# Psychological Violence

About SafeLives

We are SafeLives, the UK-wide charity dedicated to ending domestic abuse, for everyone and for good.

We work with organisations across the UK to transform the response to domestic abuse. We want what you would want for your best friend. We listen to survivors, putting their voices at the heart of our thinking. We look at the whole picture for each individual and family to get the right help at the right time to make families everywhere safe and well. And we challenge perpetrators to change, asking 'why doesn't he stop?' rather than 'why doesn't she leave?' This principle applies whatever the sex of the victim or perpetrator and whatever the nature of their relationship.

Last year alone, nearly 11,000 professionals working on the frontline received our training. Over 65,000 adults at risk of serious harm or murder and more than 85,000 children received support through dedicated multi-agency support designed by us and delivered with partners. In the last three years, nearly 1,000 perpetrators have been challenged and supported to change by interventions we created with partners, and that's just the start.

Together we can end domestic abuse. Forever. For everyone.

We want what you would want for your best friend

- Action taken before someone harms or is harmed
- Harmful behaviours identified and stopped
- Safety increased for all those at risk
- People able to live the lives they want after abuse has happened

The Oak Foundation

The Oak Foundation is a European-based funder that is family-led and reflects the vision and values of its founders. The Oak Foundation commits its resources to address issues of global, social and environmental concern, particularly those that have a major impact on the lives of the disadvantaged. In all its work Oak pursues rights-based approaches, gender equality and partnership with the organisations it funds. Oak supports civil society as a pillar of democracy and justice and nurture innovation and visionary leadership within it.

Acknowledgements

Glossary

Brainwashing: A process of manipulating and modifying a person's emotions, attitudes and beliefs.

Cognitive Dissonance: Stress, anxiety or discomfort experienced by an individual who holds two or more contradictory beliefs, ideas, or values at the same time, or is confronted by new information that conflicts with existing beliefs, ideas, or values.

Crazy making: A form of psychological abuse, where the abuser sets the victim up for failure, as nothing the victim ever does is right. Crazy making behaviour is also due to "gaslighting," and can also involve "word salad".

Dosing: Small and temporary revivals of the idealise phase where the abuser gives his/her victim "doses" of attention, affection (love bombing) and hope to keep them in, or suck them back into, the relationship.

Gaslighting: A form of abuse in which information is twisted or spun, selectively omitted to favour the abuser, or false information is presented with the intent of making victims doubt their own memory, perception, and sanity.

Grooming: A calculated and predatory act of manipulating another individual into subtly and slowly taking on a set of behaviours and actions that makes the victim more isolated, dependent, likely to trust, and more vulnerable to abusive behaviour.

Hoovering: A manipulative technique named after the Hoover vacuum, and used by abusers to "suck" their victims back into the relationship. Hoovering consists of any attempt to communicate with the victim. It is often done in the form of text messages, phone calls, emails, through mutual friends, family or "accidentally" bumping into the victim. Multiple forms of manipulative messages can be used, from just saying hello, to I love you, or more aggressive or provoking messages such as suicide threats, outright lies.

Love Bombing: Phase one of the cycle of abuse. This stage often involves constant communication and compliments and is designed to lure the victim into (or back into) the relationship.

Normalising: A tactic used to desensitise an individual to abusive, coercive or inappropriate behaviours. Once the behaviour is seen as normal, then the victim is more prone to taking part in it.

Post-traumatic stress disorder (PTSD): According to the mental health charity MIND, PTSD is a type of anxiety disorder which you may develop after being involved in, or witnessing, traumatic events. The condition was first recognised in war veterans and has been known by a variety of names, such as 'shell shock'. But it's not only diagnosed in soldiers – a wide range of traumatic experiences can cause PTSD.

Silent Treatment: A manipulative and emotionally/psychologically abuse technique where one partner cuts off verbal communication with another for more than a reasonable amount of time where one would need to "cool off". An abuser will often give the silent treatment as a result of a fight with the victim. The silent treatment can range from days to weeks (or longer), and is used to communicate the abuser's displeasure, disapproval and contempt toward the victim. During this time the victim becomes so uneasy that they are walking on eggshells, and will do just about anything, including forgiving the abuser of whatever event triggered the silent treatment to start.

Stonewalling: Is a general refusal to communicate or cooperate and is sometimes accompanied by the "silent treatment". The act of stonewalling is emotionally exhausting for the victim, as they are the ones left to do all the work (emotionally or physically).

Triangulation: Creating some form of drama or chaos, with the abuser in the middle, generally involving two rivals, and manipulating them into a conflict with each other. This either done for the entertainment of the abuser or to deflect blame/accountability from themselves.

Walking on Eggshells: Watching what you say or do around a certain person because anything might set him or her off.

Word Salad: Is recognisable through circular conversations and repetition, lack of logic, sweeping generalisations, use of words that are disjointed or unrelated to context, and contradictions. Essentially, it consists of a lack of semantic fluidity. The rationale with this strategy is to demonstrate that there is no solution the abuser can be a part of because, the victim is the problem. Repetition eventually wears the victim out and they give up in exhaustion.

Psychological Violence

Key findings

91%

of survivors experienced some form of psychological violence in their relationship

85%
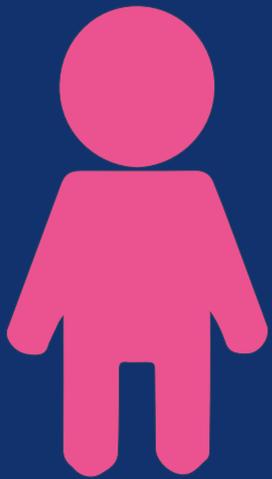
of survivors said the perpetrator used the children to threaten and control them

88%

of practitioners agreed that psychological violence can be as, or more harmful than physical violence

80%

of survivors said their partner promised to change following an abusive incident or if they tried to end the relationship

29%

of perpetrators were in professional, senior or middle management occupations at the time of the abuse

Psychological Violence

Key findings

49% of survivors experienced a partner threatening to take their own life following an abusive incident or if they tried to end the relationship

47% of survivors reported having suicidal thoughts due to the psychological violence

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61% of survivors reported that their partners had used tech to abuse, harass or stalk them at some point in their relationship
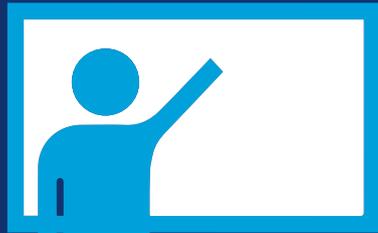
93% of practitioners agreed that healthy relationship education in schools and children's services would help identify psychological violence earlier

90% of practitioners agreed that psychological violence is usually interspersed with warmth and kindness to create emotional confusion

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"It is massively under reported and there is a lack of understanding by the public as to what it is and the effects...I think it goes on far more than we are aware of and that it can and is standalone without any physical abuse"
Practitioner
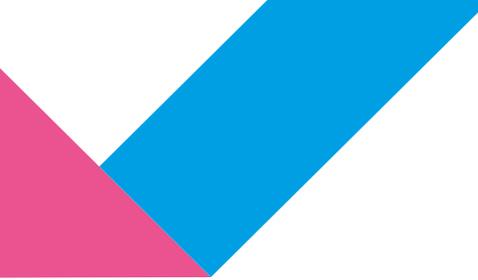
Executive summary

SafeLives has been funded by the Oak Foundation to undertake research on 'psychological violence' as part of their 'Issues Affecting Women' programme.

The aims of the research project are:

- To establish a clear definition of psychological violence, providing a common language that can be used across sectors, across geographical boundaries and to support survivors in identifying domestic abuse.

- To amplify the voices of survivors who experience psychological violence.

- To understand European legislation addressing psychological violence and how this is being implemented.

Evidence was gathered through a mixed-methods approach involving:

- A desk-based literature review

- Survey to survivors based in the UK who have experienced non-physical abuse

- Surveys to practitioners (who work directly with survivors) and partners (who work in the domestic violence sector but not directly with survivors) across Council of Europe Member States

- One-to one interviews and focus groups with survivors based in the UK

Key findings

Defining and understanding 'Psychological Violence'

Across Europe, the term psychological violence is not consistently used or understood. There is a need for a universal term which incorporates a broader range of acts recognised by professionals and survivors

The Istanbul Convention defines psychological violence as *'seriously impairing a person's psychological integrity through coercion or threats'* however, coercion or threats can be carried out in both physical and non-physical ways. The definition currently focuses on the psychological impact to the victim but does not clearly specify psychological violence as a distinctive form of abuse. Ambiguity in this definition, the key legislative tool in Europe for raising awareness and prosecuting acts of non-physical violence, impacts on professionals, across agencies, and survivors' ability to recognise psychological violence when it occurs.

Uncertainty was seen in survey respondents. Many professionals associated the term 'psychological violence' with only psychological or emotional abuse (47% UK practitioners vs 50% non-UK European practitioners' vs 44% European partners). However, for others the term suggested both physical and non-physical violence (33% UK practitioners vs 29% European partners vs 21% non-UK European practitioners). In the UK, the term caused confusion with both survivors and practitioners because of the connotation of the word 'violence' with physical incidents, considering it contradictory when used with the word 'psychological'.

> **"You didn't feel like it was violent because the… for me, I didn't have hands on me – I had no bruises, or whatever"**
> Survivor

Comments from non-UK European practitioners who thought the term could mean, either or both non-physical and physical violence, explained this was due to feeling the two forms of violence are not mutually exclusive or, relating it to the impact on the victim.

Practitioners agreed that a universal term used and understood across professionals and the public would help identify psychological violence earlier (82% UK practitioners vs 78% non-UK European practitioners vs 76% European partners).

Psychological violence should not be advocated as an overarching term for non-physical violence. It should feature only cognitive and emotional elements of abuse

Terms such as 'psychological or emotional' abuse have been used as overarching terms for non-physical violence and many respondents confirmed they use similar umbrella terms (56% UK practitioners vs 40% non-UK practitioners vs 41% European partners). However, more recently, research literature has illustrated the disadvantages to this showing that there is a need to understand, and give attention to, different forms of non-physical violence as distinctive aspects of abuse have different impacts on the victim, risk markers for physical violence and, long-term harm.

Professionals (44% UK practitioners vs 27% non-UK practitioners vs 38% European partners) who advocated for separate terms to be used confirmed the need to distinguish different forms of abuse, to clarify and validate the victim's experience, and for a more complete risk assessment and support plan.

> **"I think if we were to use this one term to describe all non-physical abuse it would be taking a huge step back…if someone is being subjected to sexually coercive behaviour, then that is what they are experiencing - it is not psychological violence. Why should we reduce this to one form of abuse, so that the perpetrator doesn't look as bad? What about the victim's voice?"**
> UK Practitioner

Further, the expressions 'psychological' and 'emotional' have often been used interchangeably however there appears to be an important distinction; psychological is associated with a cognitive impact on the mind, weakening a person's judgment and thinking whereas emotional is linked to emotions and feelings of self-worth and self-esteem.

Survivors also distinguished 'psychological' as playing with the mind and 'emotional' with feelings. Many used the word 'mental' or 'mentally' when describing their experiences. Other survivors associated the term with control, coercion, isolation, power and manipulation. In consultations, no survivors mentioned physical incidents when discussing the term. Survivors mentioned they considered this form of abuse as planned, intentional or thought through.

> **"I would call it 'psychological abuse' but that… psychological… I wouldn't have used that word. I used to call it 'mental torture'…I never used the word 'psychological' until now. It was like 'psychological terrorism'…it was just like someone infiltrating your brain, and I used to describe it as 'he had my brain in his hands', and he was like the 'puppet master"**
> Survivor

Understanding the dynamics of psychological violence

Four key aspects were evidenced in what drives psychological violence. That it occurs commonly and, does not always need to involve physical violence to gain power over victims; it involves a pattern of psychological manipulation; and perpetrators employ a wide range of psychological tactics, often personalised to the victim, to maintain control.

Psychological violence is commonplace and can occur in isolation of physical violence

91% of survivors had experienced a form of psychological violence at some point in their relationships. For nearly half (49%) this was regularly throughout. 42% of survivors had *never* been physically assaulted causing bruising or cuts and 76% had *never* been physically assaulted causing broken bones or serious injury. When survivors recorded acts of physical violence, they were more likely to be one-off incidents or used at a crisis point/ending the relationship than psychological violence.

> **"When I did [Freedom Programme] there was quite a lot of us…only a few of us had ever had a hand laid on us, and that's because some women they ground down and never had to, and then some of us were a bit sparky and he had to resort to those measures to try and get me back down again"**
> Survivor

Practitioners also confirmed the regularity of psychological violence. Nearly three-quarters (71%) of practitioners said psychological violence was 'always or often' reported to them by victims when discussing domestic violence and over two-thirds (68%) reported 'very often or often' supporting victims who have only experienced psychological violence.

Psychological violence has a pattern of abuse involving a phase of 'grooming' with returns to periods of affection

Psychological violence involves a pattern of psychological manipulation. This includes an initial stage often involving constant communication and compliments designed to lure the victim into the relationship ('love bombing') and intermittent revivals of attention, affection and hope used to keep them in the relationship ('dosing'). This slowly desensitises the victim's natural reaction to abusive behaviours, with the abuse becoming normal. At the beginning of their relationships, 96% of survivors said their partner was charming and affectionate, 93% said they expressed love for them very quickly and 92% wanted to spend a lot of time together.

Identification is hindered by controlling behaviours being obscured by accepted gendered ideas of protection, romance and love. Survivors reflected on a 'change of character' in the abuser including unreasonable jealousy, gendered put-downs, and restrictions of personal space often carried out under the façade of loving and caring. Many practitioners and European partners agreed (92% vs 91%) that initially, certain aspects of psychological violence can be misidentified as part of romantic love.

Following an abusive incident or trying to end the relationship survivors noted experiences of 'dosing or hoovering'. 80% of survivors said their partner promised to change, saying they recognised their issues; 85% said they loved them, missed them, couldn't live without them; 90% said their partner communicated with them as if nothing had happened. Nearly half (49%) of survivors experienced severe psychological manipulation with a partner threatening to take their own life following an abusive incident, or them trying to end the relationship. Many practitioners and European partners also agreed (90% vs 94%) that psychological violence is usually interspersed with warmth and kindness to create emotional confusion.

> **"People who abuse in this way are clever in their manipulation and the drawing you back in with good and kind behaviour before striking again with threats, control and manipulation [which] leaves you on a constant cycle that seems impossible to escape"**
> Survivor

Perpetrators use a wide range of psychological tactics to maintain control

Perpetrators use a wide range of hidden tactics to brainwash a victim and cause psychological confusion, often resulting in victims trying harder to please. They frequently shift blame to the victim, present insults as a joke, gaslight, and present different versions of events. Nearly two-thirds of survivors (65%) said they were regularly given the silent treatment or had their feelings discounted. Over half (53%) regularly experienced control in who they could speak to, meet socially or spend time with. Nearly half (48%) regularly experienced suggestions they were mentally unstable, given mixed messages, made to doubt their own thinking or their partners denied a previous message; and 45% regularly endured verbal insults, humiliations, criticisms or putdowns.

> **"He made me feel like I was crazy. I apologised for things I hadn't even done just to try and keep the peace. I always felt guilty for everything and nothing at the same time. I was emotionally exhausted; I would cry all the time"**
> Survivor

Survivors highlighted how perpetrators behave differently in public to private and, 'recruit allies' sometimes by using their status or social standing. Perpetrators also take advantage of survivors' vulnerabilities. Survivors with mental health illnesses noted how they were threatened with being sectioned. BME survivors highlighted how issues of citizenship can be used against individuals and children with precarious immigration status, so they remain dependent upon their abuser. Survivors also spoke about the use of technology as a tool of abuse. Most practitioners and European partners agreed that technology is frequently used

to threaten and control victims (93% and 94%) and nearly two-thirds (62%) of survivors reported that, at some point in their relationship, their partners had used technology (e.g. social media, tracking devices) to abuse, harass or stalk them.

> **"I suffered with serious mental health difficulties previously and he played on this, I honestly feel I would have made an attempt to end my own life or ended up being sectioned had I not fled"**
> Survivor

The impact of psychological violence on survivors and their families

The clear outcome around the consequences of psychological violence was its gravity. It results in, seriously harmful and often long-term psychological and/or physical impacts affecting numerous areas of a victim's life, including their children.

Psychological violence is as harmful to victims as physical violence

Studies have consistently shown that psychological violence can have considerable detrimental and long-term effects on mental and physical health. Victims of psychological violence make up a disproportionate population of psychiatric patients; with links to suicide ideation and suicide attempts.

Survivors described psychological violence as "*the worst abuse*" often explaining that they would rather have been physically hit than endure the psychological cruelty they experienced. Many reported feeling their self-esteem or self-worth was low (90%); feeling confused, anxious or under pressure (88%); feeling exhausted, worn down, lack of motivation (88%); feeling emotionally withdrawn or shut down (88%) and feeling lonely and isolated (84%). 47% of survivors reported having suicidal thoughts. Survivors described additional ongoing impacts including issues with confidence, trust, relationships, finances and employment problems.

> **"This is the form of abuse that still haunts me to this day, almost twenty years later. It has impacted my long-term mental health, ability to trust people and have healthy relationships. I was a teenager then and my experience of being gaslighted, manipulated, controlled and emotionally beaten down destroyed me"**
> Survivor

Practitioners and European partners agreed that psychological violence can be as, or more harmful to the victim than physical violence (88% vs 97%) highlighting how victims can still be at high risk of homicide even when there are no incidents of physical violence. Practitioners described severe and devastating impacts on victims mental and emotional health including high levels of anxiety and depression, PTSD, suicidal ideation, suicide attempts including overdoses, self-harm, diminished self-esteem/self-worth, low confidence, and an eroded sense of self; explaining how these effects are long-term and impact on the person's ability to parent, work, socialise and ability to generally function day-to-day.

Psychological violence confuses the victim making it difficult to recognise as abuse

The dynamics of psychological violence produces extreme psychological confusion. Practitioners note that as the abuse isn't obvious and is often tied up in romance, it produces an acceptance and "*these entrenched experiences become highly normalised*". Practitioners described how survivors have difficulty letting go of the relationship due to the dependency the abuser has created. Survivors experience disbelief, doubting themselves and seek to excuse the behaviours, often grieving for the loss of their partner. Practitioners highlighted how clients don't consider what they were subjected to, as abuse, and do not identify as a victim, feeling their experiences are not as valid as those who experience physical violence.

Many survivors confirmed they did not realise what they experienced was abuse until they had left the relationship. Survivors highlighted the difficulty of identifying what was happening to them, knowing something wasn't right but constantly questioning themselves. Many described the 'frog in water' scenario due to the subtle and creeping nature of the abuse.

> **"I am a strong woman…I always thought I would leave a man who treated me badly. But it creeps up on you. They are very clever and manipulative"**
> Survivor

Children are hidden victims of psychological violence. Perpetrators often use contact with children as a means to continue control

Psychological violence can impact children even before they are born. Studies show its association with pregnancy complications, low birth-weight babies and pre-term birth. There is evidence that growing up in a home with psychological violence has a longer-term impact on children's wellbeing than growing up with physical violence. Many children living with psychological violence are often used as 'tools of abuse' with the perpetrator undermining the victim's child and parent relationship.

85% of survivors said the perpetrator of abuse used the children to threaten and control them. 72% of survivors said the perpetrator attempted to turn their children against them. Many survivors feared their children would normalise and replicate the behaviour they had seen as adults. Practitioners and survivors highlighted the serious impacts of being raised in an environment where there is psychological violence, with effects being seen even at a young age.

> **"So, one of my children took much longer to speak...she learnt not to rock the boat…the other child developed in a different way…a more nervous child –harder to sleep, harder to be alone…even though we are talking about very young children – so, when people say 'Oh, the child is too young, there was no damage done because they were too young' that is a lie"**
> Survivor

How we can support people experiencing psychological violence

Key to supporting people experiencing psychological violence is raising awareness so this form of abuse is widely recognised both professionally and publicly. When victims and their families have experienced psychological violence there needs to be a specialist and comprehensive response to ensure full recovery.

A wide range of professionals' need training around psychological violence to avoid missing opportunities to identify and support victims

Practitioners felt psychological violence is not considered as seriously by wider professionals as physical violence. 91% of practitioners and 100% of European partners agreed that mandatory training for police and legal professionals and training for wider agencies would help identify psychological violence earlier. Non-UK respondents stressed the lack of understanding of psychological violence, between intimate partners, in officials in their countries resulting in victim blaming and an insensitive to response to survivors.

Nearly a third (31%) of survivors did not access any service for support around psychological violence. Survivors told us the fear of not being understood, consequences, and shame stopped them from approaching services. The training of health professionals around psychological violence is also crucial. 30% of survivors accessed their GP, and others looked to health visitors or midwives for support. Some survivors visited GPs with emotional or physical complaints not realising they were manifesting due to domestic violence indicating the importance of professionals to investigate unexplained symptoms. Practitioners noted how earlier recognition from health authorities could bring cost savings due to the reduction of medications administered from a misinterpretation of symptoms.

There is a need for improved access to long-term, specialist therapeutic services to support victims and their children's recovery

Practitioners highlighted a need for specialist support that is accessible to all and delivered by professionals who understand the dynamics of domestic violence and risk. Practitioners drew attention to the current waiting lists for therapeutic support and mental health services highlighting the failure of providing immediate support increases the possibility of victims returning to the relationship. They also noted support needed to be long-term and thorough for victims to make a full recovery.

Some survivors noted they accessed counselling for themselves in a private capacity and others highlighted the need, and difficulty, of accessing specialist therapeutic support for their children who were also victims of the abuse.

"Apart from Action for Children, which is only a six-week thing, there was no… access. It took me 3 years to get into CAMHS to see a therapist for my younger son. We went in there; the therapist in there said – which is the worst thing you can say to an abused child – 'Is it because you think you're like your Dad?'"
Survivor

The public profile of psychological violence needs to be raised to increase its recognition as a form of domestic violence

Survivors and practitioners felt public awareness campaigns focus too much on physical violence. Many believed that psychological violence is largely un-reported as victims do not recognise it as abuse. Survivors suggested wider media and local advertising, focusing on psychological aspects of abuse, to help victims identify earlier. Some stressed the importance of publicly revealing the seriousness of psychological violence, including uncovering its link to suicides. Survivors felt messaging should not only be directed at victims, but also to abusers asking "do you do this?" to alert them to unreasonable relationship behaviours.

Practitioners agreed that better public awareness of the covert psychological tactics of an abuser (92%), the pattern of a psychologically violent relationship (92%) and the dynamics of psychological violence (91%) would help earlier identification.

"I have seen many women with devastating effects from suffering this level of abuse, it has taken a long time for them or someone else to recognise that this is abuse. Too often I hear from women that "he doesn't hit me" so therefore I am not being abused in any way"
Practitioner

There is a need for societal change to challenge the normalisation of psychological violence

Linked to the demand for training and awareness was the need to challenge the normalisation of psychological violence, both publicly and professionally. European partners noted in some countries a conservative gender biased culture in professionals naturalises psychologically abusive behaviour when the perpetrator is male.

Survivors highlighted the need for a change in cultural patterns of behaviour to break down gender stereotypes and accepted gender behaviours. BME survivors underlined the commonality and acceptance of this form of abuse in their communities, meaning families reinforce and prolong the mistreatment.

"When people discuss how their partner has been behaving towards them, due to a lack of awareness, it is more likely to brushed off as "normal" or "not a big deal" rather than realising the seriousness"
Practitioner

Practitioners and survivors thought, to make change and prevent future abuse, the emphasis must be on educating children and young people around acceptable relationship behaviours to de-normalise controlling behaviours currently often accepted as 'loving and caring'. 93% of practitioners agreed that healthy relationships education in schools and children's services would help earlier identification of abusive behaviours and make longer term societal changes. Both also spoke of a need to focus on boys and men to challenge their negative views of relationships and females.

Improving legislation to protect people experiencing psychological violence

For legislation to fully protect people experiencing psychological violence across Europe, firstly, laws need to be coordinated. Further, laws must recognise domestic violence as a 'course of behaviour' that can extend over time and can include various forms of violence, not only physical, to give adequate protection to people experiencing psychological violence. However, any legislation must be combined with specialist, mandatory training of criminal justice professionals to give authorities a comprehensive understanding of this complex form of abuse and, consequently the ability to use regulations.

Legislation around psychological violence needs to be regulated across Europe

There is a need to coordinate legal definitions across Europe. Most Member States have legislation and policy about psychological violence, but it is not necessarily gender-specific or reflective of the individual acts that make up non-physical forms of violence. Laws relating to psychological violence are often not matched with a criminal offence meaning there are few mechanisms for prosecution and fewer opportunities for victims to access legal support. Legislation also continues to prioritise physical forms of violence. There is also a lack of robust and routinely collected data around psychological violence which makes monitoring the effective implementation of law and policy across Europe problematic.

