

On Addressing Psychological Intimate Partner Violence Against Women Through a Change of
Educational Curricula and Restorative Practice Suggestions

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Abstract

On Addressing Psychological Intimate Partner Violence Against Women Through a Change of Educational Curricula and Restorative Practice Suggestions

Amélie Crasci

This master's thesis explores the educational and social approaches to addressing psychological intimate partner violence (IPV) against women in Québec. By examining current educational curricula and integrating restorative practices suggestions, the study highlights how changes in educational frameworks can contribute to reducing IPV in society (especially psychological IPV). Through a combination of a literature review and qualitative data analysis derived from interviews with IPV victims and social workers, this research identifies key strategies for promoting awareness about and prevention of psychological IPV. The findings emphasize the importance of integrating these practices into educational systems to foster a more supportive and responsive approach to psychological IPV.

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To all women out there: may you always be seen, may you always be heard, and may you always remember your worth.

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“May the wind always be at your back and the sun upon your face. And may the wings of destiny carry you aloft to dance with the stars.”

— *George Jung, Blow (2001)*

God bless you all.

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Introduction

December 2019 marked the first detection of the Coronavirus disease 2019 (COVID-19) in China, which quickly became a global pandemic as declared by the World Health Organization (WHO) on March 11, 2020. The ramification of the WHO declaration of COVID-19 being a pandemic led to drastic measures such as the mandatory wearing of masks, government lockdowns, curfews, and losses or instabilities of jobs, which catapulted a rise of mental health issues in society. As a result of fear, stress, anxiety, and the disruption of people's professional and personal lives, researchers observed an "increase in psychological problems, especially in women" (Indu et al., 2021, p. 1), which were attributed to cases of domestic violence, otherwise known as intimate partner violence (IPV). For the sake of this proposal and my thesis, I will be employing the term IPV, which umbrellas the different forms of abuse committed by an intimate partner and include physical, sexual, verbal, psychological/emotional (Government of Canada, 2023), as well as financial (Woehrer et al., 2023) and spiritual (Dehan & Levi, 2009) abuse, which are forms of abuse I will be looking at, specifically psychological/emotional abuse. Moreover, because of my lived experience with IPV, and my current role as an adult educator, I felt I was ideally positioned to conduct research on this subject and speak with others about their IPV experiences. In my thesis, I will:

- 1) Introduce my topic through a personal connection to my proposed study;
- 2) Review relevant literature, leading to my research questions;
- 3) Explain my methodology which details the theoretical framework of my research; my qualitative methodology; my research problematic and research questions; the location(s) where my study occurred; the time-period when my research took place; information about my research participants; how I accessed the location(s) where I

- 4) conducted my study; what ethical considerations were employed in my study; the methods I used for collecting my data; a brief overview of my data analysis; and a conclusion of my research findings;
- 5) Elaborate more on my data analysis and empirical findings, by highlighting different themes derived primarily from using thematic analysis and coding with my data, as well as through the narratives of my research participants;
- 6) Discuss the implications of my research study on educational curricula and conclude my thesis.

Personal Connection to the Proposed Study

During the second wave of COVID-19 in August 2020, I personally experienced IPV, which comprised of verbal and psychological/emotional abuse. I started living with my intimate partner in April 2020. At this moment in time, the world was in complete shambles – and apparently – so was my partner. His business was suffering from a lack of patients, he was having major issues with his staff, and as a result, he was experiencing extreme levels of stress that he had never endured before as both a healthcare professional and a clinic owner. These are not excuses for the despicable behaviour that he exhibited towards me, but rather a way to offer a contextual perspective. After a few months of repetitive government lockdowns, COVID-19 protocols, patients not coming to their appointments, and staff being terrified of coming into work out of fear of catching the virus, my partner who already suffered from anxiety before the pandemic suddenly found himself becoming overly anxious. He imposed all his stress on me, and I had become his verbal and emotional punching bag. By August 2020, he had reached an ultimate low. At the slightest disagreement of things, he yelled at me with profane language and continuously insulted and belittled me through name-calling (e.g., names such as stupid, bitch,

crazy, psycho, delusional, etc.) and insulting what I was doing with my life (which was being a nursing student at the time), blaming me for all his problems and stress (e.g., by saying, “If I was alone, I wouldn’t have to deal with this/you”), minimizing the weight of my stress (i.e., to him, being a full-time student in an intensive nursing program and a part-time educator on weekends meant my stress was non-existent when compared to him being a doctor and a business man), while attempting to permanently kick me out of our shared home (which he had the power to do without remorse, for I had moved into a home that was already his). Prior to this, he purposefully ignored me by not listening to me when I tried expressing myself and then avoided me at all costs by leaving any room I would walk into, to see him and try and talk to him civilly (as two mature adults should be able to do). Through manipulation tactics such as control, gaslighting, and verbal abuse, this was indefinitely the most violent form of communication anybody had ever used with me. On one night, at one in the morning, I found myself crying hysterically with trembling hands, while packing fifteen bags of my belongings and desperately stuffing them into my sedan hoping they would all fit. I had no clue as to where I would sleep the night – I nearly slept in my vehicle. Fortunately, I was able to sleep the rest of the night at my parents’ house, despite the risk of not abiding by the Canadian government recommendations and putting my senior and/or immunocompromised parents at risk of contracting a virus – which at the time – we knew little about. Following this IPV incident, I was completely distraught.

I found myself thinking that: *I’m worthless. Nobody cares about me. I should kill myself.* I was sabotaging myself with these self-limiting beliefs that were coming back to haunt me from when I was bullied in my childhood, but my self-esteem was completely robbed from me, and this inevitably impacted how I socially viewed and interacted with others. I wondered if friends or family would question or judge me if I had told them the truth of what happened to me, and

thus, at first, was more comfortable keeping to myself and not sharing too many details of my story. I felt that being alone in solitude was better for me because nobody would have the power to get close to me and hurt me. I lacked trust in not only my relationship but also in my friendships, while always second-guessing people's true intentions. This was a rather negative and unhealthy way to view the world as well as an unsustainable way to live. I later realized that being transparent about my story to close and trusting family members in addition to seeking out a clinical psychologist's services was what helped me immensely. That, and leaving my intensive nursing program to take a hiatus from school; deeply reflect on myself and my life; figure out what the best course of action would be for me to move forward in a way that promotes a healthier and purposeful lifestyle – one where my energetic batteries are fully charged to be capable of giving my best to others because I am giving myself my best – are what “saved me”, if you will. This decision was beneficial for me because I had suffered from a significant amount of anxiety, depression, and post-traumatic stress following my abuse, compounded by the stress that the pandemic itself had imposed on me in addition to my school and work priorities. Evidently, although this intense scenario happened once, it was enough to completely disrupt my mental health and even personal relations. Thankfully, speaking with certain loved ones and a psychologist helped me reground myself. In addition, my partner was deeply apologetic towards me and he received the help that he needed through: 1) speaking with an honest friend who gave him self-development and relationship advice; 2) seeking personal meditative and therapeutic practices, such as temporarily taking Ashwagandha (i.e., a supplement that aids in reducing stress and anxiety) before sleep, doing hot/cold spa therapy, listening to meditative music, podcasts or audiobooks on personal development; 3) engaging in more physical exercise, such as doing yoga, working out at the gym, dancing, walking, hiking, cycling, swimming, and kayaking; 4)

reducing his weekly work load by hiring more assistance at his clinic and working fewer days per week; 5) traveling as often as possible; and 6) practicing a relationship-game we made up where on a regular basis we look at and tell each other three things that we love about each other to promote self-esteem, positivity, and love, which we labeled in French, “*Ce que j’aime de toi*”, on top of actively trying to communicate our emotions better with each other, (especially when we disagree on something), as a form of conflict resolution. By implementing these six steps into his life and our relationship, on a continuous basis, I am happy to say that my partner’s heightened level of ruthless behaviour eventually drastically diminished. This can be deemed as worthwhile information for future educational and even judicial practices, since this demonstrates that change, although progressional, *is* possible for perpetrators of IPV, with the aid of restorative practices. I am aware, however, that just because I experienced a grave episode of IPV amid COVID-19 (because small but nonetheless unjust arguments existed prior to this in my relationship), that this is not necessarily the case for other women who have also experienced psychological abuse from their partners before or during COVID-19 or both and to a heightened extent, exemplifying the importance for further investigation into this topic. Using my own lived experience of IPV, I am curious about how education as a public facing institution, can serve as a preventative measure of IPV and bridge the gaps for psychosocial support for IPV victims.

Community-based adult education on IPV

Furthermore, since developing not only a personal connection to IPV, but understanding how important psychosocial supports are, I started collaborating with different Montréal women’s shelters and centers, including *Chez Doris*, *Auberge Transition*, the YWCA - *Y des Femmes Montréal*, and the West Island Women’s Center (WIWC). I have been involved with these organizations through volunteer work. I hosted a one-day beaded-bracelet making

workshop for the women at *Chez Doris*, a women's shelter for women experiencing homelessness, many of whom have been abused. At *Auberge Transition*, I tutor primary and secondary school students for their after-school homework for about two-three hours on a weekly basis (unless there is no need). These students are children of mothers who have been domestically abused by their former intimate partners and are now in transition from their abuser's home. The goal is to bear their grounds while at their shelter home, before being able to live on their own again. While they are occupied attending important appointments with lawyers, counsellors, etc., their children need educational support, especially since they have been pulled out of their original schools at first and spend some time absent from school before being integrated into a new school (unknown to their former household abuser). At the YWCA - *Y des Femmes Montréal*, I hosted weekly, one-hour jewelry-making workshops (creating earrings, bracelets, and necklaces), for the members of the center in the spring of 2023. Many of the women with whom I worked described the jewelry-making as therapeutic. I also hosted a fundraiser for *Objectif Zéro*, a campaign with the YWCA - *Y des Femmes Montréal*, in the summer of 2023, which was an initiative for reducing the occurrences of IPV against women to zero. Moreover, I have been informed by the staff at the YWCA - *Y des Femmes Montréal*, that 78% of their members are victims of IPV, which constitutes as most of their members. Because of my ongoing engagement and commitment, I have accepted an appointment as the programming director at the WIWC. My role here includes delegating other volunteers to contact instructors from previous courses/workshops hosted at the WIWC to come back for the upcoming fall, winter, and spring sessions, as well as prospecting new instructors myself, thinking of new courses/workshops that will interest the members of the center, attending board meetings with staff, and participating in the center's annual silent auction fundraiser among other

campaigns and special events. Although not all members of this center have been abused, a certain percentage of them have been. These women seemingly use the courses/workshops of the center to connect with other women, which gives them a sense of community and belonging as well as uplifts their spirits, which is something we can learn from about IPV and perhaps apply it in educational settings. I contend that these forms of therapeutic practices have not only allowed me to better understand IPV but have also helped make sense of my research findings.

Given how psychologically and socially impactful even one episode of IPV was on my overall well-being, and that this impact was exacerbated during the COVID-19 pandemic, on top of being exposed to many other women in shelters and centers through my volunteer work who have also experienced and been affected by IPV, and already putting effort into creating awareness, strategies and solutions for IPV through having conducted a workshop about this topic in an educational institution, my goal was clear. I explore IPV from the perspective of six Montréal women, in what is now described as the post-COVID-19 pandemic. In collecting data, I inquired not only about the psychosocial impacts such as stress, depression, suicidal ideation, low self-esteem, and anxiety, but I was also able to ask for the recommendations these women have for how educational programming might raise awareness and even prevent IPV. I believe the data I found in my research will enable educators to understand how the experiences of these abuse victims affected them both psychologically and socially at different times of their lives, and how the field of education can play a key role in diminishing the cases of IPV through offering relevant education, tools, and resources. Specifically, I recruited six women ($n = 6$) to interview of different ages and backgrounds, who were either abused by their intimate partners (especially psychologically), or who worked with clients who were abused by their intimate

partners (primarily psychologically among other forms). I will expand on my research questions in the coming sections.

Overview of the Thesis

In this opening chapter, I have situated the research questions and concerns related to my research topic. I describe my personal connection to the proposed study. I describe how my community-based outreach and engagement has been relevant to how I approach my research topic and analysis. In chapter two, rather than simply relate to my research topic of IPV awareness and prevention through relevant literature, I will also be analyzing relevant institutional policies, educational curricula, and I will be defining and understanding the historicity of feminism in Québec and Canada. In the third chapter, I outline my methodological approach. Specifically, I describe the research problematic and restate my research questions. I describe my research participants and locations, my data analysis techniques, and the ethical considerations related to this subject. In the fourth chapter, I bring into view the findings that emerged from my analysis. Specifically, I touched upon four themes. Chapter five is my discussion and conclusion. In the closing chapter, I connect my research findings with past research on IPV and offer implications for practice for educators, policymakers, and social workers. I also underscore the contributions that I have made in my research. Although it was never my purpose to bring together the fields of psychology, social work, education, and feminist theory, generative and fruitful conversations may result in having done so. Methodologically, while I did follow a conventional, qualitative, methodological design, it's important to note that my qualitative research was emerging, and as such, I inadvertently recruited new participants. Therefore, in thinking back on the core tenants of qualitative research, I encourage other researchers to always be flexible and open into following their data. By bringing social workers

and victims of IPV together, I unexpectedly created this conversation that needs to be ongoing and can be truly significant into transforming educational policy and practice. Finally, throughout my thesis, I will be threading my lived experience with IPV to make sense of surfacing literature and research findings.

Chapter Two: Literature Review

In this chapter, rather than simply reviewing relevant psychological, social, and educational literature, I have done the following: First, I begin by outlining how I came to feminism in an academic sense and situate feminism in Québec's unique context. Next, I engage with different definitions of IPV to have a more holistic comprehension of this phenomenon, including the effects of victims of specifically psychological IPV, as it relates to my own experience with IPV. In addition, I highlight the importance of implementing IPV education in schools through reviewing educational and institutional policy, specifically at Concordia University. Finally, I discuss these matters to note what is included in Québec sex education at the youth and adult levels, but more importantly, what is missing from it to know what potential solutions can help put an end to IPV against women in our society.

