AGAINST THE ODDS: STRENGTHS DISPLAYED BY ABUSED WOMEN
Ilze Slabbert, University of Stellenbosch, Stellenbosch

Abstract
Although legislation protecting women’s rights in South Africa is well developed, statistics indicate that violence against women has become the norm. There are no cultural, socio-economic, political, religious or educational boundaries to domestic violence. Despite this, some abused women display certain strengths. The strengths perspective is thus a suitable theoretical approach for this qualitative study exploring and describing the strengths of twenty abused women who formed the sample. Five strengths – namely hope, resilience, pride, healing and wholeness, and lastly personal qualities, traits and virtues – were identified. Some recommendations are made about the suitability of the strengths perspective for practice.
AGAINST THE ODDS: STRENGTHS DISPLAYED BY ABUSED WOMEN

Ilze Slabbert

INTRODUCTION

South Africa has one of the most progressive constitutions in the world and strong legislation protecting women’s rights. After Rwanda and Sweden, South Africa has the most female parliamentarians. Yet the constitutional provisions for women have made little progress from paper to practice. Although women have more rights and are represented to a higher degree in different institutions, violence against women is still very prevalent. It is estimated that a woman is killed by her male partner every six hours in South Africa, the highest incidence of death by domestic violence in the world. These statistics demonstrate that violence against women has become the norm in South Africa. It is regarded as a given, something that women just have to endure, and it therefore receives little attention in general and also specifically in the social work profession (Björnberg, 2012).

The impact of domestic violence is far-reaching, with serious consequences not only for the battered woman, but also for her children and society at large. Some scholars even argue that society as a whole suffers practically and morally by failing to stop or minimise domestic violence, thus allowing the perpetuation of a subculture that devalues women (Carlson, 1991:292; Danis & Lee, 2003:147; Vincent & Juriles, 2002:8). Research done by Bollen, Artz, Vetten and Louw (1999:6) concluded that domestic violence knows no geographical, cultural or linguistic boundaries, and that it can be seen as a global, universal epidemic. It affects women in all spheres of life. Violence towards women by an intimate partner is a social and tragic problem of enormous proportions. Domestic violence can be formally defined in the following significant, yet poignant and harsh way: “an act by a member of a family or household against another member that is intended to result in physical harm, bodily injury, assault or a threat that reasonably places that member in fear of imminent physical harm” (Stephens & McDonald, 2002:79).

Many battered women do not leave their situation, often because they do not have the means to escape. Some literature (Jackson & Dilger, 1995:51; Makofane, 2002:86; Nordien, 2003:40) suggests that some battered women display certain strengths in the midst of their difficult circumstances. Women who remain in an abusive relationship tend to acquire mechanisms to cope with their circumstances. These women may be capable, motivated, resilient and respectable, and have a number of competencies and resources that may be used to improve their situation (Callaghan, 1995:18; Gelles, 1999:21; Makofane, 2002:85; Riger, Bennet, Wasco, Schewe, Frohmann, Camacho & Campbell, 2002:33). Consequently, the aim of this study was to investigate the strengths displayed by abused women.
THEORETICAL BACKGROUND: THE STRENGTHS PERSPECTIVE

The strengths perspective provides a meaningful approach for social workers to address domestic violence. This perspective requires social workers to view their clients and their environments in a different way from a reactive problem-solving approach that often inhibits healing, development of personal traits and empowerment. Assessment of abused women should be aimed at ultimately enabling them to discover and explore their strengths and resources. Service rendering should be directed towards assisting these women to achieve their goals, realise their dreams and overcome their own inhibitions and misgivings to face and challenge a community that might look down on them. They should be viewed as capable, motivated, resilient and respectable. The strengths perspective assumes that clients have a number of competencies and resources that may be used to improve their situation (Lee, 2001:94; Roche, 1999:23; Saleebey, 2002:1).