The lack of understanding across professionals means any relevant legislation is failing to protect victims and their families

Even in countries where relevant legislation is in place, the response to victims is inconsistent due to a lack of professional understanding of psychological violence. Over half (54%) of practitioners who have related legislation in their countries did not think it made a difference in protecting victims of psychological violence. Practitioners and European partners reinforced the view that this was mainly due to a lack of training and recognition in professionals, resulting in relevant laws not being used and a lack of convictions.

> **"Legislation only has a real impact if it is properly implemented. This involves many issues from training of police agents to disseminating information and offering appropriate answers to tackle the needs of victims"**
> European partner, Portugal

European respondents also drew attention to the lack of education and gender biased attitudes in the police and judiciary in their countries which result in victim blaming and psychologically abusive behaviours being normalised.

> **"Italy is a very traditional country, and the legislation is not followed enough"**
> European partner, Italy

Survivors highlighted the negative impact of professional inexperience on themselves and their children with abuse, control and manipulation continuing throughout judicial proceedings. Nearly three-quarters (73%) of survivors said perpetrators used child contact to continue the abuse. Survivors felt professionals and services allowed abuse to continue, often being manipulated by the perpetrators themselves.

> **"Despite very obvious emotional and financial abuse, the family court system did nothing to acknowledge or prevent the abusive behaviour that was right under their noses. There is no punishment for abuse, perjury or contempt and very little regard for the welfare of children"**
> Survivor

The burden of proof is being put onto survivors to evidence psychological violence

Many practitioners did not feel legislation was helping to protect victims as the burden on proof is being put onto them to evidence the abuse at a time when *"victims of psychological violence have such low self-esteem they do not feel they are worth social justice"*. They fear they would not be believed, and they are fearful of the perpetrator finding out. Survivors told us that, they themselves doubt, if what they are experiencing is abuse when there have been no physical incidents, and that proving the abuse is extremely difficult without physical evidence.

> **"There's no definitive line that gets crossed, no physical damage to prove to oneself or others. Even two years out of the relationship, I still sometimes doubt what happened to me, and question the severity of it, even though I became suicidal and there were death threats. Many, many times I wished he would hit me, so that I could know for sure it really was abuse, so there would be proof, so that I had a clear reason to leave the marriage, and a clear reason to justify and explain it to others. He was so charming, no-one would ever believe me otherwise"**
> Survivor

Legislation around psychological violence is considered key to give the societal message that it is a crime

Despite problems with relevant legislation, many practitioners and European partners stressed the need for laws aimed at psychological violence. They noted how it has raised its profile and, validates the victim's experience, giving the message that it is a crime not to be tolerated. Many UK practitioners noted the Serious Crime Act 2015 around coercive and controlling behaviour is a step in the

right direction with some practitioners seeing an increase in prosecutions. Others noted how legislation recognising psychological violence aids in protecting the victim and enables legal orders to be obtained.

> **"Without legislation, the perpetrators of psychological violence are not held responsible for their actions. Perpetrators know this! Without this legislation we uphold the common myth that 'if there is no physical violence' then it isn't abuse"**
>
> European partner, Ireland

Recommendations

Recommendations for the Oak Foundation

1. As the term 'psychological violence' is set in the Istanbul Convention, we recommend working with the Council of Europe to promote the use of a well-defined and standardised definition associated with the term, to assist with earlier recognition, until further investigation can be carried out across Europe. We advocate the following description, which incorporates words used and recognised by survivors in the project acknowledging, in some countries (e.g. UK), the word 'abuse' should replace 'violence' to avoid theoretical confusion:

   Psychological Violence (Abuse) involves the regular and deliberate use of:

   "A range of words and non-physical actions used with the purpose to manipulate, hurt, weaken or frighten a person mentally and emotionally; and/or distort, confuse or influence a person's thoughts and actions within their everyday lives, changing their sense of self and harming their wellbeing"

2. Commission research into the understanding of the term 'psychological violence' across a wider European context.

3. Develop a toolkit around psychological violence that can be circulated to professionals across wider agencies in several key languages.

4. Create promotional materials for distribution exposing the dynamics of psychological violence – with a focus on the abuser, as well as the victim. Enlighten people to the risks – e.g. its relation to suicide and self-harm; its impact on pregnant women; its impact on children.

5. Use the Oak Foundation's social media outlets to disseminate key statistics and information provided from the report to generate discussion and distribute knowledge.

6. Work with partners to ensure any training platforms, such as the Council of Europe's online course for legal professionals, includes information on psychological violence.

7. Commission the development of a practice assessment tool that identifies and assesses the risk of psychological violence and provides guidance on responding to victims and perpetrators of this form of abuse.

8. Commission research into the emotional and cognitive elements of psychological violence to gain understanding of these factors on prevalence, relationship to gender, levels of risk, and impact to the victim.

9. Commission research on the profile of perpetrators who commit this form of abuse to understand, prevent and improve the response to psychological violence, breaking the cycle for future generations.

10. Commission research considering the dynamics of psychological violence within different groups and explore how intersectionality shapes people's experiences of this form of abuse and access to resources.

11. Commission follow-up research to gain a richer understanding of laws specifically around psychological violence, and to what extent they are being used across Europe.

12. Advocate for more complete and comparable data, at national and European levels, on psychological violence, to evidence the scale of the abuse and ensure policy decisions accurately reflect victims' experiences and needs.

Recommendations for the European Commission

1. Ensure Member States across Europe have specific legislation to address psychological violence within intimate partner relationships and a coordinated criminal offence.

2. Ensure legislation is supported with mandatory training of police and wider criminal justice professionals on psychological violence to provide knowledge and understanding to utilise the regulation.

3. Set up a robust standardised framework across Member States for the monitoring of prosecutions and convictions for psychological violence to assess implementation and survivors' experiences of prosecution.

4. Deliver national educational programmes to children and young people on healthy intimate relationships and how to recognise psychologically abusive behaviours.

Recommendations for local Commissioners

1. Sponsor public awareness raising campaigns which draw attention to the dynamics and risks of psychological violence; and challenge the normalisation of psychologically abusive behaviours with a focus on those who perpetrate the abuse e.g. instead of questioning "do you experience this?" ask "do you do this?".

2. Guarantee funding for local specialist, long-term therapeutic support for victims and children of psychological violence.

3. Allocate funding to those who work with vulnerable boys and young males (e.g. social workers, youth projects, juvenile probation) to provide a coordinated response to educate and support them to conduct healthy relationship behaviours.

Recommendations for domestic violence services and other specialist services

1. Display promotional material in services on psychological violence with information on where to get advice and support.

2. Develop forums in domestic violence services for survivors to offer peer-to-peer support and use their voices to influence national action plans, and local strategies to target community-wide awareness raising around psychological violence.

3. Develop materials around how technology is used to control and manipulate, to raise awareness. Provide information on how to stay safe online and advice in how to deal with online abuse.

4. Specialist services should work together to offer mutual development opportunities such as arranging reciprocal training and awareness raising.

5. Health professionals should seek training on psychological violence in intimate relationships and practice professional curiosity, so they 'ask the question' in a respectful way with patients that have unexplained psychological or physical symptoms.

6. Specialist services working with young people should offer educational workshops to challenge the normalisation of psychologically abusive behaviours in relationships; working particularly with young people who harm at the earliest opportunity.

7. Ensure data collection gathers the different forms of non-physical violence separately so the prevalence of psychological violence can be evidenced.

"When you first get together with this type of abuser you don't realise what is happening but know instinctively something isn't right, but they have such a hold on you, it's too late. They isolate you, blame you, make you feel worthless and intimidate you so much. At times I felt I'd rather he had hit me as I always felt like he would."
Survivor
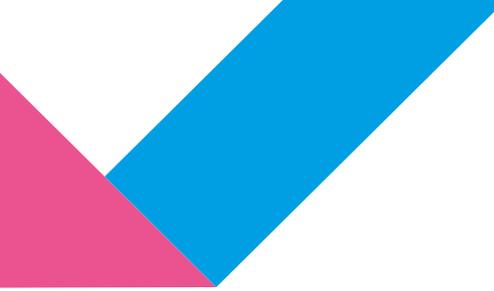
Chapter 1
Introduction

1.1 Context of the research

SafeLives has been funded by the Oak Foundation to undertake research on 'psychological violence' as part of their 'Issues Affecting Women' programme. In 2017, an initial analysis of SafeLives data and secondary literature highlighted the need for further investigation of 'psychological violence'. It was found that:

- There is no single agreed definition of 'psychological violence'
- 'Psychological violence' is a form of abuse that is under-reported and there are significant gaps in the support received by victims and survivors
- 'Psychological violence' is a form of abuse that can lead to severe harm to victims and their children

1.2 Approach to the research

SafeLives believe that our commitment to end domestic violence and abuse must be led by survivors; involving and engaging their expertise in all we do. This research project will adopt a participatory and empowerment approach, working in partnership with survivors. It will look to build a common language around psychological violence; and investigate the subject more widely from those with lived experience.

This insight will form a solid foundation for raising awareness across sectors, helping survivors to identify their own experiences and therefore access services, as well as reinforcing the efforts of those advocating for legislative change. Through speaking to survivors and, professionals working in the field, we will learn to better identify and articulate the impact of psychological violence, as well as identifying the most critical gaps in service provision, and the legislative framework.

As the Istanbul Convention represents a framework to protect all victims of violence, including men, this study focused on intimate partner violence (IPV) by current or former partners but was not limited to female, heterosexual experiences. As requested by the funders, we will investigate 'psychological violence' from the position of referring to all forms of non-physical violence.

Evidence will be gathered through a mixed-methods approach (See Appendix A for full methodology) involving:

- A desk-based literature review
- Surveys to survivors based in the UK
- Surveys to practitioners (who work directly with survivors) and partners (who work in the domestic violence sector but not directly with survivors) across Council of Europe member States
- One-to one interviews and focus groups with survivors based in the UK

Throughout the document we use 'Domestic Violence (DV)' and 'Psychological Violence' by way of primary terms, as employed in the Istanbul Convention. However, other terms such as 'Domestic Abuse (DA)' or Domestic Violence and Abuse (DVA) are more commonly recognised in other countries. Throughout the literature review, where we cite evidence, we use the primary term (e.g. psychological violence, psychological abuse) that has been used in that research.

The aims of the research project are:

- To establish a clear definition of psychological violence, providing a common language that can be used across sectors, across geographical boundaries and to support survivors in identifying domestic abuse.
- To amplify the voices of survivors who experience psychological violence.
- To understand European legislation addressing psychological violence and how this is being implemented.

Through this investigation we will answer the following research questions:

1. How is psychological violence defined and understood?
2. What are the dynamics of psychological violence?
3. How does psychological violence impact on survivors and their families?
4. How can people experiencing psychological violence be supported?
5. How are people experiencing psychological violence protected by European legislation?

1.3 Limitations

Caveats to the research include the following:

- The research is predominantly based on a UK sample:
  o Surveys to practitioners and partners were only available in English therefore this would have limited the opportunity for non-UK professionals to understand and respond.
  o All survivor testimonies are from individuals based in the UK therefore further research would be needed to assess if views of survivors differ across different cultural contexts.
- The limited non-UK European sample makes a full Europe-wide assessment of the situation difficult. However, although interpretations of the data should be treated with caution, the evidence from non-UK European respondents gives important initial insight into differing cultural contexts of the research area.

- The research subject is extremely broad hence we consider this to be a preliminary scoping of the research area.
- We do not claim to systematically measure psychological violence but to give a broad idea of the prevalence, regularity and pattern of this form of violence to inform the final definition.
- As 'psychological violence' has been specified to refer to all non-physical violence results involving impact to the victim cannot distinguish what form, or combination, of violence has had the effect.
- The investigation of literature around legislation is preliminary and is based on information that could be publicly accessed.

1.4 Report outline:

Chapter 2: This chapter will provide evidence from a desktop review covering definitions and understanding of psychological violence, dynamics of psychological violence, impact of psychological violence on victims and their families and European legislation supporting victims of psychological violence.

Chapter 3: This chapter outlines the profiles of respondents to the practitioner, European partner and survivors' surveys.

Chapter 4: This chapter includes the data from the surveys and the qualitative evidence of survivors from the interviews and focus groups. Each section is organised to answer the five research questions.

Chapter 5: The final chapter concludes the evidence from the research project, discusses it in relevance to the research literature, and provides recommendations from this.

Chapter 2

Literature review

2.1 Background

Domestic violence is recognised as a serious, widespread social problem that affects the lives of many people, but disproportionally affects women. Two multi-country domestic violence prevalence studies[1,2] have found levels of lifetime prevalence of one in four women, and higher across developed and developing countries. The World Health Organisation argues that, in Europe, domestic homicide represents the most frequent cause of violent death of women.[3] The long-term negative impacts of domestic violence on women's economic, physical and mental health, and the consequences for children and their life chances, is indisputable within contemporary research.[4] It can obstruct the realisation of women's rights by preventing their participation and autonomy as full citizens in their communities. It also incurs a cost to the economy and society with the European Institute for Gender Equality (EIGE) estimating violence against women, by their partners, costs European Union (EU) countries an estimated €109 billion a year.[5]

Domestic violence and abuse can take many forms, and since the early women's movements in both the United States (US) and the United Kingdom (UK), women have talked about the extent of their experiences of domestic violence and abuse including physical, emotional, psychological, sexual and financial abuse.[6] Many women have experienced non-physical abuses for years but, have not recognised it as such, despite consistently noting how it is the abuses that cannot be seen which are most difficult to deal with; the abuses that wear away at a woman's self-esteem, self-confidence and self-respect.[7] Debates across the US and UK about the disputed nature, extent and distribution of domestic violence resulted in Stark's concept of 'coercive control'[8] which emphasised the significance, and commonness of coercive and controlling behaviours as a serious social problem. In the UK, controlling behaviour is one of the most determining factors underpinning most Domestic Homicide Reviews (DHRs). A lack of understanding around the risks of non-physical coercive controlling behaviours resulted in some domestic abuse cases being inappropriately assessed as medium/standard risk, and therefore, remained below the radar of certain services, and the threshold for certain interventions.[9] A UK Home Office review also highlighted that DHRs involving non-physical violence elements (e.g. coercion and control, threat to kill, sexual exploitation, grooming, stalking and harassment) were not taken seriously.[10]

In most EU member States, until relatively recently, violence against women – particularly domestic violence – was considered a private matter in which the state played only a limited role. This was despite hard work by many women's, and other organisations, in trying to change this perception for many years. It is only since the 1990s that violence against women has emerged as a fundamental rights concern that warrants legal and political recognition at the highest level and as an area where State Parties, as those with a duty to protect, have an obligation to safeguard victims.[11] The Istanbul Convention[i], adopted in 2011 and in force since 2014, is the first legally binding instrument of its kind and aims to combat all forms of violence against women, to take measures to prevent such violence and protect victims, and to prosecute the perpetrators. While the Istanbul Convention does not specifically recognise coercive control, it requires state parties to pay due attention to various forms of psychological violence, alongside physical and sexual violence. In the absence of a separate article in the Convention concerning it, both Articles 33 and 46 of the Istanbul Convention are relevant when considering coercive control as a repeated or continuous form of psychological violence.[12]

However, psychological violence or abuse has been notoriously hard to define. Reviews of US and UK literature suggest persistent definitional and measurement dilemmas, with similar behaviours overlapping with numerous constructs, including emotional abuse, psychological abuse, psychological maltreatment, emotional blackmail, psychological aggression, coercion, and verbal abuse.[13,14] Across Europe, there has also been a lack of agreement on how psychological violence should be appraised, particularly across countries and cultures.[15,16] Yet it is an extremely common form of abuse with a recent EU-wide study estimating 1 in 3 women have experienced psychologically abusive behaviours by a current, or previous intimate partner.[17]

There also appears to be some uncertainty in how the concept of 'coercive control' is understood. Walby and Towers (2018) believe there is conceptual confusion around competing understandings of the term with disputes about the relationship between physical violence, and non-physical coercion. They note that the concept of coercive control is now being interpreted in public debate as centred on non-physical, psychological abuse rather than the earlier focus on physical violence and, used to justify the extension of UK criminalisation to repeated forms of non-physical coercive behaviour.[18] Indeed, on reporting the new law in England and Wales[ii] articles used headlines describing it as *"the new psychological abuse law"*.[19]

In the next sections, we shall look more closely at how psychological violence has been defined, and how it relates to Stark's concept of coercive control. We are using the term 'psychological violence' as predominantly stated in European legislation. However, the terms 'psychological violence' and 'psychological abuse' are used interchangeably within the legislation literature, and further European research. Therefore, we consider US and UK literature around psychological abuse applicable in considering what constitutes this form of violence while considering the connotations of the two terms.

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i   The Istanbul Convention understands violence against women as a manifestation of historically unequal power relations between the two sexes, and acknowledges that domestic violence affects women disproportionately

ii   Serious Crime Bill

2.2 Definitions of psychological violence

In US literature, psychological and emotional abuse, either with or without the existence of physical abuse, are sometimes differentiated from 'psychological violence' which occurs only in association with physical violence.[20]

When considering psychological abuse, definitions that suggest agency or purpose on the part of the abuser use words such as "systematically", "coercive" and "intentional". Thus, according to Loring, psychological abuse is "an ongoing process in which one individual systematically diminishes and destroys the inner self of another" (p. 1).[21] Some authors[22,23] have attempted to describe psychological abuse in relation to its impact on the victim – something that has not happened for intimate partner abuse or domestic violence as concepts in general. Murphy & Cascardi (1999, p. 9)[24] defined psychological abuse as "coercive or aversive behaviours, not including physical force or threat of harm", which are "intended to produce emotional harm and which are directed at the target's sense of self" whereas Tolman (1999) outlined psychological abuse in terms of isolation of the victim, dominance of the perpetrator and emotional/verbal maltreatment of the victim.[25]

The categories of psychological or emotional abuse also raise difficulties as they have tended to be used as overarching terms to encompass multiple forms of non-physical abusive behaviour. While some have used these terms synonymously to refer to non-physical abuse, others may make distinctions between them.[26,27] For example, Millar (1995) proposed that emotional abuse involves comments and actions intended to undermine the victim's self-respect and sense of worth. It involves complaints, insults, put-downs, name calling, public embarrassment or accusations. Psychological abuse is somewhat different; its purpose is to undermine the security of the victim's own logic, and reasoning. In short, the abuser makes the victim feel as if they are losing their mind.[28] In a German study, survivors portrayed psychological violence as a form of brainwashing, estranging them from their own feelings and sensations, destroying their self-confidence, making them feel they were going crazy.[29]

In the UK, Women's Aid acknowledge that the terms psychological and emotional abuse have tended to be used in place of one another but distinguish psychological abuse as maltreatment that impacts on the mind and mental health while emotional abuse impacts on emotions and well-being.[30] In the broader literature on IPV, emotional abuse (sometimes termed verbal abuse) has received the most attention. Studies tend to conclude that this abuse is a consistent risk factor for physical violence.[31] However, emotional abuse is rarely examined in its own right, and does not distinguish between it and psychological abuse.

More recently, it has been shown that there is a need to understand, and give attention to, different forms of non-physical abuse. For example, researchers have now demonstrated that economic abuse is a distinct construct[32] having previously been conceptualised as a form of psychological abuse[33] and now understand financial abuse[iii] as a part of the wider concept of economic abuse. Also, research has indicated that different types of non-physical abuse differ markedly in their prevalence, their relationships to gender, and their effects on the risk of physical

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iii   Having money or other property stolen; being defrauded; being put under pressure in relation to money or other property; and having money or other property misused as defined under the Domestic Abuse and Sexual Violence (Wales) Act 2015

violence.[34] Therefore, to gain further understanding of the nuances of domestic violence, encourage earlier identification, and recognise risk markers there should be a focus on clear terms, definitions and measurement of varying forms.

2.2.1 Definitions across Europe

A Council of Europe report (2011) defined 'psychological violence' as *"reiterated words and acts aimed at or having the consequence of causing harm or putting the victim in a position of subjugation"* confirming psychological violence can take a wide range of forms: verbal abuse, yelling, threats, harassment, intimidation, constant criticism, shaming, blaming, name calling, insulting, ridiculing, imitating and publicly humiliating the victim, isolating the victim, discouraging any independent activities, expecting the victim to take part in sexual activities she or he is not comfortable with to prove her/his love, using the children to gain control by undermining the other parent's authority or threatening to leave and take the children, depriving the victim of means of subsistence or economic independence, threatening to kill loved ones, including pets, threatening to destroy possessions and threatening to have the person placed in an institution.[35]

The European Institute for Gender Equality (EIGE) notes its significant characteristic is an abusive pattern of behaviour occurring over time – within or outside the family - and give examples of psychological violence as acts such as isolation from others, verbal aggression, threats, intimidation, control, harassment or stalking, insults, humiliation and defamation.[iv]

The United Nations Office on Drugs and Crime (UNODC) Blueprint for Action on Violence Against Women (VAW) defined 'psychological violence' as *"controlling, coercive or threatening behaviour or intentional conduct of seriously impairing a person's psychological integrity through coercion or threats"*.[36]

Article 33 of the Istanbul Convention states a shortened version of this definition: *'seriously impairing a person's psychological integrity through coercion or threats'.* The offence of psychological violence set out in the article limits criminalising any act to 'intentional conduct' which 'seriously impairs a person's psychological integrity'. Perpetrators must use 'coercion or threats' for their behaviour to fall under this offence and psychological violence refers to a course of conduct amounting to an abusive pattern of behaviour occurring over time rather than a single event. The ideas of 'intentional' and 'serious impairment of psychological integrity' are not defined in the Convention and are left to the State Parties to interpret.[37]

The definition used in the Istanbul Convention focuses on the psychological impact to the victim through coercion or threats. However, it does not specify acts of psychological coercion or threats and therefore may be open to interpretation that psychological violence involves a range of tactics, as in coercive control.

2.3 Coercive control

For Stark, coercive control is a cumulative form of subjugation that uses a range of tactics – low level physical abuse[v] alongside a pattern of non-physical abusive behaviours such as threats, intimidation, stalking, destruction of personal property, psychological abuse, economic oppression, and restrictions on liberty – that both

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iv   http://eige.europa.eu,rdc,thesaurus,terms,1334

v   This includes constant physical abuse that leaves no scars: shoving, pinching, hair-pulling, and choking, with the understanding it will escalate if resisted

isolate women and 'entrap' them in relationships with men by making them constantly fearful. This represents one of the most notable attempts to link domestic abuse to gender inequality.[38] While Stark uses coercive control as an umbrella term for violence, intimidation, isolation, and control in a relationship, Johnson (2008) has argued for the recognition of 'incipient intimate terrorism' (cases in which there is a clear pattern of power and control but in which there has as yet been no physical violence)[39] while other academics note that coercive control can exist without the use of physical, or sexual violence.[40,41]

Crossman et al (2016) note that many definitions of constructs overlapping psychological abuse appear very similar to definitions of coercive control in the IPV literature on violent coercive control, or intimate terrorism.[42] Although the psychological abuse literature gives some insight about experiences of nonviolent coercive control, the "labelling dilemma" (Lammers et al., 2005, p. 30)[43] prevents drawing accurate conclusions.

Stark (2018) has observed that sometimes the terms 'coercive control' and 'psychological abuse' are used interchangeably but notes its inaccuracy, *"Psychological abuse is not defined to include the elements of coercive control, such as taking people's money, such as stalking, such as physical violence, such as sexual abuse. So, all those other elements of coercive control aren't really elements of psychological abuse as I understand it. And in coercive control, there always is the element of fear. It's always fear-based. Psychological abuse may not be fear-based, it may just be based on denigration".[44]*

However, Sackett & Saunders (1999) found fear of being abused was exclusively predicted by psychological abuse.[45] Pain (2012) also demonstrated that psychological and emotional control that result from fear are a key way in which domestic abuse 'works' and keeping another person in a state of chronic fear does not require physical violence to be used all the time, or at all. Using, and playing on fear is common by abusers and is made possible because of their intimate knowledge of the person they are mistreating.[46] Most of all, fear is often reinforced by what the abuser tells the person they are harming about the abuse. Abusers tell powerful stories to the victim often saying it is their fault. It is very common for abusers to either refuse to discuss the mistreatment, or to deny it is abusive. In this way, the fears of the person being abused are identified as irrational, and not justified by what is happening.[47]

Crossman et al's (2016)[48] research looked at 8 case studies of mothers experiencing non-violent coercive control and found this group experienced similar levels of fear as women in the coercive control group, despite there being no physical incidents. However, women in the case studies reported physical intimidation, sexual coercion, monitoring of time and having money used which may be ways of instilling fear without the need for physical violence.

Other non-physical forms of abuse, often involved in coercive control, can often be interconnected with psychological violence with it underlying and facilitating other types of abuse.

