How do young people who have experienced parental intimate partner abuse make sense of romantic relationships? A qualitative analysis

Hollie Richardson [a],*, Juliane A. Kloess [a], Asha Patel [b], Jack Farr [a]

[a] *Centre for Applied Psychology, School of Psychology, University of Birmingham, UK*
[b] *Innovating Minds, Birmingham, UK*

A B S T R A C T

Background: Approximately one in five children in UK have experienced parental intimate partner abuse (IPA). Research suggests that this is one of the strongest predictors of interpersonal aggression within adult relationships, as well as having significant negative impacts on mental and physical health. Both Attachment Theory (Ainsworth & Bell, 1970; Bowlby, 1969) and Social Learning Theory (Bandura, 1977) attempt to explain this intergenerational cycle of abuse.
Objective: In line with Birmingham City Council's Domestic Abuse Prevention Strategy 2016–2020, the present study aimed to qualitatively explore the way in which young people who have experienced parental IPA make sense of romantic relationships.
Participants: Six young people (females = 4, males = 2), aged between 10–13 years (M = 11.16, SD = 1.17), participated in the study.
Method: Semi-structured interviews were conducted, and the data were analysed using Framework Analysis to generate themes both inductively and deductively.
Results: Three superordinate themes were identified, namely *'Recipe for a Healthy Relationship'*, *'When Things Go Wrong'*, and *'What is a Romantic Relationship?'*. Concepts of equality and respect were frequently referenced by participants as part of the interviews. Findings are discussed in relation to practical implications and directions for future research.

1. Introduction

1.1. Intimate partner abuse

The UK government recognises intimate partner abuse (IPA) as "any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality" (Elkin, 2019, p. 7). IPA can also include psychological, sexual, and/or financial abuse. Between 2018 and 2019, approximately 2.4 million people in England and Wales aged over 16 years experienced IPA (Elkin, 2019). The impact of IPA can be pervasive and long-lasting, including mental health difficulties, such as anxiety, depression and post-traumatic stress disorder (PTSD), as well as physical injuries, chronic pain and reproductive difficulties (Campbell, 2002; Lacey, McPherson, Samuel, Powell

---

Sears, & Head, 2013).

1.2. Impact of intimate partner abuse on children

IPA not only impacts upon the victim, but it can also have negative consequences for those around them, particularly children. The Office for National Statistics (ONS) estimate that approximately one in five children in the UK experience one form of child abuse while under the age of 16 years, with the most common being parental IPA (Elkin, 2020). The Department of Health estimates that 750,000 children in the UK are affected by this, with nearly 75 % receiving support from social care for experiencing parental IPA (Birmingham City Council, 2009). Furthermore, 63 % of serious case reviews of child abuse in the UK included parental IPA as a risk factor, and 62 % of children witnessing parental IPA were also physically harmed (Department of Health, 2017). In Birmingham (UK), 77 % of all children referred for support by social care were reported to have experienced parental IPA (Birmingham City Council, 2018).

Witnessing IPA can have several significant consequences on the growth, intellectual development, and both mental and physical health of the child throughout their life (Lazenbatt, 2010; Unicef, 2006). These include education and employment difficulties, substance misuse, anxiety, depression and PTSD (Evans, Davies, & DiLillo, 2008; Lazenbatt, 2010). Behavioural and social problems are also noted in the literature, with children from abusive homes experiencing social withdrawal and aggressive behaviour, difficulties making friends, and confusion in relation to social skills (Unicef, 2006). The Adverse Childhood Experience (ACE) study (Felitti et al., 1998) found that the impact of witnessing parental IPA first becomes noticeable at school in the form of behavioural or learning difficulties, which continued into adult life, resulting in workplace absenteeism and financial problems (Felitti et al., 1998). Physical health issues in later life are also described, including heart disease, obesity, liver disease, cancer and chronic lung disease (Lazenbatt, 2010). Consequently, Callaghan, Alexander, Sixsmith, and Fellin (2018)) argue that witnessing IPA can be as harmful as experiencing it directly, suggesting that young people should not be considered passive witnesses to IPA (Callaghan et al., 2018). Viewing young people within this context (as witnesses rather than victims) not only minimises their experience, and the impact this can have on them, but may also reduce the likelihood of them getting involved in research related to it (Callaghan et al., 2018).

1.3. Intergenerational cycle of IPA

As well as having negative impacts on the mental and physical health of children, experiencing parental IPA also influences their interpersonal relationships in adulthood (Unicef, 2006). Research suggests that one of the strongest predictive factors of children going on to experience IPA in their own adult relationships is witnessing IPA between parents during childhood, with 40 % of adults accessing specialist support for IPA in their own relationships having witnessed IPA between parents during childhood (Faringer & Hindin, 2009; Holt, Buckley, & Whelan, 2008; Mandal & Hindin, 2013; Murshid & Murshid, 2018; Reyes et al., 2015; Safe Lives, 2017; Temple, Shorey, Tortolero, Wolfe, & Stuart, 2013). Furthermore, there is a significant relationship between witnessing physical violence between parents and experiencing such violence in adult relationships in later life, with those affected being more likely to perpetrate violence and stay in a violent relationship as a victim (Black, Sussman, & Unger, 2010; Pollak, 2004).

Intergenerational Transmission Theory (Sellers, Cochran, & Branch, 2005), rooted in Social Learning Theory (Bandura, 1977), is one of the most commonly cited theories for explaining the intergenerational cycle of IPA in the current literature. It proposes that children learn that violent and abusive behaviours are an acceptable way of acting and managing conflict within interpersonal relationships when they see these behaviours modelled by their parents/guardians, and therefore go on to imitate these in their own relationships (Franklin & Kercher, 2012). Social Learning Theory (Bandura, 1977) also suggests that individuals are more likely to engage in abusive behaviour towards an intimate partner when parents, carers or significant others in their lives hold attitudes and beliefs that endorse the use thereof (Sellers et al., 2005).

Attitudes, beliefs and values can be learnt from significant others, and these are thought to mediate the relationship between witnessing parental IPA and repeating these patterns of behaviour as an adult (Copp, Giordano, Longmore, & Manning, 2016). For example, young people exposed to parental IPA may develop behavioural scripts and attitudes which are accepting of violence, such as 'violence is a way of resolving conflict' (Copp et al., 2016; Murshid & Murshid, 2018; Pollak, 2004; Temple et al., 2013). Attitudes which are accepting of violence have been found to be associated with perpetration of IPA, particularly in males. A longitudinal study by Foshee, Linder, MacDougall, and Bangdiwala (2001) found that adolescent males who believed that violence towards a partner is acceptable (for example, if the partner insults or angers him) are more likely to perpetrate IPA than males who did not view this as an acceptable response. Similarly, in a random sample of 502 adult males, Franklin and Kercher (2012) found a significant relationship between holding an attitude which is accepting of violence in interpersonal relationships and perpetration of IPA. This study highlights the way in which attitudes and beliefs learnt in childhood can influence the likelihood of IPA in adulthood.