Although the strengths perspective does not turn a blind eye to the problems or pain that abused women experience, it guides social workers to identify, build on and mobilise the women’s personal strengths. The Integrated Service Delivery Model (2006:7) states: “the social development approach aims at collective empowerment, facilitating processes that help the poor, vulnerable and marginalised to regain control over their lives”.

The Integrated Service Delivery Model (2006:10) propounds the following core values that complement the strengths perspective. The first value is acknowledgement of and respect for people’s potential to develop and change. The pain people experience when facing a challenge or traumas should be identified and dealt with. For many abused women there is real use and purpose in addressing, acknowledging, re-evaluating and putting into perspective the pain and trauma of their lives. Catharsis, grieving, expression of rage, anxiety and reconstruction are important in developing an understanding of what their struggles were, what current challenges there are, and what emotional and cognitive baggage they carry with them. It is important for these women to let go of the past and obtain a perspective on the present and the future that would be more hopeful. For some it may be beneficial to explore the roots of trauma in their family, community and culture. The purpose is always to look for seeds of resilience and rebound, the lessons learnt from adversity and the different types of strengths people might experience (Saleebey, 2002:90; Yoshihama, 2000:229).

The second value of the Integrated Service Delivery Model (2006:10) is the recognition of the rights of all to participate in their own development and decision making, and to be accountable for their own lives. Sometimes people do not want to acknowledge their competence, reserves and resourcefulness. Signs of strengths are also sometimes hidden under the rubble of years of self-doubt, the blame of others and sometimes the burden of a diagnostic label. Sometimes the difficulty of discovering strengths pertains to a lack of expression or disbelief or lack of trust (Hagen, 2001:119; Saleebey, 2002:91).

Social workers could adopt certain ways of discussing issues to make a person’s problem less mysterious and more manageable. Life consists of real challenges and if
people realise that they do not have to view their problem as an esoteric category of psychological diagnosis, but just as a challenge, they might be able to face a difficult situation much better. Problems should no longer take centre stage, but should be viewed as minor characters with small roles. The strengths perspective is anchored in the belief that a problem does not constitute all of a person’s life. A person is always more than her problem. Problems do create uncomfortable emotions and do signal danger, but having a problem is not the problem, rather how a person is going to deal with it. For example, an abused female survivor might decide that despite her violent marriage, she is going to start a support group for other women with a similar challenge in her area. This helps her to see her difficult situation as not overwhelming (Saleebey, 2002:92; Vandergriff, Andersen & Braun, 2004:371).

The third value is of commitment to facilitate social processes that build on strengths, effective relationships, and healthy organisations and communities (Integrated Service Delivery Model, 2006:10). A female survivor of domestic violence could be encouraged to take risks to act on her expectancies, using the newly found competencies as well as already active strengths. She could, for example, go to a shelter for a couple of weeks or even just share her story with a trusted friend. Social workers can act as advocates. In a case of domestic violence this would imply assisting the woman to gain an Interim Protection Order (IPO) in terms of the Domestic Violence Act, Act 116 of 1999, and giving her the opportunity to explore her own unique strengths (Saleebey, 2002:92).

In assessment the focus should be on strengths in the client and the environment. Obviously some personal and environmental obstacles might hinder the resolution of difficult situations. Focusing on strengths might enable creative negotiation through these obstacles. Assessment of strengths could be done in a multidimensional way, such as exploring interpersonal skills, motivation, emotional strengths and the ability to think clearly. To discover these strengths is central to intervention. Multidimensional intervention includes an examination of power and power relationships in transactions between the client and environment (Chilman, 1977:1385; Perilla, Bakeman & Norris, 1994:325; Saleebey, 2002:94; Siporin, 1977:507).

