



**Research into the experience of intimate partner abuse perpetration
and victimisation within the bisexual population.**

By

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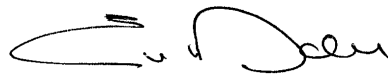
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ABSTRACT

Bisexual individuals—people who identify themselves as bisexual—have the highest reported rate of Intimate Partner Abuse (IPA) victimisation, yet little sociological research has been done to study this phenomenon. This PhD research was designed to address this research gap through a survey of bisexual individuals who had experienced IPA.

Given that bisexuals are stigmatised by the heterosexual and Lesbian, Gay, Trans + (LGT+) communities, a specialised mixed-methods survey was designed. As bisexuals are reluctant to disclose their bisexuality, snowball sampling was used to recruit participants through trusted networks. The survey gathered data from a broad, geographically dispersed, and demographic range of participants in the U.S. using a questionnaire and in-person interviews. This allowed the participants to discuss their experiences with IPA and share their demographic information. Thematic analysis was applied to the transcribed interviews to highlight emerging and recurring themes.

Key findings indicated that much IPA is related directly to the victim's bisexuality, driven by jealousy (fear of infidelity) and manifested through a need to have power over and control of the victim. Evidence emerged among the participants of experiencing extensive and intensive abuse, particularly sexual abuse, as children and adults. Other findings found that many participants believed that an absence of physical violence equated with a denial of abuse, a lack of understanding of what comprises IPA and that IPA is a distinctly heterosexual issue. Another result was that the main physically violent perpetrators were male but not exclusively so; females were reported as more psychologically abusive. In seeking help, participants found it more helpful and expedient to do so under different gender identities.

This research highlights the urgent need for the recognition of bisexual IPA both within and outside the bisexual community. It advocates for the development of support services that cater to their unique needs, particularly around education on what comprises IPA and how it relates to bisexual individuals. To that end, this researcher developed a new educational model, *Towards Prevention*, designed to simplify understanding of the abuse process and

make it accessible to people across a broad range of educational levels and language skills (see Appendix O).

TABLE OF CONTENTS

	<u>Page number</u>
1. Declaration Form	1
2. Abstract	2 - 3
3. Table of Contents	4 - 5
4. Acknowledgements	6
5. List of tables and figures	7 - 8
6. Chapter 1: Definitions and terminology used in this thesis	9 - 19
7. Chapter 2: Introduction: The context for the research	20 - 48
8. Chapter 3: Theories informing this research	49 - 67
9. Chapter 4: Bisexuality	68 - 107
10. Chapter 5: Intimate Partner Abuse	108 - 150
11. Chapter 6: Methodology	151 - 157
12. Chapter 7: Methods	158 - 186
13. Chapter 8: Research findings 1/Questionnaire analysis and results	187 - 229
14. Chapter 9: Research findings 2/ Survey interview results	230 - 267
15. Chapter 10: Research findings 3/ IPA perpetrator data	268 - 272
16. Chapter 11: Research findings 4/ New knowledge and data summary	273 - 277
17. Chapter 12: Discussion	278 - 304
18. Chapter 13: Conclusion	305 - 312
19. Bibliography	313 - 376
20. Appendix (sections see next page)	378 - 504

APPENDIX

<u>Appendix</u>	<u>Page numbers</u>
A. Glossary and Terminology	378 - 425
B. Participant Contact/Correspondence Letter	426 - 428
C. Participant Survey Information sheet (including researcher bio)	429 - 433
D. Participant Data Management	434 - 436
E. Information about Intimate partner abuse	437 - 439
F. Participant consent form	440 - 442
G. Post-interview support information (Therapist and helplines)	443 - 444
H. Participant questionnaire and interview framework	445 - 455
I. Participant participation codes	456 - 459
J. Addendum: Gaslighting and coercive control overview for participants	460 - 464
K. Good Practice Guidelines for Research/Writing on Bisexuality (Barker et al., 2019). https://doi.org/10.1080/15299716.2012.702618	465 – 468
L. Danger Assessment (Campbell, 2004) https://pmc.ncbi.nlm.nih.gov/articles/PMC7878014/	469
M. Prominent theories of IPA from researchers and psychologists	470 - 473
N. A Review of Interview Notes, Observations, and Conversations	474 - 484
O. Towards Prevention – A New Educational Model	485 - 503
P. Researcher publications. ‘Killing you softly.’	504
Q. Research publications too large to attach to this report. <u>The Bisexuality Report</u> . Bisexual inclusion in LGBT equality and diversity (Barker et al., 2012) https://bicomcommunitynews.co.uk/wp-content/uploads/2020/05/TheBisexualityReportFeb2012-1.pdf <u>Bisexual Invisibility: Impacts and Recommendations</u> (Lindasusan, 2011) https://phimc.org/wp-content/uploads/2018/08/Bisexual-Invisibility-Impacts-and-Recommendations.pdf	

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To Julia (November 8, 1911 – December 17, 1996).

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TABLES AND FIGURES

	<u>Page number</u>
Figure 1. LGBTQ+ identity among U.S. adults	81
Figure 2. Types of abuse	113
Figure 3. Emotional abuse is an integral part of all abuse	114
Figure 4. Abuse types are rarely experienced on their own	114
Figure 5. Femicides	115
Figure 6. Bisexuals have the highest rate of violent IPA victimisation	120
Figure 7. Lifetime estimate of intimate partner violence by sex and type	121
Figure 8. Perpetrator Choices	133
Figure 9. Theory of planned behaviour	135
Figure 10. Perpetrator manipulations	140
Figure 11. The cycle of abuse	145
Figure 12. Lifetime prevalence of rape, physical abuse, and/or stalking	155
Figure 13. Need for bisexual IPA research Protocols	159
Figure 14: Bisexuals are less likely to be 'out'	180
Figure 15. Percentage of adults who identify as lesbian, gay or bisexual	181
 <u>Research Findings charts (Fig. 17 – 53)</u>	
Figure 16. Gender	188
Figure 17. Gender Match	189
Figure 18. Sexual Orientation	190
Figure 19. Age	191
Figure 20. Ethnicity	192
Figure 21. Countries Of Origin	193
Figure 22. Education level	194
Figure 23. Employment	195
Figure 24. Children	196
Figure 25. Number of Children	197
Figure 26. Children's Parent	198
Figure 27. Community	199
Figure 28. Identify as Bisexual	200
Figure 29. Current Relationship	201
Figure 30. Partner Sexuality	202

Figure 31. Current Relationship Status	204
Figure 32. Witnessed IPA	205
Figure 33. Witnessing IPA Location	206
Figure 34. Childhood Abuse	207
Figure 35. Friends experiencing IPA	208
Figure 36. Awareness of IPA in the bisexual community	209
Figure 37. IPA experience	211
Figure 38. Abuse Type Experienced	212
Figure 39. Abuse caused?	215
Figure 40. If 'yes', how?	216
Figure 41. Abuse frequency	217
Figure 42. Abuser gender	218
Figure 43. Abuser Behaviours	219
Figure 44. Prior Experience of IPA	220
Figure 45. Help-seeking	221
Figure 46. How help was sought	222
Figure 47. Help-seeking identity	223
Figure 48. Did identifying help	224
Figure 49. How did you identify?	225
Figure 50. Barriers	226
Figure 51. Barriers and Identity	227
Figure 52. Bisexual resources?	228
Figure 53. Abuse types experienced	242
Figure 54. Abuser behaviours	264
Figure 55. Research questions	305 – 306
Figure J1. Gaslighting	461
Figure O1. Power & Control Wheel	492
Figure O2. LGBT+ Power and Control Wheel	495
Figure O3. The Dynamics of Intimate Partner Abuse (IPA)	497
Figure O4. Teaching guide	500
Figure O5. Dynamics of IPA	502
Figure P1. Killing you softly. Domestic Violence Book Cover	504

1. DEFINITIONS AND TERMINOLOGY USED IN THIS THESIS

In this thesis, the term Intimate Partner Abuse (IPA) is used throughout, replacing ‘domestic violence,’ ‘domestic abuse,’ ‘batterers,’ ‘intimate partner violence,’ ‘coercive control’ (will be referred to as a verb) or any other legacy term used to describe abusive actions in an intimate relationship. The term Intimate Partner Abuse is used as it encompasses all aspects of the abusive behaviours of one partner over another. It is an inclusive term designed to address the myriad methods and instruments of implementing and maintaining abusive and controlling behaviours, of which violence is but one. A supplemental 48-page glossary of terms is included at the beginning of the Appendix.

‘Domestic violence’ vs ‘Intimate partner abuse.’

Ignorance as to what comprises domestic violence and intimate partner abuse (IPA) abounds in society, even in this digital age (Stark, 2007; Stark, 2023). It featured prominently in this thesis survey. Much of this has to do with the continuing use of inconsistent, inaccurate, and changing terminology to describe the phenomenon of the abuse of one person by another in an intimate relationship (Johnson, 2008; Daly & Bray, 2019, pp. 5-7). The legacy terms ‘domestic violence, violence, battering, same-sex domestic violence’ and other violent specific terms are exclusionary, ignoring the myriad other forms of oppression that would fall under the term ‘abuse’ (Khan, 2019; UN, 2023). While ‘domestic violence’ is a traditionally all-encompassing term, it inadvertently omits instances of abuse that are non-violent but equally harmful, such as emotional abuse, neglect, threats, and controlling behaviours (Kelly & Westmarland, 2016). Stark (as cited in Stark, 2007) agrees, reflecting early feminist research, suggesting that concentrating on physical violence distracts from the main issue (also Kelly, 1988). Stark (ibid) emphasises that the defining feature of abuse is the perpetrator's systematic behaviours and use of a range of abuse tactics, of which violence may be just one (or not used at all), specifically designed to wield power and control over the victim (ibid; Donovan & Hester, 2010; Donovan & Hester, 2014). For this reason, many individuals may not even realise they are experiencing intimate partner abuse if violence is absent, as it does not fit the stereotypical abuse label of ‘domestic violence’ (ONS, 2023; Hudson-Sharp & Metcalf, 2016). Violence may be present or absent from these abusive behaviours, or it may punctuate,

permeate, or end such relationships (Stark, 2007). It is but one instrument of abuse. 'Abuse,' on the other hand, is a term, a net, that includes all types of abuse.

This argument is made not to diminish the reality of the epidemic of male-on-female violence (Dodd, 2024; WHO, 2021) but to broaden the general understanding of what comprises abuse, a common issue of confusion (SP, 2024) highlighted in the research study in this thesis. The language used to discuss intimate partner abuse (IPA) in national studies, such as those conducted by the Office for National Statistics (ONS, 2023), often adopts a heteronormative framework. This focus on heterosexual relationships may exclude or marginalise the experiences of bisexual and LGBTQ+ individuals (Donovan & Hester, 2014). A broader understanding will also expand the concept of intimate partner abuse as an exclusively heteronormative behaviour and experience (Quinlan, 2023) to one that emphasises abuse as a power dynamic readily identifiable in the LGBTQ+ communities and other minority groups. Typically, 'domestic violence,' as supported by this thesis research into bisexual intimate partner abuse (see Findings 1, 2 and 3), is equated with extreme physical abuse, disregarding less severe physical assaults and psychological, emotional, and other non-physical forms of harm. The need, therefore, is to use a more effective label for these behaviours, one that broadens its understanding by highlighting that physical violence is one of many tools of abuse used by a perpetrator to control their victim (Stark, 2007; Dobash & Dobash, 2014; Kelly, 1988). Until recently, in seeking justice, physical violence (battering) was one of the sole prosecutable types of abuse due to the presence of proof in the form of recorded injuries (Dobash & Dobash, 2014). Intangible abuse (non-evidentiary, invisible) types (emotional, psychological, sexual) were difficult, if not impossible, to prosecute due to a lack of physical evidence other than victim testimony. Stark (2007) changed this through his book *Coercive Control: How Men Entrap Women in Personal Life*, where he highlighted that despite progress, efforts to hold perpetrators responsible and provide safety for women had reached an impasse by focusing solely on physical violence. He suggested that in doing so, we were ignoring what he described as an equally insidious and damaging form of control of women by men, which he termed 'coercive control' (ibid; Dobash & Dobash, 2014). Stark (2007; 2023) meticulously details how men employ coercive control to maintain and extend their dominance over women, not just through physical means but by systematically eroding their autonomy over time through an array of abusive tactics. Stark's (ibid) analysis reveals how this

insidious power dynamic undermines women's independence, leaving them increasingly vulnerable and trapped in the relationship. Stark's lessons are now incorporated into domestic violence court systems in many jurisdictions. In the UK, Controlling and Coercive Control became a criminal offence in 2015 under the Serious Crime Act (CPS, 2015; SCA, 2015). Stark's (2007) contribution also broadens the understanding of how intimate partner abuse can exist in the bisexual and Lesbian, Gay, Trans + (LGT+) communities by highlighting the power and control dynamic and how non-violent forms of abuse can be used outside the feminist and patriarchal model in same-sex relationships to achieve power and maintain control over a partner. Stark (2023, p.37) highlights how abuse continues or may increase after the partners separate or live apart (Kelly & Johnson, 2008; Kasperkevic, 2014). The recognition of separate living is a factor now recognised by the 2015 Serious Crime Act (CPS, 2021; DAA, 2023). Section 68 of the Act amends the Serious Crime Act 2015 to extend the offence of controlling or coercive behaviour to include situations where the victim and perpetrator do not live together. This amendment came into effect on April 5, 2023. The Domestic Abuse Act 2021 (DAA, 2021) also revised and enhanced the definitions of what constitutes IPA.

Poor understanding of abuse terminology prohibits recognition of abuse.

Many victims of abuse do not realise what they are being subjected to precisely because they are not being physically threatened or injured (Walker, 2009). The absence of violence does not reflect an absence of abuse; there is a range of abuse methods that can be just as severe and potentially life-threatening for the victim (Walker, 1979; Stark, 2007). This author believes that the term 'abuse' should be used to describe the perpetrator's behaviours, and the term 'violence' should be relegated to the toolbox of tactics that abusers use to control their victims. This 'toolbox' contains all the types of abuse a perpetrator may use to establish and maintain control over a partner, including physical, sexual, emotional, psychological abuse and coercive control and the individual abuse types that comprise these behaviours. The term 'abuse' could be supplemented by the term 'coercive control' (ibid), a vividly descriptive term for controlling behaviours that include violence. Multiple terms describing the same phenomenon—the tactics of implementing a campaign of toxic power and control from one person over another—miss out on properly communicating what abuse is, resulting in IPA going unrecognised or being confused with other behaviours (SVRI, 2022; PFP, 2024).

Sex, sexuality and gender

This section draws data provided by the American Psychological Association (APA, 2012)

Sex refers to the biological and physiological characteristics that define individuals as male, female, or intersex based on attributes like chromosomes, hormone levels, and reproductive organs.

Sexuality encompasses how individuals experience and express themselves as sexual beings, including their sexual orientation, desires, behaviours, and identities, influenced by biological, psychological, social, and cultural factors.

Sexual orientation is about whom a person is attracted to and who they feel drawn to romantically, emotionally, and sexually. It is different from gender identity. Sexual orientation refers to an individual's continuing emotional, romantic, or sexual attraction to others. It includes identities such as heterosexual, lesbian, gay, bisexual, and asexual. Gender identity is the sense of one's gender, which may or may not align with the sex ascribed at birth. It includes identities such as male, female, non-binary, and genderqueer.

Gender refers to the roles, behaviours, activities, and attributes that a given society considers appropriate for men, women, and people of other gender identities. It includes gender identity (how one perceives oneself) and gender expression (how one presents oneself to others). Unlike sex, gender is socially and culturally constructed.

Gender expression is how a person publicly expresses their gender identity through their behaviour, mannerisms, and appearance. An individual's gender expression may incorporate both feminine and masculine traits or neither. A person's gender expression may or may not match their sex recorded at birth.

Gender identity refers to an individual's internal sense of their gender, which may or may not correspond with the sex assigned at birth. This concept includes identities such as male, female, transgender, non-binary, and others, and is central to how people perceive and express themselves (Butler, 1990)

(APA, 2012; APA, 2015)

Sex is about biological characteristics. Gender is a social construction (i.e., shaped by societal influences) related to identity and social roles. Sexuality concerns sexual orientation and desires (ibid)

The concepts of gender, sex, and sexuality are complex and deeply interconnected yet distinct (Weeks, 2010). Complications arise in the (mis)understanding of the terms and their

perceived overlap. Despite their distinct meanings, the concepts can be incorrectly used interchangeably due to a lack of understanding. The concepts are also philosophically challenged. Butler (1990) questions the belief that certain gendered behaviours are 'natural,' highlighting the ways that a person's learned performance of gendered behaviour (what we commonly associate with femininity and masculinity) is a performance, one that is imposed upon us by traditional heterosexual norms. This performance is an ongoing process (Szorenyi, 2022; Butler, 1990). Richardson (2007) emphasises that societal norms frequently blur the distinctions between sex, gender, and sexuality, leading to confusion about identity and behaviour. This conflation often results in the misinterpretation of biological sex as being synonymous with gender roles and sexual orientation, thereby oversimplifying the complex nature of human identity.

Intimate Partner Abuse Defined

Given the myriad definitions available for the terms 'intimate partner abuse' and domestic violence, the following adaptation of the UN 2023 definition will be used in this thesis. Comprehensive and inclusive, it recognises the many forms of abusive behaviours (coercive control, sexual, psychological, and emotional abuse) in addition to physical violence. This makes it adaptable for use in various cultural and legal contexts. The UN's framework emphasises domestic violence as a human rights violation, highlighting its importance as a global concern. This approach fosters the creation of universal standards for effectively addressing and preventing such abuse.

Intimate Partner Abuse (IPA), also called 'domestic abuse,' 'domestic violence,' or 'intimate partner violence,' can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse may be physical (assault or threats of assault), sexual (non-consensual sexual contact or activity, including rape), emotional, intentional neglect, economic (control of finances, abuse of finances), or psychological actions or threats of actions that are designed to influence, establish, or maintain control of another person. This includes any behaviours that frighten, coerce, intimidate, terrorise, manipulate, hurt, humiliate, blame, injure, or wound someone. IPA may culminate in or be punctuated by serious physical injury or result in death. Or it may be free from violence. It can include 'honour-based violence,' female genital mutilation, and forced

marriage. Men are the primary source of recorded violence against women, although women abuse men and other women also (Fleming et al, 2015). IPA can happen to anyone of any ethnicity, age, sexuality, gender, ethnic group, or religion. It can occur within a range of relationships, including heterosexual and LGBT+ couples living or not living together, who are dating, who share children (DAA, 2021) or who have separated or divorced. IPA affects people of all socioeconomic backgrounds and education levels (adapted from UN, 2023; Stark, 2009; DAA, 2021). The UK's Domestic Abuse Act (2021), in addition to clarifying what constitutes abuse, clarified the meaning of economic and financial abuse (2021 Financial Abuse Code) as well as recognising that the threat of physical violence is an abusive act. Threats to kill another have been treated as a criminal offence since the 1981 UK Offences against the Person Act 1861 (CPS, 1861).

'Intimate partner'

This refers to both current and former spouses and dating partners. A legal definition: *'intimate partner' means, with respect to a person, the spouse of the person, a former spouse of the person, an individual who is a parent of a child of the person, and an individual who cohabitates or has cohabited with the person.* (Cornell Law, 2023). The same parameters apply to LGBT+ relationships, except that the partners may not share a living space and only meet outside of the home. This is also true of some heterosexual relationships. It may depend on the stage at which the relationship is—early dating, for example—or relationships where living together is forbidden for cultural or religious reasons.

Is the term 'intimate partner' exclusionary?

The term 'intimate' partner may be seen as exclusionary as it may suggest sexual intimacy, a feature of a relationship that may not (yet) be present or is no longer present or may never be present (Donovan & Hester, 2014; Stark, 2007). What if it is a non-sexual relationship? What then defines 'intimate?' Relationships exist on a continuum, an evolving scale from just people meeting to becoming 'partners' to a lifetime of companionship. For the sake of this thesis, 'intimate partner' remains. Wong et al. (2014, p. 329) define an intimate relationship as an *'interpersonal relationship that involves physical or emotional intimacy. Physical intimacy is characterised by romantic or passionate attachment or sexual activity.'* While the term 'abuse' is all-encompassing, the words 'intimate' and 'partner' may be exclusionary to

some who may be in a romantic relationship that they would not describe as 'intimate'—dating, early stages of relationships, non-sexual, for example. Many relegate the term 'partner' to non-heterosexual relationships, and some may regard it as a derogatory term in communities with traditional religious or ethnic values where other terms—boyfriend, girlfriend, friend—may be used (ibid). Further, the term may imply that people live together, which may or may not be the case. It also implies that they may have only one partner when they may have more than one or many.

LGBTQ+ definitions and abbreviations

To simplify the writing for the author, the following abbreviations are utilised in this thesis: The acronym 'LGBT+' is used as a broad term to refer to the LGBTQI+ communities. LGBTQI+ Intimate Partner Abuse is abbreviated to LGBT+IPA. LGT+ (absent the 'B') refers to instances where bisexuals are separately discussed. Where bisexual people are mentioned separately but in the same sentence, it is abbreviated to LG+ or LGT+.

The LGBTQ acronym stands for 'lesbian, gay, bisexual, transgender, and queer or questioning' (CNN, 2020). Sometimes, the term is expanded to LGBTQIA, which includes intersex and asexual groups. Bisexual (B+) refers to attraction to more than one gender. 'Queer' is used to describe or pertain to a sexual or gender identity that deviates from conventional notions of sexuality and gender, particularly those aligned with heterosexual norms. (Oxford, 2024). On the other hand, 'intersex' refers to individuals whose biological sex is not clearly defined due to genetic, hormonal, or biological differences. 'Asexual' describes individuals who do not experience sexual attraction. Asexuality is a sexual orientation characterised by a lack of sexual attraction to others. It encompasses a spectrum of experiences. Individuals who identify as asexual do not experience sexual attraction but can still have romantic, emotional, and affectionate relationships. Some asexual individuals may experience sexual attraction under certain circumstances. (Brotto & Milani, 2022). The '+' symbol is an inclusive representation that signifies 'and others,' encompassing people of all gender identities and sexual orientations (Broster, 2024).

