private, working settings. Therefore, I will use my professional experience in order to ensure that the data</p>


		<p>is translated correctly providing the core meaning. I have limited experience in conducting interviews and this can influence the interview process.</p>
6. PUBLICATION	Recognition	<ul style="list-style-type: none"> <li>• Participants will remain anonymous throughout the research.</li> <li>• Personal names will be replaced with numbers between 1 and 5</li> <li>• Only the researcher will have a record of the real first names of participants</li> <li>• Where there are direct quotes from any participants' responses all identifying information will be removed.</li> <li>• The full interview transcript will never be published</li> <li>• The interview will be recorded on researcher's personal mobile phone device</li> <li>• No third parties will have access to recorded data.</li> <li>• Researcher is fully aware of the importance of confidentiality, hence The digitally recorded data after transcription will be destroyed</li> </ul>

## Appendix 6

APPENDIX 1  
APPENDIX 1  
APPENDIX 1

APPENDIX 6

**ETHICS CHECK LIST**



Manchester  
Metropolitan  
University

The checklist overleaf must be completed before commencement of any research project. Note that ALL projects MUST have a risk assessment attached to this form. Please also refer to the University's Academic [Ethical Framework](#) and the [University's Guidelines on Good Research Practice](#).

+

<b>Name of applicant (Principal Investigator): Alicja Blada-Edgeley</b>	
Telephone Number: 077 8307 3718	
Email address: alicjabld@yahoo.co.uk	
Status: Masters by Research	Undergraduate Student Postgraduate Student (Taught or Research) Staff
Department/School/Other Unit: Manchester Metropolitan University, Interdisciplinary Studies Department	
Programme of study (if applicable):	
Name of supervisor/Line manager: Dr K.Kinmond, Dr L.Oakley	
Project Title: Domestic Violence and Abuse: An Exploration of the Experiences of Polish Migrants to the UK	
Brief description of project activities: <input type="checkbox"/> Individual interviews with Polish women	
Does the project require NHS National	

Page 1 of 5  
Page 1 of 5  
Page 1 of 5

APPENDIX 1  
APPENDIX 1  
APPENDIX 1

<b>Research Ethics Service (NRES) approval?</b> If yes, has approval been granted by YES/NO NRES? Attach copy of letter of approval.		
---	--	--

**Ethics Checklist**

**You MUST answer ALL questions**

	Yes	No		
1. Are you are gathering data from people? If <b>Yes</b> please attach evidence of consent?	x			
2. If you are gathering data from people, have you attached a sample document explaining your approach to maintaining confidentiality and which each individual will sign their agreement.	x			
1. Have you addressed data protection issues – relating to storing and disposing of data? Is this in an auditable form?	x			
2. Have you addressed the issue of informing participants about your project work and ensuring that they are aware of what you are doing?	x			
3. Will the study involve recruitment of patients or staff through the NHS, or involve NHS resources?  If yes, you may need full ethical approval from the NHS.		x		
3. Does the study involve participants who are particularly vulnerable or unable to give informed consent (e.g. children, people with learning disabilities, your own students)?		x		
4. Will the study require the co-operation of a gatekeeper for initial access to the groups or individuals to be recruited (e.g. students at school, members of self-help group, nursing home residents)?		x		
5. Will the study involve the use of participants' images or sensitive data (e.g. participants personal details stored electronically, image capture techniques)?		x		
1. Will the study involve discussion of		x		

Page 1 of 5  
Page 1 of 5  
Page 1 of 5

APPENDIX 1  
APPENDIX 1  
APPENDIX 1

sensitive topics (e.g. sexual activity, drug use)?		
--	--	--

**Ethics Checklist (continued)**

**You MUST answer ALL questions**

	Yes	No	
2. Could the study induce psychological stress or anxiety or cause harm or negative consequences beyond the risks encountered in normal life?		x	
3. Will blood or tissue samples be obtained from participants?		x	
4. Are drugs, placebos or other substances (e.g. food substances, vitamins) to be administered to the study participants or will the study involve invasive, intrusive or potentially harmful procedures of any kind?		x	
5. Is pain or more than mild discomfort likely to result from the study?		x	
6. Will the study involve prolonged or repetitive testing?		x	
7. Will it be necessary for participants to take part in the study without their knowledge and informed consent at the time (e.g. covert observation of people in non-public places)?		x	
8. Will financial inducements (other than reasonable expenses and compensation for time) be offered to participants?		x	
9. Does any relationship exist between the researcher(s) and the participant(s), other than that required by the activities associated with the project (e.g., fellow students, staff, etc)?		x	

**Approval for the above named proposal is granted**

I confirm that there are no ethical issues requiring further consideration.

Signature of Supervisor (for students), or Manager (for staff):

Page 5 of 5  
Page 5 of 5  
Page 5 of 5

APPENDIX 1  
APPENDIX 1  
APPENDIX 1

Date

NB Any subsequent changes to the nature of the project will require a review of the ethical consideration(s)

**Approval for the proposal is not granted**

I confirm that there are ethical issues requiring further consideration and will refer the project proposal to the Faculty Research Group Officer

Signature of Supervisor (for students), or Manager (for staff):

*[Signature]*

Date 11/12/2014

**Notes for Researchers, Managers and Supervisors**

**1. Approved applications**

If 'NO' is the response for ALL questions, the manager/supervisor should approve the study, retain the original signed form and the agreed risk assessment and return a copy to the originator.

If the answer to ANY of questions 1 to 4 is YES then appropriate evidence must be provided by the originator to satisfy the manager/supervisor that the correct measures are in place to address minor ethical considerations. If the manager/supervisor is satisfied that issues have been addressed appropriately s/he should approve the study, retain the original signed form and the agreed risk assessment and return a copy to the originator.

Undergraduate and taught higher degree students should submit a copy of the form bound in at the end of their research report or dissertation.

MPhil/PhD, and other higher degree by research, students should include a copy with their application for registration (RD1).

Members of staff should send a copy to their Research Group Officer before commencement of the project.

**2. Applications requiring further scrutiny**

If the answer to ANY of the questions 5-17 is YES then the researcher will need to submit plans for addressing the ethical issues raised using the [AEP](#)

Page 6 of 5  
Page 6 of 5  
Page 6 of 5  
Page 6 of 5

APPENDIX 1  
APPENDIX 1  
APPENDIX 1

[Application for Ethical Approval](#) form which should be submitted to the relevant Faculty Research Group Officer.

Forms submitted to the Research Group Officer will be passed to the Faculty's Head of Academic Ethics who will arrange for an internal scrutineer's report and recommendations to be sent for consideration by Academic Ethics Committee.

If the answer to question 5 was YES, the researcher may also need to submit an application to the appropriate external health authority ethics committee.

Page 5 of 5  
Page 5 of 5  
Page 5 of 5

APPENDIX 1

committee, via the National Research Ethics Service (NRES), found at <http://www.nres.nhs.uk/> and attach a copy to the [Application for Ethical Approval](#).

Please note that it is the researcher's responsibility to follow the University's Guidelines on Good Research Practice and any relevant academic or professional guidelines in the conduct of the study. **This includes providing appropriate information sheets and consent forms, and ensuring confidentiality in the storage and use of data.** Any significant change in the question, design or conduct over the course of the research should be notified to the Supervisor or Manager and may require a new application for ethics approval.

Page 6 of 5

## **APPENDIX 7**

### **Title of the study:**

**An exploration of the impact of migration on Polish women's experiences of support for Domestic Violence and Abuse**

**Researcher:** Alicja Blada-Edgeley, email:11042798@stu.mmu.ac.uk

**Research Supervisors:** Dr Kathryn Kinmond, Dr Lisa Oakley

### **Participant Information Sheet**

#### **Dear Participant**

You are invited to take a part in my study, which examines Polish women's experiences of the impact of migration process on the accessibility of support for DVA. I would like to conduct an interview with you in order to ask about your particular experience. This research is a part of my Master's Degree project.

