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# MIDLANDS STATE UNIVERSITY

## DEPARTMENT OF PSYCHOLOGY

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Title of dissertation: Coping strategies used by adolescents in Chikanga 3 raised in families characterized by domestic abuse

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### DEDICATION

This dissertation is dedicated to God. To my parents, I thank you so much for the prayers and moral support that you gave to me day and night, you are much appreciated.

## **ABSTRACT**

*There is no way in which adolescence can be called simple time in life. Adolescents feel like they can last forever, think they know everything and are quite sure about it. At the same time they move through seemingly endless preparation for life. Nonetheless adolescence is a period of storm and stress worse still living in a house infected by domestic abuse. Social services professions are more frequently identifying children who witness and raised in families characterised by domestic abuse as victims of that abuse. The research expands coping strategies for adolescents raised in families characterized by domestic abuse. Several literatures were reviewed and a variety of behavioral, emotional, cognitive and social coping strategies were discussed. The research limitations were poor responses from participants and the study delimitation. The research design the phenomenological approach which is the blue print used to guide the implementation of a research study towards the realization of its own objectives was planned. Primary research was use to collected first-hand*

*information. Purposive sampling was used to collect primary data from a sample size in chikanga 3. The response rate was encouraging. Data was analyzed in themes and presented in tables. The researcher however found out that adolescents use quiet a number of coping strategies to over come domestic abuse. . The effects found were depression, poor peer relations, poor attachment with parents and drug use and these effects lead to poor academic performance. The researcher however recommends the government and the non-government to integrate their efforts to illegalize spouse abuse. Press statements, campaigns, workshops, picket, handouts and symposium to inform parents about coping strategies adolescents should use. The researcher also recommends ensuring participation of children and respecting their views.*

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## **CHAPTER ONE**

### **INTRODUCTION AND BACKGROUND TO THE STUDY**

#### **1.1 INTRODUCTION.**

Adolescence is a stage of storm and stress. However being a child or a teen and living in a house infected with domestic abuse can always be devastating resulting in psycho-social effects. The study sets to find the coping strategies of adolescence in Chikanga 3 raised in families characterized by domestic infiltration . This chapter examines the background of the study, statement of the problem, justification of the study, limitations and delimitations of the study, operational definitions and summary of the chapter which provides a conclusion of the chapter discussed.

#### **1.2 BACKGROUND**

When most people think of domestic abuse which can also be called spouse abuse, they generally picture a husband hitting a wife or a wife beating a husband not taking into consideration the challenges and the effects of children witnessing this. According to Meadows, (1998), spouse abuse is seen as affecting only men and women and not children. A number of researchers in the option of Carlson, (2008), assume that 75% of people affected by spouse are women and the other 25% are men.



According to Dobash and Dobash, (2008), many people have suggested that family violence, as it is observed today, is a recent phenomenon. Yet abuse between intimate partners has long been described repeatedly in religious and historical documents across cultures many centuries, dating as far back as the Roman Empire. Although this is too unlikely Meadows, (1998), points out that current levels of family violence reflect a breakdown in the moral structure of the family. Having taken all into consideration, McKay, (2007), concludes that children who witness spousal abuse are often the silent, forgotten or unintended victims of violence.

Spousal abuse was recognized as public concern and the needs of families began to be addressed, however the initial stages of service provision done by criminal justice systems and social services agencies, children typically receive attention only when physically injured or sexually assaulted but not taking into consideration the psychological and social effects. Carlson, (2008), purports that many people may still believe that children are not aware of the violence in their homes. There is a belief among some parents that their children are often shielded from exposure to spouse abuse.

Rhashini and Allan, (1991), report that many of the parents with whom they have worked with, believed that their children did not witness any event because they were asleep or playing outside. For example one mother was quoted, *“as far as Martin actually witnessing towards me, a lot of the abuse was either done when the kids were in bed or it was verbal abuse”*. Being an “eyewitness” to spouse abuse is not, however, the only way that children get affected. Many children describe very traumatic events that they have not visually observed, but rather that they have heard. Terri, (2007), outlines that reports by children and by adults of their childhood experiences suggest that parents may severely underestimate the degree to which their children are exposed to domestic abuse.

In reality, adolescents are exposed to domestic abuse frequently present a number of issues related to violence. Several organizations today are concentrating on addressing spousal infiltration especially against women in their communities and forgetting to address the effects on the witnesses. Dutton, (2009), noted that throughout history and in different societal and cultural context children have been considered as something less than human,

neglected, abandoned, killed and mistreated. The tragic reality is that any time a mother is abused by her partner or when a father is abused by his partner, the children are also affected both overt and subtle ways (Fantuzzo, 2001). What hurts the parent hurts the child. Several organizations, which deal with child abuse, tend to focus their attention on what they view as extreme forms such as child physical abuse, child labor and child sexual abuse. Terri, (2007), observes that generally attempt have been made to prevent the above issues in most countries but not taking a deep look on the effects of domestic abuse on these children. This led the researcher to have a keen interest on the effects of spouse abuse on children who reside in chikanga 3

### **1.3. THE STATEMENT OF THE PROBLEM**

Adolescents are affected by problems such as depression, stress and repression due to domestic abuse and end up creating strategies to deal with domestic abuse

### **1.4. SIGNIFICANCE OF THE STUDY.**

The envisaged beneficiaries of the research findings include the study being instrumental to the academic circles for future reference on other or some similar researchers and extend the degree or level of field under study. This serves as the baseline for future studies, which will evaluate the credulity of the exercise like this one at hand.

It is the researchers hope that an understanding of the current literature on how children are affected by domestic abuse and what developmental problems are associated with witnessing violence is an important foundation for program design and policy development hence vital to the policy makers.

The research will also be an eye opener to the parents, because they will know the effects of exposing their children to spouse abuse, insisting them not to underestimate the effects.

### **1.5. THE OBJECTIVES OF THE STUDY**

The objectives of the study were.

- 1.To find out the social effects of domestic or spouse abuse on adolescents

2.To find out which are the coping strategies used by adolescents witnessing domestic or spouse abuse.

3.To find the psychological effects of domestic or spouse abuse on adolescents ?

## **1.6. RESEARCH QUESTIONS**

The study was guided by the following questions.

- 1.What are the cognitive-behavioral coping strategies used by adolescents?
- 2.How do adolescents cope with emotional distress issues related to domestic abuse?
- 3.Do social coping strategies work for adolescents?
- 4.How effective are the coping strategies being used by adolescents?

## **1.7. ASSUMPTIONS OF THE STUDY.**

Adolescence are being affected by witnessing domestic abuse but people in general are not aware of it.

Parents underestimate the effects of their behavior on their children.

Adolescents usually use negative coping strategies to deal with the effects of domestic infiltration.

## **1.8PURPOSE OF THE STUDY**

The study sought to bring to the surface information on the coping strategies adolescents in Chikanga phase 3 associated with being raised in family characterised by domestic abuse. Adolescent raised in families characterised by domestic abuse continues to draw attention from scholars, policy experts, government officials and concerned citizens across the globe (Hoffman & Bahr, 2010). During the last decade, internationally, there has been a very fast accumulation of research based knowledge on domestic abuse. Some of these researches have been done under the ambit of Groves Survey. Important insights regarding domestic abuse and adolescents have been reached by participating countries. Zimbabwe, however, has not participated in these studies such that there still is a dearth of current information in this regard.

It seems there are very few researches that have been conducted to specifically focus on the coping strategies used by adolescents raised in families characterised by domestic abuse in Zimbabwe .. In view of this, the main purpose this study was to explore the dealing with emotional,cognitive and behavioral problems.

### ***1.9. LIMITATIONS OF THE STUDY.***

It is probable that this study will be affected by certain unforeseen factors. These include:

- Poor responses from participants. This could result from ignorance and lack of understanding can affect the results because of some questions.
- Some participants will not understand the true motive behind the research and they seemed apprehensive at first.
- The study's delimitation to Chikanga 3 may also affect the study because effects may differ from one person to another.