The term 'gay' is often defined as 'a sexual or romantic attraction to individuals of the same sex' (Mirriam-Webster, 2020). The most prevalent labels for gay individuals are 'lesbian'

for women and 'gay' for men. However, 'gay' is often used to refer to both non-heterosexual women and men. Feminists argue that the term 'gay' is often used in a gendered way, predominantly referring to both non-heterosexual women and men, but with a bias toward men (Valentine, 1993).

Bisexual, bisexuality

Please refer to the table of contents to review a section on this subject.

Bisexual and LGT+ lack of awareness of IPA.

Bisexual and LGT+ awareness of IPA within their communities is poor (Turell & Hermann, 2008). In a survey conducted by Donovan and Hester (2014), it was found that many lesbians and gay men who witnessed their fathers abusing their mothers tended to view domestic violence as primarily physical violence specific to heterosexual relationships. Some lesbians who are involved in the anti-violence movement may be more inclined to recognise and label abusive behaviours (Riskock, 2002, p. 12). Their involvement in this movement, which frequently overlaps with feminist and LGBTQ+ activism, provides them with the necessary tools and frameworks to recognise patterns of control, coercion, and abuse that others might miss. This participation may have deepened their understanding of power dynamics, making them more perceptive to the signs of abuse. For example, Kelly (1988) recognised the need for the provision of shelters or refuges for abused women as a means of healing, protection and a means of regaining control over their lives. Conversely, gay men may have difficulty recognising domestic violence. This can be attributed to societal norms that socialise men to express anger and aggression in physical ways, leading to the perception of normalisation of such behaviours (Cruz, 2003, p. 310). It may be further reinforced by the perception that IPA is less of a male issue, leading to the denial or minimisation of their experiences. Internalised stigma, concerns about reinforcing negative stereotypes about the male gay community and the LGBTQ+ communities, and the absence of specialised support services all contribute to the under recognition of IPA among gay men (Stiles-Shields & Carroll, 2015).

This lack of awareness may be due to a misunderstanding that 'domestic violence' is a patriarchal heteronormative issue unconnected to the LGBTQ+ communities (Head, 2020). It

may also be due to a lack of adequate terminology that reflects that all these terms represent umbrella legacy labels for the toxic establishment and maintenance of power and control of one person over another. IPA is an issue that extends beyond intimate relationships and is evident in family relationships, close friendships, as well as 'intimate' partners. 'IPA' encapsulates all forms of domestic violence and abuse occurring within and beyond intimate relationships, even after separation or divorce. Head and Milton (2014) stated that their participants (n=10) preferred the use of 'abuse' to reflect their own experiences. Unlike the term 'domestic violence,' 'IPA' does not imply that the partners share a traditional 'home,' and it can include situations where a relationship might exist solely in LGBT+-friendly or public venues (Daly, 2020).

McClennen (2005) opines a contrary position, that within LGB+ circles, 'intimate partner violence (IPV)' may be the preferred term, as it distinctly labels this form of family violence from others (like those involving children, elderly or vulnerable adults and families of choice), incorporating any intimate relationship regardless of the partners' age, gender, or marital status. 'Families of choice' describes an alternative familial structure formed by LGBT+ individuals outside traditional biological or legal family units. These families are built based on mutual support, care, and emotional bonds (Weeks, Heaphy & Donovan, 2001). The lack of standardisation of terms and terminological familiarity and their adaptation to include LGBT+ and bisexual people and experiences reduces the likelihood of LGBT+ IPA recognition and, thus, the use of LGBT+ helping services.

The term 'victim.'

The term 'victim' is used in this text to describe anyone who has experienced domestic violence or IPA. Defined as '*a person harmed, injured, or killed due to a crime, accident, or other event or action*' (Oxford, 2019), the term 'victim' is not a label or derogatory term. It simply describes what is. It refers to someone who has been wronged and does not define their response to what has happened to them (Smurthwaite, 2018). This paper acknowledges the limitations of this definition. It also acknowledges how a person may choose to describe themselves. Many prefer the term 'survivor' to describe someone who has endured IPA or sexual abuse to avoid disempowering labels and to signify strength, agency and resilience (Dunn, 2005). The term describes someone who has begun, is currently in, or has completed

their healing process (Herman, 1992). From a feminist perspective, definitions, while helpful for categorising behaviour, often describe the actions of a male perpetrator rather than capturing the experience of the victim (Kelly, 1988). According to Kelly (ibid), 'naming our own experience' is a significant aspect of feminist scholarship in relation to sexual violence and language. She argued for the term 'survivor' to emphasise women's agency and resilience rather than framing them only through the lens of harm.

Feminism and the law: alternative approaches to justice.

Feminism has long debated the most effective methods of addressing gender-based injustices, whether engaging with the law is effective (IPA or IPA components such as physical abuse or rape) or if alternative approaches, such as focusing on 'social harms,' are more appropriate. Social harm refers to the idea that there are broader societal issues and inequalities that harm people beyond the confines of criminal legal definitions (Smart, 1989; Howe, 1994).

Critics of legal engagement: Smart (ibid) argues that the legal system is inherently historically patriarchal and that it is, therefore, ineffective in addressing feminist concerns and their realities of harm. Smart (1989) advocates for change and a movement from legal centrality to explore non-legal judicial strategies. Howe (1994) highlights how the legal system's remedies for harm may re-traumatise victims and thus help perpetuate systemic anti-feminist bias. Frohmann (1997) and Mertz (1992) examine how the patriarchal legal discourse and frameworks shape victimhood and victim agency concepts. Frohmann (1997) further highlights issues of prosecutorial decision-making in prosecuting cases of sexual assault and emphasises how cultural stereotypes may influence case prosecution and outcomes. Mertz (1992) discusses how existing legal language may oversimplify complex social realities and the adverse effect on feminist realities of harm. Temkin (2002) examines the legal system's treatment of sexual violence survivors, focusing on how, despite legal reforms, evidentiary standards and courtroom dynamics often disadvantage victims.

Social Harms Approach: To address the perceived limitations of legal frameworks, some feminists propose a social harm approach. This shifts the focus from legal remedies to tackling inequality's deeper, systemic societal and cultural roots. This perspective emphasises:

- **Structural Inequalities:** Recognising how intersecting factors such as class, race, gender, and economic status perpetuate harm (Hillyard et al., 2004).

- Community-Led Solutions: Advocating initiatives driven by communities and restorative justice practices and programmes rather than punitive legal responses. Proposes that these may better address the needs of those affected by harm (Daly, 2002).
- Transformative Change: Prioritising cultural and institutional reforms beyond the confines of traditional legal interventions and solutions, aiming for meaningful and systemic progress (Hudson, 2006).

Summary

We cannot recognise what we cannot see or understand. This is particularly true in discussing IPA. The importance of using clear, accurate terms to describe and recognise the concept and reality of intimate partner abuse cannot be overstated. As was reflected in the participants interviewed for this thesis, a common statement from victims of IPA is that they were unaware that what they are/were experiencing was abusive, as it did not involve violence. Why? Because of the continued use of the term 'domestic violence' to describe a multifaceted abusive behaviour that may not be 'domestic' or involve physical violence (Stark, 2007; Stark, 2023). Other reasons may include a lack of awareness, shame, the stigma surrounding IPA, denial that it could happen to them, isolation, influences from their abuse, fear of being viewed negatively, and gender stereotypes (Patrick, 2018). A common complaint from the LGBT+ communities is that IPA goes unrecognised, relegating 'domestic violence' exclusively to the heterosexual community (Donovan & Hester, 2014). Stark (2007) introduced the term 'coercive control', which makes progress towards rectifying this lack of recognition, and his revision of the understanding of IPA is now in use in many domestic violence courtrooms, sometimes replacing or supplementing the term 'domestic violence' (CPS, 2015). However, coercive control, like violence, threats, psychological abuse, etc, is not a catch-all term but a verb just as another abuse mechanism in the perpetrator's toolbox of power and control. Coercion describes an act that may be covert or overtly experienced. Stark (2007) argues that coercive control should be the umbrella term for IPA. The problem with this is that, like domestic violence, the term 'coercive control' may imply a singular behaviour—control, that may not be evident to the victim. The term 'abuse,' on the other hand, leaves little leeway for confusion, encompassing as it does the long list of abusive tactics and methods.

2. INTRODUCTION: THE CONTEXT OF THE RESEARCH

“The first rule of Bi Club is that you can talk about Bi Club all you want because most people won't believe it's real anyway.” — Lindsay King-Miller, *Ask a Queer Chick: A Guide to Sex, Love, and Life for Girls Who Dig Girls*.

This chapter outlines the rationale for researching bisexual intimate partner abuse, reviews key literature, and identifies the research gap. It also introduces the study's aims, questions, and methodological considerations.

Introduction

Intimate partner abuse (IPA) is an under-acknowledged and researched behaviour in the bisexual community (Head, 2020; Callan et al., 2021). This thesis examines the experience of bisexual IPA by reviewing past research on the subject, surveying (via questionnaire and interviews) a sample of bisexual IPA victims, analysing their experiences and, in doing so, producing new data on the subject. Why research this subject? I have had a lifelong interest in and attachment to the LGBT+ community, both personally and professionally. In my professional career as a domestic violence behavioural analyst and court-appointed investigator, I have testified on behalf of many LGBT+ parties in domestic violence courts (civil and criminal), particularly in cases involving children. Academically, my master's thesis was focused on the LGBT+ community's experience of domestic violence and how the media portrays it. I included short LGBT commentary in my two books, *Child Abuse. Prevention through Understanding* and *Killing You Softly. A guide to understanding domestic violence* (Parker Publishing/Amazon). I chose the bisexual community as a subject for this thesis due to the near total absence of research into intimate partner abuse among bisexual people. How could such a large group of people, statistically representing in population numbers greater than all the other LGBT+ communities combined, be so under-researched? And why? The answer lies within the pages of this thesis. As do the results of my survey, which highlight concerning findings regarding the extent and experience of IPA and childhood abuse (Corey, Duggan & Travers, 2023) among participants.

Why research bisexual intimate partner abuse?

Studying IPA in the bisexual community addresses a critical gap in research. It helps illustrate a phenomenon that few know exists even within the bisexual community (Walter et al., 2013) and highlights the unique challenges faced by bisexual individuals who face IPA. New primary research may help develop more targeted prevention and intervention initiatives and encourage greater inclusivity in the provision of support services and policymaking.

Research into the experience of IPA within the bisexual community is crucial for several reasons:

1. Little research exists on bisexual IPA (Walters et al., 2013; Head, 2020; Callan et al., 2021).
2. Reported high rates of victimisation. From the limited research that does exist, mainly from secondary research, it appears that bisexual individuals, particularly bisexual women, experience disproportionately high rates of intimate partner abuse compared to both heterosexual and lesbian/gay individuals (Walters et al., 2013; Coston, 2017; Messinger, 2011; Messinger, 2017). Understanding this elevated risk is essential for developing targeted interventions and prevention practices.
3. Bisexual IPA unique dynamics of abuse: The IPA experience in the bisexual community often includes biphobia, erasure, and isolation, which may differ significantly from experiences in other sexual orientation groups. Bisexual individuals may face abuse not only from bisexuals but also from heterosexual, lesbian or gay partners (Barker & Langdrige, 2008; Head, 2020).
4. Intersectional challenges: Bisexual individuals face marginalisation, experiencing discrimination and erasure from both heterosexual and LGBT+ communities (Callis, 2014), which may exacerbate barriers to recognising abuse, reporting it or seeking help.
5. Barriers to support: Research has shown that bisexual individuals often face unique barriers when seeking support, including stigma, lack of validation of their identity, and limited access to bisexual-specific resources (Meyer, 2003). Understanding these barriers is critical for creating inclusive and effective support systems.

6. Informing policy and prevention: Insights from future Bisexual IPA research can inform policies and prevention programs to address the specific needs of bisexual individuals. Tailored education and intervention strategies may enhance prevention and intervention measures, mitigate risk factors, and improve outcomes.

Bisexuality is an established and distinct sexual and gender identity (Copen et al., 2016). The bisexual community comprises the largest group of the LGB+ communities, equating to a population greater than all the other community members combined (Gates, 2011). While there is growing research into the bisexual community, scant data is available about the experience of intimate partner abuse (IPA) within it (Addington, 2019). This is primarily to do with bisexual invisibility and biphobia from both the heterosexual and LGT+ communities (Lindasusan, 2011; UCLA, 2015). Many of the research participants interviewed in this thesis wondered why nobody had asked them about their bisexual IPA experiences. A small number of existing studies (mainly secondary research except for Head & Milton, 2014) are discussed in these chapters (Head & Milton, 2014; Coston, 2017; Russell, 2020; Head, 2019; Messinger, 2011; Messinger, 2017) that, while not posing or answering common and duplicable research questions, certainly shape a framework for understanding bisexual IPA. Head & Milton's (2014) and Head's (2020) work is particularly important as it draws on primary research.

Due to limited gender data collection categorisation in many large statistical surveys (Messinger's 2011 review of the *2010 National Violence Against Women Survey* for example), bisexual IPA victims are often not adequately included, for example, being miscategorised as gay, lesbian or heterosexual (Addington, 2019). Alternatively, as Messinger (ibid) and Coston (2017) recorded, they categorised differentiating between 'behavioural bisexual' and self-identified as bisexual. Researchers and academics have found bisexuality particularly challenging to study and understand, mainly because it does not neatly fit into traditional models of sexuality (Bowes-Catton & Hayfield, 2015). This lack of data poses significant challenges in acknowledging bisexual IPA as a sexual orientation or gender identity and thus understanding the needs of bisexual victims of IPA, and the allocation of IPA helping and support resources and healthcare.

Not all people who are reported as behaviourally bisexual or who engage in bisexual behaviour are bisexual. Bisexual behaviour does not equate with being bisexual (Klein, 1993). As with being part of any community in the LGBT+ acronym, 'membership' is based on self-identification. The term 'behavioural bisexuality' is an applied label based on self-reports, observed, presumed, or assumed bisexuality. Labelling someone bisexual as a result of these criteria is inappropriate and inaccurate (Rust, 2000). Compare, for example, observing or hearing that someone has entered or prayed at a church or a mosque. That act does not imply any religious or cultural affiliation; it proffers little about the person's identity, and nothing can nor should be assumed without confirmation from the person.

Literature review: Why an embedded review?

Following an extensive search of research into bisexual IPA, this researcher opted to embed the literature review into the thesis rather than produce a stand-alone chapter. Instead, literature is threaded throughout the thesis. Although this is an unorthodox approach, it was necessary for the following reasons.

1. Bisexual IPA is an under-researched subject and is conspicuously absent in the literature, particularly in primary research (Corey, Duggan & Travers, 2022, p. 2132; Head, 2020, p. 130; Callan et al., 2021).
2. Head & Milton (2014) provided the first primary research into bisexual IPA through a psychological lens (Bermea et al., 2018; Currid, 2017, p. 3).
3. Secondary research (for example, Messinger, 2011; Coston, 2014) is based on a regressive analysis of data from non-bisexual specific data sources, the 2010 Survey on Violence Against Women (ibid).
4. Much of the remaining studies about bisexual IPA are subsumed into LGBT+ or heterosexual research and have produced little bisexual-specific data of value (Taylor et al., 2019). Bisexuals are included in the acronym research by default (For example, see Ovenden et al., 2019). Their inclusion in research amounted to little more than tokenism.
5. Given this propensity to align bisexual IPA with heterosexual or LGT+ IPA research assumptions (Barker, Richards & Bowes-Catton, 2012; Head, 2020, p. 113), this contributes to the continued erasure of bisexuals and the IPA

experiences through assumptive research practices and neglects the population's unique experiential dynamics. Allowing bisexual IPA themes to emerge independently enabled the exploration of unique and varied perspectives and factors contributing to bisexual IPA. This is the basis for allowing this research to emerge in a literature vacuum—shepherded by extensive literature references throughout the thesis—so that it can facilitate the emergence of its own narrative, context, and research philosophy.

6. This is foundational research (as with Head & Milton, 2014). As such, it deserves a research platform free from the rigidity of established research philosophies. It avoids a singular theoretical lens to be more inclusive of the diverse experiences of bisexual IPA.
7. This researcher wanted to prioritise the collection and analysis of primary data to capture the unique experiences of bisexual individuals without being overly influenced by existing literature, which leans toward heteronormative or LGBT+ assumptions.
8. Research into bisexual IPA tends to default as either an LGBT+ or heterosexual issue rather than a research subject deserving of standing and emerging on its own (Yoshino, 2000).

Research gap

The gap caused by the lack of relevant research, particularly primary research, into bisexual IPA is discussed extensively throughout the thesis (Head & Milton, 2014; Addington, 2019; Corey, Duggan & Travers, 2022, p. 2132; Head, 2020, p. 130; Callan, 2021). As the second primary research project focused on the subject (following Head & Milton, 2014), this thesis is a crucial addition to understanding and addressing bisexual IPA. It certainly adds another foundation stone to the research alongside that of Head & Milton (*ibid*), whose research concept and methods helped shape this thesis. Extensive engagement with the literature over 12 months (2020-21) (absent prior knowledge and an incorrect assumption by this researcher that data existed, given that bisexuals are included by default in LGBT+ IPA research titles) revealed little in the way of valuable bisexual-specific IPA data. This is supported by Bermea et al. (2018).

There are many gaps in knowledge about bisexual IPA, including the following. Research gaps are not limited to these examples.

1. *Gap caused by limited bisexual-specific IPA data; a lack of standardised definitions and research methods.*

Often, research studies on IPA aggregate data for all the LGBT+ communities. Doing so obscures opportunities to identify unique IPA experiences that the bisexual community may face. Further, a lack of standardised definitions and methods (including questionnaires) in LGBT+ IPA research impedes comparative analysis between the communities (Head & Milton, 2014; Brown & Herman, 2015, pp. 20-21; CDC, 2010). What questions are asked, how they are asked, and by whom, may lead to different responses (Barker et al, 2012, p. 382).

2. *Limited data on IPA perpetrator behaviours.*

IPA research tends to concentrate on the victim rather than the perpetrator (Russell, 2020). Researchers and the media may attribute perpetrator behaviour to a host of causal factors (poverty, substance abuse, anger) as opposed to examining the choices, decisions, and motivations for perpetrator behaviours (ibid; Daly, 2019). Dobash and Dobash (1979) propose that early feminist researchers challenged assumptions about the causes of IPA. They argued against traditional concepts that attributed IPA to individual pathology or conflicts within the relationship. Instead, they stated that it was due to the social structures that supported and enabled male dominance over women, such as patriarchy and associated supportive social structures. While most IPA perpetration is credited to men along with the mechanism of abuse through violence, this misses the myriad abuse types that may be perpetrated, including coercive control, emotional and psychological abuse, financial abuse, and others (Walker, 1979; Fonte, 2015; Dobash & Dobash, 1992; Stark, 2007). Women, as well as men, may perpetrate these non-violent abuse types (Donovan & Hester, 2014). Researchers often confuse perpetrator tactics as causes of perpetuation (Stark, 2007). Men tend not to report abuse when they are victimised (Romans, Poore & Martin, 2000; CDC, 2020) except when experiencing physical violence (Tjaden & Thoennes, 2000). Research indicates that some men may report abuse after fewer incidents than women. Gay and bisexual men are more likely to report sexual violence (Scott-Storey

et al., 2023). Early reporting may be due to gay men not facing the same barriers to reporting as women, and they may seek some advantage in reporting (ibid.; Walby & Towers, 2017). Research indicates that male victims of IPA are less likely than female victims to seek assistance, although few studies on barriers to help-seeking have been conducted in the UK (Taylor et al., 2022)

3. *Lack of data on help-seeking behaviours and the provision of resources to victims of IPA in the bisexual community.*

According to Brown and Herman (2015), bisexual and LGT+ people often rely on informal, personal networks for assistance in cases of intimate partner violence and sexual abuse. Duberli (2020) added that it was better to deal with these issues within the LGBT+ community rather than draw negative attention from the heterosexual community (also Messinger, 2011, p. 2240). There are few LGBT+-specific IPA shelters. LGBT+ people feel distinctly unwelcome in the existing shelter network, with many denied access due to their gender (Russell, 2020 p. 121).

Foundational research

The current level of research into bisexual IPA is at the very beginning of the investigation of this phenomenon. A lack of interest in the subject is due to a general refusal to acknowledge bisexuality as a sexual orientation as opposed to a 'behavioural choice' (Swan & Habibi, 2018). We saw this occur not too long ago with lesbians and gay men and the enormous efforts it took for society to accept the LG communities as 'legitimate' entities. (Rivera, 1984; Carter, 2010). A literature review and content analysis (N=36 articles) of the experience IPA of bisexual women, conducted by Bermea et al. (2018), revealed that the only relevant primary research was provided by Head & Milton (2014), as referenced by Currid (2017) in this thesis.