What happens after a challenge has been dealt with should also be taken into consideration. The social worker should try to cement the foundation of an abused woman’s strengths. If, for example, a female survivor of domestic violence indicates that her strengths are her ability to predict violent outbursts from her partner and to escape from potentially violent situations, these strengths could be cemented together in a foundation of being a survivor. A process of disengagement might also be part of the intervention, especially if a woman has to leave a shelter and return to her old circumstances, or start a new life without her partner. It is important to determine that a woman’s personal strengths and communal resources are identified and in place (Lee, 2005:3158; Roche, 1999:24; Ruiz-Perez & Mata-Pariente, 2006:1156; Saleebey, 2002:91).
RESEARCH DESIGN AND METHOD
The goal of the study was to explore the strengths displayed by abused women. The research question was “What are the coping mechanisms/strengths of abused women?” To address this question a qualitative research approach was utilised in order to gain a deeper understanding of the strengths displayed by abused women. In qualitative research the experience of the participants and their lived world as well as their feelings and thoughts are of importance (Fouché & Schurink, cited in De Vos, Strydom, Fouché & Delport, 2011:316).

The study utilised an exploratory and descriptive design such as described by Fouché and De Vos (cited in De Vos et al., 2011:95). Exploratory studies aim to gain insight into a situation, phenomenon or person(s). In this study, insight was gained into strengths displayed by abused women. Strydom (2013:152) explains that in exploratory research everything that the researcher finds might be of importance. Creative questions should be posed and serendipitous factors could have an influence on the findings. A “thick description” of the data of the interviews was obtained, and in this regard the study can also be viewed as descriptive. Descriptive and exploratory studies often overlap, as was the case in this study.

Two non-governmental organisations (NGOs) and the services of a psychologist were used to obtain the sample of 20 participants for the study. Purposive sampling and snowball sampling were used. Purposive sampling was used as 16 of the participants were selected for their first-hand knowledge and experience of domestic violence (Whittaker, 2009:34).

Snowball sampling was also used, because the NGOs could not identify enough participants to reach saturation. In snowball sampling the researcher collects data on a few participants who in turn refer him or her to other participants. Four participants were identified in this way (Strydom & Delport, cited in De Vos et al., 2011:393). The sample was obtained from two small towns in the Western Province and three suburbs in Cape Town, where the NGOs and psychologist render services.

The sample was drawn from a population that had to meet the following criteria for inclusion:

- They had to be female, between the ages of 22 and 60;
- They had to be in an abusive relationship at the time of the study, or had to have been in an abusive relationship fewer than six months previously;
- They had to be residing in or around Cape Town;
- They had to have received professional help from a social worker, psychologist or nursing sister during the preceding six months, or still be receiving such help (Slabbert, 2010:110).

Limitations regarding the study were that the study was done in only one province, namely the Western Cape. Second, a relatively small sample was taken, and therefore
the findings could not be generalised. As this study was explorative and descriptive in nature, further research is needed to verify findings.

Ethical considerations included informed consent, confidentiality and debriefing. All the participants signed a consent form, stating that they voluntarily took part in the study and did not mind the interview being recorded. No personal information of the participants was displayed and pseudonyms were used. The participants were offered the opportunity to debrief after the interviews. They all had access to professional services should they want to debrief at a later stage. This study was approved by the Ethics Committee of Stellenbosch University (Mouton, 2006:24).

RESULTS OF THE FINDINGS

Profile of the participants
The age of the participants was between 23 and 49 years. All of them still had children to care for. Fourteen of the participants were in a relationship with a husband or a boyfriend. Six of the participants (30%) were separated from their partners at the time the interviews were conducted. The decision to leave their partners was not easy, as all of them faced huge financial challenges. Only two of these six participants who were separated from their partners seemed adamant never to return. It is significant that none of the participants had a post-matric education. Only four participants (20%) had Grade 12. Eight (40%) participants had a secondary educational level of Grade 8 to 11. Six participants (30%) had a primary school education varying from Grade 4 to Grade 7. Two participants (10%) were illiterate.