### ***1.10. DELIMITATIONS OF THE STUDY.***

- In terms of the peripheral study, this research is restricted to Chikanga 3 located in Mutare and adolescents. The researcher chose this area because of its strategic location with different families and people of different age groups to enhance the research.

### ***1.11. OPERATIONAL DEFINITIONS OF TERMS.***

#### **DOMESTIC OR SPOUSE ABUSE.**

For Helgeson, (2005), it is a physical, verbal, emotional or sexual abuse or financial bullying of one's intimate partner linked to effects that may be severe long lasting or even lethal.

#### **ADOLESCENT**

Adolescents is transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood. Moreover the term adolescent has many connotations to different people and organisations. Definitions range

from those that are purely of a legal nature to those that are functional. In all countries, the terms „adolescent“, „teenager“ and „youth“ refer to young people undergoing physical, mental and cultural transition from childhood to adulthood (The National Youth Policy of Zimbabwe, 2000). The World Health Organisation (2011) defines adolescents as young between the ages of 10-19, with further divisions for early adolescence: 10-14 years and late adolescence: 15-19 years (Lamm, 2006). The Ministry of Health, the Zimbabwe National

Family Council (ZNFPC) and the Central Statistical Office (CSO), considers those of the age group 10-24 years as youth, while the Ministry of Youth considers those between the ages 10-30 years as youth. For the purpose of this study, we define adolescence as the age group from 10-19 years and adopt Lamm's (2006) classification of adolescence into early and late adolescence.

## **COPING**

it is expending conscious effort to solve personal and interpersonal problems, and seeking to master, to master, minimize or tolerate stress or conflict, coping is expending conscious effort to solve personal and interpersonal problems, and seeking to master, minimize or tolerate [stress](#) or [conflict](#). Psychological coping mechanisms are commonly termed coping strategies or coping skills. Unconscious or non-conscious strategies (e.g., [defense mechanisms](#)) are generally excluded. The term coping generally refers to adaptive or constructive coping strategies, i.e., the strategies reduce stress levels. However, some coping strategies can be considered maladaptive, i.e., stress levels increase. Maladaptive coping can thus be described, in effect, as non-coping. Furthermore, the term coping generally refers to reactive coping, i.e., the coping response follows the stressor. This contrasts with proactive coping, in which a coping response aims to head off a future stressor

## **STRATEGIES**

A particular plan for winning success in particular activity, as in war, game, or for personal advantage. Also it is a [method](#) or [plan](#) chosen to bring about a desired future, such as achievement of a [goal](#) or [solution](#) to a [problem](#).

## **1.12 CONCLUSION**

This chapter discussed the background to the study , statement of the problem ,purpose and objectives of the study ,significance of the study ,assumptions ,definitions of terms delimitations and limitations of the study .Domestic abuse is a universal problem affecting all strata of society. However there is strata that has been sucked into the eddy of the problem; adolescence, which is a cause of great concern. Adolescence is a time when substance use typically begins and escalates. Patterns of behaviour are likely to be established over the course of adolescence setting the stage subsequent problem behaviors and multiple health risks. Thus evidence based interventions to address the coping strategies used by adolescents raised in families characterised by domestic abuse are imperative.

## **CHAPTER TWO**

### **REVIEW OF RELATED LITERATURE**

#### **2.1. INTRODUCTION.**

Domestic abuse is a problem that is entrenched in many societies around the world. Research in this area has shown that this type of violence has touched the lives of many children and witnessing domestic abuse is most commonly defined as being within visual range of the violence and seeing it occur. This chapter looks at what is domestic abuse, the different forms

of domestic abuse, what other researchers say about the effects of domestic abuse on adolescents and coping strategies used they use.

## **2.2. WHAT IS DOMESTIC ABUSE**

According to Davis and Carlson, (2005), domestic abuse often occurs in relationships that are romantic in nature and where one partner seeks to dominate and exert power over the other. In doing so, the relationship often deteriorates and may become violent.

In the view of Meadows, (1998), domestic abuse can occur in husband-wife relationships, dating relationships, with common law spouses and also in same-sex relationships. An example of spouse abuse is a case in Rehashing and Allan, (1991), which reads: *“a 26 year old man has been arrested for burning his 21 year old wife on an electric stove on suspicion that she was having an extra marital affair at the same time their child maryline was watching this act happening. The woman (name withheld) sustained serious injuries. The man told the court that he wanted his wife to stop her disappointing behavior. ‘Your worship I thought I was punishing her since this was not the first time she had an extra marital affair’ he said ‘I once caught her in bed with my friend’. It is understood that the husband switched on the stove and press his wife’s palm against the hot plate”*. Gefferner, (2000), notes that in the past decades, there have been growing spouse, domestic abuse abuse recognition of prevalence of spouse abuse in many societies and it has adverse effects on individuals, children and the whole family.

It should be noted however that domestic abuse is an important human right violation and is increasingly also seen as an important obstacle to development and poverty reduction. For Dobash and Dobash, (2008), domestic abuse is any harm or suffering that is penetrated against women or men and has negative effects on the physical, sexual and psychological well-being of the victim. Acts such as coercion, physical aggression, sexual abuse, emotional abuse, intimidation, stalking and economic deprivation cause the victims to suffer (Meadows, 1998).

In the view of Terri, (2007), prevalence of spouse/domestic abuse is concealed as a result of under reporting and under recording by the police, hence both the police and the victims is to be blamed. Under reporting of spouse abuse usually takes place because the victims usually

the women are brought up to think that spouse abuse is a normal part of gender relations. According to Rhea and Chafey, (2001), in most countries around Africa issues of domestic abuse are not considered priority thus the statistics of domestic abuse are higher than it is statistically recorded.

Jaffe et al, (1986), note that over the past 30 years, intimate partner violence has been recognized and addressed in local, state and national communities but ignoring the secondary victims of the abuse. However, Dutton, (2009), notes that initial attention given to children focused on physical injury to the child during an incident or sexual assault of the child by the perpetrator. It was noted that children often have injuries when trying to protect their mothers. They might be hurt when items were thrown or when weapons were used. Infants and small children were frequently injured if being held by their mothers when the aggressors lashed out. According to Geffner, (2002), the earliest research studies provided important documentation of the many ways in which children were physically endangered. As research progressed, a realization regarding the extent of non-physical forms of abuse and neglect became apparent (Carlson, 2008).

### ***2.3. FORMS OF DOMESTIC ABUSE.***

Abuse is a pattern of behavior used to establish power and control over another person through fear and intimidation, often including the threat or use of violence. It happens when one person believes they are entitled to control another. According to Rhea and Chafey, (2001), spouse abuse may be emotional, verbal, psychological, economic, sexual, and physical. It may involve threats, intimidation, isolation, and a variety of other behaviors used to maintain fear, intimidation and power.

#### ***2.3.1. Physical Abuse.***

Dutton, (2009), suggests that it is important to recognize that physical abuse or battery escalates. It often begins with what is excused as trivial contact and behavior such as threats, name calling, violence in her presence (such as punching a fist through a wall), and/or damage to objects or pets. Battery often escalates into more frequent and serious attacks such as pushing, slapping, pinching, punching, kicking, biting, sexual assault, tripping, and



throwing. Meadows, (1998), note that finally, it may become life threatening with serious behaviors such as choking, breaking bones, or the use of weapons.

### **2.3.2. Psychological Abuse**

According to Jaff et al, (2000), the abuser's psychological or mental violence can include constant verbal abuse, harassment, excessive possessiveness, isolating the woman from friends and family deprivation of physical and economic resources and destructions of personal property. On the other hand, Terr, (2009), opines that psychological abuse occurs when a partner misuses the psychological and emotional factors in a relationship and power they give in order to intimidate the other partner. It is a range of behavior abuse which intends to destroy other person's self-esteem.