Defining Feminism: Its History, Evolution and Current Status

Firstly, it is worth mentioning that I take the same stance as the late, infamous scholar and activist in women's studies and education, bell hooks, on declaring that feminism does not equate to being anti-male: "Feminism is a movement to end sexism, sexist exploitation, and oppression" (Hooks, 2000, p. 2). Furthermore, feminism can be defined as a socio-political movement, that has manifested itself uniquely across diverse landscapes, with Québec, Canada, and around the world, providing distinct vantage points for its historical evolution (Feminism, 2023). In Québec,

the journey of feminism is closely linked to the social and cultural context of the province, showing changes in how women are regarded. An example of this progress is the fight for women's right to vote, which succeeded in 1940 when Québec women gained the right to vote in provincial elections (Cohen & Villeneuve, 2013). This accomplishment was a noteworthy step forward and reflected the larger movement for political acknowledgment. Simultaneously, the province experienced the transformative Quiet Revolution in the 1960s, where women actively participated in reshaping societal norms and institutions (Carlos, 2022). In Canada, federal feminism has been intertwined with legal milestones, such as the recognition of women as "persons" in 1929 (Feminism in Canada, 2023), and the establishment of the Royal Commission of Status of Women in Canada, in 1967 (Bird et al., 1970). This paved the way for women not only to cast their votes but also to seek public office, fostering a political sphere that is more inclusive of women's voices. Moreover, the journey of Canadian feminism extends to educational realms, with increasing access for women to pursue higher education becoming a focal point (Gaskell & McLaren, 1986). This was especially true after the Montreal Massacre that occurred on December 6, 1989, when gunman, Marc Lépine, murdered fourteen women, simply for their gender, at the University of *Polytechnique Montréal* (Lanthier, 2012), which then fired “a steady increase of women in engineering programs” (Bokma, 2019, para. 25). What’s more, the *Polytechnique* tragedy helped launch several movements to support the fight against violence perpetuated towards women, including the “White Ribbon Campaign”, an initiative that asks men to participate in the fight to terminate violence against women (Bokma, 2019), and December 6th being declared by Canadian parliament, a “National Day of Remembrance and Action on Violence Against Women” (Lanthier, 2012). Internationally, these local and national narratives contribute to a broader global discourse on women's rights,

emphasizing the interconnectedness of struggles for suffrage, political representation, and educational equality. Exploring these nuanced histories through the lenses of voting rights, political participation, and educational access unveils the multifaceted nature of feminism and its enduring impact on societies worldwide. Over the years, strides have been made in acknowledging and rectifying historical gender imbalances, promoting a more inclusive and equitable environment for women in Québec, Canada, and globally. However, despite these positive advancements, significant challenges persist on the path to gender equality. For example, gender pay gaps are still present in higher education, perpetuating economic disparities (Cummings, 2020). Instances of harassment towards women exist in workplaces, including notable cases in Hollywood (Brown & Battle, 2019), underscoring the urgent need for cultural and systemic shifts. Additionally, society continues to grapple with the pervasive issue of sexual harassment towards girls in schools (Weissbourd, 2018), and of IPV against women (Stöckl et al., 2021). We, as educators, need not look further than the ongoing Israel-Palestine war, which includes systemic gender and sexual-based violence in both nations (Balf, 2023).

In October of this year, the bombardments in Gaza “displaced nearly half a million Palestinian women and girls and left more than 18,000 people injured [...] of those killed and injured, 62% are women and children,” (Little, 2023). In addition, health services were inaccessible to about 50,000 pregnant women in Gaza with almost 6,000 who were expecting to give birth the following month (Little, 2023). Furthermore, while observing another country, the women of Iran have been suffering from patriarchal oppression for over forty years (since 1979) (Shannon, 2022). Their male-dominant government has forced them out of certain careers (e.g., becoming a judge or the president) (Boniadi, 2022), some academic programs (e.g., veterinary science or geology) (Shannon, 2022), and most of their marriage, divorce, child custody, and

freedom rights, including lowering the legal marriage age to thirteen (which was also nine at one point), motivating polygamy, revoking fifty percent of their valued inheritance when compared to men's (Boniadi, 2022), and not traveling inside or outside of their country unless accompanied or authorized by a male head of their household (Shannon, 2022). Moreover, the compulsory clothing attire such as wearing the chador (i.e., a head and upper body covering), was completely imposed on the women of Iran in 1983, (Shannon, 2022), and they became prohibited from “dancing or singing alone in public; riding a bicycle; and attending sporting games” (Boniadi, 2022). To this day, the women who do not abide by the strict dress code or who oppose the country's regime are subject to fines (Tajali, 2023), imprisonment, torture, sexual assault, and even murder, by Iran's morality police (Shannon, 2022). Despite these horrifying actualities, there has been a massive attempt to rewrite history for Iranian women, when the death of twenty-two-year-old, Mahsa Amini, a woman who was captured and killed by Iran's morality police for improper head covering, made headlines in September 2022 (Tajali, 2023). This sparked a women-led revolution. A political movement whose goal was for women of Iran to regain their rights, was activated and further enforced with the viral chant, “Women, Life, Freedom”, from protestors worldwide (Tajali, 2023). I include this because I find this particularly moving, not only in a global context, but in a local context as well. The importance of this event lies in the dark truth of women's severe injustices being present in our world and illuminating this reality to stimulate more local societal changes regarding women and abuse, making this women's activist movement something worth mentioning in our educational curricula on the topic of violence against women.

This section's social and gender inequalities highlight the complex and linked nature of the struggle for women's rights. Thus, while celebrating progress in women's rights, it is

imperative to recognize the existing gaps, and actively address the ongoing challenges to pave the way for a more just future. One way to contribute to this egalitarian future is to incorporate more knowledge about IPV against women in the sex education curricula of our province since this valuable information seems to be missing in Québec's sex education reform today (Ministère de l'Éducation et l'Enseignement Supérieur, 2019). Why this contribution would be significant within sex education is because relationships are a relatable topic of conversation. In fact, there is already some information available on relationships within Québec's sex education reform (Ministère de l'Éducation et l'Enseignement Supérieur, 2019, p. 15), and on sexual violence (Ministère de l'Éducation et l'Enseignement Supérieur, 2019, p. 17), but not on psychological and/or intimate partner violence. Before we delve deeper into this reform, it may be useful to first acknowledge what we do know about IPV so we can more accurately decipher what is missing in our provincial sex education curriculum.

Intimate Partner Violence (IPV): Collective Definitions, Global and Local Experiences

Intimate partner violence, abbreviated as IPV, encompasses a wide array of definitions; IPV is violence that can either be sexual, physical, verbal, psychological/emotional (Government of Canada, 2023), and even financial (Woehrer et al., 2023) or spiritual (Dehan & Levi, 2009). Moreover, IPV against women is a global affair, occurring in India (Indu et al., 2021); Italy (Di Franco et al., 2021); Lebanon (Akel et al., 2020); Tunisia (Sediri et al., 2020); Iran (Esfandiari, 2023); the United States (Chiaramonte et al., 2021); and Canada (Moffitt et al., 2020), and by no means is this an exhaustive list. There appears to be a strong correlation between increased alcohol consumption in men and abuse towards female partners (Akel et al., 2020; Indu et al., 2021; Sediri et al., 2020). It has also been highlighted that drinking alcohol is a coping mechanism for women being abused by their male partners which furthers them from reaching

help (Akel et al., 2020). In contrast, problematic social media use was found to be the most prevalent coping mechanism in female victims of IPV in Sediri et al.'s (2020) study. Moreover, Indu et al.'s (2021) cross-sectional research study discovered a relationship between men who commit domestic violence and men suffering from anxiety. In addition, while psychological and physical abuse were the most common types of abuse experienced in Akel et al.'s (2020) cross-sectional study, physical and sexual abuse were the most prevalent in Di Franco et al.'s (2021) quantitative, statistical analysis study, and psychological abuse in Sediri et al.'s (2020) online survey study. Furthermore, Chiamonte et al.'s (2021) ongoing longitudinal study, found that victims with children experienced more of every type of abuse as opposed to those who did not have dependents. The mentioned studies found that participants with a history of mental illness before COVID-19, and who were abused by their spouse during the COVID-19 lockdown, were more depressed, stressed, and anxious post-lockdown than other participants, in addition to suffering from lower self-esteem as per one study's findings (Akel et al., 2020). Also, women who were abused before the lockdown were more at risk of being abused during the lockdown (Sediri et al., 2020). In addition, Quebecers, and more specifically, Montrealers, have seen a rise in occurrences of IPV in both their province and city, since the pandemic (Giguère, 2022). Three medical students in Québec who asked more than 3,500 women in relationships to complete online questionnaires throughout COVID-19 found that "22.5% of women in relationships experienced some form of domestic violence in October 2021, with Montréal being the most affected region," (Giguère, 2022, p. 1). Furthermore, their research found that for every femicide (i.e., the killing of a woman or a girl) reported in the province, "more than 16,000 women experienced some form of domestic violence, including verbal and psychological abuse," (Giguère, 2022, p. 2). Often, psychological abuse is the type of abuse that is overlooked or that

as authors, Tarzia and Hagarty (2023), put it, is “severely neglected,” (p. 1301). For this reason, in addition to the fact that it is the type of IPV I have experienced, I am going to discuss psychological IPV in the next subsection, for which the reader can then hopefully extract the importance of including education on psychological IPV in the provincial sex education curriculum.

Defining Psychological IPV: Different Perspectives, Positionality, and Desired Changes in Sex Education Curricula

Psychological IPV can also be labeled as emotional abuse or coercive control (Tarzia & Hagarty, 2023). Authors Tarzia and Hagarty (2023) argue that most available literature on psychological IPV categorizes this solely as “verbal degradation” or “coercive tactics” (p. 1301), for the perpetrator to receive sex, whereas authors Rogers and Follingstad (2014), define psychological abuse as a means of, “coercion, control, verbal abuse, monitoring, isolation, threatening, jealousy, humiliation, manipulation, treating one as an inferior, creating a hostile environment, wounding a person regarding their sexuality and/or fidelity, withholding from a partner emotionally and/or physically, and by engaging in sadistic acts”, (p. 595) sexual or not, and Martínez-González et al. (2021) define psychological violence as: “several manifestations of isolation, distortion of reality, intimidation, emotional abuse, harassment, and humiliation,” (p. 1), notably in mothers. These control or manipulative tactics are susceptible to mothers as they have entered a new identity (i.e., motherhood), and are unable to fully care for their children because they are not well themselves, due to the abuse being done unto them, which shames them and further propels their feelings of fear, anxiety, low self-esteem and worth (Martínez-González et al., 2021). In addition to this, since their bodies have changed through motherhood, their abusers use this opportunity to body-shame their partners (Martínez-González et al., 2021).

Moreover, psychological violence against women was further aggravated during the COVID-19 pandemic, when male abusers held their female partners hostage, by using the threat of the virus to manipulate their victims into staying home while making them feel hopeless about their abuse situation (Moffitt et al., 2020). Since I am not a mother, I cannot exactly relate to the mothers experiencing IPV as described in Martínez-González et al. (2021)'s study. However, what I can relate to is a trend that I see among the four mentioned studies in this paragraph, which decodes the pattern of psychological abuse toward women, equalling various forms of control and manipulation, all as an attempt to reduce a woman's self-esteem or self-worth and contribute to their heart-wrenching feeling of incapability – the feeling of being stuck in a real-life nightmare of a situation and somehow feeling responsible for it too. Consequently, psychological abuse can have ample effects on a victim's mental health, with the most common outcome being post-traumatic stress disorder (PTSD); followed by depression; anxiety; and suicidality (Rogers & Follingstad, 2014). I can affirm that following one intense episode of IPV that I experienced (specifically verbal and emotional/psychological abuse that included profane language, loud name-calling, insults, control, manipulation, and a threat for me to leave my living space), I experienced all the following: depression, anxiety, suicidal ideation, and later, PTSD. Reflecting on this experience now begs the question: How could I have prevented myself from one day becoming a victim of IPV? Or how could my partner have prevented himself from one day becoming a perpetrator of IPV?

Taken together, this section of the literature review, while previous studies have found more quantitative, statistical data about male IPV abusers and female IPV victims in different parts of the world, before and during the COVID-19 pandemic, I am more concerned about why presently, post-pandemic, there isn't any educational awareness, prevention strategies or

solutions regarding IPV (including psychological IPV), in educational institutions in Montréal and Québec. My qualitative research seeks to speak with women about their IPV experiences so that these emotional and societal matters can be addressed as best as possible within our local, educational sector. By understanding what psychosocial support systems are needed and which resources are recommended by the local women survivors of IPV, necessary changes can be implemented into the educational curriculum in Québec. In the upcoming section, I move from discussing psychological IPV to topics mentioned in our provincial sex education reform and university reports of sexual misconduct to note what information is already available to students, and to gain clarity on what information needs to be added for students.

Sex Education: What is Included, What Is Not, and What Should We Do About This?

i. Québec Sex Education Reform

While Québec's Sex Education Reform and Montréal's Concordia University's Report and Policy on Sexual Misconduct represent progressive steps towards sexuality, relationships, and violence, they notably fall short in comprehensively tackling the nuances of IPV, especially psychological IPV. Prior to the curricula renewal in 2019 (Ministère de l'Éducation et l'Enseignement Supérieur), some of the most available information is from 2003 (Duquet). Let us begin first by unveiling the multi-faceted definition that the Reform gives to sexuality: "the product of a complex relationship involving personal experience, external influences, and social and moral circumstances," (Duquet, 2003, p. 9). Indeed, sexuality is anything but simple as Duquet (2003) argues that sexuality umbrellas several terms involved in the growth of someone deemed as sexual: "self-esteem; self-affirmation; friendship; love; body image; peer pressure; the development of critical thinking; respect for intimacy and modesty; sense of humour; empathy;

pleasure; knowledge of one's body; responsibility of one's sexual health; problem-solving competencies; and personal sensitivity," (p. 9). With this said, it is imperative to also not neglect the emotions regarding relationships. Because relationships are comprised of holding certain "values, feelings, or attitudes" (Duquet, 2003, p. 3), they can also include behaviours that impact the physical and psychological health and well-being of the other person (Duquet, 2003).

To further this point, the Reform includes a statistic stating the following:

Among 16-year-old girls who had been with a partner during the previous twelve months, approximately one girl in ten had experienced sexual violence; one in five, physical violence; and one in three, psychological violence. Among 16-year-old boys, four in one hundred had inflicted sexual behaviour; one in ten, physical violence; and one in five, psychological violence (Duquet, 2003, p. 10).