Moreover, Attachment Theory (Ainsworth & Bell, 1970; Bowlby, 1969) has also been used to explain the relationship between witnessing parental IPA during childhood and going on to experience it in adult relationships. It suggests that children develop beliefs and expectations about themselves, others and the world based on their early relationship with a caregiver. An attachment bond may be secure or insecure based upon the early interactions with a caregiver, and the beliefs an individual develops about themselves and the world are shaped by this. These beliefs are thought to persist into adulthood, with individuals generalising these to other interpersonal relationships as they grow (Scott & Babcock, 2010). Attachment to a caregiver is also thought to facilitate the development of emotional regulation, impulse control and interpersonal skills, such as empathy. The development, or lack, of an attachment bond early in life can therefore influence behaviours within interpersonal relationships throughout life (Van der Kolk, 2015).

Van der Kolk (2015) suggests that as we learn about ourselves and the way people respond to us through our early attachments, this influences the behaviour we come to expect and accept from others as we move into adolescence and adulthood. Individuals with an

insecure attachment style are more likely to view others as untrustworthy, hostile and threatening, and therefore respond to them in a way that is consistent with their expectations, including engaging in behaviours which evoke reactions that are more familiar to them based on earlier experiences of relationships (Woollett & Thomson, 2016). Similarly, if the relationships we have as children are characterised by abuse or neglect, we may come to expect others to treat us in the same way, and subsequently accept this behaviour in interpersonal relationships (Van der Kolk, 2015). As a result, individuals with insecure attachment styles are more likely to experience difficulties within adult relationships, which are often characterised by anger and hostility (Woollett & Thomson, 2016).

Nevertheless, whilst there are theoretical explanations for the intergenerational cycle of IPA, it is important to note that many individuals who witness parental IPA do not go on to experience this in adult relationships (Renner & Slack, 2006). This may in part be explained again by Attachment Theory (Ainsworth & Bell, 1970; Bowlby, 1969), as a secure attachment has been found to mitigate against the negative effects of witnessing parental IPA, including mental health difficulties and experiencing IPA in adulthood (Graham-Bermann, DeVoe, Mattis, Lynch, & Thomas, 2006; Holt et al., 2008). Similarly, access to emotional support outside of the home, within the wider family and community, has been reported to be an important protective factor for children who have witnessed parental IPA (Cox, Kotch, & Everson, 2003; Holt et al., 2008). This includes the presence of positive relationships with peers and siblings which have been found to increase resilience in children, and subsequently minimise the likelihood of them experiencing IPA in their own relationships in later adolescence and adulthood (Guille, 2004; Holt et al., 2008).

1.4. Research objectives and aims

Witnessing parental IPA has the potential to impact upon a young person's mental, physical and social wellbeing, and increases the likelihood of them going on to experience IPA in their adult relationships, either as a victim or perpetrator. While there are many theories which offer an explanation for this association, there is little research that explores how young people who have witnessed parental IPA view and make sense of romantic relationships. The primary aim of the present study was therefore to explore how young people who have witnessed parental IPA make sense of romantic relationships, with a particular focus on equality and respect, as well as what characterises 'healthy' and 'unhealthy' relationships. By further developing our understanding of the intergenerational cycle of IPA, national policies, support services and intervention programmes may be tailored to support the specific needs of this population.

2. Method

2.1. Ethical approval

Full ethical approval for the study was granted by [*names removed for masked review*]. The researcher adhered to the British Psychological Society's (2018) Code of Ethics and Conduct throughout the study.

2.2. Context

The present study was informed by Birmingham City Council's aim to tackle the intergenerational cycle of IPA through changing the attitudes of young people who have witnessed and experienced parental IPA from a young age in order to ensure that they are aware of concepts such as equality and respect, as well as what characterises a 'healthy' relationship (Birmingham City Council, 2016). It was therefore deemed important to initially explore what attitudes and beliefs are held by this population, particularly within Birmingham, where rates of young people referred to the Local Authority for witnessing parental IPA are higher than in the rest of the UK (Birmingham City Council, 2018).

The study was conducted in partnership with Innovating Minds, a social enterprise in Birmingham which supports the mental health and emotional wellbeing of young people (aged 9–16 years) within education and community settings, particularly young people who have witnessed parental IPA. Innovating Minds was established in response to a request by mothers (who attended a charity support group as part of their recovery from IPA) for support of their children. Innovating Minds ran a programme for this group of children, which involved building a shared understanding of and language to discuss their experiences, anxieties and concerns. Referrals to the service came from the charity who supports mothers with experiences of IPA.

Table 1
Criteria for Inclusion in the Study.

Criteria	Justification
Aged between 10 and 16 years	This is the age range of the young people who access Service X, through which participants were recruited.
Witnessed/had experiences of parental IPA	The present study aimed to explore young people's views and sense-making of romantic relationships where they have witnessed/had experiences of parental IPA.
No longer in the care of the perpetrator of domestic abuse	In order to ensure the physical and emotional wellbeing of the young person and their family while taking part in the research study, only young people who were no longer in the care of the perpetrator were included.

2.3. Recruitment

Young people were recruited through Innovating Minds, who contacted those who met the inclusion criteria (Table 1) on their waiting list with a letter inviting them to take part in the research study. This approach was adopted to ensure that the identity of young people who did not wish to take part was kept anonymous. Parents/guardians of young people who were interested in taking part in the study were asked to return a signed consent form to confirm that they were happy to be contacted by the researcher. The young person and their parent/guardian were subsequently provided with a copy of the participant information sheet which included further details about the nature of the research study. Once consent and assent forms were signed by the young person and their guardian, an interview was arranged. All young people who consented to being contacted for research purposes went on to take part in the research study, with the exception of one young person who withdrew before signing the consent and assent forms due to being unable to attend a face-to-face interview.

2.4. Sample

A total of six young people took part in the study. Two participants were male (referred to as Edward and James), and four participants were female (referred to as Anne, Catherine, Emma and Rebecca). Participants were aged between 10 and 13 years ($M =$ 11.16 years; $SD = 1.17$). All participants were accompanied to the interview by their mother. Three of the participants had taken part in an intervention programme with Innovating Minds prior to the study commencing. Two of the six participants (Edward and Rebecca) reported being in what they described as a romantic relationship, with the remaining four participants reporting that they were not in a romantic relationship.