### **2.3.4. Verbal Abuse**

There are many categories of verbal abuse. They encompass a variety of behaviors that will be easily recognizable by those experiencing them. For instance yelled at, nagged at, ridiculed appearance and called names (Jaff et al, 2000). Abusers may ignore, ridicule, disrespect, manipulate words and falsely accuse people to submit to undesired behavior. While oral communication is most common in the view of Gefferner, (2000), it also includes abusive words in written form. An example of verbal abuse reads, "*a married woman yesterday dragged her husband to court accusing him of calling him prostitute. The woman was seeking peace order against her husband... I'm not a prostitute, I want him to stop coming to work place harassing me, he insults me using vulgar language in front of the children one of which is 16 years old, she said. However the husband shielded himself saying, 'I caught her red handed with another boyfriend'. However the magistrate granted peace order in favor of the wife and she also barred him from verbal abuse*" (Helgeson, 2005).

### **2.3.5. Social Abuse.**

Dutton, (2009), defines social abuse as the constant monitoring and control of a partner's activities, outing and friendship. The victim may be forced to account for every movement and may be denied the right to leave the house.

## **2.4. HOW OFTEN DO ADOLESCENTS GET EXPOSED TO DOMESTIC ABUSE**

Estimates vary on the number of children or teenagers who witness one parent abusing another. The two most widely cited statistics are those developed by Carlson, (2008). Carlson estimated that “at least 3.3 million adolescents yearly are at risk of exposure to spouse abuse. Her estimate is derived from earlier studies that found approximately 3 million American households experienced at least one incident of serious spouse abuse each year (Jaff et al, 1986). Carlson adjusted this finding for the estimated number of households with children (55%) and then multiplied by the average number of children per household (two). Carlson, (2008), has estimated that there may be as many as 10 million teenagers exposed to domestic abuse each year.

Carlson estimates resulted from a survey in which adults were asked “whether, during their teenage years, their father had hit their mother and how often” and vice versa. He found that about one in eight or 12.6% of the sample recalled such an incident with 50% remembering their father hitting their mothers, 19% recalling the reverse, and 31% recalling both hitting the other. Adults recalled an average of 8.9 such violent incidents with a median of 4 events. Rehashing and Allan (1991) goes on to estimate that “at least a third of American children have witnessed violence between their parents, and most have endured repeated instances”. Gelles’ study cited in Dobash and Dobash (2008), a national survey 30% of parents who admitted the existence of adult domestic violence in their home reported that their children had witnessed at least one violent incident over the duration of the marriages.

These findings are supported by Davis and Carlson (2005) whose recent study of 550 college students found that 118(41.1%) of the 287 women and 85 (32.3%) of the 263 men she studied had witnessed abuse by one parent against the other. Regardless of the way these estimates of children’s exposure are derived, it is clear that large numbers of children are exposed to violence between their parents. It is also likely that this exposure occurs more than once and may be present over the course of a child’s development

Contrarily Geffner, (2002), is of the view that children are also affected by watching violence in different areas. Any discussion of problems associated with children witnessing spouse must acknowledge several areas of related research, including the research on: (1)

witnessing discord in marital and other intimate adult relationships; (2) witnessing community violence; and (3) witnessing violence conveyed over popular media. These other ways that children witness conflict and violence are very closely related to witnessing domestic assaults. For Meadows, (1998), the research results reported in these areas are often difficult to separate from exposure to spouse abuse and it is, therefore, important to acknowledge, however briefly, the important connection of these areas to the primary focus of this article which is on spouse abuse.

The violence that adolescents witness in their homes is most often part of a larger context of marital or relationship discord. According to Dutton, (2009), the research on children who experience discord between adults at home is reported in a literature that is mostly separate from that on witnessing violence. This separate literature reports on research studies that have examined the emotional health and behavior of children who live in families characterized by marital dissatisfaction, conflict, and divorce. Terri, (2007), pointed out in an early review of this literature that most studies prior to the early 1980s focused on associating child problems with adults' reports of marital satisfaction. The problem with these earlier studies is that they neither directly measured child's exposure to relationship conflict nor did they identify exposure to domestic violence. Furthermore, in families where there was great relationship dissatisfaction among the adults, much of the dissatisfaction was hidden from the children according to parent reports (Peled, 1993).

More recently, McKay, (2007), reviewed studies that directly examined the relationship between marital conflict and children's adjustment. McKay, (2007), argues that marital conflict is multi-dimensional, that it "may vary infrequency, intensity, content, and resolution and can be overt and covert" and that children's adjustment is also multidimensional with addictiveness, emotional health, self-concept and achievement all being important factors of it. Fifteen of the 19 studies (79%) reviewed by Grych and Fincham in Folkman and Lazarus, (1990), found a statistical relationship between marital discord and child maladjustment. The findings were found in all types of families studied; those having gone through separation or divorce, intact families seeking counseling, and intact families recruited from the community.

Westra and Martin, (1991), opine that the more a child was exposed to spouse abuse the more likely he or she would experience child adjustment problems. These findings hold true across all types of families studied. However, there is no indication that witnessing physical violence was measured in these studies; there is a likely mixing of non-violent and violent

marital discord. A wide range of child adjustment problems were found to be associated with exposure to marital conflict. These included externalized problems such as conduct disorder, delinquency, antisocial behavior and aggression as well as internalized problems such as depression, anxiety, and withdrawal (Jaffe et al, 1989).

## **2.5. COPING STRATEGIES .**

A number of authors have pointed to the mechanisms that children use to cope with violence exposure. For example, Kerouac, et al. (1986) in Terr, (2007), report that children's behavior during a violent event included crying, shouting at their mother or pleading in her favor, remaining silent, leaving the room, playing a part in the violent event, seeking attention through noisy behavior and restlessness, or choosing one parent as a target. Coping strategies refer to the specific efforts, both behavioral and psychological, that people employ to master, tolerate, reduce, or minimize stressful events (Taylor,1998). Two general coping strategies have been distinguished, that is problem-solving strategies which are efforts to do something active to alleviate stressful circumstances, and emotion-focused coping strategies which involve efforts to regulate the emotional consequences of stressful or potentially stressful events. Research indicates that people use both types of strategies to combat most stressful events Folkman & Lazarus, (1980).

After the violent event, children sought security and comfort from their mother or adopted a parent role to comfort her. O'Brien, Margolis, John and Krueger, (1991), in Dobash and Dobash, (2008), found that the boys in their study who witnessed physical aggression between parents were less able to deal with simulated family interactions, more likely to report that they would actively intervene in family conflicts, more aroused by simulated conflicts and less likely to criticize people in the simulated conflicts than were boys from families where no violence was reported. McKay, (2007), also reported that adolescent boys who had experienced serious physical violence and been exposed to interfamily weapons use at home were significantly more likely than others to use aggressive control as a coping strategy.

On the other hand, Jaffe et al, (1989), point out that while their research on children resident in shelters has shown large numbers of them to exhibit negative effects associated with exposure to violence, there are many other children in their studies who show few negative

symptoms and some even show higher social competence than comparison children. Indeed, several authors have suggested that specific coping strategies may lessen the effects of violence on children. Peled, (1993), conclude that “perhaps the experience of observing spouse abuse affects children by a less direct route is used, with cognitive mechanisms playing a greater role in shaping the effects of observing violence”.

Peled, (1993), found that the children mostly applied this type of strategy including “wishing the violence away at the time of a fight, reframing and minimizing the violence, forgiving father, and refusing to talk about the violence”. Problem-focused strategies that children commonly used were characterized by actions aimed at changing events and were used less often by children in Pele’s, (1993), study in South America. These included children physically distancing themselves from or inserting themselves into the violent event.

Holtzworth-Munroe, Smutzler and Sandin’s (in press) cited in Meadows, (1998), review of the literature also suggests that child problems resulting from witnessing domestic violence may be reframed as active coping mechanisms. In their view, children’ problems are ways to express negative emotions, receive reassurances and divert attention from marital problems in the home. There is, however, very little specific research to date that focuses on how child witnessing spouse abuse successfully cope with their home environments. Gefferner and Rosbaum, (2002), found that the children mostly applied this type of strategy including “wishing the violence away at the time of a fight, reframing and minimizing the violence, forgiving father, and refusing to talk about the abuse.