Although sexuality can at times be seen positively, it is clear from the above-mentioned statements that it can also take a dark turn, with psychological violence being the most common occurring violence seen in adolescent girls and with the highest prevalence of males perpetrating psychological violence towards females in comparison to other forms of violence, further urging the importance of the Reform to include a section dedicated solely for psychological violence. A suggestion the Reform document makes is that adult educators must teach sex education in such a way that leaves no room for ambiguity while considering the situation being discussed and the age of the student they are speaking with (child or adolescent), with the explanation that omitting certain pieces of information can misguide students into making quick assumptions, which in turn can be detrimental, and thus, are highly advised against (Duquet, 2003). In addition to this, a lack of proper knowledge about sex education can be a gateway for children being exposed to "forms of exploitation or abuse" (Duquet, 2003, p. 11), which again demands the importance of sex education knowledge. However, knowledge itself is not enough, for it is not only about the amount of information available to share with our students but more importantly, "the quality of

the educator's attitude" (Duquet, 2003, p.11) that matters. Furthermore, students seem to be more willing to listen to educators when discussing topics about sexuality such as, "body image, seductive allure, and sexual performance," (Duquet, 2003., p. 43), as opposed to more difficult subjects discussed, including "sexual harassment and aggression" (Duquet, 2003, p. 43). Perhaps the educators involved in the teaching of these topics are not exhibiting the correct attitudes for these heavier topics, which inevitably, has impacts on how the students receive and interpret the information they are being taught. Educators, support staff, and administrators – all school personnel – and parents alike, need to collectively, as a community, be committed to the psychosexual development of our youth, as this education will likely transcend into their young adulthood (Duquet, 2023). More specifically, educators should criticize the Reform for having very limited information about prevention strategies and solutions for psychological IPV for children aged 6-11 years old, under the categorized topic of "Emotional and Romantic Relationships" (Duquet, 2003, p. 29), and for adolescents aged 12-17 years old, under the same category, with the subtopic, "Sexual Violence" (Duquet, 2003, p. 29). Why is this crucial? Schools are not simply places where we learn, but they are "social environments" (Duquet, 2003, p. 34), which implies that we have social obligations as educators, other school personnel, and parents, for our social beings – our students, our youth. Therefore, the Québec Reform, though it introduces important topics (e.g., defining sexuality, self-esteem, the responsibility of one's sexual health, and emotions in relationships, to name a few), it seems to lack in-depth coverage and specific strategies for addressing the complex nature of psychological IPV. This omission is significant, considering the pervasive and often overlooked impact of psychological abuse in intimate relationships as we've covered in previous sections.

ii. Concordia University's Report on Sexual Misconduct and Policy Regarding Sexual Violence

Similarly, if we focus on IPV within an adult setting, Concordia University's report of "The Task Force on Sexual Misconduct and Sexual Violence" (2018), despite its focus on the higher education environment, appears to provide limited insight into how it addresses the varied and often covert manifestations of psychological IPV within a university setting or including university members. To further solidify this point, the report indicated in its findings that in the making of the report: "[...] the general lack of knowledge [...] of sexual misconduct and sexual violence was a common theme that emerged throughout the task force meetings and information gathering process (Concordia University, 2018, p. 4). It is crucial to remember that psychological violence is closely linked to or can be viewed as a subcomponent of sexual violence, and therefore, should be treated with just as much attention and care (Sexual Assault Resource Centre, 2023). Moreover, based on a survey that Concordia University members filled out for the institution's "Sexual Assault Resource Centre" (SARC), results indicated that they viewed the "availability and sufficiency of resources" as "low" and programs offered to help were evaluated as "insufficient" (Concordia University, 2018, p. 5), exemplifying the need for more support and services for the university's members, including effective communication (Concordia University, 2018, p. 7). To demonstrate further the lack of proper communication available to the members of the institution, "only 65% [of them] have heard about the SARC" (Concordia University, 2018, p. 17). Furthermore, an alarming "70%" of survivors of sexual violence among the members of Concordia University, "did not report the incident" (Concordia University, 2018, p. 16). The deficiency of reports made can be attributed to the lack of knowledge people have about

what actions to take, in the event of an incident occurring (Concordia University, 2018).

Nonetheless, it is important to recognize the efforts that have been made by the university's SARC, including creating mandatory online and in-person training on sexual violence that all members must complete, and offering counselling (listening) services and pre-made workshops about topics on "sexual and gender-based violence, consent, power dynamics, and culture", that can be used to train others (Sexual Assault Resource Centre, 2023).

Concordia University's "Policy Regarding Sexual Violence" (2022), categorizes sexual violence as either physical or psychological and can include sexual harassment, which may consist of "demeaning" or "derogatory gender-based jokes or comments" (Concordia University, 2022, p. 5). The Policy further adds that while anyone can become a victim of sexual violence, "it is overwhelmingly committed against women and gender non-conforming people" (Concordia University, 2022, p. 6), which is somewhat congruent with the findings previously discussed in the youth sector's Reform, that mentioned the elevated frequency of females being the victims of sexual, physical, and especially psychological violence. What's more, is that complaints made to Concordia University regarding sexual violence can take up to three months to be processed (Concordia University, 2022, p. 17), which seems far too long. The Policy's potential lack of detailed guidelines for recognizing, responding to, and preventing psychological abuse raises concerns about its efficacy.

Both initiatives, the provincial sex education Reform, and the university's Report and Policy on sexual misconduct and violence, while commendable in their intentions, underscore a critical gap in educational policies: the need for more detailed, nuanced approaches that specifically address all forms of IPV, including the often-insidious nature of psychological abuse. This highlights the necessity for ongoing development and refinement in both the Reform and

the university's Report and Policy on sexual misconduct and violence, to effectively combat the multifaceted challenge of IPV.

iii. School-Based IPV Prevention Programs and Educational Tools

Moreover, there is some existing evidence (with a rating of five out of six), that school-based IPV prevention programs can work in making a societal difference. According to a County Health Rankings & Roadmaps (2023) article, installing these programs in schools is expected to lead to “increased knowledge of IPV” and “reduced IPV”, (p. 1), which is a step in the right direction. Another article from the American Psychological Association (2023) discusses other important factors to consider, such as implementing the “Fourth R” program in more schools; a program aimed at promoting healthy relationships and centralizing its knowledge on “dating violence, bullying, peer violence, and group violence” (Government of Canada, 2023, p. 1). Moreover, Dayal's (2023) article discusses the stories of two Saskatchewan educators: a teacher (i.e., Crystal McLean), who experienced various forms of abuse from her former intimate partner (p. 2), and a sex education teacher with over 10 years of experience teaching the curricula (p. 9), as well as the story of an IPV female survivor (i.e., Brenda Ottenbreit) in Saskatchewan (p.11). One thing stands the same across all three perspectives: they recognize the desperation of changes needed to be made in the sex educational curricula in Canada. Furthermore, they argue that the only way to achieve these changes and ensure they are impactful is to make them a part of the core curriculum – a mandated curriculum (Dayal, 2023). In other words, by forcing educators to teach IPV material, a larger audience of students will be exposed to more IPV awareness, prevention strategies for all, and solutions for IPV victims. Ottenbreit from Dayal's (2023) article, who was a victim of IPV and coercive control in her former relationship, confidently states: “Better education would be an immediate step to combat domestic abuse,”

(Dayal, 2023, p. 11). Furthermore, McLean, who was a victim of physical, mental, emotional, and sexual abuse (p. 2), emphasizes the need to “educate and empower about the first signs of domestic violence” (Dayal, 2023, p. 3), by beginning this phenomenon in the youth sector and teaching them “healthy boundaries and relationships, about self-worth, self-love, and self-respect” (Dayal, 2023, p. 3), so that they are better equipped for the dating world as they grow up. Educators need to understand the weighted value and credibility that originates from survivors of IPV, like Ottenbreit and McLean, to help change the educational curricula that will result in a significant shift in the prevalence of IPV, notably against women. The American Psychological Association further urges the cruciality of these prevention programs being put in place, when they mention that perpetrators of IPV have commonly expressed their deep regret to their psychologists, for not having learned more about IPV in school (2023). To add to this, Morrison et al. (2018) conducted a two-year ethnographic study in the United States on adult men ($n = 49$) who had been found guilty of IPV perpetration, and who were asked to share their perspectives on what they believed could help prevent young boys at risk of future IPV perpetration towards women. The results of this American study highlighted five themes for transformative learning: “1) messages about healthy relationship behaviours; 2) the need to promote respect for women; 3) teaching effective skills for communicating and managing anger; 4) programs that provide role models and are school-based; and 5) addressing the impact of experiencing violence as a child” (Morrison et al., 2018, p. 179). By implementing these same themes into Québec and Canada IPV prevention programs, perhaps a decline in the occurrence of IPV would become visible in our nation, as opposed to the opposite. According to Statistics Canada (2022), 2021 was the seventh year in a row of a continued increase in IPV in Canada (p. 1). More experimenting was done on IPV in a Latin American, qualitative, community-based,

and participatory research study, where the authors analyzed storytelling through creative writing and discovered that this method can help in practicing behavioural social change in IPV through transformative learning (Singleton et al., 2016). This is achieved because writing is a form of expression, allowing one to share their lived experiences in a creative way, which also gives the writer the ability to critically reflect on what they are sharing, and learn from their writing (Singleton et al., 2016). Another study (Dill-Shackleford et al., 2015) found that by using live theater, where audiences watching a play about abusive relationships with a particular focus on psychological abuse (which is a detrimental social and health issue as before-mentioned), can help educate the public about IPV and more readily disregard myths about IPV. Therefore, this study's findings suggest that live theater can also be a method to induce social change regarding IPV (Dill-Shackleford et al., 2015).

Conclusion

The literature review revealed that women have evolved immensely since the era of not being able to vote, enter politics or seek higher education. However, what must also be recognized is the present need for improvement in gender equality in our society (simply by viewing the treatment of women in present-day worldly events), which can begin with education. Educators have learned that IPV — abuse that takes many forms and is highly psychological — is a widely prevalent issue, globally, but more relevantly, in our province of Québec, and especially towards women and girls. IPV has become such a significant societal issue, but also educational, in that, our educational institutions lack the necessary IPV school-prevention programs to properly combat the existing IPV crisis. Although some research studies from other parts of the world have experimented with different attempts to incorporate an IPV school-prevention program (e.g., creative writing or theatre), that seem promising, further research is needed to

assess whether this would be as impactful here (in Québec). What seems to be most useful for Quebeckers, is what Dayal's (2023) study suggested (given it being a Canadian study), by making an IPV-prevention school program a part of the mandatory core curriculum in schools. Also, including a male-centered approach to an IPV-prevention school program, such as what was examined in Morrison et al.'s (2018) study, and was recommended by listening to the perspectives of the convicted, male perpetrators of IPV, can be another plausible solution to IPV. In addition, due to the alarming statistics of psychological IPV towards women in the province, it is argued that the Québec Sex Education Reform should be modified with a section solely dedicated to psychological abuse and IPV, including as much information that can presently be derived from the subject. The same applies to Concordia University's Report on Sexual Misconduct and Policy on Sexual Violence. It is important to note that while implementing these changes in educational curricula aims to be impactful, in both the youth sector schools of Québec and at the adult level of Concordia University, it may be far-fetched to assume that it would fully break the cycle of violence towards women and girls in our whole society. Furthermore, it is arguable that these changes would need to be introduced to every single school, at the elementary, high school, college, and university levels, in both the French and English sectors, and equally the private and public sectors, to expose the education to as large of an audience as possible, to then in turn, achieve a noticeable difference in occurrences of local IPV cases.

Chapter Three: Methodology

In this chapter, I describe my methodology; the research problem surrounding my topic about IPV against women, and thus, my research questions regarding both IPV against women and education; the location(s) where my research study was conducted; the research period of my study; who my research participants were, as well as how and why I chose them; how I accessed

the different locations and platforms where my study was conducted; the ethical considerations for my research study and participants; the methods I employed in my research study including interviews and thematic analysis; a brief overview of my data analysis; and my concluding thoughts about my research study. While I had initially framed my research only around victims of IPV, my research became malleable and emergent – as valuable qualitative research tends to be – further prompting conversations with social workers. This added a different dimension to my study, and as such, I had to react as a researcher. Rather than simply describing my methodological approach and my methods of data collection and analysis, I will also be telling the story of my research here. As stated in chapter one, I have been involved in community-based engagement around IPV in different community-based contexts, and this also permitted me to enter different locations and speak with different people.

Methodology

Because I wanted to gather insights about IPV, I employed a qualitative methodology to my study, which is a non-statistical and more subjective type of study, seeking to uncover a deeper understanding of trends and reasons behind certain phenomena, typically through means of observations or interviews, and with a relatively small sample size (Creswell, 2013). This methodology is a practical approach to gathering people's insights on a particular subject (Creswell, 2013). It is ideal for the topic of inquiry that I proposed because many women experience IPV, but their personal experiences and perceptions can differ, as well as what is recounted by those who work with women victims of IPV (e.g., clinicians across Montréal who work in an educational context), which are worth analyzing further to later apply them to educational practice. By directly and indirectly getting to know people's individual experiences

of IPV, I developed a deeper and more contextual understanding of this psychological and societal issue that can help inform educational practice for IPV awareness and prevention.

Research Problematic and Research Questions

While my literature review findings provide a deeper understanding of IPV, as an educator, I am interested in better understanding if and how education can play a role in raising awareness in the prevention of IPV – a topic that lacks qualitative research, hence the purpose of conducting my study. The main research questions of my study are as follows:

- 1) According to victims of IPV, what role can education and curricula play in terms of prevention, if any?
- 2) What educational insights would victims of IPV like to see offered in education programs and society, more broadly?
- 3) What recommendations, resources, or supports do women who have experienced IPV need to have their psychosocial needs (such as the recognition and management of stress, anxiety, depression, social disruption, and limitations of daily routines), adequately met?

For these questions to be addressed, I needed to meet with my participants: Montréal women survivors of IPV as well as social workers servicing victims of IPV in Montréal.

Research Period and Location

My data collection took place over a two-and-a-half-week period, between the dates of January 23, 2024, and February 9, 2024. Within this time frame, I interviewed six (n = 6) women on six different days: January 23, 24, and 29, and February 2, 5 and 9, 2024. My research study occurred where my participants were most comfortable and/or where was most convenient for them. The locations included: a private study room in the education building of Concordia

University for my first participant; the participant's home for my second participant; an online Microsoft Teams meeting for my third, fourth, and fifth participants; and a private study room in a Montréal library for my sixth participant.

Methods

For my method of collecting data, I conducted interviews with willing participants who were interested in discussing their lived experiences of IPV or their experiences working with clients who are victims of IPV (for the participants who were social workers or managing a center offering social services). The idea was that interviews would help me gain more insight into people's individual stories and enable me to connect with them in a way that I would not have been able to via a survey or quantitative research. I interviewed six Montréal women ($n = 6$) of different ages and backgrounds. In the locations where the interviews occurred, maximum comfort and privacy during the interview process were ensured. The participants were the ones themselves who decided on a location that was most convenient and comfortable for them. Since I received ethical approval from Concordia University's Research Ethics Board (REB) to conduct my research study in December, right before the Christmas holidays, my interviews took place only after the break, in the following month (as of January), and based on my participants' availabilities. I prepared six questions for my interviews. Sometimes, more questions were added on the spot during my interviews, as my conversations with my interviewees unfolded and took a natural course. I anticipated my interviews to be between 45 minutes to 1 hour long each, and this is what was mentioned to the participants when asking participants for their informed consent to participate in my study. However, my interviews were 54 minutes and 44 seconds; 63 minutes and 50 seconds; 22 minutes and 40 seconds; 35 minutes and 40 seconds; 54 minutes and 52 seconds; and 86 minutes and 19 seconds in length, respectively. The lengths of my interviews

were mostly different from each other and at times, longer or less long than the anticipated duration.

By using a standard interview protocol (see *Interview Questions*), I was able to create new questions for my participants during our interviews. From asking my planned and unplanned questions to my participants, I was able to gain clearer insights on how sex education can play a role in the awareness and prevention of, and solution to, IPV, through the perspectives of women who have lived IPV experiences or have clients who have lived them. My research findings provided me with the opportunity to unveil patterns that came across in my different interviews. I was able to achieve these observations by re-listening to the audio recordings of my interviews several times each and more efficiently, by transcribing the interviews and coding patterns.