The theoretical discussion indicates that the strengths perspective may enable social workers to develop a better understanding of the nature of the strengths experienced by abused women. Saleebey (2002:9-22) identified a lexicon of strengths. For the purpose of this study the following five strengths will be presented with the results of the study.

Hope
The first theme that was identified was that of hope. To have hope despite adverse circumstances is a valuable strength in difficult times. A social worker’s expectation of her client to prevail through tribulations, translates into the rebirth of hope, the revival of a dream, no matter how small. A focus on possibility, an eye cast to a brighter future, and the creation of justifiable optimisms, all promote movement toward one’s aspirations.

One of the most intriguing aspects of human functioning is probably the placebo effect, which has long been recognised in medical and pharmaceutical research. Its power to change has hardly been recognised. If a person is sick, but has a hope, an expectation to get better, the inner healing systems are mobilised. If people have dreams and aspirations there is hope that circumstances would get better (Saleebey, 2002:83).

It is meaningful to note that most of the participants indicated that they had hope and identified that as a coping mechanism: “I believe and hope that everything will come right and that I’ll be happy. It is hope that lets me go on…” (Val). This correlates with
the literature. According to Lazarus and Folkman (1984:7), coping resources in abused women could include a positive outlook on life and a hope that things would improve. Postmus (2000:244) and Saleebey (2002:101) argue that it is better to focus on the bright side, capacities and hope, rather than on the problems and hopelessness. It is significant that it is this hope that helps people go on and not give up despite difficult circumstances: “I am going forward without him. I am going to go on with my life...” (Diane).

“What is your dream in life?” was specifically asked of the participants as part of the semi-structured interview. It is meaningful that all of them said that to be safe was part of their dreams. Eighteen participants (90%) indicated a house of their own with their children as part of their dream. Their dreams varied from accommodation: “If I could just have a place of my own for me and the kids...” (Lara), to a better life for their children: “I wish I could be on my own, with my children with me and that I have a good job and earn enough to look after my children...” (Meg), to a hope that circumstances will improve: “I believe and hope that everything will come right and that I’ll be happy...” (Val). Saleebey (2002:80) notes that despite disappointments and struggles in life, some abused women will press forward and continue to dream of a better life. If people have dreams and aspirations, there is hope that circumstances will get better. The clear expectation of the social worker should be that the person would stand up and get out of the hole, using her unique set of strengths. There should be an expectancy, a hope and belief that things would improve (Harney, 2007:73; Hosseini, 2007:241, Saleebey, 2002:83; Profitt, 1996:23).

**Resilience**

The next theme that was identified is that of resilience. Grossman, Cook, Kepkek and Koenen (1999:3) define resilience as “doing well in the face of a history of serious trauma or stress”. According to several authors and scholars (Ali, 2007:5; Grossman et al., 1999:3; Harney, 2007:73; Humphreys, 2003:137; Lee, 2005:3158; Profitt, 1996:23; Saleebey, 2002:11; Vandergriff et al., 2004:371), it is the rule rather than the exception that people do rebound from serious hardship. Thus despite particularly demanding and stressful experiences, even ongoing ones, this does not inevitably lead to vulnerability, failure to adapt and/or psychopathology. Resilience does not imply a cheerful disregard of difficulties and challenges or a naive discounting of life’s hurts and pains, but rather the ability to bear up in spite of all these ordeals. Emotional and physical scars will be evidence of the damage that took place in a person’s life. Especially women who are in an abusive relationship often have physical, emotional and psychological scars. Resilience should be seen as a process of continuing growth and articulation of capacities, knowledge, insight and virtues derived through meeting life (Ali, 2007:5; Humphreys, 2003:137; Saleebey, 2002:11).