2.3.1 The underlying aspects of psychological violence in other forms of abuse

Economic abuse[vi] is often interwoven with psychological, physical and/or sexual abuse creating a context in which the individual is intimidated and isolated. For example, psychologically, a victim can be abused and belittled by being told they have no understanding of finances or humiliated over their ability to work. In the UK, examples of economic abuse were identified within sixty per cent (n=21) of the successfully prosecuted cases of controlling or coercive behaviour. Ninety per cent (n=19) of the economic abuse cases involved psychological abuse which included isolating and humiliating the victim.[49]

Sexual coercion occurs along a continuum from sexual acts under pressure: for example, when one partner refuses but is then 'talked into it' or consents to 'keep the peace' to sexual acts without consent, including rape, and acts where one partner cannot give consent due to being drunk, drugged or unconscious. A controlling man often pushes his partner to engage in certain acts by letting her know if she would face consequences if she refused. However, physically forced sex is a sign that the relationship may turn lethal.[50] Survivors accounts describe being coerced into sex, and it being used as a form of control. Some women had to 'pay' for the right to go out of the house, to buy food for their children, or to fill the car with petrol to get to work, by first having sex.[vii]

Recent studies show that perpetrators use mobile phones, social media, and the threat of posting sexual images of the victim online to continue their abuse and control.[51,52] Cyberbullying, and similar forms of online harassment, have become more common in domestic abuse cases with abusive partners using these technologies in disturbing ways, including online harassment with threats of physical or sexual violence, and the use of cyber-monitoring to track a partner's movements and activities.[53,54] The European Parliament (2016) notes young women are particularly vulnerable for, what they term, forms of online psychological abuse since they make more use of the internet and social media than older women.[55]

Literature indicates that coercive control and stalking are often simultaneously present.[56,57] When considering homicide risk markers, stalking, control and jealousy are factors which raise the risk for fatal violence.[58] Studies have suggested that partner stalkers are more likely to threaten and assault victims and are more insulting, and intrusive in a victim's life. Psychologically violent acts such as explicit threats of harm are significant.[59] Other behaviours (like threats to children) are also high-risk for harm,[60] and children are often used as a means of pursuing the victim, despite the involvement of the police or courts. Stalkers will also often use psychologically manipulative tactics to make the victim appear untrustworthy, especially as a witness.[61]

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vi   Economic abuse involves behaviours that interfere with an individual's ability to acquire, use and maintain economic resources involving access to food, clothes, telephones, transport and somewhere to stay

vii   http://www.healthtalk.org,peoples-experiences,domestic-violence-abuse,womens-experiences-domestic-violence-and-abuse,sexual-violence-and-abuse

2.4 The dynamics of psychological violence

Psychological violence is, like physical violence, used to gain power and control over a partner.[62] Psychological abuse has been found to occur in most relationships that are physically violent[63,64] and research suggests that psychological and emotional abuse predicts physical abuse.[65,66] However, Outlaw's (2009) research noted that although non-physical violence was positively correlated to physical violence, the majority of people experiencing non-physical abuse did not report physical violence.[67] Previous research has also recognised that psychological violence may occur in relationships where there is no physical violence.[68] Sackett & Saunders (1999) research identified four main forms of psychological abuse: Criticising behaviour, Ignore, Ridiculing traits, and Jealous/control. Jealous/control was most strongly rated to the amount of physical abuse experienced.[69]

Paulino (2016) noted sometimes there is an escalation to physical violence only when a woman actively resists psychological violence when a perpetrator feels more control is needed.[70] Marshall (1994) notes that subtle psychological abuse may be more effective in controlling the victim than physical violence, in that covert abuse put together with loving behaviour may increase the victim's uncertainty about themselves and their perceptions, and is sometimes enough for an abuser to maintain control without resorting to injurious physical assaults.[71]

2.4.1 Patterns of psychological violence

Psychological violence is based on a deceitful interlocking cycle.[72] Most relationships that become abusive do not appear that way at the beginning. At first the abuser may seem like the ideal partner– devoted, loving, supportive and wanting to spend every minute together creating an intensity to the relationship.[73] Many online psychology magazines e.g. Psychology Today and online domestic violence support articles talk of the 'frog in water' scenario[viii] describing the slow and insidious nature of psychological violence. Survivors have described this situation - where initially behaviours appeared loving, for example wanting to spend all their time together, but gradually their partner became more controlling. Accounts of survivors show they found it difficult to put their finger on exactly what was wrong, as the individual actions themselves could be part of any 'normal' relationship, or even trivial.[ix]

Loring (1994) has noted that the 'cyclical' pattern of abuse may not be as relevant in cases of psychological abuse, which may be marked by more of a linear escalation, rather than repeating cycles of tension building and release[74]. Fontes (2015) agrees that most controlling men add in moments of love, romance and connection together with control, as occasional rewarding maintains compliance, keeping the partner in the relationship hoping for more.[75] As the relationship deteriorates, this results in the victim trying harder to please hoping for a return to the earlier loving relationship.[76] However, violence can begin and end at random. It can be linked to stressful periods in life: unemployment, pregnancy, illness and not of a cyclic nature but more occasional whereas some women live in a situation of constant violence without a pause.[77]

viii   https://www.psychologytoday.com,gb,blog,she-comes-long-way-baby/201606/frog-is-dropped-boiling-water

ix   http://www.healthtalk.org,peoples-experiences,domestic-violence-abuse,womens-experiences-domestic-violence-and-abuse/recognising-domestic-violence-and-abuse

It has been suggested that overt forms of psychological violence might be used by some perpetrators only after more covert attempts to control fail. An act of psychological abuse would be considered overt when an observer would be able to note the potential for harm, and/or the victim would be able to describe the act or resulting feeling with relative ease. Acts may be considered subtle psychological abuse when it would be more difficult for an observer to see the potential for harm, with the victim having more difficulty describing the act and the resulting feelings, and/or the act could easily be done in loving and caring ways.[78]

When considering coercive control, Dutton and Goodman (2005) organise the model into three distinct theoretical dimensions: 'setting the stage', 'coercive behaviour', and the 'victim's response'. In Wiener's (2017) research Independent Domestic Violence Advisors (Idvas) and survivors agreed that these elements existed but preferred the term 'grooming' to 'setting the stage' which they felt better reflected its ongoing nature.

The research found that 'grooming' creates vulnerability through the intense romantic behaviours, confusing survivors into thinking they were in love. Incidents (e.g. strangulation) in this period would bring the onset of fear with survivors recognising the grooming. Emotional abuse was also experienced at this stage with gendered emotional 'put-downs' containing criticisms of victims' roles as mothers and homemakers – criticisms of the way they dressed, the way they cooked, and the way they looked after their children. At its most extreme, emotional abuse was humiliating and degrading. The next stage involves demands, credible threats, and surveillance, which can be obvious or discrete. Survivors learn to be fearful. This is where the grooming, and an understanding of context are important. Survivors are coerced because they are rightly fearful of the consequences if they do not, so aim to appease the perpetrator.

The 'victim's response' to coercive control includes fear, instability and a change in behaviour. Together with this, victims reported an elusive sense of personal control thinking - if only they could behave differently, the perpetrator's abusive behaviour would stop.[79] As Stark (2007) puts it: 'he changes who and what she is' (p.262).[80]

2.4.2 Tactics of psychological violence

In 1957, Biderman studied prisoners of war and stated that inflicting physical pain was not necessary to "induce compliance" but psychological manipulations were extremely effective for that purpose. Biderman's Chart of Coercion[x] shows the most effective way to gain cooperation is through subversive manipulation of the mind and feelings of the victim who then becomes a psychological, as well as a physical, prisoner. Some practitioners have made links between victims of violence and prisoners of war, experiencing acts that are commonly used in brainwashing: degradation and threats with occasional indulgences, isolation, and invalidation of perceptions.[81] Brainwashing is one example of how abuse in relationships parallels torture. Brainwashing makes it easier to control a person and makes it harder for the person to break free from the relationship as the abuser makes it difficult for a person to think clearly, reducing mental energy. Fontes (2017) calls this 'perspecticide'[82] noting, "The abuser defines what love is. The abuser defines what is appropriate in terms of monitoring the partner. The abuser defines what is wrong with the victim, and what she needs to do to change it."

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x   Biderman's Chart of Coercion Analysis of Psychological Torture [Amnesty International, Report on Torture (New York: Farra, Strauss, and Giroux), 1973]

Psychological violence can be produced in several ways. Pauncz (2014) claims abusers will frequently belittle, criticise or insult a person, their job, political opinions or religion. It involves accusing or blaming the other person. A person who mistreats rarely acknowledges that anything is his fault and accuses his partner of being responsible both for what happens, and his own emotional state.[83] In some situations, to maintain power and control, an abuser withholds affection or gives the 'silent treatment' by refusing to speak, walking out, or rejecting affection.[84]

A highly insidious and common form of abuse is when the insult is presented as a joke, masking the slur. Marshall (1994) found even types of psychological abuse believed to be obviously controlling (e.g., inducing physical debility, showing physical domination) were enacted in loving, joking, or playful ways as well as serious or threatening ways. Further, no male partner used only one style. Even the most violent men did not always inflict psychological abuse with an aggressive or dominating style. Men were often very gentle and loving when they enacted behaviours in the various categories of psychological abuse.[85]

Threats, intimidation and punishments are ways of telling the other person that you have power over them. An abuser may threaten to hurt or kill his partner, people they care about or pets, or make suicidal gestures and threaten to kill himself. Suicidal threats show a victim the abuser's capacity for extreme violence. Often threats are conveyed physically by punching walls or slamming doors. Grabbing a child out of a woman's arms is also a clear threat. Even if these acts do not involve physical harm, they create an atmosphere of fear. A controlling man may drive dangerously or leave signs that only she knows are meant as a threat, such as putting a belt he has used to beat her on the table.[86]

Some abusers try to make their partners overwrite their reality.[87] An abuser who gaslights his partner is trying to disorientate her, and make her seem irrational to others and herself, strengthening his control over her. A controlling man often acts charming, loving and caring when in the presence of others. When alone with his partner however, he may behave in blatantly cruel ways. This contrast confuses the victim, causing distrust of their own perceptions.[88] Accounts from survivors talked of partners using mind games, humiliation and gaslighting. Women were convinced the abuse experienced was 'all in their head' or denials of obvious infidelity were turned on partners saying it was a lack of trust and was 'all in their mind'. Two women described how their partners each invented a cancer diagnosis to make sure they stayed to look after them.[89]

The manipulation of victims can also be carried out through position or social status of the abuser. For example, professionals who understand the law, or have training and experience in intimidation, interrogation and surveillance, or hold authority can use this to their advantage to hold power and control. Some victims have difficulty being believed or accessing support when the abuser has influence.[90]

2.5 Recognising psychological violence

Psychological violence is extremely insidious for causing consequences silently.[91] The unclear dynamics of psychological violence can prevent its recognition. One of the most difficult aspects for those experiencing it is working out the impact of small and, often insignificant abuses which when taken in isolation, make them,

and not the abuser appear (to the outsider) petty and controlling. Behaviours may be subtle, and readily understood only by the victim and perpetrator as, for example, when they are designed to exploit fears that are personal to the individual victim, or consist of 'gestures, phrases and looks that have meaning only to those within the relationship'.[92]

Research has revealed that perceptions of physical abuse are more negative than perceptions of non-physical abuse. Physical abuse is more blatant and visible; thus, individuals observing a relationship conflict may more easily understand that slapping or kicking is physical abuse, whereas individuals may have more trouble identifying that a perpetrator belittling or threatening their partner is also a form of abuse.[93] Accounts of survivors highlight the image they had of an abused woman was one who has been beaten up and, is covered in bruises. Some of the survivors interviewed were never physically attacked and it took most women a long time to realise they were being 'manipulated, bullied and brainwashed by their partners.[xi]

The gendered nature of coercive and controlling behaviour also makes these behaviours difficult to recognise, for victims and professionals, since they coalesce with normalised expectations of male and female behaviour.[94,95] The tactics of control are also often confused and misinterpreted as signs of affection, caring and even love because the behaviours engaged in through a desire to control may merge with acceptable and desirable expressions of love and concern.[96] Accounts from survivors describe gendered emotional 'put-downs' including criticisms of their roles as mothers and homemakers – criticisms of the way they dressed, the way they cooked, the way they looked after their children.[97] Due to a lack of recognition, many cases of domestic violence are not reported. Further, shame, fear of reprisals, and ignorance of the protection offered by law make women reluctant to testify. Hence, it is key for professionals to be able to distinguish these strategies for earlier identification. SafeLives (2017) evaluation of their DA Matters training[xii] to four UK police forces found an increased knowledge and awareness of coercive control, including tactics used by perpetrators both to keep victims in a relationship, and to manipulate professionals. Police reported increased confidence post training in responding to victims enabling better victim questioning, and evidence gathering.[98]

Many of the expectations of abusers are justified in widespread attitudes about 'making your husband happy' or 'protecting your boyfriend'. To many, the perpetrator may simply look like an old-fashioned man – one who expects certain standards in his home, and in relation to his children. This can be reinforced by women's traditionally devalued status. Women's roles, as wives and mothers, involve a measure of unpaid servitude even in otherwise egalitarian relationships, and this can make a victim's oppression difficult to see.[99] In other words, male dominance is to some degree naturalised because heterosexual norms permit men a certain degree of dominance in the minutiae of everyday living even in non-abusive relationships.[100] There is still an attitude amongst some people that some behaviours towards women are acceptable, or that violence against women is a private matter.[101] SafeLives (2018) identifies a need to act before someone harms, or is harmed, to challenge and deconstruct gender stereotypes by working and listening to, and sharing, the voices of young men to build an understanding of how to challenge and deconstruct constricting stereotypes of masculinity.[102]

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xi   http://www.healthtalk.org,peoples-experiences,domestic-violence-abuse,womens-experiences-domestic-violence-and-abuse,recognising-domestic-violence-and-abuse

xii   Domestic Abuse Matters training for first respondents of domestic abuse focuses on domestic abuse and coercive controlling behaviour to implement long-term attitudinal and behavioural change in police forces.

Although women have been empowered by the increase in women's economic contributions to the household and the rise in dual-employment marriages, this shift in traditional gender roles has likely created mismatches in status between some intimate partners which may also increase the risk of male-perpetrated violence, and coercive control, as another means of regaining power and reinforcing traditional gender roles. It has been found that of visible cases, women who earn 65% or more of their households' income are more likely to be psychologically abused than women who earn less than 65% of their households' income.[103] This phenomenon has particularly been observed in working class men with equally, or more economically, powerful female partners.[104] However, the risks remain for women in traditional status couples. Women's lack of economic power often leaves them with fewer resources when experiencing and responding to intimate partner violence.[105]

Nevala (2017), using data from the EU-wide survey on violence against women (FRA, 2012), suggests that levels of coercive control are more closely related to gender equality than rates of physical and/or sexual violence against women overall, as measured in the FRA survey. This strengthens the understanding that unequal gender dynamics produce, directly or indirectly, coercive control while prevalence of physical and/or sexual violence in a country may be governed primarily by other factors.[106]

However, additional power dynamics, apart from just gender, exist for certain cohorts. SafeLives identified victims of honour-based violence often experience a deeply embedded form of coercive control, built on expectations about behaviour, that begins early in the family home. As many of these victims are migrants, uncertainty around immigration status and language barriers can be used as a form of control.[107] It can be particularly difficult for migrant women to report violence because they are often socially and economically dependent upon their partner or family some not having any family or social network in the country in which they live.[108] For a disabled person, the abuse they experience is often directly linked to their impairments and perpetrated by the individuals they are most dependent on for care, such as intimate partners and family members. Intimate partners or family members often act as carers, and this position of power can be exploited leading to widespread and pervasive means of coercive control, and social isolation.[109] LGBT+ people may also experience unique forms of coercive control targeted at their sexual orientation or gender identity. For instance, for those not 'out' to wider networks, the threat of 'outing' gender identity or sexual orientation can be a source of power and control for the perpetrator.[110] Research by Stonewall found that over half (51%) of transgender people who had experienced domestic abuse in the last year reported that their partner had ridiculed their gender identity.[111]

2.6 The impact of psychological violence

Studies from Europe, and further afield, have consistently shown that psychological violence detrimentally affects mental health, sexual functioning, and physical health. SafeLives (2016) research confirmed domestic violence has a profound, and long-term impact, on physical and mental health. It was found that almost 60% of victims identified in hospital had mental health concerns, just under half (49%) had post-traumatic stress disorder (PTSD) and 16% had been to A&E for an overdose in the last six months.[112]

Psychological violence moreover affects pregnant women, and older victims, in unique ways. The studies reviewed below are largely from Europe and were published recently (i.e. within the past five years). Two-thirds focused on women as victims and two-thirds on intimate partner violence (IPV). Most were cross-sectional surveys, with just three using longitudinal designs. All but one investigated physical violence as well as psychological violence, and many also investigated sexual violence. Nevertheless, each study attempted to investigate the specific impact of psychological violence, whether it co-occurred with other forms of violence or in isolation.

Cross-sectional survey studies from across Europe, each sampling hundreds of participants, have shown that victims of psychological violence are more likely than non-victims to experience anxiety, depression, eating disorders[113], psychosomatic disorders, sleep disorders and insomnia, post-traumatic stress disorder (PTSD)[114,115,116,117] and suicide ideation.[118]

Larger-scale national surveys support these results. Among 10,264 German women aged 16 to 86, psychological IPV was strongly associated with having experienced 'mild' psychological problems (e.g., stress, concentration issues, nervousness) and 'strong' psychological problems (e.g., feeling fearful or worthless, wanting to die or hurt self) in the last 12 months.[119] Controlling behaviour, measured separately, was also associated with these outcomes. A national survey with 10,171 women in Spain aged 16+ showed that women who had *previously* experienced psychological IPV, without physical and sexual violence, were ~1.5 times more likely to report all symptoms relating to depression and anxiety (including sleep disorder and decreased sexual desire) than women reporting no lifetime IPV.[120] Psychological violence thus strongly affected women's health even after the violence had ended—although the association was stronger for women *currently* experiencing this type of violence. The effects on health of current psychological violence were similar to the effects on health of past physical or sexual violence. These authors interestingly combined 'emotional' and 'economic' violence in the psychological violence construct and, again, measured controlling behaviours separately. Women currently experiencing controlling behaviour were significantly more likely to report all the symptoms of anxiety and depression, compared with women reporting no lifetime IPV.

Victims of psychological violence make up a disproportionate population of psychiatric patients. Several European studies in psychiatric hospitals have shown that almost 80% of women participants are victims of psychological violence. Few participants in these studies had told their psychiatrists about violence victimisation[121,122,123]. PTSD and suicide attempt were significantly higher in patients who had experienced such violence compared with those who had not.[124] Given that psychological violence is associated with a broad range of mental illnesses and - as outlined below - physical symptoms, victims are more likely to use analgesic and psychotropic drugs. These can lead to physical and psychological addiction within weeks of usage. A longitudinal Norwegian study of 6081 women found that prescription rates for such drugs were higher among women who had experienced lifetime IPV, including those who had experienced psychological IPV in isolation, versus those who had not experience any IPV.[125]

A handful of surveys have explored the way previous and current psychological violence affects victims' sexual health and sexual satisfaction. A national survey from Belgium with 1,832 men and women showed lifetime experience of psychological IPV predicted sexual dysfunction (e.g. decreased sexual desire,

painful intercourse, retrograde ejaculation), decreased communication about sex, relationship/sexual dissatisfaction with current partners, attachment anxiety, and attachment avoidance.[126] Psychological violence victimisation was more detrimental for women's, than for men's, attachment orientations. A study with 454 Austrian women similarly found that psychological violence was associated with sexual dysfunction.[127] Furthermore, a US study has shown that psychological IPV victims are less likely to negotiate condom use and less likely to report using condoms in the past 30 days.[128]

European studies show that psychological violence is associated with poorer physical health. The above-mentioned national German survey with 10,264 women showed that among those aged 16-65, psychological IPV was strongly associated with allergies; problems maintaining weight; gastrointestinal syndromes (e.g. nausea, and eating disorders); psychosomatic symptoms (e.g., numbness and thrombosis, shaking and nervous twitching, cramps and paralysis, heart and circulation illness, dizziness, low blood pressure, breathlessness, and chronic throat problems); and pelvic problems (e.g., abdominal pain, pain or infections in intimate areas, menstrual cramps, and heavy, weak, or irregular menstruation). All are known symptoms of psychological stress. Women aged 65+ also experienced gastrointestinal syndromes and problems maintaining weight. Controlling behaviour, measured separately from psychological violence, was moreover associated with weight problems among women aged 16-65 and allergies among women aged 50-65.[129] In a Slovenian study with 470 men and women, psychological IPV victims were more likely to suffer muscle inflammations; and gynaecological disorders and inflammations.[130]

US studies with thousands of respondents have additionally shown that psychological violence is associated with hypertension[131]; chronic prostatitis/chronic pelvic pain syndrome[132]; urinary frequency and urgency[133]; type 2 diabetes[134]; disability preventing work; arthritis; migraine and other frequent headaches; stammering; sexually transmitted infections; irritable bowel syndrome; and stomach ulcers.[135]

Few studies, especially studies from Europe, have explored the impact of psychological violence on pregnant women. The handful of European studies that do exist show that psychological IPV, whether it co-occurs with physical/sexual violence or in isolation, is associated with unintended pregnancy, pregnancy complications, spontaneous abortions and repeat induced abortion.[136,137,138] It is also associated with postnatal depression.[139,140] A systematic review has moreover shown that psychological IPV is associated with low birth weight babies and pre-term birth[141] — although only a handful of studies reviewed included psychological violence, none of which were European. Echoing this review, a USA study found that women whose (ex)partners threatened them were twice as likely to have a low birth weight baby than those who were not threatened.[142] Past experience of any form of violence increases the risk of violence in pregnancy.[143]

There is limited research on the impact of psychological violence on older victims, even though a study of 4,467 households across cities in seven European countries has shown that psychological is the commonest form of violence among those aged 60–84.[144] In a study with 1,070 older adults in Poland, respondents who were victims of psychological violence before the age of 60, were also more likely to report being victims of this type of violence later in life. As with other forms of violence, psychological violence was associated with low psychological well-being, loneliness, and low perceived social support.[145] A US National Elder Mistreatment

Study with 5,777 participants showed that older adults who experienced 'emotional coercive control' by intimate partners in their lifetime were more likely to experience physical abuse at age 60+.[146]

2.6.1 Impact on children

As many as 275 million children worldwide have experienced domestic abuse in their own home.[147] Across the EU, 73% of female victims of intimate partner violence state that children in their household were aware of the abuse.[148] In the UK alone, at least one child in every reception school class is estimated to have been living with domestic abuse (DA) for their whole life.[149]

The SafeLives (2015) dataset shows nearly 90% of victims identified as being at high risk of serious harm report psychological abuse in the form of emotional abuse and/or coercive control.[150] Many children living with domestic abuse will therefore experience a relationship that involves some psychological violence. The broad impacts of DA on children have been well-documented and are known to include a wide range of physical, emotional, behavioural, academic and social development problems.[151,152,153,154] Some specific examples include trouble sleeping, bedwetting, depression, anxiety, aggression and increased rates of psychopathology.

Children's accounts report feelings of dread, fear, unhappiness, anger, confusion[155,156] which are often persistent and deep-seated. Children additionally express many more abstract effects, such as a diminished sense of trust in others, or of a 'lost' childhood.[157] Studies have also shown that domestic abuse co-occurs with direct child abuse[158] and overlaps substantially with the most severe forms of child maltreatment.[159] In 2009-11, domestic abuse was a factor in two thirds of Serious Case Reviews where a child had died in England.[160] A few studies have specifically looked at the impact of experiencing psychological violence on children. Litrownik et al. (2003) found evidence that children whose parents identified them as having witnessed psychological aggression within their family exhibited more aggressive and anxious or depressed behaviours.[161] Naughton, O'Donnell & Muldoon (2017) demonstrated that growing up in a home with psychological abuse has a longer-term impact on children's wellbeing than growing up with physical violence.[162] Research suggests that the critical factor influencing adjustment problems is a child's perception of threat, and that this was in part dependent on the dynamic of their parents' relationship.[163]

Research on coercive control has established that a perpetrator may use a child as a tool of abuse, undermining the relationship between a child and the victimised parent, or deny abusive behaviour, thus denying children access to support services. They can also be directly affected by coercive control of their mothers, for example, through isolation from the community and sources of support, or control of time and resources within the home.[164] Domestic abuse can have a negative impact on parenting capacity and the relationship between a victimised parent and their children. This may occur, for instance, due to efforts by the perpetrator to disrupt their bond[165] or the effects of abuse on a victim's mental health.[166] In spite of this, a strong relationship and attachment to their mother (where the person perpetrating abuse is the father) has been identified as a key protective factor, which can mitigate the negative effects of DA experience on children.[167]

Callaghan et al.[168] highlighted children's capacity to understand the dynamics of coercive control, recognise the impacts on them and their families, and apply responsive strategies that help keep themselves and others safe. The researchers spoke to young people who reported regulating their own behaviour and

monitoring perpetrators' moods to do this, in a similar way to adult victims of IPV. Katz[169] also highlighted the importance of recognising children's individual agency and understanding the active coping strategies they employ, alongside their mothers' actions.