Interview Questions

The following were some of my planned interview questions:

1. *What measures did you (or your clients) take to help yourself (or themselves) psychologically and socially, during or following your (their) IPV experience(s)?*
2. *What resources and tools do you suggest are missing in our schools and society to meet the psychological and social needs of women victims of IPV more adequately?*
3. *What role can education and curricula play in terms of the prevention of IPV against women, if any?*

Of some of the interview questions that were not pre-determined, I asked the following:

1. *How does your place of work (for participants working as social workers/in social services), apply transformative or restorative justice for perpetrators of IPV?*
2. *At what age, do you think, is appropriate, to start implementing sex education curricula in educational institutions in Québec, regarding IPV awareness and prevention?*
3. *How should sex education be taught in a person's academic life (e.g., through a workshop, an extra-curricular course, or a core course)?*

Research Participants

Following Gregory and Williamson (2021), who recruited research participants from their network for their qualitative study on domestic abuse, I partially initiated the same approach, to mitigate risks. Because I have been speaking openly about IPV for several years as it has been a concern of mine as a friend and family member, and wanting to do more good than harm, I initially wanted to interview only those with whom I already have a relationship. Therefore, in the fall of 2022, when I was thinking of my research proposal and contemplating who I could potentially interview for my study in the future, I thought of interviewing only four women with whom I had a personal relationship and whom I knew had all experienced psychological IPV (and in some cases, other forms of IPV as well). These women included a family member; a friend from high school; a childhood friend's mother; and my former teacher's daughter. Considering my family member, she is someone with whom I've shared a close relationship my whole life. She had been in a formerly abusive marriage and revealed it to me because we were close. So, when she found out about my study, she mentioned it was important to spread more awareness and resources for IPV and that she would be happy to participate in it. For confidentiality, I will refer to this family member of mine as Christine.

Also, my childhood friend's mother, whom I have known all my life and therefore, whom I know much about, was in a psychologically abusive relationship with a man from her past to whom she was engaged. Because she knew of my academic studies and career interests in 2022, she spoke to me in depth about her experience with this man and expressed she would be potentially interested in helping with my future studies and to circle back with her when the time would come. After receiving ethics approval to research human participants more recently, I contacted her and at this point, she had become unsure if she would be able to commit to my

study. She was working more hours at her job and being occupied with that; she was less responsive and not as reliable. While also never wanting to harass her, I decided to let go of the idea of her becoming one of my participants. In addition, I aimed my efforts at finding somebody else in my network to speak with about IPV.

Coincidentally, in the spring of 2023, I had thought of another woman to interview, whom I had met a few months before at a mutual friend's party, became friends with, and developed an open, honest, and trusting relationship with. I had spoken to this woman about my thesis study and interests at one of our hangouts, at which point she expressed to me her personal story of being groomed by a much older man when she was younger. Grooming, by definition, is "when someone builds a relationship, trust, and emotional connection with a child or young person so they can manipulate, exploit, and abuse them" (NSPCC, 2024). She claimed that this man was somebody that she thought loved her or cared for her at some point when they were intimately together, but it took her a long while to realize the harsh reality that she had been repetitively psychologically and sexually abused and exploited by this man. Wanting to be a voice for other young vulnerable women who found themselves in the same or similar situations, she said she would be interested to help be a part of my study. In January of 2023, I reached out to this woman to ask her if she was still interested in potentially participating in my study, at which point she was dealing with a lawsuit against her former abuser, which she found too overwhelming already, and not wanting to add more on her plate, she politely declined. At this point, I only had two potential women still in mind who continued to show an interest in partaking in my study: Christine, whom I discussed in a previous paragraph, and my former teacher's daughter.

Although short-lived (two semesters long to be precise), my former nursing studies in 2020 are what led me to a teacher with whom I developed a close rapport. In addition, I was a serious and studious student in nursing school, which may or may not have favoured the way this teacher viewed me. Undoubtedly though, as my clinical teacher as well, she appreciated my approach to treating and caring for patients – mentally and physically. This I know, through the feedback I had received from her back then when she was evaluating my work – I guess so much so, that after I had quit nursing, this teacher reached out to me. She asked me if I would ever be willing to speak to her daughter who at the time was having relationship troubles with her partner. I agreed to speak with her. The teacher gave me and her daughter each other's contact information. We started exchanging text messages, conversations grew longer and more frequent at times, and I suppose you could say, from then on, a mini friendship was born. When thinking of who else I could interview for my study, my former nursing teacher's daughter came to mind. After contacting her to see if she would be interested, she agreed and became one of my research participants. For the protection of her identity, I will be referring to her as Francesca. So, Francesca and Christine became my two sure research participants, which was positive for me, but not enough for me to obtain a substantial amount of data to be able to draw patterns on various individuals having undergone similar experiences. This is when my volunteer experiences became crucial.

Since 2022, I have been volunteering in different women's centers and/or shelters catering to women victims of IPV or women in general, as mentioned in my introduction. At one of these women's locations, I worked alongside one woman very closely, as our roles were a part of the same department. Through time, she began to know more about me, including my

educational studies, and mentioned she found my research on IPV very important, followed by her unveiling to me her former psychologically, physically, financially, and spiritually abusive marriage in the Middle East, before coming to Canada. She mentioned if her story could help in my study, to reduce violence against women, she would be willing to participate in it, and she did. I will refer to this woman as Rania. Although Rania would become my third research participant who had formerly been a victim of IPV, I felt I could make use of data from a different perspective as well – that of people who work with victims of IPV.

Luckily, I had met someone in one of my former classes during my master's studies, who worked in an environment dealing with victims of abuse. My current thesis supervisor, who is also supervising this person's research, suggested we link up. Since this individual is not a social worker, but rather a project coordinator at a sexual assault crisis center in Montréal, after speaking with her, she offered to connect me with a few social workers of a sexual assault referral center also in Montréal, whom she knew. She figured they may be more suitable candidates to speak with and gather more data from for my study, to which I agreed. After I was cc'd in an email to each of them, I was able to connect with these women separately. I met all three women, initially to discuss my study. All initial meetings resulted in these women showing great enthusiasm to participate in my study. Therefore, our subsequent meetings were me conducting the interviews for my study. The three social workers will be named Monique, Natasha, and Stacy.

Monique previously worked in a domestic violence clinic for women and children and is presently working with clients who are or who have or have known people who are or have been primarily sexually abused, but abused in other ways too (e.g., psychologically). She mentioned to me in our interview that she would answer my questions based on both of her working

experiences with victims of abuse. Natasha, on the other hand, answered my questions based on her present working environment, as a clinician (i.e., as a social worker), in a sexual assault referral center. In addition, Stacy answered my research questions as both a licensed clinician but as well as someone who oversees the operations of a clinic that manages services for victims of abuse. This offered insight from a professional as well as organizational standpoint, especially in relation to missing resources.

Speaking with Monique, Natasha, and Stacy was interesting for me; since I had only interviewed actual survivors of IPV before, by interviewing individuals who work with victims of IPV, I was offered a different perspective for my study. Many points that the social workers were making (e.g., the ways in which victims of abuse respond to their abuse), were very similar to what my research participants who were victims of IPV were saying about themselves. This validated to me that what the social workers shared about their experiences with client victims of IPV was congruent with what my survivor participants disclosed to me in our interviews. The interviews took place in different areas.

Research Locations

To reserve the private study room on campus for my first participant, I had to email the education department of Concordia University in advance, present myself to the campus' security on the day of my study 15 minutes before the start of my reserved time for the study room, and have the security unlock the study room for me and my participant. Our room was reserved for one hour. To access my second participant's home, I needed to be buzzed into her condominium building, followed by her opening the door for me to her condo. For my third, fourth, and fifth participants, since these studies were all done online, I needed to ensure that my home office was available for me alone, that I had a stable Wi-Fi connection, and that I was able to send a

Microsoft Teams (Teams) meeting link to each of these participants on different days and times so the meetings wouldn't conflict with each other. Of course, these three participants needed access to the same things on their end (i.e., a quiet and secure environment, a good Wi-Fi connection, and access to the Teams meeting link). Lastly, for my sixth and final participant, I gained access to her local library's private study room, because she is a resident of the city district where our meeting took place, and thus, she had a library card for that specific library that allowed us to have access to the private study room. Our room was reserved for two hours. In all cases, I needed to ensure I had my cell phone on me and that it was charged enough, to either pay attention to the time (for reserved private rooms within a specific time frame and/or to respect my participant's time), as well as to access the voice recording application on my cell phone that would allow me to audio record my interviews with participants (as will be mentioned in the methods section).

Ethical Considerations

Having experienced IPV myself, wanting to connect with other women who have gone through IPV or who know women and work with women who have undergone IPV, and to find commonalities with and solutions to this problem, I am accountable to women victims of IPV and women who help other women victims of IPV who I interviewed, as well as to women who could be benefiting from an educational curriculum involving IPV awareness and prevention measures. As a researcher, I intend to create as much awareness as possible about this major and prevalent issue by conducting this study, with the hopes that this will catapult the process of available education and funding possibilities, resources, and tools for these women whom I very proudly stand up for.

I completed the *TCPS 2: CORE-2022* (a course on research ethics), so I understand what is considered ethical from a research perspective. I applied to and was accepted by Concordia University's REB to conduct my study. I ensured that I was following all the REB-required ethical procedures and protocols in my research. I began by contacting my prospective participants through my institutionalized email address with Concordia University. After receiving an email back from my prospective participants who expressed their interest in participating in my study, I sent them an informed consent form that I asked them to return to me signed and dated to demonstrate they have read all the details of my proposed study, are aware of all expectations, and agree to participating in my study. This was also the point at which I established by email a date, time, and location that was most practical for them for our interview. Following our interview, I would give myself a couple of days to a week before contacting each participant again by email, to follow up with them, ask them how they are doing, what they thought of the interview, what suggestions they may have for me if any, and to provide them with sources I thought would be useful for them or someone they know who has experienced IPV and is suffering psychologically from the abuse. I believe this follow-up email was useful and comforting for my participants. Most of them thanked me by email; some even took the liberty to text or call me to do the same, since they had access to my cellphone number. During these exchanged phone texts or calls, some participants mentioned points they had forgotten to make during their interview that they felt may be useful for me. One participant also expressed a little discomfort a few days following our interview; she said it elicited some negative emotions from her former marriage. I proceeded by spending about an hour talking to her over the phone. By the end, she said she was grateful for the interview because she realized she still had some

healing to do from her past. Over the phone, she also mentioned that our interview gave her the motivation to reach out to her therapist (who she had already stopped seeing), to work through her existing trauma, thinking that it would be useful for her. I checked up with her by text message about ten days after this phone conversation, to ask her how she was doing and if she had ever called up her therapist following our last phone conversation, to which she replied that she was in therapy again and that it was going okay so far. Lastly, because I interviewed some individuals from a sexual assault resource center at a local university, those reading this thesis may be able to identify some of these interviewees, which is why I keep the name of the university confidential in my thesis.

Data Analysis

After I conducted my interviews, I transcribed and analyzed each interview, with each interviewee's permission given in written and signed and/or verbal consent on my audio recordings. I accomplished this by first listening slowly to each voice recording I had on my iPhone for every interview I conducted. I simply listened to my six interviews a minimum of five times each before I began transcribing. After this, I felt more confident in beginning my transcriptions. While I was listening to most of the recordings for the sixth or seventh time, I typed everything I heard from my recordings onto a Microsoft Word document on my laptop. This process was done in private, while I was alone in my office, and with my earphones on, to ensure confidentiality. I then proceeded to read all the transcripts of my interviews and analyzed them through a process called, "thematic analysis" (Sundler et al., 2019). Thematic analysis is commonly used in qualitative research to draw out meaningful themes or patterns from data that was collected for a study (Sundler et al., 2019). Given that my research study is a qualitative one, and that I aim to see if there are commonalities between my interviewees' stories to find

plausible solutions for IPV against women and how this can be addressed educationally, it was most appropriate to use thematic analysis as well as coding as ways to analyze my data in response to my research questions. Coding is achieved by assigning a detailed classification that enables a researcher to pinpoint any related information to this classification within their gathered data (Illinois Library, 2024). To help me code, after the data from all my interviews was fully transcribed onto one Microsoft Word document, I used the ‘CTRL (CONTROL) F’ function on my keyboard, to further assist me in finding repeated words and discovering any missed patterns. Through thematic analysis and coding, there were several themes found in my interviewees' words, but four common themes emerged that stuck out to me: 1) Justice; 2) Trust; 3) Resources; and 4) Curricula, which I will describe in depth in the findings and analysis chapter.

Conclusion

By speaking with women victims of IPV as well as with women who work in professions dealing with women victims of IPV, it was made clear to me that women are so often victims in situations, and IPV experiences are no exception to that. Through my study, I was able to learn in an educational context, about what had been useful or what would have been useful that was missing, for these women victims to get through their lived experiences with IPV. The goal of my research was to draw out the psychosocial details regarding IPV against women which can: 1) result in more efficient awareness initiatives and prevention measures of IPV against women that would be accessible in educational institutions, 2) help women in need receive aid following their abuse victimization, and 3) help male perpetrators of IPV against women receive appropriate treatment for their abusive actions. These psychosocial details were the four highlighted themes revealed in the data analysis section of this chapter: 1) Justice; 2) Trust; 3)

Resources; and 4) Curricula. These themes were generated by doing something that had not been conducted before in the context of educational studies; by inadvertently bringing together in conversation, social workers, and victims of IPV, my survivor participants' testimonies were validated by my social worker participants who shared testimonies of their clients who are also victims of IPV. Because of this congruence, I believe my research findings are a reliable foundation for building up the sex educational curricula of our province. In the following chapter, I describe more deeply the analyses of my research data.

Chapter Four: Findings and Analysis

In this section, I will be delving deeper into the details of my research findings by discussing the information that I gathered across my six interviews, some of the narratives of my interviewees, and how this revealing of data helped me to gain educational insights and realize at least a few common occurring themes in all interviews. As mentioned in the previous chapter of my thesis, I spoke with both victims of IPV and social workers whose labour occurs at an educational institution. For the purpose of this master's study, I will only be discussing four of the many themes from my data analysis (specifically justice, trust, resources, and curricula), and how these four themes emerged from a repetition of the same or related words, which I refer to as codes. This chapter is subdivided by each of the four themes previously mentioned, including excerpts (narratives) from my interviews intertwined with a thorough analysis of the gathered interview information concerning the topic of IPV against women victims, followed by a summary of the data found in the analysis and how it ties in with IPV sex education.

Justice

It was evident from my interviews that my participants who were victims of IPV were primarily in favour of retributive justice: the ideology that perpetrators of certain crimes (in this case violence), deserve to receive a significant punishment or suffering for their wrongdoings (Stanford Encyclopedia of Philosophy, 2020). Through my observations of my participants' words, this favoritism toward retributive or punitive justice regarding their perpetrators of abuse was due to a lack of justice served to them; a lack of acknowledgment of the violence committed against them; and/or a lack of judicial action taken that would prevent their perpetrator or any perpetrator of violence for that matter, from repeating their abuse onto others. What is more, something to highlight is the risk of femicides (i.e., the killing of women), which is significantly more common than the risk of men's IPV homicides (Decker et al., 2022), and is an expressed concern of some of my interviewees, further demonstrating the cruciality of proper justice being served for violence against women. The following excerpt from Christine discusses the need for reinforced justice for IPV perpetrators, especially considering the presence of femicides:

Christine: It's what is it called, femicide (when they kill the women), yeah? [...] Usually, when it's a death, it's often times the partner that kills the woman. Okay, so, it's not only education – society as a whole has to change somehow.