2.5. Procedure

2.5.1. Data collection

Semi-structured interviews were conducted by the researcher for the purpose of collecting qualitative accounts of young people's experiences and sense-making of romantic relationships. Each participant attended for a single interview which ranged from $25-43$ min in duration ($M =32.5$ min). All participants were accompanied to Innovating Minds by their mother. With the exception of Catherine, who wished for her mother to be present for the duration of the interview, all other mothers waited in a separate room until the interviews were completed. Prior to commencing the interview, participants were reminded of the nature of the study, what taking part in the study would involve, with any questions answered, and consent and assent forms were signed by the participant and their parent/guardian respectively. The potential risk to participants due to the sensitive nature of the topic area was mitigated against by making sure that participants were aware that they did not have to take part, and that they could withdraw at any point. Information regarding support services was also provided to participants upon completion of the interview, and the researcher (a trainee clinical psychologist) was able to help contain any distress in the moment.

The interviews followed a semi-structured interview schedule and covered the following topics: (i) what does being in a romantic relationship mean to you?; (ii) what would make a healthy/unhealthy relationship?; (iii) what are the ways of communicating emotions in a relationship?; and (iv) what do the terms equality and respect mean to you?. This allowed for flexibility for the young person to discuss what is important to them about romantic relationships. Prompts were used for the purpose of further exploring a particular topic, as well as to encourage reflection from the participants (Morrow, 2001). The interview schedule was reviewed by experts by experience in order to ensure that the questions were accessible for this particular age group and population. These individuals were young people who had previously received support from Innovating Minds, and therefore had similar experiences to the young people invited to take part in the study. All interviews were recorded using an encrypted Dictaphone, and transcribed verbatim.

2.5.2. Data analysis

The data were analysed using Framework Analysis (FA). FA is a qualitative data analysis approach developed by Ritchie and Spencer (1994), which is commonly used within policy research (Srivastava & Thomson, 2009), and follows multiple steps to analyse data (Gale, Heath, Cameron, Rashid, & Redwood, 2013; Ritchie & Spencer, 1994; Srivastava & Thomson, 2009). FA may employ either a deductive or inductive approach, developing themes based on relevant literature, as well as the views and descriptions of the participants involved in the research (Heath et al., 2012; Parkinson, Eatough, Holmes, Stapley, & Midgley, 2016). This was considered to be particularly important for answering the present research question; an inductive and deductive approach was used to include important aspects highlighted by current literature and policy, as well as important ideas raised by participants.

Analysis followed the steps outlined by Gale et al. (2013). Two transcripts were independently coded by the researcher and a fellow trainee clinical psychologist to develop an initial working analytic framework, which was then applied to the remaining four transcripts. This framework was flexible and amended if new codes were developed (see supplementary material for the final framework). Once all six transcripts were coded, the data was entered into an Excel spreadsheet, known as a 'matrix', in order to make the data set more manageable to enable analysis (Parkinson et al., 2016). Using the matrix, key concepts across the data in relation to the research question were identified, and a thematic structure was created. A summary of these themes was compiled and discussed with a fellow trainee clinical psychologist in order to facilitate the critical examination of the data within the matrix (Gale et al., 2013).

3. Results

A total of three superordinate themes, together incorporating eight subthemes, were identified. Fig. 1 provides an overview of the thematic structure.

3.1. "That's how it works" – recipe for a healthy relationship

All six participants contributed to this theme, which comprises the key components participants described as making a relationship "work" (Emma, L20). There are four subthemes within this theme.

3.1.1. "When two people love each other"

All six participants contributed to this subtheme, which encompasses the way in which young people feel that two parties in a healthy relationship will act and feel towards each other. Across the participants' accounts, there was recognition of romantic relationships being characterised by numerous bi-directional dynamics, including supporting, caring for, and looking after each other. For example, Anne suggests that a romantic partner should be "caring and generous" (Anne, L438). Rebecca and Catherine highlight characteristics they believe to be important in romantic relationships:

> "Caring for people and supporting them…talk to them nicely and be there in the good and bad times like when you're having fun and when you're sad for you to comfort them" (Catherine, L38-43).
> "I know that as long as both people are happy, and respected and loyal and honest, that I think that's a good relationship" (Rebecca, L505-506).

Some participants also discussed the importance of being able to trust a romantic partner. Rebecca and James described different ways in which they envisioned this being the case, referring to trusting a romantic partner with one's secrets and to be faithful:

> "They won't spread things about you or tell things people that you don't want other people to know. So you're basically telling them your secrets in the hope that they won't tell anybody else. So you're basically giving someone a big box of memories and hoping that they won't just chuck them out" (James, L440-445).
> "Trust and loyalty when you're able to let them go out to dinner knowing that they won't cheat on you and knowing that they'll be out with their friends and that they'll be loyal to you and they won't go off with other people" (Rebecca, L103-106).

Moreover, participants also mentioned the importance of being able to make time for each other, engaging in enjoyable activities including "dates" (Anne, L9). Emma suggests:

> "You make time for each other […] you can sort them into your everyday life, and they can sort me into theirs" (Emma, L46, L161-162).

Participants also discussed the way in which two people in a romantic relationship are physically affectionate with one another. Participants suggest that when two people are in a romantic relationship "they kiss" (Edward, L113) and "give them [each other] hugs" (Catherine, L49). Furthermore, participants described how the way two people act towards each other in a relationship is influenced by whether there is equality and/or respect. For example, participants suggested that when there is equality and respect in a relationship, "you wanna treat them the same way you want to be treated" (James, L363), and that you would be "supporting each other and sharing what you have" (Rebecca, L396-397). Having respect for each other would also demonstrate that two people are accepting of each other in a relationship, and that they are supportive of and kind to one another despite differences. For example, Rebecca states:

> "Respecting who they are, who their friends are, their family, and just…everything about them. Letting them know that you're happy with who they are, that you're supportive, and that if they are a different race or sexuality or anything like that, if they're different to you that you make sure they know that that's okay and that you're happy for them, you're supporting them" (Rebecca, L342-347).

Furthermore, all six participants discussed the importance of 'feeling love' or having 'strong feelings' within a romantic relationship. For example, Emma stated:

> "If it's a really good relationship then, umm, you can, you love one another […] love is like, the most strong feeling you can get" (Emma, L49-52).

Participants often spoke about the importance of these feelings being reciprocal. For example, Rebecca stated:

> "I think if he feels the same way, as long as we feel the same way about each other, I think that's a big thing too" (Rebecca, L225-227).
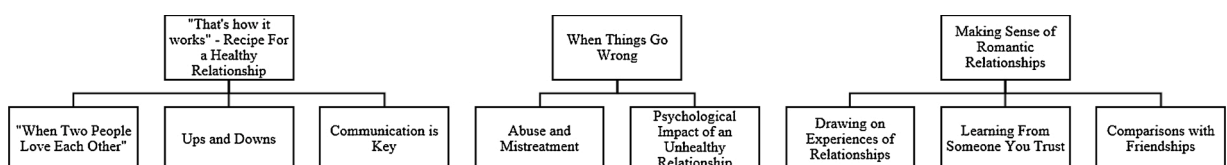

Fig. 1. Thematic Structure of Superordinate Themes and Subthemes.