Despite being the second largest sexual orientation category after heterosexuals—determined to be numerically larger than all other LGT+ communities combined (Gates, 2011; Gallup, 2024)—bisexuals face discrimination and erasure not only from the heterosexual community but also from the LGT+ communities (Yoshino, 2000; Ochs, 1996). That said,

research into bisexual IPA is regarded as an LGBT+ issue (Barker et al., 2012; Todd, 2021, p. 160). The reality, however, is that bisexual IPA cannot be studied in the LGBT+ context. The bisexual population's very existence is denied (Yoshino, 2000). That is why this researcher prefers to study bisexual IPA in a research vacuum unencumbered by presumptions or impositions from other minority IPA research. It needs, for now, to be a pure subject and studied on its own to establish its research roots. Ristock (2011) informs us that each member of the LGBT+ acronym (including bisexuals) has distinct experiences and relationship dynamics. As such, they need research protocols specifically designed to capture them and not rely on traditional (e.g. heteronormative) assumptions and models. Research that is free from external assumptions may capture these unique characteristics more accurately, leading to a better understanding of each community's specific challenges and needs. It can also highlight issues that might be overlooked using frameworks or findings from other minority groups or research philosophies. This can include capturing unique forms of abuse (Ard & Makadon, 2011).

Throughout this thesis, there are ample references to existing literature about bisexuality IPA, LGBT+ research, and bisexuality. This laid a comprehensive data bed for this thesis survey (n=20) with the demographically diverse participants and provided an enriched space to understand and contextualise the extensive findings.

LGBT+?

In referring to 'LGBT+' research, reflecting Ristock (2011), how can research value be attributed to an acronym that comprises an expanding group of individual communities, each with its own standards, philosophy, and needs? What does the term 'LGBT+ research' even mean? Each community needs to be examined independently, each with its own criteria for research, particularly in sensitive areas such as IPA (ibid).

LGBT+ communities have very little in common other than that bestowed by the acronym and the philosophy of 'safety in numbers' (Nash, 2010; Formby, 2012). Support between the communities appears superficial at best; as Formby (2012, p. 65) stated, they possess '*solidarity without similarities.*' Within such an understanding, the question arises of who speaks for whom, even within the given community (Alcoff, 1991). This emphasises even

more strongly the need for stand-alone bisexual IPA research uncontaminated by other communities' (including heterosexual) research generalisations.

An absence of relevant literature also had a bearing in the form of a lack of guidance regarding bisexual IPA research design and methodological approaches; little in the way of bisexual primary research design was available. Directly replicating previous heterosexual or LGBT+ IPA research frameworks (as opposed to adapting them) might have tainted the value of this work (Riskock, 2011), given the need for community-specific research (ibid). Instead, the study was designed with reference to these previous studies but designed, tested and shaped using bisexual participants to ensure relevance for this thesis research.

Changing identities

Bisexuality as a community is under pressure from emerging and evolving gender identities (for example, pansexual, non-binary and genderqueer), some of whose members now define themselves as bisexual (Callis, 2014). This expansion makes defining bisexuality more complicated and, by default, may have a direct effect on how bisexuals experience IPA. 'Traditional' understanding of bisexuality lies in the gender binary: same-sex and opposite-sex attraction. This adoption and adaptation of bisexual identity may be regarded by 'traditionalists' as an encroachment on an already marginalised group (ibid).

To summarise. The scarcity of literature about bisexual IPA makes conducting and compiling a meaningful literature review difficult (Bermea et al., 2018). This lack of research limits the ability to gain a detailed understanding of bisexual experiences and highlights the importance of conducting more targeted studies in this field (Bermea et al., 2018; Head, 2020, p. 130; Callan et al., 2021; Corey, Duggan & Travers, 2022, p. 2132). In discussing bisexual IPA in the context of heterosexual or LGBT+ research, there is a polar magnetic dichotomous alignment to align the research with one side or another (Yoshino, 2000), which, in this researcher's experience, is another reason that so little value has been attributed to the subject to date. (See the *Methods: Stand-Alone Subject* section for further details). Searching for meaning in research unconnected to this invisibilised population may have hindered the clarity and relevance of my research. This absence of bisexual IPA literature reflects a lack of research interest, highlighting the research gap this study aimed to address. The absence may also

reflect a mistaken belief that research into LGBT+ IPA adequately includes bisexual IPA experiences.

Primary Research on bisexual IPA: a review of the research of Head & Milton (2014) and Head (2020).

This researcher waited until just before submitting this thesis to write this section, hoping that new primary research about the experience of bisexual IPA might emerge. None did. The only published primary research on this subject, as is reflected throughout this thesis, is Sarah Head and Martin Milton's seminal '*Filling the silence: Exploring the Bisexual Experience of Intimate Partner Violence*', which was published in 2014. It was subsequently supported and expanded upon by Dr. Head's chapter in the book entitled '*Intimate Partner Violence in the LGBT+ Community*' and the chapter, '*Understanding Power Dynamics in Bisexual Intimate Partner Violence: Looking in the gap*' (Head, 2020, pp. 111-137). A literature review and content analysis (N = 36 articles) of the experience IPA of bisexual women, conducted by Bermea et al. (2018), yielded a notable conclusion: the only relevant primary research was that provided by Head & Milton (2014), as referenced by Currid (2017) in this thesis.

These research articles were written from a psychological perspective, whereas this PhD thesis is written from a sociological and criminological viewpoint. Head and Milton's 2014 paper looked at the role of cognitive dissonance in the participants' understanding of coping with their experience of bisexual intimate partner abusive relationships. Head's 2020 chapter (Head, 2020, pp. 111-137) provides a deep insight into the power dynamics of bisexual IPA relationships. It adds a heretofore unexplored area of bisexual IPA, including the role of intersectionality, help-seeking behaviour variables, interventions and public policy. Taken together, they provide the only research about bisexual IPA built on a primary research platform. That fact alone speaks volumes about the status of bisexuality IPA as a neglected topic of research in the realms of academia, a primary finding from the 2014 research that still bears relevance today.

The purpose here is not to summarise Head and Milton's research paper but to highlight and demonstrate the depth to which they richly plumbed the bisexual IPA experience with their limited participant sample, including, for example, their difficulties of living as bisexuals

in a society including the LGBTQI+ communities that refuses to recognise them as a distinct group, a perplexing anomaly in this era of inclusivity.

The research by Head and Milton provides a foundational cornerstone towards understanding the phenomenon of bisexual IPA. Their study highlighted the gap in knowledge about research into bisexual IPA through a comprehensive literature review (see also Callan et al., 2021; Bermea et al., 2018). Their study data, derived from a sample of ten bisexual participants, revolved around how participants processed their experiences of IPA. It discussed how participants faced obstacles in recognising their experiences as IPA and highlighted a lack of means of understanding or naming the abusive behaviours. Societal experiences of biphobia, bisexual erasure and invisibility, fear and stigma associated with bisexual stereotypes prohibited or delayed their reaching out for help. A transformative process describes how many began to recognise and name their experiences of abuse, leading towards resolution through changing their beliefs, behaviours, or perceptions of what was happening to them. This was the main theme of the research: how the participants faced and overcame cognitive dissonance (Festinger, 1957) to recognise that their partners were abusing them. Cognitive dissonance describes how victims try to make sense of being hurt by someone they love or with whom they are in a relationship. Rather than recognising and acknowledging the abusive behaviour for what it is, they often force themselves to justify or downplay the abuse to cope with the emotional conflict (ibid). This can keep them locked in the abusive relationship, as the need to reduce discomfort leads to denial, self-blame, or false hope and hinders leaving the relationship (ibid). It was also underlined by the lack of knowledge that many participants had of intimate partner abuse outside of the heterosexual model and its invisibility within the bisexual and LGBTQ+ communities (Ristock, 2011; Donovan & Hester, 2015)

Head and Milton's model of research provided a broad overview of the issues that face bisexuals, particularly regarding their bisexual identity being excluded by heterosexual and LGBTQ+ communities, and by being superficially acknowledged or tokenised in LGBTQ+ academic research. It included a lot of essential data given the topic at hand, from sexual identity to seamlessly incorporating an understanding of the dynamics of bisexual IPA interwoven into, and drawn from, the narratives of the participants.

These researchers marked a spot in a research desert and took a risk and succeeding in establishing a research base from which other research could build, including this researcher's work. Their journey is well documented in their methodology and methods, and many of the lessons they learned can be seen in the methods of this researcher's thesis questionnaire and interviews, for example, highlighting the absence of previous research on the topic of bisexual intimate partner abuse, the difficulty in recruiting participants for the research sample, concurrent analysis of the findings as they emerged to inform the subsequent interview process better and designing the methods to be easily replicable by future researchers. In addressing the difficulties faced in the issue of recruiting participants, combined with highlighting that bisexuals are reluctant to self-identify, this researcher was prepared in advance for the difficulties in recruiting participants for this thesis, where the exact same limitations were faced and overcome.

Their work demands repeated reading, as it not only addresses the psychological research goals but also educates the reader about the relevance and dynamics of bisexual individuals and collective existence.

The format of their research was also a model for this thesis, incorporating an interview which covered a range of questions about the participants' experience of abuse. This researcher built on that by providing a questionnaire as the basis for the interview framework, ensuring that all participants followed the same line of enquiry. The data analysis followed Head and Milton's process of constant comparison as they undertook and analysed their research to monitor and adapt to participant responses to improve the quality of the interview process.

The result of Head and Milton's pioneering research was a broad psychological study of the experiences of bisexual IPA as reflected by their participants. This included, for example, adaptation methods for living with abuse, 'getting lost in the relationship,' 'adjusting for consonance,' the acknowledgement of how the participants' lives were interwoven with their abusive partners and how that evolved in many cases to become an issue of financial abuse where the abusive partner was not contributing to their responsibilities. Many of these dynamics are also reflected in this thesis's findings. When compared to the broader studies of

intimate partner abuse, including those in the LGT+ and heterosexual populations, we see a close correlation of similarities of these dynamic experiences (Donovan & Hester, 2014; Stark, 2007).

Their study captured the participants inability to see context or a frame of reference for their abusive experiences, as did their difficulty of contextualising their experience of the 'opaque harm' of emotional abuse, particularly cumulative emotional abuse, which was the most frequently reported type of abuse as reported by the participants (see Daly & Wright, 2017, pp 11-13). Cumulative emotional abuse is not unique to any particular population but is a result of all intimate partner abuse experiences (ibid). This researcher refers to opaque harm as 'intangible abuse' simply because it leaves little evidence of its existence. One of Head and Milton's participants expressed the wish that their abuser had physically assaulted her so that she would have had evidence of the assault on which to show others and act. The issue of jealousy was a highlighted factor, as also recorded in this researcher's thesis and participants' recollections.

The most significant difference between this thesis and the work of Head and Milton is that. In contrast, their participants sought resolution and an understanding of their abusers ('Making the Demons Human'), the participants in this PhD researcher's thesis interviews did not share such an interest. Unlike Head and Milton's participants, this researcher's participants did not have such a feeling of understanding or closure. Indeed, many expressed that their fears evolved into anger, disdain, and, in some cases, disinterest once they were free from the relationship. This included some of the participants who shared custody of their children with their abusive partner. In this researcher's professional experience as an IPA investigator and analyst, a search for resolution or understanding was rarely, if ever, expressed among victims of IPA, except perhaps as a bitter recollection of the events that had brought them to this point. This should be understood in the context of interaction by this researcher with victims, which was prior to, during and following attending court seeking injunctions or types of hearings when the victims were under extreme stress. On the rare occasion when a victim remained in touch with this researcher, they did not express a desire for resolution and instead emphasised the need to move on and survive.

There were many common areas, including the lack of language to describe and understand their experiences of abuse, the need for participants to ‘adopt a heterosexual disguise’ (or, in this thesis case, a lesbian or gay male identity) to secure helping services, which did not appear to be an issue for them (see also McGray et al., 2025, p. 286).

Head and Milton’s research is landmark IPA research, establishing and succeeding in bringing to light the experiences of a heretofore-ignored invisible community. Head’s (2020) chapter showed no slowdown in this pursuit, adding immensely to the base of knowledge of the phenomenon of IPA among bisexuals, demonstrating a level of research maturity and subject understanding that this subject so desperately needs.

Research title and questions

When faced with a subject about which such little tangible research was available, there was a need for a research title wide enough to capture a broad swath of data about the core and supporting subjects, including bisexuality, intimate partner abuse, previous research, research problems without falling into the trap of being diverted into generalised LGBT+ research (Barker et al., 2012). Using the title *‘Research into the experience of intimate partner abuse (IPA) perpetration and victimisation within the bisexual population’* allowed for the exploration of the subject without specific boundaries, while at the same time focusing attention specifically on the bisexual community. Doing so kept it distanced from LGBT+ IPA research into which previous bisexual IPA research had been subsumed. This subsumption was done in name only, given that bisexuality is part of the LGBT+ acronym, and little actual bisexual IPA research was produced (ibid).

Questions and interview criteria

The research questions then captured the specifics of the enquiry, while also adding, in question four, an associated exploration of the similarities in IPA experiences among heterosexual, bisexual, and LGT+ communities. The first three research questions are specifically designed to gather data and narratives about the experiences of the research participants.

The key to the survey's success (comprising a questionnaire and interview) was gathering a sample that provided,

- a) an appropriate sample size (n=20),
- b) a group that fits the research candidate profile criteria, including identifying as bisexual and being a victim of IPA.

All fit this description except one bisexual participant who had not experienced IPA and was therefore used as a control. As a control, her experiences were used as a means of comparing exposure to abuse and the intensity of the abuse experienced with other participants. Data on abuse perpetration was reflected from participants, as no perpetrators were interviewed.

Research questions

1. How is the perpetration and victimisation of IPA experienced in the bisexual community as represented by the research sample participants?
2. What new data has been garnered that adds to the knowledge about IPA in the bisexual community?
3. How can the data collected add to the support of victims of IPA in the bisexual community?
4. Does the data gathered support or contradict the hypothesis that perpetrator and victim experiences are similar across all populations?

Research Guidelines

My research has been informed by a guide on researching and writing about bisexuality (Barker et al., 2012, p. 385). The guide was adapted from suggested rules for writing about trans people (Hale, 2009). See a copy of the guidelines, follow this section, and it is also in the Appendix. Guidelines offered by the University of Lancashire were also adhered to. The research also adhered to the research ethics guidelines stipulated by the University of Lancashire. It has also been shaped by past research into LGBT+ communities (Ristock, 2011; Donovan & Hester, 2014; Head & Milton, 2012; Daly, 2020). Ristock's (2011) guidance has been of particular importance given their discussion on the need for a research paradigm for each individual community within the LGBT+ communities to capture their unique experiences (no 'one for all' research). Donovan & Hester's (2014) study is a masterclass in LGBT+ research and a comprehensive guide for future IPA research development.

These research guidelines (ibid) were an essential component in the design of this research project, as this researcher became aware of them within the first month of research approval. They were instrumental in formulating how this thesis was designed, how the questionnaire was conceived, tested and finalised and how the interviews were conducted. In addition to including Barker et al.'s (2012) guideline paper in the appendix, I have included the guidelines verbatim following this Guidelines discussion, as reading them will provide context to the overall approach to the thesis and, most importantly, the survey itself.

Key factors on how these guidelines influenced this research included (among others stated in the attached guideline list):

- Reflexivity: The need for researcher reflexivity throughout this process was vital to check my (un)conscious pre-conclusions from my professional and academic studies and thus avoid bias. This was a continuous concern from the beginning to the conclusion of writing this thesis. This was particularly important when I became aware of data saturation early in analysing the completed questionnaires. This was countered by the participants' variability, broad social and personal dynamics, and lived experiences, which appeared during the interview process.
- Awareness of bisexual research subsumed into other LGBT+ research: From the early days of my research, I noticed that bisexuality was subsumed into general LGBT+ and heterosexual research and rarely separated as a subject in itself. This is highlighted in this thesis (see 'The importance of research into bisexual IPA') and one of the reasons that so much time was spent reviewing LGBT+ IPA research papers, which claimed to include bisexual subject matter; the vast majority did not, including bisexuality simply because it is part of the LGBT+ acronym.
- Avoiding the universalisation of findings: From the beginning of this research, it was clear that the findings of this thesis survey applied only to the participants involved. This is reflected throughout the analysis and findings sections.

- Avoiding any use of language that would advertently or inadvertently contribute to bi-invisibility or bi-erasure.
- Recording the language used by the participants verbatim, as uttered, including self-descriptions of their sexuality and gender and their life experiences as bisexuals.
- Being aware of the dynamics of bisexuality. This was clear in the experiences of the research participants.
- The issue of intersectionality was important given the participants' broad demographic diversity, and it is reflected in the interviews (see Findings 2 and 3) and the interview notes. The participants' stories and experiences reflect this diversity and intersectionality.

(Barker et al., 2012)

Good Practice Guidelines for Researching/Writing on Bisexuality

Barker et al. (2012, pp. 385-6) provided an essential guide for framing my research. These guidelines may be found in the Appendix, as *Good Practice Guidelines for Researching/Writing on Bisexuality*.

Reflexivity statement

I acknowledge the potential impact of my inherent researcher bias on this research, which may stem from my life history, experiences, cultural influences, opinions, beliefs, assumptions, and values. Oakley (1981) and Stanley (1993) emphasise that researchers must acknowledge and reflect on their positionality and the power dynamics at play in their interactions with research subjects. This perspective challenges conventional ideas of objectivity by promoting transparency and ethical responsibility in the research process. I will make every effort to reflect this awareness through my research and in my work. I also recognise that it is impossible to completely remove my researcher bias and hope that my awareness of bias potential will balance this position. It may be helpful to provide a brief synopsis of my background with this in mind.

Personal statement

While I would like to discuss personal influences, doing so could compromise the anonymity of family and friends. Suffice it to say, I have a lifelong interest in bisexuality and LGBTQ+ issues that goes beyond the professional. My early awareness of LGBTQ+ identity began in childhood, during a time when homosexuality was still criminalised.

My career has centred on understanding human behaviour, particularly in the areas of aggression and sexuality. Growing up as an adopted child (to a mother who was a victim of rape at 15 and a biological father who was jailed as a result), I encountered abuse early on, both in school—where sexual abuse by teachers was rampant—and at home, where I faced psychological abuse from my adoptive mother leading to a suicide attempt on my part as at age 16. Throughout my life, I have struggled with depression, anxiety, dyslexia, and ADD.

Though I initially studied business at university, my real passion was psychology and human behaviour. After a 20-year business career that allowed me to travel the world, I retired and shifted my focus, influenced by my wife's career as a Paediatric Trauma and Intensive Care RN. I trained as a Guardian ad Litem (court-appointed investigator) in 2005 and testified professionally as a child welfare and domestic violence case investigator. Over the past 20 years, my extensive training has included periods with the FBI behavioural science unit (Academy), the UK Serious Crime Squad (Child Exploitation and Online Protection Centre), and many other agencies. In 2017 and 2019, I published two books on child protection and domestic violence.

For 19 years, I led One Child International, a child protection agency, providing education and training to law enforcement and medical professionals worldwide. My experiences have exposed me to various forms of trauma in people and children I have worked with, including severe injury and violent death.

I am a father of five adult children and a grandfather to four children, and I have been married to my wife for 41 years. I believe that life is short and that helping others is central to our purpose.

The importance of research into bisexual IPA

The importance of this study stems from several factors, the most important of which is acknowledging that bisexual IPA is widely pervasive (Walters et al., 2013) yet remains unrecognised and poorly researched (Head, 2020; Callan et al., 2021). As such, it necessitates

its own unique investigation and evaluation (Barker et al., 2012), which is being undertaken in this PhD research, rather than being subsumed into and superficially acknowledged by LGT+ IPA research (Johnson & Grove, 2017, p. 436). As posited by Messenger (2017) and Ristock (2011), current research into LGT+ IPA is often subject to a heteronormative perspective, meaning it is conceptualised, collected, analysed and interpreted within a heterosexual context and framework (Head, 2020, p. 113). This is primarily because of the underlying assumption that experiences of IPA are universally similar across heterosexual and LGT+ relationships, assumptions made without allowing for the community dynamics and means of application of abuse tactics (ibid). Some aspects of feminist analysis of heterosexual intimate partner abuse (IPA), such as the roles of patriarchy and gender stereotypes, are also relevant to the experiences of LGT+ individuals, including bisexual individuals. These frameworks underscore how societal norms regarding masculinity and femininity influence abusive dynamics across various relationships. For bisexuals, these issues can be further complicated by biphobia and the intersection of multiple gender expectations, leading to unique challenges in recognising and addressing abuse (Todd, 2013; Donovan & Hester, 2014).

Accessing a marginalised population

Due to the diversity of the bisexual population, accessing self-identified bisexual participants is difficult. It is a population that does not readily self-identify as bisexual, a population marginalised and subjected to invisibility by both the heterosexual and LGT+ communities (McLean, 2018). Unlike the heterosexual or LGT+ communities, there are few readily identified bisexual spaces, although some communities do exist (Brown, 2019). Head & Milton's (2014) seminal study highlights the difficulties in accessing bisexual participants through traditional recruitment means (clubs, spaces, organisations, etc.), an issue reflected in the development of this thesis. This researcher overcame this obstacle not by design but by accident. As the project progressed, friends and colleagues showed an interest in the subject matter. From this contact, people expressed an interest in participating themselves or offered to provide referrals to those who might be interested. It became snowball recruitment from the beginning. The success in recruitment was due to 'trusted sources' - referrals from and to people who trusted the researcher. To access these participants, this research required a significant amount of travel (which coincided with my professional work) to reach them.

Feminist researchers and coercive control

Stark (2007, 2023) is widely credited with developing and expanding the concept of coercive control, publishing his findings in his seminal book 'Coercive Control. How men entrap women in personal life' (ibid). Stark's research has been instrumental in the advancement of the criminalisation of coercive control in legislation around the Western world, as is evidenced in many domestic violence courtrooms in the UK and the U.S.