### **2.5.1 Emotion-Focused Coping Strategies**

Adolescents after witnessing domestic abuse they also use emotion-focused coping relates to those coping behaviors aimed at managing these emotions or regulating the emotional distress ([Green et al., 2005](#); [Endler & Parker, 1990](#)). Emotion-focused coping strategies focus on some aspect of the stressful situation and are generally considered to be maladaptive. Emotion-focused coping also relates to activities aimed at controlling the emotional impact of the event, such as feelings of fear, anger, and sadness([Lazarus & Folkman, 1984](#)). The main issue with emotion-focused coping is how to manage these emotions and thus limit the negative psychological distress levels. Emotion-focused responses are aimed at regulating emotional distress[Lazarus & Folkman, \(1984\)](#). Moreover Not all emotion focused coping is

useful, such as drinking or using other substances to dampen emotions or “taking out your anger” on others. Women tend to use emotion focused coping more often than men. Some women feel that once they have control over their emotions, they are ready to move to problem focused coping. Emotion- focused (Lazarus, 1993). emotion-focused coping effort involves taking direct action to change the stressful situation. Emotion-focused coping effort attempts to regulate or reduce the emotional consequences of the stressful event. When a person perceives an event as unchangeable or irreversible may use emotion-focused coping. The same person may employ emotion focused coping where he/she finds the stressful situation manageable. Academic competency is among the most demanding cognitive and motivational challenge that growing adolescent’s face in their life. The importance of academic competence lies in the fact that academic records in the school/college life predominate social reactions and adolescents’ future occupational picture. The growing sense of personal control and self- esteem in adolescents as a result of academic achievement serve as a major personal force in their ultimate level of accomplishment. Academic competence will influence the coping pattern of adolescents. Past studies demonstrated that students’ coping efforts significantly predicted their academic achievement in terms of grade point average .The ability to cope with challenges and setbacks has been found to be a crucial factor in students’ achievement. The relationship between coping and academic achievement was also evidenced in a study by DeBerard, Spielmans & Julka (2004) who reported that academic achievement of university freshmen was explained by their acceptance-focused coping. Escape-avoidance coping was found to correlate negatively with their academic achievement. All the findings mentioned have pointed out the role of academic standing of the students in their coping efforts and also the role of coping in academic achievement.

**2.5.2 Problem focused coping** is a more direct attempt to modify the pain experience, for example, finding a new doctor, creating a [pacing plan](#), trying a new treatment for chronic pain, or actively working to change catastrophic or other disruptive thinking. Generally speaking, men tend to prefer problem focused coping over emotion focused. This preference may cause difficulties if men neglect the emotional aspects of chronic pain. Emotional distress can make pain worse, and may undermine a man's problem focused efforts. There are many ways of coping with stress. Their effectiveness depends on the type of stressor, the particular individual, and the circumstances. For example, if you think about the way your friends deal with stressors like exams, you will see a range of different coping responses. Some people will pace around or tell you how worried they are, others will revise, or pester

their teachers for clues. Lazarus (1991) and Folkman (1984) suggested there are two types of coping responses [emotion focused](#) and problem focused: Problem-focused coping targets the causes of stress in practical ways which tackles the problem or stressful situation that is causing stress, consequently directly reducing the stress. Problem focused strategies aim to remove or reduce the cause of the stressor. Taking Control– this response involves changing the relationship between yourself and the source of stress. Examples: escaping from the stress or removing the stress. Information Seeking– the most rational action. This involves the individual trying to understand the situation for instance using the internet and putting into place cognitive strategies to avoid it in future. Information seeking is a cognitive response to stress. Evaluating the pros and cons of different options for dealing with the stressor. In general problem-focused coping is best, as it removes the stressor, so deals with the root cause of the problem, providing a long term solution. However, it is not always best, or possible to use problem-focused strategies. For example, when someone dies, problem-focused strategies may not be very helpful for the bereaved. Dealing with the feeling of loss requires emotion-focused coping. Problem focused approached will not work in any situation where it is beyond the individual's control to remove the source of stress. They work best when the person can control the source of stress (e.g. exams, work based stressors etc.). It is not a productive method for all individuals. For example, not all people are able to take control of a situation. People with low self esteem typically use emotion focused coping strategies.

### **2.5.3 Cognitive-Behavioral coping strategies**

Cognitive-behavioral coping refers to those cognitive efforts utilized to regulate the stress. Defining the problem, generating, evaluating, and implementing solutions are all considered indicative of a cognitive behavioral coping strategy approach to coping. After the violent event, adolescents use coping strategies in order to reduce the extent of the effects. Peled, (1993), suggests that child witnesses of domestic or spouse abuse use what Folkman and Lazarus, (1980), call both cognitive-behavioral coping strategies those are that adolescents uses to control his or her own emotional response to witnessing violent events. Cognitive-behavioral coping is goal-oriented. [Folkman \(1997\)](#) found that problem-focused coping is more likely to contribute to positive emotional outcome in part because an individual has a sense of control in the problem-solving process. In short, the problem-focused responses are aimed at altering person-environment relationships. Lazarus (1991) and Folkman (1984) propounded that there are two types of coping responses which consists of [emotion focused](#)

and problem focused. Cognitive-behavioral coping targets the causes of stress in practical ways which tackles the problem or stressful situation that is causing stress, consequently directly reducing the stress. Cognitive-behavioral strategies aim to remove or reduce the cause of the stressor. In general Cognitive-behavioral coping is best, as it removes the stressor, so deals with the root cause of the problem, providing a long term solution. Dealing with the feeling of loss requires emotion-focused coping. Problem focused approached will not work in any situation where it is beyond the individual's control to remove the source of stress. They work best when the person can control the source of stress for instance exams, work based stressors. Most adolescents with low self esteem typically use cognitive-behavioral strategies.

#### **2.5.4 Social oriented coping strategy**

Adolescents who had been victimized were angry expressed concerns about being negatively evaluated by self and others; expressed revenge goals; and coped by using primary engagement, social support, and aggressive strategies. Adolescents who had witnessed violence were fearful, concerned about others being harmed and losing relationships, focused on survival, and coped by using avoidant strategies. Several researchers identify a coping model that expands on the Lazarus and Folkman transactional model [Billings and Moos, 1981](#); [Endler and Parker, \(1990\)](#). They posit that in addition to problem-focused and emotion-focused strategies there are avoidance strategies. Avoidance-oriented coping refers to efforts to direct attention away from the stress. Unlike emotion-focused, with the focal point being on some aspect of the stressful situation, victims utilizing the avoidance dimension of coping distance themselves from or avoid the stressful situation. avoidance coping. This type of coping involves actions or mental strategies targeted at avoiding a stressful situation. In the context of chronic pain management, distraction is one of the major forms of avoidance coping, including, for example watching a movie, reading, having sex, getting engrossed in a hobby or social activity. (Interestingly, [catastrophic thinking](#) interferes with the effectiveness of distraction – another reason to evaluate whether you sometimes think in catastrophic ways.) Sometimes avoidance is not helpful. For example, it is not uncommon for people with lower back pain to avoid activities ranging from walking to having sex, because they are afraid that they may cause greater damage to their back. This fear-avoidance cycle can lead to deterioration of muscles, and ironically, greater weakness and pain.

No single type of coping is most effective for all people or all situations. Instead, being flexible about how you cope and using all three styles will provide the greatest opportunities



for effective chronic pain management. Take a look at your coping style by monitoring your coping strategies for a day or two. Use our [Coping With Pain Monitoring Form](#) to monitor coping efforts throughout the day. Indicate whether a given coping attempt is emotion focused, problem focused, or avoidance focused. Then rate how helpful each is. At the end of the day, take a look at whether you are using each type of coping and how helpful each type was.