Participants also spoke about how they might feel within themselves in healthy relationships, with four participants talking about the importance of happiness within a relationship. For example, Anne suggested that a healthy relationship is "when they both feel happy" (Anne, L46). Emma stated that an individual would feel happy if they felt protected and safe (even when disagreeing with a partner):

"I'd feel safe around them. Like that's really important to me, 'cause a lot of the time around people I just, I feel like on edge, and stuff. So I, I want to feel safe and so I can be myself around that person" (Emma, L288-291).

Participants also spoke about the importance of feeling able to be and happy in oneself, and it was suggested that this may come from feeling respected in the relationship. For example, Catherine states that if there is respect in a relationship:

"It would make you feel very happy about yourself and that people like want to be around you and not just judge you and not be very nice and they could feel like they can be around them without them judging them" (Catherine, L319-322).

Overall, this subtheme highlights the various ways in which participants perceive people in a healthy romantic relationship to act and feel towards each other, and that the presence of equality and respect can be seen from the way they interact with one another. The feelings described by participants to be associated with a 'healthy relationship' are positive feelings, including happiness, enjoyment and joy.

3.1.2. Ups and downs

Across participants, there was an understanding that within a romantic relationship there may be "rough patches" (Rebecca, L148), even within healthy relationships. Catherine suggests that being able to disagree within a romantic relationship is important:

"It's not really normal to always be so happy with someone, because you have to be a little bit like if you don't say anything you won't get your voice heard like if you were too scared to like get hurt by them you would just not say anything and just feel like you don't really have anything to say and you do" (Catherine, L132-136).

Many participants spoke about ruptures and repairs within romantic relationships. As such, there may be disagreements within a relationship, but these can be overcome without it damaging the relationship. Rebecca stated:

"There are gunna be rough patches but if you can get through them together both being happy both trusting each other and being able to talk to each other I think they're the main things" (Rebecca, L148-150).

Participants spoke about the various ways in which these ruptures, big or small, can be repaired. For example, James suggests that following an argument "you'd probably apologise" (James, L330). Others emphasised the importance of talking to each other if difficulties arise. For example, Emma describes how if she was unhappy in a relationship she would "talk to the other person" (Emma, L153). Alternatively, participants referred to seeking help and support outside of the relationship, either from a family member, friend or professional:

"You could…go to therapists to talk about what's happened so that you can work through it" (Rebecca, L256-258).
"I'd definitely go to talk to somebody else I could trust […] people I know very well" (James, L433, L436).

Overall, this subtheme highlights how participants did not expect a romantic relationship to bring happiness all of the time. Instead, there is an understanding that it is normal for romantic relationships to also experience difficulties, and that it is the way in which these are managed and overcome that is important.

3.1.3. Communication is key

The concept and role of communication within a romantic relationship was prevalent across participants' accounts. They discussed the importance of communicating with your partner to develop and maintain a healthy relationship, thereby ensuring that the relationship does not "unravel itself" (Catherine, L83). The importance of talking about feelings and emotions was emphasised, also in relation to one's own mental health. For example, Catherine suggests:

"If you don't share your feelings you'll keep it up inside of you and you might feel really, really sad about it whereas if you talk you'll like share it and you might feel like it's not too big of a problem […] And they could also help you with like that you're going through and like support you" (Catherine, L116-121).

Furthermore, Rebecca suggests that it is important to be able to talk about how you feel, both in relation to things in the present and in the future:

"You can talk to each other about problems you've had during the day and if you want to move house or have a future with kids and things like that. Just so you're able to talk to each other about everything" (Rebecca, L94-97).

The importance of communication in the context of making decisions is also discussed, with participants suggesting that it is ok to make your own decisions within an equal relationship, but that talking to your partner about these is also important in order to take their feelings into account, and allow them to be aware of your daily activities. Rebecca explained:

"You should definitely make your own, not your significant other's choices, but you should also, depending on what it is, you should talk to the other person and make sure they're okay with it first so let's say you're going out for dinner with a friends whether that's a boy or girl, you should definitely make them aware of it" (Rebecca, L446-451).

Finally, some participants also talked about the impact respect can have on communication. Rebecca states "communication really is a big thing about respect" (Rebecca, L341), whereas if there was no respect, "they would probably not talk to them in a very nice way" (Rebecca, L261). James supports this, suggesting that you can see the presence of respect within a romantic relationship by the

way two people communicate with each other:

> "They respect each other in a way that they would want to be treated because they talk to each other like they would want to be talked to" (James, L257-259).

Overall, this subtheme highlights participants' views around communication being an important aspect of making a relationship 'work', as well as an indicator of whether or not there is respect within a relationship.

3.2. When things go wrong

All six participants contributed to this theme. It refers to what participants described to be aspects and experiences characteristic of an 'unhealthy' relationship. There are two subthemes within this theme.

3.2.1. Abuse and mistreatment

All six participants spoke about abuse as being a defining factor of an unhealthy relationship. This included physical and emotional abuse, as well as manipulation and control. For example:

> "If they hurt you, or, emotionally or physically…they're the biggest things I can think of" (Emma, L120).
> "Physically doing something or mentally like hurting their feelings" (James, L285−286).

The above quotes demonstrate the way in which participants spoke about physical and emotional abuse as equally problematic within a romantic relationship. Verbal abuse was also discussed, with some suggesting that this can begin with a breakdown of communication. Verbal abuse may include "bad language" (Anne, L84) and yelling, as well as screaming and swearing at each other (James, L282). Emma also suggested that in an unhealthy relationship:

> "You can't stand to talk to each other, like, a healthy relationship you should be able to talk to each other, yeah, but then an unhealthy relationship you're not able to talk to each other properly" (Emma, L76-79).

Participants also referred to other forms of abuse, including manipulation and control. Rebecca gives an example of manipulation within a relationship, and suggests that this is one way in which a partner might be controlling:

> "Make little digs to change your mind and tricking you into doing what they want you to do instead of what you want to do" (Rebecca, L74-76).

The way in which a romantic relationship may develop into an unhealthy relationship was also mentioned, with some participants suggesting that this can happen relatively quickly, and may be a result of a lack of equality, or a romantic partner not being their true self. For example:

> "They pretend to be someone else and then once you've gotten married they become a little bit more…they become a different person and they are more themselves which is a bad thing sometimes because they can be horrible, they can be bullies, emotionally and physically again" (Rebecca, L178-182).