However, his research was influenced by and built on earlier feminist and sociological research that identified similar abuse dynamics and tactics of domination. He also benefited greatly from working with his wife, the prominent physician and researcher Anne Flitcraft, M.D., who co-authored significant studies on domestic violence and women's health (Stark & Flitcraft, 1988). Flitcraft's position gave them access to female patients at Yale University School of Medicine who presented to the emergency room with injuries and health complaints related to domestic violence. Their research revealed that women were the victims of physical abuse at a considerably higher rate than had been previously thought (Sandomir, 2024). Despite Flitcraft's significant intellectual contribution, Stark garners most of the credit for the work they did in coercive control. His success may lie in his rigorous development and promotion of coercive control as a 'brand ' associated directly with him. He achieved this by integrating earlier research insights with his own, labelling them under a single concept, 'coercive control,' and presenting it as a distinct theoretical framework. While he did acknowledge that his research drew on earlier feminist and sociological research, the depth of attribution was limited.

The researchers who contributed to the knowledge that led to the development of coercive control framework included Diana Russell (1982) *Rape in Marriage*, Elizabeth Stanko (1985, 1990), Emerson Dobash and Russell Dobash (1979 & 1992) *Violence Against Wives*, Liz Kelly (1988) *Surviving Sexual Violence*, Catherine Donovan and Marianne Hester (2014) *Domestic violence and sexuality.*, Susan Schechter (1982) *Women and male violence: The visions and struggles of the battered women's movement*, Lisa Fontes (2015) *Invisible Chains: Overcoming Coercive Control in Your Intimate Relationship*, and many others. As a side note, referring to Russell (1982), marital rape became prosecutable in the U.S. by 1993 and in the UK in 1991. It

is a criminal charge often used against perpetrators in abuse cases. These researchers detailed the aspects of abuse so prevalent in the coercive control model long before it had been named as such. These include highlighting patterns of emotional and psychological abuse, control, domination, isolation and others. They highlighted the increased dangers faced by victims leaving relationships (Campbell, 2002; Kelly, 1988). They framed abuse as patterned, systemic and ongoing (Kelly, 1988). They connected violence and control to patriarchy and social structures.

Gendered abuse

Coercive control is being increasingly recognised as a gendered form of abuse (Amin, 2024). It is rooted in patriarchal ideology, sustained by male entitlement, and reinforced through wider systems of structural societal inequality (Walby, 1990; Walby, Towers, & Francis, 2014). Feminist scholars argue that such control is a patterned strategy of domination. Kelly's (1988) 'continuum of sexual violence' highlights this. Schechter (1982) posits that abuse serves as a mechanism of social regulation that serves to limit women's independence. Stark (2007) acknowledges these insights by framing coercive control as a 'liberty crime,' the deprivation of the victim's freedom. In this, abusers entrap women using abuse tactics including surveillance, isolation, and psychological manipulation. This aligns with Walby's (1990) analysis of patriarchy as a system that sustains male privilege across public and private (home) realms. Research determines that coercive and controlling behaviours are disproportionately perpetrated by men against women. This reflects gendered expectations of entitlement, control over resources, and the policing of women's sexuality and liberty (García-Moreno, 2013; WHO, 2013). Intersectional feminist researchers (Cho et al., 2013) have highlighted how issues of intersectionality, such as race, class, disability, and immigration status, gender identity and sexuality, compound these effects. This suggests that coercive control may be particularly severe for marginalised women. Recent LGBT+ research has demonstrated that coercive control and the associated dynamics also manifest in same-sex and bisexual relationships (Donovan & Hester, 2014). In these settings, it exploits stigma employing tactics such as threats of 'outing' or denying a partner's bisexuality (ibid; Donovan & Barnes, 2020). This thesis's participants revealed that female perpetrators were sources of physical violence (not to the same extent as men) and near-equal sources of coercive control ('controlling behaviour') in same-sex and opposite sex relationships, a position observed by Brown &

Herman (2015). Coercive control functions as a structural, gendered practice of domination (Anderson, 2009). In heterosexual relationships, it is reinforced by patriarchal privilege. In LGBT+ relationships, it is shaped by intersectional vulnerabilities and social marginalisation (Anderson, 2009; Donovan & Hester, 2014).

See also the Definitions and Terminology chapter: Domestic violence vs Intimate partner abuse. Also in the Intimate Partner Abuse chapter: Perpetration: a behavioural (ab)normality? Also in the same chapter: Catalysts, not 'causes. In the same chapter: Ignorance of what comprises abuse aids the perpetrator and hurts the victim. Additionally, Options Are Available for victims of IPA. See the Towards Prevention chapter: Teaching a Simpler IPA Perpetration Model. Also, A critical review of the Power and Control Wheel (Duluth model) IPA teaching model. See also in *Discussion*: IPA and Patriarchy.

New data from this research. Contribution to knowledge

This original research presents a comprehensive dataset on bisexual IPA. When we consider how little data is available about bisexual IPA, any new bisexual research will produce important new data. The outcome of this research is twofold. To increase or establish awareness of IPA in the bisexual community. Second, based on the lessons learned from this research, develop and complete a training tool that will enhance the understanding of IPA dynamics across all communities. This is based on the Coercive Control model established by Stark (2007, 2012, 2023), which helped establish coercive control as a crime in the UK's criminal justice system (CPS, 2015; SCA, 2015). This new model, *Dynamics of Intimate Partner Abuse* (Stark, 2007; Stark, 2023; Daly, 2023), is based on a chart which can be seen in this thesis's Appendix; it explains the process and interaction of IPA between perpetrator and victim. This researcher will be involved in using this model in the instruction of domestic violence and family court judges, as well as heterosexual and LGBT+ IPA support groups.

This thesis, which incorporates both quantitative and qualitative data from a survey comprising a questionnaire, interviews, and a focused bisexual self-identified sample, has generated new and original findings. This new and unique data highlights IPA perpetration and victimisation in the bisexual community, including participant and perpetrator demographics,

perpetrator characteristics (as reflected from participants), abuse types, abuse frequency, strategies for seeking help and victim responses to IPA.

Recommended research methods.

Todd (2021) recommends using more than one method in researching issues of sexuality, as doing so allows for a better understanding of the researched population. Todd (ibid) illustrates this, citing research into gay and bisexual men's experience of IPA. As a result of using mixed methods in researching gay and bisexual men's experience of IPA, Bacchus et al. (2016) determined that many of the men studied concealed their experience of abuse as a means of maintaining their perception of masculinity. Also, it was found that sexual health practitioners rarely asked these men about IPA. Regarding methods, employing feminist research methods emphasises reflexivity, collaboration, and giving voice to participants. Qualitative methods (interviews, focus groups, and other victim-centred methods) are used to capture the lived experiences of victims and record their stories. Quantitative methods measure patterns and prevalence of IPA. Participatory Action Research (PAR) involves victims as co-researchers to guide the research process (Ellsber & Heise, 2005). In this research, mixed methods were used along with the limited PAR input. Quantitative methods included a questionnaire from which a statistical overview of the participants' input was constructed. The interview, which followed the questionnaire outline, provided qualitative data. Both components were developed with PAR input to determine a research framework and question relevance. (See Methods chapter).

Parameters: What this study is and what it is not.

This study is about the experience of Intimate Partner Abuse (IPA) in the bisexual community. It is not a study about bisexuality per se, although foundational information about bisexuality, discrimination against bisexuals, and the community's standing in society is provided for context and setting. It is not an in-depth study of the LGT+ communities, although research data from them is, by necessity, interwoven into the text, given bisexuality's inclusion in the acronym and LGT+ research.

Much of the limited bisexuality research on IPA to date has been subsumed into LGT+ and heterosexual research (Barker et al, 2012, p. 380), yielding little valid bisexual-specific

data, though a few good research papers have been produced (Head & Milton, 2015; Head, 2020). Todd (2021, p. 160) acknowledges the tendency to mix bisexuality research with research into lesbian and gay sexuality. Messinger (2011), Coston (2017), Russell (2022) and other researchers writing about bisexual IPA based their research conclusions on extrapolation, synthesis and interpretation of secondary data sources.

Hutchins (2005), Ulrich (2011) (in Barker et al, 2012, p. 379) attributed the lack of research to historical bisexual erasure, silencing of bisexual voices and bisexual invisibility. While this conclusion (from 2011) is dated, given that there has been an increase in general research into bisexuality (Barker et al., 2012), little exists about bisexual IPA. This absence is demonstrated in Swan, D. J., and Habibi, S. (Eds.) (2018, pp. 154-155) book on bisexuality, where out of 182 pages, only 357 words are written about bisexual IPA.

Baker et al (2012, p. 379) posit that much research exists that deliberately attempts to demonstrate that sexuality is binary, and that bisexuality does not exist. Todd (2021), confirming Esterberg (2002), posits that bisexuality is considered not as an identity but as a practice. Todd (2021) suggests that some existing research on bisexuality issues is framed within the medicalisation umbrella of psychology. Such research thus views bisexuality through a clinical or diagnostic lens rather than understanding the subject in broader social, cultural, and political contexts.

Confusion may be an issue for researchers as well as victims of bisexual IPA due to the type of relationship—whether same-sex or opposite-sex—in which the abuse occurs (Messinger, 2011). This manifests itself in this scenario. If the IPA of a bisexual person occurs in a heterosexual or an opposite-sex relationship, how is it to be understood as a bisexual issue? Is it an LGBT+ matter constrained by LGBT+ viewpoints of IPA or a heterosexual issue? How, then, do we label it as a bisexual issue or label it as IPA at all? Is it then a non-IPA-related ‘hate crime’? Does the sexuality or gender identity of the perpetrator matter? Statistics on violent crime do not provide much in the way of guidance on this issue as they lack expanded contextual information about IPA perpetration or victimisation, particularly among minority groups such as bisexuals and LGT+, for example, in the 2023 Office National Statistics survey into domestic abuse (ONS, 2023) or the National Crime Survey for England and Wales 2023

which collected data from households about a broad range of violent crimes as opposed to IPA (ONS, 2024).

Understanding intimate partner abuse (IPA) involving a bisexual person requires considering the context of the relationship—whether it occurs in a same-sex or opposite-sex dynamic. Labelling it as a ‘bisexual issue’ reflects the unique experiences of bisexual individuals, who may face distinct challenges such as biphobia, erasure, and stereotyping within both LGBTQ+ and heterosexual contexts (Messinger, 2011; Head, 2020). These are questions to be addressed in future research.

Much of the data we do have about bisexual IPA, other than the studies already mentioned, has been derived by the assumption and presumption that data gathered about the entire LGB+ community also applies, by default, to each individual member of the acronym group. A myriad of common minority experiences exist in the acronym; however, the assumption of ‘all for one’ is erroneous when it comes to IPA (Messinger, 2017; Baker et al., 2012). Clear distinctions between the communities exist. Formby (2012) explains that LGBTQ+ communities are often perceived as unified, but they are more diverse than similar, describing it as group solidarity without uniformity. They (ibid) posit that within the LGBTQ+ communities, there are significant differences in experiences, needs, identities (especially related to gender), sexual orientation, and culture. These differences can sometimes cause divisions, as the challenges faced by specific groups, like bisexual or transgender individuals, may not always match the main concerns of the broader LGBTQ+ movement.

While IPA encompasses common perpetrator behaviours and victim responses, research specific to each studied community is vital to understanding whether there are experiential differences (Ristock, 2011). This is particularly true of the largest, most ignored community in the acronym—bisexuals—given its intersectional position in the LGBTQ+ communities. Messinger (2017) and Ristock (2011) have consistently highlighted this need over the years, urging that IPA research should adhere to distinct research protocols for each sub-community within the LGB+ acronym.

LGT+ and bisexual exclusion.

It is interesting that the default inclusion of bisexuals in LGT+ bisexual research and the resulting findings that are assumed to apply equally to bisexuals go unchallenged, given the double discrimination—and exclusion—that bisexuals receive from the LGT+ and heterosexual communities (Lindasusan, 2011; Barker et al, 2012). That said, given the limited standalone bisexual IPA data available, a contradictory stance may be necessary, suggesting that some data is preferable to none, especially in the absence of other sources. Despite their differences, there are common experiences among all LGBT+ communities. These include minoritisation (the subordinating of minorities to a more dominant group, in this case to the heterosexual population), issues of minority status within society and the LGBT+ acronym, exclusion, discrimination, minority stress, haphazard IPA help-seeking resources, research barriers, research framework and research methodology challenges, and others (Brown & Herman, 2015; Donovan & Hester, 2015; Ristock, 2011).

Bisexuals face double discrimination.

The bisexual community is the subject of bi-invisibility and erasure from the LGT+ and heterosexual communities (Yoshino, 2000). It is subject to biphobia (a dislike of people who identify or are perceived as bisexual, similar to homophobia), a repeatedly imposed societal demand to define itself and questioning as to whether bisexuality exists at all as a sexual orientation or gender identity (Lindasusan, 2011). The bisexual community is a unique, diverse, intersectional community comprising individuals bringing with them lived experiences from the heterosexual and LGT+ communities (Russell, 2020, p. 116). This research aims to provide new knowledge about the experience of IPA within the community in the hope that it will further develop understanding, support and respect.

Bisexual IPA Research Restrictions

Restrictions shape and frame LGBT+ IPA research; they particularly affect bisexual research (Daly, 2020 pp. 27-33). These restrictions include a lack of funding for LGBT+ research. For example, in 2015, only 3% of domestic violence research was dedicated to LGBT+ IPA (Edwards et al., 2015). In addition, there is the difficulty in determining the size of the LGBT+ population (Donovan & Hester, 2015; Gates, 2011; Brown, Taylor & Herman, 2015) given that 'membership' of the communities is based on self-identification, a position further

complicated as bisexual individuals are the least likely to self-identify (Brown, 2019). Existing bisexual research participant sample sizes are small; for example, Head and Milton (2014) reported a small sample size ($n = 10$), due to the problem of recruiting bisexual and bisexual IPA survey participants from a marginalised population subject to heterosexual and LGT+ exclusion (Stiles-Shields & Carroll, 2015). Other research complications lie in definitions. For example, defining bisexuality, separating 'behavioural bisexuality' (subjective labelling of an observed or presumed behaviour) and bisexuality as a sexual orientation and gender identity, defining abuse terminology and the associated labels and thus how and if IPA can be recognised in the bisexual community (Russell, 2020). Quantitative research analysis of surveys about violence against women appears to show that bisexual women comprise the largest number of victims of IPA (Brown, 2019; Messinger, 2011). Absent specific bisexual IPA research, determining who perpetrates IPA against bisexuals cannot be made (Brown, 2019, p. 2238). Messinger (2011, p. 2228) and Coston (2017) illustrate how definitions complicate bisexual research by stating that violence against women surveys bisexual victims are labelled 'behaviourally 'bisexual' women' (Messinger 2011) or 'non-monosexual' (Coston, 2017) (as opposed to bisexually self-identified) and thus may not be counted as members of the bisexual community at all (ibid). This is discussed further at the end of the Methods section.

Research inconsistency: Different research questions provide different answers.

This paper includes an in-depth discussion of the IPA experience through the lens of the bisexual community, aiming to further understand the behaviours surrounding a person's need for power and control over another, which is the central tenet of IPA behaviour (Stark, 2007; Pence & Paymar, 1993). In doing so, the need for clarification of agreed-upon terms, definitions and terminology will be highlighted, as will the need to standardise methods for researching these issues across all populations whose absence hinders comparative analysis (Brown, Taylor and Herman, 2015). Starting with the most basic of research tools, an agreed-upon questionnaire design and content that can be commonly used in research. Research shows that using different questionnaires produces different answers, which do not produce relevant comparative data (ibid). Without agreed-upon protocols, we will continue to face research obstacles and risk running into research dead ends. There is, therefore, a need for an agreed-upon ethnological questionnaire framework (Donovan & Barnes, 2020). Gates (2011) advises that consistency in the design of surveys and questionnaires is vital to providing

consistent, measurable, and comparable results. See example in Breiding et al. (2015). Designed through community-based participatory (Collins, 2018) and ethnologically informed guidelines, the goal would be to produce a standardisation of an adaptable questionnaire design to fulfil research needs for the ability to contrast and compare findings from various researched communities. This initiative could be led by a council of university academic researchers in the UK. This thesis used a form of Participatory Action Research (PAR) involving IPA victims to guide the research design process (Ellsber & Heise, 2005).

Where appropriate, I reference bisexuality separately from the LGT+ acronym when issues specific to bisexuality arise. I do this because the bisexual community is an oppressed group within an already oppressed group of communities, subject to criticism and 'othering' by the other LG+ group communities (Head, 2020). It is time to begin the separation of bisexuality research from LG+ research to produce accurate research data on bisexual IPA. Bisexual critique is not just the domain of a few people in the heterosexual or LGB+ communities; everyone appears to have a critical opinion (Monro, 2015; Yoshino, 2000). Bisexual research, particularly around IPA, needs its own space.

Finally, one could argue that the discrimination that bisexuals experience in the LGT+ communities is in itself a form of intimate partner abuse, given the imposed (faux?) intimacy and supposed community closeness that goes with the acronym membership. Being included when needed as part of the acronym (bulking up the population for a survey, for example) while being excluded and isolated on a whim (Yoshino, 2000). Bisexuals often have their experiences and identities ignored, while when it comes to research or advocacy efforts that benefit the broader LGBT+ communities, they are readily included (ibid. Barker & Langdrige, 2008). Being subject to unbridled criticism, demands for definition (behaviour vs sexual orientation), and member exclusion from community events...it appears like institutional IPA. It is made even more painful because the acronym is expanding to readily include new minority populations whose positions push the boundaries of LGBT+ far beyond the original intent (Goldberg, 2017) while not accepting its biggest community—bisexuals (Gallup, 2024)—members population for whom they say they are; being accepted for who we say we are is the basis of LGBT+ membership philosophy (UCLA, 2019). McLean (2018) discusses how bisexual experiences can be appropriated within the LGBT+ communities, highlighting how

bisexual identities are frequently overshadowed or absorbed by dominant gay and lesbian narratives.

The development of a new IPA teaching model.

Based on my theory of the role of personal choice in the perpetration of IPA, I have developed a new model of perpetration and victimology that clearly and straightforwardly explains it. It was designed out of my professional experience working with IPA victims and my need to understand the IPA perpetration and victimisation process. As it is not an intrinsic part of this thesis, it is included in the Appendix: *Towards Prevention*.

I developed this model because confusion appears to reign in the academic and media efforts to understand the nuances of IPA perpetration and victimisation. IPA is about establishing and maintaining power and control (Stark, 2007). That goal of IPA perpetration should not be confused with the perpetrator's tactics or attributed excuses (Dobash & Dobash, 1979). It is about the toxic implementation of a campaign of power and control over an intimate partner, using various techniques (Stark, 2007) that appear innate, given their prevalence across all borders (Hill, 2019). '*...it's as if they (perpetrators) studied some kind of domestic abuse handbook. They all have the same tactics...*' (Hill, 2019, p. 4). Moreover, in my professional experience, I have found that they do.

Summary

This chapter has established the rationale for researching bisexual intimate partner abuse. It situates the study uniquely within the wider literature and identifies the research gap. Foundational studies, including those of Head and Milton (2014) and Head (2020), were reviewed to highlight their unique contribution and the limited scope of existing knowledge. Attention was given to shifting identities within the LGBT+ community, the challenges of accessing a marginalised population, and the importance of applying feminist perspectives on coercive control. The chapter also sets out the research title, questions, and interview criteria, alongside guidelines for good practice in researching bisexuality. Reflexivity and personal positioning were acknowledged to ensure transparency. Together, these elements underscore the significance of investigating bisexual IPA and provide a foundation for the methodology and findings that follow.

CHAPTER 3: THEORIES INFORMING THIS RESEARCH

This chapter presents the theoretical foundations of the study, framed within a social constructionist perspective. It reviews key theories that together provide a multi-dimensional lens for analysing bisexual intimate partner abuse.

Introduction

This research began without any prior theoretical assumptions. This was done to allow the data to emerge unencumbered or shaped by theoretical constructs, given the minimal prior academic attention given to bisexual intimate partner abuse (IPA). Direct comparisons to existing heteronormative or LGT+ based IPA research frameworks were also avoided. This was done to ensure that the uniqueness of the research primary data could emerge without being shaped, influenced or constrained by pre-existing models.

As the participant interviews and concurrent data analysis continued, it became evident that theoretical concepts were evident in the emerging data. The theoretical frameworks discussed in this chapter were therefore identified as the findings unfolded, supporting the data rather than directing it. This approach allowed the data to stand on its own, with theory later used to contextualise and interpret it. This is evident in references to and discussion of theory throughout the thesis.

A guiding framework was adopted, incorporating a social constructionist (SC) ontology and interpretivist epistemology (Bryman, 2016; Berger & Luckmann, 1966). This approach provided a conceptual structure that focused on how participants made sense of their experiences of IPA through socially and culturally constructed meanings. The SC perspective was particularly valuable in exploring how bisexual victims of IPA (as demonstrated by the participants) are often erased, overlooked, or misinterpreted. This framework was supported by a mixed-methods research design (Todd, 2020), with qualitative data analysed through inductive thematic analysis, allowing themes to emerge organically from participants' narratives and language (Braun & Clarke, 2006). (Also see the Methodology and Methods sections).

While grounded theory would have been an ideal approach for this subject, classic grounded theory requires researchers to enter the field with minimal theoretical assumptions or subject knowledge, allowing theory to emerge entirely from the data (Glaser & Strauss, 1967; Charmaz, 2006). This was not feasible given the researcher's prior subject matter knowledge, both academic and professional. Instead, a theory-informed inductive thematic analysis approach was adopted (Braun & Clarke, 2019). This method allowed for flexibility in identifying patterns from participants' narratives while remaining open to the influence of relevant theoretical concepts.