This letter is to explain what my study is about and what you can expect. Before you decide whether to take a part I encourage you to talk to your friends and family about it. If you decide to take a part I will give you consent form for you to sign and the participant information sheet. In this way you will know exactly what is expected from you and how you can contribute to my study. If you change your mind about participating in this study you can withdraw from it at any time without giving me a reason.

If you require any further information please email me or call me on this number: 077 1477 0744

#### **What is the purpose of the study?**

I am a post-graduate student hoping to outline issues surrounding domestic abuse and the Polish women. I have gained some insight into DVA and Polish community, while facilitating the Polish Support Group at Cheshire Without Abuse (CWA). I now want to explore this further and look also at the impact of being a migrant on the experience of DVA in the UK.

#### **Why have I been chosen to take a part?**

You have been chosen because, you are a Polish woman and survivor of domestic violence in the UK.

#### **What will happen to me if I take a part?**

If you are happy to participate in this research, you will be asked some questions in an informal interview. The interview should take around 30 or 40 minutes of your time.

Moreover the time and date will be set up in advance, when is most convenient for you. I will email or personally hand you my questions prior to our interview. You are encouraged

to discuss the questions with friends or family and decide if you want to take part in my project. You do not have to answer a particular question if you do not want to. Our discussion will focus on your survivor experiences of domestic abuse and on the accessibility of domestic violence services in the UK.

### **Do I have to take part?**

No, your involvement is completely voluntary and you can withdraw from the study, at any point. You may also withdraw your data up to 1 month after the interview takes place by emailing me on the email address given above. Or you can call me on this number: 077 1477 0744

### **What are the possible disadvantages of taking a part?**

Talking about domestic abuse can make you upset. If at any point during the interview you are distressed, you are free to stop it. I will provide you with a list of accredited counsellors in Cheshire East area.

### **What are the possible advantages of taking part?**

You will have an opportunity to share your thoughts and experiences on domestic abuse. Your information will help me to shed a light on Polish women experiencing domestic violence in the UK.

### **What will happen to the interview data I give?**

With your written consent, the data obtained from an interview will be digitally recorded on my mobile device and transcribed it onto my private computer. Both devices are secured with a password known only to myself. All participants will be treated with the confidentiality and will remain anonymous throughout. Participants will be given special codes or false names; their real names will only be known to the researcher. You are free to request a copy of an interview transcription at any time, up to one month after the process of transcribing has been finalised. The aim of this research is to write-up project for my Master's degree. Thus, parts of my project may be published in the academic journals or used at academic conferences. However, none of my participants will be recognisable from the project. When the process of transcribing has been completed, and the project has been marked, digitally recorded data will be destroyed. The finalised project will be kept safely until marked at Manchester Metropolitan University.

This research has been approved by the Manchester Metropolitan University Cheshire Ethics Committee and has followed the British Psychological Society (BPS) Ethics guidelines. I am a psychology graduate and the member of BPS, thus I am highly aware of the



importance of participant confidentiality and the sensitive nature of conducting interviews with people.

If you want further information please feel free to contact me on my email or phone me. Or you can contact my research tutors Dr Kathryn Kinmond at [k.kinmond@mmu.ac.uk](mailto:k.kinmond@mmu.ac.uk), or Dr Lisa Oakley at [l.r.oakley@mmu.ac.uk](mailto:l.r.oakley@mmu.ac.uk) from Manchester Metropolitan University Cheshire Campus.

Thank you for taking the time to read this information sheet.

Yours sincerely

Alicja Blada-Edgeley

Email: [11042798@stu.mmu.ac.uk](mailto:11042798@stu.mmu.ac.uk)

Mobile: 077 1477 0744

## **APPENDIX 8**

### **Tytuł pracy:**

**Przemoc w Rodzinie: Badanie doświadczeń emigracyjnych i wsparcia dla Polek w Wielkiej Brytanii**

Imię prowadzącego badania: Alicja Blada-Edgeley, email:11042798@stu.mmu.ac.uk

Dane promotorów: Dr Kathryn Kinmond, Dr Lisa Oakley

### **INFORMACJA DLA UCZESTNIKA BADANIA**

#### **Drogi Uczestniku Badania**

Zostałaś zaproszona żeby wziąć udział w moim badaniu naukowym mającym na celu przyżycie się doświadczeniom przemocy w rodzinie Polek mieszkających w Wielkiej Brytanii. Chciałabym przeprowadzić z Tobą rozmowę w celu usłyszenia o Twoich doświadczeniach z przemocą w rodzinie. To badanie jest robione w celu napisania pracy magisterskiej przeze mnie.

Ten list ma na celu wyjaśnienie cel mojej pracy i czego możesz się spodziewać przez wzięcie w nim udziału. Zanim zdecydujesz się na wzięcie udziału, zachęcam Cię do rozmowy z rodziną albo przyjaciółmi na temat tego badania. Jeśli zdecydujesz się na wzięcie udziału, dostaniesz Pisemną Zgodę na Wzięcie Udziału w Badaniach, które będzie musiała podpisać razem z Informacją dla Uczestnika Badania. W ten sposób będziesz doskonale wiedzieć co jest od Ciebie wymagane i jak możesz się przysłużyć mojemu badaniu naukowemu. Jeśli zmienisz zdanie odnośnie wzięcia udziału, możesz zrezygnować w każdym momencie bez podawania mi powodu i bez żadnych negatywnych konsekwencji.

Jeśli potrzebujesz więcej informacji na temat tego badania proszę o kontakt mailowy lub telefoniczny: 077 1477 0744

#### **Jaki jest cel tego badania?**

Jestem na studiach magisterskich i mam nadzieję nakreslić problemy z jakimi spotykają się Polki, które doświadczyły przemocy w rodzinie. Nabralam trochę wiedzy na ten temat pracując z Polkami na Polskiej Grupie Wsparcia i z Polskiej społeczności w Crewe. Teraz chcę przyżyc się temu problemowi bliżej, żeby sprawdzić jak bycie emigrantem wpływa na przemoc w rodzinie.

### **Dlaczego zostałam wybrana do wzięcia udziału w tym badaniu?**

Zostałaś wybrana ponieważ, jesteś Polką i doświadczyłaś przemocy w rodzinie.

### **Co się ze mną stanie jeśli weźmę udział w badaniu?**

Jeśli zgodzisz się na wzięcie udziału, zostanie Ci zadane szereg pytań w nieformalnej atmosferze. Nasza rozmowa powinna zająć ok. 30, 40 minut. Ponadto dzień i godzina naszego spotkania zostanie ustalona w terminie dogodnym Tobie i z wyprzedzeniem. Wyśle Ci maila albo osobiście dostarczę pytania, które Ci zadam w czasie naszej nieformalnej rozmowy. Zachęcam Cię do pokazania tych pytań swoim znajomym lub rodzinie i wspólnym zastanowieniu się czy chcesz wziąć udział w moim badaniu. Nie musisz odpowiadać na któreś pytanie jeśli nie chcesz. Nasza rozmowa skupi się na Twoim doświadczeniu przemocy w rodzinie i dostępie do organizacji wspierających ofiary przemocy rodzinnej.

### **Czy muszę brać udział?**

Nie, Twój udział jest całkowicie dobrowolny i możesz się wycofać z badania w każdym momencie. Możesz również wycofać swoje nagranie do 1 miesiąca po nagraniu rozmowy poprzez wysłanie mi maila albo kontakt telefoniczny.