Overall, this subtheme indicates that participants have an awareness of the different types of abuse which can be present in a relationship, suggesting that they recognise these behaviours as being problematic within a romantic relationship. Participants acknowledged and talked about more 'explicit' forms of abuse, such as physical violence and verbal abuse, as well as more subtle forms of mistreatment, such as manipulation. This suggests that young people are aware of less explicit forms of abuse, such as coercive control, despite not using established terms to refer to some of these behaviours as such.

3.2.2. Psychological impact of an unhealthy relationship

This subtheme refers to the emotions participants would expect to be associated with and feel in the context of an unhealthy relationship (often in direct contrast to the emotions described in the subtheme *'When Two People Love Each Other'*). Participants spoke about feeling unhappy, depressed, angry and lonely. Emma suggested that the frequency of these emotions would indicate whether the relationship is unhealthy:

> "If they make you feel sad or angry a lot of the time then it's not really a good relationship" (Emma, L170).

Catherine suggested that feelings of anger and frustration may arise from a breakdown in communication with a romantic partner:

> "It could get very angry and you could maybe like be really frustrated with them and they would be really frustrated with you and you could just talk it through" (Catherine, L181-183).

Rebecca described how they might feel in a relationship with a lack of equality and respect:

> "Really depressed. Very unhappy and lonely. Isolated. I think those are the main ways I would feel. Like nobody was there for me, like I was by myself, and I wouldn't be able to do anything about it, a little bit helpless" (Rebecca, L458-461).

Furthermore, participants spoke about how they might feel about themselves in a relationship where they were not treated well. For example:

> "I wouldn't feel very good about myself like I'd think that it was all me and that I'd done everything wrong […] I'd feel very sad" (Catherine, L30-32).
> "You wouldn't feel happy and you wouldn't feel free to be yourself" (Rebecca, L73).

Overall, this subtheme highlights the range of feelings participants associated with an unhealthy relationship, as well as how not

being treated well in a romantic relationship may impact on one's view of oneself. These feelings were predominantly of a 'negative' emotional nature, such as sadness and anger, and were mostly in stark contrast to the feelings described as part of a healthy relationship.

3.3. Making sense of romantic relationships

All six participants contributed to this theme. It refers to how participants developed their views around and understanding of romantic relationships so far. There are three subthemes within this theme.

3.3.1. Drawing on experience of relationships

Participants spoke about the way in which their experience of parental IPA had contributed to their understanding of romantic relationships, as well as equality and respect. For example, Rebecca, Catherine and Anne stated:

> "I've learnt it more from the home, being in the environment and trying to figure out when someone's happy and unhappy" (Rebecca, L207-208).
> "It might just be that I've seen it before, a good relationship and a bad relationship" (Catherine, L345-346).
> "I saw when mum and [removed] was there and they didn't respect each other" (Anne, L390).

In contrast, some participants talked about not knowing much about romantic relationships due to lacking direct personal experience. For example, speaking about the way she might feel within a romantic relationship, Rebecca stated:

> "I've never really experienced love in a romantic way, not really so I don't really know" (Rebecca, L321).

Similarly, speaking about what might characterise a healthy or unhealthy relationship, Anne stated:

> "I haven't really been in a relationship so it's hard" (Anne, L567).

Overall, this subtheme highlights the way in which participants have an awareness and understanding of some aspects of romantic relationships by means of witnessing and experiencing these through their parents. Other participants felt that they lacked such an awareness and understanding due to an absence of direct personal experience, suggesting that the best way to learn about romantic relationships is through direct personal experience, while others felt that they were able to learn from others' experiences (e.g., their parents).

3.3.2. Learning from someone you trust

Four participants contributed to this subtheme, which refers to the way in which participants described learning about themselves and romantic relationships by talking to someone they trust, most often an adult, such as a parent, teacher or a formal support service. Rebecca discussed the importance of having a supportive parent or carer to help them in developing an understanding of relationship dynamics in order to avoid experiencing an abusive relationship themselves:

> "A carer or a parent or someone who's your friend or family who they can go to that will be supportive and that will explain to you what's right and wrong […] some people who aren't taught that might feel like they have to be either one or the other and they're either the dominated" (Rebecca, L500-502, 507-508).

James spoke about the support they found helpful from a trusted teacher at school to "deal with my anger" (James, L484):

> "I used to do mentoring with a teacher […] we used to talk about what…we would talk about things, he'd ask me if I was worried about things and if there's things that I needed to tell someone that I didn't know who to tell because I trusted him quite a lot" (James, L450, 456-459).

Rebecca and James both discussed being taught about relationships, equality and respect at school, although this was not explicitly in the context of romantic relationships:

> "They covered it in, um, I think it was a relationships um, lesson. But we didn't really talk much about romantic relationships more friendships" (James, 220-222).

"Okay so I learnt this from school, but let's say somebody has a wheelchair, somebody's short and somebody's tall. Equality isn't giving them the same amount of boxes so they can all see over the fence, equality is giving them what they need" (Rebecca, L377-381).

Furthermore, Catherine discussed the way in which sharing their feelings with a formal support service was helpful:

> "I learnt to always share my feelings not just keep it to myself just like talk to people even if you don't want to you still should talk to people because it helps a lot if you talk to someone" (Catherine, L267-271).

Overall, this subtheme provides an overview of the support networks young people drew on and described as helpful in processing their experiences, as well as helping them to build their understanding of themselves, their emotions, and romantic relationships more broadly. This subtheme also highlights that participants were not taught about romantic relationships explicitly within mainstream school, however, that some still felt able to apply the information they learnt about romantic relationships themselves, and/or with the support of others.

3.3.3. Comparisons with friendships

All six participants contributed to this subtheme, outlining similarities and differences between friendships and romantic relationships. Across the data set, it was apparent that participants had constructed their understanding of romantic relationships based

upon similarities and differences with friendships, which may be a more familiar experience for this age group. For example, Edward suggested that a romantic relationship is:

"When somebody's your friend and they love you" (Edward, L16).

In terms of similarities, participants spoke about the concepts which are important in both types of relationship, specifically trust, communication and respect. Emma and James stated:

"One of the most important things in any relationship, like, with your friends as well, communication is key" (Emma, L96-98).
"In a friendship or a romantic relationship you need to be honest, loyal and trustworthy" (James, L131-132).

In terms of differences, participants discussed aspects, such as physical affection, love and the amount of time spent with a person, suggesting that one spends more time with a romantic partner than with a friend. James stated:

"A romantic relationship is…I don't know how to put it. Isn't as quite as same as a friendship because you're spending a lot more time with someone in a romantic relationship than in a friendship" (James, L10-13).

Rebecca also suggested that the way one feels about a person may distinguish a friendship from a romantic relationship:

"They're similar but different as well because you need to be able to trust each other and talk to each other, but you don't necessarily love them the same way. You love them more of a friend than, a boyfriend or husband" (Rebecca, L140-143).