As the strengths perspective implies, abused women should be viewed as survivors rather than victims. Half of the participants (50%) viewed themselves as survivors and indicated a “fighting spirit”. Resilience varied from overcoming difficulties: “I experienced very difficult times in my life, but I survived every time...” (Meg), to making
the best of bad circumstances: “I went through hell..., we went through a lot, but we will get through it...” (Sally), to a fighting spirit: “I will get to the top, even if the pressure is sometimes too much. I am a fighter and he won’t get me down...” (Amy).

Several authors (Humphreys, 2003:137; Lee, 2005:3158; Profitt, 1996: 23; Saleebey, 2002:11; Vandergriff et al., 2004:371) note that people do rebound from serious hardship, as the above excerpts indicated. Even ongoing stressful situations such as experienced by these women do not necessarily mean vulnerability, but rather a “fighting spirit”. Some abused women are able to identify their own courage, wisdom and resilience, and are able to view themselves as capable human beings, despite the fact that their dignity is mostly being ignored by their intimate partners (Roche, 1999:25).

Pride
The next strength, closely linked to resilience, is pride. Several authors (Humphreys, 2003:137; Laird, 2001:271, Makofane, 2002:84; Profitt, 1996:23) agree that people who have come through a difficult trial in their lives, who have rebounded from misfortune and hardship have survivors’ pride, closely linked to resilience. Often this self-regard is buried under an accumulation of blame, shame and labelling, but if social workers focus on strengths, this survivors’ pride will be uncovered and will start to blossom (Saleebey, 2002:87).

Six of the 20 participants were separated from their partners. All of them (30%) mentioned “survivors’ pride” in some or other form: “Every time I get on top of it. I was a prostitute, I was a “druggy”, I was an alcoholic... I have been clean now for 9 years. I am a winner!” (Rosy) “I always believed I was a victim... that I did not have a choice and that things just happen. A while back I realised I am a survivor. How many women can sit here today and say they have been molested, raped, beaten up, messed up, kicked, left as an unwanted dog? And every time I just went on...” (Tina). Humankind has a dignity called “survivors’ pride”. It is a deep sense of overcoming challenges and obstacles despite the scars, hurts and even terrors (Humphreys, 2003:137; Laird, 2001:271, Makofane, 2002:84; Profitt, 1996:23; Saleebey, 2002:87).

Healing and wholeness
Healing and wholeness are also closely linked to resilience and pride. Healing implies “both wholeness and the inborn facility of the body and mind to regenerate and resist when faced with disorder, disease and disruption” (Saleebey, 2002:11). Healing and wholeness imply that human beings have naturally occurring self-righting tendencies as well as the inclination for healing. Trauma, environmental toxins (such as a patriarchal society that does not view women as dignified human beings), bodily disorganization (as a result of illness, injury, malnutrition or old age) and some professional intervention philosophies and systems that do not view people as being capable of seeking their own solutions for challenges might hamper healing, but it seems that the human spirit has a natural tendency to heal spontaneously. This aspect of healing and wholeness challenges the view of the disease model where only experts know what is right for their clients and think that curing and healing or transformation comes exclusively from outside
resources and not from the clients’ capabilities (Grobler, Schenck, & Du Toit, 2003:14; Saleebey, 2002:11).

Determination was one of the ways which participants indicated as helping their journey towards healing and wholeness. Five of the participants (25%) were determined to break away from the abusive relationship, even if it was at a later stage: “I am going forward without him. I need to live my life as whole person...” (Diane). This echoes Laird’s view (2001:295) that women from all spheres of life are slowly but surely becoming more courageous and are breaking their silence. Some write their stories, others go to court and gain Interim Protection Orders in terms of the Domestic Violence Act, Act 116 of 1999, others go to social workers, others leave their situation. Those who stay rediscover an inner strength. They reshape their stories and do not view themselves as debilitated or as victims, but as survivors. They are determined to survive and not let their abused partners get them down: “I have a life without him now. I am on the road to recovery...” (Nita).