Individuals with childhood DA experience are also more likely to become an adult victim of domestic abuse[170]. Experiencing parent-to-parent violence also increases the chances of a person perpetrating inter-personal violence in later life, though this is not necessarily a direct relationship, and there appear to be multiple mediating factors.[171] The SafeLives Children's Insights dataset showed that a quarter of children supported by children and young people's specialist domestic abuse workers exhibited abusive behaviour themselves, most frequently towards their mother (62%) or sibling (52%), but rarely towards the perpetrator of abuse within their family.[172] While these children were more likely to have been victims of severe direct harm, these behaviours may also be encouraged by abusers, who attempt to use children as 'tools' of abuse[173]
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The effect of beginning one's life in a violent, oppressive environment is difficult to fully quantify. Children growing up in such circumstances may never have felt 'safe' before, and the process of recovery may mean something very different than to an adult survivor[174]. However, children that have experienced domestic abuse exhibit remarkable resilience, illustrated in many of the studies mentioned here. The negative impacts may be further minimised by appropriate interventions that support children directly, as well as their victimised parents, but there is limited evidence to demonstrate what works, when and for whom[175, 176].

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2.7 European legislation around psychological violence

Globally, there are a range of legislative agreements which commit parties to addressing psychological violence. These global agreements draw attention to the fact that psychological violence constitutes a form of gender-based violence or a violation of human rights. For example, CEDAW[xiii] locates psychological violence within its definition of gender-based violence as an act that includes 'physical, mental or sexual harm or suffering, threats of such acts, coercion or other deprivations of liberty.'[177] Another UN instrument is the Beijing Platform for Action (BPfA, 1995)[178] which states that the human rights of women and girls are an inalienable, integral and indivisible part of universal human rights. BPfa defines 'violence against women' as any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty whether occurring in public or private life.' Whilst adopting different terminology, both global agreements call parties to address coercion and psychological harm or mental suffering within their national legislative mechanisms.

2.7.1 The Istanbul Convention

The most significant document adopted within a regional system (Council of Europe) is the Convention on preventing and combating violence against women and domestic violence (Istanbul Convention, 2014).[179] It introduced a legally

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xiii   A United Nations Treaty body that oversees the Convention on the Elimination of All Forms of Discrimination Against Women

binding framework to increase the safety and liberty of all people, as it applies to all victims of violence, including men, but specifies that particular attention should be paid to women victims of gender-based violence. The Convention is built around the word 'gender' to define the phenomenon of 'gender-based violence', which is violence directed against women merely because they are women. It aims at deconstructing "roles, behaviours, activities and attributes that a given society considers appropriate for women and men".[180] The Convention has been ratified by 32 European countries and signed by 14.[181] States compliance to the Convention is reviewed by GREVIO[xiv], an independent expert body which carries out evaluations on a country-by-country basis.

Member States must introduce new criminal offenses where they do not exist. Article 33 of the Convention requires states to criminalise psychological violence, which is described as the 'intentional conduct of seriously impairing a person's psychological integrity through coercion or threats.' In this respect, psychological violence is a prevalent form of domestic violence which can be perceived by victims as more severe and harmful than physical violence. It is also viewed by the Convention as a frequent precursor to physical violence and linked to economic violence such as deprivation or restriction of financial resources. Whilst states are legally obliged to comply with the framework set out by the Convention, a recent briefing paper highlights the implementation of the Convention differs from one country to another.[182] Research has shown[183,184,185] that definitions of violence vary across Member States, whilst international treaties and conventions frequently fail to provide specific definitions of the types of actions that should be prohibited or require protection. For example, Article 33 of the Istanbul Convention does not clearly define acts which contribute to 'seriously impairing a person's psychological integrity' and limits the offense of psychological violence to any act of 'intentional conduct'. This leaves the definition of psychological violence open to parties to interpret within their own legal mechanisms and protections.

2.7.2 Member States and their legislation around psychological violence

A recent feasibility study by DAPHNE[186] explored the case for harmonising national legislation across three fields of violence for EU Member States, including psychological violence within its broader definition of intimate partner violence (IPV). This research found that while most Member States have some form of specific legislation relating to IPV there is also much diversity in responses; ranging from no legislation or specific law to a dedicated framework law which specifies acts of violence in a domestic context. Some EU states do not have a legal definition of domestic violence and abuse, or IPV, but a 'working definition' is used in policy which is criminalised by the act of certain offences.

Many Member States deal with IPV through a combination of laws: police law plus civil law; criminal law plus civil law; administrative, civil and criminal law; or civil, criminal and family law. In this context, psychological violence across the EU can form part of a legal definition of IPV or be criminalised through other legal mechanisms. For example, the Danish Penal Code does not have a specific paragraph for intimate partner violence. It is prosecuted based on the general paragraphs for crimes of physical, sexual, psychological or financial violence. (Criminal Code, Chapters 23, 24, 25, 26 and 27).

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xiv   Group of Experts on Action Against Violence Against Women and Domestic Violence

Our research shows that of 28 EU Member States[xv], 11 include the term 'psychological violence' within either their legal definitions of IPV or working definitions. However, there is significant differentiation between the concepts used in law and policy, with much overlap with wider concepts such as 'violence against women'. A further 11 EU States[xvi] use terms which could be considered as acts of psychological violence such as 'psychological integrity' (AT) 'mental or emotional violence' (BG), 'mental injury' (CY), 'mental violence (LT), 'psychological ill-treatment or mistreatments (PL, PT), 'psychological suffering' (SK) or 'any act of violence even if only verbal which causes moral harm' (MT).

Legal definitions tend to vary in respect of two main characteristics. First, the kind of violence that is addressed. Whilst most EU States have some form of legislation relating to psychological violence, there is a strong emphasis on the prioritisation of physical forms of abuse. For example, in Germany there is no legal definition of IPV, but a policy definition is used by federal and state governments which covers physical violence, threats of violence and stalking. Six EU Member States do not include any legislation that could cover acts of psychological violence.[xvii] Based on a 2014 Council of Europe study on the protection of women against violence, it can be shown that there were differences, at that time, between the criminalisation of types of gender-based violence in Member States. For example, psychological violence irrespective of the nature of the relationship was not considered to be a crime in Estonia, Latvia and Luxembourg.[187]

Second, where there is legislation around psychological violence the legal definitions tend to vary in the range of people the law applies too, being either gender-specific or gender-neutral. Eleven EU Member States define criminal offenses as aggravated if they are committed within the family or household against a close person or current or ex-partner. For example, in Slovenia psychological violence falls under 'family violence' which is a form of abuse exerted by one family member against another. This allows for the use of all provisions of criminal law while imposing a higher sentence, but no gender dimension around the use of psychological violence is introduced. Conversely, in Sweden, psychological violence is criminalised 'where the perpetrator and victim have had an intimate relation'. Given that psychological violence is disproportionately perpetrated by men to women, legislation which reflects the gender-specificity of this act is critical to understanding, awareness and effective prosecution.

A key approach to legislation around psychological violence is to introduce specific laws that criminalise the act of psychological violence in and of itself. This applies to France[xviii] England and Wales[xix] and Scotland[xx] which has its own law on domestic violence. These specific laws each use different terminology to encompass a range of acts that may constitute forms of psychological violence,

xv   Research drawn from a document analysis of EIGE EU legislation about intimate partner violence database (here) and cross referenced with GREVIO reports and national legislation websites where these could be accessed. This are preliminary findings and would benefit from an entire study like the feasibility study conducted by DAPHNE focussing specifically on psychological violence.

xvi   Country codes: AT – Austria, BG – Bulgaria, DK – Denmark, CY – Cyprus, FR – France, LT – Lithuania, MCO – Monaco, MT – Malta, PL – Poland, SK - Slovakia

xvii   These findings are based on the legislation we were able to access. However further research may be needed to clarify.

xviii   Law 2010-769, of July 9, 2010, on Violence Against Women, Violence Between Spouses, and the Effects of These Types of Violence on Children

xix   Section 76 of the Serious Crime Act 2015 - Controlling or Coercive Behaviour in an Intimate or Family Relationship

xx   Domestic Abuse Bill Scotland (2018)

carrying a criminal charge resulting in a punitive sentence or civil order. In 2010, France banned psychological violence within married and unmarried relationships acknowledging this was relating to regular, repetitive psychological mistreatment.[188] This was followed in 2015 in England and Wales by the Serious Crime Act making coercive or controlling domestic abuse a crime without any incidents of physical violence. This criminalised evidence of repeated or continuous coercive or controlling behaviour within an intimate (current or former) or family relationship.[189] More recently, the Domestic Abuse (Scotland) Act, 2018 passed what Evan Stark termed "a gold standard" for domestic abuse legislation by incorporating both psychological and physical abuse into the same offence. The legislation relates to an intimate partner or ex-partner and is a single 'course of conduct' offence where physical, psychological and coercive behaviour can be prosecuted at once reflecting that domestic abuse can be a course of behaviour that extends over time and, includes abuse that is not only physical. It also includes a 'reasonable person test' for example, would it be reasonable to tell a person what time they can eat or move their car while they are asleep (all cases that Scottish Women's Aid have encountered).[190]

2.7.3 How effective is legislation in protecting victims of psychological violence?

Whilst legislation exists that may allow for the prosecution of psychologically violent offenses, much work is needed to harmonise this legislation at a global, regional and national level to enable an effective criminal justice response. One of the greatest challenges around understanding which legislative approach is effective, at preventing and protecting victims of psychological violence across Europe, is the lack of robust evaluation data exploring the implementation of programmes across Council of Europe Member States.[191]

Early findings[xxi] from GREVIO's country-by-country evaluations demonstrate, in relation to psychological violence, either a lack of specific legislation (AT)[192]; or where there is a legal provision, no criminal offense by which offenders can be prosecuted (AT, DK[193], MCO[194]). Without a criminal offence that adequately covers psychological violence, law enforcement agencies are ill-equipped to respond to domestic abuse.

A further issue highlights how legislation about psychological violence focusses too narrowly on the aspect of 'threat' or a literal reading of existing laws. For example, in two Member States (AT, DK) psychological violence is covered by general offences in the criminal code where 'duress', 'threat', and 'serious coercion' count as criminal acts if the psychological violence exerted caused damage to the health of the victim. The presence of 'threat' and 'duress' set the threshold for a criminal offense very high, excluding from legal mechanisms the lower intensity acts which form part of a pattern of psychological violence. In another Member State (AL)[xxii] strict textual interpretation on the law's use of 'and' means that in criminal courts only a combination of psychological, physical and economic violence together can constitute the offense of domestic violence. This excludes victims of psychological violence where no physical abuse has occurred from accessing criminal justice support.

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xxi   This schedule of work runs through to 2022. Only four state level evaluations are currently available [AT, DK, Monaco)

xxii   Not all states signed up to the Istanbul Convention are within the EU.

Seventeen Member States adopt a framework approach to legislation around IPV which is an approach that can combine provisions in different domains of law. This allows for the regulation of measures such as protective interventions, court restraining order and penalisation. It has been shown that across the EU there is a strong convergence across Member States in the development of legal protection measures for IPV, most via specific laws on domestic violence. Across the EU the types of provisions available typically reflect civil interim injunction or civil restraining orders, emergency removal orders or criminal protection orders.

However, in the absence of robust data on the number of prosecutions and convictions for psychological violence, it is difficult to draw conclusions as to how operational these provisions are in holding perpetrators accountable. Initial findings from GREVIO evaluations[xxiii] highlight that whilst courts may grant protection orders there is little evidence to show that psychological violence alone would secure a criminal conviction (AL).[195] Other reports highlight issues with enforcement agencies having limited understanding of psychological violence and the criminal mechanisms available to enable prosecution, alongside a limited use of barring orders (DK, AT). Uncertainty around legal definition results in uncertainty around legal provisions, ultimately creating barriers to victims attempting to access legal support for psychological violence.

Where there is adequate legislation criminalising psychological violence and a matching offense then prosecution may be possible in certain countries (e.g., E&W, FR). However, even in countries where there is specific legislation to address psychological violence the use of the law remains patchy and inconsistent. In England and Wales, since its implementation in 2015, the police recorded a total of 9,053 offences of coercive control in the year ending March 2018, but only 960 offences resulted in prosecution being taken as far as the courts.[196] In France, the penalties are the toughest in Europe but up to 18 months after the the law was enacted in 2010, lawyers and psychologists reported that the French judicial system and police had yet to understand it or, take it seriously, and no one had been tried or convicted under the law.[197]

SafeLives highlighted the need for police and wider criminal justice system to have a greater understanding of abusive uses of power and control if perpetrators are to be held to account. Any new legislation must be followed up with leadership, investment and culture change to make it effective.[198] This practice is being carried out in Scotland. In 2018, a new domestic abuse bill to include psychological abuse was passed and, in conjunction, police officers and judges will receive specialist training in identifying controlling behaviours to support the introduction of the new Domestic Abuse (Scotland) Act.[199/200]

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xxiii   https://www.coe.int/en/web/istanbul-convention/country-monitoring-work

Profiles of survey respondents

The following chapter sets out the demographic profiles of respondents to the practitioner, European partners and survivors' surveys.

3.1 Practitioners

There were 659 responses to the practitioner survey. However, demographic details were only completed by 478 out of the 659 practitioners. Overall, nearly half (49%) of practitioners worked in the DVA/SVA sector. Most practitioners were from the UK (97%). There were 15 practitioners from 8 Council of Europe Member States including Austria (n=1), Bulgaria (n=1), France (n=2), Hungary (n=1), Ireland (n=7), Latvia (n=1), Luxembourg (n=1) and Malta (n=1) (See Table 1).

Table 1: Practitioner respondents, by agency

Agency	UK		Non-UK European states		Total	
	n	%	n	%	n	%
DVA/SVA	223	48%	10	67%	233	49%
Other	63	14%	3	20%	66	14%
Health	57	12%	1	7%	58	12%
Children's social care/ Children's centers	54	9%	1	7%	44	9%
Criminal Justice	38	8%	0	0%	38	8%
Housing	24	5%	0	0%	24	8%
Education	11	2%	0	0%	11	2%
Adult social care	4	1%	0	0%	4	1%
Total	463	100%	15	100%	478	100%

3.2 European partners

34 European partners responded to the survey. Most worked in policy & research (41%), training (22%), support service for victims (16%), psychology (9%), child service (6%), public service (3%) and legislation (3%). European partners responded from 11 countries, mostly Italy (31%), Ireland (25%) and Serbia (19%).

Figure 1: Countries of European partner respondents
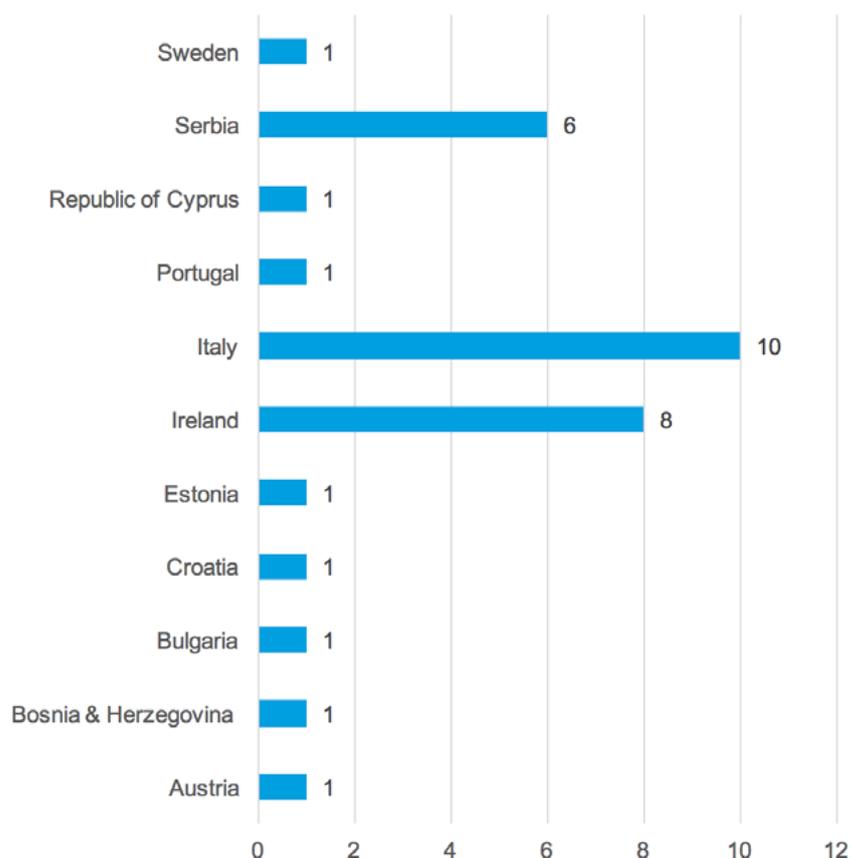
3.3 Survivors

There were 405 responses to the survey from survivors who had experienced Intimate Partner Violence (IPV).[xxiv] All survivors responding to the survey were based in the UK. The majority of survivors (50%) said the primary perpetrator of abuse was an ex-intimate partner, 49% an intimate partner and 1% an intermittent intimate partner. Most survivors were female (97%, n=343) and identified as a woman (96%, n=341). Two survivors identified as transgender.

Most survivors (94%, n=339) considered themselves to be heterosexual or straight, 5% bisexual, 1% gay or lesbian. Survivors mainly described their ethnic group as White British (86%, n=342), 5% White Irish, 3% White Other, 3% Mixed/ multiple ethnic group, 2% Asian/Asian British, 1% Anglo-Italian. The majority of survivors were aged between 21-29 when the violence started (41%) (See Figure 2).

xxiv A total of 405 survivors responded to the survey however not all questions were completed. This may have been due to survivors having to leave the survey therefore the sample size is noted if this varies from n=405.

Figure 2: Ages of survivors at the time of the violence
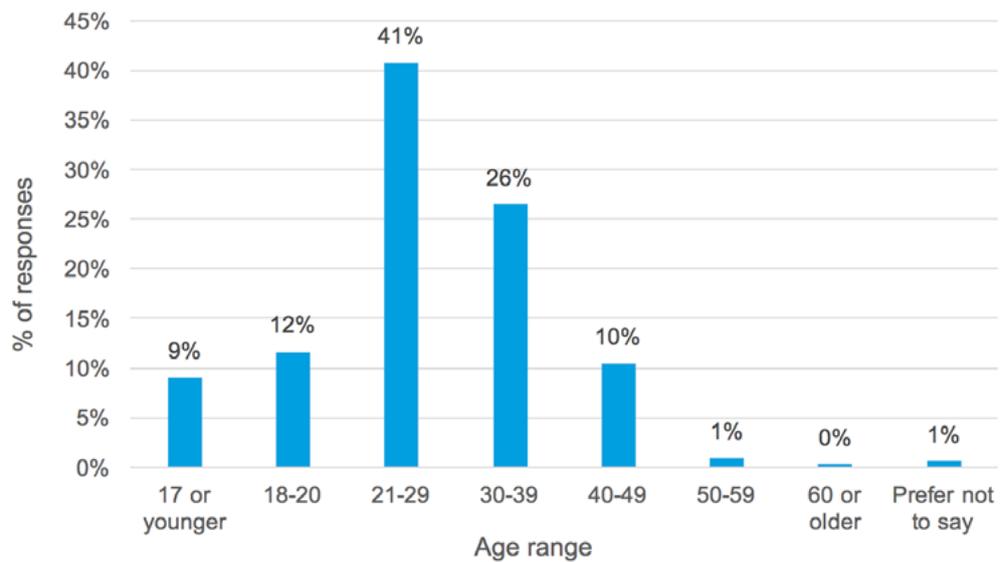
n=344

The majority of survivors (74%, n=359) had children in the household at the time of the abusive relationship. Over a quarter (29%) of survivors had a disability, long-term illness or health condition which limited their day to day activities. A third (34%, n=336) of survivors were educated to degree level or higher at the time of the abuse compared to 18% (n=314) of perpetrators (See Figure 3).

Figure 3: Level of education at the time of the violence, by survivor and perpetrator
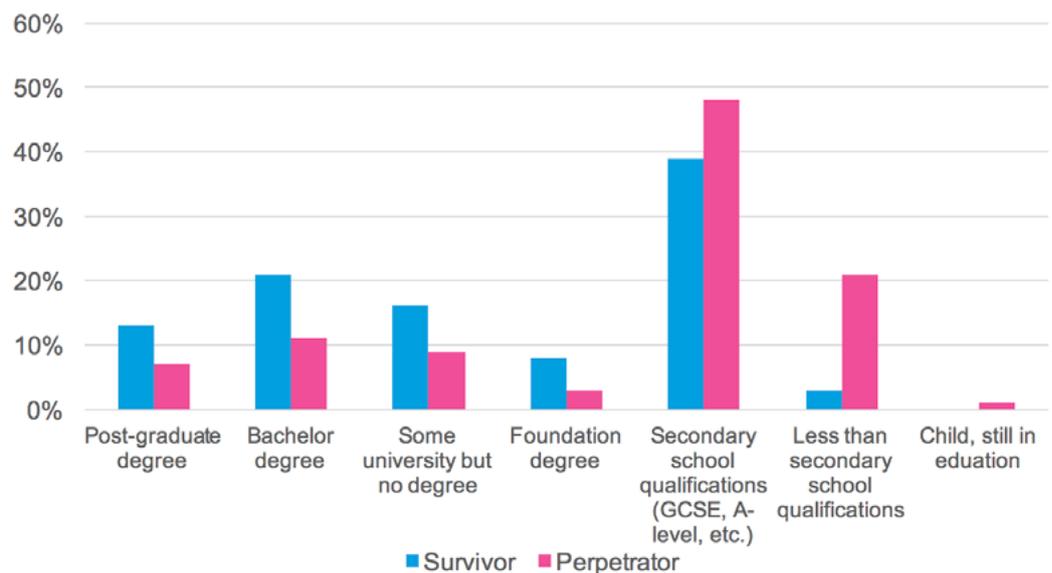
Over a quarter (29%) of perpetrators were employed at professional, senior or middle management occupations at the time of the abuse (See Figure 4).

Figure 4: Occupations of perpetrators at the time of the violence[xxv]
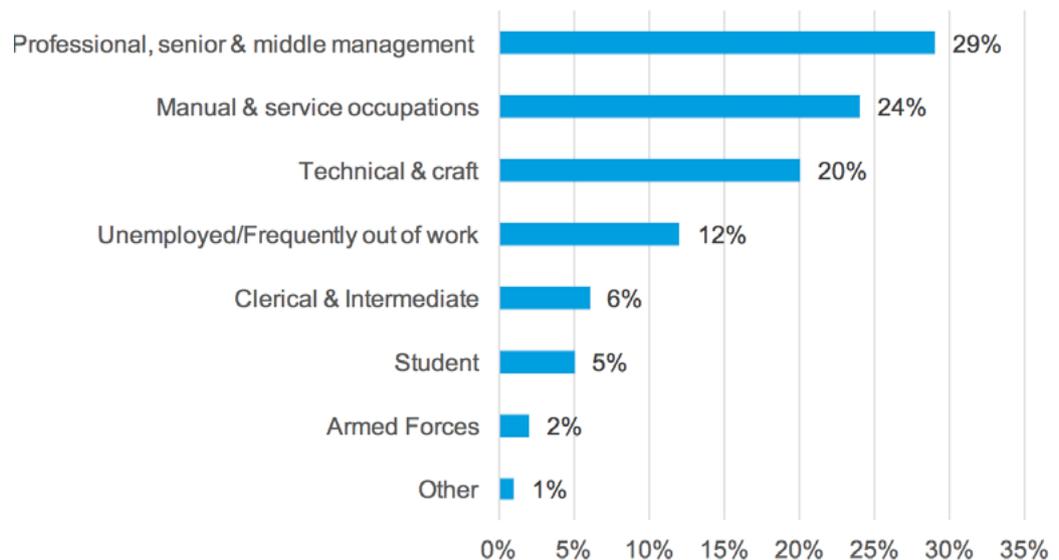
n=305

Figure 5: Word cloud of professional, senior & middle management perpetrator occupations[xxvi]

xxv   Occupations were categorised and grouped using the ONS SOC Hierarchy.

xxvi   This infographic is representative of the data from the professional, senior & middle management group (n=87) with the most frequently recorded occupations appearing in larger text. The range of professions challenges myths on perpetrators social background.