Overall, this subtheme highlights the way in which participants sought to make distinctions between friendships and romantic relationships, identifying several similarities and differences. Understanding these differences may help young people make sense of romantic relationships, particularly if they are taught about friendships rather than romantic relationships at school.

4. Discussion

The present study aimed to explore how young people with experiences of parental IPA make sense of romantic relationships, with a particular focus on what characterises 'healthy' and 'unhealthy' relationships. While it is well documented that young people who witness parental IPA are at a greater risk of experiencing abuse in their own relationships, few studies have been conducted on this topic with young people as participants. The present study identified three themes, and eight subthemes, which refer to the various ways in which young people made sense of romantic relationships.

Overall, despite a lack of direct personal experience of romantic relationships for four of the six participants, everyone was able to offer their thinking around and understanding of what constitutes a romantic relationship. Participants described relationship dynamics they considered to be either 'good' or 'bad', referring to actions, behaviours and feelings which might lead to a relationship being 'healthy' or 'unhealthy'. Participants also discussed how they had come to develop their understanding of romantic relationships, learning through various means, including seeing behaviours modelled by their parents, talking to their parents about relationships, learning about friendships at school, and receiving additional support either in school or in the community.

4.1. Making sense of romantic relationships

The current evidence base suggests that younger children engage in more dichotomous, 'all or nothing' thinking than older children. Similarly, it is understood that the possibility of experiencing multiple emotions simultaneously is difficult for children at a younger developmental stage (<12 years of age) (Chambers & Johnston, 2002). This is reflected in the results of the present study in that participants demonstrated dichotomous thinking in their sense-making of romantic relationships, categorising behaviours and feelings as either 'good' or 'bad'. Dynamics considered to symbolise a 'good' relationship included reciprocal feelings of love and joy, caring for and supporting each other, treating each other well, spending time together, communicating with one another, and the absence of abuse. Conversely, dynamics considered to symbolise a 'bad' relationship included physical, emotional, verbal and psychological abuse, as well as feelings of unhappiness, anger and distrust.

The dichotomous way of understanding romantic relationships may reflect the developmental stage of the sample which was made up of quite young participants (10–13 years; $M = 11.16$, $SD = 1.17$). This way of thinking may also be representative of the lack of direct personal experience of romantic relationships within the sample, as research suggests that views and understanding of romantic relationships are developed and repeatedly reworked throughout adolescence with every new relationship experience (Smith, Welsh, & Fite, 2010). Nevertheless, some participants showed great insight into the dynamics that can be involved in both healthy and unhealthy relationships in many ways, as demonstrated in their acknowledgement that a healthy relationship may involve ruptures and repairs and can be 'good enough' rather than striving for perfection.

4.2. Intergenerational cycle of IPA

Intergenerational Transmission Theory (Sellers et al., 2005) and Social Learning Theory (Bandura, 1977) suggest that young people learn about romantic relationships by seeing behaviours, such as violence or abuse, modelled by their parents (Markiewicz, Doyle, & Brendgen, 2001; Sellers et al., 2005). The present findings lend support to these theoretical explanations in that young people spoke of seeing abusive behaviours, as well as behaviours which indicated equality and respect (or a lack thereof), play out within their parents' relationships. As well as the behaviours within romantic relationships, participants' appraisals of these as 'good' or 'bad' also appeared to be learned from caregivers. Participants described the importance of having a supportive caregiver who was able to explain what was 'right' and 'wrong' within relationships. This suggests that participants in this study developed their awareness and understanding

of this through their parents, which is in line with the existing literature that suggests that attitudes and beliefs are learnt from significant others (Copp et al., 2016; Murshid & Murshid, 2018; Pollak, 2004; Temple et al., 2013). It is therefore recommended that ways in which this can be implemented for children who do not have a supportive relationship with a parent and/or guardian, such as those in the care system, should be considered.

Furthermore, Roisman, Booth-LaForce, Cauffman, Spieker, and NICHD Early Child Care Research Network (2009) suggest that friendships during childhood provide an opportunity for learning about intimacy before this learning is transferred to romantic relationships in adolescence. Similarly, according to Stocker and Richmond (2007), conflict within friendships during adolescence may predict conflict in romantic relationships in adolescence. This may explain why young people received teaching about friendships rather than romantic relationships in school. Where this was the case, young people talked about deriving learning from this teaching, and applying it to the concept of 'romantic relationships'. More specifically, young people in this study demonstrated a certain level of creative ability, describing how they developed their understanding of romantic relationships on the basis of what they had learnt about friendships. Throughout the interviews, young people discussed similarities and differences between friendships and romantic relationships, presenting with substantial insight despite the lack of direct personal experiences of the latter for some. These results add to the current body of literature, which suggests that relationship dynamics in friendships play a role in young people's learning about romantic relationships, both throughout childhood and adolescence. Intergenerational Transmission Theory (Sellers et al., 2005) considers the role of caregivers and role models, however, the present findings suggest that learning through peer relationships should also be considered alongside this.

It may therefore be beneficial for schools to teach children and young people about romantic relationships in a developmentally appropriate way. This may include healthy and unhealthy relationship dynamics, seeking support and/or ending romantic relationships, as well as equality and respect in regards to romantic relationships. Additional support may also be provided in the community to support young people in developing their understanding of romantic relationships. This should be continued throughout adolescence as young people begin to put this understanding into practice in their own romantic relationships.

According to Holt et al. (2008), a strong attachment to an adult can mitigate the negative impacts of parental IPA for a child, such as mental health difficulties and experiencing IPA in their own relationships. This is supported by the results of the present study, which suggests that a positive relationship with a caregiver is important in supporting young people who experience parental IPA, and helping to protect them from experiencing IPA in their own future relationships. One young person suggested that having a strong relationship with their mother had helped them to develop their understanding of healthy relationships by having explicit conversations with her about this. This young person also suggested that others with no access to such a relationship may go on to experience an abusive relationship themselves. It was of note that the young people in this study were all accompanied to the interview location by their mothers. While it is not possible to make any conclusive statements about the nature of their relationship, it would suggest a certain level of support offered by the parent in this context, particularly as parents sought support for their children through Innovating Minds following attending a support service for themselves.

4.3. Limitations

The present study has given a voice to young people who have witnessed and experienced parental IPA. While they are often the forgotten victims of domestic abuse (Unicef, 2006), their voices are essential in informing existing preventative measures, as well as further developing and evaluating proactive, person-centred intervention programmes and policy (Houghton, 2015). However, the study is not without limitations. Firstly, FA is designed to manage and analyse large sets of data. Due to the time constraints associated with completing a professional doctorate, and difficulties in recruiting young people, a larger sample size was not achievable. This was related to the programme run by Innovating Minds coming to an end which impacted on young people being available for the research. As such, this limits the generalisability of our findings to the wider population of young people who have witnessed and experienced parental IPA (i.e., those who may not have sought help in relation to parental IPA).