This theoretical approach was not fixed from the outset but developed alongside the research process. As findings emerged, they were interpreted through a range of established frameworks, including minority stress theory (Meyer, 2003), which explains how stigma and marginalisation create chronic stress for minority groups, and cumulative trauma theory (Kira, 2001), which highlights how repeated and layered (cumulative) trauma impacts long-term psychological wellbeing and others (also Herman, 1992). Additionally, Finkelhor and Browne's (1985) Traumatic Dynamics Model and Cumulative Trauma Theory (Kira, 2001) was incorporated in response to the unexpected emergence of widespread childhood sexual abuse among participants. Other theories, such as stigma theory (Meyer, 2003), labelling theory (Becker, 1963), and hegemonic masculinity (Connell, 1995), also became relevant as the data revealed experiences shaped by social devaluation, exclusion, marginalisation, and power dynamics. This evolving, reflexive theoretical engagement supported a deeper understanding of participants' lived experiences. Also introduced is the researcher's emergent conceptual framework theory of similarity of perpetrator and victim behaviours to IPA across all populations (Research question 4), now being developed under the term Unified Dynamics Theory (Daly, 2024). This is a framework that examines perpetrator and victim behaviours to explain observations of common patterns of violence, coercion, trauma, and control in intimate partner abuse across diverse populations (Hill, 2019). (See Chapter on Intimate Partner Abuse: 'Diverse populations; common abusive behaviours.' Also, Chapter on Findings 4: 'Perpetrator similarity of behaviours').

Social Constructionism as a Theoretical Framework (Also see Methodology and Methods chapters)

In adopting a social constructionist (SC) theoretical framework (Berger & Luckmann, 1966) supported by a social constructionist ontology, it informs the theoretical framework used to interpret the research findings. It allowed findings to emerge inductively while recognising the importance of participants' narratives. Narratives that are shaped by their experiences of stigma, marginalisation, and structural and social inequality.

SC holds that meaning, identity, and knowledge are not fixed or objective but are shaped by culture, history, language, geography, and social interaction (Berger & Luckmann, 1966; Burr, 2015). It challenges the notion that social categories such as gender, sexuality, or victimhood are innate or universal. Instead, these categories are constructed and maintained through dominant social narratives and power structures.

SC is particularly relevant in the context of intimate partner abuse. The social meanings attached to identity or relationship status or type often determine whether abuse is recognised, victims are believed, or abusive experiences are even named (Gergen, 2009). Plummer (1995), for example, describes how individuals narrate stories about their sexual identities and experiences within broader cultural, social, and political contexts. He argues that these personal narratives, what he terms 'sexual stories,' are not simply private accounts of their lives. The stories are shaped by, and within, commonly accepted social views, moral frameworks, and power structures. These stories are told, heard, legitimised, 'approved,' accepted or silenced within specific historical and social environments (ibid).

Many participants in this study described experiences of being unseen, dismissed, or invalidated because their bisexual identity or relationships did not align with societal understandings of what is considered 'legitimate' or 'acceptable.'

Theoretical Implications

The findings of this study draw from and contribute to several theoretical frameworks within sociology and criminology. These theories were not applied as 'fixed lenses' but rather as

observational, framing and interpretive tools to understand better the complex dynamics of bisexual intimate partner abuse (IPA) as revealed by the participants of this study.

Feminist theory (Dobash & Dobash, 1979; Kelly, 1988; Stanko & Hobdell, 1993; Tong, 2018; Hanisch, 1970) provided the context for understanding IPA as a gendered phenomenon. It also helped explore challenges to perpetration gender symmetry views, reflecting participants described experiences of abuse against men and women in both same-sex and different-sex relationships.

Power and control theory (Pence & Paymar, 1993; Stark, 2007, 2023) and coercive control theory (Kelly, 1988; Stark, 2007; Stark, 2023) helped explain the systematic (and patterned) use of psychological, emotional, and behavioural tactics to create fear, domination, dependency, and isolation for victims within abusive relationships.

The Traumagenic Dynamics Model (Finkelhor & Browne, 1985) and Cumulative Trauma Theory (Kira, 2001) provided a framework for interpreting the long-term developmental effects of childhood trauma, particularly sexual abuse, which many participants disclosed as a hypothetical precursor to their later sexual victimisation vulnerability. I say ‘hypothetical,’ as for some, the linkage was not evident or apparent.

Choice Theory (Glasser, 1988) offered insight into how perpetrators of abuse, in choosing to abuse, may rationalise, support and justify harmful behaviours, reinforcing abusive dynamics.

Labelling Theory (Becker, 1963) helped explain the silencing effects of stigma and social rejection, particularly for victims who did not conform to normative expectations of gender or sexuality, reinforcing invisibility.

Social Learning Theory (Bandura, 1973) contextualises how patterns of abuse and control are often learned through observation and may be transmitted from one generation to another. Participants frequently described witnessing violence or emotional control in childhood in their homes, suggesting that such behaviours for some may be modelled and

normalised early in life. However, many participants highlighted that despite observing and experiencing abusive behaviours, they did not go on to replicate this in their own lives.

Connell's (1995) concept of hegemonic masculinity accounts for how dominant gender models are internalised and enacted, even in non-heteronormative or same-sex relationships. It shows how some bisexual people take on dominant gender roles in perpetrating abuse, such as being controlling or emotionally distant, to gain and maintain power in their relationships.

Unified Dynamics Theory (Daly, 2024) (in development) is based on observed behavioural similarities between perpetrators and victims in intimate partner abuse (IPA) across both heterosexual and LGBT+ relationships, highlighting shared patterns and similarities of control, trauma response, and relational dynamics regardless of gender or sexual identity.

Intersectionality theory (Crenshaw, 1991) helped understand the unique marginalisation experienced by some bisexual individuals (particularly the transgender participants and people of colour).

These theories provided a broad and flexible framework for understanding the complex, overlapping factors that shape bisexual victims' experiences of intimate partner abuse. They are embedded and interspersed throughout the thesis.

Theoretical review

This is an expanded discussion of the key theories relevant to this thesis research and findings. Also see the theoretical section in the Intimate Partner Abuse chapter: 'Theories of abuse—the role of personal choice' where 25 theories are reviewed.

Key theories

1. Feminist theories
2. Power and Control Theory
3. Stigma and Labelling Theories
4. Coercive Control Theory

5. Hegemonic Masculinity Theory
6. Minority Stress Theory
7. Social Learning Theory
8. Gender Symmetry Theory
9. Unified Dynamics Theory
10. Choice Theory
11. Traumagenic Theory and Cumulative Trauma Theories
12. Intersectionality Theory

1. Feminist theories

Feminist theories (FT) argue that gender is a structural force in society that shapes power, opportunity, and inequality (Tong, 2018). FT contests the idea that male dominance is 'natural,' but instead it is a part of a social system, patriarchy, that benefits men and marginalises women and gender minorities (ibid). Patriarchy refers to a social system in which men hold dominant power and principal roles in leadership, authority and control, reinforcing gender inequality (Walby, 1990). Connell (1995) critiques the use of the term 'patriarchy' as an overly general concept. They propose the terms 'gender order' and 'gender regime' to more accurately describe how gender roles and power are organised and maintained in and across different social settings.

Feminist theories maintain that abuse against women in the form of IPA, for example, is political as it reflects and reinforces broader socially reinforced systems of inequality (Hanisch, 1970). More recent feminist work has expanded the framework to include intersectionality (see Intersectionality below, Item 12). This recognises that ethnicity, social class, sexuality, and other identities overlap with gender to shape distinct experiences of oppression (Crenshaw, 1991). At the heart of feminist theories is an awareness of how power flows through gender and how that power is supported, challenged, or repeated in different parts of society (Tong, 2009). Price (2012), in discussing feminist theories of abuse, focuses on how gender, power, and structural inequality drive violence against women. Westmarland (2015) examines men's violence against women from a criminological perspective, arguing that feminist theory is essential to understanding, responding to, and preventing gender-based violence.

Although feminist theories of patriarchy and misogyny were developed initially to explain male violence (abuse) against women, they may apply to same-sex relationships and to women's abuse of men (Donovan & Hester, 2014). They offer insight into how power (over), control (of), and gender norms operate across different relationship contexts (ibid). This is because all members of society operate within the same patriarchal and misogynistic social structures. The degree of conspicuousness depends on factors such as culture, political structure, religious influences, geographic location, and history. Patriarchy does not just influence men. It shapes how everyone learns to express and experience power, entitlement, and control (Dobash & Dobash, 1979; Kelly, 2008). Sexism can be internalised by people of any gender, including those outside the gender binary. This means that anyone can adopt patriarchal attitudes such as entitlement, domination, and the belief in a gender hierarchy. In this way, abuse in any relationship can reflect the same patterns of domination that patriarchy normalises (ibid).

How then does misogyny fit in this? Misogyny is the hatred or dislike of women. Manne (2018) proposes that patriarchy, sexism, and misogyny are different parts of a system of oppression. Patriarchy constructs a social environment in which rigid gender roles are imposed and maintained. Sexism is an ideology that justifies patriarchy. Misogyny enforces patriarchy by punishing women who deviate from its norms or resist control (ibid).

2. Power and Control Theory

Power and Control Theory explains that abuse is about domination, not just through the application of physical and sexual violence, but as part of a pattern of behaviours used to control another person emotionally, economically, and psychologically (Kelly, 1988; Pence & Paymar, 1993; Stark, 2007; Stark, 2023). It closely aligns with feminist theory. It is a behaviour modification tool. In this researcher's experience, the term 'power and control' is often used without truly listening to and appreciating its meaning. It goes far beyond the three words. It refers to the 'establishment of power over' and 'control of' and the 'maintenance of that control' of one person over another. It achieves this by employing a dynamic range of tactics to ensure that the goal of domination and control is achieved and maintained (ibid). When seen this way, it demonstrates that the power and control theory can apply in any relationship

where abuse is involved, regardless of the gender of either the perpetrator or the victim. Power and control theory is a central issue throughout this thesis. (See the section and chart in the Conclusion under the section ‘Creating a solution’ and the accompanying chart ‘Dynamics of IPA,’ which illustrates how this works).

Stark’s (2007, 2023) theory of coercive control builds directly on the foundations laid by earlier feminist theorists who framed domestic violence as a form of gendered power and social control (for example, Dobash & Dobash, 1979; Kelly, 1988). While early feminist work focused on physical and sexual violence as an expression of male dominance within patriarchy, Stark (2007) expanded this framework by emphasising the use of non-physical tactics as equally or more damaging forms of abuse. Kelly (1988) brought attention to the continuum and patterns of abuse. These included patterns of controlling strategies such as isolation, psychological abuse, stalking, intimidation, and others. Her work saw IPA as a pattern of domination, rooted in structural gender inequality.

(See Introduction: Feminist researchers and coercive control. Also see Methodology: Power and Control: Overcoming the feminist paradigm.

Stark’s (2007) concept of coercive control aligns with feminist theory. It is central to the coercive control model. It posits that abuse is an intentional strategy to restrict women’s freedom and autonomy rather than the result of anger or conflict (Stark, 2007, 2023). He advanced feminist thought by formalising these ideas into a legal and behavioural model that has widely influenced policy, legislation, and professional practice, particularly in the UK and the United States. Stark’s philosophy supports the core feminist insight that abuse is about power, not loss of control (also Pence & Paymar, 1993).

Feminist theories have long emphasised that gender inequality and power imbalances underpin heterosexual relationships. Oakley (1974) and Delphy (1984) argued that patriarchy operates not only in public life but also in the home, where men maintain dominance through emotional, economic, and physical control. These ideas informed the development of the Duluth Model (Pence & Paymar, 1993), which was initially developed in response to men’s battering of women. The model was an early and influential framework for domestic violence intervention and explanation. It views abuse as a deliberate pattern of power and control

rather than the result of individual pathology. In addition to physical and sexual abuse (central to the Duluth model) it highlights how non-physical tactics like coercion, isolation, financial control, and emotional abuse reinforce physical and sexual violence. Central to the model is the Power and Control Wheel (DAIP, 2024), which illustrates these interconnected behaviours within a patriarchal context. Despite its impact and widespread use, the Duluth Model has been criticised for its rigid gender framework, limited applicability to same-sex or female-perpetrated abuse, and insufficient evidence of effectiveness (Dutton & Corvo, 2006; Hamel, 2005; Babcock et al., 2004). It is also criticised as being too complicated (SP, 2024) for effective use as a teaching tool.

See Intimate Partner Abuse chapter: 'Understanding intimate partner abuse.' Also, in the Towards Prevention chapter: 'A critical review of the Power and Control Wheel.' IPA teaching model.

3. Stigma and labelling theories

Stigma (Goffman, 1963) and labelling (Becker, 1963) theories focus on how an individual may become socially judged and excluded based on characteristics, attributes or behaviours that are deemed different from what is considered 'normal.' Stigma is also a key component of Minority Stress Theory (Meyer, 2003). Note: When judging what is 'normal', who is the judge, and what/who is the model for normal?

Central to labelling theory is the argument that being publicly seen or labelled as different ('othered'), or deviant, can shape a person's identity. It affects how others perceive and treat them, and how they perceive themselves and their place in society, thus creating stigma (Becker, 1963). For the participants in this research, this became a central issue of their reluctance to identify as bisexual instead choosing to adopt an identity that fit the social group in which they mixed to avoid exclusion or stigma. Many aspects of their experiences as bisexuals experiencing IPA were designed to avoid labelling and stigma, including a reluctance to self-identify as a victim of abuse or when seeking help (see also Turell et al. 2012: 298). (See Findings 1 Questionnaire: Question 35. How did you identify yourself?)

Stigma theory, as developed by Goffman (1963), refers to the process by which individuals are discredited or devalued based on real or perceived traits. These may include

physical features or presentation, sexuality, mental health status, being a victim (self-proclaimed or labelled by others) and others. In the context of intimate partner abuse, this theory is important in understanding how bisexual victims must anticipate and negotiate their lives both as bisexual individuals and as victims of abuse. Barker et al. (2012) inform us that bisexual people face disbelief, blame, or dismissal due to facing stereotypes and social stigma. Labelling and the resultant stigma (or anticipation stigma) can result in victims being silenced or being seen as 'less than' collectively or as individuals, especially when their identities fall outside of what society, or societal groups, regard as 'normal.' The label of 'victim' itself can carry stigma, especially for those such as bisexuals whose abuse experiences challenge traditional gender norms or expectations of how victims should be or how they should behave (ibid). (See Definitions and Terminology chapter: 'The term victim'.)

When considering what is deemed 'normal,' who defines this standard and on what basis? From a social constructionist and labelling perspective, what is considered normal for society is not fixed but is shaped by dominant social groups who hold cultural, religious, institutional, and political power. The model for 'normal' may often reflect hegemonic ideals, such as heterosexuality, masculinity, emotional restraint, and physical and economic independence (Connell, 1995). Those who deviate from these expectations or standards may be labelled as abnormal or deviant. Goffman (1963) argued that stigma emerges when individuals possess traits or identities that fall short of these socially constructed norms, resulting in their being discredited or excluded. Similarly, Becker's (1963) labelling theory suggests that deviance is the result of social reaction to individuals who do not conform to societal expectations of normality. Meyer's (2003) minority stress theory identifies stigma, both external and internalised, as a chronic source of psychological stress for sexual minorities. In this study, such processes are especially relevant to bisexual participants, whose identities are often scorned, made invisible and excluded within both heterosexual and LGBT+ contexts.

Also see Bisexuality chapter: *The Role of stigmatisation, labels, and minority stress in Bisexual and LGT+ IPA.*

4. Coercive Control Theory

Coercive Control Theory, as developed by Stark (2007, 2023), posits that intimate partner abuse is not just about violent incidents (physical and sexual). It reflects a pattern of ongoing domination over the victim through the use of abusive tactics (a tactic toolbox) such as isolation, intimidation, manipulation, surveillance (in person or electronic), and control over everyday life. Violence may not be part of the abuse, or it may be ever-present ('intimate terrorism', also see Johnson, 2008), or it may punctuate or be an endpoint of an abusive relationship. Stark (2007) argues that the goal of coercive control is to strip the victim of their independence, personal freedoms, and sense of self. This effectively entraps them in a state of subservience.

Although Stark (2007) formalised the term 'coercive control' and brought it to the forefront, where it is now part of the judicial and public IPA vocabulary, it was developed before that. Feminist scholars had been describing abuse as patterned, controlling behaviour long before Stark. Classic feminist theories regarded physical violence as just one of many tools of abuse used by abusive men to establish and maintain control of their female partners under the umbrella of patriarchal control (Kelly, 1988; Dobash & Dobash, 1979; Johnson, 2008). They are referring not just to individual acts of violence. It was about establishing and preserving dominance through a broader regime of coercive control embedded in everyday life. This was reflected and amplified in the findings gathered from the interviews with the participants of this thesis. However, due to the participants' inability to recognise their experience as IPA, it was not referred to in these terms but as 'controlling behaviours' or 'attempts (trying) to control me.' Feminist scholars find ample evidence for this perspective in research with the predominantly female victims who seek services or interventions for abuse (Dobash & Dobash, 1979; Dobash et al., 1992; Stanko, 1997).

5. Hegemonic Masculinity Theory

This theory, primarily developed by Connell (1995), Hegemonic Masculinity (HM) explains how certain forms of masculinity shape and perpetuate male power and dominance in society, reinforcing gender hierarchies. The development of the theory included the work of others, including Kessler (Kessler et al., 1982). The concept of a hierarchy of masculinity grew from gay men's experience of physical violence, abuse and prejudice from heterosexual men

(Connell & Messerschmidt, 2005: 831). Hegemonic masculinity is not primarily about power over women, but power over others, including both women and subordinated men (who do not fit the masculinity model) in a patriarchal social order (Connell, 1995). It is marked by traits such as male dominance, control, aggression, heterosexuality and emotional stoicism (emotional control and restraint). Within a social constructionist perspective, these traits are not innate or biologically determined. They are socially constructed, learned through societal interaction and reinforced through cultural traditions (Ibid). While not the only form of masculinity, Connell (ibid) posits that HM it is the one most valued and legitimised within patriarchal systems.

Within the context of intimate partner abuse, HM captures how entitlement, control and violence are normalised within abusive relationships. Particularly where these behaviours align with patriarchal social expectations around male dominance. Connell (1995) states that hegemonic masculinity is not just an individual trait. It is embedded in myriad societal institutions and reinforced through the media. It shapes societal expectations about the behaviours of men, and how women and non-dominant men should behave, as well as whose voices and experiences are valued (ibid).

This has relevance across a range of gender and sexual identities. It can be seen from the findings of this thesis that bisexual men and women stated confusion as to how to address their experiences of abuse in a society that devalues them. A society that sees them as not relevant, their existence questioned, their sexuality fetishised, and their experiences of IPA not recognised. Their reluctance to self-identify reflects their perceived marginalisation. This is particularly exemplified when they are seeking help as they negotiate a primarily patriarchal heteronormative system of resources and are forced to assume heterosexual or lesbian or gay male identities to fit in (Yoshino, 2000; McLeod, 2018). (See Bisexuality chapter: 'Bisexual stereotypes'.)

In response to critiques of HM theory, Connell and Messerschmidt (2005) revised the theory to address these concerns. This included criticism that hegemonic masculinity was perceived as being too rigid. It failed to account for the fluid contextual ways that masculinity is expressed and maintained. That HM represented a static form of hierarchical dominance

when masculinities are fluid, contested and shaped by context. The revised models shifted the focus from individual men to a broader view of how dominant masculinities are maintained through cultural practices, institutions, and societal systems (ibid).

A concept of 'complicity' was introduced, which posits that many non-dominant men also benefit from the structures of patriarchy (Connell & Messerschmidt, 2005). This expands the understanding of how individual male social power can be gained from the cultural acceptance and passive reinforcement of patriarchy. The revised theory also acknowledges that masculinities are not only enforced but also open to challenge. 'Subordinate masculinities' may disrupt the prevailing patriarchal social norms (ibid). As a result, they may face restraint or punishment. Subordinate masculinities are the types of masculinity that are judged not to fit the dominant mould. They are pushed to the margins and treated as less than (ibid). This includes men who do not follow the heterosexual norm, men who demonstrate emotion or care and are often labelled as weak, men without social or economic power, and those who refuse to act with aggression or dominance (ibid). Also see the Introduction in the Chapter on Intimate Partner Abuse.

6. Minority Stress Theory

Minority Stress Theory (Meyer, 2003) provides a structure for understanding how chronic stressors linked to a marginalised or stigmatised identity, such as being bisexual, may negatively affect a person's mental health and capacity for healthy relationships. The theory identifies three primary sources of stress: external stressors (for example, discrimination, violence, social rejection), internalised stigma (for example, shame, self-blame), and expectations of rejection (anticipated stigma), all of which contribute to a sense of heightened vulnerability. Meyer emphasises that these stressors are experienced in addition, cumulatively, to general life stress. They are not rooted in individual dysfunction, but rather in social structures. In the context of this study, the theory is particularly relevant, as many bisexual participants described being marginalised and excluded within both heterosexual and LGBT+ communities, having experiences that align with the cumulative, identity-based stress outlined in Meyer's model.

See the Bisexuality Chapter section 'Minority stress and mental health issues for bisexual men and women.'

7. Social Learning Theory (SLT)

Social Learning Theory (Bandura, 1977) proposes that individuals learn behaviours, values, and attitudes through observing and imitating others within their social environment as they grow up. Known as 'modelling,' this process of learning highlights the role of observational learning, imitation, and reinforcement in the development of individual behaviours. Bandura emphasised the importance of vicarious reinforcement, where individuals learn by observing the consequences of others' actions. According to Bandura (ibid), cognitive processes such as attention, memory retention, the ability to reproduce the behaviour, and motivation are essential in determining whether an individual learns and performs a behaviour. SLT has been widely applied in understanding aggression, delinquency, and media influences on behaviour, particularly in children (Akers, 1998; Bandura, Ross & Ross, 1961). Its relevance extends to criminology, where it informs explanations of how criminal behaviours may be socially transmitted and adopted, especially within peer groups and family settings (Akers & Sellers, 2013). Critics of SLT, including feminists, have argued that it does not sufficiently account for gender differences in criminal behaviour or the gendered nature of crime, particularly crimes against women (Smart, 1976). In this study, SLT regarding the perpetration of abuse was not evident, with most participants stating that they avoided adopting abusive behaviours or abusing others, as they had seen in their childhood.