Chapter 4

Results

The following six sections include results on: defining psychological violence; the dynamics and tactics of psychological violence; the impact of psychological violence; supporting people experiencing psychological violence; and how European legislation is protecting people experiencing psychological violence. Apart from Section 3, which is a qualitative chapter, each section includes quantitative and qualitative evidence from survivors, practitioners and European partners. Data from practitioners and European partners is presented initially followed by corresponding testimony from survivors.

Section 1: Defining and understanding 'psychological violence'

Key findings

- There is not a clear understanding of the term 'psychological violence' across professionals. In the UK, this was mainly because the word 'violence' is associated with physical incidents. Some non-UK respondents related the term to, either or both, non-physical and physical violence feeling the two forms of violence are not mutually exclusive or relating it to the impact on the victim.

- Survivors made a distinction between 'psychological' being associated with the mind and 'emotional' with feelings. As with UK professionals, for many survivors the word 'violence' caused some confusion but in consultations, no survivors talked about physical incidents when discussing the term.

- Any definition to be recognised by survivors should include language they commonly use and understand e.g. survivors frequently used the words 'mental' or 'mentally' when describing their experiences.

- Professionals advocate using separate terms to distinguish different forms of non-physical violence to validate the victim's experience and for a more complete risk assessment and support plan.

- Professionals believe a universal term used, and understood, across specialists and the public would help identify 'psychological violence' earlier.

Defining and understanding psychological violence: What Practitioners and European partners told us

As the project brief stated the term 'psychological violence' was being used as an overarching term to refer to all non-physical violence, we aimed to establish if this term would be used in this way by professionals and, if there are any disadvantages to using a broad term. We asked practitioners and partners 'Which term do you mostly use to describe experiences of non-physical violence'.

Figure 6 shows many respondents indicated they would not use 'psychological violence' as an umbrella term. This was more prominent in the UK with nearly half of UK practitioners (44%) compared to just over a third (38%) of European partners and just over a quarter (27%) of non-UK European practitioners recording that they use separate terms to distinguish separate forms of non-physical violence.

However, overarching terms are being used to describe non-physical violence. Over half (56%) of UK practitioners used either 'emotional', 'psychological' or 'coercive controlling' abuse as an overall term. Even though the sample size is small, practitioners across member States other than the UK, and European partners, were more likely to use the term 'psychological violence' suggesting the term is recognised more widely across non-UK countries in Europe.

Figure 6: Terms used to describe non-physical violence
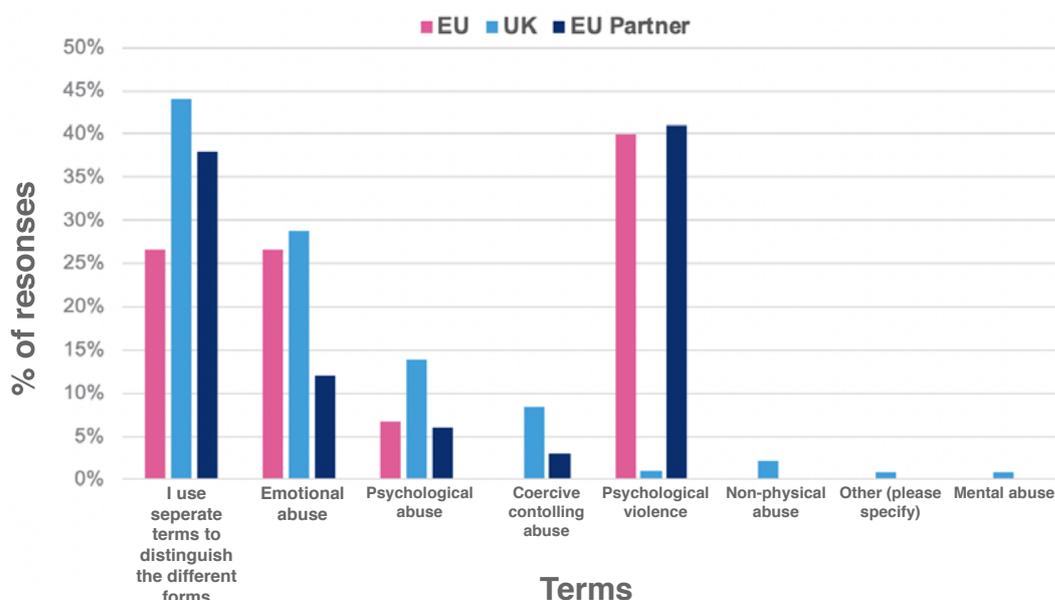
(UK practitioners n=468, non-UK European practitioners n=15, European partner n=34)

There was also some variation in terms used across agencies with emotional abuse more likely to be used from practitioners based in children's services (45%) and criminal justice (42%) whereas psychological abuse recorded more frequently from those in education (27%).

Practitioners felt that the most commonly used terms used by victims when describing non-physical violence were mental (33%) and emotional (31%) abuse. Over a quarter (26%) acknowledged there isn't a common term, and various terms can be used, by clients. This suggests a definition to be understood across professionals and survivors needs to be cognisant of the variation in words or terms that may be recognised.

Despite the variation in terms used, Figure 7 shows that both practitioners and European partners consider naming and defining different forms of non-physical violence important. More than four out of five (88%) European partners and nearly three-quarters (74%) of practitioners thought this was 'extremely or very' important. As many European partners were from a research and policy background, this may seem more central when considering defining and measuring different types of violence.

Figure 7: Importance of naming and defining different forms of non-physical violence
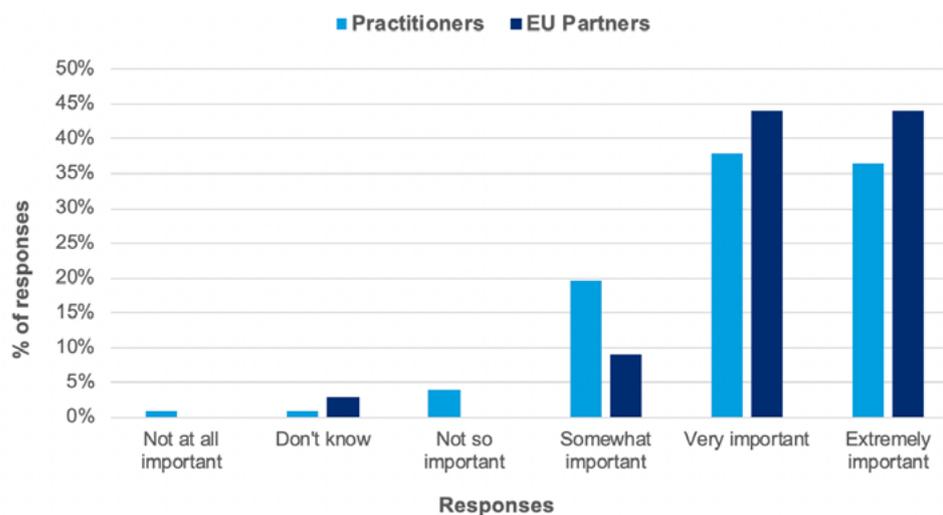
(Practitioners n=486, European partners n=34)

Practitioners' comments clarify why they feel an overarching term should not be used and why naming and defining different forms of violence is important. Most talked of validating the victim's experience, especially when there is no physical violence, helping victims understand what has happened to them. Many felt that putting all forms of abuse experienced under one overarching term minimised the abuse. Practitioners also told us that other external agencies also need to identify and understand different forms of abuse, to plan appropriate support:

> **"I think that whilst psychological violence is a brilliant "umbrella term" that it is too generalised and could minimise the experiences of the victim, I think it is important for us as professionals to "call it what it is". I think if we were to use this one term to describe all non-physical abuse it would be taking a huge step back. It would be reinforcing that domestic abuse is a taboo subject in that we are saying we cannot even**

use the words to describe an experience. If someone is being subjected to sexually coercive behaviour, then that is what they are experiencing - it is not psychological violence. It is also unlikely that they will be experiencing one form of this abuse alone but several. Why should we reduce this to one form of abuse, so that the perpetrator doesn't look as bad? What about the victim's voice?"
UK Practitioner

Figure 8 shows that the term psychological violence suggests various connotations to professionals across the UK and Europe. The majority of UK practitioners (47%), non-UK European practitioners (50%) and European partners (44%) in the sample associated the term with only psychological or emotional abuse. However, a third (33%) of UK practitioners, over a quarter of European partners (29%) and 21% of non-UK European practitioners linked it with both physical and non-physical abuse.

Some respondents recorded the 'Other' option, and their comments underline the inconsistency in understanding. Two-thirds (66%) of comments thought the term could mean a combination of, both or either, physical and non-physical violence. Nearly a quarter (23%) of comments from UK practitioners specifically noted it was a misleading or contradictory term with psychological relating to non-physical, and violence relating to physical. 6% mentioned the impact on the victim and 5% noted other considerations, such as not only domestic violence victims can experience psychological violence.

"I think the term "psychological violence" is confusing. The word "violence" is synonymous with physical aggression and physical harm. Although I see that the point of the term is that psychological abuse can cause as much if not more pain and damage than physical abuse, I think for the general public it would be confusing"
UK practitioner

**Figure 8: The suggestion of the term 'psychological violence'**
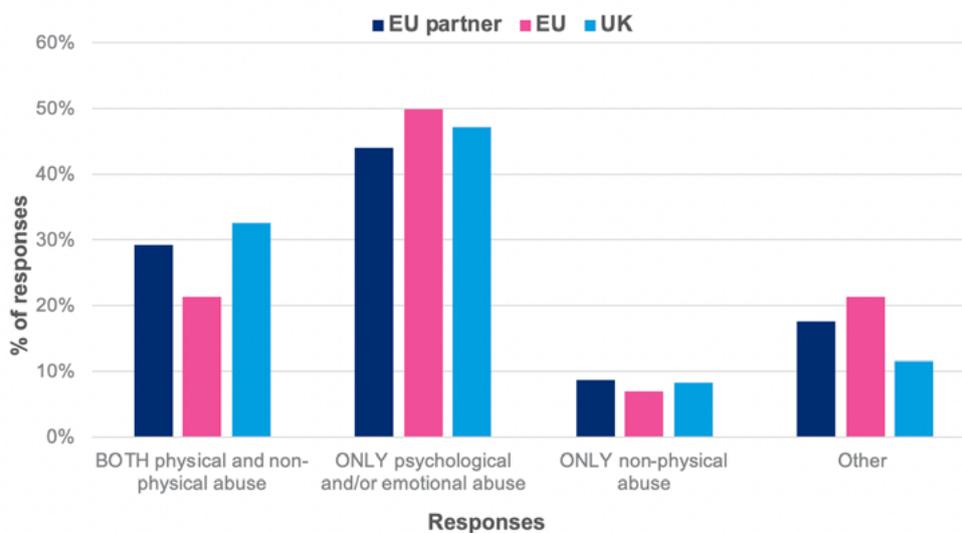
(UK practitioners n=471, non-UK European practitioners n=14, European partners n=34)

Psychological Violence

Non-UK respondents talked of psychological and physical violence not being mutually exclusive and going "*hand in hand*". Further, non-UK respondents spoke of the impact to the victim saying all forms of violence are psychological in nature which may relate to the definition of psychological violence in the Istanbul Convention.

However, professionals recognise the importance of a common understanding around psychological violence with over three-quarters of UK practitioners (82%), non-UK European practitioners (78%) and European partners (76%) agreeing to some extent that 'a universal term used and understood across professionals and the public would help identify 'psychological violence' earlier'. Further, there seems to be a need for a tool to assess psychological violence with just over half (53%) of non-UK European practitioners, nearly half (47%) of European partners and nearly a third (31%) of UK practitioners disagreeing that 'there is a valid and reliable assessment used by professionals that identifies psychological violence'.

Defining and understanding psychological violence: What survivors told us

From the survey, survivors mostly described their experiences of non-physical abuse as emotional (26%) or psychological (26%) abuse. A fifth of survivors (19%) answered that they would use the term coercive controlling abuse and 6% would use the term mental abuse or psychological violence. 5% of survivors did not have one single term they would use. Although practitioners felt 'mental abuse' was the term most commonly used by victims, this was not confirmed by survivors that responded to the survey. We believe the difference may reflect the survey cohort have worked through their experience and mental abuse may be a phrase used prior to contact with a service.

13% of survivors chose the 'Other' option. Of these, two-thirds (65%) felt a combination of mental, psychological and emotional could be used. Survivors talked of "emotional and mental torture", "psychological trauma", "relentless torture", "bullying", "control and threat" and "manipulation".

Survivors in the interviews talked of the impact of the abuse on their emotional, psychological and cognitive health and wellbeing. Many used the words 'mental', 'torture' and 'being broken'. One survivor made the link to brainwashing.

> **"I would call it 'psychological abuse' but that… psychological… I wouldn't have used that word. I used to call it 'mental torture'…I never used the word 'psychological' until now…I just used to call it 'mental torture'. It was like… it was like 'psychological terrorism'…it was just like someone infiltrating your brain, and I used to describe it as 'he had my brain in his hands', and he was like the 'puppet master'"**
> Survivor

Again, survivors in the focus groups frequently used the word 'mental' when discussing the term. Some noted 'put-downs', name calling and putting confidence down. Further, survivors highlighted several themes to consider when clarifying psychological violence and any subsequent definition. Many noted they associated the term with control, coercion, isolation, power and manipulation.

Others mentioned they considered this form of abuse as planned, intentional or thought through. One survivor noted she did not relate to the word 'psychological' saying *"I only know mental and physical"* illustrating the need for a definition to include everyday language to ensure it is universally understood. Many survivors noted the association with the mind, *"You're hurting someone with words through your mind"* with some distinguishing between the meaning of psychological and emotional.

> **"Psychological, you think psychology, emotional, you feel emotional, you know, it's more closer to home when it comes in terms of feelings"**
> Survivor

Several survivors noted that they would not use the term psychological violence due to associating it with physical incidents. One participant referred to the vignette noting but "he hasn't hit her". Some distinguished intimidating physically through throwing objects or pushing the victim, from psychological.

> **"The term 'psychological violence' I would normally associate – within this context – of violence being something more physical"**
> Survivor

There was some variation in the focus groups as to whether survivors liked and would use the term psychological violence. Some disliked it suggesting it was too harsh. A few survivors felt the word 'violence' is fitting portraying the seriousness of the abusive behaviour. One survivor explained, *"You say the word violence, to me the word violence is being fearful"* and that this form of abuse induces fear. Another noted the term 'emotional abuse' diminishes the seriousness of the experience:

> **"It's better than 'emotional abuse'…I think, sometimes, yes 'abuse' describes all of it, but people don't get the detriment – they don't get the hurt – they don't get how potent it is. But when you say, 'psychological violence', you actually describing the fact it's not physical – it's psychological – but it's violence. You're being violated"**
> Survivor

From the review of research literature and the evidence collated in sections 1-4 of the results, we suggest that psychological violence needs to be considered as a unique form of violence incorporating emotional and cognitive sub-sets of abuse. It is one mode of abuse that makes up the multi-pronged strategy of either non-violent coercive control (multiple forms of non-physical violence) or coercive control (multiple forms of non-physical violence and physical violence). The following sections of the results will analyse the survey responses within this framework (See Figure 9)[xxvii].

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xxvii   This is not an exhaustive list

Domestic Violence (non-physical)

Non-violent coercive control

Psychological Violence

Emotional

Belittling*

Criticising*

Judging*

Insulting*

Mocking*

Humiliating*

*your personality, appearance, work, parenting, religion

Isolates from family/friends

Gets excessively jealous

Controls what you wear

Intimidates through looks/signals

Threatens to use personal issues against you

Threats of partner to harm them self

Threats to harm others/pets

Cognitive

Projects blame

Withdraws affection

Refuses to communicate

Make you feel guilty

Questions your memory

Says you imagined things

Makes critical remarks disguised as humour

Denies their behaviour

Makes accusations

Different behaviour in public to private

Plays the victim

Returns to romance

Apologies Promises to change

Sexual violence/ coercion

Pressured/coerced to have sex

Pressured/coerced to take part in sexual acts

Partner refuses to use contraception

Partner deliberately passes on sexual disease/s

Causes pain or humiliation through sexual acts

Coerced into sex to have access to money, to be able to go out/work, to take care of children

Economic/ Financial Violence

Economic

Access is restricted to food, clothes, telephones, transport, housing

Financial

Access is restricted to finances/benefits

Prevents from working/training

Having money/property stolen

Being defrauded

Being put under pressure in relation to money/property

Stalking, Monitoring & Harassment

Checking and monitoring communication

Checking and monitoring movements

Following

Spying

Constant repeated unwanted contact when in work or out socially

Monitoring time

Physical intimidation

Dominating your personal space

Blocking doors

Standing over you

Clenching or shaking fist

Slamming doors

Banging tables

Hitting a wall

Displaying an object or weapon

Driving erratically /dangerously

Section 2: The dynamics of psychological violence

Key findings

- Psychological violence is an extremely common form of abuse.

- Psychological violence can occur in isolation of physical violence.

- Physical intimidation, strangulation/smothering and/or physical violence are more likely to be one-off incidents or used at a crisis point/ending the relationship than psychological violence.

- Escalations of psychological violence, such as threats to harm, and/or physical violence are often used when abusers need to regain control.

- Psychological violence is a slow and insidious form of abuse often involving a phase of 'grooming' with returns to periods of affection and romance.

- Identification is hindered by controlling behaviours being obscured by accepted gendered ideas of protection, romance and love.

- The use of technology was highlighted as an increasing technique to threaten and control victims.

The dynamics of psychological violence: What Practitioners and European partners told us

Figure 10 shows a mixed picture of practitioner attitudes as to whether psychological violence indicates eventual physical violence, or if it occurs concurrently or intermittently with physical violence suggesting physical violence may not always be present in many domestic violence cases that they see.

Figure 10: Practitioner attitudes to the involvement of physical and psychological violence

European partners, however, were more likely to agree that physical violence exists, in some form, where there is psychological violence with three-quarters (76%) agreeing to some extent that psychological violence is an indicator of physical violence and four out of five (81%) that psychological violence occurs concurrently or intermittently with physical violence.

Practitioners reported regularly seeing victims where there was no physical violence; 23% recorded they 'very often', 39% 'often', 29% 'sometimes', 7% 'rarely' and 3% 'never' support victims who have only experienced psychological violence. Practitioners did highlight the frequent use of physical intimidation with 83% saying victims 'always' or 'often' reported abusers using fists or objects to damage property, being pushed, or pinned down when they speak to them about domestic violence.

Figure 11[xxviii] shows that psychological forms of abuse are commonly reported by victims to practitioners when they speak to them about domestic violence. Nearly a quarter of practitioners (24%) said psychological abuse was 'always' reported by victims and just under a half (47%) 'often'. Stalking and harassment behaviours were also reported frequently with 16% of practitioners recording these were always reported. Although sexual violence is not always disclosed by victims, 6% of practitioners said sexual coercion was always reported and 4 in 10 (44%) noted sexual coercion was often conveyed.

xxviii   See Appendix A for how different forms of abuse were defined and measured

Figure 11: Forms of violence reported by victims to practitioners

Legend: ■ Always ■ Often ■ Sometimes ■ Rarely ■ Never

Forms of abuse	Always	Often	Sometimes	Rarely	Never
Sexual Coercion	6%	44%	37%	12%	
Economic/Financial	5%	46%	34%	13%	
S&H	16%	58%	21%	4%	
Psychological	24%	47%	18%	9%	
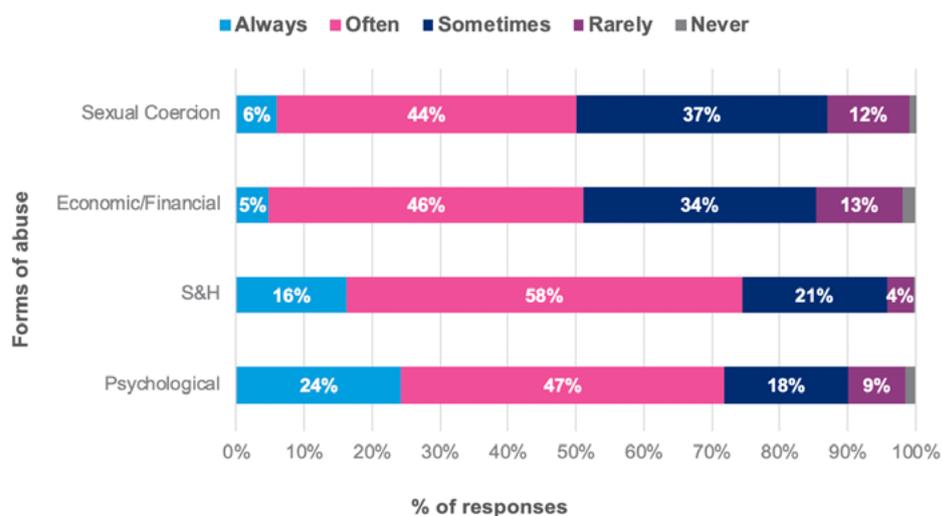
(Psychological n=513, S&H n=515, Economic/Financial n=505, Sexual coercion n=505)

Practitioners and European partners recognised the use of technology becoming more common as a tool of abuse with 93% and 94% respectively agreeing to some extent that *'technology is frequently used as a means to threaten and control victims'*. Practitioners also noted that revenge porn[xxix] was often (15%) or sometimes (51%) reported by victims when they spoke to them about domestic violence (See Figure 12).

Figure 12: Frequency of revenge porn reported to practitioners

Legend: ■ Always ■ Often ■ Sometimes ■ Rarely ■ Never
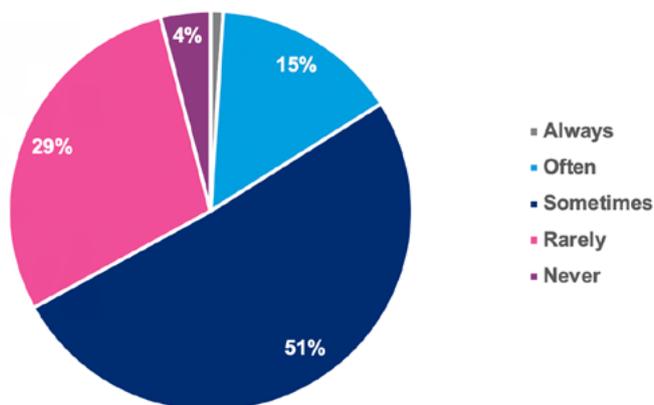
n=501

Most practitioners and European partners agreed to some extent that psychological violence was usually interspersed with warmth and kindness to create emotional confusion (90% vs 94%); that psychological violence can be masked due to perceptions of appropriate gender roles (90% vs 97%), that initially, certain aspects of psychological violence can be misidentified as part of romantic love (92% vs 91%) and that the mass media normalise psychological violence as passionate and romantic (65% vs 76%) (See Table 2).

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xxix   Threats to or actual sharing of personal images/videos online without consent

Psychological Violence

Table 2: Practitioner attitudes around dynamics of psychological violence

Attitude statement	n	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Psychological violence is usually interspersed with warmth and kindness to create emotional confusion	552	1%	3%	6%	50%	40%
Initially, certain aspects of psychological violence can be misidentified as part of romantic love	553	2%	3%	3%	44%	48%
Psychological violence can be masked due to perceptions of appropriate gender roles	550	1%	3%	6%	50%	40%
The mass media normalises psychological violence as passionate and romantic	547	2%	16%	17%	35%	30%

Practitioners comments highlighted that psychological tactics of abuse are those that victims are least likely to see or identify as abusive due to their insidious nature. These included, but are not limited to name-calling, insulting, belittling, blaming, persuasion, threats, undermining, bullying, being ignored, withholding love and affection, presenting insults as humour, making excuses for behaviour, manipulation and gaslighting. Central to this was how the abuse is hidden and maintained through accepted ideas of 'romantic love' with victims seeing jealousy and demands to look or dress a certain way as *"an expression of intense love"*.

> **"Often victims do not recognise controlling behaviours as abusive, especially when masked with "love" and "affection" by the perpetrator"**
> Practitioner

The dynamics of psychological violence: What survivors told us

Figure 13 shows that a large proportion of survivors had experienced psychological violence. The survey data[xxx] shows that only 9% of survivors had never experienced a form of psychological violence in their relationship. Many had also experienced stalking, monitoring and harassment behaviours (85%). Three-quarters had experienced a form of physical intimidation (76%) and sexual coercion (75%) and two-thirds economic/financial violence. The data shows that some survivors had also experienced physical violence with just over half (58%) experiencing Actual Bodily Harm (ABH)[xxxi] and a quarter (24%) Grievous Bodily Harm (GBH)[xxxii]. Nearly half (48%) of survivors had pressure applied to their neck or were smothered. This is a symbolic act of control which does not always leave physical injuries but is a real and visceral threat to the life of the victim. It can cause serious injury or death and is highly predictive of future homicide.