## **2.6. THEORITICAL FRAMEWORK**

In , Lazarus(1966) presented a contextual approach to stress and coping with his book *Psychological Stress and the Coping Process Lazarus, (1966)*. This way of thinking about coping has subsequently influenced research and development of new theories. Based upon this approach, coping can be defined as ‘constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person' Lazarus & Folkman, (1984). According to Lazarus & Folkman, (1984). different coping strategies can be globally characterized as either problem-focused or emotion-focused ones. Problem-focused coping is attempts made to improve the stressful situation by doing something active, such as confrontation, seeking information, and generating possible solutions to a problem. Emotion-focused coping is thoughts and feelings used to try to reduce the feeling of stress, such as distancing, avoidance, selective attention, and positive comparisons, expressing one's emotions, seeking comfort and support from others, and trying to avoid the source of stress. Lazarus and Folkman (1984) emphasize that coping strategies are process-oriented and a person can use different strategies in different situations. In addition, several coping strategies can be used in the same situation. The choice of coping strategies is influenced by the degree of perceived control, and a situation viewed as outside one's control is more likely to induce emotion-focused coping strategies (ibid).

Most studies on coping have studied adults in different stressful situations and most of the theories on coping are derived from an adult understanding of coping and coping processes. It may be that children and adults' coping strategies differ in important ways and that theories on coping need to acknowledge children's levels of cognitive functioning and developmental needs in particular.

Although the field is still lacking a unified understanding of children and adolescents' coping strategies as they face stressful events, some models of coping explicitly concerned with

children and adolescents have emerged (Compas, [1998](#); Eisenberg, Fabes, & Guthrie, [1997](#); Rudolph, Denning, & Weisz, [1995](#); Skinner & Wellborn, [1994](#)). In an effort to provide a better understanding of children's coping, Ayers et al. ([1996](#)) divided children's coping into four strategies through a four-factor model, where they combined coping orientations across behavioural, cognitive, emotional, and social modalities. They found that dividing children's coping into active coping, distraction, avoidance, and support-seeking strategies provided a better fit to their study on school children than Lazarus & Folkman's two-dimensional coping model. Active coping involves direct problem solving, cognitive decision-making, seeking understanding, and restructuring. Distraction consists of distracting actions and physical release of emotions. Avoidance refers to cognitive avoidance and avoidant actions. In support-seeking strategies, they differ between problem-focused support and emotion-focused. Support for different models of coping in the child and adolescent field are inconsistent and variable (Skinner, Edge, Altman, & Sherwood, [2003](#)). Most studies have assessed adolescents coping in the aftermath of stressful situations. To our knowledge, only one study has examined adolescents coping responses during a traumatic incident. In this study, adolescents responses in domestic violence situations were analysed. The adolescents self-reported actions to the domestic violence situation were characterized by distraction strategies such as listening to music or reading a book, or problem-solving actions such as trying to intervene. To our knowledge, no studies have examined adolescents own views of their coping strategies while experiencing disasters.

Acquiring more knowledge on coping strategies at different points in the recovery process can be useful for gaining insight into the relationship between coping and psychological adjustment. In particular, studies where adolescents themselves were asked to reflect on what they perceived as helpful coping strategies are scarce and the concept of peri-traumatic coping is still not clear. Asking children themselves about their experiences and reflections on coping strategies may illuminate distinctions between adolescents coping strategies, and point to developmental issues in coping strategies. According to a review of the field by Compas et al. ([2001](#)), there is a need to increase consensus in the conceptualization of coping in childhood that is sensitive to developmental changes. The present study contributes to the literature by assessing adolescents own retrospective perceptions on what they think and do to cope in stressful situations, and by investigating coping early in the recovery process while the stress is still occurring.

## **2.7 CONCLUSION.**

This chapter has focused on what domestic abuse is, the psychosocial effects of spouse on children and the coping strategies that they use pointing to the many areas we know little about how spouse/domestics abuse affects children's life. While a number of excellent studies are evident among those reviewed, a great deal of work lies ahead in the development of a more sophisticated understanding of how children are affected by spouse abuse. The next chapter looks at research methodology.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1. INTRODUCTION**

Methodology is concerned with the study of research methods. According to Davis and Carlson, (2005), every research requires a methodology to reach its conclusion. Without systematic way of producing data, the findings of the problem may be dismissed as guesswork. This chapter outlines the research design used by the researcher. It aims to discuss the various aspects of methodology used in data collection. It also looks at the population, the sampling procedures, the research instrument used, data collection procedures trustworthiness and ethical considerations, discussed and justifying them. According to Creswell, (2000), the quality of a research largely depends on the type of methodology used. It is hoped then that the methodology used will positively influenced the quality of the findings.

#### **3.2 RESEARCH APPROACH**

The researcher used qualitative method. According to Creswell, (2000), qualitative method is able to bring data on people's experiences, their feelings and emotions using flexible language. It also enables the researcher to do studies in-depth and the data is easy to

understand without the sweat most researchers have from statistical analysis, unless the researcher resorts to use incomprehensible jargon. However Landridge,(2004), claims that, one disadvantage of qualitative research is that if respondents are given open ended questions, the data analysis process is time consuming.

### **3.3 RESEARCH DESIGN**

The researcher used the phenomenological design to research which is sometimes referred to as the phenomenological psychology. The purpose of the phenomenological design in the view of Landridge, (2004), is to illuminate the specific, to identify phenomena through how they are perceived by the actors in a situation.

In the human sphere this normally translates into gathering ‘deep’ information and perceptions through inductive, qualitative methods. It relies on two methods of data collection which are written records of experience and semi structured interviews and representing it from the perspective of the research participant(s). According to Creswell, (2000), the phenomenology design is concerned with the study of experience from the perspective of the individual, ‘bracketing’ taken-for-granted assumptions and usual ways of perceiving things. For Silverman, (2010), phenomenological approaches are based in a paradigm of personal knowledge and subjectivity, and emphasize the importance of personal perspective and interpretation. As such they are powerful for understanding subjective experience, gaining insights into people’s motivations and actions, and cutting through the clutter of taken-for-granted assumptions and conventional wisdom.

The ‘problem’ for many researchers with phenomenological research is that it generates a large quantity of interview notes, tape recordings, jottings or other records all of which have to be analyzed and besides recognized to be too descriptive and naive. Analysis is also necessarily messy, as data doesn’t tend to fall into neat categories and there can be many ways of linking between different parts of discussions or observations (Moran, 2000).

### **3.4. POPULATION.**

According to Creswell, (2000), population is the entire set of people or objects which the researcher wishes to study. The researcher used adolescents . However since it was impossible to involve all adolescents exposed to domestics abuse because of financial and time constraints, the researcher selected a sample for study of adolescents in families charecterised domestic abuse who stay in Chikanga 3 .

### **3.5. SAMPLE SIZE.**

In the option of Silverman (2010) a sample size is a miniature, or a picture or across section of the entire group from which the sample is drawn. It is a group chosen from the population with the aim of yielding information. The researcher used a sample of 20 participants. Such a sample reflects the characteristics that are crucial to the researcher.

### **3.6. SAMPLING PROCEDURE**

The researcher is used critical case sampling it is a type of purposive sampling technique that is particularly useful in exploratory qualitative research, research with limited resources, as well as research where a single case (or small number of cases) can be decisive in explaining the phenomenon of interest. It is this decisive aspect of critical case sampling that is arguably the most important. To know if a case is decisive, think about the following statements: ?If it happens there, it will happen anywhere?; or ?if it doesn?t happen there, it won?t happen anywhere?; and ?If that group is having problems, then we can be sure all the groups are having problems? Patton, (1990). Whilst such critical cases should not be used to make statistical generalisations, it can be argued that they can help in making logical generalisations. However, such logical generalisations should be made carefully.

### **3.7. RESEARCH INSTRUMENT**

The researcher used in-depth interviews to collect data. According to Landridge, (2004), in-depth interviews are a method of collecting data that involves presentation of oral- verbal stimuli and reply in terms of oral verbal responses. The researcher used the in-depth interview in which the interviewer may probe into the respondents' answers so that they can,

if necessary be clarified. For Creswell, (2000), this is a qualitative research instrument employed when a researcher deems it necessary to obtain data from experts. It requires the preparation of interview guides in advance. The questions were carefully chosen and the manner of the questions allow the respondents to express their views.