### **Jakie są możliwe niekorzystne skutki z wzięcia udziału?**

Rozmowa na temat przemocy w rodzinie może Cię zasmucić. Jeżeli w jakimkolwiek momencie naszej rozmowy poczujesz się smutna masz prawo przerwać rozmowę. Podam Ci listę psychoterapeutów dostępnych w hrabstwie Cheshire.

### **Jakie są możliwe korzyści z wzięcia udziału?**

Będziesz mieć możliwość podzielenia się swoimi myślami i doświadczeniami na temat przemocy w rodzinie. Twoje informacje pomogą nasświetlić sytuację Polek w Wielkiej Brytanii doświadczających przemocy w rodzinie.

### **Co się stanie z nagraniem rozmowy?**

Za Twoją pisemną zgodą na wzięcie udziału informacje zawarte w naszej rozmowie zostaną nagrane na moim telefonie i przepisane w formie transkrypcji i zachowane na moim prywatnym komputerze. Telefon i komputer są zabezpieczone hasłem, które znam tylko ja. Wszyscy uczestnicy badania będą traktowani z poufnością i pozostaną anonimowi poprzez trwanie całego procesu. Uczestnikom badania zostaną nadane specjalne kody a ich prawdziwe imiona będą znane tylko prowadzącemu badanie. Masz pełne prawo żeby otrzymać dokument, w którym jest cała rozmowa przepisana do jednego miesiąca po sfinalizowaniu procesu pisemnej transkrypcji. Celem tego badania jest napisanie pracy magisterskiej przez mnie. Jakieś części tej pracy mogą zostać opublikowane w

czasopismach naukowych albo też mogą być zaprezentowane na konferencjach naukowych. Jednakże żaden z uczestników badania nie będzie skojarzony albo rozpoznany w pracy. W momencie kiedy proces transkrypcji pisemnej zostanie zakończony i praca magisterska będzie ukończona i oddana do sprawdzenia, nagranie rozmowy z uczestnikiem badania zostanie usunięte/zniszczone z mojego telefonu i komputera. Napisana praca magisterska będzie przechowywana bezpiecznie na Manchester Metropolitan University aż do momentu sprawdzenia i oceny.

To badanie naukowe zostało zatwierdzone przez Komitet Etyczny Manchester Metropolitan University w Crewe i wzorcowało się na wskazówkach etycznych Brytyjskiego Towarzystwa Psychologicznego. Mam ukończone studia licencjackie z psychologii i jestem członkiem Brytyjskiego Towarzystwa Psychologicznego. Z tego też powodu zdaje sobie w pełni świadomość z ważności zachowania poufności członków mojego badania naukowego i z delikatnej natury prowadzenia rozmów z uczestnikami badań w celach akademickich.

Jesli chcialabys sie dowiedziec wiecej na temat mojej pracy magisterskiej prosze o kontakt mailowy lub telefoniczny. Mozesz rowniez skontaktowac sie z moimi promotorami Dr Kathryn Kinmond : [k.kinmond@mmu.ac.uk](mailto:k.kinmond@mmu.ac.uk) lub Dr Lisa Oakley : [l.r.oakley@mmu.ac.uk](mailto:l.r.oakley@mmu.ac.uk).

Dziękuję za czas poświęcony przeczytaniu tego dokumentu

Z poważaniem

Alicja Błada-Edgeley

Email: [11042798@stu.mmu.ac.uk](mailto:11042798@stu.mmu.ac.uk)

Telefon: 077 1477 0744

## APPENDIX 9

### Interview transcription 1

#### Manchester Metropolitan University

**Topic: An exploration of the impact of migration on Polish women's experiences of support for Domestic Violence and Abuse.**

The interview took place on 24<sup>th</sup> of March 2015 at 12pm (24min 54sec)

Place: Manchester Metropolitan University

Interviewer: thank you for agreeing to meet up with me. I would like to ask you few questions. Why did you decide to come over to UK? What happened that you come to live in the UK?

Participant: I came over for financial reasons

I: hmmm. Search for a better life?

P1: exactly (*Financial reasons for migrating*)

I: did you come on your own or with...?

P1: with my husband, with my ex-husband

I: hmmm are you no longer together?

P1: we separated 4 years ago

I: where have you met your perpetrator?

P1: over here

I: can you please tell me what is it like to be a migrant in the UK?

P1: (long pause)

I: how is life in the UK? Do you like it over here?

P1: no I don't like it anymore

I: why is that?

P1: hmmm (pause 5sec) too many things (3sec pause) my life has been ruined too much  
(pause 3 sec) my mental life has been impacted (long pause) *(unhappy about life in the UK; life ruined, because of a wrong partner)*

I: how your life has been ruined?

P1: (long pause 5 sec) wrong partner (pause)

I: ex-partner?

P1: yes ex-partner

I: hmmm

P1: (laugh) not the current one, the wrong ex-partner

I: why was he the wrong partner?

P1: (long pause 5sec) he was brutal (pause 3 sec) he was beating up, abusive (pause) he was taking drugs (pause)

I: how quickly did he start behaving this way after you got together?

P1: (long pause) after 4 months, after 3 or 4 months (pause 5 sec) first time he hit me (long pause 5 sec)

I: after 4 months of being together

P1: hmmm

I: for how long were you with him?

P1: (long pause 8sec) around 2 years, 1.5 or 2 years (pause)

I: did the abuse continue until the end?

P1: yes until 4<sup>th</sup> May (pause 4 sec) 2012

I: did you decide to leave him?

P1: (pause) yes (long pause) (smile) you need to drag some answers from me

I: can you please tell me what are your thoughts on being a migrant to this country? Do you think that this had any impact on what happened to you with your ex-partner?

P1: (long pause 5sec) I don't know, I don't think so (long pause) ask me again

I: can you tell me as a migrant do you think this impacted your experiences with your ex-partner? that he was brutal...

P1: (long pause 10sec) impact on what?

I: impact on what happened between both of you

P1: definitely

I: why you think that is?

P1: I'm not sure if I understand the impact ...in the same way I am right now or...

I: no this is about what happened between both of you and he hit you or he was aggressive towards you, did this have any correlation between both? You don't understand my questions?

P1: no

I: let's forget about this question. Can you tell me..

P1: we can come back to it later (smile)

I: yes that's fine. Was he the only partner who was violent towards you?

P1: yes

I: only him. Going back to the fact that you decided to leave him, what happened that you decided to leave him after 2 years? Why not earlier or later?

P1: because first of all I was pregnant, I had had enough (long pause 5 sec) of living with the person like him who was beating up all the time, who was using drugs (pause) this had no point

I: you were frightened of what may happen next

P1: exactly

I: you were also worried about your baby

P1: exactly (long pause)

I: did he hit you when you were pregnant?

P1: yes he had beat me up badly I have some photographs if you want to attach them oh no there is my face on them (laugh)

I: so you did report it to police?

P1: yes the case went to court which I lost it (long pause 5 sec)

I: why did you?

P1: (long pause 5 sec) to be honest I really don't know (long pause 5 sec)

I: hmmm, can you please tell me whether you have used any services, or organisations in the UK which helped you with this situation. Was there someone to help or support you?



P1: (long pause 5 sec) what is this organisation called where (IDVA's name) works?

Domestic abuse...

I: DAFSU, Domestic Abuse Family Safety Unit

P1: yes exactly

I: so you ended up with her?

P1: yes

I: so what do you think about this organisation about IDVA and her support?

P1: she had helped me a lot, she was supportive (long pause 3 sec) I own her a lot

I: hmm, how did she help you?

P1: in general emotionally and practically (long pause 3 sec) she was directing me to other professionals and organisations I should go to with my problems *(received support from IDVA; positive experience; emotional and practical support; referred further to other organisations)*

I: to go with your problems

P1: exactly

I: would there be a difference if you were working with the English person or to someone else? Or not what are your thoughts?