Furthermore, it is important to note that three of the participants had completed the intervention programme with Innovating Minds prior to taking part in the study. This may have altered their attitudes towards and understanding of romantic relationships, as new learning undoubtedly took place as part of the programme. In addition, two of the six participants were male. In light of the existing literature suggesting that males and females differ in terms of their attitudes and beliefs around violence and domestic abuse (Mandal & Hindin, 2013), a more equal spread of male and female participants would have been beneficial. It is also important to consider the limitations around the age range of the sample (10–13 years). As a result, the majority of the participants did not have direct personal experiences of romantic relationships. While this was not essential to take part in the research, it may have facilitated more in-depth reflections and further insights as part of the interviews.

4.4. Directions for future research

The findings of the present study have highlighted several directions for further research. It would be of interest to explore the attachment between caregivers and young people, and whether this relates to how young people who have experienced parental IPA understand and make sense of romantic relationships. We also call for a replication of the present study with a view to include a larger sample, and a near-equal split of both male and female young people in order to highlight any gender differences in terms of young people's understanding and sense-making of romantic relationships. The inclusion of a non-help-seeking sample of young people, and/or young people of an older age (i.e., above the age of 16 years), may shed light on whether attitudes and experiences differ as young people get older. In addition, an older sample of young people may also be better able to make sense of their experiences, and articulate

any thoughts and feelings respectively.

5. Conclusion

The aim of the present study was to explore how young people who have experienced parental IPA understand and make sense of romantic relationships. It was hoped that this would provide novel insights in order to inform existing support services and intervention programmes that aim to reduce the intergenerational cycle and transmission of IPA. Overall, the study found that young people are aware of a wide range of aspects and dynamics which may be present in healthy and unhealthy relationships. This included the presence or absence of abuse and positive communication. Furthermore, participants described different ways in which they applied their learning of related experiences to romantic relationships, including witnessing parental IPA, speaking with a parent or trusted adult, and learning about friendships at school. Community support services were also noted to be helpful in terms of talking about and making sense of experiences of IPA.

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi: https://doi.org/10.1016/j.chiabu.2021. 104942.

References

Ainsworth, M. D. S., & Bell, S. M. (1970). Attachment, exploration, and separation: Illustrated by the behavior of one-year-olds in a strange situation. *Child Development*, 49–67. https://doi.org/10.2307/1127388

Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice Hall.

Birmingham City Council. (2009). *Child victims of domestic abuse* [PDF File]. Retrieved from file:///C:/Users/Hollie%20Richardson/Downloads/Child_Victims_of_Domestic_Abuse_November_2009.pdf.

Birmingham City Council. (2016). *Domestic abuse prevention strategy 2016–2020* [PDF File]. Retrieved from https://birmingham.cmis.uk.com/Birmingham/Document.ashx?czJKcaeAi5tUFL1DTL2UE4zNRBcoShgo=8%2BSYmr%2B%2F5nbkVP6M3KGEqot5Xxs3qgymbQDswhTqLdGX0fA7UMmDcQ%3D%3D&rUzwRPf%2BZ3zd4E7Ikn8Lyw%3D%3D=pwRE6AGJFLDNlh225F5QMaQWCtPHwdhUfCZ%2FLUQzgA2uL5jNRG4jdQ%3D%3D&mCTIb.

Birmingham City Council. (2018). *Domestic abuse prevention strategy 2018–2023* [PDF File]. Retrieved from https://www.birmingham.gov.uk/downloads/file/10086/domestic_abuse_prevention_strategy_2018_-_2023.

Black, D. S., Sussman, S., & Unger, J. B. (2010). A further look at the intergenerational transmission of violence: Witnessing interparental violence in emerging adulthood. *Journal of Interpersonal Violence, 25*(6), 1022–1042. https://doi.org/10.1177/0886260509340539

Bowlby, J. (1969). In John Bowlby (Ed.), *Attachment and Loss: Attachment*. London, UK: Basic books.

Callaghan, J. E., Alexander, J. H., Sixsmith, J., & Fellin, L. C. (2018). Beyond "witnessing": Children's experiences of coercive control in domestic violence and abuse. *Journal of Interpersonal Violence, 33*(10), 1551–1581. https://doi.org/10.1177/0886260515618946

Campbell, J. C. (2002). Health consequences of intimate partner violence. *Lancet, 359*(9314), 1331–1336. https://doi.org/10.1016/S0140-6736(02)08336-8

Chambers, C. T., & Johnston, C. (2002). Developmental differences in children's use of rating scales. *Journal of Pediatric Psychology, 27*(1), 27–36. https://doi.org/10.1093/jpepsy/27.1.27

Copp, J. E., Giordano, P. C., Longmore, M. A., & Manning, W. D. (2016). The development of attitudes toward intimate partner violence: An examination of key correlates among a sample of young adults. *Journal of Interpersonal Violence, 34*(7), 1357–1387. https://doi.org/10.1177/0886260516651311

Cox, C. E., Kotch, J. B., & Everson, M. D. (2003). A longitudinal study of modifying influences in the relationship between domestic violence and child maltreatment. *Journal of Family Violence, 18*(1), 5–17. https://doi.org/10.1023/A:1021497213505

Department of Health. (2017). *Responding to domestic abuse: A resource for health professionals*. [PDF File]. Retrieved from. DoH https://www.gov.uk/government/publications/domestic-abuse-a-resource-for-health-professionals.

Elkin, M. (2019). *Domestic abuse in England and Wales: November 2019*. Newport, UK: ONS.

Elkin, M. (2020). *Child abuse extent and nature, England and Wales: Year ending March 2019*. Newport, UK: ONS.

Evans, S. E., Davies, C., & DiLillo, D. (2008). Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. *Aggression and Violent Behavior, 13*(2), 131–140. https://doi.org/10.1016/j.avb.2008.02.005

Faringer, J., & Hindin, M. (2009). Like parent, like child: Intergenerational transmission of partner violence in Cebu, the Philippines. *Journal of Adolescent Health, 44*(4), 363–371. https://doi.org/10.1016/j.jadohealth.2008.08.012

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., et al. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The adverse childhood experiences (ACE) study. *American Journal of Preventive Medicine, 14*(4), 245–258. https://doi.org/10.1016/s0749-3797(98)00017-8

Foshee, V. A., Linder, F., MacDougall, J. E., & Bangdiwala, S. (2001). Gender differences in the longitudinal predictors of adolescent dating violence. *Preventive Medicine, 32*(2), 128–141. https://doi.org/10.1006/pmed.2000.0793

Franklin, C., & Kercher, G. (2012). The intergenerational transmission of intimate partner violence: Differentiating correlates in a random community sample. *Journal of Family Violence, 27*(3), 187–199. https://doi.org/10.1007/s10896-012-9419-3. In this issue.