**Personal qualities, traits and virtues**

The final strength that was identified relates to personal qualities, traits and virtues. Sometimes a sense of humour, caring, creativity, loyalty, insight, independence and/or patience is forged in the fires of trauma and catastrophe. These personal qualities in people’s lives might become sources of energy and motivation to help them through crises. The talents people have could also play a role. These include activities such as playing a musical instrument, baking cookies, applying domestic talents or artistic talents. These qualities can be instrumental to foster solidarity, strengthen mentorship or to cement friendship and help to soften the blows of adversity, including domestic violence (Ruiz-Perez & Mata-Pariente, 2006:1156; Saleebey, 2002:86).

Two ways in which participants displayed their personal qualities, traits and virtues were by tackling projects and making an attempt to improve their educational level.

Two participants (10%) were busy with projects and indicated that this helped them to cope. Sally made a scrap-book: “I started to make an Oprah scrapbook. I have learned from it how to deal with life and I apply what I have learned. This helps me to think ahead. I take one step at a time...” and Rosy learned to make dried sausage (“droëwors”): “I have also learnt to make “droëwors”. If I can use his machine, I sometimes sell it on a Saturday morning...”. Saleebey (2002:80) is of the opinion that every person has knowledge and talents, skills and resources that can be used to press forward towards a fulfilling life. Thomson (2006:42) conducted art classes for abused women who worked with clay and eventually displayed their work. One of them said: “We are strong and fragile like the clay we work with. It soothes and calms us, connects in us with our creative passion, moving us forward in our lives.” Thomson (2006:42) observed that practical art projects can help abused women to express and transform their pain into something constructive and to discover their strengths. One of the women who took part in this art exhibition said, “this project helped us raise awareness of abuse and to remove the stigma that keeps us silent and honour those who do not have a voice”.

Social Work/Maatskaplike Werk 2014:50(2)
Three of the participants (15%) wanted to improve their educational level as expressed in the excerpts. Improving education varied from completing a Grade 10: “They want me to come back to complete Grades 11 and 12 ... But I still want to do it. I am going to do it...” (Val), to doing post-matric courses: “I also went on a computer course. I started to work as a cashier. I have learnt. Now I am a manager at my work. Next year I am going to do a bookkeeping course. I have already enrolled...” (Tina). They saw this as a way to put the past behind them and to move forward. These findings are supported by Wright, Kiguwa and Potter (2007:631), who indicated that at least one of the four participants who were interviewed was determined to improve her education in order to provide a better future for herself and her daughter. Sanderson (2008:225) observes that to find meaning in life again and to explore the world again is part of the restoration of hope. Saleebey (2002:91) and Ruiz-Perez and Mata-Pariente (2006:1156) view challenges and the desire to accomplish certain tasks such as to improve one’s education as part of a client’s hope for a better future.

CONCLUSIONS AND RECOMMENDATIONS
This study provided a picture of the strengths displayed by abused women. The following recommendations are made:

- More research should be conducted on the strengths displayed by abused women. This research should be conducted in other provinces and also with a larger sample of abused women;
- Social work intervention should also focus on the strengths of abused women;
- The core values of the Integrated Service Delivery Model (2006) should be linked with the strengths perspective in order to equip social workers to render strengths-based services to abused women;
- The lexicon of strengths displayed by abused women should be taken into consideration when social workers draw up an intervention plan;
- The strengths perspective could be utilised very meaningfully in case, group and community work with abused women.

REFERENCES


Social Work/Maatskaplike Werk 2014:50(2)
CALLAGHAN, J.E.M. 1995. **Women’s experiences of violence in intimate relationships.** Durban: University of Natal, Department Psychology. (MA Thesis)


DEPARTMENT OF SOCIAL DEVELOPMENT. 2006. **Integrated Service Delivery Model.** Pretoria: Department of Social Development.


Social Work/Maatskaplike Werk 2014:50(2)


*Dr Ilze Slabbert, Department of Social Work, Stellenbosch University, Stellenbosch, South Africa.*