P1: I don't know (long pause) difficult to say (pause) I think that English people have very different view on it *(view on British people)*

I: what do you mean by that?

P1: because for instance now I am taking anti-depressants (long pause 5 sec)

I: hmmm

P1: I need to take my medication for the next 2 weeks (pause) and they have very different attitude

I: is this a better attitude or worse?

P1: worse

I: what do you mean by worse?

P1: what do I mean? I made an appointment with GP and this doctor didn't even see me this was a telephone based appointment (long pause 5 sec) On the phone she asked me what is my problem, what is troubling me, what can help me and that was all.

*(Unrealistic expectations; lack of understanding of health system in the UK)*

## **APPENDIX 10**

### **BACP accredited counsellors in Cheshire area:**

- Suzie Hackett - MBACP (Accred) Counsellor & Psychotherapist, UKRCP Nantwich, Cheshire CW5 mobile: 07773908122
- Lynne Nowell MBACP (Accred.) Cheshire Counselling Practice Newspaper House, Tannery Lane Penketh, Warrington, Cheshire, WA5 2UD; mobile: 07508 779572; [www.cheshirecounsellingpractice.co.uk](http://www.cheshirecounsellingpractice.co.uk)
- David Seddon MA, BA, MBACP (Accred) - relationships, anger, depression, 8 Hornby Drive, Congleton, Cheshire, CW12 4WB; mobile: 07578100256/ 07578100256; <http://www.eastcheshirecounselling.com>
- Lisa Slingsby, Accredited CBT Therapist, Accredited Counsellor, EMDR; Warrington, Cheshire, WA3; mobile: 07554 947610; [www.cbttherapycheshire.co.uk](http://www.cbttherapycheshire.co.uk)
- Jessica Woolliscroft Accredited EMDR UK & I, UKCP and UKAHPP; The Hope Street Centre, 10 Hope Street, Sandbach, Cheshire, CW11 1BA, mobile: 01270 882349 / 07903 706379; [www.jessicawoolliscroft.co.uk](http://www.jessicawoolliscroft.co.uk)
- Janet Edwards MA MBACP (Accred), Widnes, Cheshire, WA8; mobile: 0151 420 7382 / 07905 313647; [www.claritytherapy.co.uk](http://www.claritytherapy.co.uk)
- Caroline Midmore Accredited Member MBACP, 136 Nantwich Road, Crewe, CW2 6AX; 42 Crewe Road, Alsager, ST7 2ET, mobile: 01270 876887 / 07581 069877; [www.carolinemidmorecounselling.co.uk](http://www.carolinemidmorecounselling.co.uk)

# Research and Knowledge Exchange Graduate School Form RD1



## APPLICATION TO REGISTER FOR THE DEGREE OF

### Master's by Research

All students must enroll and pre-register in the faculty before applying for full registration for a research degree. Students **must** submit their RD1 within **three** months (full-time students) or **six** months (part-time students) of enrolment. Registration will normally be backdated to the date of enrolment. If a different starting date or backdating of more than 6 months is requested then a supporting letter from the Director of Studies **must** be attached.

## SECTION 1

The Candidate			
First name(s):	Alicja Anna	Preferred Title:	Mrs
Surname:	Blada-Edgeley		
Term time address:	30 Hargrave Avenue, Crewe, Cheshire		
		Postcode:	CW2 8NW
MMU e-mail address:	11042798@stu.mmu.ac.uk	Contact Number:	07783073718
Personal e-mail address:	alicjabld@yahoo.co.uk	MMU ID Number:	11042798
Faculty/Department:	Interdisciplinary Studies	Enrolment Date:	2/10/2014
Funding (please tick one or more):			
<input type="checkbox"/>	MMU Studentship	<input type="checkbox"/>	Self-funded
<input type="checkbox"/>	International Sponsor	<input type="checkbox"/>	External Partner (state whom):
<input type="checkbox"/>	Staff Fees Waiver	<input type="checkbox"/>	Research Council (state which):
<input checked="" type="checkbox"/>	Other (please specify):	MMU Interdisciplinary Studies Department	

Funding (where funding comes from two or more different sources, please indicate % contribution from each):			
<b>Qualifications</b>			
<i>Please give details of Master's degree, including the title of your thesis, honours degree and/or any equivalent qualification.</i>			
Master's degree title(s)	Title of thesis and main subject(s)	Awarding body/place of Higher Education	Date awarded
Honours degree title(s) or equivalent	Classification	Awarding body/place of Higher Education	Date awarded
BSC (HONS) Psychology with Abuse Studies	2:1	MMU	23/06/2014

## SECTION 2

The Research Proposal			
Working Title: <i>Domestic Violence and Abuse: An Exploration of the Experiences of Polish Migrants to the UK</i>			
<i>Attach an outline of the proposal in approximately 1000 (± 10%) words (font size 12), which includes the academic aims of the investigation, a description of the research to be undertaken, the methods to be used and no more than six key references.</i>			
<i>The Research Degrees Committee will only permit registration if they have assurances that any ethical issues have been approved.</i>			
	Please tick		
I have completed the ethical checklist.	Attached	<input checked="" type="checkbox"/>	
Are there any ethical issues raised within the research?	Yes	<input type="checkbox"/>	No <input checked="" type="checkbox"/>
	<i>(Attach letter of approval or evidence that you have submitted an application)</i>		
A timetable, such as a Gantt chart, is attached where appropriate.	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>

## SECTION 3

Supporting Programme
I have attended the University Induction Day on:

All students are required to attend the University Research Induction Day. All students are expected to engage with a supporting programme following Vitae's Research Development Framework (RDF) <http://www.vitae.ac.uk/>

Please tick either	
<input checked="" type="checkbox"/>	I have discussed a programme of supporting studies with my supervisory team.
or	
<input type="checkbox"/>	I wish to apply for exemption from the supporting programme (attach evidence of prior formal training).

## SECTION 4

### Declaration and Signature of Applicant

I understand that, except with the specific permission of the University, I may not during the period of my registration, be a candidate for another award of this or any other university. I confirm that I will prepare and defend my thesis in English.

I am aware of the University Regulations, the Institutional Code of Practice (ICoP), Research Students Handbook of the University, which I have both read and understood (accessible from <http://www2.mmu.ac.uk/graduate-school/graduate-school-intranet/regulations-cop-supporting-material/>)

Signed:	Alicja Blada-Edgeley	Date:	26/10/2014
	<i>(Candidate)</i>		

## SECTION 5

### Supervisory Team

All supervisors must supply current details. Please ensure that a RDCV is attached for each member of the team. It is understood that each member of the supervisory team has received a copy and formally approved the research proposal. The Director of Studies may sign for supervisors and advisors.