According to Creswell, (2000), interviews are important because it allows the researcher to understand the feelings, motives and thinking of the respondent. They also facilitate for sufficient room to ask for further clarification where the researcher would not have understood. The researcher managed to interpret and take cognizance of non-verbal-cues in the respondent's views of the participants (Landridge, 2004)

However Creswell, (2000), also noted that the validity of the data may be reduced by the unwillingness or inability of respondents to give full and accurate replies to questions and the in-depth interviews proved to be time consuming for the researcher

To add on it is also difficult to locate the participant's answers such I don't know or no comment thus affecting the responses. However more than one interviewee were interviewed thereby getting information or areas not covered

### **3.8. DATA COLLECTION PROCEDURES.**

The researcher sought to use adolescents in the interviews from the school authorities and parents in Chikanga 3 .This was done by using a research letter from Midlands State University and application letter written by the researcher Having a conversation with somebody is extremely common in human interaction, and it might be thought that interviewing requires no special preparation. However, there is the issue of gaining consent from respondents. The researcher was non-directive that is to refrain from offering opinions, to avoid expression of approval or disapproval. The researcher collected information by interviewing participants. The researcher explained the aims and objectives of the study. This was done in agreement hence increased understanding. The interviews were carried out through face to face. For Creswell, (2002), face to face encounter enables clarification of questions, clear doubt and add new questions since it was a semi structured interview. It also

enabled the researcher to take into consideration nonverbal communication that was used intentionally and unintentionally.

### **3.9. DATA PRESENTATION AND ANALYSIS**

For this research project, narrative and thematic approaches to data analysis were adopted. The questions provided a guideline for the identification of thematic categories. According to Landridge, (2004), themes are units derived from patterns such as conversations topics, vocabulary, recurring activities, and meanings of folks, sayings and proverbs. They can be identified by bringing together components of fragments' of ideas or experiences, which are meaningless when viewed alone. Themes that emerge from the informants stories are placed together to form a comprehensive picture of their collective experiences. The coherence of ideas rest with the analyst, who has rigorously study how different ideas or components fit together in a meaningful way when linked together.

To present her findings, the researcher used themes and tables. Table illustrations are alluring to the eye and can be suitable replacement of mass data. They are to a benefit because they sum up and systematize data. Written descriptions were also used to interpret the data on the graphic presentations.

### **3.10. TRUSTWORTHINESS**

Researcher can incorporate measures that deal with these issues, and investigators such as Pitts (1994) have attempted to respond directly to the issues of validity and reliability in their own qualitative studies. Many naturalistic investigators have, however, preferred to use different terminology to distance themselves from the positivist paradigm. One such author is Guba (1985) who proposes four criteria that he believes should be considered. Moreover According to Merriam, the qualitative investigator's equivalent concept, i.e. credibility, deals with the question, "How congruent are the findings with reality?" Lincoln and Guba (1985) argue that ensuring credibility is one of most important factors in establishing trustworthiness. Researchers to promote confidence that they have accurately recorded the phenomena

Under scrutiny. Merriam writes that external validity “is concerned with the extent to which the findings study can be applied to other situations. In positivist work, the concern often lies in demonstrating that the results of the work at hand can be applied to a wider population. Since the findings so far qualitative projects are specific to a small number of particular environments and individuals, it is impossible to demonstrate that the findings and conclusions are applicable to other situations and populations. Erlandson et al. note that many naturalistic inquirers believe that, in practice, even conventional generalisability is never possible as all observations are defined by the specific contexts in which they occur. A contrasting view is offered by Stake and Denscombe, who suggest that, although each case may be unique, it is also an example within a broader group and, as a result, the prospect of transferability should not be immediately rejected. Lincoln and Guba (1985) stress the close ties between credibility and dependability, arguing that, in practice, a demonstration of the former goes some distance in ensuring the latter. This may be achieved through the use of “overlapping methods”, such as the focus group and individual interview.

### ***3.11 ETHICAL CONSIDERATIONS***

Ethical issues are prominent in research. According to Creswell, (2000), ethics expresses our value and the guide to achieving them. They assisted the researcher to deal with ethical dilemmas that aroused in the research. The researcher allowed the respondents to participate or not participate that is informed consent. Since the researcher was dealing with children, written informed consent was sought from parents. The researcher applied the ethics throughout the research by explaining to the participants the purpose of the research, the role of the researcher and the implications of the participants. Confidentiality was also explained from the beginning and right through. These ethics created a constructive consciousness of communication between the participants and the researcher.

### ***3.12. CONCLUSION.***

This chapter focused on the research methodology that the researcher used. There was use of research design that is blue print for obtaining data needed. The research method and instrument was explained. The research population was identified and only a sample was chosen to represent the whole population, thereby enhancing the data instruments used to



collect first-hand information. The next chapter presents data collected by the researcher as well as analyzing the findings.

## ***Chapter FOUR***

### ***DATA PRESENTATION, INTREPRETATION AND ANALYSIS***

#### ***4.1. INTRODDUCTION***

The focus of the study was to outline the coping strategies adolescents raised in families characterized by domestic abuse use.S. This chapter discusses data presentation, analysis, and

interpretation of results and findings from the research. This chapter presents detailed analysis of the research findings using thematic data analysis. A summary of findings was given and then chapter summary which concludes the chapter discussion.

## **4.2 STUDY POPULATION AND RESPONSE RATE**

**TABLE 4.1: RESPONSE RATE**

<b>Instruments</b>	<b>Number of interviews</b>	<b>Number of participants</b>	<b>Response rate (%)</b>
<b>Interviews</b>	<b>20</b>	<b>20</b>	<b>100%</b>

The interview went as scheduled and this achieved a 100% response rate hence evident of validated research findings through a 100% response rate.

### **4.2.2 Distribution of Responses by Age.**

**N=20**

Table 4.2.2 showing age distribution

<b>Age</b>	<b>Frequency</b>	<b>Percentage</b>
Below 20	4	20%
16-19	6	30%
14-17	7	35%
13	3	15%
Total	20	100%

Findings show that 20% of the participants were between ages of 13 and 14 years, 30% of participants were between 15 and 16 and 35% of the participants were between 17 and 18 years. The researcher chose this age group (adolescents) because it is a stage of storm and stress moreover that is the main focus of the study. At this stage adolescents may wonder about their future that is both exciting and frightening. Nonetheless, the bigger percentage was between 17 -18 years. This may perhaps be because, children at this stage see parents as humans' beings that sometimes making mistakes. For this reason, the researcher desires to notice if they are being affected by the mistakes by their parents. Smaller percentages were

children aged 13 - 14 because they are still in their early adolescence and cannot usually give meaningful information.

10 respondents are in high school, 8 participants are in secondary school and 2 in Primary School. The researcher used a greater percentage of adolescents in high school because they may possibly have learnt to think generally, symbolically and abstractly. For Meadows (1998) they may well be capable of thinking about and comparing moral values hence they may give practical responses and they use the decision making process unlike the younger ones.

### **4.2.3 Distribution of Responses by Gender.**

**N = 20**

Sex	Number	Percentage
male	15	75%
female	5	25%
Total	20	100%

Out of 20 participants 8 (40%) were boys and 12(60%) were girls. The researcher used a bigger percentage of girls than boys because girls may possibly more open up than boys. Additionally girls in adolescence are more likely than boys to experience a stage of turmoil because they have more physical changes hence the researcher is interested in how they handle this phase and abusive environment.

## **4.3 EMERGING THEMES**

### **4.3.1. Emotional coping strategy**

Regarding the question that do adolescents cry as a strategy to cope with domestic abuse however 16( 80%) adolescents cry as a coping have coping strategies that they use to cope with domestic abuse. ,

**Participant 13** *“my mum and dad are always fighting but I don't know why. I was sometimes in my room and my sisters never did anything so it was down to me. But I didn't know what to crying is only my solution to the abuse i am facing ”.*

This obviously shows that adolescents who do not have any handling tactics end up using negative coping strategies like crying which may lead to stress.

### **Drug Use.**

On the question of adolescents using drugs and alcohol as a means of coping to domestic abuse, 15(75%) said that when face with difficult situation, cope by taking alcohol and drugs. The following quote illustrated the use of alcohol and drug abuse as a sub theme.