Gale, N. K., Heath, G., Cameron, E., Rashid, S., & Redwood, S. (2013). Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Medical Research Methodology, 13*(1), 117. https://doi.org/10.1186/1471-2288-13-117

Graham-Bermann, S. A., DeVoe, E. R., Mattis, J. S., Lynch, S., & Thomas, S. A. (2006). Ecological predictors of traumatic stress symptoms in Caucasian and ethnic minority children exposed to intimate partner violence. *Violence Against Women, 12*(7), 662–692. https://doi.org/10.1177/1077801206290216

Guille, L. (2004). Men who batter and their children: An integrated review. *Aggression and Violent Behavior, 9*(2), 129–163. https://doi.org/10.1016/S1359-1789(02)00119-2

Heath, G., Cameron, E., Cummins, C., Greenfield, S., Pattison, H., Kelly, D., et al. (2012). Paediatric 'care closer to home': Stake-holder views and barriers to implementation. *Health and Place*, (5), 1068–1073. https://doi.org/10.1016/j.healthplace.2012.05.003

Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect, 32*(8), 797–810. https://doi.org/10.1016/j.chiabu.2008.02.004

Houghton, C. (2015). Young people's perspectives on participatory ethics: Agency, power and impact in domestic abuse research and policy-making. *Child Abuse Review, 24*(4), 235–248. https://doi.org/10.1002/car.2407

Lacey, K. K., McPherson, M. D., Samuel, P. S., Powell Sears, K., & Head, D. (2013). The impact of different types of intimate partner violence on the mental and physical health of women in different ethnic groups. *Journal of Interpersonal Violence, 28*(2), 359–385. https://doi.org/10.1177/0886260512454743

Lazenbatt, A. (2010). *The impact of abuse and neglect on the health and mental health of children and young people.* Research Briefing, NSPCC Reader in Childhood Studies, Queen's University Belfast.

Mandal, M., & Hindin, M. J. (2013). From family to friends: Does witnessing interparental violence affect young adults' relationships with friends? *Journal of Adolescent Health, 53*(2), 187–193. https://doi.org/10.1016/j.jadohealth.2013.03.015

Markiewicz, D., Doyle, A. B., & Brendgen, M. (2001). The quality of adolescents' friendships: Associations with mothers' interpersonal relationships, attachments to parents and friends, and prosocial behaviors. *Journal of Adolescence, 24*(4), 429–445. https://doi.org/10.1006/jado.2001.0374

Morrow, V. (2001). Using qualitative methods to elicit young people's perspectives on their environments: Some ideas for community health initiatives. *Health Education Research, 16*(3), 255–268. https://doi.org/10.1093/her/16.3.255

Murshid, N. S., & Murshid, N. (2018). Intergenerational transmission of marital violence: Results from a nationally representative sample of men. *Journal of Interpersonal Violence, 33*(2), 211–227. https://doi.org/10.1177/0886260515604413

Parkinson, S., Eatough, V., Holmes, J., Stapley, E., & Midgley, N. (2016). Framework analysis: A worked example of a study exploring young people's experiences of depression. *Qualitative Research in Psychology, 13*(2), 109–129. https://doi.org/10.1080/14780887.2015.1119228

Pollak, R. A. (2004). An intergenerational model of domestic violence. *Journal of Population Economics, 17*(2), 311–329. https://doi.org/10.1007/s00148-003-0177-7

Renner, L. M., & Slack, K. S. (2006). Intimate partner violence and child maltreatment: Understanding intra-and intergenerational connections. *Child Abuse & Neglect, 30*(6), 599–617. https://doi.org/10.1016/j.chiabu.2005.12.005

Reyes, H. L. M., Foshee, V. A., Fortson, B. L., Valle, L. A., Breiding, M. J., & Merrick, M. T. (2015). Longitudinal mediators of relations between family violence and adolescent dating aggression perpetration. *Journal of Marriage and Family, 77*(4), 1016–1030. https://doi.org/10.1111/jomf.12200

Ritchie, J., & Spencer, L. (1994). "Qualitative data analysis for applied policy research". In B. Bryman, & R. Burgess (Eds.), *Analyzing qualitative data.* London, UK and New York, USA: Routledge.

Roisman, G. I., Booth-LaForce, C., Cauffman, E., Spieker, S., & NICHD Early Child Care Research Network. (2009). The developmental significance of adolescent romantic relationships: Parent and peer predictors of engagement and quality at age 15. *Journal of Youth and Adolescence, 38*(10), 1294. https://doi.org/10.1007/s10964-008-9378-4

Safe Lives. (2017). *Safe young lives: Young people and domestic abuse.* Safe Lives.

Scott, S., & Babcock, J. C. (2010). Attachment as a moderator between intimate partner violence and PTSD symptoms. *Journal of Family Violence, 25*(1), 1–9. https://doi.org/10.1007/s10896-009-9264-1

Sellers, C. S., Cochran, J. K., & Branch, K. A. (2005). Social learning theory and partner violence: A research note. *Deviant Behavior, 26*(4), 379–395. https://doi.org/10.1080/016396290931669

Smith, J. D., Welsh, D. P., & Fite, P. J. (2010). Adolescents' relational schemas and their subjective understanding of romantic relationship interactions. *Journal of Adolescence, 33*(1), 147–157. https://doi.org/10.1016/j.adolescence.2009.04.002

Srivastava, A., & Thomson, S. B. (2009). Framework analysis: A qualitative methodology for applied policy research. *JOAAG, 4*(2), 72–79.

Stocker, C. M., & Richmond, M. K. (2007). Longitudinal associations between hostility in adolescents' family relationships and friendships and hostility in their romantic relationships. *Journal of Family Psychology, 21*(3), 490–497. https://doi.org/10.1037/0893-3200.21.3.490

Temple, J. R., Shorey, R. C., Tortolero, S. R., Wolfe, D. A., & Stuart, G. L. (2013). Importance of gender and attitudes about violence in the relationship between exposure to interparental violence and the perpetration of teen dating violence. *Child Abuse & Neglect, 37*(5), 343–352. https://doi.org/10.1016/j.chiabu.2013.02.001

The British Psychological Society. (2018). *Code of ethics and conduct.* Leicester, UK: The British Psychological Society.

Unicef. (2006). *Behind closed doors: The impact of domestic violence on children.* Unicef.

Van der Kolk, B. A. (2015). *The body keeps the score: Brain, mind, and body in the healing of trauma.* UK: Penguin Books.

Woollett, N., & Thomson, K. (2016). Understanding the intergenerational transmission of violence. *SAMJ: South African Medical Journal, 106*(11), 1068–1070. https://doi.org/10.7196/SAMJ.2016.v106i11.12065