**Director of Studies (Must hold an award at the same level or higher for the candidate's registration degree)**

Name:	Kathryn Kinmond	Title:	Dr	
Department Name (DoS must be internal):	Interdisciplinary Studies			
Signature:	K.S.Kinmond			
Supervisory experience (give details of the number and level of students supervised)				
	Masters (by Research)	MPhil	PhD	Professional Doctorate (state which)
Successfully completed	2	1	3	

Currently supervising as DoS <i>(excluding current application)</i>	2		3	
Currently supervising as 2 <sup>nd</sup> /3 <sup>rd</sup> supervisor <i>(excluding current application)</i>				

**Supervisor**

Name:	Lisa Oakley	Title:	Dr
Department Name:	Interdisciplinary Studies		
Signature:	L.R.Oakley		

Supervisory experience *(give details of the number and level of students supervised)*

	Masters (by Research)	MPhil	PhD	Professional Doctorate <i>(state which)</i>
Successfully completed	1			
Currently supervising as DoS <i>(excluding current application)</i>				
Currently supervising as 2 <sup>nd</sup> /3 <sup>rd</sup> supervisor <i>(excluding current application)</i>			3	

**Third Supervisor**

Name:	Linda Reichenfeld	Title:	Mrs
Department Name:	Interdisciplinary Studies		
Signature:	L.Reichenfeld		

Supervisory experience *(give details of the number and level of students supervised)*

	Masters (by Research)	MPhil	PhD	Professional Doctorate <i>(state which)</i>
Successfully completed				
Currently supervising as DoS <i>(excluding current application)</i>				
Currently supervising as 2 <sup>nd</sup> /3 <sup>rd</sup> supervisor <i>(excluding current application)</i>				

## SECTION 5 (continued)

Additional Supervisor/Advisor/Mentor					
Name:				Title:	
Department Name:					
Signature:					
Supervisory experience <i>(give details of the number and level of students supervised)</i>					
	Masters (by Research)	MPhil	PhD	Professional Doctorate <i>(state which)</i>	
Successfully completed					
Currently supervising as DoS <i>(excluding current application)</i>					
Currently supervising as 2 <sup>nd</sup> /3 <sup>rd</sup> supervisor <i>(excluding current application)</i>					

## SECTION 6

Support			
1) Details of specialist facilities required in the University for the project:			
2) Name of any collaborating establishment and any facilities to be provided by them:			
I confirm that the above facilities will be provided by the collaborating establishment.			
Signed:			Date:
	<i>(on behalf of the collaborating establishment)</i>		

## SECTION 7

Support by Head of Department
I support this application and confirm that the necessary resources, including the facilities in the University detailed above, are available to support the research.
Comments:



Name:			
Signed:		Date:	
	<i>(Head of Department)</i>		

## SECTION 8

### Submission of Form to Faculty Research Degrees Administrator

Signature:		Date:	
	<i>(Faculty Research Degrees Administrator)</i>		

## SECTION 9

### Approval

Consideration at Faculty Level <i>(Date):</i>			
Comments:			
Consideration by Research Degrees Committee <i>(Date):</i>			
Comments:			
Approved by:			
<input type="checkbox"/>	Research Degrees Committee	or	<input type="checkbox"/> Chair's action
Approval Signature:		Approval Date:	

## **APPENDIX 12**

The Polish IDVA contacted her previous clients and explained briefly the aim of this project. When someone was interested I was given the mobile number in order to contact the potential participant after the prior consent and ensuring that it is safe to contact. The initial conversation was on the phone and aims were highlighted. When the person was still willing to participate the meeting was scheduled in order to pass on the Participant Information Sheet (PIS). PIS and the consent form were written in English and translated into Polish. In this way the aims of the project were clearly explained leaving no misinterpretation or misunderstanding of what is expected from participants during this study. The potential participant had a chance to go away and think whether she wants to take a part or not. After this initial stage all five participants called or text back saying that they are interested in taking part in this study. The interview questions were presented to participants in the oral form during the telephone based conversations. By introducing interview questions prior to the interview this enabled participants to familiarize themselves with the questions. At the same time the women could decide whether they want to answer all questions or not. The time and day was organised to suite the participant in order to conduct interviews. All interviews took place at the Manchester Metropolitan University Cheshire Campus.

## **APPENDIX 13**

*Familiarization notes from the impact of migration on women's experiences of support for DVA.*

*Interview 1:*

She immigrated to the UK for financial reasons.

She doesn't like living in the UK anymore due to past experiences of DVA with her ex-partner; also recent experiences with her neighbours who are noisy and people she used to hang out with, but now they are putting nasty messages about her on Facebook. She also had anonymous calls made to children's social care re-neglect of her daughter hence she wants to return to Poland. She also doesn't like English people, because of their different attitude (disappointment with people; no support from them; life is ruined; prejudice; impact of migration)

Her experience of support for DVA is that the IDVA was the main person working with her and offered her emotional and practical support. The IDVA also referred her on to other organisations and to other professionals so that she could continue with the ongoing support (positive experience)

She doesn't know what could be changed in the future for accessing services, because she feels that the Polish group already exists for people. Although she mentions that an English course would be beneficial.

She is feeling strongly about women who are in abusive relationships that they should leave their partners as soon as they can and not to wait as long as she was (timescale)

She shows insight into how abused women may feel by saying that they are scared and frightened hence they don't leave the relationship earlier.

## **APPENDIX 14**

*Familiarization notes from the impact of migration on women's experiences of support for DVA.*

*Interview 2:*

She immigrated to the UK for financial reasons.

She had followed her partner who was already in the UK working and she came over with her daughter. She has no contact with her daughter anymore in fact her daughter left the UK and had gone back to Poland (disappointment, loss, sadness, loneliness, isolation, lack of support from the family)

At first she thought her partner was going to change for the better in the UK, but he was not working, not paying any bills, not contributing to the daily expenses hence she was paying for everything and because she struggled financially she had been left with debts (financial responsibility, anger, stress)

She is very disappointed with her life in the UK after being here for 11 years. She is angry with the British Government for not offering her and others more support. She feels betrayed by the Government. She feels isolated in her situation with no prospect of a better situation. There is no help and no support from the British Government or from others in the Polish community, or from other British organisations (separation, blame, negativity, lack of support from the British government, from others in the community and from the British organisations, no help for Poles, and discrimination towards Poles)

She has very strong feelings regarding other Polish migrants in the UK. She feels that they don't stick together; they don't want to help one another. She believes other nationalities have a stronger national identity than Poles (outsider, lonely, separated, national identity, lack of support from Poles)

She is experiencing ill mental health due to all the stresses in her life (depression)

She lives in 'slums', has nothing to eat, has no work (desperation)

She is thinking about going back to Poland, because it would be easier to live in poverty with other Poles than in the host country on her own.

Her experience of migration is very negative. She feels that Polish people are mainly discriminated in work places. There is not enough work for her and others, Polish people are not supportive to one another, no one wants to help and support her. She would like other people in similar situation to hers to be provided with more help i.e. practical help, because people are lonely (need for support)

She received help from an IDVA, but the IDVA was only interested in her back at the time of referral. She feels that there needs to be more done to help women in her situation for instance, run errands or find work. She also struggles with the English language and no one wants to help with it. Even her landlord is against her, because he expects her to pay the rent, but he didn't give her a tenancy agreement (but that was in the past, now receives no support)

## **APPENDIX 15**

*Familiarization notes from the impact of migration on women's experiences of support for DVA.*

### *Interview 3:*

She came over to UK for financial reasons. Her husband and she did not have work in Poland and initially she planned to stay only for a year.

Her husband was psychologically abusive back in Poland.

Her mother-in-law was controlling in Poland and she thought that moving abroad would stop her mother-in-law disrupting her marriage life.

Her husband continued being psychologically and emotionally abusive towards her in the UK, which got to the point that she could not have taken any more and started looking for help.

She has had great support throughout her journey from her sister, who helped to find DVA support and most importantly was with her all this time. Her sister kept her alive.

In the UK her marriage arrived at the culmination point hence she decided to look for DVA support. His abusive behaviour was no longer bearable.

In Poland she was capable of ending the relationship with him a few times. In the UK her ability to cope with his behaviour and the impact on herself became unbearable and enormous. She lost her drive, her interests and her dreams. Instead she became isolated, lost, quiet and suicidal.

Her experience of migration is extremely positive. She talks very enthusiastically about living in the UK, about all the options and different possibilities people have in this country. Her initial plan was to stay over here only for year, but she has been here 9 years now.