Similarly to Christine, social worker, Stacy, rings the alarm bell on the femicide problematic seen locally, alluding to the fact that this is a phenomenon that needs to be more properly addressed:

Stacy: This is something that's happening [...] in Montréal, [...] everywhere, but it's happening in Montréal. It's happening all the time. Women are getting killed by their partners. [...] It's common and it has devastating consequences for people.

Below, Francesca adds to the concern of numerous IPV perpetrators and expresses how our justice system should be of more assistance regarding this issue:

Francesca: *I really think they [the perpetrators of violence] should be prosecuted because there's a lot of them. And these people, they go to their day job, they have their house, they do what they want and they get away with it [...] [the] government has power and [the] police have power to arrest him.*

Above, Francesca speaks of the government and police having authority to act more with IPV perpetrators. Similarly to Francesca, Christine recognizes the need for restorative justice for IPV perpetrators, such as therapeutic practices, with combined efforts of educational policy and society playing a crucial role in the diminishing of IPV occurrences, as demonstrated below:

Christine: *What do they do to this man aside from locking him up? [...] He needs to be treated also, right? What does he get? Therapy? [...] It seems effective [...] if the punishment is more severe then maybe they wouldn't be that [abusive] [...] I mean, the anger management courses are wonderful, but not everyone will take them (and then it doesn't work for everybody), but to know that they're there, I mean that's already a big plus.*

In the above passage, Christine speaks of restorative justice, but also retributive justice, since she believes a harsher sentence for IPV perpetrators would prevent them from repeating their abusive behaviour. One person who could have benefited from her abusive ex-husband receiving retributive justice for his actions, is my interviewee, Rania, who below discloses her personal experience of how the Canadian justice system did not seem to help her with when she needed it most:

Rania: *And this [is] just in the justice of Canada, [where] no one helped me. No one followed up after him. No one locked him [up] in Canada [or] to pay [for] all this stuff. I'm paying all the bills of the house. [...] But no one called him. He just disappeared with the money he took from the house [...] and we don't know where is he. [...] They [the lawyer] don't follow up. They don't feel like you are a victim, and [as though] they have to protect you, psychologically, I can say, or [for your] mental health. They don't care.*

Naturally, all three survivor participants (Christine, Francesca, and Rania) were deeply and negatively affected by their abuse experiences, and, therefore, described a need for the

perpetrators of their abuse to receive a more severe punishment in hopes that this will instill in them, a will to not repeat their violent behaviour – no matter the form of that violence. In one instance, former victim interviewee, Christine, questioned and seemingly proposed that therapy or education be given to the male perpetrators of violence at the same time as receiving a more severe sentence for their acts of violence, with the argument that convicting abusers won't prevent them from re-committing abuse after being released from prison, unless that sentence is coupled with a structured treatment plan, such as obtaining psychological aid or attending an anger management course (and at least knowing this is an option that exists). I believe that Christine makes a firm argument that perpetrators of violence are in grave need of therapy or psychological assistance; while reflecting on the Polytechnique school shooting mentioned in the literature review section of this thesis, it's important to note that the gunman of this mass murder, had a history of being abused by his father when he was young, who in addition, abused his mother, and displayed a scornful attitude towards women (Marc Lépine, 2024). As well, this was not the only case of a mass shooting in Canada caused by a male perpetrator who had also experienced family violence. On April 18-19, 2020, Gabriel Wortman, a man who was abused by his father (who also abused his mother), took twenty-two innocent lives in Nova Scotia (2020 Nova Scotia Attacks, 2024). Moreover, Wortman physically attacked his common-law partner, Lisa Banfield, his first victim on the day of his shooting spree, whom he had domestically abused over the course of their nineteen-year relationship (MacIvor, 2023). The stories of Lépine and Wortman drastically intensify the need for education about abuse and justice for the victims. In addition, the survivors criticized the justice system in Canada regarding their lack of taking necessary disciplinary action toward perpetrators of IPV and in essence, calling their efforts futile. This feeling of injustice correlates with findings from an American article which revealed

that victims of IPV who don't report their abuse experiences do so because of "system mistrust, perception of futility, and entrenched racial disparities in the justice system" (Decker et al., 2022, p. 2846). These findings exemplify what former victim interviewee, Rania, experienced when describing how nobody here in our judicial system truly helped her. These experiences could allude to some of the reasons why my interviewees who were victims of IPV mainly preferred a retributive approach in comparison to other approaches for perpetrators of IPV. On the contrary, my interviewees who were clinicians (a term interchangeably used with social workers), for victims of abuse, were much less enthusiastic about the idea of retributive or punitive justice. They held the belief that this type of justice or punishment is not what solves the issue of perpetrators committing abuse, and thus, these social workers were more open to a justice approach that is transformative or restorative for perpetrators of violence, if they were to be implemented properly. To put these justice approaches into more context, The Sexual Assault Centre of Edmonton website (2024) describes transformative justice as "a political framework and approach for responding to violence, harm, and abuse", by "responding to violence without creating more violence and/or engaging in harm reduction to lessen the violence" and restorative justice can be defined as a potential solution to ending violence by concentrating on fixing harm when wrongdoing or injustice takes place within a population, and often "involves the victim, the offender, their social networks, justice agencies, and the community." With that said, restorative justice can be perceived as a holistic effort to end violence. The following quotations are parts of my interviews with clinicians showing an affinity toward transformative or restorative justice approaches for perpetrators of violence or at the minimum, making them optional:

Stacy: I do see the value in having that as an option. I don't know that it would be the right offer for everyone. But I think the more options the better. [...] I think there's a lot of sensitivities to consider, but, yeah, it's good to have options.

Monique: *I think that would be helpful, especially with the idea that the police could be incredibly scary for young adults, for teenagers. [...] As well, that might be more trauma-informed too. Because going to court, standing in front of a judge, going through that whole judicial procedure, it's not trauma-informed and it's not really survivor-centered. So, I think those other options might fit their journey of healing and empowerment, [which] they might need more.*

Natasha: *I love transformative justice and I love restorative justice because if our goal is actually to help people who caused harm, really understand the harm that they've caused and not perpetuated...moving forward, shaming and blaming, and you know, locking people up in jail, I don't think gives them that opportunity to really reflect in a safe way and to be able to understand the impacts that their behaviour has caused on someone else. [...] I really hope we're given the opportunity to feel like it's centered on their experience and their needs.*

The above-mentioned excerpts validate, even from social workers' points of view, and experience with their clients, that victims of violence do have mistrust in the judicial system, sometimes out of fear concerning how badly the prosecutor will treat their perpetrator of violence if the perpetrator is someone who the victim still cares for, such as an ongoing partner, and the fact that the government typically maintains a non-personalized approach when it comes to helping people in need. Moreover, some clinicians observed how some victims may minimize or dismiss their abuse experience(s) as part of a process called "internalized victim-blaming", where survivors blame themselves for the abuse they endured, for reasons that could include "manipulation and gaslighting from partners; [others] victim-blaming [them]; toxic self-criticism; poor self-care; and chronic feelings of anxiety, guilt, and shame" (Solara Mental Health Veterans Program, 2024). Social worker, Monique, mentions this process of internalized victim-blaming:

Monique: *[...] I think one of the things that could prevent [...] from [...] disclosing that they're in [an] IPV [relationship] is [...] internalized victim-blaming and how they might be downplaying their own abuse and their own assaults and the situation.*

In addition to what Monique said, it was interesting to have picked up on this habit of internalized victim-blaming one of my victim interviewees, as seen below:

Rania: [...] he was very aggressive, mostly I can say emotionally, financially, psychologically but not physically. But I was afraid the whole time because I know when he gets so mad, he can't control himself. He doesn't hit [...] No, it's not like that. He mostly [would] slap on the face. Maybe this is the most thing that he was doing and he said like I'm sorry, you know. One time I remember I was running [...] and one time even my son, he was three years old, but he told me, "I remember when you were almost fall[ing] from the stairs." I was about to hit the window to go out because he [my ex] just throw me.

From what the social workers I interviewed spoke about regarding internalized victim-blaming, as well as what can be seen from the above excerpt, it's easy for a survivor of abuse to find themselves minimizing or even denying a portion of the abuse that their abuser committed against them, such as in this case, the interviewee's ex-husband, which can further complicate the process of a victim seeking rightful justice. The social workers I interviewed also underlined the importance of justice needing to be "trauma-informed" and "survivor-centered", which is principally not the case with retributive or punitive justice, magnifying the preference for restorative or transformative justice, which are justice approaches that more likely can follow suit in comparison to the before-mentioned justice proceedings. To explain more fully, a "survivor-centered" approach encourages the mediators to incorporate the "rights, needs, and wishes" of the victim (Rentschler et al., 2022, p. 28), prioritizing the safety of both the survivor and the perpetrator (Decker et al., 2020), whereas a "trauma-informed" approach takes into consideration the links with "violence, trauma, negative health outcomes, and behaviours" (Rentschler et al., 2022, p. 28). What can be gathered here about justice for victims of abuse is first, that more initiatives need to be made to protect women victims of IPV, as male perpetrators

of IPV against women are not prosecuted effectively, because both victims of abuse and social workers of victims of abuse can agree on the fact that there isn't a proper solution at this present time when it comes to justice regarding IPV, for either party (victim and abuser). Secondly, the justice system needs to either be more threatening and deliver more harsh punishments to the male perpetrators of IPV against women through retributive justice (especially with the concerning rise of local femicides that is a concern of both victims and social workers), and/or at the very least, make these perpetrators follow a rigid, therapy-treatment plan including anger management classes, all as an effort to reduce the occurrences of IPV against women through transformative and/or restorative justice. Although it is unclear what type of justice exactly needs to be implemented, it is evident that there is a lack of justice in general for women victims of IPV. Lastly, victims themselves are more strongly in favour of retributive justice for abusers, versus social workers working with victims of abuse who believe retributive justice isn't going to solve the issue of abusive acts committed by the abuser, but rather will keep these acts repeated because it doesn't help get to the root of the issue, and thus, these clinicians are more strongly in favour of restorative or transformative justice for abusers, thinking this alternative type of justice will serve as more therapeutic and helpful in the long run. Finally, because of the absence of proper justice in the case of women victims of IPV and their male perpetrators, there is a growing concern surrounding trust, in this case, a lack of trust in the Canadian judicial system to make any kind of impactful difference about women being abused. However, since trust was a term used several times and in different contexts throughout my interviews, it has also served as my second theme, which will be explored in the next subsection.

Trust

The trust theme emerges because participants kept talking about trust in the following ways: trusting or distrusting ourselves, family, friends, our faith, the justice or other government-aid systems and public sector workers, as seen in the below quotations of this subsection. Below is an example of how an IPV survivor’s abuse experience with her ex-husband led to her distrusting men.

***Rania:** Now, what happened with [ex-husband], and everything, I don't have trust. I'm sorry to say that, but I'm trying to be more protective for myself. Like you're talking to someone who got a lot of harm in their life, and my children too, and now, I feel like...not stable sometimes [...] I don't trust any man. I can't.*

Through this excerpt, it is evident how a lack of trust derived from abuse or exposure to abuse could also emanate fear and trauma in individuals and a scream for help. In addition, accompanied by fear or trauma, comes insecurity, low self-esteem, or an instability of emotions. There is evidence to support this. In a United Kingdom-based study on IPV, it was mentioned that there is a strong positive correlation between having experienced IPV and “poor mental health outcomes, including depression, suicide, and PTSD” (Singh Chandan et al., 2020, p. 562). This is something I can vouch for since depression, suicidal ideation, low self-esteem, and post-traumatic stress are what I experienced myself as a victim of IPV, which I explained after the introduction of my thesis, in the chapter about my personal connection to IPV. It is also what I observed with Rania’s frustration about her lack of trust in others, even some time after no longer being in her abusive marriage:

***Rania:** Whenever the person I trust, he has time to be away from me, [he says], “Sorry, I am busy”, I feel like it's me, like I did something very wrong [for him] to push me away. [...] After, you have to have a plan to build yourself, to trust people, and have confidence. This is the hardest time that I have now. I don't know [if it's] the trauma. This is new things [for me]. I am learning still now [...] because I don't know where should I go after all [the] things I did [to help myself] and the disappointments I had from the government.*

Rania's experience of losing trust because of a lack of governmental support for survivors was found to be the case in the Colombian study as well: "Poverty, combined with little safety or support offered by the government, leaves them in a position of extreme vulnerability, with the result that they can trust no person (Le Roux and Cadavid Valencia, 2019), p. 7). Lack of trust, therefore, becomes a recurring theme in abuse scenarios, without borders (i.e., no matter the nation where abuse occurs). Moreover, not trusting someone forces us to reflect on how we can build trust in others, especially when trustworthiness is a significant and sought-after characteristic in an intimate partner (Pace, 2016). Pace's (2016) study further explains that trust is a process and culminates with time through incremental moments with a person, through being present for their significant other, listening to their needs or when they are bothered by something, and prioritizing fostering a healthy relationship within their couple (over different things or people), which could mean valuing one another. Typically, a person who values another person represents a trustworthy, loving, and respectful figure, such as a significant other or someone else close to us. Therefore, the large discrepancy between expectation versus reality in the maltreatment women victims of IPV received by their male perpetrators of abuse, inevitably leads to confusion and a lack of trust even towards other people in their lives, as was the case for Rania. I too witnessed this very confusion and lack of trust firsthand, with friends and even family members shortly after I survived my IPV experience. It seemed plausible that if someone as close to me as an intimate partner had the power to deceive me, then so could anyone. In other words, how could I allow myself to be vulnerable to anyone else after my abuse, if I became no longer convinced that someone who I thought cared about me (e.g., a friend or a family member), would not judge me or be of assistance to me in a dire situation? If we dig a little deeper, an interesting phenomenon about trust and relationships could be revealed through

exploring a person's upbringing with a parent figure, which we will do in the curricula-themed subsection, as what we unravel is worth mentioning in education. Relating to our theme on trust, trusting someone else can be a personal and intimidating experience for some. It certainly doesn't help the cause if a victim did try to seek counsel from a "trusted person" such as a family member, who in the end reacted poorly to their openness and vulnerability, which in turn, made the victim feel worse, commencing the cycle of more negative emotions about oneself and further amplifying a lack of trust in others, as Le Roux and Cadavid Valencia (2019) pointed out in their study can sometimes be the case: "Family members also disbelieve, ignore, and reject survivors" (p. 5). Exploring the idea of family rejection, one of the social worker interviewees commented on the lack of trust some abuse survivors have regarding coming out with their stories of abuse to their family members, out of fear or shame that they may be bringing to the family because of religious or cultural ties, states Monique below:

***Monique:** Sometimes also due to religious values as well, women sometimes are not even supposed to be dating at all. So that can add to the issue of telling the family because then the family would just be upset that the woman was dating, as opposed to being supportive of the fact that the victim is going through a situation of IPV. So, there's cultural and religious values at play with their decision to not expose their IPV experiences and their abusive partners.*

Simply the fear of being criticized as a person, is what prevented one of my interviewees from seeking help from her close friends, further demonstrating how the aftermath of being abused can lead to trust issues. This results from not trusting how people will react to what we share with them, as seen in the below passage:

***Francesca:** I was kind of ignoring both of my friends for a while because I didn't want them to know what happened to me because they would tell me, "Oh, why do you stay with him?" And I was scared of the repercussions [...] I was scared. I don't want my friends to judge me. They would judge me, [saying]: "Why would you tolerate that?"*

Following Francesca's passage, her mother had told her best friend that she wanted her daughter to break up with her partner, judging that he was not good for her – perhaps seeking an indirect intervention through her daughter's friend. Even rightfully so, considering her daughter's partner was abusive, this action had negative repercussions that can be perceived as damaging to the victim's level of trust, as they later explained:

Francesca: Actually, my mom went behind my back and she told her [my friend] what happened. She wanted me to break up with him. [My friend then] said [in French]: "T'es folle!" "You're crazy! [...] Why [are] you still with him? You know, girl, you deserve so much better."