Participant 4, *“ I need to belong and I am not getting it from my parents, as children we need attention from parents so drinking beer is the best way to cover up”.*

Adolescents said their substance use is related to unhappy homes and neglectful parents in which there is a great deal of tension usually unsecure attachment . From the adolescents additional enlightenment, they express that although substance may at one point give a sense of belonging, it results in a number of effects, which include sleeping disturbances, eating disorders, stress and anti-social behavior.

### **Attachment with Parents and withdrawal**

On the question do you get emotional support from other adolescents10(50%) adolescents do not simply move away from parental influence into a decision-making world of their own, as they become autonomous. Adolescents witnessing domestic abuse have proved to have attachment problems with either of their parents. The researcher found out that adolescents exposed to domestic abuse can be less dependent on their parents for emotional support.

Emotional autonomy adolescents increasingly de-idealize their parents, perceive them as people rather than simply parenting figures and less dependent on them for emotional support. For example

**Participant 12,** *“I don't think he should be called a father but an abuser even my young rather avoid him”.*

The researcher noted that spousal support is needed in helping children meet the challenges of pubertal changes of their adolescents. However, this is so unlikely if there is domestic

abuse. It was also renowned that attachment problems may not end at home but also broaden to poor peer relations. Attachment in adolescence facilitates the children's social development. Adolescents look to the future with unrestrained confidence sensing that they have limited time to accomplish what they desire. However, there is need for authoritative parents who establish a balance between control and autonomy. However, the researchers found out those parents in abusive relationships are more likely to be neglectful thus; the parents are uninvolved in the teen's life. Adolescents at this stage in life have a strong need for their parents to care about them. Due to neglectful parents, the adolescents complained that they develop the sense that their parents lives are more important . The researcher concluded that since there is no room for the children to express their views and no warm parental involvement provided to make the children more receptive to parental influence they are likely to be attached to strangers or friends

### **4.3. Behavioral coping strategies**

On the questions of what adolescents do socially in destructing themselves from domestic abuse 17 (85%) of them ends up being promiscuous having casual sex with anyone these adolescents also outline that they are at risk of being affected by diseases like H.I.V and AIDS. Some of the participants outline t

**Participant 11**, *“since sometimes I will be trying to ignore the abuse i am facing i end up having sex with anyone who comes my way”*

This also leads to unwanted pregnancies its a negative coping strategy others report to experience traumatic headaches due to the unbearable noise that occur that is so severe. However is of the view that physical effects of being the witness of domestic abuse are different from the symptoms of abuse itself. Carlson notes that instead exhibit physical symptoms associated with their developmental and physical well-being also note that anxiety like behavior is a common physical symptom in which adolescents harbor feelings of guilt, blame and shame, though this was not discovered in this research.

### **4.4 Cognitive coping strategy**

Moreover on the question of mental blocking most adolescents 17 (85%) they try to block domestic abuse by not trying to think about the situation they are into back home moreover they will end up attempting even suicides . They also note that they have poor social skills and impaired relationships with friends. Due to mental blocking however they will have low self esteem that these adolescents have that lead to depression. The respondents also outline that they experience poor peer relations due to depression. The above include not having a close relationship with best friends, having less contact with friends and suicidal behaviors also escalate. The researcher discovered that depression may doubtless affect their academic performance, memory of events and attention in classroom. Some of responses were as follows:

**Participant 14**, *“when it comes to this abusive thing, it’s so disturbing. My academic performance is affected because whenever I try to read I fail to concentrate on my schoolwork.*

**Participant 16**, *“It’s always devastating to leave in an abusive environment”*

16 year olds who witnessed domestic abuse in their home and proved to have attention problems leading to poor academic performance.

#### **4.5 Social coping strategies**

On the question of seeking religious or spiritual beliefs 18 (90%) adolescents tend to end up being attached to some beliefs as way of coping with the abuse they will be witnessing this being illustrated by participant #3

*“Going to church makes me forget about lifestyle of domestic abuse i am living under back at home”*

However female adolescents are the ones who normally use this coping strategy

#### **4.6. SUMMARY OF THE FINDINGS**

##### **Coping strategies**

Mental blocking

Disconnecting emotionally

## Physical avoidance

From the research drug use and attachment problems were the coping strategies used by adolescents witnessing spouse abuse. These lead to several effects, which are behavioral, emotional, physical and social effects. Most adolescents seem to know that they are facing psychosocial effects due to domestic abuse. The major social problems that seem to be by a number of adolescents were poor peer relations and insecure attachment. The researcher noted that adolescents have a number of coping strategies, which are, mental blocking, disconnecting mentally and physical avoidance that they use, they still face challenges since sometimes it is useless to use them. However, adolescents find coping strategies fundamental to their day to day lives.

### **4.7. CHAPTER SUMMARY.**

From this research, the researcher found out that adolescents they use coping strategies to reduce the level of the effects. While this is so, they criticize their parents mainly the abuser for underestimating the effects on them. The chapter looked at data presentation and analysis of information provided from participants. The results of data collected provided useful insight in the research area, the main highlight being the coping strategies used by adolescents raised in families characterized by domestic abuse . The responses of the study population were matched with the objectives of the study and that data was analyzed using themes. The next chapter focuses on recommendations, summary and conclusions drawn from the study

## ***Chapter five***

### ***DISCUSSIONS CONCLUSIONS AND RECOMMENDATIONS***

#### ***5.1. INTRODUCTION***

This chapter shall present a summary of research findings and conclusions. The findings are a summary of research results alluded to in the previous chapter. The summary in this chapter is the synthesis of the research objectives, literature review, research methodology, data presentation and analysis. The conclusions presented in this chapter were drawn from the research findings from both primary and secondary sources of information that is literature review and field research respectively. Recommendations and suggestions for future studies will be provided.

#### ***5.2. REVIEW OF METHODOLOGY***

The researcher sought to investigate coping strategies used by adolescents raised in families characterized by domestic abuse on children. A number of constrains were encountered in carrying out this research. Different perspectives from different scholars and their areas of agreements and disagreements on coping strategies and forms of domestic abuse were looked at in the research study.

Data collection methods and techniques were discussed and justified. The researcher used a sample using purposive sampling from the targeted population, which gave a true



representative of the population. Interviews were used as research instruments to collect data. The major findings were that adolescents raised in families characterised by domestic abuse uses positive and negative coping strategies such as attachment with their parents that is there is no secure attachment due to witnessing domestic abuse, they were depressed which then affect their academic performance.

To cover up for this, the engage in activities like drug abuse and have early sexual relationships. Besides the above, these children also have cognitive effects, which include attention problem and memory problems. Findings and recommendations were made in this chapter, which the researcher hopes will go a long way to address the effects of spouse abuse on children.

### **5.3. CONCLUSIONS.**

The following conclusions were made from the study:

The research highlighted coping strategies used by adolescents raised in families characterized by domestic violence. The researcher noted that not only women are regarded as victims of abuse but men as well. Adolescents however have certain coping strategies that they use which include mental blocking or disconnecting emotionally, physical avoidance and making better through fantasy.

Focus can be emphasized on smart partnership of the government and nongovernmental organizations to provide free counseling services to these types of adolescents to afford suicidal tendencies.

Above all the researcher concluded that the bases of abuse are gender conflicts within households and the parents themselves do not consider the children as the secondary victims of spouse abuse. The researcher hopes that parents will learn a lot from this study. They will now realize how adolescent's years contribute to who you are today. The insightful words of philosopher Sover Kierkegolar captured the importance of looking back to understand ourselves. *"Life is lived forward but understood backwards"*

### **5.4. DISCUSSIONS OF RESEARCH QUESTIONS**

The research findings were discussed using research questions as subheadings

### **5.4.1 emotional coping strategies**

Regarding the question on did you ever take alcohol or other drugs to make you feel better , fifteen(75%) said at most times they block the thoughts of witnessing domestic abuse that cause sadness. Eriksen (1966), posited that when confronted with a stressful encounter, people tend to deny or minimize the existence of stress, fail to verbalize feelings of distress, and avoid thinking about possible negative consequences of this encounter. Miller(1980) proposed that individuals who encounter a stressful situation react with arousal according to the amount of attention they direct to the stressor. Conversely, the arousal level can be lowered, if the person succeeds in reducing the impact of aversive cues by using avoidant cognitive strategies such as distraction, denial, or reinterpretation. Emotion-focused coping strategies focus on some aspect of the stressful situation and are generally considered to be maladaptive. Emotion-focused coping also relates to activities aimed at controlling the emotional impact of the event, such as feelings of fear, anger, and sadness([Lazarus & Folkman, 1984](#)). The main issue with emotion-focused coping is how to manage these emotions and thus limit the negative psychological distress levels.