Her experience of support is that she has received great support from a DVA organisation, from housing and women's aid. She feels that everything is in place for Polish people: interpreters, Polish speaking workers in most organisations, leaflets in Polish, the only thing missing is access to a Polish speaking psychologist.

## **APPENDIX 16**

*Familiarization notes from the impact of migration on women's experiences of support for DVA.*

### *Interview 4:*

She came over to the UK for financial reasons together with her boyfriend they didn't have jobs in Poland, she had a small child and no specific occupational qualifications.

Her relationship was not working in Poland, but the abuse escalated in the UK when her boyfriend met the wrong people and started taking drugs and drinking alcohol.

She was physically assaulted by him, but managed to escape to her mum's house.

Her experience of migration is positive she talks about living in the UK in very positive terms.

She received great support from an IDVA, safe accommodation, health visitor, midwife, social worker and the Polish Support Group. She is particularly impressed with having monthly meetings with all professionals and how they only focused on what else they can do for her. She is extremely grateful to all professionals for their involvement.

## **APPENDIX 17**

*Familiarization notes from the impact of migration on women's experiences of support for DVA.*

*Interview 5:*

She came to the UK for financial reasons, because her boyfriend had no work and she had an unsuccessful job.

Her relationship ended in the UK, she left him and took their daughter with her.

At first, she was of homeless status, but was offered housing support from the local authority.

Her experience of migration appears to be positive.

Her experience of support for women is positive, because she speaks English hence she was able to ask for support, but she highlights that perhaps it would have been very different if she didn't speak English. She states that there is support from housing, women's aid organisations and children's centres. She also mentions counselling, which she had found helpful in dealing with her emotions after the separation.



## **APPENDIX 18**

### *Familiarization notes from the impact of migration on women's experiences of support for DVA from all interviews*

All participants came to the UK for financial reasons.

DVA existed in their relationships back in Poland and they all hoped that their relationship would improve when they moved to the UK.

All relationships broke down in the UK.

Three women have a very positive experience of migration to the UK. These women want to stay in the UK, this country meets their expectations, they all have what they wanted in their lives, they feel safe, happy and DVA is in the past for them. Three women are appreciative of services received for DVA. They feel gratitude for the support from: children's social care, health care, women's aid organisations, social housing and children's centres. They would change nothing although they mention importance of having Polish workers and a Polish speaking counsellor.

The other two women voiced negative experiences of migration hence they want to go back to Poland. One woman states that there is discrimination and racism towards Polish people in the UK. The other two women outline support received from an IDVA. They do not expand on how much this intervention was supportive, but focus more clearly on the aftermath that they struggled financially, had issues with housing, difficulties in finding a new job and lack of social networks.

## **APPENDIX 19**

<b>An initial coding framework from interview 1</b>	
<b>Interview transcript</b>	<b>Initial coding framework</b>
<p>I: so what do you think about this organisation about IDVA and her support?            P1: she had helped me a lot, she was supportive I own her a lot</p>	<p>Positive experience of support from different organisations            IDVA helped a lot            Gratitude for IDVA's support</p>
<p>I: hmm, how did she help you?            P1: in general emotionally and practically she was directing me to other professionals and organisations to which I should go to with my problems</p>	<p>Received emotional support            Received practical support            Directed to other organisations for further support with other problems            Acknowledgement from IDVA that she may have other issues in the future – ongoing support offered</p>
<p>I: do you think they were listening to your needs? Were they supportive?            P1: Yes they were helpful they helped to manage all documents</p>	<p>Listening to the needs            Practical support</p>
<p>I: Documents regarding what?            P1: With regards to GP appointments and moving house</p>	<p>Practical support in terms of booking GP appointments, and moving house</p>
<p>I: Is there anything you would like to change, is there anything the organisations could change to be more helpful for the victims of domestic violence and abuse (DVA)?            P1: I don't know it's difficult to say, because whenever I asked I             I: you have always received it            P1: exactly</p>	<p>Would not change anything in service provision            Always received support</p>

<p>I: Do you have any suggestions on what can be improved for the Polish victims? Is there anything that can be done for them? Is there anything the Polish women need but is missing from the service provision?</p> <p>P1: (long pause 5 sec) (hmmm ) group is already existing (hmmm) I don't know, maybe some activities or courses (pause)</p>	<p>Need for activities or courses for the women</p>
<p>I: what kind of courses?</p> <p>P1: (hmmm) enabling to get a better job or but this also depends a lot from the language proficiency</p> <p>I: (hmmm)</p> <p>P1: language courses</p>	<p>Employment support course Level of spoken English language</p> <p>English language course</p>
<p>I: how is life in the UK? Do you like it over here?</p> <p>P1: no I don't like it anymore</p> <p>I: why is that?</p> <p>P1: hmmm (pause 5sec) too many things (3sec pause) my life has been ruined too much (pause 3 sec) my mental life has been impacted (long pause)</p> <p>I: how your life has been ruined?</p> <p>P1: (long pause 5 sec) wrong partner (pause)</p>	<p>Doesn't like living in the UK anymore</p> <p>Ruined life Mental health impacted</p> <p>Wrong partner</p>
<p>I: why was he the wrong partner?</p> <p>P1: (long pause 5sec) he was brutal (pause 3 sec) he was beating up, abusive (pause) he was taking drugs (pause)</p> <p>I: can you please tell me what are your thoughts on being a migrant to this country? Do you think that this had any impact on what happened to you with your ex-partner?</p> <p>P1: (long pause 5sec) I don't know, I don't think so (long pause) ask me again</p>	<p>Physical abuse Drugs abuse</p> <p>Don't know the impact of migration on her</p>

<p>I: would there be a difference if you were working with the English person or someone else or not what are your thoughts?</p> <p>P1: I don't know (long pause) difficult to say (pause) I think that English people have a very different view on it</p> <p>I: what do you mean by that?</p> <p>P1: because for instance now I am taking anti-depressants (long pause 5 sec)</p> <p>I: hmmm</p> <p>P1: I need to take my medication for the next 2 weeks (pause) and they have very different attitude</p> <p>I: is this a better attitude or worse?</p> <p>P1: worse</p> <p>I: what do you mean by worse?</p> <p>P1: what do I mean? I made an appointment with GP and this doctor didn't even see me this was a telephone based appointment (long pause 5 sec) On the phone she asked me what is my problem, what is troubling me, what can help me and that was all.</p> <p>I: so whatever you have needed you have received it. You are feeling safe now?</p> <p>P1: we can say that (laugh)</p> <p>I: why we can say that?</p> <p>P1: in general this is about my situation here, with my flat, my neighbours and others and with people living in this area.</p> <p>P1: I would add that women should leave men like that as soon as they can not to wait for 2 or more years</p> <p>I: is this what you would suggest them?</p>	<p>English people have a very different view on support</p> <p>English people's attitude is worse</p> <p>Unsure if feels safe afterwards</p> <p>Unsafe situation with neighbours, flat, other people in the area</p> <p>To leave abusive relationship sooner rather than later Advice to other women</p>
---	--