Although the intentions of Francesca's friend and family member may have been coming from a good place, these individuals showed a lack of education regarding the topic of IPV to properly address the victim in a way that is constructive, helpful, and not hurtful, which demonstrates the importance behind teaching and learning about IPV education. As one of the social workers put it, there is much importance in the words we choose when a victim approaches us with their intimate story of abuse, and thanking them for their vulnerability may be a great way to start, as social worker Natasha notes below:

Natasha: Well first and foremost, respecting the validity of their experience, [and saying]: "I really thank you so much for trusting me with this." I think really validating the bravery and the courage that it takes to discuss those types of things openly and honestly, first and foremost, is always where I would encourage people to start. And then just opening the space with very gentle open-ended questions...

Beginning a conversation on the topic of abuse in the way that Natasha advises can be liberating for a victim to expose their experience of violence, as opposed to furthering themselves from reaching out to others out of a lack of trust or increased fear of judgment which could propel self-isolation, as Francesca experienced:

Francesca: I kind of ghosted everybody. [...] I wasn't talking [to friends] for four months. I wouldn't talk to anybody.

Self-isolation following abuse, notably emotional and sexual abuse in younger women, is highly likely (Karakurt and Silver, 2013). This should serve as a reminder that victims of abuse are fragile beings that need to be cared for delicately. The goal is to get them to speak up to support them as soon as possible – not have them run away from resources that are put in place to help them. Inevitably, the foundation of trust issues is an in-depth discussion. Since we have addressed that trust is a prevalent issue in victims of abuse (and those exposed to abuse), it is noteworthy to go over ways we can cope with trust issues, or rather try to overcome them. One interviewee brought up religion as her coping mechanism:

Rania: How I protect myself, it's literally, I can say, my religion, and then what I know about [it], like I start to be more like...I trust in God.

If Rania had expressed this to me during the year of my psychological IPV experience, where I wasn't involved with the faith I was raised in (that being Christianity), I may have looked at her with complete skepticism about “trusting God,” regardless of which religion I'd be referring to. However, it wasn't until a couple of years after my abuse that I started to connect with my faith through, say, a divine intervention. I don't expect everyone to understand this, and some may roll their eyes at this notion in their judgment. It's okay. I'll let them. That person may even be you, dear reader, but I forgive you anyway because I can confidently say now that through cultivating an intimate relationship with Jesus Christ, I am more at peace within myself than I have ever been in my entire life. This peace I speak of has been and continues to be realized through opening up my Bible only to find verses I am reading answering exactly a question I am pondering about my life to the Lord or achieving the same results through the words spoken in

the sermon of the mass I attend any given week or through biblical dreams I receive or through random songs that come on in my car while driving whose lyrics resonate with me. There are many ways in which God speaks to us. Knowing this gives me great comfort. I truly feel that I have begun the healing process of my past experiences and understanding why I may have even attracted them myself through valuing others and never myself; not knowing how to say no to others; not having much self-respect or not knowing how to set firmer boundaries; and always engaging in people-pleasing habits, to name a few. Furthermore, I now know how I can improve myself as a human being to never experience such a thing as abuse or violence again, by practicing more self-care and doing things that nourish my soul, so that while my self-love cup is full, I can pour my love into another's cup, which otherwise, would not be possible. I can happily say that at this time of my life, I understand where Rania is coming from when she says: "I trust in God." There is equally evidence that supports the idea that when someone engages with their religion, especially with others who share the same beliefs as them, this creates a sense of community and belonging and an ability to be more receptive to the trauma they faced, spiritually, which in turn can make, "social cohesion and strengthen[s] the ability to cope with adversity", as found in Le Roux and Cadavid Valencia's (2019) study in Colombia – a country where 92% of the population identifies as Christian (p. 1). This study found through interviewing victims by referencing the Bible, "churches can contribute to the coping ability and healing process of internally displaced sexual violence survivors," (Le Roux and Cadavid Valencia, 2019, p. 1). Of course, there is always room for extra help, such that victims should couple the aid they receive from God's Word with other resources such as a psychologist's professional counselling, to "integrate faith and beliefs into the counselling process" (Le Roux and Cadavid Valencia, 2019, p. 6). Nonetheless, I take comfort in knowing that there are some other people in

the world, who have faced violence – no matter the form – and who sought refuge in God, and it helped them on their road to healing and perhaps can serve as a valuable coping mechanism to learn from, for others who find themselves as victims of abuse or know someone who is suffering from abuse. What’s more, the previously mentioned 1989 *Polytechnique* massacre committed by Marc Lépine, led the perpetrator’s mother, Monique Lépine, to work within a religious community group that assists women with issues as she was in much pain following her son’s violent acts and suicide (Marc Lépine, 2024) and mentioned in Peritz’s (2006) article, “A lot of people prayed for me and I think that’s why I’m still here today.” Even a second survivor interviewee put her trust in God after connecting with a friend who shared the same faith as her, and to whom she opened up to about her abuse experience:

Francesca: So that's one friend I confided in recently [...] she's a nice friend, she's a good person and we went to church, and we went to pray together.

While some people can see the benefits of connecting to their faith through or after moments of adversity, such as is the case for some of my interviewees who are survivors of abuse, and family members of perpetrators of abuse, it seems also, that besides leaning on God, it doesn’t hurt to seek additional resources, which brings me to my next discovered theme, derived from all my interviews: resources.

Resources

Here, for educational purposes, I will discuss the theme of resources to break down the list of possible and helpful types of resources for women victims of IPV, based on my interviews. This will include what can be adjusted about the resources to make them better when considering their limitations, as something that can be brought forth to the public. For one, as Francesca

discusses in the below passage, there is a dilemma with the elevated and arguably unrealistic price that therapy costs:

***Francesca:** Therapy is very expensive. [Therapy sessions], they're like \$200 an hour. The last therapist I was at, she brought up her prices and that's not affordable, especially if you got laid off or lost your job [...] and any woman that doesn't have a job or they're stuck, they're married to somebody with kids... sometimes they need to pay [things] for their children, and they have to pay the household expenses and they're dependent on their husband, partner; whatever, a boyfriend...for finances.*

In Francesca's case, she sought after a government organization's therapy services for affordability. However, while therapy within a government organization is a useful resource, Francesca demonstrates how the government caps the aid they deliver to citizens in need of therapeutic practices for the betterment of their mental health after experiencing abuse, namely the low number of sessions allotted to these victims:

***Francesca:** I was in the therapy with the CIUSSS (Centre intégrés de santé et de services sociaux) [and] the problem is they only limit it to five [sessions] and then you have to find a private person, you [can] get a discount, but it's still expensive. So, that's the problem: they have limits on therapy. They should have a space for women [where] they should give more therapy, [such as] unlimited sessions.*

Besides government organizations, other resources that may be more helpful for a victim of abuse, as seen with Rania in the below excerpt, are social media or friendships, to help uproot the spirit when hope feels lost after experiencing abuse:

***Rania:** I met him [the scholar/influencer on psychology] [...] I can say until now...he is the main person that helped me to move on in everything. [...] And my friend [...] she has a very nice relationship with her husband, so she has [a] more clear mind. So, when I'm confused or I can't see what is happening, [when I'm] angry or mad or crying, she expresses by words: "This is what is happening. This is what you have to do. Don't accept this."*

Personally, while I am not one to trust all social media sources or even think that social media is a positive influence on people (generally speaking), given Rania's testimonial, I may have a

closed mind and need to comprehend that if social media is utilized in such a way that spreads positivity, then it should be considered as a plausible source on an abuse victim's journey to self-healing, and even more so if it proved useful already for one abuse survivor, which is something to consider for education. Rania also mentioned how her close friend who was in a healthy marriage gave her advice on what is considered normal versus abnormal and what is tolerable versus intolerable in a marriage, which Rania expressed to be an immense support while battling her former abusive marriage. In addition to an influencer-turned-friend and a close girlfriend, Rania received some aid from government-funded organizations (though not completely useful), following her divorce, which she discusses below:

***Rania:** After I apply for the divorce, they connected me for [women's] centres and shelters. The problem [is] that [with] some people, they said: "Okay, you have a home, you are living by your own so you are safe, so whenever you need any help, just call the police," [...] So, it's not good. It doesn't help. And at the same time, when I connect to the social worker, she has strict [policies]. She can't be [working on] everything. She told me we have only 12 sessions together and said: "You have to find only one topic and we will work on that topic." So that doesn't help, it's very limited [when] it's free and from the government.*

Above, Rania admits to the restriction in aid these government-funded organizations can offer, notably an appointed social worker instructing Rania to choose only one topic in her life to bring forth in counselling and that their time together would end at 12 sessions, as this is the most that the government would fund. These counselling services existing in the first place, are something to be grateful for. However, knowing that your therapy with a mental health professional who is supposed to help you no matter how long the process takes has an actual time limit, feels rather impersonal and almost robotic, as though the social worker is simply following orders they are getting paid to do, without more care towards the client, who is an abuse survivor trying to recover from an IPV experience. The irony is that a social worker still embodies a group of mental health professionals whose primary job is to show empathy and support toward their

clients, meaning putting themselves in their client's shoes, understanding their needs, and addressing these needs as best as possible (Caplan, 2011). Another point to consider with resources is the specific abuse situation that a victim finds themselves in. For example, one organization might be more trained to help with a certain abuse scenario than another center, such as Shield of Athena (2024), a Montréal-based non-profit women's organization that specifically helps women who suffer from honour violence, which the Government of Canada (2013), describes as, "violence that is committed in the name of "honour", a form of family violence perpetrated against a family member, usually female, who is perceived to have brought shame or dishonour to the family." Social worker, Monique, brought up the importance of cultural context when understanding a survivor's abuse experience:

***Monique:** [At] Shield of Athena, they have coordinators who specialize in honour violence. And that's really helpful to limit who belongs [there] for a specific cultural context.*

The above passage demonstrates that connecting a victim with the right resource is pivotal for getting a victim of abuse the help that will best serve them. While discussing the alignment of victims and resources, it is equally as crucial to explore the accessibility of resources, as Monique through her remembering her high school experience, and another social worker, Stacy, through discussing support services within the city, mention below:

***Monique:** It wasn't like there were actually a lot of resources at my school. There was a nurse, there were social workers and psychologists. But that information wasn't really properly [distributed] ...a lot of the students didn't really know about it either.*

***Stacy:** There are long wait lists to see a counsellor. So, finding ways to have access ...I don't know if that means creating more services [...], more shelters, more beds in shelters. That's another barrier, in that somebody may be ready to leave but there's no space at the shelter. [...] Raising awareness about the resources that are available [would be] very helpful. [...] There are a lot of people that don't know what steps they can take, what their rights are [...] [and] about what is considered abuse.*

It is clear through Monique's and Stacy's concerns regarding services for victims of abuse, that the services are either misinformed to the public or are limited due to long wait lists and lack of government funding. This is not only in the sense of finding accessibility to services in educational institutions but also in terms of physical space being available to the victims who are ready to enter and be helped by the city's women's shelters. As well, there is a lack of knowledge in what defines abuse, which prevents victims of abuse from seeking help when they may need it most. Therefore, it is important to know that resources for survivors, are in place, which may have not always been the case, as Christine points out in the below passage:

Christine: I see big changes from when I was a kid, you know, because at least there are places for women to go now. I never heard of women's shelters when I was growing up. That was not something that existed, so there are changes that are being made, but it's not enough because now it's getting worse and the demand for these shelters, I guess it has exploded. And then I'm sure women can't even find a place in the women's shelter sometimes.

Despite recognizing our city's efforts in creating more shelter spaces over time, Christine does not shy away from mentioning how these efforts are inadequate when considering the magnitude of women abuse survivors. Below, Francesca further solidifies Christine's opinion, while also indicating how education can play a critical role in shelter awareness and information:

Francesca: I feel like women's shelters...personally, me, I didn't live with my intimate partner, but if I did, I'd be scared to go there because [incase] they would turn me away...because there's no beds available for me [...] What do I do? [...] What do you do? What happens? [...] They should have workshops, you know, schools [about] what do you do when this happens, because you think, "I'm gonna go on the street." You don't know where to go...

Altogether, what all passages of this subsection share is the emphasis on the action needed to create more awareness to the public through school education, regarding which local resources are available to women in need. What they also decipher is potentially creating more locations

for women's shelters and organizations across the island of Montréal, to be able to serve more women in need. Something else worth noting through Stacy's shared thoughts is that clients struggle to understand if their abuse is considered eligible for receiving aid, which of course, it always is, no matter the form. These misconceptions should be addressed in awareness education about IPV, which will be discussed in the curricula-themed subsection. Another important point to observe is the women who are ready and trying to seek support. Because of a serious threat to their safety, they are prevented from reaching the necessary resources that would get them out of their abuse situation, as social worker, Stacy, explains:

Stacy: If a client is at [our center's name] or in contact with [our center's name], it means they've reached out for support. Unfortunately, not all people feel able to do that or it's not safe for many people to do that. They may not have access to a computer or to an email that's not being monitored or to a cell phone that's not being monitored. So, for those that are able to and are ready to, they reach out for support from us or from another organization.

Here, Stacy reminds us that even once resources are made known, accessibility issues may not necessarily always have to do with physical space, but also with danger to oneself. To combat these types of coercive and controlling threats from a perpetrator of abuse, Stacy informs us that survivors reach out to one organization to get in touch with the one they desire to be helped by (to avoid leaving traces to the abuser). Furthermore, below, Stacy talks about creating a well-thought-out and safe exit strategy plan, involving the knowledge of a counsellor, friend, or family member, with one of these individuals having a bag of some of the victim's belongings and important documentation so they can retrieve them when they are ready to leave their abusive relationship for good:

Stacy: Other steps that people may take are letting a friend or family member know what's going on, creating a safety plan, either with a counsellor at [our center's name] or elsewhere or with a friend or family member...maybe keeping some of their copies of

their important documents elsewhere, [such as] at work, at a friend's place, at a family member's place...keeping a bag of stuff they might need should they decide to leave.