8. Gender Symmetry Theory (Murray, 2010)

Gender Symmetry Theory (Murray, 2010) is mentioned here to provide a perspective that considers feminist and hegemonic masculinity theories. Gender symmetry theory is relevant when reviewing the participants' narratives, where many describe males as the primary, but not only, source of physical violence, but also highlight the high rate of abuse received from female partners, particularly in non-physical abuse. In this thesis's research, the severest physical abuse came from males, even considering the disclosure that two female participants described being hospitalised from physical beatings from female partners (See Findings 2: Interviews)

Straus (2010) proposes that men and women are physically violent against each other in intimate relationships at equal rates, while allowing that men are the primary source of severe physical abuse, injury and sexual assault (also Tjaden et al., 2000). Men are also the

primary cause of homicide against current and former partners (Campbell et al., 2007). This challenges the notion that men are the exclusive source of physical violence in intimate relationships. Reflecting Johnson's (2008) concept of 'mutual abuse,' Murray (2010) highlights symmetry in what he terms 'ordinary couple violence,' that men and women abuse each other at equal rates. His 2010 article, citing 200 studies, suggests that this gender symmetry has been hidden and denied in research to avoid countering the feminist male-on-female domestic violence model. He goes on to conclude that this concealment of research into gender symmetry has had a damaging effect on the prevention and treatment programmes that overlook males as victims or downplay violence committed by women (Straus, 2010).

This theory is a subject in itself and falls outside the scope of this thesis, beyond the data provided by the participants. In this researcher's professional experience, there may be mutuality in anger and in arguments in intimate partner relationships. However, the distinguishing feature of a wish to control the other is not present (Johnson, 2008). In this thesis research, the participant male sample was too small to establish any gender symmetry argument.

9. Unified Dynamics Theory (UDT)

As reflected in this thesis, Research question number 4 sought to record relevant information about similarities of perpetrator and victim behaviours. As part of that concept, UDT (Daly, 2024), is a developing sociological framework designed to examine similarities in the behaviours of both perpetrators and victims of intimate partner abuse (IPA) across sexualities and cultures, including in both heterosexual and LGBT+ relationships (Hill, 2019). The theory challenges the idea that abuse dynamics differ fundamentally between groups. While traditional IPA models often focus on gender as the primary lens for understanding abuse, Unified Dynamics Theory suggests that the mechanisms of abuse, such as coercion, physical violence, emotional manipulation, isolation, and cumulative trauma, go beyond identity categories. This framework does not deny the role of social structures, such as patriarchy or heteronormativity. However, it broadens the focus to include the underlying IPA behavioural and relational dynamics that repeat across diverse populations. In doing so, it aims to offer a more inclusive, trauma-informed, and empirically grounded understanding of IPA and inform

societal responses to it. It reflects in part the work of Hill (2019), who made a similar observation about male perpetrators of domestic violence across cultures.

10. Choice Theory

Choice Theory (CT), developed by Glasser (1988), proposed that all human behaviour is based on choices and driven by an individual's attempts to fulfil basic needs. Central to Glasser's theory is the idea that behaviour is personal choice, not a reaction to external stimuli. Glasser (1988) states that behaviour is not separate from choice; they are linked. Individuals choose how to behave at any time. Individuals can only control their behaviours, not those of others (ibid). Choices are based on fulfilling five basic needs, including survival, love and belonging, power, freedom, and fun. Glasser argues that external forces do not control individuals, but individuals consciously or unconsciously make personally motivated choices to meet these personal needs. In the context of intimate partner abuse, CT can help explain how perpetrators' actions are the result of choices made to assert control and power over another. It also affects the victim's behaviour.

While CT emphasises personal responsibility and internal motivation, it has been criticised for overlooking the structural, social, contextual and psychological constraints that limit genuine choice (Gilligan, 1982; Herman, 1992). This is particularly important in the context of victimisation from abuse, trauma, and inequality. Critics argue that victims of intimate partner abuse may not have the freedom to make autonomous choices, particularly when faced with the myriad dynamics of abuse. This may be due to fear of the perpetrator and being subject to controlling tactics, including experiencing physical and sexual violence, coercive control, economic dependency, or the effects of cumulative trauma (Herman, 1992; Stark, 2007; Kelly, 1988). The theory's emphasis on personal choice can obscure the impact of systemic social oppression, such as patriarchy, gender inequality, and marginalisation. From a feminist and trauma-informed perspective, behaviour is often shaped by power dynamics and survival strategies, which Choice Theory does not appear to account for (ibid).

11. Traumagenic Dynamics Model and Cumulative Trauma Theory

The Traumagenic Dynamics Model (Finkelhor & Browne, 1985) is a foundational framework for understanding the long-term psychological impact of child sexual abuse. It identifies four

key dynamics that shape the long-term impact of child sexual abuse: traumatic sexualization (leading to confusion, shame, or distorted beliefs about sex and relationships), betrayal (violation of trust by the abuser), powerlessness (the inability to stop or escape the abuse, often resulting in long-term feelings of helplessness, fear, or vulnerability), and stigmatization (the internalisation of shame, guilt, or a sense of being damaged, which can lead to a life of secrecy, isolation, and low self-worth) (ibid). These dynamics help explain how abuse disrupts a child's emotional and psychological development, often leading to patterns of shame, distorted intimacy, and vulnerability to sexual abuse in later relationships as teens and adults. The model has been widely applied in clinical and forensic contexts and is particularly relevant to this study, which echoed these dynamics and appeared to shape their later experiences of intimate partner abuse. Eleven participants (55%) disclosed childhood sexual trauma (unsolicited data, as this was not a research question), and 17 (85%) had experienced rape as an adult (See Discussion section: 'Widespread exposure to child abuse.' Also, Discussion: 'Theoretical Implications.')

This is supported by Cumulative Trauma Theory (Kira, 2001), which posits that trauma is not a singular event but a layered, chronic process that accumulates and intensifies over time. This is especially the case when early traumatic experiences remain inadequately addressed or unresolved or are compounded by later additional traumatic experiences (Herman, 1992). Unlike models that focus on isolated traumatic incidents, cumulative trauma theory emphasises the interactive and cumulative effects of multiple traumas (also Kelly, 1988). This is particularly the case when rooted in power-based interpersonal means of oppression such as abuse, neglect, or discrimination (ibid). In this study, many participants described long-term patterns of victimisation beginning in childhood and extending into adulthood, suggesting that trauma was both developmentally embedded and relationally reinforced. Cumulative trauma theory provides a framework for understanding how such repeated trauma exposure can erode psychological resilience, increase vulnerability to unhealthy relationships, and perpetuate cycles of abuse (also see Herman, 1992).

This approach aligns with Herman's (1992) work on complex trauma, which highlights the distinct and profound impact of sustained, interpersonal trauma (such as child sexual abuse or domestic abuse) on a person's identity, their sense of safety, and their capacity to

form and maintain healthy relationships. Herman also critiques trauma frameworks that focus solely on single-event experiences. She argues that chronic trauma in relationships leads to more pervasive psychological harm, particularly through loss of control, disempowerment, and betrayal. These patterns were frequently seen in the lived experiences of many of the participants in this study.

12. Intersectionality Theory

Intersectionality theory (Crenshaw, 1991) explains how various aspects of identity, including gender, race, sexuality, class, and disability, intersect to shape a person's experiences of oppression or privilege. The theory suggests that as these factors intersect, they create unique forms of marginalisation. In the context of intimate partner abuse (IPA), intersectionality helps explain why some victims, such as bisexual individuals, may face greater barriers to recognition, support, or justice. Their experiences cannot be understood through one identity alone but must be seen through the overlapping effects of multiple social discrimination variations. (See Bisexuality chapter: 'Intersectionality.') This researcher would posit that intersectionality applies to everyone based on our combination of lived experiences (Collins & Bilge, 2020).

Theoretical contributions

My thesis investigates the lived experiences of bisexual individual participants who have been subject to IPA. My research contributes to three central issues. First, it challenges heteronormative and monosexual paradigms by proposing a bisexual inclusive framework for understanding IPA. Secondly, in methodology, it used reflexive thematic analysis to focus on participants' bisexual narratives and voices. Finally, from a practical standpoint, it proposes a new educational and training method (Dynamics of IPA) to better identify and respond to IPA in the bisexual and other communities, making it accessible and understandable to a broad audience regardless of educational and language comprehension levels. The theories discussed in this chapter are applied, analysed, and discussed throughout this thesis, as they reflect the findings from the research participants and the supporting chapters.

For further discussion on theory, please see Discussion: *Theoretical Implications*. Also see Appendix M: *Theories of abuse*. Also, the Methodology and Methods chapters, and in the Intimate Partner Abuse chapter: *Supporting theoretical tenets*.

Summary

This chapter introduced the theoretical foundations underpinning the study, framed within a social constructionist perspective. A range of key theories were reviewed, including feminist, power and control, stigma and labelling, coercive control, hegemonic masculinity, minority stress, social learning, gender symmetry, unified dynamics, choice, traumagenic and cumulative trauma, and intersectionality. Together, these frameworks provide a multi-dimensional lens through which bisexual intimate partner abuse can be analysed, highlighting both structural and interpersonal dynamics. This theoretical grounding informs the analysis of findings presented in the following chapters.

4. BISEXUALITY

This chapter examines social and cultural attitudes toward bisexuality, highlighting histories, stereotypes, and exclusion both within and outside the LGBT+ community. It also considers how stigma, minority stress, and trauma shape bisexual experiences and inform the study's focus on intimate partner abuse.

Introduction

In this chapter, various aspects of bisexuality will be reviewed, including attitudes toward bisexuality and what it means to be bisexual. Definitions of bisexuality are explored, and topics such as discrimination, biphobia, and the over-sexualisation of bisexual individuals are discussed. Such issues as bisexual stereotypes, appropriation, and abuse are examined alongside the challenges of marginalisation, stigmatisation, minority stress, and their impact on bisexual mental health. Finally, recommendations for future bisexual research, particularly immersive and community-based approaches, will be outlined. For further information on the subject, please see '*The Bisexuality Report*' (Barker, Richards & Bowes-Catton, 2012) <https://bicomcommunitynews.co.uk/wp-content/uploads/2020/05/TheBisexualityReportFeb2012-1.pdf>

This thesis is focused on intimate partner abuse in the bisexual community, about which there is limited research and data. Bisexuality itself is a subject well-studied and discussed, with new research emerging regularly. This chapter about bisexuality is included to provide context towards understanding IPA in the bisexual population. I believe that it is important for the reader to appreciate where bisexuality sits and is perceived in society by the heterosexual and LGT+ communities, and how the bisexual community sees itself. It is a community fraught with difficulties, from definitions, stereotypes, and myths to the repeated questioning of its very existence, all of which I briefly touch on here (Barker, Richards & Bowes-Catton, 2012; Lindasusan, 2011).

A social sampling of attitudes toward bisexuals

The following brief sample narratives provide context for bisexual biphobia from personal experiences faced during this thesis research.

In the early Summer of 2021, at a meeting with the head of a New York LGBT+ coalition, he asked me about my Ph.D. When I mentioned my interest in bisexual IPA, he informed me that even though he was a gay man, he also had sex with women.

‘So, you’re bisexual!’ I exclaimed. He recoiled aghast. ‘Absolutely not!’ he said, lowering his voice. ‘If I were to say that I was bisexual, my credibility as a LGBT+ professional would be in shreds.’ This set the tone for the potential difficulties in recruiting participants for my study.

At a Pride event in 2021, I had a conversation with a female attendee. She told me that she was bisexual. She informed me that she rarely, if ever, identified as bisexual due to negative bi-phobic responses from both the LGB+ and heterosexual communities. She said that if she was dating a woman, she identified as lesbian; if she dated a man, she identified as ‘straight.’

‘If I identify as a bisexual in a lesbian bar, I’m shunned as not ‘gay enough,’ or as a ‘try-sexual,’ not a real lesbian. If I identify as bisexual with my straight friends, the guys get all sexed up thinking that I am a ‘performance lesbian,’ and they hope to see me make out with another woman. So, I say nothing. I find it unclear that I can’t be who I am and it messes with my head’

More recently, my thesis came up for discussion with a male gay friend. He laughed heartily at the idea of bisexuals. ‘They don’t exist. It’s all behavioural,’ he reassured me, ‘they’re just experimenting. They’ll eventually bounce back to one side or the other.’

And from the media. In the U.S. TV series ‘30 Rock’, the character Liz Lemon, when asked about bisexuality, responded ‘There’s no such thing as bisexual. That’s just something they invented in the ‘90s to sell hair products.’ (Season 1, Episode 5).

The icing on the cake goes to a hospital medical administrator’s wife who, on hearing of my LGBT+ research, quipped, ‘There is no gay.’

About bisexuality

‘The term bisexual’ is used to describe a person who experiences emotional, romantic and/or sexual attractions to, or engages in romantic or sexual relationships with, more than one sex or gender’ (APA, 2017).

Defining bisexuality within the research context has been described as like ‘trying to nail Jello to the wall.’ (McLean, 2018, P. 37)

Despite ample evidence that bisexuality is an established and distinct sexual orientation and gender identity, many people believe that bisexuality does not really exist, seen as a behaviour as opposed to a sexual orientation (Lawrence-Tourinho, 2019). Barker and Langdridge (2008, p. 389) inform us that bisexuality is often seen as a marginalised and silenced identity across several (all?) domains, including mainstream media, LGBT+ communities, sexology, and the fields of psychology and psychotherapy. As a result, bisexual people suffer from exclusion, bi-invisibility or erasure (where the existence or legitimacy of bisexuality is denied or questioned) and bi-negativity (negative stereotypes and attitudes about bisexual people) from both the lesbian and gay community and the heterosexual community (Barker, Richards & Bowes-Catton, 2012; Lindasusan, 2011; GLAAD, 2024). The binary concept of sexuality, which proposes that there are only two categories of sexy—male or female—contributes to this 'bisexual invisibility' (Yoshino, 2000). Monosexism, which prioritises the attraction or sexual behaviours towards single-sex or gender among gay, lesbian, and heterosexual individuals, also enforces this invisibility (Pollitt & Roberts, 2021). The binary perspective on sexuality and monosexism manifests itself in everyday conceptualisations of sexuality, as well as in the portrayals of sexuality in media and popular culture (Monro, 2015). Consequently, bisexuality is often ignored or suppressed in sexual discourses, and its invisibility is maintained through three methods: *erasure*, leading to an absence of bisexual voices in heterosexual and LGT+ arenas; *appropriation* of bisexuals as any other identity (heterosexual/LGT+) than bisexual or subsuming bisexuality under the LGT+ acronym suppressing bisexual voices; and *assimilation*, by bisexuals assimilating to other identities such as heterosexual or gay to avoid conflict (McLean, 2018, pp. 77-93).

This rejection of bisexuals by the straight and gay communities may force some bisexual people to become what this researcher terms 'social chameleons' (McLean, 2018, pp. 77-93). To fit in socially and to avoid conflict or rejection, they identify as the 'preferred' dating gender to fit into the community of the person with whom they are in a relationship (ibid). A bisexual woman, for example, may identify as lesbian when dating a woman if they are at a lesbian club. If she is dating a man, she may refer to herself as heterosexual. Or say nothing at all, allowing the people they are with to make their own assumptions.

They do this to avoid hostility by same-sex people who accuse them of 'not being gay enough' (Tales, 2023). This is reflected in the interview conducted for this thesis survey, as documented in Findings (2), in which participants shared their experiences. This exclusion and marginalisation, and the need for adaptation and accommodation to fit in by bisexuals, contribute to higher rates of mental health issues, including depression, anxiety, and low self-esteem (Barker, Richards & Bowes-Catton, 2012, p. 26-29; Meyer, 2003). For example, (ibid) cites surveys showing that bisexual men are 6.3 times and bisexual women 5.9 times more likely to report having been suicidal than heterosexual people. Another study cited recorded at a UK bisexual conference found that 25% of people had a diagnosis of mental health issues, with the highest proportions reporting depression (16%), anxiety (8%), and self-harm (8%). 36% of attendees had either single (24%) or multiple (12%) mental or physical health impairments that interfere with their daily lives (ibid).

Other issues that arise are a lack of self-validation and confusion with identity, leading to poor quality of meaningful relationships (McLean, 2008). It may also risk further exclusion from other aspects of social life and the development of poor coping mechanisms, including excessive alcohol and substance abuse (Burgard et al., 2005; Kertzner et al., 2009).

McLean (2018:77-93) informs us that, notwithstanding the increasing recognition and acceptance of LGBT+ identities in many Western nations (the United Nations had its first discussion about bisexuality in 2018), bisexuality continues to be often overlooked. This is despite substantial emerging theoretical and academic interest and research on the subject and the bisexual population.

What is bisexuality?

Being bisexual is a matter of self-identification. If a person says that they're bisexual, then they are. They do not need to qualify their 'membership.' As one bisexual friend said to me, 'It's who I am. Period.'

Glaad (2023) advises that identifying as bisexual does not require any specific sexual experiences or, indeed, any sexual experience at all. This aligns exactly with people living a straight or gay. Terms used to identify the bisexual community include 'bi' or 'bisexual.' The term 'bi+' is used by some to include people who identify as bi or pan-sexual, gender fluid and other identities that show an interest in multiple genders. People who are exploring their sexuality or gender identity and attractions may identify as bi-curious (ibid).

The term 'bisexuality' to many refers to people who are sexually attracted to persons of the same sex and the opposite sex, an extension of the gender binary. The gender binary, also referred to as gender binarism, is the system that categorises gender into two distinct and opposing forms, namely masculine and feminine (Morgenroth et al. 2021). This simplistic understanding does not, however, reflect the intersectional diversity that the bisexual community comprises, making an absolute definition of bisexuality difficult to determine.

Galupo (2018, as cited in Pollitt & Roberts, 2021, p. 6) confirm this, informing us that bisexuality may be seen as '*reinforcing the gender binary*' due to the perception of bisexual monosexism, the belief that people should only be attracted to one gender. Defining bisexuality as an 'attraction to men and women' may be perceived as exclusionary to trans and nonbinary people and to those who do not self-identify within the 'men and women' binary categories (Galupo, 2018; Gonen, 2013; Gonzalez et al., 2017; Israel, 2015).

Galupo (2018) and Gonen (2013) highlight that 'traditional' notions of the gender binary reflected in this definition of bisexuality may be a source of distress to and contribute to the erasure of transgender people. It may also be a source of internalised biphobia for bisexuals when they are engaging with LGT+ communities that do not acknowledge the broad range of bisexual identities and attractions. Even if a broader gender definition is acknowledged, the continued philosophical perception of monosexism may be a source of

justification for anti-bisexual attitudes (Pollitt & Roberts, 2021). Bisexual people may, therefore, benefit from being involved in bisexual-specific communities as opposed to LGBT+ communities (ibid) or heterosexual communities.

Bisexual terminology continues to evolve (Stonewall, 2022). Initial definitions referred to bisexuality as an attraction to both genders. Since the 1980s, this has now evolved to define bisexuality as an attraction to more than one gender. Another term, 'pansexual', emerged in response to the concern that bisexuality was upholding the gender binary. Pansexual, meaning all-sexual, sees attraction as not constrained by gender (Glaad, 2023) This does not imply that bisexual people are only attracted to two genders. The terms 'bisexual' or 'pansexual' may be used by people who are attracted to more than one gender, using one or the other term. Others use neither. (ibid).

Bisexual definitions

The following examples illustrate the variety of definitions and understandings of bisexuality.

- According to the American Institute of Bisexuality (AIB, 2023) *'Bisexuality is a sexual orientation that describes people who have both homosexual and heterosexual attractions. Colloquially, this means attraction that is not limited by sex or gender.'*
- The Bisexual Resource Centre (BRC, 2022) states that there is no one definition for bisexuality. BRC employs 'bisexual' and 'bi+' as all-encompassing terms for individuals who acknowledge their potential for emotional and sexual attraction to more than one gender, which includes labels such as bisexual, pansexual, omnisexual, fluid, queer, asexual, and other self-defined identifiers.
- *'Bisexuality is a sexual orientation and bisexual (commonly abbreviated to 'bi') people are those who have the capacity to form attraction and/or relationships to more than one gender'* (The Trevor Project, 2021).

- The term 'bisexual' refers to an individual who feels emotional, romantic, and/or sexual attraction toward or engages in romantic or sexual relationships with individuals of more than one sex or gender (APA, 2023).
- Lindasusan (2011) advises that the term 'bisexual' is, an imperfect term. It can suggest a binary notion of gender that many believe overlooks transgender and gender-diverse individuals. Contrary to this, a 2016 transgender survey recorded that 20% of the participants identified as bisexual (Herman et al., 2016). Some people may interpret it as implying a necessity for equal attraction towards women and men, or only towards women and men who identify with the gender they were born with. In the current context of the movement for complete equality and respect for people of all sexual orientations and gender identities, the term "bisexual" is most recognised to describe individuals whose attractions do not fit into a binary paradigm (either/or). This term, along with MSMW (men who have sex with men and women) and WSMW (women who have sex with men and women), is also most frequently employed in research (ibid).
- In popular culture, the term 'bisexual' now has a slightly different meaning. The phrase used to describe the physical attraction to more than one gender is wide and inclusive. Bisexuality, like other sexual identities, is diverse. A bisexual individual may be attracted to more than one sex or gender, or different sexes or genders, in various ways. Thus, being bisexual can take many different forms (Guzman, 2023).
- Ochs (2023) defines bisexuality as *'the potential to be attracted—romantically and/or sexually—to people of more than one sex and/or gender, not necessarily at the same time, not necessarily in the same way, and not necessarily to the same degree.'*
- In minority Western cultures, the term 'bisexual' is typically used to describe someone who experiences a sexual attraction to more than one gender or whose attractions are based on traits other than gender (such as build or eye colour) (Bowes-Catton. Hayfield, 2015).