<p>P1: exactly</p> <p>I: but it is difficult to leave isn't?</p> <p>P1: (long pause 5 sec) very much, (long pause 5 sec) very difficult</p> <p>I: why do you think it is so difficult?</p> <p>P1: because women are frightened</p> <p>I: they are afraid of men?</p> <p>P1: they are afraid of them they are afraid of leaving them and afraid of being found by them (long pause)</p> <p>I: are you frightened?</p> <p>P1: (long pause 5 sec) not such much anymore (pause) generally I don't think I am frightened at all I think this is over now (long pause)</p> <p>I: and you had to come over here?</p> <p>P1: I was trying to get a new flat this took quite a long time, but I've moved out and again (laugh) something is not right</p> <p>I: with your flat?</p> <p>P1: (pause) with my flat, with my neighbours (pause) unfortunately (name of the social housing association) is not doing anything (pause, 5 sec)</p> <p>I: they don't listen to what you are saying and to your needs?</p> <p>P1: no, completely nothing (pause) I have been to the (organisation advising on citizens needs) and I am going again this Thursday</p> <p>P1: at first I can tell you she said that they cannot help me and later on she rang me the next day I think if I am not wrong that they can only make it happen quicker, the refurbishment of the whole flat to do the damp walls and they can impact</p>	<p>Difficult to leave abusive relationship Women are frightened of abusive men</p> <p>Women are frightened of being found after leaving their partners</p> <p>Feels safe now she is no longer in this situation</p> <p>Another issue</p> <p>Issue with housing with neighbours Lack of support from housing association</p> <p>Her needs are not being met</p> <p>Issues with noisy neighbours Bad flat condition Reports to housing association</p>
--	--

somehow (name of the social housing association) with regards to my neighbours. I did report it so many time since November that I can smell cannabis on daily basis that the dogs are barking at night. There was this woman visiting me, but she hasn't done anything about my situation.

I: and you are still experiencing the same noises as before? No changes?

P1: The only difference is that there are no parties on Saturday. If there is a party it usually finishes at 7pm the music is playing until that time (hmm) although it happens that this young one has got the bedroom above mine he brings his mates at night and they are laughing and joking, and I can hear all of that as if I was in the same house

P1: then there are these girls I used to do their nails and now they are harassing me

I: how do they harass you?

P1: there was this situation. They were texting me one of the girls is 13 years-old they are called English Gypsies. They are following us around the shops

I: are they? What do they want?

P1: They are not talking they are just following us. I don't know how to explain it to you they are provoking they are trying to provoke. The youngest one she found me on Facebook before Christmas and she started sending me rude messages I replied to these messages and then her father came and he was kicking my front door.

P1: He came and was kicking the door and then there were 2 phone calls. I had social

Noisy neighbours

Ex-mates harassing her

Ex-mates trying to provoke her

services involved when my mum was visiting me the police came to my house I: because of this situation?

P1: Basically, someone made a phone call saying the child has been beaten up, left on her own at home, child is dirty, smells and is hungry. I can give you the letter to read (long pause). I was trying to commit suicide before the current partner I had someone before and I was trying to commit suicide I was aggressive when I was living here before I gave a birth I was taking drugs I can give you the letter to read . Social worker was sitting here with me and my partner and she was herself laughing at this letter. Someone also said that I am 37 years-old and my partner is 21 years-old (laughs)

P1: my health visitor told me to ring my GP to get some pills, which are making people feel happier (smile)

P1: yes something like that. I have really had enough. We are considering going back to Poland

I: if there's nothing keeping you here  
P1: that is all too much. I became stronger I had re-built my life and there is someone trying to destroy it again. I understand if that was my ex-partner, because he was always saying that if I will have a new boyfriend he will kill me, but those youngsters, one of them is 13 the other one I think she is 20 years- old.

Anonymous reports to children's social care for child neglect, suicidal attempt, use of illicit drugs, aggressive behaviour

Taking anti-depressants

Going back to Poland

Other people trying to destroy the life she had re-built

<b>APPENDIX 20</b> <b>Initial themes</b>	<b>Initial coding framework</b>
1. DVA Support	<ul style="list-style-type: none"> <li>○ Positive experience of support from different organisations</li> <li>○ IDVA helped a lot</li> <li>○ Gratitude for DVA support</li> <li>○ Received emotional support</li> <li>○ Received practical support</li> <li>○ Directed to other organisations for further support with other problems</li> <li>○ Received great support from all involved agencies</li> </ul>
2. Expectations and perceptions	<ul style="list-style-type: none"> <li>○ Need for activities or courses for the women</li> <li>○ Employment support course</li> <li>○ Level of spoken English language</li> <li>○ English language course</li> <li>○ Polish counsellor</li> <li>○ Polish workers in organisations</li> <li>○ Support with finding a job</li> <li>○ To listen to women's needs</li> <li>○ To run errands</li> <li>○ Polish interpreter</li> </ul>
3. Impact on life	<ul style="list-style-type: none"> <li>○ Doesn't like living in the UK anymore</li> <li>○ Ruined life</li> <li>○ Mental health impacted</li> <li>○ Physical abuse</li> <li>○ Emotional abuse</li> <li>○ Psychological abuse</li> <li>○ Financial abuse</li> <li>○ Loves life in the UK</li> <li>○ Plans on going back to Poland</li> <li>○ Plans to stay in the UK</li> <li>○ Wrong partner</li> </ul>