Finally, a trusted friend, family member, or mental health professional is the most common resource to seek help when or after being abused by a partner, as based on the findings in my literature review. In addition, I was able to relate to this fact with my interviewees since I had found myself seeking support from certain family members or friends and a psychologist when I was processing my IPV experience. However, I have learned through my interviews (and understandably so), that friends and family members may lack the proper language to speak with victims of IPV or may be biased in the advice they give to victims of IPV because of their relation to the victim of IPV or even to the abuser. Other times, there may be a cultural situation of honour violence to be considered in helping a victim of abuse. To put it in a nutshell, this is when violence is committed against a woman as a punishment for having behaved in a way that is said to bring shame to their family's name or reputation, which requires an incredibly delicate approach from those intervening, and not all resources are equipped to deal with such sensitive cases. This information alone should stimulate a call to action in creating more resources specializing in honour violence so that there is more than just Shield of Athena in Montréal—despite having one qualified organization existing being better than having none. This is also a reminder that it is important to link victims of abuse to suitable facilities that will make a difference in their lives. Also, we have seen that a victim may find a certain influencer on social media who shares relatable content to their relationship to be useful or helpful, which could be something to explore in our next and final theme on curricula. Speaking with my interviewees about social media prompted me to want to gain more clarity on themes such as gas lighting, narcissism, red flags of a personality, and such, through the same method. In doing so, I did find that my knowledge on these topics was increased, which helped me gain more confidence,

further demonstrating that my interviewees' suggestions on implementing social media learning on IPV-related topics in curricula could be advantageous for creating more awareness, prevention strategies or solutions about IPV. What is more, the confidence I built from these findings is similar to the confidence, peace, or comfort I feel when receiving messages through my faith-based experiences. Relating these experiences back to places such as Shield of Athena, aids in the understanding that these same things can be felt in cultural support groups for victims of IPV. Regarding mental health professionals: they are limited within the time constraints or topic to be discussed, which they can help one client with, at a time, as was seen with some of my interviewees, stemming from inadequate governmental subsidies. Moreover, there are not enough helpful resources in Montréal for women victims of IPV – again because of a lack of government funding. In other words, more can be done to help these victims and help improve the societal problem of IPV. Of the resources that do exist, not enough women are aware of these resources available to them, therefore educationally addressing the public about the available resources for women victims of IPV could help reduce IPV occurrences. In addition, even when women are aware of the existence of resources they can reach out to, there may be a threat in their abusive household stopping them from receiving aid, which is why it is crucial to take notice of the measures some survivors have had to take to receive the help they needed. This includes indirectly reaching a women's center or similar organization through another one and leaving a bag of personal items and important documents with a counsellor, friend, or family member, while informing them of their escape plan. It is also crucial that women understand that any form of abuse is abuse and to encourage them not to deny their right to receive the help that they need, further emphasizing the need for re-education around sex education in our province,

which brings me to the final theme of my findings and analysis section: curricula.

Curricula

The premise of my interviews was that they would disclose what is presently missing and what can be improved in the educational curricula in Québec, specifically in the sex education curricula, regarding IPV against females, as a method to widely discuss, prevent, and tackle this prevalent and dangerous societal problem, which this themed subsection seeks to unravel. Earlier in our trust-themed subsection, we briefly uncovered how a state of trust in relationships is often rooted in a person's childhood with the type of attachment style a parent figure exhibited towards them, which I noticed was a topic of conversation that arose with social worker interviewee, Natasha, when it came to discussing what important topics should be added to the curriculum of sex education:

Natasha: Our attachment histories and our attachment templates, which is how we operate in relationships, are formed most of the time, by the time we're six [...] we have these ideas we've built into our nervous system of what is okay and what is not okay.

Furthermore, Natasha affirms how we tend to attract in our adult relationships what we've experienced as children in child-parental relationships, which can at times cause us to adopt a corrupted view of a healthy attachment style and thus have a psychological impact on us, especially if we're women. This weighty topic merits a place in the sex education curriculum, as Natasha further explains:

Natasha: I find for a lot of women who are in abusive relationships, it mirrors what happened to them as kids. In that when they grow up, [it's]: "Well, I'm responsible for [how] other people [choose] to respond, [and their] emotional well-being. [...] There's a guilt associated with it and it's that guilt that keeps a lot of people [from being] able to recognize for themselves that what they're experiencing is having an impact on their ability to have relationships that support them.

To add to what Natasha is saying in the above passage, psychologically operating in such a way that is dysfunctional in our relationships, demonstrates to us the significant role that trust plays in relationships and attachment styles. Subconsciously, I may have unknowingly chased acceptance from others (an anxious attachment style), and attracted the opposite type of people in relations, such as those who demonstrated an “avoidant-dismissive attachment” style – those who fear intimacy and emotional closeness to others (Robinson et al., 2024). Avoidant-dismissive attachment styles may derive from a parent figure who was “unavailable or rejecting” during a person’s upbringing (Robinson et al., 2024). There is also a “disorganized/disoriented attachment” style, otherwise referred to as “fearful-avoidant attachment” style – common when someone experienced abuse as a child and never acquired the capacity to “self-soothe their emotions” (Robinson et al., 2024). What is important to note here is that those who display a disorganized/disoriented attachment style are more likely to experience mood swings toward their partner. They may also be “insensitive, selfish, controlling, and untrusting” toward their partner, causing them to engage in “explosive and abusive behaviour” and they are susceptible to abusing drugs and alcohol, and exhibiting “aggression or violence” in their relationships (Robinson et al., 2024). Overall, understanding healthy versus unhealthy relational attachments within an educational context could be immensely valuable to students, a topic that social worker, Monique, makes us understand is related to the topic of relationship “boundaries”, as well as how important “peer support” is when disclosing abuse experiences, and affirming that the earlier someone can be educated on IPV, the more it will benefit them in the long run:

***Monique:** I think boundaries definitely need to be taught to children and to use [them] for healthy relationships. Proper sex education needs to be done within schools, and an increase in peer support would also be really amazing [...] What I hear from my clients is*

that it takes them until they reach adulthood to sort of realize that something was wrong, [that] there was abuse in the familial context.

Monique may be on to something with her suggestion of peer support being useful in fostering open conversations to discuss vulnerable topics, such as violence. Following this same notion, the province of Nova Scotia has employed what's called the Healthy Relationships for Youth (HRY) program, which focuses on youth teaching their peers in class, ways they can reduce violence and maintain healthy relationships, which has received positive feedback from their participant students (Healthy Relationships for Youth, 2024). Despite this program receptivity in Nova Scotia, it is merely nonexistent in Québec schools, further demonstrating needed improvement of resources regarding our province's sex education curriculum. In addition to Monique's statements, clinician, Natasha, thoroughly examines her clients' childhoods to observe unhealthy attachment patterns that were formed in relationships with their primary caregivers, that were later "normalized" in other relationships growing up. Natasha mentions how these abuse experiences impact a human being's brain and body, which suggests to educators, how addressing IPV sex education could also be linked within subject of human biology in schools:

Natasha : If you were raised in a home where if you felt anxious about something that was happening and you went to a parent and then they told you that your anxiety wasn't important or they dismissed it, or if they shaped you in the way they think, or make you feel guilty, then if you're in a relationship later on, that's gonna feel comfortable in a way, because it was normalized for you and that's how you expect other people to treat you [...] Your amygdala and your nervous system is going to code that as something that is expected to happen in relationships.

Moreover, former victim interviewee, Francesca, explained how her abusive ex-boyfriend suffered a dysfunctional attachment style in his relationships, likely due to a traumatic childhood, further amplifying the need for investigation into implementing childhood and psychological analysis in IPV sex education:

Francesca: He was abandoned when he was six years old, for two years, with his grandparents, they [the parents] left [...] He had a lot of childhood trauma and the way he is, I can see it's probably from that. So, I feel that sometimes people that cause these problems [i.e., abuse] have a cause [...] and I feel this should be addressed by the schools.

With Francesca's point of view, educators may see the revelation that can be discovered when diving deep into an abuser's childhood or past, which shows how such a psychological topic on relationships is worth implementing (and arguably necessary to teach), in a sex education curriculum program, especially concerning psychological IPV in relationships. Studying the psychology of a person can help us to understand the lens through which a perpetrator of violence views the world, and perhaps why they behave in a way that reflects this view. Adding to the sex education curriculum on psychological IPV, Rania believes it is essential to include 'red flags' of a personality style:

Rania: If he's trying to control you and all the aspects of control [...] because when you love, you [are] blind, you become blind with the emotion, so you don't read [the person well]. You don't see like that [how you should].

While putting into effect personality and psychology topics with IPV, changing sex education curricula is no easy feat and will require a multifaceted approach, as social worker Stacy, discusses the different layers or factors that need to be considered in such a program, starting with the way gender roles are currently perceived versus how they should be examined:

Stacy: Maybe you could see re-education around gender roles [...] substance misuse, mental health disorders [...] sexism [...] also class [...] teaching people about healthy masculinity, power, and control, consent, communication, [...] financial literacy, racism, ableism, resources, helping people break isolation and have a community around them, emotional regulation skills, relationship building skills, mental health support.

Above, Stacy suggests a list of incredibly important subtopics of relationships to teach in schools. Within this noteworthy list, it is important to identify the link with education on

communication, emotional regulation, and relationship-building skills, which are specific items that my partner had made strides in after employing his steps to better himself and the state of our relationship, which proved to be successful over time. This not only gives hope to survivors and perpetrators but also enforces just how necessary education on such topics are. At the same time, Stacy helps us lean on the understanding that it does not hurt to add as many subtopics related to IPV as possible, in a newly reformed sex education curriculum. Other factors to consider and observe in adjusting this curriculum, are understanding that both males and females should be responsible for educating themselves regarding IPV and identifying the appropriate academic level for when this education should first be presented to students, as demonstrated in the below passage from Francesca:

Francesca: Educating the boys too about it [IPV] is very important because sometimes the guys, like my ex, didn't realize what he was doing was wrong. [...] It's also important, not just to focus on the girls, but [to] focus on the guys too. [...] Educate them in the situation: "This is violence, this is not violence." [...] I think that early on, best of all, [with] younger teenagers when they feel they start dating, or you know, they're intimate [...], one should start talking about this [IPV].

In the above passage, Francesca implies that if young students learn earlier about IPV education, they could prevent themselves from being in an abusive relationship later in life. She felt that early adolescence was an appropriate age to expose youth to this type of curriculum, especially considering this is a common age for individuals to embark on intimate relationships. On the contrary, in the below passages, Christine and Natasha found this age range to be too late to expose such critical information. Instead, they felt it was better to implement IPV sex education at a primary level age, with the preventative notion that the sooner this information is put out, the more equipped a person will be to properly handle relationships as they grow older.

Christine: I don't think high school. It has to be done before high school. Definitely. Because you have to know before that [...] a five-year-old and a six-year-old...they know

the difference between right and wrong. It's impossible that they don't know that at such a young age, but it has to be gradual. You can't just shock them into [it]. As soon as they understand, I think it's a good idea to start talking about it.

Natasha: *I think it needs to start in grade one or grade two [...] maybe even earlier than that [...] and it needs to be built every year, adding more nuances [and] complexity. [...] I don't think one workshop, once a year, or once a semester is enough. I think that they should be repeating this. I think this should go on all the way through [...] at least on a monthly basis.*

Something interesting that Natasha adds to our curriculum talk is how IPV sex education shouldn't simply be a "one-stop shop" type of education, but rather an ongoing curriculum that continues throughout a person's academic-leveled life, and regularly (monthly precisely), to instill the information being taught to students about healthy relationships and all related factors, including conflict resolution. In addition, below, Natasha too (as seen earlier with clinician Stacy), emphasizes the urgency of introducing emotional regulation to youth in IPV sex education in Québec:

Natasha: *It's so important [...] [for] kids to [learn] conflict resolution and make them [achieve this] through emotional regulation and lead them through the difficult skills that at that age can only be taught [...] It gives kids the tools and the skills and the emotional awareness and intelligence that would be able to be set up by the time they reach high school and are actually having more complex intimate relationships.*

Moreover, while reflecting people's upbringings, survivor Christine suggests how implementing role-playing scenarios in curricula or having guest speakers speak of such subjects as, emotional regulation, in schools, could be used as a preventative measure in reducing the occurrences of IPV:

Christine: *The kids also should know that this is not a normal family life [when] the father's, you know, beating or belittling, you know, intimidating or emotionally abusing the mother, okay? They should know that this is wrong and how do they know that? Well, when they're told, I guess through scenarios or guest speakers, things to look out for that are not normal, right?*

When examining the need for this type of education, one might ask: “Why do schools have to teach this? Why can’t parents do this alone, their way?” As previously discussed in this findings and analysis section, family members do not necessarily have the right tools to be able to communicate and intervene with a victim. In fact in some cases, a family member might disregard, reject, or even shame or guilt the victim (especially considering honour violence scenarios), and individuals may not be comfortable disclosing everything they are undergoing or have undergone in an abuse experience(s) to a family member. Therefore, they do not stand as fully reliable sources to teach IPV sex education, as what is expressed by social worker

Monique:

Monique: We definitely can't rely on families to be able to disseminate the appropriate information when it comes to safe sex and when it comes to healthy relationships and we never know where students are really coming from. [...] One of the things is that there is Sex Ed that's missing in high schools right now.

At first, I was confused by Monique’s statement about sex education missing in our province and I asked for clarification, which I received:

Monique: Yeah, I think it's within the whole province of Québec [...] I think that it's possible that it's not being taught at all.

In addition, to investigate Monique’s claims about sex education potentially not being taught at all in schools in Québec, I did more research and found that sex education was officially abandoned from Québec educational institutions in 2005 (CTV Montreal, 2013). However, it was re-instated in September 2018 (Montgomery, 2017), with the *Ministère de l’Éducation du Québec* (2024) making it compulsory for primary and secondary students in both the public and private sectors to learn, with the option of making it available as of kindergarten, yet the *Ministère de l’Éducation et de l’Enseignement Supérieur*’s (2019) “Learning Content in

Sexuality Education” shows how there is emphasis on education about sexual assault or violence, but no other forms of violence in intimate relationships, and this education is for youth up until they’ve reached secondary five. Moreover, Concordia University’s Simone de Beauvoir Institute principal, Kimberly Manning, states an even more urgent matter in Juhl’s (2024) article, concerning sex education: “I’ll be frank; In Québec, there is no training in place in a systematic way for educators.” With that said, it can be agreed upon that Monique makes a point when discussing the disparity between what should be taught in sex education and what is being taught, here in our province. Furthermore, below, Francesca discusses how educators can play a central role in the life of the youth and their relationships through sheer advocacy.

Francesca: I think teachers are kind of the classroom moms and dads [...] Because sometimes children that are being abused, traumatized [...], they might feel that they're too scared of their parents. A teacher would be somebody outside the family who they can confide in, right? They can say, "This is happening at home." [...] And teachers [...] they're there to help the students.