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xxx   See Appendix A for how forms of abuse have been defined

xxxi   Physically assaulted you causing bruising and, or cuts

xxxii   Physically assaulted you causing broken bones or serious injury

Figure 13: Forms of violence experienced by survivors

Form of violence	Percentage
Psychological	91%
Stalking, Monitoring & Harassment	85%
Physical Intimidation	76%
Sexual Coercion	75%
Economic/Financial	66%
ABH	58%
Strangulation/Smothering	48%
GBH	24%
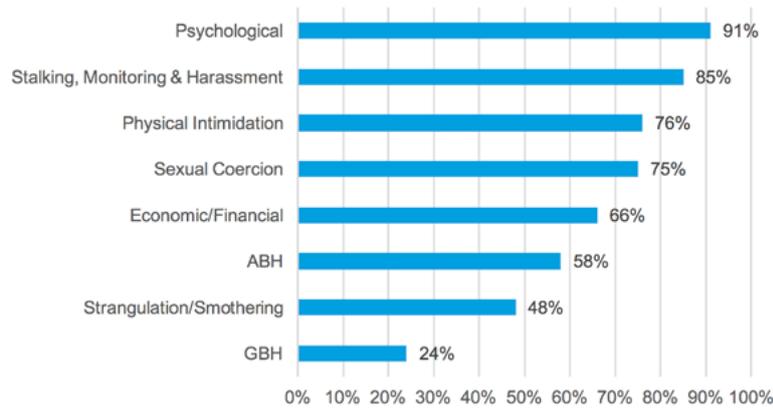
n=368

Figure 14 shows that psychological violence occurs on a frequent basis with nearly half (49%) of survivors recording this occurring regularly throughout their relationship and 23% from a key point in their relationship. Psychological violence was less likely to occur as a one-off incident (1%), only at the beginning of the relationship (1%), or at a crisis point (4%).

Nearly two-thirds of survivors (65%) said they were regularly 'given the silent treatment, or had their feelings discounted'; 53% experienced 'control in who they could speak to, meet socially or spend time with'; and 48% experienced suggestions 'they were mentally unstable, were given mixed messages, were made to doubt their own thinking, or partners denying a previous message'.

The data indicates that physical intimidation and physical forms of violence are more likely to be experienced as one-off incidents, or at a crisis point, than psychological violence suggesting these may be times when the abuser must use high-risk tactics to instil fear or regain control. Some survivors noted the need for professionals to be aware that different forms of abuse can be triggered at different timepoints in the relationship.

Figure 14: The pattern of non-physical and physical violence
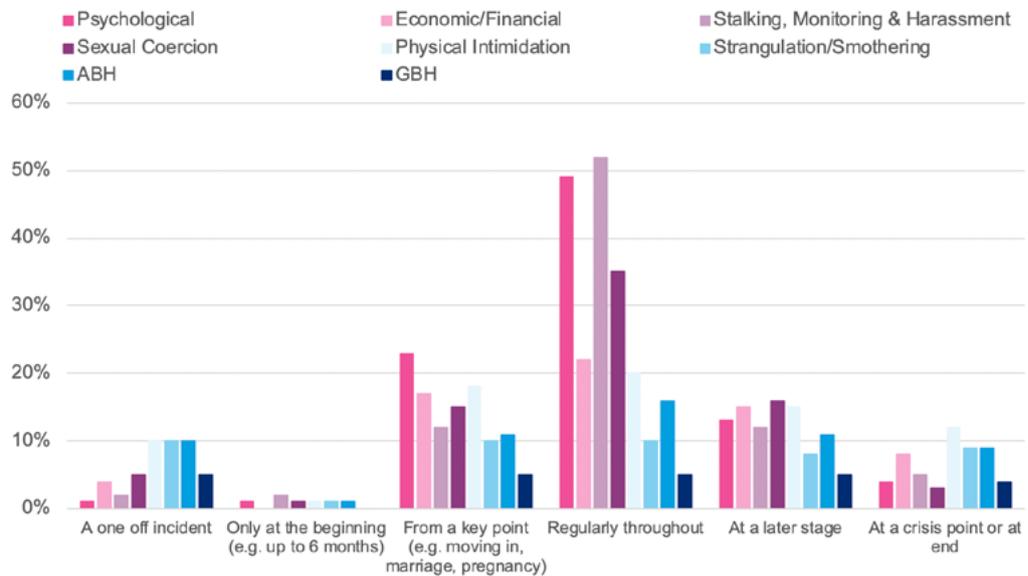
Other survivors noted the change from psychological violence to physical when they challenged the abuse, or experienced an escalation of other forms of abuse when the relationship ended:

"When I did [Freedom Programme] there was quite a lot of us…only a few of us had ever had a hand laid on us, and that's because some women they ground down and never had to, and then some of us were a bit sparky and he had to resort to those measures to try and get me back down again"
Survivor

Further, survey data shows many of the survivors experienced aspects of *'grooming'* [xxxiii] at the beginning of the relationship. Nearly all (96%) said their partner was charming and affectionate and many noted the speed and intensity at which the relationship moved with 93% saying their partners expressed love very quickly, and 92% wanting to spend a lot of time together. Over two-thirds (69%) of survivors said they experienced all five statements at the beginning of the relationship (See Table 3).

Table 3: Survivors experiences at the beginning of the relationship

Did you experience any of the following at the beginning of the relationship?	n	Yes	No
Partner was charming, affectionate	381	96%	4%
Partner wanted to spend a lot of time with you	378	92%	8%
Partner encouraged you to tell them all about you	377	84%	16%
Partner expressed love for you very quickly	379	93%	7%
Partner would frequently offer to meet you, pick you up	378	86%	14%

Evidence from the interviews and focus groups support the survey data with survivors describing their partners as charming, romantic, caring, attentive and fun, presenting as the ideal companion in the initial period of the relationship; and the speed and intensity in how the relationship developed. Survivors in the focus groups recognised these initial aspects as 'grooming' describing it as a gradual process of brainwashing by gaining the victims trust. Survivors also highlighted the pattern of psychological violence starting with small, concealed abuses that are insidious and hard to recognise with individuals becoming slowly acclimatised to it.

"You don't notice it, it's like boiling water. You think you're fine and everything seems normal, but it is slowly damaging you and it takes a long time to recover from"
Survivor

Table 4 shows many survivors experienced certain behaviours following an abusive incident or, trying to end the relationship. Psychologically, 'dosing' or 'hoovering' are blackmailing tactics, often used after mistreatment or when the relationship ends, to pull the victim back in. Nearly half (49%) had experienced a partner threatening to take their own life. A third (33%) of survivors said they experienced all five statements if they had an abusive incident or tried to end the relationship.

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xxxiii   Acts of grooming include behaviours where an adult is prepared so they unwittingly allow abusive behaviour or exploitation to occur later

Table 4: Survivors experiences following an abusive incident, or trying to end the relationship

If you had an abusive incident or you tried to end the relationship did you experience any of the following?	n	Yes	No
Partner promising to change, saying they recognised their issues	374	80%	20%
Partner saying, they love you, miss you, couldn't live without you, being concerned about you	376	85%	15%
Partner communicating with you as if nothing had happened	374	90%	10%
Partner saying, they are ill, in a crisis, need your help	374	64%	36%
Partner suggesting, they would take their own life if the relationship ended	373	49%	51%

Many survivors talked of their abusers as master manipulators, sometimes using a return to loving and caring acts to convince their partner to stay in the relationship:

> **"People who abuse in this way are clever in their manipulation and the drawing you back in with good and kind behaviour before striking again with threats control and manipulation leaves you on a constant cycle that seems impossible to escape"**
> Survivor

Survivors also spoke of abusers using emotional blackmail in the form of threats, either in suggestions of taking their own lives, to harm others, or putting survivors in a threatening situation - such as driving dangerously:

> **"He would threaten to harm himself or kill himself if I tried to end the relationship…he would call me "his angel" and tell me that he couldn't live without me or cope without me so that I felt that I couldn't leave him…he manipulated me in to starting our relationship with threats of suicide. I felt like I had no choice. He gave me no choice. I thought he was my best friend and I didn't want to hurt him or anyone else so I gave in to his demands"**
> Survivor

Nearly two-thirds (62%) of survivors reported that, at some point in their relationship, their partners had used technology (e.g. social media, tracking devices) to abuse, harass or stalk them. Almost a fifth (19%) of survivors said this had occurred regularly throughout their relationship. Survivors in the focus groups brought up the issue of monitoring through technology with the conversation showing the psychological tactics used to persuade a person to allow access to their personal space:

> **"I didn't realise – one of the really commonplace for them to do – is 'Oh, I've got you a new phone', so they get it on their contract…so, they can access everything. I didn't know he could check my messages – my previous history – my phone contacts and everything…and it's a massive thing of control"**
> Survivor

Section 3: The tactics of psychological violence

Key findings

- Survivors are regularly experiencing a range of covert psychological tactics throughout the relationship causing emotional confusion and shifting blame to the victim.

- Abusers target the vulnerabilities of victims to instil fear or, use their social standing or status, to present the victim or survivor as untrustworthy and unreliable.

- Psychological tactics of abusers make use of accepted gendered responsibilities and cultural expectations that pre-set power imbalances in relationships.

- Children are frequently used as a tool to threaten and control victims. Abusers are using children to belittle and criticise parenting, and - at more extreme levels - threatening to harm them to maintain control.

'The character change: building the cage'

After the initial 'grooming' period survivors told us how, on reflection, they experienced a change of character in the abuser. This involved behaviours such as criticisms including gendered put-downs, unreasonable jealousy, and not allowing personal space and freedom. Many abusers presented controlling behaviours being carried out under the façade of loving and caring, laying the foundations for other forms of abuse, such as financial:

> **"The minute I found out I was pregnant. And then he started to become really possessive but explaining that by 'I'm trying to keep you and the baby safe'. He started to take control of all the money – take control of my possessions…so, he started to become sort of really obsessive with where I went, and what I did, and… and it was just under the guise of 'I need to keep you and the baby safe"**
> Survivor

Survivors described how changeable behaviour from 'good to bad guy' creates emotional confusion, holding on to hope that the person they originally fell in love with, will return. Survivors spoke of being held by cultural expectations such as the 'fairy-tale' image of marriage and feeling pressured to meet the hopes of family. BME survivors explained how cultural roles can be used to both belittle and normalise abuse as in some it is considered conventional for women to take on the role of keeping their husband content and caring for the family. Survivors felt extended families in some communities facilitated the abuse by reinforcing these expectations.

'Shifting blame'

One of the most common covert tactics mentioned by survivors is how abusers shift blame, projecting guilt onto the victim and never taking responsibility for their actions. Survivors frequently talked of feeling guilty resulting in them trying harder to please, sometimes through 'desirable' gender role behaviours and making adaptations to try to prevent painful episodes:

> **"He has never acknowledged any of his behaviour and I don't think he ever will. I still sometimes doubt my own version of the truth"**
> Survivor

These tactics often resulted in confusion with the survivor trying harder to please and experiencing chronic fear of 'walking on eggshells'. Sometimes survivors described being micro-managed ensuring household responsibilities were perfect so not to make their partner angry. Several survivors identified being made to feel guilty through the 'silent treatment' or sulking, with the abuser playing the victim and diverting the attention from the issues of abuse. Others noted being blamed for the abusers' problems or issues. Survivors talked of the female expectation of being *"natural nurturers"* taking on the emotional responsibility of the relationship in their belief that they could 'fix' the abuser from previously held trauma or current troubles:

> **"He made me feel like I was crazy. I apologised for things I hadn't even done just to try and keep the peace. I always felt guilty for everything and nothing at the same time. I was emotionally exhausted, I would cry all the time"**
> Survivor

'Insults presented as a joke'

Another method used to confuse and disorientate was insults or humiliations presented as a joke making the survivor question what is happening, and allowing the abuser to openly denigrate the person without it appearing cruel:

> **"My ex-partner would regularly humiliate me in public, but he would claim that it was a joke or that it was all part of "banter" that I just didn't get"**
> Survivor

'Defining reality'

Through these tactics survivors described how frequent put-downs and blaming can filter into the psyche resulting in a belief of what the abuser is saying and questioning their reality:

> **"I happened to mention… I didn't have my bank cards – [partner's name] always had them – even though they were in my name. And he just said…why haven't you got any access to finance?' And I'd start saying things like 'Well, I'm stupid – I can't look after money' because [partner's name] told me that"**
> Survivor

'Gaslighting'

Many survivors across the survey, interviews and focus groups described acts of 'gaslighting', a psychologically manipulative tactic that makes a person question their reality. Survivors described items being hidden, things they had previously completed being changed or removed or the abuser denying knowledge of previously made plans:

> **"My ex-husband would always say I was forgetful and that I couldn't be trusted to remember things. As time went on I started to lose lots of little things that I needed (like a favourite pen, tweezers etc etc) or I'd find things in strange places like Sellotape in the fridge…he started to suggest that I was losing my mind and that I must see a doctor as it could be early onset Alzheimer's (at the age of 33!!) he pressured me to constantly push for brain scans…I really started to doubt my own mind. He had a locked box in his van which was huge and had security codes to unlock it. He would never give me the code and was forever tinkering about in the van… after a while and many attempts I successfully guessed the 8-digit numerical code and got into this enormous steel box whilst he was at the pub. Every single item was in there that I had been "losing" for a few years. Hundreds of little things of mine that he had been keeping"**
> Survivor

'Spinning the narrative'

Often noted were insidious ways of manipulation where perpetrators would 'spin the narrative' to present a different version of events, or behave differently in public/private, particularly to recruit allies. Survivors told of the abuser making them appear untrustworthy or mentally unstable. Some noted how abusers use their status or social standing to display themselves as reasonable, reliable and trustworthy especially with professionals:

> **"He presents really calm to others but in private he was/is controlling, devious and highly manipulative. He is a senior manager in Children's Services and knows how to present a professional case and used this when I involved the police and social services"**
> Survivor

Survivors stressed how different presentations of self in public makes it extremely difficult for survivors to explain or prove what is really happening to others, frequently noting *"who would believe them"*. Others described how abusers created different versions of events to isolate and separate them from friends and family.

> **"He plays the victim to our friends, because I left when I couldn't take anymore. They feel sorry for him, he turned everyone against me"**
> Survivor

'Using vulnerabilities'

Survivors highlighted how abusers used vulnerabilities, such as mental health issues, to threaten, intimidate and make them dependent on the abuser. BME survivors noted how issues of citizenship are frequently used against them and their children, so they remain dependent upon their abuser.

> **"Hiding Home Office applications and letters, most of women suffer this because they want more control…so, when her spouse visa finish, she find herself illegal in the country, and then she needs to apply and the most that she can get is 10 years, with no recourse to public fund and that means she's still be dependent on him…so, this is the most… what's happening now, because most men figure this – they're telling each other about it"**
> Survivor

'Sending psychological signals'

Also noted was non-verbal aspects of psychological violence where 'signals' are given only known to the victim. Many noted looks, behaviours or 'warnings' from abusers instilling fear and producing an unsettling experience of anticipating what is next:

"For me personally it's the…everything looks okay but then… that they said, things that you know what they're on about but nobody else does, but nobody else can see, yeah"
Survivor

'Using the children as a tool of control'

Data from the survivor survey confirms how frequently children are being used to control victims and survivors. Four out of five survivors (85%) who had children in the household at the time of the abusive relationship said the children were used to threaten and control them and 72% thought the perpetrator attempted to turn the children against them. At extreme levels of manipulation, abusers can threaten to take or harm survivors children:

"Because he'd been massively aggressive to me – again, not in a physical sense, but the threats were… unbelievable. He'd already told me that he had a gun, because things at work had been… things had got bad…but he just blew up in the hotel reception, where me and my Mum were staying in [location] and just completely lost it…so, yeah, threatening to kill me, to take my daughter – take her away from me"
Survivor

Survivors in the focus groups noted the hurt of being belittled and criticised as a mother, and how the relationship between mother and children is manipulated by the abuser. BME survivors talked of providing children being a woman's duty. One BME survivor felt abusers can deliberately manipulate a home environment where a mother commands no respect within the family, deliberately portraying to the children she is there to serve, and a father is in charge and controls the household:

"I think in psychological violence, as well, there's a triangulation happening and very often – because of the isolation around the family – who gets triangulated is the children…It's normal. It's normal. So, anything goes wrong, it's the mother's fault because she didn't foresee it, or she didn't manage it, or she's 'useless', basically – that's it"
Survivor

Section 4: The impact of psychological violence on victims and their families

Key findings

- Survivors describe psychological violence as *"the worst abuse"* having profound, long term impacts on the emotional and physical wellbeing of survivors.

- The impact of psychological violence diverges into numerous areas of survivors' lives including employment, parenting and the ability to manage everyday life. It can result in the misuse of alcohol, illegal substances and prescription medication as coping mechanisms.

- Practitioners believe the seriousness of psychological violence is not recognised by other professionals with the risk to the victim not considered as high in the absence of physical violence.

- Survivors are reporting disabilities, long term illnesses and/ or health conditions that limit their day to day activities post-relationship that were not present before the abuse.

- Children, even at a very young age, can be seriously affected by an environment of psychological violence.

The impacts of psychological violence on victims and their children: What Practitioners and European partners told us

Practitioners and European partners clearly recognise that psychological violence has a serious impact on victims and survivors. The majority of practitioners (88%) and European partners (97%) agreed to some extent that psychological violence can be as, or more harmful to the victim than physical violence. However, practitioners highlight that professionals from other agencies consider psychological violence as less dangerous, particularly when there has been no physical violence (See Table 5).

Table 5: Practitioners and European partners attitudes to the harm of psychological violence

Psychological violence can be as, or more harmful to the victim than physical violence	Practitioners (n= 571)	European partners (n=34)
Strongly agree	74%	76%
Agree	14%	21%
Undecided	2%	3%
Disagree	1%	0%
Strongly disagree	9%	0%
Total	100%	100%

> **"I think it's hugely under reported and not seen as "high risk" to most professionals when the actual harm can be more long term and cause more issues than physical abuse"**
> Practitioner

Figure 15 shows the wide-ranging impacts practitioners witness on victims due to high levels of psychological violence. Nearly half (44%) of practitioners' comments focused on the loss of emotional wellbeing in the victim. Practitioners described severe and devastating impacts on victims mental and emotional health including high levels of anxiety and depression, PTSD, suicidal ideation, suicide attempts including overdoses, self-harm, diminished self-esteem/self-worth, low confidence, and an eroded sense of self; explaining how these effects are long-term and impact on the person's ability to parent, work, socialise and ability to generally function day-to-day.

> **"High levels of psychological violence can result in victims feeling they are going mad and raising concerns about their own mental health"**
> Practitioner

In addition to the impact on emotional wellbeing, practitioners described how victims are unable to work, become socially isolated and how alcohol, illegal substances and prescribed medication are misused to cope. Also, frequently noted were concerns around parenting, fears of the impact on their children, and concerns that they will repeat the behaviour.

> **"Significant mental health issues and suicide attempts… very low self-esteem…difficulties in finding work (due to low self-esteem or not being able to work during the relationship) …no confidence in parenting. Extreme anxiety and PTSD (often undiagnosed). Clients have described themselves as a 'shadow' of what they were before"**
> Practitioner

Further, practitioners noted the hypervigilance and fear caused by the psychological violence and its impact on physical health causing, *"weight loss, weight gain," "physical pain," "unexplained headaches, stomach aches and tiredness"* and *"noticeable shakiness"*. They also stressed the seriousness, long-term, and sometimes, lifelong impact that psychological violence brings.

Figure 15: Impact of high levels of psychological violence seen by practitioners

Emotional Wellbeing — 44%
Social Isolation — 14%
Substance Abuse — 10%
Parenting/Children Concerns — 9%
Distinguishing healthy relationships — 8%
Frightened — 6%
Work / Education/ Home / Finances — 5%
Physical Well-being — 3%
Crime — 1%
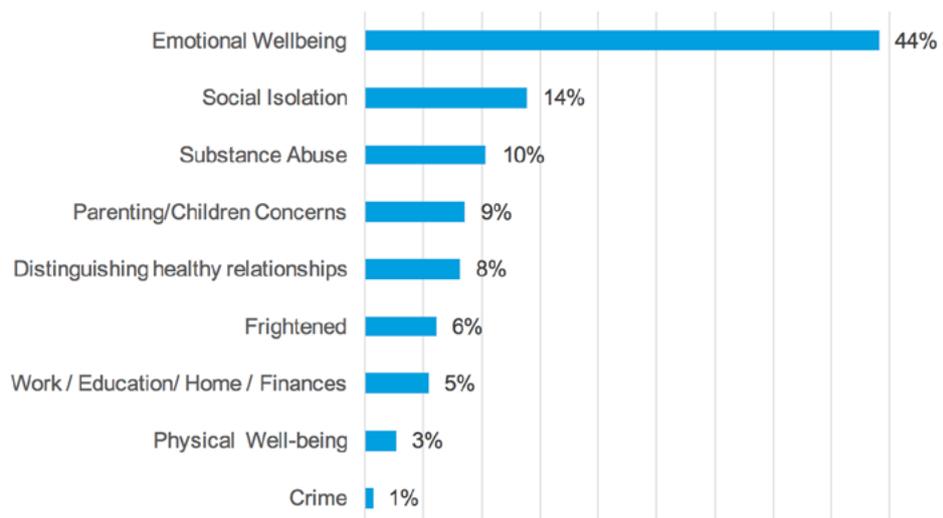
n=896 comments

Practitioners told of clients describing psychological violence as 'the worst abuse' due to the fear of what will happen next and being kept in a constant state of uncertainty. Some practitioners stress how, even very young children, are affected by an environment of psychological violence sometimes having multifaceted trauma through experiencing this as a child and an adult:

> **"I think it is important to remember the children of these families too, I work in an infant school and we have seen very damaged little people as young at two years who are the produce of seeing and hearing parents who are perpetrators and victims of Psych Violence"**
> Practitioner

Practitioners also note how psychological violence produces extreme psychological confusion and shock for victims. Practitioners note that as the abuse isn't obvious and is often tied up in romance, it produces an acceptance and *"these entrenched experiences become highly normalised"*. Practitioners described how victims have difficulty letting go of the relationship due to the dependency the abuser has created. They experience disbelief, doubting themselves and seek to excuse the behaviours, often grieving for the loss of their partner. Practitioners highlighted how their clients don't consider what they experienced as abuse and do not identify as a victim, feeling their experiences are not as valid as those who experience physical violence.

The impacts of psychological violence on victims and their children: What survivors told us

Survivors clearly described the acute impact of psychological violence. Whether survivors had experienced only non-physical abuse or combined with physical forms of violence they described psychological violence as the *"worst abuse"* due to its persistent nature and psychological cruelty, with it having significant effects on mental and physical health:

> **"I have previously experienced physical and sexual assault in relationships. I would say the psychological cruelty was much worse in terms of its effects on my mental and physical health. I put up with it for much longer than I would have if he had been hitting me. I actually wished for him to hit me, so I'd have a reason to end things - every time I tried to end things I felt terrible and guilty"**
> Survivor

Many survivors confirmed they did not realise what they experienced was abuse until they had left the relationship. Survivors highlighted the difficulty of realising that abuse was happening to them, knowing something wasn't right but constantly questioning themselves. Many described the 'frog in water' scenario due to its subtlety and creeping nature.

> **"You don't notice it, it's like boiling water. You think you're fine and everything seems normal, but it is slowly damaging you and it takes a long time to recover from"**
> Survivor

Survivors spoke of taking the blame, thinking it was their fault and excusing their partners behaviours, not able to trust their own judgement. Some described the hope that their partners would change and of feeling the loss of the relationship.

> **"I felt I was treading on eggshells all the time and the hardest part is that I still loved him. I really wanted to believe he'd change and still loved me as much as he did at the beginning. He was my best friend as well as my abuser"**
> Survivor

When in the relationship, survivors described a loss of 'space for action'[201] narrowing their life and options due to exhaustion, anxiety, isolation and reduced self-esteem. Some participants gave up employment or education because of the

abusive relationship. Many survivors reported feeling their self-esteem or self-worth was low (90%); feeling confused, anxious or under pressure (88%); feeling exhausted, worn down, lack of motivation (88%); feeling emotionally withdrawn or shut down (88%) and feeling lonely and isolated (84%). Just under half (47%) said they had suicidal thoughts (See Figure 16).