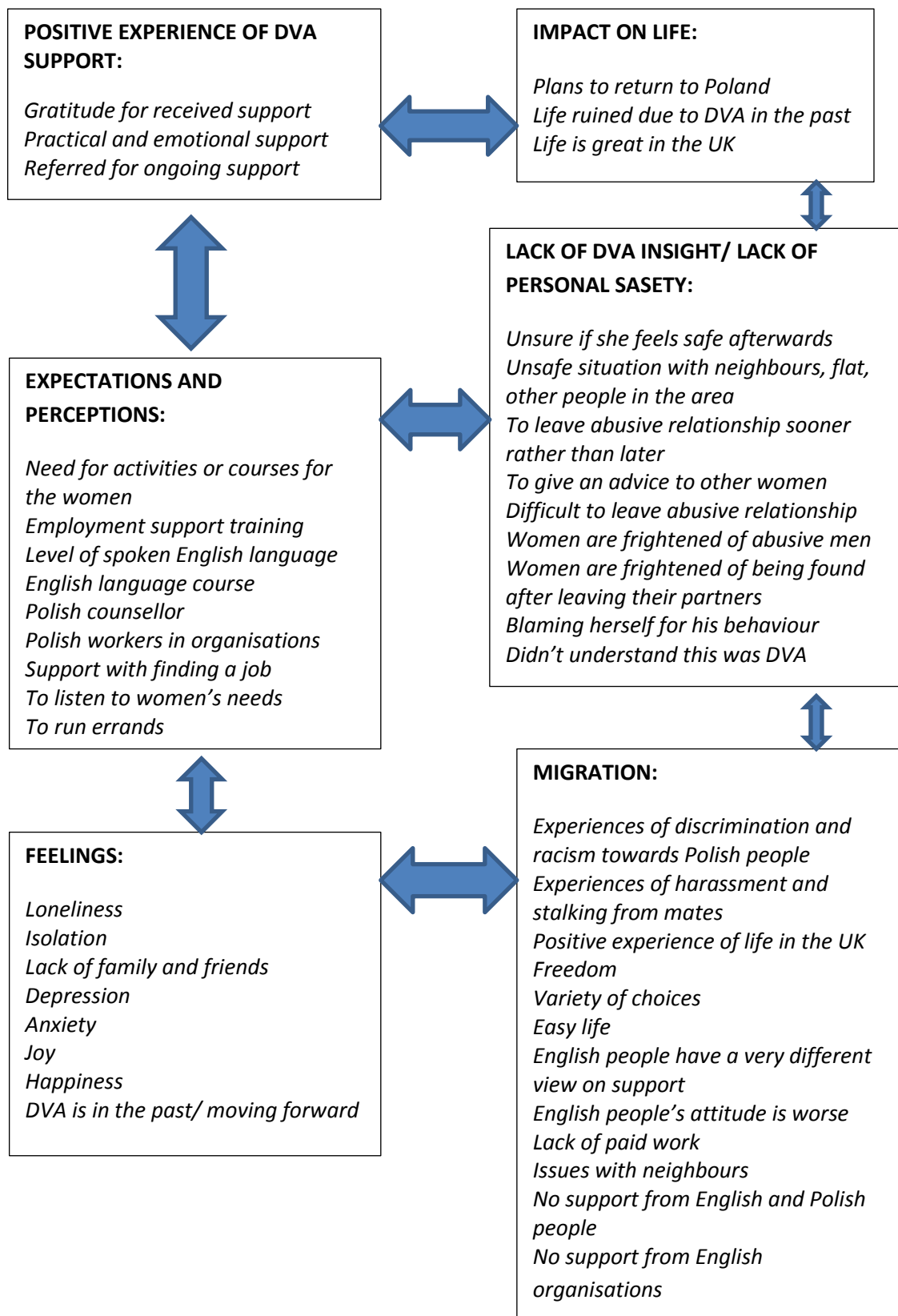
#### 4. Migration experience

- Experiences of discrimination and racism towards Polish people
- Experiences of harassment and stalking from mates
- Positive experience of life in the UK
- Freedom
- Variety of choices
- Easy life
- English people have a very different view on support
- English people's attitude is worse
- Lack of paid work
- Issues with neighbours
- No support from English and Polish people
- No support from English organisations
- Another issue
- Debts
- Issues with neighbours
- Lack of support from housing association
- Poles are not kind to one another
- No help from landlord
- Others don't understand how she struggles
- Her needs are not being met
- Professionals were only supporting in the past not anymore
- Issues with noisy neighbours
- Inadequate condition of flat
- Reports to housing association
- Anonymous calls to children's social care

<p>5. Lack of DVA insight/ lack of personal safety</p>	<ul style="list-style-type: none"> <li>○ Unsure if she feels safe afterwards</li> <li>○ Unsafe situation with neighbours, flat, other people in the area</li> <li>○ To leave abusive relationship sooner rather than later</li> <li>○ To give an advice to other women</li> <li>○ Difficult to leave abusive relationship</li> <li>○ Women are frightened of abusive men</li> <li>○ Women are frightened of being found after leaving their partners</li> <li>○ Blaming herself for his behaviour</li> <li>○ Didn't understand this was DVA</li> <li>○ Could recognise issues in other couples but not in hers</li> <li>○ Didn't know that was psychological abuse</li> </ul>
<p>6. Feelings</p>	<ul style="list-style-type: none"> <li>○ Loneliness</li> <li>○ Isolation</li> <li>○ Lack of family and friends</li> <li>○ Depression</li> <li>○ Anxiety</li> <li>○ Joy</li> <li>○ Happiness</li> <li>○ DVA is in the past</li> </ul>

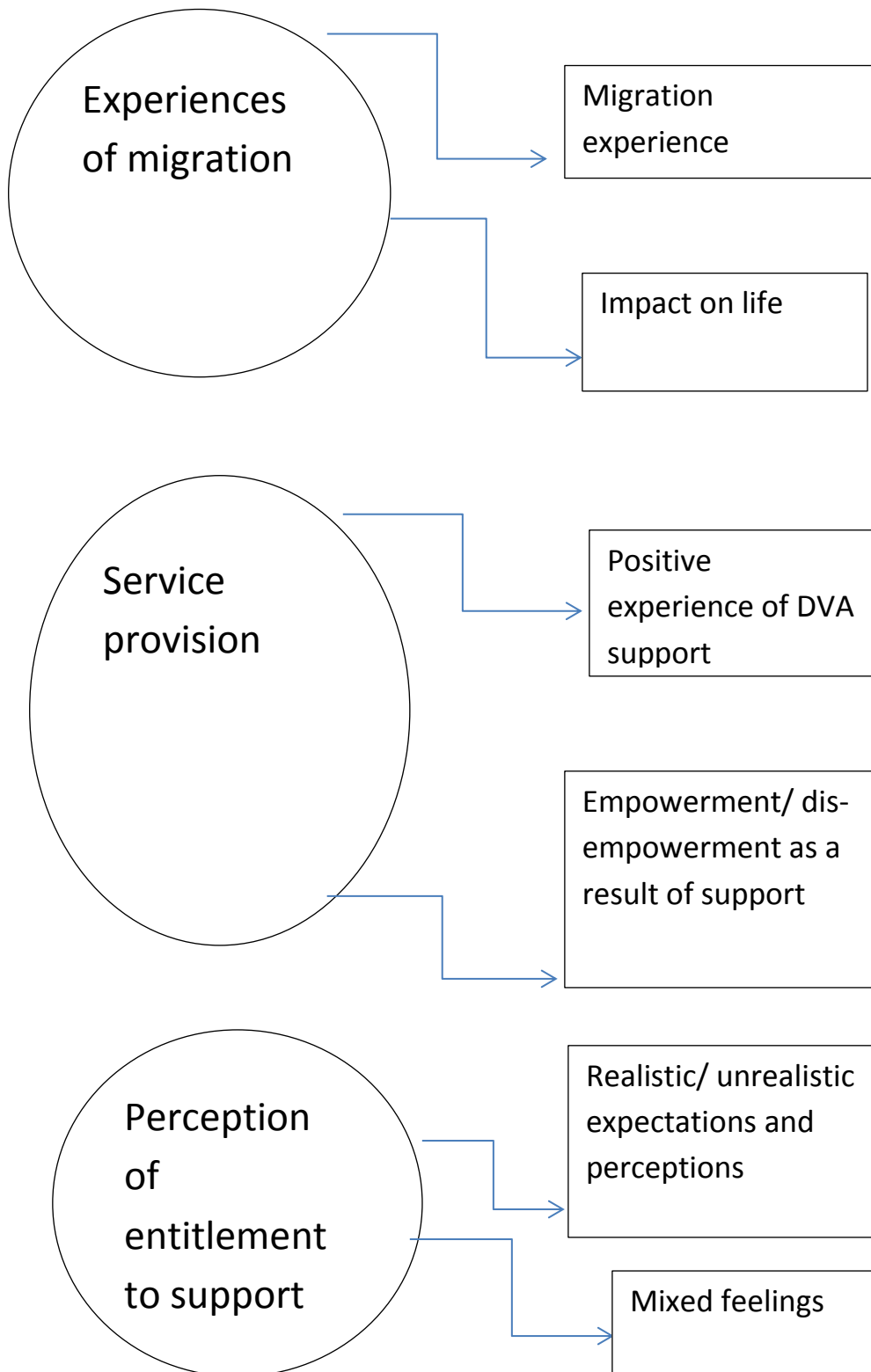
## APPENDIX 21

### Thematic analysis map



**APPENDIX 22**

Final thematic map:



## APPENDIX 23

### DESCRIPTION OF THEMES

#### Theme 1- *Experiences of migration*

This theme describes participants' experiences of migration to the UK and its impact on their lives. It is called 'experiences' because every participant had their own specific experience, which is unique only to her. The migration experience had an impact on women's understanding of support available to them for DVA. For one group of women this was a positive experience whereas other group of participants stated their unhappiness relating to the general service provision in the UK and the migration process.

#### Theme 2- *Service provision*

This theme highlights that every participant in this study was offered equal and robust support by variety of organisations and agencies in their local areas. Their experience of support was positive. However, the difference between participants' narratives is related to the individual experiences towards the outcome of support received by all women. One group of women became empowered by the support received and continued with the changes to their lives. Other women stayed dis-empowered and the received support made no difference to their standard of live.

#### Theme 3- *Perception of entitlement to support*

This theme explored participants' perception and understanding of their individual entitlement to support. It focuses on differences in participants expectations towards support available locally. Some women had realistic expectations towards support, hence were satisfied with the outcome. Other women had unrealistic expectations towards their entitlement to support thus continued being unhappy about the outcomes.