.University of Calgary faculties of Medicine and Social Sciences study that focused on the coping strategies that children used in response to domestic showed that about 85% of respondents make end up attached to one some religious or spiritual this one of social coping strategy adolescents used belief to lighten the situation at least sometimes. Moreover (80%) interviewed said they had used it as form of coping. McClintock (2012) argue that emotional tears are a very important evolutionary development in humans as a social species as they reduce stress levels.

### **5.4.2 Cognitive Coping Strategies**

On the question that what do you do to try to see mental blocking in a different light, to make it seem more positive? understanding of cognitive responses to stress: vigilance, that is, the orientation toward stressful aspects of an encounter, and cognitive avoidance, that is, averting attention from stress-related information (cf. Janis 1983, Krohne 1978, 1993, Roth and Cohen 1986 ). Approaches corresponding to these conceptions are repression–sensitization (Byrne 1964), monitoring-blunting (Miller 1980, 1987), or attention-rejection (Mullen and Suls 1982). With regard to the relationship between these two constructs, Byrne's approach specifies a unidimensional, bipolar structure, while Miller as well as Mullen and Suls leave this question open. however, explicitly postulates an independent functioning of the

dimensions vigilance and cognitive avoidance. The repression–sensitization construct (cf. Byrne 1964, Eriksen 1966) relates different forms of dispositional coping to one bipolar dimension. When confronted with a stressful encounter, persons located at one pole of this dimension (repressors) tend to deny or minimize the existence of stress, fail to verbalize feelings of distress, and avoid thinking about possible negative consequences of this encounter. Persons at the opposite pole (sensitizers) react to stress-related cues by way of enhanced information search, rumination, and obsessive worrying.

The concept of repression–sensitization is theoretically founded in research on perceptual defense (Bruner and Postman 1947), an approach that combined psychodynamic ideas with the functionalistic behavior analysis of Brunswik (1947). The conception of monitoring and blunting (originated from the same basic assumptions formulated earlier by Eriksen (1966) for the repression–sensitization construct. Miller conceived both constructs as cognitive informational styles and proposed that individuals who encounter a stressful situation react with arousal according to the amount of attention they direct to the stressor. Conversely, the arousal level can be lowered, if the person succeeds in reducing the impact of aversive cues by employing avoidant cognitive strategies such as distraction, denial, or reinterpretation. However, these coping strategies, called blunting, should only be adaptive if the aversive event is uncontrollable.

#### **5.4.4 Social coping strategies**

On the question that do you get emotional support from other adolescents The growing sense of personal control and self-esteem in adolescents as a result of academic achievement serve as a major personal force in their ultimate level of accomplishment. Academic competence will influence the coping pattern of adolescents. Past studies demonstrated that adolescents coping efforts significantly predicted their academic achievement in terms of grade point average (Baker & Siryk, 1984; Sennett, Finchilescu, Gibson, & Strauss, 2003). The ability to cope with challenges and setbacks has been found to be a crucial factor in students' achievement (Dweck & Sorich, 1999). The relationship between coping and academic achievement was also evidenced in a study by DeBerard, Spielmans & Julka (2004) who reported that academic achievement of university freshmen was explained by their social coping strategy

#### **5.4.5 Behavioral coping strategy**

Behavioral coping is goal-oriented. [Folkman \(1997\)](#) found that problem-focused coping is more likely to contribute to positive emotional outcome in part because an individual has a sense of control in the problem-solving process. In short, the problem-focused responses are aimed at altering person-environment relationships. Lazarus (1991) and Folkman (1984) propounded that there are two types of coping responses which consists of [emotion focused](#) and problem focused. Behavioral coping targets the causes of stress in practical ways which tackles the problem or stressful situation that is causing stress, consequently directly reducing the stress. Behavioral strategies aim to remove or reduce the cause of the stressor. In general behavioral coping is best, as it removes the stressor, so deals with the root cause of the problem, providing a long term solution

#### **5.5.RECOMMENDATIONS**

In the view of the above conclusions, the following recommendations could be made:

- Private organizations should analyses the existing policies, programmers, and budgets to assess whether the government intervention to date have responded effectively to perceived sources of children's rights.
- A national strategy, policy or plan of action on fighting against domestic abuse with realistic and time bound targets should be implemented.
- The government and all stakeholders should evaluate the role they are playing to ensure gender inequality since it was noted as the base of domestic abuse.
- Organizations, which deal with child abuse, should also note that witnessing domestic abuse is a form of child abuse hence counseling services should be provided.
- There should be introduction of counseling services in schools to cater for those children being affected by domestic abuse.
- Some awareness campaigns, symposiums informing parents about the coping strategies on domestic abuse on adolescents because one person can make a change

but the country as a whole can make a difference since the future lies in hands of these children.

- The state should build community confidence in the justice system by bringing all perpetrators of violence against children and ensure that they are held accountable through appropriate criminal civil administration and professional proceeding and authorization.

## **5.6 AREAS OF FURTHER RESEARCH**

The extent to which adolescents are being affected by domestic abuse is great and it seems as if people just take it for granted. The researcher addressed the coping strategies that these adolescents use in dealing with domestic abuse. However the above issue needs to be addressed rationally and separately since these adolescents are indeed suffering.

## **5.7 CONCLUSION**

The main thrust of this chapter was to discuss the research findings from the interviews in relation to relevant literature review. It gives conclusions of the research and meaningful recommendations were put forward for the Government to intervene so as to help the adolescents raised in families characterized by domestic abuse.

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## **Appendix 1**

### **INTERVIEW GUIDE**

My name is Obey Dandatu final year at Midlands State University B sc (Honors) degree in Psychology. As part of my programme requirement, I am carrying out a research entitled an investigating on coping strategies used by adolescents in Chikanga 3 raised in families characterized by domestic abuse. The information generated from this study will be treated with confidentiality and will be used solely for academic purposes. Your cooperation will be greatly appreciated.

#### **SECTION A**

##### **Demographic data**

Sex.....

Age.....

Level of education.....



## **Section B: Coping strategies of adolescents?**

1. What do you do to take your mind on domestic abuse?
2. How do you cope with unpleasant hostility ?
3. Did you ever take alcohol or other drugs to make you feel better ?
4. Do you get emotional support from other adolescents?
5. What do you do to try to see mental blocking in a different light, to make it seem more positive?
6. How do you express your negative feelings on domestic abuse?
7. Do you seek comfort in your religion or spiritual beliefs ?
8. How do you manage problems related to harsh working conditions you are in?
9. How do you culturally cope with domestic abuse
10. Do you criticize yourself about the negative coping
11. What social activities do you do to distract your thinking of the situation?
12. Do you deny to yourself the real situation on issue domestic abuse?
13. How do you handle anxiety that comes with harsh working conditions?
14. How do you cope with domestic abuse as a child?

## ***Appendix 2***

### ***Consent form to Parents***

**Title:** An investigation on the coping strategies used by adolescents in Chikanga 3 raised in families characterized by domestic abuse

**Researcher:** Obey Dandatu

The above mentioned researcher has informed me about her research and I had an opportunity to ask questions, intentions and the purpose of the research. I had a chance to discuss the above research with the people around.

I agree that my child / children to participate and they are free to withdraw whenever they want. In case of misunderstanding I have been advised that I communicate with the researcher and the ethics committee.

Name .....Signature.....Date.....

## ***APPENDIX 4***




**SUPERVISOR'S SIGNATURE**.....

**DATE**.....

***APPENDIX 6***