Figure 16: Impact of psychological violence on survivors
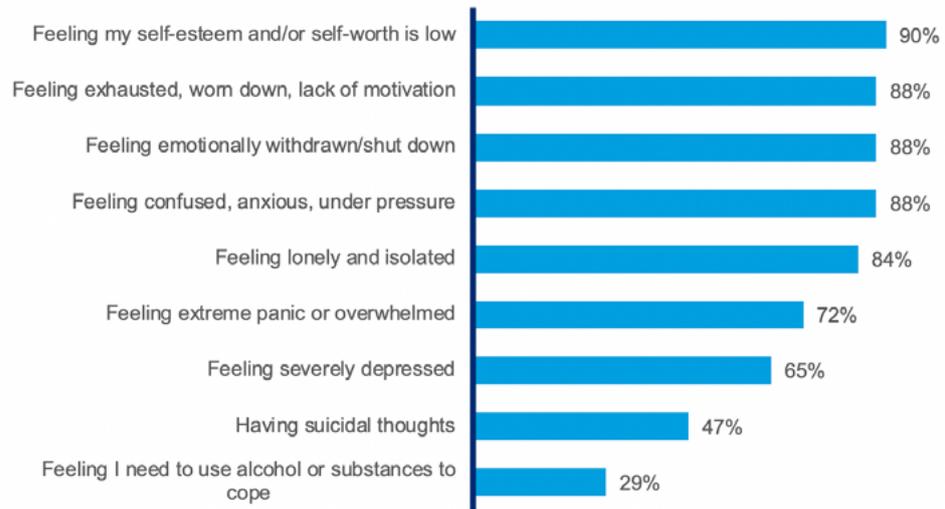
From the 19% of survivors that noted 'Other', 37% of comments related to feeling controlled and/or powerless; 16% mentioned the health impacts of the abuse; 13% said they had attempted suicide or self-harmed; 10% talked of feeling ashamed and guilty; and 9% highlighted the fear.

Over a quarter (29%) of the survivors responding to the survey recorded that they had a disability, long-term illness or health condition which limits their day-to-day activities. Of those 29%, three-quarters (75%) said they did not have the disability, long-term illness or health condition before the abusive relationship (See Figure 17).

Figure 17: Disability, long-term illness and health conditions of survivors before and after the abusive relationship
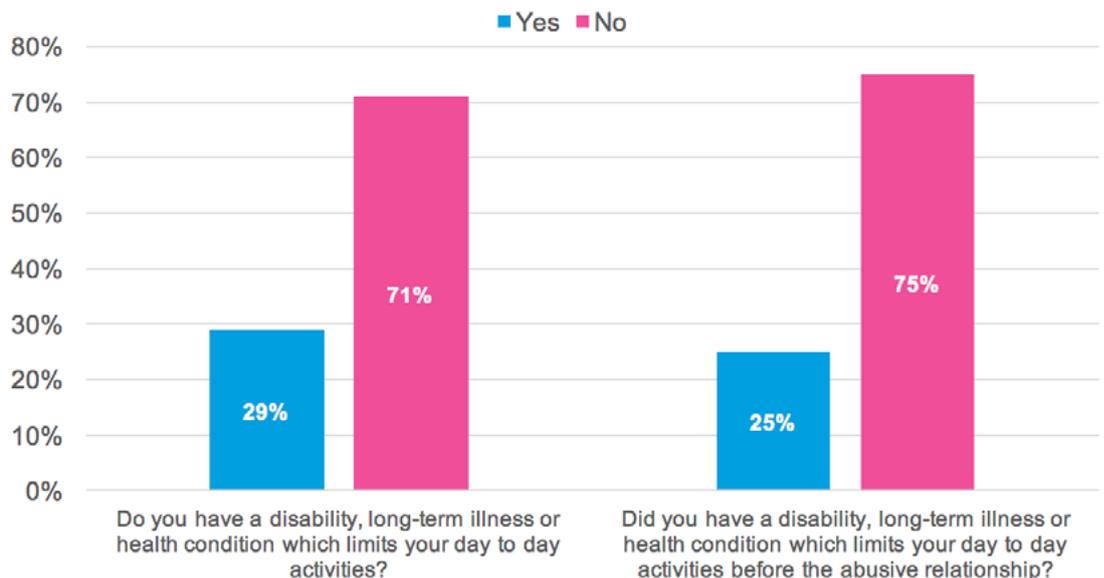
Although the data cannot presume cause and effect, i.e. that the abusive relationship caused the disability, long-term illness or health condition, many survivors comments highlight the emotional and physical impacts that developed as a result of the abuse (Figure 18).

Figure 18: Survivors comments about the impact of violence

"Caused comlex PTSD and severe anxiety"

"Ended up with extremely high blood pressure"

"Developed fibromyalgia disability"

"Diagnosed with PTSD due to incessant emotional, psychological abuse & control"

"Over comfort eating. Suffering from lots of stress related illnesses and conditions not previously present before relationship"

"I developed several mental illnesses"

Survivors also described the long-term and wide-ranging impacts of psychological violence affecting their wellbeing and lives generally, causing relationship, financial, work and family problems:

> **"I suffered the abuse for over 15yrs, its nearly 6 yrs ago now & the effects still give me problems in day to day life especially with new relationships or friendships. I suffer anxiety because of it all & have been on medication for it for a long time"**
> Survivor

Many survivors described the negative impacts of psychological violence on their children. They felt that children 'normalise' their abusive environment and feared that their children would replicate the abusive behaviours they were exposed to. Others talked of the emotional impacts, with some noting even very young children being affected by what they experienced and highlighting the variation of its effects on different personalities:

> **"So, one of my children took much longer to speak…she learnt not to rock the boat, so she would speak less, and it took a long time to get to now. The other child developed in a different way. Her emotions were much more in the forefront – a more nervous child – harder to sleep, harder to be alone. So, one became very complacent, the other one became rebellious – even though we are talking about very young children – we're talking toddlers, you know – so, when people say 'Oh, the child is too young, there was no damage done because they were too young' that is a lie"**
> Survivor

Section 5: Supporting people experiencing psychological violence

Key findings

- There is a significant need for awareness-raising and training of professionals, across all agencies but particularly criminal justice organisations. Many survivors did not access a support service therefore, fostering an appropriate response could encourage victims to come forward promoting earlier identification.

- Survivors are approaching health services with symptoms they do not relate to psychological violence. Therefore, the professional curiosity of GPs and health/caring professionals is critical for earlier identification.

- There is a need for improved access to long-term, specialist mental health and therapeutic services to support victims and survivors' recovery.

- There is a significant need to raise public awareness of psychological violence, through various channels, so individuals and communities recognise it as a form of abuse.

- Early preventive measures such as challenging social and cultural patterns of behaviour in men and boys are considered key to stop psychological violence in subsequent generations.

Supporting people experiencing psychological violence: What Practitioners and European partners told us

Practitioners and European partners identified three main areas of focus to support people experiencing psychological violence: training of professionals, raising public awareness and, improving access to services - especially therapeutic facilities. Over half of practitioners (56%) agreed to some extent that 'professionals from other agencies (e.g. police, children's services) rarely identify psychological violence in victims'. This was considerably higher in European partners (81%) suggesting less awareness in wider agencies across Europe.

> **"The lack of awareness, especially in public service. Sometimes police don't accept charges because they don't think that is abuse if the perpetrator is the partner or a member of the family"**
> European Partner

Table 6 shows both practitioners and European partners are in strong agreement that mandatory training for police and legal professionals to recognise psychological violence and enforce law and training for wider agencies to recognise and refer on would help identify psychological violence earlier.

Table 6: Practitioner and European partners attitudes to training for earlier identification

	Mandatory training for police and legal professionals to recognise psychological violence and enforce law		Training for wider agencies to recognise and refer on (e.g., children's services, mental health, housing, substance misuse)	
	Practitioners (n=498)	**European Partners (n=34)**	**Practitioners (n=498)**	**European Partners (n=34)**
Strongly agree	67%	68%	68%	65%
Agree	24%	32%	23%	35%
Undecided	1%	0%	1%	0%
Disagree	0%	0%	0%	0%
Strongly disagree	8%	0%	8%	0%
Total	100%	100%	100%	100%

Comments from practitioners reinforced the need for training across professionals, especially the police and judiciary services. Some practitioners focused on the need for guidance to health care specialists both to recognise, and provide therapeutic support, stressing the cost-savings that could be made from early recognition and the reduction in medications and treatments administered due to misinterpretation of symptoms.

Raising public awareness is considered key to assisting in earlier identification. 93% of practitioners agreed to some extent that there should be healthy relationships education in schools and children's services about psychological violence. Also, that there should be better public awareness of the covert psychological tactics of an abuser (92%), the pattern of a psychologically violent relationship (92%), and the dynamics of psychological violence (91%) (See Figure 19).

Figure 19: Practitioner attitudes on how to identify psychological violence earlier

- Better public awareness of the dynamics of psychological violence
- Better public awareness of the pattern of a psychologically violent relationship (e.g. charm, romance to dominance)
- Better public awareness of the covert psychological tactics of an abuser
- Healthy relationships education in schools and children's services about psychological violence
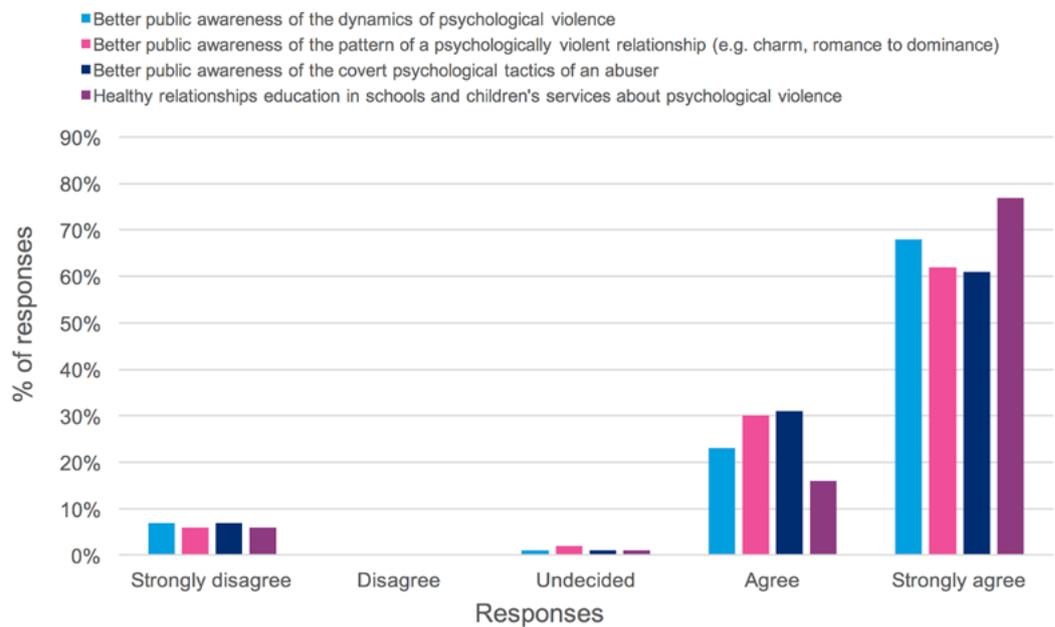
Practitioners and European partners were asked to comment on the gaps in support for victims of psychological violence. The majority of practitioner (47%) and European partner (40%) comments were concerned about the lack of awareness and understanding of the issue, both in victims recognising the abuse, and professionals and public.

Both highlighted the need for raising awareness about the dynamics and indicators of 'psychological violence' to dispel these behaviours as 'normal', challenge the impression of certain actions as romantic, and highlight that domestic violence is not only physical. Practitioners cited achieving this through media, public, community and professional awareness as well as the need for a government agenda:

> **"Overall the public are not aware of psychological violence. I think this has a massive impact on people's perception of psychological violence and the acceptance of its presence in their relationships and other people's. When people discuss how their partner has been behaving towards them, due to a lack of awareness, it is more likely to brushed off as "normal" or "not a big deal" rather than realising the seriousness"**
> Practitioner

The normalisation of psychological violence in young people's relationships was frequently mentioned, with acts of controlling behaviour misconstrued as loving or caring. Some practitioners noted the need for a focus on young men:

"Working primarily with young males there are so many that demonstrate negative views to relationships and females and yet there is such a lack of intervention and resources available to tackle this...it is really frustrating to break cycles need to get more information, training and programmes out to work with those who may be at risk of perpetrating it.... otherwise in my view it will not change"
Practitioner

Due to the lack of awareness, practitioners spoke of the challenge for victims to recognise this type of abuse. Some felt it is greatly un-reported due to abuse only being associated with physical violence, and because it is a form of widespread abuse but hidden in higher socio-economic households.

"I have seen many women with devastating effects from suffering this level of abuse, it has taken a long time for them or someone else to recognise that this is abuse. Too often I hear from women that "he doesn't hit me" so therefore I am not being abused in any way"
Practitioner

The lack of specialist support, particularly waiting lists for therapeutic and mental health services, was highlighted in practitioner comments. Practitioners stressed that specialist tailored mental health and therapy support has to be long-term and thorough to enable victims to fully recover and that therapeutic support *"needs to be accessible, informed and delivered by people who understand the dynamics of domestic abuse and risk":*

"I've worked with victims who are suicidal and depressed due to the abuse they have suffered, and they struggle to receive long term support and counselling. Some victims have had to self-fund, however this is not an option for a lot of victims as they do not have the money to do so, so have long waiting lists. When a victim comes to notice because of psychological violence I feel we need to work quickly to get them as much support to prevent them from returning to the abusive relationship"
Practitioner

Many talked generally about the limited access to services due to lack of funding including domestic and sexual violence services, awareness and recovery programmes, housing, refuges, pet fostering services and specialist support e.g. for male victims, victims with complex needs, BME victims, and victims with additional vulnerabilities. Comments also covered the lack of legal support for victims, the problem with defining and assessing psychological violence and support for children and teenagers.

Supporting people experiencing psychological violence: What survivors told us

Survivors expressed a need for raising public awareness. They felt if they had known what constituted psychological violence, it would have helped to recognise they were being abused earlier. Survivors repeatedly explained they did not realise psychological violence was happening to them until they were free of the relationship; and the difficulty of articulating and describing what had happened to them, to get help and support. Many noted the focus of public advertising on physical violence which limited their own understanding of domestic violence – thinking it was only physical. Many expressed the need for wider media and local advertising focusing on psychological aspects of abuse, to combat this, with a focus that it happens to a wide range of people. One survivor noted as she was isolated, TV advertising would have been the only way she would have been exposed to messages about psychological violence.

Some younger survivors highlighted a need for raising awareness of acceptable and unacceptable relationship behaviours. BME survivors discussed how a multi-lingual website could be helpful for information and provide a forum for survivors to seek support from one another. Others spoke of a need for accessible and affordable therapeutic care or more drop-in services for immediate support if people are feeling in despair:

> **"There needs to be more support from the NHS for victims of mental abuse. I've been on a counselling waiting list for 12 months and still no closer to getting help"**
> Survivor

Survivors portrayed mixed feelings about talking to professionals about their experiences. Some explained a fear in approaching certain services, especially police or children's social care services, feeling they would not be understood or being apprehensive about the service response in relation to their children. However, others noted a positive response to their situation when professionals can identify the subtleties of violence. Survivors in the interviews also shared the feeling of stigma or fear stopped them reaching out for help with them minimising what was happening, to family or friends. Several survivors, although they accessed support, noted the service had not recognised or believed the abuse they were experiencing:

> **"I was a teen and my family and professionals in my life such as Dr and school didn't spot the signs. They just assumed I was a moody teenager and never asked about what was going on. I called the police and they were very unhelpful just advised me to "stay away" from him and that they would have a word with him. He stalked and kidnapped me and threatened to kill my family. I was a teen all alone in an adult world with no one to turn to"**
> Survivor

Figure 20 shows that from the overall support options, 31% of survivors did not access any support service because of their experience. Just under a third accessed the GP (30%), Police (30%) and a domestic abuse service (30%).

Figure 20: Support accessed by survivors
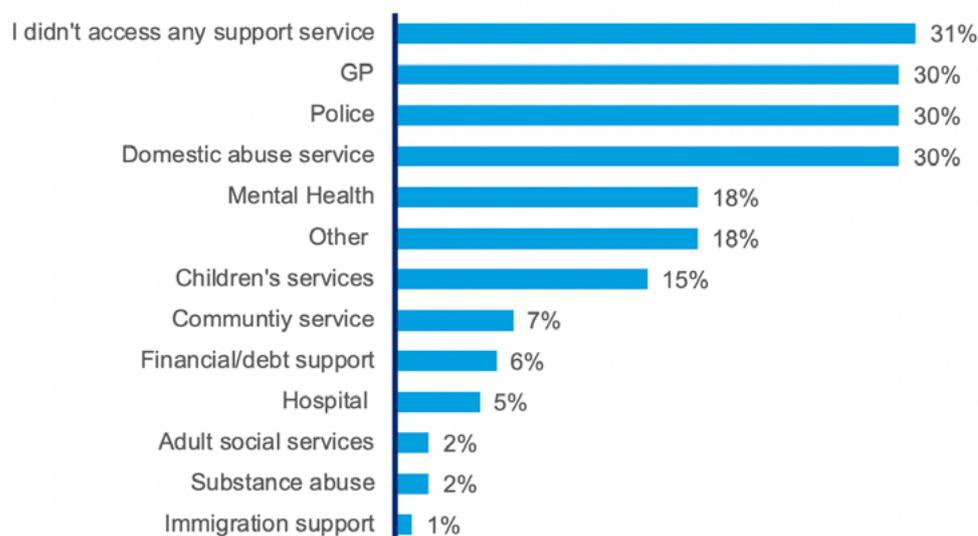
Of the 18% of survivors who recorded the 'Other' option most noted they accessed counselling in a private capacity (n=15), went to family/friend (n=7), or a health visitor/midwife (n=6). Others accessed services such as Women's Aid, refuge, housing services or Victim Support. Some spoke to a work or University support service, Samaritan's or a church member. Several survivors highlighted that they only accessed a service after the relationship had ended, saying they were fearful or ashamed of accessing support or, that services failed to recognise the abuse/they weren't believed.

The importance of wider agency professionals understanding and recognising the signs of psychological violence is evident from survivors. This seems especially pertinent for health professionals. Throughout the survey, interviews and focus groups many talked about reaching out to a GP or other health/caring professional, because they were unhappy or had physical symptoms such as migraines or weight loss, not linking the negative health or wellbeing effects to psychological violence:

> **"The deeper the abuse went, and it was very psychological – I didn't have scars as such, you know…so, for me, I started losing rapidly weight…just from the stress of it, just being ill. And it was through the GP that she said to me…you're living in domestic violence'. I couldn't even fathom that, you know? 'No, no-no…and then, she put the seed into my mind, and I was thinking 'Ok, if I go with… if I accept what she says, then things make sense' because I was very confused"**
> Survivor

Some survivors emphasised the importance of teachers being trained to spot the signs of psychological violence, and highlighted schools as a place where specialists could go in to talk to pupils and parents, including fathers, about appropriate behaviours.

Many survivors stressed that to prevent future abuse a focus needs to be put on boys and men. Some felt there is limited justice and reprisal for abusers of psychological violence. Others described a need for awareness-raising to centre on the abuser, as well as societal change in cultural patterns of behaviour to break down gender stereotypes and accepted gendered behaviours:

> **"We socialise girls and boys differently. I hope – and it's my sincere desire – that this is less and less so…we socialise them differently. We socialise the boy to be a leader, and if the girl is the same, she's 'aggressive', she's 'bossy'. So, there is this sort of sub-text underneath – underneath it all, you know"**
> Survivor

Section 6: How European legislation is protecting people experiencing psychological violence

Key findings

- European legislation is failing to protect victims experiencing psychological violence due to a lack of training and recognition in professionals resulting in relevant laws not being used.

- Legislation was acknowledged as important in successfully raising the profile of psychological violence.

- Respondents without legislation in their country thought regulation would make a difference in protecting victims as this would recognise psychological violence as a form of abuse and hold perpetrators to account.

- The burden of proof is being put onto victims and survivors to evidence psychological violence.

- Children are often being used in the court process to continue abuse and maintain control.

- Lack of education and gender biased attitudes in judiciary result in victim blaming and psychologically abusive behaviours being normalised.

How European legislation is protecting people experiencing psychological violence: What Practitioners and European partners told us

Overall, most practitioners (89%) said there was legislation in their country that recognises psychological violence. A lower proportion of practitioners from non-UK European countries (64%) and European partners (62%) noted the acknowledgement of psychological violence in legislation.[xxxiv] However, some respondents noted that even where there is legislation, it does not go far enough.

Of the 415 practitioners who said 'yes' there is legislation in their country, under half (46%) thought the legislation made a difference in protecting victims of 'psychological violence'. From the eight non-UK European practitioners and 17 European partners that answered 'yes' to this question, only 1 and 7 respectively felt legislation had made a difference in protecting victims. A high proportion (90%) of practitioners[xxxv] and 100% of European partners[xxxvi] who said there was no legislation in their country thought regulation would make a difference in protecting victims.

Why legislation is not helping to protect victims

Respondents drew attention to the fact that having legislation in place does not automatically protect victims of psychological violence.   43% of comments (n=198) explaining why legislation has not made a difference felt it was due to a lack of awareness and understanding of the issue across professionals. All but 4 of these comments were from practitioners in the UK who, since 2015 in England and Wales, have had a comprehensive law covering coercive and controlling behaviours (including aspects of psychological violence). They highlighted the lack of knowledge of the law as a key issue to why a small number of charges were being made under the legislation:

> **"Legislation is one thing, to understanding and act appropriately is another. We are not offering victims a consistently proactive service when they come forward to report psychological abuse. Policing of the whole issue of abuses is ineffective and inconsistent in many areas"**
> Practitioner, UK

A quarter of comments (25%) noted there are a lack of convictions due to the burden of proof being put onto the victim to evidence psychological violence, and the difficulty of demonstrating this form of abuse:

> **"In my experience working with women victims, lawyers uniformly impress on clients that if they don't have physical wounds or very specific evidence (i.e. testimony from a neighbour) of severe psychological abuse, pressing charges will not result in anything for them, and their cases will be**

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xxxiv   UK practitioners n=459; Non-UK European practitioners n=14; European partners n=29

xxxv   n=51

xxxvi   n=11

dismissed. Therefore, the latest laws on the subject (July 2010), though on the books, have not made an impact on the courts according to my limited knowledge"
Practitioner, France

"In my experience when women report psychological abuse to the police it never gets anywhere as the Crown Prosecution Service won't prosecute without evidence. We set up our domestic abuse community support service in June 2015 and as far as I'm aware none of our clients have made it to court when they have reported psychological abuse (over 200 clients to give you an idea of numbers)"
Practitioner, UK

Some comments (14%), all from UK practitioners, specifically mentioned the lack of convictions feeling the recent coercive control law is rarely utilised and/or rarely leads to a conviction. Several emphasised the deficiency in investigation and, again the continued focus of police on physical acts of violence to prove a conviction:

"I am a domestic abuse perpetrator specialist who delivers [a perpetrator] programme to men who have been abusive to their partners. The coercive and controlling behaviour law came into place in 2015 and to date I have not seen any service users come through for this form of abuse which indicates that it hasn't made a difference in protecting victims"
Practitioner, UK

European partners also noted the focus of police on physical violence and how gendered stereotypes hinders recognition in professionals and victims themselves:

"Police officers find it difficult to identify a victim of psychological violence if there is not any evidence or threats of physical violence. More training is needed. Stereotypes on gender roles and gender inequality still exist and prevent some victims from acknowledging the situation"
European partner, Republic of Cyprus

Some European respondents made particular note of conservative attitudes in professionals preventing recognition, and placing blame on the victim:

"One issue that is extremely worrying in my country is the lack of investment in educating judges. When we go through the minutes of judiciary decisions involving abuse and more specifically psychological violence, judges tend to reproduce a very conservative gender biased culture that naturalises some behaviour, especially when the abuser is a man, and tends to put the burden of the guilt on the woman's side"
European partner, Portugal

Practitioners also noted that due to cuts and understaffing women are being left supported. Others pointed out the legislation is still too new to tell if it has made any effective difference. Some highlighted that despite legislation, victims are still fearful of reporting and for some perpetrators who are financially secure or work in a professional role have the means to use legal loopholes or control agencies. One practitioner felt a focus on education and awareness would do more to protect against future victims than further legislation.

Why legislation is helping to protect victims

Comments (n=142) from practitioners who believe legislation is helping to protect victims mostly noted how it has raised the profile of psychological violence (24%).

> **"It has helped victims to recognise abusive behaviour that is non-physically violent and helps victims to recognise that they are validated in their fears and feelings and feel they have a right to support"**
> Practitioner, UK

Throughout most comments, practitioners recognised there were still improvements to be made and, more to be done to increase convictions from the law. However, if legislation is understood and used appropriately it can have a positive effect on the safety of victims. Nearly a quarter of comments (23%) felt the legislation was a step in the right direction. Linked to a 'step in the right direction', some comments focused on the advances due to this abuse being recognised as a criminal offence (18%).