Swan and Habibi (2019, p. 13) advise that it is important for researchers studying bisexuality to set a clear definition of what bisexuality is to allow for comparative studies and to drive the public discourse. They also stress the necessity of consistent bisexual terminology along with the need to explain why one term is used over another. That said (Swan & Habibi, 2019, p. 37), they state that defining bisexuality within the research context is like *'trying to nail Jello to the wall.'*

In providing these definitions, the intent is to reflect the evolving nature of the term bisexuality and of bisexuality itself. The range of definitions reflects the reality of how bisexuality is regarded, no longer purely as a binary term but portraying how it fits into the current definitions of sexual and gender orientations, definitions and attractions. Some might argue that bisexuality is precisely as it is traditionally represented: a sexual attraction to same- and or opposite-sex partners (Kinsey et al., 1948). Indeed, in my interviews, most of the participants saw bisexuality in this way, including the two trans participants. However, it has expanded to include other definitions of attraction, including those proposed by queer, non-binary and trans people. Definitions of bisexuality have shifted to include attraction to multiple genders or, regardless of gender, reflecting a more fluid and inclusive perspective (Rust, 2000). Others argue that pansexual (as reflected by two of the interview participants) is a more inclusive term that avoids the perceived barriers that the 'bi' imposes. And again, it may be. My intent is not to impose any definition on anyone's self-identity; my purpose here is to reflect the diversity of experiences of those who identify as bisexual.

Bisexual definition from Glaad, (2023)

'Bisexual: an adjective that characterises an individual with the capacity to experience physical, romantic, and/or emotional attraction towards individuals of multiple genders, which may not occur simultaneously, uniformly, or to an equal extent. The term 'bisexual' denotes the inclusion of genders that are both similar to and distinct from one's own gender. Individuals can encounter this attraction in various manners and intensities throughout their lives (Glaad, 2023).

It is important to note that being bisexual does not necessitate specific sexual experiences, nor does it require any sexual experience at all for someone to identify as bisexual. Some individuals use the terms 'bisexual' and 'bi' to describe this community, while others may employ 'bi+' as a more inclusive term that encompasses those who identify as bisexual, pansexual, fluid, queer, and other identities that

denote an inclination towards multiple genders. Similarly, akin to the process of questioning one's sexual orientation, individuals may refer to themselves as bicurious if they are exploring whether they are attracted to individuals of the same gender as well as those of different genders (ibid).

'Biphobia' is the term used to describe prejudice or animosity directed towards individuals who identify as bisexual, which can manifest through both verbal and behavioural expressions. Biphobia often surfaces in the form of comments that cast doubt on the validity of bisexuality as a genuine sexual orientation. These comments may inaccurately suggest that bisexuality is merely a passing phase or a concealment strategy for individuals who are not yet comfortable with coming out as gay. However, a more precise description of this behaviour is intolerance, bias, or prejudice (ibid).'

In conclusion, bisexuality's definition should not be imposed as there may not be one absolute definition. Instead, the term should reflect the stated preferences of people who identify as bisexual.

A brief history of bisexuality and LGT+.

To understand how bisexuality has evolved and its definition has changed, we must examine the past to comprehend the present. Taking a snapshot of bisexuality as it is now defined does not provide any context as to how it has attained its present position of definition without knowing how it got there. A review of the history of bisexuality's development and evolution will assist in providing a basis on which to understand bisexualities' present status.

People have had an attraction to more than one gender throughout antiquity, patterns of which have been recorded across history and cultures (Herek, 2002, p. 264). In the middle of the 19th century, a contemporary concept of bisexuality emerged within the context of three interrelated fields of study: biology, psychology, and sexuality. The anatomist Robert Bentley Todd, in 1859, used the term 'bisexuality' to denote the existence of both 'male' and 'female' physical attributes within the same body (Robinson Rhodes, 2021). The contemporary interpretation of bisexuality, referring to sexual and romantic attraction rather than gendered or sexed traits, only emerged in the 1910s. Nevertheless, for a considerable time, various interpretations of bisexuality coexisted, occasionally even within the same texts (ibid; Monro, 2015).

Sigmund Freud made his assertion about 'universal' bisexuality in 1915 defining it both as a blend of masculinity and femininity and as a sexual or romantic attraction, stating, '*the sexual object is a sort of mirror of the subject's bisexual nature*' (Lewes, 1988). Russ (1988) proposes that Freud believed that bisexuality was a universal human trait and that every person is sexually attracted to both sexes. Freud's assertion has been criticised for oversimplifying the complexities of human sexuality and for being overly reductive. Critics argue that his theory fails to account for the diverse sexual orientations and identities found across different cultures and individuals. Additionally, Freud's emphasis on universal bisexuality may reflect the cultural biases of his era rather than a scientifically robust understanding of human sexuality, leading to a narrow interpretation of sexual behaviour and identity (Seidman, 1993). Freud's addictions to cocaine and alcohol may have harmed his work, possibly leading to bias and lapses in judgment in the pursuit of some of his theories (Thornton, 1983). Indeed, Freud's shift from studying the anatomy of the brain to exploring the human psyche occurred following his publishing in 1884 of a paper about cocaine, '*Über Coca*.' (Markel, 2011). How these additions affected Freud's work remains a matter of debate, and much of his work still merits praise.

Kinsey (1948) research into sexology conceptualised bisexuality as attraction to 'both sexes' within a binary framework. Bisexuality as a distinct sexual identity and sexual orientation was established in the 1970s with the formation of bisexual social and political groups. It was not until the 1980s that bisexuals, through organised effort, became more visible. In 1981, the first bisexual group in the United Kingdom, the London Bisexual Group, was founded (Stonewall, 2023). With the 1980s AIDS epidemic, the public became more aware of bisexual people mainly as a possible source of HIV infection between men and women (Herek, 2020). Despite the scapegoating of bisexual men for the spread of AIDS, there is no evidence of a bisexual bridge for the transmission of HIV (Roth et al., 2021). This period saw significant misinformation and prejudice, which contributed to the marginalisation of bisexuals and other groups within the LGBT+ communities (Bell et al., 2017). Bisexuality became more actively involved in the gay community in the 1990s, being added to gay and lesbian discussions and events. The Pride bisexual flag for events was created in 1998 by Micheal Page (Page, 2023). The flag was designed to allow bisexual individuals to establish themselves as a separate identity within the LGBT+ groups, to allow bisexual individuals to

feel included in events, and to promote bisexual visibility. The flag consists of three horizontal stripes: pink (representing attraction to the same gender), blue (representing attraction to different genders), and a blended purple stripe in the middle (symbolising attraction to multiple genders) (Page, 1998; Tucker, 2009).

Marginalisation. Decriminalisation of homosexuality: Mottier (2012) informs us that in antiquity, people were more concerned with not starving than talking about sex. That changed with the advent of Christianity when sex became a moral tenet, precisely positioning it as an 'original sin.' This, according to Foucault (1978), was the adoption of sex into a tool of power and its use as a power dynamic, surveillance and a means of control by authorities over the population. He went on to argue that sexuality is a social construction regulated through power and knowledge. Hawkes (1996) discusses how sexual behaviour and norms have evolved and been influenced by cultural and historical norms. Church, medical and governmental powers historically regulated sex and sexuality (Foucault, 1978), and only recently has this rigid control in the Western World begun to loosen. I say 'begun' as we still have generations for whom this legacy of control still harkens, and these newfound 'freedoms' have not pervaded evenly across society, where we see anything that exists outside of heteronormative society still treated with suspicion. The control of sex, sexuality and gender exists through cultures worldwide, particularly as a means of controlling women. Historically and to the present day, there exists a (obsessive?) societal need to control and regulate sex and sexuality, particularly in the areas of LGBT+ communities and individuals. This stems from historical, cultural, and political factors that emphasise heteronormativity and patriarchy (Foucault, 1978; Rubin, 1984). Advances against this have been made by the emergence of a new wave of feminism and lesbian and gay activism in the 1970s that challenged the heteronormative status quo (Adams, 1995). These movements challenged traditional norms, advocating for sexual liberation, equality, and the decriminalisation of homosexuality (ibid).

The LGBT+ population belongs to a group of marginalised communities that have been historically subjected by society to minoritisation, stigmatisation, and criminalisation (Donovan & Hester, 2015, p. 212; Daly, 2020). This statement strongly emphasises the position and lived experiences of the LGBT+ population, which have been characterised by persistent oppression and discrimination. Until recently, being a gay man was considered a criminal

offence. In many countries, through state- and religious-sanctioned oppression, it remains punishable by imprisonment, torture, or death (Daly, 2020, p. 18). Todd (2021, p. 22) informs us that the term homosexuality was coined in the late 1960s by a Hungarian doctor as part of the medicalisation of sexuality. Historically, the term 'homosexuality' was used in medical and psychiatric contexts to pathologise same-sex attraction. Homosexuality was listed as a mental disorder in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (DSM) until 1973 (Minton, 2002).

'Homosexuality' can be considered an offensive term by many, as the term still carries lingering associations with pathology, which can feel stigmatising to some; it has been replaced with terms such as 'gay,' 'lesbian,' or 'queer,' which are seen as more affirming. It became the default term to describe same-sex behaviours. The term is often considered gendered because it traditionally implies a binary understanding of sexual orientation (homosexual, heterosexual), focusing on same-sex attraction within male-male or female-female dynamics (Sedgwick, 1990). While women's homosexuality was never illegal, lesbianism was not criminalised by British authorities during the Victorian era, partly because they feared that doing so would bring attention to it and encourage women to explore same-sex relationships (Jeffreys, 1985), repeal of the criminality of male homosexuality was not started until the introduction of the Sexual Offences Act 1967. However, it took another 36 years for comprehensive reform to occur. The law of 1885, which criminalised anal sex as gross indecency, was finally abolished with the implementation of the Sexual Offences Act 2003. Full decriminalisation in the United Kingdom occurred in 2013. This repeal marked a significant milestone as it meant that, for the first time in 470 years, England and Wales no longer had a criminal code that punished gay sexuality. In Northern Ireland, the ban on anal sex remained in place until 2008, when it was finally repealed. Scotland's anti-gay laws were repealed in 2009, but the specific prohibition on sodomy did not come into effect until 2013 (Tatchell, 2017).

Sexuality beyond the binary

Sexuality describes a person's ability for sexual feelings, sexual and romantic attractions, and behaviours, as well as their sexual orientation and identity (Zambon, 2025). A person's sexuality, or sexual orientation, determines whom they do or do not feel sexual or

romantic attraction toward (ibid). There are many sexual orientations, and people who identify with one or more may find that their sexuality changes over time, described as sexual fluidity (ibid).

Sexuality is increasingly drifting away from the men/women, heterosexual/homosexual binaries (Eisner, 2013). Binary models exclude identities that reflect attraction beyond fixed gender categorisations, such as bisexuality, pansexuality, and queer. Outside of binary thinking, sexuality should be viewed as flexible, contextual, and shaped by personal experiences and broader societal influences. Kinsey et al. (1948), among their research findings, posited that sexuality is not fixed or binary but exists on a continuum. Sedgwick (1990) criticised the rigidity of the homosexual/heterosexual binary, asserting that it restricts the full understanding of sexual identity and desire. She suggests that it is a tool for regulation and social control rather than a reflection of the range of human experience. Foucault (1978) argued that sexuality is a social construct. It is moulded by power, institutions, and societal discourse, rather than based solely on biology. Eisner (2013) recognises attraction to people of all genders, including trans and non-binary individuals. He reframed bisexuality as a non-binary and inclusive identity that resists monosexism (the belief that people should only be attracted to one gender).

Bisexuality and pansexuality

In 2011, Gates, highlighting research from UCLA, highlighted that bisexuals represent the largest group within the LGBT+ acronym (see Figure 13 in Methods: Percentage of adults who identify as lesbian, gay and bisexual). In that research, the range of bisexual individuals is from 0.5% to 3.5% of the population. The term 'pansexual' is not mentioned.

In a more recent survey by Gallup (2024), (see below), bisexuality remains the most common non-heterosexual identity in the U.S., representing 4.4% of the general population and 57.3% of LGBT+ adults. Those who identify as pansexual represent 0.1% of the general population and 1.7% of LGBT+ adults.

LGBTQ+ Identity Among U.S. Adults and LGBTQ+ Adults, 2023

Which of the following do you consider yourself to be? You can select as many as apply. Straight or heterosexual; Lesbian; Gay; Bisexual; Transgender

	U.S. adults	LGBTQ+ adults
	%	%
Lesbian	1.2	15.1
Gay	1.4	18.1
Bisexual	4.4	57.3
Transgender	0.9	11.8
Pansexual (vol.)	0.1	1.7
Asexual (vol.)	0.1	1.3
Queer (vol.)	<0.1	0.1
Other LGBTQ+ (vol.)	0.1	1.1

Sum of categories may exceed 100% or the total because respondents can choose multiple identities.
(vol.) = Volunteered response
Based on aggregated data from 2023 Gallup telephone polls.

GALLUP

LGBTQ+ Identity Among U.S. Adults, 2023. Figure: 1

(Jones, 2024)

Bisexuality refers to feeling attracted to multiple genders, while pansexuality is attraction to all genders (Glaad, 2023) (see chapter in Bisexuality: Definitions, also Glossary and Terminology: Pansexuality). In this research, two of the younger participants stated that they preferred to use the term 'pansexual' over bisexuality as it was regarded as more inclusive and socially acceptable. They noted that bisexuality identification is a source of social exclusion and scorn, while pansexuality is not. They also remarked that in their experience, the terms were interchangeable and understood them to mean more or less the same thing. Nelson et al. (2022, pp. 713-714), while clearly delineating between the pan- and bisexuality, highlight the social stigma faced by individuals identifying publicly as bisexual, while identifying using the term pansexual may be deemed safer as a result. A 2017 survey (HRC, 2022) showed that the term pansexual has become more popular among younger people. The survey found that 15.3% of LGBT+ youth surveyed identified as pansexual, a significant rise from 7% in 2012 (ibid). See Methods chapter: 'Determining bisexual persons' and 'Changes in the terminology of sexual orientation or gender self-identification.'

Bisexual transgender inclusivity

Bisexuality includes trans and non-binary individuals (Eisner, 2013; Ochs, 1996). Both trans participants in the research interviews easily identified as bisexual. Trans is so closely aligned with bisexuality that the guidelines for researching bisexuality (Barker et al., 2012) are based on those developed for researching trans individuals (Hale, 2009).

See Discussion chapter: 'Trans women may identify as bisexual.'

Discrimination against bisexuals

Despite the societal and legal advances made by the Lesbian, Gay, Bisexual, Transgender, and Queer ("LGBTQ+") communities over the past 20 years, bisexual individuals have been excluded (Childress Burneson, 2018). Bisexuals are routinely discriminated against by heterosexual and LGT+ community members and individuals, compounded by societal denial of the legitimacy of bisexuality. Bisexual individuals are often underrepresented in LGBTQ+ media, advocacy campaigns, and leadership roles (ibid). This occurs even though the bisexual community is larger in population than all the other LG+ acronym communities combined (Gates, 2011; Gallup, 2024).

This discrimination manifests itself in different ways, including (Lindasusan, 2011; Barker, Richards & Bowes-Catton, 2012):

Bisexual erasure or invisibility: This occurs when the existence or legitimacy of bisexuality as individuals, a community, or a group is questioned or denied outright. Bisexual individuals frequently face dismissal, prejudice, and erasure, not just from the heterosexual community but also from lesbian and gay groups (Lawrence-Tourinho, 2019). It is common for their sexual orientation to be discredited, labelled as immoral, or deemed inconsequential (ibid).

Biphobia: the fear, aversion, or discrimination towards bisexuality or individuals within the LGBT+ community who identify as bisexual or are perceived as such (Glaad, 2023).

Dismissing bisexuality as 'just a phase,' sexual exploration, bisexuals labelled as 'try-sexuals.' (Barker, Richards & Bowes-Catton, 2012)

Historical exclusion: many notable people in history and movies were bisexual, a fact ignored by society. 'Marlene Dietrich, Freddie Mercury, Eleanor Roosevelt, and

Walt Whitman, for example, are known for their same-sex relationship, but their relationships with opposite-sex partners are ignored (Lindasusan, 2011).

Double discrimination: Although bisexuals experience many of the same difficulties as gay men and lesbians do, they also have to deal with ‘double discrimination’—discrimination from both heterosexuals and lesbian and gay groups (Yoshino, 2000).

Bisexual prejudices. Seeing bisexuals as untrustworthy, promiscuous, non-monogamous, unfaithful, immoral, spreaders of disease, and misidentified as being gay or lesbian (ibid).

Fetish. Bisexual women are frequently subjected to fetishisation. Their sexual orientation is often misaligned as a transient ‘party girl phase’ or misrepresented as merely a means to gratify heterosexual men's fantasies, for example, labelled as a ‘performance lesbian’ (Mulroy, Clare, 2023; Watson et al, 2021).

These tactics of discrimination serve to ‘other’ bisexual individuals, their experiences and bisexuality itself. This reflects darkly onto the reality of bisexuality IPA, where perpetrators, in rationalising abuse of their partners, may find their actions legitimised and supported by these commonly held discriminatory beliefs (Messinger, 2011).

Biphobia

In our discussion of discrimination against bisexuals, an examination of biphobia is important to provide context for how many of the actions reflect and are similar to those that the LGBT+ communities have also experienced in the form of homophobia and transphobia.

Biphobia refers to the fear, prejudice, or negative attitudes towards bisexuality and bisexual individuals (Glaad, 2023). It can manifest in various ways, such as discrimination, stereotyping, or denial of the legitimacy of bisexuality as a sexual orientation. It may be exhibited by people of any sexual orientation, including those who themselves identify as bisexual, in the form of internalised biphobia (Pollitt & Roberts, 2021; Yoshino, 2000). Biphobia does not exist in a vacuum. It bears many similarities to other types of prejudice, particularly homophobia, and individuals who identify as bisexual often experience a combination of both

(Ochs, 2023). The common component of these terms is 'phobia', defined as 'an extreme or irrational fear of or aversion to something' (Oxford Languages, 2023).

Biphobia is a component of discrimination that was evident throughout my research within the context of the survey and without. It affected my work directly, as when mentioned as a research subject, many of the responses I received were negative, fitting the biphobia narrative. So much so that I stopped talking about it without first vetting that the person I was speaking to would not default to this narrative.

This continues as we examine how bisexuality is treated as a subject within the LGBT+ communities, where bisexual voices are silenced except when it becomes expedient to include them.

'Appropriation.'

Bisexuality may be subject to what McLean (2018) refers to as 'appropriation'; This is the practice of incorporating bisexuality within the LGT+ acronym or under broader gendered terms such as 'queer', which tends to overpower and silence aspects of bisexuality, including the experience that goes with identifying as bisexual (ibid). This inadvertently (or intentionally?) suppresses the distinct interests of bisexual individuals and their communities. It could also be argued that appropriation also refers to the attempts by some LGT+ groups to absorb or dissect bisexuality for political purposes and disruptive interests precisely due to the perceived vulnerability of such a large group lacking a specific definition or a voice (ibid).

The participants in this thesis survey were conscious of being othered by the LGT+ communities. While most participants interviewed disclaimed any sense of 'community' as bisexuals (referring to a bisexual community), they certainly did not feel included in the LGT+ communities either unless they were willing to adapt and present themselves as anything other than bisexual; as lesbians, gay men, trans, etc. (see discussion on 'social chameleons'). Many expressed anger and frustration at this, and one participant encapsulated the feeling when he said that LGBT+ communities were happy to include bisexuals in the acronym but rarely, if ever, took them seriously or defended them from criticism. Further, he accused LGBT+

communities of using bisexuality as a means of expanding gender attraction concepts at the expense of traditional bisexual identities.

The over-sexualisation of bisexual women

Due to their perceived sexual orientation, bisexual people, particularly women, are over-sexualised by some members of society, particularly men, who conflate bisexuality with easy sexual availability, sexual activity and promiscuity (Lindasusan, 2011).

Individuals who identify as bisexual often face the challenge of their sexual orientation not being recognised as valid or genuine. Common sexual misconceptions include the assumption that bisexual individuals are inherently promiscuous, prone to infidelity, unable to maintain monogamous relationships, and characterised by greed (Coday, 2023). In my research, these negative stereotypes were shown to be confused with sexual fluidity as observed by 'straight' partners,' as bisexual individuals described having male or female partners concurrently or exclusively but interchangeably between relationships (same-sex in one relationship and opposite sex in the next). There was little discussion of infidelity, promiscuity or lack of monogamy as a feature in relationships.

Bisexual abuse

Bisexuals may face dehumanisation and be viewed as sexual objects (Coday, 2023). In situations where control cannot be exerted over bisexuals by their jealous, unsupportive or abusive partner, some of these partners may resort to violence, intimidation, and sexual assault, including what is termed as 'corrective rape' (Flanders, 2021). This is an offence perpetrated by males with the misguided intent to 'fix' a person's sexual orientation by forcing them into a sexual act, typically to enforce heterosexuality and traditional gender norms. This was an experience that two of the research participants described that happened to them.