We can see from interviewees, Monique as well as Francesca, that there is a massive gap between students and sex education, that educators need to bridge together through a change of curricula, by also understanding that they represent more than merely a faculty of teachers, but also impactful caregivers. Knowing the stance of educators, as well as which topics are missing in curricula that could be drastically helpful in IPV sex education in our local schools, social worker interviewee, Natasha, gives her personal take on how exactly the curricula can be changed by adding to what currently exists within the disciplinary core subjects:

Natasha: I'm thinking about English...If you're reading different books or studying different poems, there's so many different [...] resources and stories that you can use to maybe help kids relate to that, and what's happening in this story for this kid. Someone is experiencing bullying or something's happening in their home or both, and they're talking about emotions through that.

To validate Natasha's recommendation on encompassing literature into IPV education, I can say that after having read several resources on IPV which I found helpful throughout completing this thesis, I believe that literature on IPV and abuse should be strongly favoured when formulating a new sex education reform for Québec. Other ideas for preventative measures in IPV education emerged from my interview with Monique, who discusses that through her meetings with her clients, she has discovered that social media is sometimes used as a teaching tool for victims of abuse (especially psychological abuse), to discover what abuse entails:

Monique: There has been a bit of a rise on social media about things like gaslighting and narcissism and red flags. Yeah, so they might pick it up from social media as well.

Retrieving information about psychological IPV online is something that interviewee Rania did for herself as mentioned earlier. Hearing this option from more than one interviewee made me feel, as an educator, that enriching provincial sex education curricula through social media teachings should be strongly considered. Furthermore, in the below passage, Monique discusses how other forms of media, such as television content can also be educational when it comes to the topic of abuse.

Monique: Sometimes it could be, TV, whatever it is that they're seeing [within] a context that reminds them of something that they went through in the past.

Monique's talk about how social media and television can be platforms of influence for victims of abuse to learn more about abuse, had me thinking about popular content that made their appearance in the media in recent years and even helped me learn more recently about abuse myself. For example, the "#MeToo" movement, which was founded by the American Activist, Tarana Burke, in 2006, later prompted the "#MeToo" movement in Hollywood, starting in 2017, to fight against sexual violence towards women celebrities, which is still ongoing today (Brockes, 2018).

Following this discussion about Hollywood, an advancement in advocating women's rights in the entertainment industry can be seen through the 2022 drama and biography movie, called "She Said", whose plot is about the infamous movie producer and convicted sex offender, Harvey Weinstein, and his sexual assault allegations towards female actors in Hollywood (Soloski, 2022). In addition, something else that took place on the big screen to echo a voice for women victims of IPV is the truth and book-based story turned Netflix show, called "Maid", which was released in 2021, about a woman fleeing an emotionally abusive relationship to build a safe and better life for her and her child (Herman, 2021). After personally watching both "She Said" and "Maid", I can confirm that Monique's indirect suggestion of using media to educate the youth about IPV and abuse could auspiciously spread knowledge and awareness on IPV topics. This can even be said about using news articles or interviews as media, to inform oneself about topics such as the Iranian, "Women, Life, Freedom" movement, whose aim is to end female abuse and oppression, as discussed earlier in my thesis. While having conversations about IPV and abuse do exist in the entertainment industry or political sphere, which can be saluted, what about in the educational world? Does our current educational stance on the jaw-dropping and disturbing high occurrences of IPV in our society, merit applause in its efforts to reduce or eliminate these occurrences? By this point in your reading, you will have come to know the facts surrounding IPV against women victims in Montréal and Québec, and how if they are what they are, it is because not enough is being done about it. You will have also acquired several curricular-educational suggestions made from survivors' and clinicians' points of view about IPV and abuse, which have yet to be put into practice. While educators can agree that the field of education alone is an influential domain, social worker Natasha, proposes to employ a more collective technique to realize the goal of extirpating or at least remarkably diminishing IPV in society:

Natasha: Allowing the students to feel a sense of agency is important [...] but also so is the community and so are the impacts on the environment. We're all in this together and there's collaboration that's needed. [...] It's not really just the educational system, but I think politically and socially, finding ways to be an activist in whatever way that means for you, being able to sort of challenge those systems, because I think that's the only way we're actually going to prevent it [IPV].

The collective technique that Natasha puts forward above, ties in all four mentioned themes of this section (i.e., justice, trust, resources, and curricula), by involving the government to erase or decrease the prevalence of IPV against women victims, in a way that mixes politics, resources, education, victims of abuse, community, and advocates of gender equality fighting against IPV, all together in the same pot – rather than simply using curricula alone to wait for an impact to be witnessed. One can argue that the more people involved in aid, the more aid that can be delivered, which brings us to the concluding statements of this findings and analysis section.

Conclusion

Although many themes emerged during my interviews (more than four), for the sake of the writing constraints within a master's thesis, I kept four that I found to be the most recurring and significant: justice, trust, resources, and curricula. With regards to justice, the terms such as retributive (punitive) justice and restorative (transformative) justice were discussed, while noting that the abuse survivor-interviewees, generally gave preference to the idea of retributive justice for the male perpetrators of violence or giving a balance of retributive and restorative justice, such as incarceration on top of therapy treatment and anger management courses, especially when considering history of family abuse and misogynistic perspectives in perpetrators of violence towards women. Meanwhile, the social worker/clinician-interviewees were completely for restorative justice and not at all for retributive justice, with the belief from witness

experiences, that retributive justice accomplishes nothing, while restorative justice initiates changes. It was equally concluded that our governmental justice system is shirking its lawful responsibilities to make a significant impact in lessening and removing occurrences of IPV against women by male perpetrators in our society. This tells us that law enforcement needs to heavily revisit its judicial procedures regarding IPV cases. Due to the government's ineffectiveness in proactively reducing the statistics of IPV cases against women, victims of this form of abuse have lost their trust, in addition to having also lost trust as a direct effect of their former abusive relationships. Trust became a significant theme to discuss as it is the cornerstone of any relationship, including with friends, family members, social workers, psychologists, women's centers, and shelters. Being abused by an intimate partner contradicts the feelings we are supposed to feel in a trusting relationship which confuses us and thus, causes us to doubt others. Something that can add to the high level of mistrust placed in others after being abused is the ignorance about and limitations that exist, within the resources available to victims of IPV and abuse. Thoroughly discussing resources, as my third theme, elicited that resources do exist (e.g., government clinics, women's centers and shelters, psychologists, social workers, counsellors, peer support programs, and such). However, problems arise with these resources, including wait lists for aid, government funding restrictions, the cost of sessions, number of topics to be helped with, number of sessions allowed, appropriateness of resource connection to specific abuse situation or accessibility to resources by fault of threat to victims, and lack of local and educational healthy relationship programs employed. A piece of advice given by an interviewed social worker is that for those who may find themselves in an abusive relationship and are ready to leave their relationship, they are invited to leave a bag of their belongings at a trusted friend or family member's house, amplifying the urgency for strategy planning. Other

recorded resources that were free and helpful detailed turning to faith, viewing social media content, or talking with a close friend. Nevertheless, it has been gathered that practicing our spirituality is therapeutic but perhaps even more so when coupled with mental health therapy; that social media content on its own isn't necessarily supportive (it should be paired with other resources); and that friends or even family members often have not acquired the proper communication skills to comfort a victim of IPV or abuse, further amplifying the need for mandated IPV sex education in curricula. In this fourth theme about curricula, the complexity of the topic of IPV and the wide array of subtopics that relate to it were uncovered, and which should be included in education to induce favourable results in tackling the societal issue of IPV. These subtopics are part of a long list including defining gender roles, class, racism, sexism, ableism, healthy forms of masculinity, healthy attachment styles, boundaries, neurological effects of abuse, body sensations, peer support, communication, conflict resolution, emotional regulation, and relationship-building skills; understanding family and/or honour violence, psychological IPV, personality, substance abuse, and mental health disorders; making known all useful resources of support and community, including ones specialized in family and/or honour violence; and discussing the cruciality of financial literacy. It was found that a way to integrate these many topics into the curriculum is to incorporate them in sex education via media content (meaning through socials, television shows, movies, books, poems, and such), as well as through workshops, role-play scenarios, and guest speakers. Moreover, it was mutually agreed that the younger people are exposed to IPV information (as early as in primary school, precisely aged five to six years old, using age-appropriate language), and exposed to this knowledge continuously from elementary to university studies, on a regular, monthly basis – the greater the attempts at reducing societal IPV occurrences, which will likely yield a more positive outcome

for the future of this matter. Furthermore, we learned that although one interviewee had believed there to be zero existence of youth sex education in Québec presently, we stand corrected in that it is in effect, but while missing vital IPV topics, specifically regarding psychological IPV. We also discovered the significance that educators and sex education can play in a young person's life, as teachers can (in the eyes of students), epitomize secondary parents, as well as student advocates. In addition, having proper IPV sex education can prevent youth from finding themselves in a problematic relational situation later in life, and parents may lack the correct language skills to teach their children the necessary information about IPV sex education. All in all, IPV and its related subtopics discussed in this section need to be implemented into the sex education curricula of Québec, as it would add more fullness to what is currently being taught since we are currently depriving our youth of this pertinent information, which has the potential to make a drastic impact in society, and which will not be tested until the Ministry of Education approves and makes mandatory, a new curriculum. On a final note, we must remember that while our efforts to lower or eliminate IPV occurrences against women victims in Québec solely through education curricula is powerful, and can make a noticeable difference, what will make these efforts even more effective, is amalgamating them with other sources of help, including with government, resources, victims of abuse, community, and advocates all involved, which leads us to the final section of my thesis.

Chapter Five: Discussion and Conclusion

Despite the multitude of literature available on the topic of IPV against women including research revealing the longstanding existence of gender inequality toward women worldwide and locally, with a personal connection to an IPV experience and being a woman and educator myself, I had a mission to answer three research questions for the field of education in Québec

that had not yet been addressed. This was to be accomplished by employing a qualitative methodology, involving nearly a handful of IPV survivor and IPV clinician interviewees through consent-approved and audio-recorded interviews. Equally, this was to be done by using coding and thematic analysis approaches where I initially derived ten themes (including narcissism, trauma, financial literacy, strategic exit planning, and more), that I narrowed down to four (justice, trust, resources, and curricula). I chose these final four themes because I found they responded best to my research questions and were consistently found in all interviews.

Regardless, cutting down the found themes through my data analysis proved difficult for me, as many did emerge, and I felt as though they were all valuable and deserved being included.

However, for the purpose of this master's study, it was essential that I be selective in choosing only the most pertinent themes, which was a process that pained me. The purpose of this study was to reduce (or more enthusiastically, eradicate), IPV cases against women victims that are perpetrated by males, within our local, Montréal and Québec society, through a change of our provincial sex education curricula. Because the subject of IPV is so dear to me, and so important socially, educationally, and psychologically, IPV research needs to be ongoing. My research questions sought to answer what role education and curricula can play in terms of prevention of IPV, if any; what educational insights from former victims of IPV and social workers for victims of IPV are suggested for our education programs and society; and what other recommendations, resources, or supports do female survivors of IPV need to have their psychosocial needs adequately met (as per the opinions of survivors themselves and social workers who regularly deal with survivors). To answer the first and second research questions, it was found that education and curricula can play a rather significant role in IPV awareness and prevention by teachers knowing their place as influential members of youth and society and by schools adding

to the existing curricula, a program dedicated to IPV education including a myriad of related subtopics. In addition, this education needs to be mandated into the sex education curriculum as early as kindergarten, be continued throughout a person's whole academic life, and be frequently taught, as suggested from my interview findings. Also, something important to consider concerning specifically education about psychological IPV (since this was a focal point of my thesis due to a lack of information about this topic in the previously mentioned Québec Sex Education Reform and Concordia University's Report and Policy on Sexual Misconduct), is that it should explore terms such as gaslighting, manipulation, and narcissist/narcissism, as these terminologies did come up often during my different interviews regarding the typical representation of male IPV perpetrators. Moreover, we learned that these subtopics can be implemented through various means (e.g., books, poems, social media, television, and such). Next, to give attention to my third research question, by observing my interviewees' words, it was evident that there are concerns about justice, trust, resources, and curricula. While the responses to my first and second research questions address the issue of curricula, the response to my last research question aims to bespeak issues regarding recommendations, resources, and support for meeting the psychosocial needs of women victims of IPV. Through my interviews, it was seen that these issues include better justice approaches from our government for the male perpetrators of violence against females. Although it was not possible to reach a concrete solution to this matter since there were differing views from my interviewees of which type of justice should be implemented, the consensus that was reached, is that there are holes in our justice system that need to be addressed for the sake of our society. Moreover, with the government's ineffectiveness at addressing the societal issue of IPV against women, on top of the traumatic side effects that being abused comes with, and not receiving the help needed from

other resources, trust becomes a recurring difficulty for women victims of IPV and abuse. This further magnifies the need to stipulate the information of available resources for them, as well as the accessibility to these resources, through a changed educational curriculum. Making known this information should hopefully stimulate the government to increase funding to create more physical locations for women victims of IPV across the city of Montréal and the province of Québec, while publicly announcing it to society through the many methods possible. As gathered from one clinician whom I interviewed, education and teachers can help in the movement of decreasing local cases of IPV against women, however, it'll be notably more impactful through a collaborative effort involving the government, resources, victims of abuse, community, and advocates for the cause. Another consideration for future research was brought up to me in one interview by former IPV victim interviewee, Francesca:

“I don't know if it's relevant, but I feel men experience IPV by abusive women. So, they [schools] should also not be limited to [discussing] the women [victims] only, it should also be mentioned [about men]. Because sometimes men, I don't know if it's just a very small part [who get abused], but they do also get abused by women.”

Francesca's concern about male victims of IPV perpetrated by women gives us food for thought about a future study that could represent the complete reverse of this master's thesis, which would be interesting to learn and educate others about. While I cannot speak more on this subject because my thesis is solely based on education and IPV against women perpetrated by men, studying it could add valuable knowledge that may one day be implemented into yet another change of sex education curricula in our province. For now, what we do know is that IPV against women victims is presently a colossal societal issue both around the globe and locally while keeping in mind women have been oppressed across many generations. Nonetheless, educators can at least try and potentially be very successful at reducing the prevalence of this problem in our communities, by priming a new sex education curriculum that is reflective of IPV-related

topics, which would be ongoing school-based IPV prevention programs. By employing such a program with the aid of a whole collective, together, an educational and psychosocial-led movement can be born, and at last, a bright light can be seen at the end of the dark tunnel of female oppression and violence.

Contributions to Knowledge and Implications for Practice

This research resonates with literature on IPV in ways including the prevalence of IPV in society; the commonalities of IPV cases; what IPV victims experience, and the like. Through my research, I brought into view the role that education can play in IPV awareness and prevention, coupled with ideas for restorative justice for IPV perpetrators. Different from past research that examined IPV from purely feministic, historical, psychological, social or judicial perspectives, what is most unique about my inquiry is how I was able to have conversations with both victims of IPV and social workers at educational institutions. This is a significant contribution because this is the first time the topic of IPV is being studied with the several disciplines above-mentioned, from a data collection derived not only from IPV survivors but also clinicians whose clients are abuse survivors. These findings offer unique and rich content that can be applied to our Québec sex education curriculum, and even our local judicial system.

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