> **"Recent legislation concerning coercive control has seen a number of convictions and safety measures being put in place such as non-molestation orders and restraining orders"**
> Practitioner, UK

> **"I feel it has only made a small difference. There have been people charged with and convicted of coercive control, but it is so difficult to evidence. If the Police had more powers and the courts took into account more the impact a crime has had on a victim (and could use this as evidence) this may make things a little easier"**
> Practitioner, UK

Other comments highlighted how the legislation has validated the victim's experience, giving the realisation that non-physical abuse is a crime, not to be tolerated (16%). Some stressed how legislation recognising psychological violence aids in protecting the victim and enables legal orders to be obtained (11%), and a few comments noted an increase in prosecutions is being seen (8%).

> **"It has given victims more confidence that what they experience is wrong, but because it's so difficult to evidence and there's not enough recognition services and procedures need to catch up with legislation changes"**
> Practitioner, UK

European partners who recorded they did not have legislation in their countries believed it is necessary to reduce normalisation of this form of abuse, recognise the seriousness and hold perpetrators accountable for their actions:

> **"Without legislation, the perpetrators of psychological violence are not held responsible for their actions. Perpetrators know this! Without this legislation we uphold the common myth that 'if there is no physical violence' then it isn't abuse. Psychological violence is often very subtle, so subtle that it may not be recognised for what it is. Education, training and public awareness raising will be required if it is to be punished"**
> European partner, Ireland

How European legislation is protecting people experiencing psychological violence: What survivors told us

Survivors are highlighting that legislation is not protecting them, or their children, from experiencing psychological violence with some feeling legal institutions allowed the control and abuse to continue, or are incapable of gaining prosecutions against psychological violence:

> **"The abuse has continued in the 4yrs since I ended the relationship, in total it's now almost 8yrs of continuous abuse…the authorities that are helping me and my child are powerless to stop him, he is very clever in what he does and how he does it, I still cannot get a prosecution…I am desperate for it to stop, my life has changed forever and I don't know who I am or what I am supposed to be anymore, I truly think my ex-partner wants me to be dead and for my death to be suicide so he can escape blame"**
> Survivor

Some survivors pointed out the difficulties and frustration in trying to prove non-physical abuse to police and judiciary as there was no physical evidence, feeling they would not be believed due to this and the manipulation of services by the perpetrator. A few noted how they 'wish they'd been hit' to have something tangible as verification:

> **"Also evidencing non-physical abuse with police and courts was beyond frustrating, it was incredibly difficult to prove"**
> Survivor

Nearly three-quarters (73%) of survivors said perpetrators used child contact to continue the abuse. Accounts from survivors show they felt family courts, child maintenance services and Cafcass[xxxvii] allows abuse to continue, and generally felt let down by services who appear powerless to do anything. Survivors note the impact of this on their children, who too continue to be manipulated and abused causing negative impacts to their welfare.

> **"Two years after ending my 23-year marriage this abuse continues for me. The use of our children to control and manipulate me has only escalated, leaving them as collateral damage in his attempts to keep control over me"**
> Survivor

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xxxvii   The Children and Family Court Advisory and Support Service is a non-departmental public body in the UK set up to promote the welfare of children and families involved in family court.

Chapter 5

Conclusions and recommendations

5.1 Conclusions

The term 'psychological violence' is not collectively understood and needs clarification to support earlier identification

This research project confirms that psychological violence is not a term that is universally defined or understood across global, regional or national legislation. Its definition in the Istanbul Convention as *'seriously impairing a person's psychological integrity through coercion or threats'* leaves its meaning open to interpretation. As coercion or threats' can be carried out in both physical and non-physical ways, the current definition focuses on the psychological impact to the victim but does not clearly specify psychological violence as a distinctive form of abuse. Further, as psychological violence involves coercive and controlling behaviours there may be confusion that it is the equivalent of Stark's framework of 'coercive control' which involves multiple forms of violence to isolate, entrap and keep a person under constant fear.

The term is unclear and contradictory to UK practitioners and survivors as the word 'violence' is linked to physical incidents; and confirmed that in the UK, 'psychological abuse' was more likely to be used and understood. Comments from non-UK European practitioners who related the term to, either or both non-physical and physical violence, explained this was due to feeling the two forms of violence are not mutually exclusive or, relating it to the impact on the victim. This may be due to the definition seen in the Istanbul Convention. In consultation, no survivors felt the term should represent both physical and non-physical violence. More investigation is needed to clarify the meaning of the term across Europe due to the small sample from non-UK countries.

The evidence has established that the term 'psychological violence or abuse' should not be used as an overarching term to refer to all non-physical abuse. As with Millar's (1995) and Women's Aid distinction our findings point to the phrase incorporating two separate constructs; non-physical words or actions, including threats, that upset, weaken, confuse or hurt a person emotionally (emotional) and/or destabilise or confuse the certainty of the victim's thinking, judgement and reasoning (cognitive). Survivors also distinguished 'psychological' as playing with the mind and 'emotional' with feelings. Many used the word 'mental' or 'mentally' when describing their experiences. Other survivors associated the term with control, coercion, isolation, power and manipulation.

We believe that any assessment or measurement should distinguish these factors to aid more understanding of prevalence, relationship to gender, levels of risk, and impact to the victim. There appears to be a need, particularly in non-UK European Member States, for a standardised practice assessment to identify this form of abuse together with a grading of risk levels.

There is a serious gap in professionals' knowledge of psychological violence, missing opportunities to identify and support victims

The findings point to a significant lack of awareness and understanding of psychological violence across professionals which is critical for early recognition, prevention of possible escalation to physical violence, and to support victims. As previous research has shown, our study identified a belief that many professionals do not consider psychological violence to be as serious or high-risk as physical violence. Practitioners see an urgent need for training across all agencies, with guidance made mandatory to criminal justice organisations to aid victims and, enforce appropriate laws. Creating a culture of understanding across agencies would remove the fear and stigma, expressed by survivors, to approach services. Training, and encouragement of professional curiosity in health professionals is also central with survivors frequently accessing GPs with unexplained emotional or physical symptoms due to being abused psychologically.

The public profile of psychological violence needs to be raised to increase its recognition as a form of domestic violence

In addition to professional training, there is an urgent need for public awareness to be raised. Practitioners overwhelmingly agreed that there needs to be public awareness around the dynamics, pattern and covert tactics of this form of abuse to challenge the normalisation of these behaviours. Many survivors said they did not realise they were being abused until they were out of the relationship and confirmed previous survivors accounts[xxxviii] that their impression of an abused woman is one with bruises who has been physically harmed; an image that continues to be focused on in the public narrative. Additionally, accounts from survivors highlighted a need for public advertising to focus on the abuser, questioning "Do you do this?" in addition to messages focused on the victim.

Psychological violence is a common form of abuse and does not always involve physical violence

The study confirms psychological violence is commonplace and can occur in isolation of physical violence. It also appears to be a wide reaching form of violence. The profile of survivors in the survey challenges the myth that domestic violence mostly occurs in lower socio-economic groups. Survivors comprised a wide range of educational levels and the majority of their partners were in professional, senior and middle management occupations at the time of the abusive relationship. As with Outlaw's (2009) research, our findings suggest that psychological violence is experienced on a regular basis by survivors but, does

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xxxviii   http://www.healthtalk.org/peoples-experiences/domestic-violence-abuse/womens-experiences-domestic-violence-and-abuse/recognising-domestic-violence-and-abuse

not always involve physical violence. The project concurs with Paulino (2016) with findings suggesting that physical intimidation and/or violence is used when an abuser needs to regain control in the relationship. The report supports recent studies by Woodlock (2017) and Snook et al (2017) that use of technology is increasing as a tool to control and abuse victims.

Psychological violence involves a pattern and causes harm silently with a wide range of insidious tactics

The research shows psychological violence involves a notable pattern of abuse and the use of a wide variety of insidious tactics, making it extremely difficult to recognise. The findings concur with work by Wiener (2017) that psychologically abusive relationships involve an intense 'grooming' period. This is followed by a slow change of character with controlling behaviours often masked as protection or love and, abusive acts hidden in gendered put-downs. The data indicates abusers frequently use psychological tactics such as 'dosing' or 'hoovering' returning to periods of romance and caring at crisis points. Emotional manipulation can escalate to threats from abusers to harm themselves or others. As with work by Fontes (2015) and Pauncz (2014), we found that psychological violence can be produced in many covert ways. Frequently reported was 'projecting blame', 'silent treatment and withdrawing', 'suggestions of mental instability and gaslighting' and defining the victim's reality.

Psychological violence should be prioritised as equally as physical violence as it causes severe, long-term harm to victims

Psychological violence needs to be prioritised as urgently as physical forms of violence. Our findings support the research literature in showing how psychological violence can have devastating impacts on a victim's emotional and physical wellbeing not only when experiencing the abuse, but long-term, affecting numerous other areas of their life and reducing their ability to partake in society. The evidence indicates that psychological violence alone may produce chronic fear and hypervigilance, without other forms of abuse seen in coercive control, resulting in poorer emotional and physical health. It has been shown there are considerable gaps in support for victims around long-term therapeutic care with specialists who understand the dynamics of domestic violence.

Children are the hidden victims of psychological violence often being used as 'tools of abuse'

This form of abuse impacts significantly on children in families where there is psychological violence. The evidence indicates that children, even from a young age, can be impacted physically, emotionally and developmentally. We concur with past research e.g. Katz (2016) that perpetrators who abuse psychologically are using children as tools of abuse. Our findings confirm children are used to threaten and control victims, and to continue the abuse often through the family court system. There is also a need specialist therapeutic support for the children of psychological violence.

There is a need for societal change, with a focus on children and young people, to challenge the normalisation of psychological violence

The project identifies the importance of driving societal change, to challenge accepted social and cultural patterns and the normalisation of psychological violence, especially to children and young people, for prevention and early identification of these behaviours, in subsequent generations. Survivors spoke of early preventive measures, such as changing social and cultural patterns of behaviour of women and men, and measures to involve all of society - including men and boys - in achieving gender equality and prevention of violence against women.

Legislation is failing to protect victims of psychological violence

The evidence indicates legislation is not protecting victims due to a lack of awareness and understanding in professionals with the burden of proof being put onto the victim to evidence a form of abuse that is extremely difficult to explain. Legislation can send an important message that this form of violence is unacceptable, however, it will only succeed in protecting victims and holding perpetrators to account if professionals are adequately trained; and judiciary systems are rid of gender-based biases that see these behaviours as normal in society. This is compounded by a serious need for European legislation to be regulated, specifically in intimate partner relationships and to reflect the individual acts that constitute psychological violence.

Psychological violence needs to be addressed at multiple levels; politically, professionally, publicly and culturally, to support victims and prevent the ongoing perpetration of this prevalent, deceptive and extremely harmful form of domestic violence.

5.2 Recommendations

5.2.1 Recommendations for the Oak Foundation

1. As the term 'psychological violence' is set in the Istanbul Convention, we recommend working with the Council of Europe to promote the use of a well-defined and standardised definition associated with the term to assist with earlier recognition until further investigation can be carried out across Europe. We advocate the following description, which incorporates the words used and recognised by survivors, acknowledging, in some countries (e.g. UK) the word 'abuse' should replace 'violence' to avoid theoretical confusion:

    Psychological Violence (Abuse) involves the regular and deliberate use of:

    "A range of words and non-physical actions used with the purpose to manipulate, hurt, weaken or frighten a person mentally and emotionally; and/or distort, confuse or influence a person's thoughts and actions within their everyday lives, changing their sense of self and harming their wellbeing"

2. Commission research into the understanding of the term 'psychological violence' across a wider European context.

3. Develop a toolkit around psychological violence that can be circulated to professionals across wider agencies in several key languages.

4. Create promotional materials for distribution exposing the dynamics of psychological violence – with a focus on the abuser, as well as the victim. Enlighten people to the risks – e.g. its relation to suicide and self-harm; its impact on pregnant women; its impact on children.

5. Use the Oak Foundation's social media outlets to disseminate key statistics and information provided from the report to generate discussion and distribute knowledge.

6. Work with partners to ensure any training platforms, such as the Council of Europe's online course for legal professionals, includes information on psychological violence.

7. Commission the development of a practice assessment tool that identifies and assesses the risk of psychological violence and provides guidance on responding to victims and perpetrators of this form of abuse.

8. Commission research into the emotional and cognitive elements of psychological violence to gain understanding of these factors on prevalence, relationship to gender, levels of risk, and impact to the victim.

9. Commission research on the profile of perpetrators who commit this form of abuse to understand, prevent and improve the response to psychological violence, breaking the cycle for future generations.

10. Commission research considering the dynamics of psychological violence within different groups and explore how intersectionality shapes people's experiences of this form of abuse and access to resources.

11. Commission follow-up research to gain a better understanding of how laws around psychological violence are being used across Europe.

12. Advocate for more complete and comparable data, at national and European levels, on psychological violence, to evidence the scale of the abuse and ensure policy decisions accurately reflect victims' experiences and needs.

5.2.2 Recommendations for the European Commission

1. Ensure Member States across Europe have specific legislation to address psychological violence in intimate partner relationships and a coordinated criminal offence.

2. Ensure legislation is supported with mandatory training of police and wider criminal justice professionals on psychological violence to provide knowledge and understanding to utilise the regulation.

3. Set up a robust standardised framework across Member States for the monitoring of prosecutions and convictions for psychological violence to assess implementation and survivors' experiences of prosecution.

4. Deliver national educational programmes to children and young people on healthy intimate relationships and how to recognise abusive behaviours.

5.2.3 Recommendations for local Commissioners

1. Sponsor public awareness raising campaigns which draw attention to the dynamics and risks of psychological violence; and challenge the normalisation of psychologically abusive behaviours.

2. Guarantee funding for local specialist, long-term therapeutic support for victims and children of psychological violence.

3. Allocate funding to those who work with vulnerable boys and young males (e.g. social workers, youth projects, juvenile probation) to provide a coordinated response to educate and support them to conduct healthy relationship behaviours.

5.2.4 Recommendations for domestic violence services and other specialist services

1. Display promotional material in services on psychological violence with information on where to get advice and support.

2. Develop forums in domestic violence services for survivors to offer peer- to-peer support and use their voices to influence national action plans, and local strategies to target community-wide awareness raising around psychological violence.

3. Develop materials around how technology is used to control and manipulate, to raise awareness. Provide information on how to stay safe online and advice in how to deal with online abuse.

4. Specialist services should work together to offer mutual development opportunities such as arranging reciprocal training and awareness raising.

5. Health professionals should seek training on psychological violence in intimate relationships and practice professional curiosity, so they 'ask the question' in a respectful way with patients that have unexplained psychological or physical symptoms.

6. Specialist services working with young people should offer educational workshops to challenge the normalisation of psychologically abusive behaviours in relationships; working particularly with young people who harm at the earliest opportunity.

7. Ensure data collection gathers the different forms of non-physical violence separately so the prevalence of psychological violence can be evidenced.

"I felt so confused about what was right and wrong behaviour and just kept thinking 'if I try doing this or saying this' then it'll be different...he charmed me completely...what was so disconcerting was he knew how to behave as when we had friends round he was gregarious and polite, and all unpleasantness was aimed solely at me between times. I used to wish he'd hit me so that I'd have something tangible to show and a reason"
Survivor

Appendix A

Methodology

Data was collected through mixed methods to gain a deeper, broader understanding of the phenomenon and assisting with knowledge creation.

Phase 1: Desktop review of literature

The desktop review included searches of European, United Kingdom (UK) and United States (US) academic research, grey literature (including policy) and practice definitions. Various search terms were used that frequently have commonality with psychological violence including psychological abuse, emotional abuse, mental abuse, and verbal abuse. Additionally, legislation currently in place across Europe to support and protect victims of psychological violence was also examined.

Phase 2: Surveys

Using information from the desktop review, three survey questionnaires were developed for practitioners (those who work directly with victims of domestic violence); European partners (those who work in the domestic violence sector but not directly with victims); and survivors to investigate matters brought up in the literature. Each survey included several open and closed ended questions. Practitioner and partner surveys were distributed to countries that are member states of the Council of Europe. Google translate was used to produce a covering email explaining the research and to highlight that the survey was only available in English. Google translate was not used for the survey to ensure there were no errors in interpretation. Surveys to survivors were only distributed to those based in the UK.

1. Practitioner survey

As the project funders stated they were using the term 'psychological violence' to refer to all forms of non-physical abuse this was stated in the introduction and survey questions were approached from this stance. The survey included questions that reflected the five research questions. Different forms of non-physical abuse were assessed by the indicators seen in Box 1. Data was collected through a snowball sampling method via distribution on SafeLives social media, personal contacts of the organisation and contacting domestic violence services across member states in the Council of Europe.

2. European partner survey

The European partner survey was a shortened version of the practitioner survey. This survey was added to the data collection to try to increase the response rate from non-UK European countries. Several questions relating to direct work with victims were removed. Data was collected through a snowball sampling method via personal contacts of the organisation and contacting Universities within non-UK member states of the Council of Europe.

3. Survivor survey

The survivor survey included questions to help scope and understand the frequency and dynamics of non-physical abuse, as well as amplify the voice of survivors. Different forms of non-physical abuse were assessed by the indicators seen in Box 2. Data was collected through a snowball sampling method via distribution on SafeLives social media.

Box 1: Practitioner survey - Do victims routinely report the following kinds of abuses when they speak to you about domestic violence?

Psychological

- Verbal insults, humiliates, criticises, belittles
- Verbal threats to harm victim/family/pets, frequent swearing/shouting
- Tells person they are imagining something, discounts feelings, blatant lying, accuses of infidelity, suggests mental instability, gives mixed messages
- Threats to 'out' sexuality, immigration status
- Determines rules of personal appearance, clothes, home, child-rearing, communication/socialisation with others, monopolises time

Stalking & harassment

- Asks about/checks use of emails/social media/phone calls, watches/follows/spies
- Frequent communication when out socially, or in work

Economic/Financial

- Restricts access to finances, jeopardises means of being financially independent
- Stealing or defrauding goods and/or property, running up debt in their name

Sexual Coercion

- Pressures to perform unwanted sexual behaviours, or have unwanted sex

Box 2: Survivors - Please tell us, to the nearest point available, when in your relationship you experienced any of the following behaviours.

Psychological
- Verbal insults, humiliation, criticism, putdowns
- Suggested you were mentally unstable, gave you mixed messages, made you doubt your own thinking, denied a previous admission
- Excessive jealousy, accused of infidelity, made to feel guilty, partner stopped affection
- Frequently shouted or swore at you, verbally threatened to harm you/your family/your pets
- Given the 'silent' treatment, discounted your feelings
- Told how to dress, run the home, raise the children
- Controlled who you could speak to, meet socially, spend time with

Stalking & harassment
- Frequently asked about your use of emails/social media/phone calls or checked, followed or spied on you
- Partner frequently/repeatedly contacted you when out socially, or in work

Economic/Financial
- Restricted your access to finances, insisted you stop working
- Stole money from you, run up debts in your name, defrauded you of property
- Damaged your personal possessions or property

Sexual Coercion
- Pressured you to have sex, or take part in unwanted sexual behaviours

Physical intimidation
- Physically pushed you, raised a fist to you

Technology
- Used technology (e.g. social media, tracking devices) to abuse/harass/stalk you
- Threatened to, or actually posted intimate photos/videos on social media

Strangulation/smothering
- Applied pressure to your neck or smothered you

Actual Bodily Harm (ABH)
- Physically assaulted you causing bruising and/or cuts

Grievous Bodily Harm (GBH)
- Physically assaulted you causing broken bones or serious injury

Phase 3: Interviews

Six semi-structured one-to-one interviews were carried out with five female survivors and one male survivor.   The questions in the interview schedule (See Box 3) were organised to explore the pattern of the relationship from beginning to end, and the meaning of psychological violence to survivors.

Box 3: Interview Schedule

Q1: Can you tell me a bit about you and what your life was like immediately before you met your partner?

Q2: Can you tell me about when you first met your partner and what your relationship was like at the start?

Q3: When did you see your partner's behaviour change?
Prompt: What happened?

Q4: Can you describe how the relationship progressed, and the types of behaviour you experienced?
Prompt: Were there times when the abusive behaviour got worse?
Prompt: Have you ever experienced any physical aggression or abuse?

Q5: How did you start to realise what you experienced was abuse?
Prompt: What types of behaviours did/didn't you see as abusive?
Prompt: Did you talk to anyone about what you were experiencing?

Q6: Has the relationship now ended? [**YES,** go to Q7] [**NO**, go to Q8]

Q7: How long did the relationship last?
Prompt: Can you talk about how the relationship came to an end?
Prompt: Did you seek help from any professionals?

Q8: How long have you been in the relationship?
Prompt: How is the relationship now?
Prompt: Have you considered seeking help from any professionals?

Q9: How has the relationship impacted on you, and your life?
Prompt: Any children, family

Q10: Would you use the term 'Psychological Violence' to describe what you experienced?
Prompt: What does the term mean to you?
Prompt: Is there a term you would use to describe what you experienced?

Q11: Would you like to add anything else about your experience that we haven't mentioned?

Phase 4: Focus groups

Four focus groups were held in domestic violence services.   Each focus group included between 5 and 13 survivors. One focus group was held with BME survivors with some participants communicating through an interpreter. Survivors across the 4 focus groups ranged from mid 20s to late 70s in age. Vignettes (See Box 4 and 5) were used in the focus groups for two purposes; firstly, as a way of developing rapport and making survivors feel at ease[202] and secondly, as potentially sensitive topics were being explored that survivors might otherwise find difficult to discuss.[203] As commenting on a story is less personal than talking about direct experience, it is often viewed by participants as being less threatening. Vignettes also provide the opportunity for participants to have greater control over the interaction by enabling them to determine at what stage, if at all, they introduce their own experiences to illuminate their abstract responses. The vignette used with the BME survivors was adapted slightly to reflect cultural issues.[204]

Box 4: BME focus group

Mira and Dev met through family while Dev was travelling in India. Dev proposed very quickly, and Mira got a spousal visa to marry in the UK. Dev was charming, romantic and wanted to care for and protect Mira. After they were married, Dev began to complain that Mira was not being a good enough wife. He would insult her and criticise the way she cooked and maintained the home and would insist on things being to his standard. Mira tried to do things better to please him, but it never seemed to work. Dev told her she made him angry, and she could tell when he wasn't pleased just by the way he looked at her. Mira thought it must be her because when they were in the community, Dev was charming and attentive again, and they were a happy couple. After Mira got pregnant, Dev told her she should forget about trying to get a job. As the man, he controlled the money and the household. Mira got upset and complained when Dev told her she was useless as a mother. Dev got angry and threw objects at the wall, pushed Mira and raised his fist to her. Afterwards, he told her it was her fault, he provided her with everything, she would have nothing without him and warned her she was only in the country because of him. Dev told Mira they should have another child and although Mira wasn't ready for this, he told her it was her duty. After Mira had their 2nd child, Dev started teasing Mira about her weight and commenting on everything she ate. When she got upset, he told her she was overreacting and that it was just a joke.

Box 5: Focus group

Rachel and David met through family friends. David was charming, romantic and wanted to spend all their time together. They moved in together soon after they met and within a year were married. After they were married, David began to insult Rachel about the way she dressed and looked and criticised the way she cooked and did things around the home. He would insist on things being to his standard. Rachel tried to do things better to please him, but it never seemed to work. David told her she made him angry, and she could tell when he wasn't pleased just by the way he looked at her. Rachel thought it must be her because when they were with friends, David was charming and attentive again, and they were a happy couple. After Rachel got pregnant, David persuaded her to give up her job. He controlled the money and the household. Rachel got upset and complained when David told her she was useless as a mother. David got angry and threw objects at the wall, pushed Rachel and raised his fist to her. Afterwards, he told her it was her fault, he provided her with everything and she would have nothing without him. David told Rachel they should have another child and although Rachel wasn't ready for this, he sulked and made her feel guilty. After Rachel had their 2nd child, David started teasing Rachel about her weight and commenting on everything she ate. When she got upset, he told her she was overreacting and that it was just a joke.

Analysis

Descriptive statistics and content analysis were carried out on survey responses. Thematic analysis was carried out on the transcribed data from interviews and focus groups. Transcripts were read several times and during this process initial thoughts and ideas were noted down. Initial codes relevant to the research questions were identified and incorporated into sub-themes and final themes as suggested by Braun and Clarke (2006).[205] Each final theme was defined and named to give a clear indication of the essence of the theme and accompanied extracts that clearly identified issues within the theme presenting a logical example of the point being made.

Ethical considerations

We have consent from all participants of the surveys, interviews and focus groups to share their stories. All participants gave informed consent and had their rights explained to them by the focus group facilitator or the interviewer. All responses have been anonymised and participants will not be able to be identified by their responses. Participants were given the opportunity to withdraw their consent at any time during the focus groups/interviews, and up to 2 weeks after the session.

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