Heterosexual and LGT+ bisexual bias and stereotyping contribute to a reluctance among many bisexuals to report these assaults and offences, leaving many without a support system and facing social isolation (ibid; Coday, 2023; Watson et al, 2021). Duberli (2020) states that many LGBT+ IPA victims first seek within the LGBT+ community to avoid exposure to discrimination (see also Brown & Herman, 2015). Bisexuals, however, as related by this thesis

survey participants, tended to seek help by identifying as heterosexual or lesbian/gay males, although the trans participants in the survey stated that help-seeking for them was extremely difficult to avoid societal stigma.

Bisexual myths

Adapted from (Guzman, 2023; Barker, 2007; Ochs, 2009; Rust, 2000).

Bisexuality is permeated with characterisations, stereotypes, and falsehoods that add to the stress of this marginalised community. Examples of these include the following.

Myth #1: Individuals who declare themselves bisexual are heterosexual; they are merely experimenting or attempting to be popular (Yoshino, 2000).

Reality: Often, individuals identifying as bisexual encounter a prevalent stereotype: their sexual preferences are perceived as merely an attempt to appear 'trendy' or a 'phase' of sexual experimentation. While some might explore their sexuality before identifying as heterosexual or gay, it does not discredit or diminish the legitimacy of those who embrace their bisexuality as a part of their identity (Guzman, 2023; UAB, 2018; Rust, 2000)

Myth #2: Bisexuals are shallow, narcissistic, untrustworthy, and immoral (Sarno et al., 2020)

Reality: These characteristics are not associated with bisexuality; a person's ethics, depth, and trustworthiness are individual traits that are not predetermined by sexual orientation (Monro, 2015).

Myth #3: Politically speaking, bi people betray the cause of lesbian/gay liberation. They pass as heterosexual to avoid trouble and maintain heterosexual privilege (Yoshino, 2020).

Reality: These are two separate and distinct issues. Just like many people in the LGBT+ community, some bisexual individuals may choose to conceal their sexuality to avoid bias and discrimination. The notion of 'passing' as heterosexual can be as harmful to bisexual individuals as it is for any other person forced to hide a part of their identity for safety (Yoshino, 2006). Overlooking the vast number of bisexual individuals who actively advocate for LGBT+ rights perpetuates the myth of

bisexuality being separate from the broader LGBT+ communities (Guzman, 2023; Weiss, 2003).

Myth #4: Bisexual people are equally attracted to men and women.

Reality: Some bisexual individuals may feel an even '50/50 attraction' towards various gender identities. Many do not have such evenly split preferences. Attraction can shift and evolve, and trying to pin it down to specific percentages oversimplifies the intricate nature of sexual attraction (UAB, 2018).

Myth #5: Only women are bisexual (Herbenick et al., 2010)

Reality: The idea that bisexual men are rare stems mainly from their lack of visibility, which is more about societal acceptance than actual numbers. Men are less likely to participate in research (Donovan & Hester, 2014). Bisexual men are often less open about their identity due to the lower levels of acceptance they encounter due to suspicion and pervasive negative stereotyping in the heterosexual and gay male communities (Roberts, Horne, & Hoyt, 2015). Due to this societal resistance towards bisexual men, coupled with deep-rooted misogyny, it is often bisexual women who face the most direct forms of biphobia and discrimination (Guzman, 2023; Rust, 2000).

Myth #6: Bi people tend towards non-monogamy and are more likely to cheat (ibid).

Reality: Promiscuity is not inherently connected to one's sexuality, and labelling all bisexuals as potential cheaters is an unjust way of dismissing their experiences and unfairly influencing partner choices based on sexual orientation (ibid; Barker, 2007). This stereotype may also be confused with sexual fluidity, which describes the capacity for sexual attractions or identity to change over time or across contexts (Diamond, 2008).

Bisexual myths serve to ridicule and eradicate bisexuality by piling criticism upon criticism of bisexuality and bisexual individuals (Monro, 2015). Research shows time and again the effect that bi-erasure and bi-invisibility have on bisexual individuals' self-esteem and, by extension, their mental health (McKetta, 2024; Earnshaw & Chaudoir, 2013; Cochran & Mays,

2011; Burgard, Cochran & Mays, 2005; Kertzner et al., 2009). One participant in my survey said, *'I just don't get it. I am who I am (bisexual). Why does everyone feel the need to have an opinion on it—usually negative?'* They went on to talk about how this affected their mental health. This experience is not unique; the LGBT+ community has been subject to such criticism throughout history. With one exception. Bisexuals face double discrimination with attacks not just from the heterosexual community but also from their fellow members of the LGT+ acronym, the very people with whom they should feel safe (Lindasusan, 2011; Yoshino, 2000).

This brings us to the next section, 'bisexual stereotypes', which compounds and underlines the concept of bi-erasure and invisibility.

Bisexual stereotypes (Cruz, 2016).

The following is a list of the most common bisexual stereotypes that emanate from the heterosexual and LGT+ communities and is adapted from Cruz (2016).

1. Bisexuals and bisexuality do not exist.

This is the most common and deeply ingrained misconception about bisexuality; it hinges on the idea that some people find it hard to comprehend that individuals can be attracted to more than one gender (Angelides, 2001; Yoshino, 2000; Barker, 2007).

2. Bisexuality is just a phase.

Many gay and lesbian individuals have first identified as bisexual to ease the coming out process to their parents. Some might have even considered themselves bisexual while they were still exploring their sexual orientation. For most, bisexuality was not a transitional phase but their ultimate and definite identity. 'Pick a side,' the prevailing thinking is that one may explore, but eventually, one must choose one side (gay/straight) or the other (Lindasusan, 2011; Angelides, 2001; Barker, Richards & Bowes-Catton, 2012).

3. Bisexuals are a small community.

Gates (2011) highlighted that the bisexual population comprises the largest group in the LG+ communities, larger than all the other communities combined. Bisexual individuals may not voice their experiences as prominently as their lesbian and gay

counterparts, but this is more likely attributed to persistent exclusionary stigmas rather than a lack of representation. Despite the size of the bisexual population, they are often underrepresented at LGB+ Pride events (Lindasusan, 2011).

4. 'Bi-erasure is a myth.'

In 2011, the San Francisco Human Rights Commission (Lindasusan, 2011) published a comprehensive 50-page report addressing the issue of bisexual invisibility within the LGBT+ communities, providing substantial evidence that this phenomenon persists. According to the commission's findings, the usage of terms like 'gay marriage' or 'homosexuality' lacks inclusivity and disregards the identity of bisexual individuals (ibid).

5. Bisexuals are promiscuous.

Bisexual individuals are not inherently more sexually promiscuous than any other individual, be they gay or straight. While being attracted to more than one gender does broaden the potential partner pool, it does not necessarily enhance the propensity to form physical or emotional connections with these partners (Barker, 2007). Sometimes, as recounted by this research, observations of 'promiscuity' are confused with sexual fluidity.

6. Bisexuals cheat; they are incapable of monogamy.

Unfaithfulness in a relationship is a personal character trait. A person's cheating behaviour is not determined by their sexuality or gender identity (McLean, 2008). Participants from this research described how some, typically straight male partners, assumed that their bisexual female partner would cheat on them because of their bisexuality.

7. All bisexuals are polyamorous.

Polyamory describes consensual non-monogamy, which involves an individual having multiple simultaneous romantic or sexual partners (Lockett, 2022). While there might be a perceived higher prevalence of polyamory in the LGB+ communities, there is no

evidence to suggest that polyamory is more commonly associated with bisexuality (Cruz, 2016).

8. 'Bisexuals fear commitment.'

The ability to commit to a relationship is a personal attribute unrelated to a sexual orientation (Rust, 2000).

9. Women are inherently bisexual.

The objectification of women in today's modern culture is widespread and pervasive. While mainstream media persistently exploits inferred female bisexuality as a tactic to sell products, not all women are bisexual (Diamond, 2008). Diamond (ibid), in discussing female sexual fluidity, proposes that women's sexual and romantic attractions can be more flexible and influenced by emotional or relational factors rather than strictly biological or sexual factors. This factor was echoed in this thesis survey, where some female participants discussed how they felt more comfortable in relationships with other women as opposed to men following abuse by men.

10. Bisexuals are only attracted to binary genders.

Robyn Ochs (2023) describes bisexuality as the potential *"to be attracted—romantically and/or sexually—to people of more than one sex and/or gender, not necessarily at the same time, not necessarily in the same way, and not necessarily to the same degree."* Angelides (2008) discusses how, traditionally, bisexuality has been understood as the attraction to both men and women, reflecting a binary view of gender.

11. Bisexual behaviour spreads HIV.

During the AIDS epidemic of the 1980s, gay men were targeted as transmitters of the disease through bodily fluids deposited by unprotected sex. Bisexual men were accused of similar transmission to women and the heterosexual population as a result of their same-sex relationships. There is no evidence of a bisexual bridge for the transmission of HIV to women. Being bisexual does not inherently increase the likelihood of transmitting the disease (Roth et al., 2021). Men who engage in sexual activities with other men face a heightened risk of contracting HIV compared to other

populations if they do so without the use of a condom or *Lenacapavir* (a new injectable HIV prevention medication). There are very high rates of HIV transmission in the heterosexual population. Structural inequalities, lack of access to healthcare, and insufficient education about prevention and treatment are driving this (UNAIDS, 2024).

12. Bisexuals enjoy 'threesomes.'

'Threesomes' are not a defining characteristic of a bisexual lifestyle (Barker & Langdridge, 2008).

(This section was adapted from Cruz, 2016).

Bisexual and LGT+ discrimination

Community diversity: The LGBT+ acronym '*incorrectly infers a unitary entity*' (Daly, 2020, p. 17). Instead, it refers to a '*group of individual communities who have a group solidarity without similarities*' (Formby, 2012). There is diversity both among and within these communities (ibid). There is discrimination from without and within the communities against other members; bisexuals are a notable community who are subject to such discrimination. No single community can speak on behalf of others or the entirety of the LGBT+ community. Debate exists within the communities about who accurately represents, speaks on behalf of or communicates the community's shared experiences (Brown & Nash, 2010).

Research considerations

Within the LGBT+ communities, it appears advantageous to have a label or acronym that facilitates visibility and the potential for providing LGBT+-specific needed services (Formby, 2012). This advantage may not apply to LGBT+ research. A lot of 'LGBT+' research appears to concentrate on specific community members (gay men, lesbians, transsexuals, etc) while portending to speak for the entire acronym. To counter this, it becomes more apparent that Ristock's (2009) recommendation, supported by Messinger (2017), that each of the acronym's member communities has research methodologies designed specifically for them, particularly in the study of IPA, was and is prudent. Too often, research projects lump the entire acronym's members together as a unified entity, conferring far-reaching research assertions and conclusions on the group as if they apply to all members. It does not, nor can

it. Each community member of the acronym has its specific issues, from self-definitions to culture, to how they experience IPA (Ristock, 2011). Each community has its own boundaries distinct from those of other communities. The acronym makes sense only in acknowledging that it is a successful concept and construct of strength in numbers ('one for all, all for one') representing a group of minoritised communities for social and political representation (Formby, 2012).

LGBT+ discrimination from within

According to Formby (2017), it has been suggested that using the term 'LGBT+ people' may be more suitable for certain individuals than using 'LGBT+ community.' This researcher prefers the term LGBT+ communities (plural) as it captures the sense of 'group.' Todd (2013) also uses the plural form to emphasise that rather than a single community, LGBT+ comprises groups with their unique identities, experiences, and needs. The phrase 'LGBT+ community' (singular) may imply a sense of belonging, a bond or shared experiences. However, the concept of 'community' may not accurately capture the complexities and differences in the experiences of many individuals who identify as LGBT+ (ibid; Daly, 2020). The term can inadvertently convey the idea of a collective experience, disregarding the unique encounters of discrimination, inequality, or exclusion that some individuals, bisexuals, for example, face within LGBT+ communities. In Formby's 2017 research, participants reported instances of discrimination from other LGBT+ individuals based on factors such as age, body, disability, ethnicity, faith, HIV status, or perceived social class (Taylor, 2007). Therefore, it cannot be assumed that individuals automatically belong to a community solely based on their gender identity or sexual orientation (ibid). This is particularly true of the bisexual community, who appear to be consistently excluded and 'othered' from the lesbian and gay communities (Barker, Richards & Bowes-Catton, 2012; Stonewall, 2020), who themselves face societal exclusion. It also leaves out those who, although they could be categorised as belonging to one group or another through self-reported sexual or intimate behaviours, choose not to self-label. And thus, they remain invisible and uncounted.

Bisexual exclusion, social chameleons.

Despite biphobia and bi-invisibility, the bisexual community is an integral part of the LGBT+ community. Gates (2011) informs us that bisexuals are the largest population in the

acronym, comprising a community larger than all the other communities combined (see also Gallup, 2024). While the rest of the LGB+ community suffers from stigma and minority stress, the level for bisexuals is exponentially greater, given that they are excluded from a group within which they should feel safe and included (Stonewall, 2020). Combine this with their experience in the heterosexual community, where they are similarly treated, and we see a group who must be social chameleons to survive socially, identifying in such a way as to fit into the group with whom they are currently involved (lesbian, gay, heterosexual), risking exclusion if found out.

Intersectionality

Intersectionality, a term introduced by Crenshaw (1991), is a theoretical framework that explores how various social categories (ethnicity, gender, sexuality, and class, for example) intersect and how they contribute to personal experiences of discrimination and privilege (Cho et al., 2013). Intersectionality highlights the interconnected nature of social identities and systems of oppression (ibid). Hill-Collins (1990) discusses how overlapping social identities, particularly race and gender, affect experiences of oppression and marginalisation, stressing the importance of considering these issues in research. A unique form of intersectionality is evident in bisexual relationships, and that is the intersection of people who enjoy same-sex and opposite-sex intimate and gendered relationships (Callis, 2014). As such, they bring with them lived experiences from the heterosexual and the lesbian and gay male communities (Yoshino, 2000). They are exposed to double discrimination from both the heterosexual and LGT+ communities (Barker, Richards & Bowes-Catton, 2012). Their experience of IPA may mirror the sexual/social group from which they grew up or the one in which they are having an abusive relationship, or it may be a unique experience (Barker & Langdridge, 2008).

Recommendations for relevant bisexual research

When academic papers and books are written about the 'gay community' or the LGBT+ communities, what appears to be missing is an important factor highlighted by Ristock (2011) and Messinger (2017). The acronym signifies a unity of existence and experience that does not exist. Nevertheless, research is undertaken as if it does. The acronym represents strength in numbers, not similarities of experience or existence, of which there are few, as already

discussed. The LGB+ communities appear to be as divided between themselves as they are from the heterosexual community (Formby, 2012). Lesbian, gay, and feminist researchers like Warner (1993), Weeks (1998), and Richardson (2000) have criticised the LGBT+ acronym and the beliefs that it contains. They argue that the acronym masks the unique experiences and identities of its members, potentially oversimplifying the diversity within the communities.

In undertaking LGBT+ research, who is speaking for whom, an issue is highlighted by Alcoff (1991). This is a crucial question as it addresses representation, voice, and 'authority' within the communities and how the complexities of such a diverse group are, can, and should be represented under the LGBT+ umbrella. Concern exists that only certain voices are heard, depending, for example, on the prevailing political concerns of the time, highlighting one community above others while using 'group authority' to support their arguments. This may marginalise other community members who may not agree with their position or suffer as a result.

Therefore, research undertaken about the LGBT+ community (communities) represents umbrella research about a group of individual communities unless it is specifically designed to examine each sub-community (Ristock, 2011). That would mean that research would be divided and separated into, for example, lesbian, gay, bisexual, and transgender (and other) studies with a concentration on research methodology, methods, and standards just for that community. This already occurs particularly in research into lesbians and gay men (Sullivan et al., 2003). The resulting research would be undertaken from the 'bottom-up' rather than the 'top-down' to avoid imposing assumptive standards or similarities that may not exist. There is no one-size-fits-all approach to researching the LBG+ communities without ending up with a range of generalities that may accurately apply to some, perhaps, but not all (Ristock, 2011).

Ethnological immersive research

An approach that fosters inclusivity entails researchers engaging with studied communities directly, potentially as members of the community themselves, to collect and compile research data (Emerson, Fretz, & Shaw, 2011; Daly, 2020, p. 38). This proposal does not involve conducting a covert study. Instead, it emphasises the importance of extensive

participation to ensure a broad and comprehensive research scope. Suppose an ‘outsider’ researcher were to undertake the study. In that case, they might face accusations of bias (Becker, 1963) and inevitably approach the research with their own unconscious or conscious biases, as they would be examining it solely from their own, albeit research-informed, perspective. It might be better, therefore, that this research is undertaken and led by those with a personal interest in the group being studied and balanced by outsiders to ensure that research criteria and standards are met. The issue then would be of leadership. Who sets the goals, the standards, and the deadlines and determines the data to be gathered? Who analyses it, and to what standard? Designing a model like this might be the basis for new research.

Bisexual community research

This research issue is demonstrated in the bisexual community, where despite the community’s majority size (Gates, 2011; Gallup, 2024) in the LGB+ communities, bisexual research has been slow to emerge and bisexual IPA research practically not at all (Messinger, 2017; Head, 2020). This is despite extensive IPA research into the heterosexual, lesbian, and gay male communities.

Existing bisexual IPA research is subsumed into LGT+ research, where bisexual experience is represented in name only, lacking substance specific to bisexuals (Barker et al., 2012). It is bisexual research in name only, included because of its integral part of the acronym, often seen in texts references as ‘and bisexuals,’ without specific bisexual data provided, recent representative examples include *Intimate partner violence in the LGBTQ+ community* (Davis & Crain, 2024), or *Domestic violence and abuse in Lesbian, Gay, Bisexual or Transgender (LGBT) relationships* (Currid, 2017). There may be assumptive research conclusions that somehow heterosexual, lesbian and gay men's research will apply to bisexuals. Studies into the bisexual IPA experience are absent or comprise small sample sizes. One reason for this may be attributed to the difficulty in recruiting representative bisexual research participants due to their inclination toward anonymity (Brown, 2019; Stonewall, 2020). Head and Milton (2014, p. 280), for example, describe the difficulty in recruiting a bisexual sample through traditional means—advertising in LGB+ clubs and spaces, approaching LGBT clubs and bisexual activists—and, in the end, resorting to snowballing from these advertisements to reach their

recruitment goal. Despite the difficulties in recruiting their participant sample, which comprised ten participants, eight women, and two men, it still formed the basis for a seminal report on bisexual IPA. This difficulty in recruitment is also documented when sourcing participants for this thesis.

Until research is undertaken in the bisexual community using large representative samples, for example, Donovan and Hester's (2014, p. 45) LG+ study with 746 participants, knowledge about this community, particularly around IPA, will remain elusive.

The Role of stigmatisation, labels, and minority stress in Bisexual and LGT+ IPA

The role of stigmatisation in bisexual IPA and help-seeking: *'Stigma results from possessing a socially devalued identity'* (Crocker, Major, & Steele, 1998). Goffman (1963) defined 'stigma' as a distinguishing personal trait, mark, or feature that is socially dismissed or devalued. Goffman's theory is a cornerstone in sociological research. It provides insights into the impact of societal norms on marginalised individuals and groups (Scrambler, 2006). A wide array of traits can be stigmatised, including physical illnesses (such as HIV/AIDS, cancer, tuberculosis, epilepsy), mental illnesses (such as depression, anxiety, schizophrenia, mental disability), violations of social 'norms' (such as sexual orientation other than heterosexuality, sex work, drug use, obesity), and specific demographic attributes (like racial/ethnic background, gender, socioeconomic status). Individuals carrying a stigma are typically viewed negatively and treated poorly by others, leading to worse physical, psychological, and behavioural outcomes compared to those without such stigmas (Earnshaw & Chaudoir, 2013). This stigmatisation is also evident online. Colosi, Cowen, and Todd (2023) inform us that gender and sexual minorities use social media as a source of information and support, personal development, sexual culture, exploration, and informed friendship identities. With this comes the risk of experiencing the same stigma online as is experienced offline for those with 'non-normative' gender and sexual identities (Colosi & Lister, 2019; Todd, 2020), which leads these individuals to carefully use and monitor how they use social media, spreading their presence across various platforms to avoid this risk of stigma. Evidence shows that social media is used to police content through user stigmatisation and exclusion (Colosi, Cowen, & Todd, 2023). Older bisexual individuals may face unique challenges, including generational

stigma and reduced access to support services. On a positive note, this risk of stigma created a sense of solidarity between the minority groups included in the author's research.

Stigmas are a product of social construction (Crocker, Major, & Steele, 1998). This means that specific characteristics are demeaned due to a societal process (Link & Phelan, 2001), rather than because of inherent differences between individuals who have these traits and those who do not. This societal process often involves creating stereotypes by linking the attribute with negative characteristics. For instance, individuals living with HIV/AIDS might be stereotypically labelled as promiscuous (Earnshaw & Chaudoir, 2013). Bisexuals may be regarded as disease-spreading (HIV), untrustworthy, and promiscuous, among other labels. This is discussed and reflected in the research undertaken for this thesis, see under Findings.

Labels

The act of labelling serves as a potent vehicle through which stigma operates. Labels are socially imposed on stigmatised identities (Link & Phelan, 2001), and they can significantly influence specific beliefs and behaviours toward individuals with such identities (Link et al., 1989). Assigning the label 'victim' to those who have endured IPA can have significant repercussions for the stigmatisation associated with IPV. While the label 'victim' can remove blame for participating in one's own victimisation, it also paints a picture of those abused as entrapped, passive, weak, and accountable for their own victimisation (Dunn, 2005). These societal constructs devalue individuals who have been subject to IPA, associating victimhood with a loss of autonomy (Overstreet & Quinn, 2013). Those who do not carry the stigma can still experience the stigma's effects, such as prejudice, stereotyping, and discrimination. Prejudice implies the presence of negative emotions and sentiments towards those who bear the stigma (Earnshaw & Chaudoir, 2013). Individuals who have endured IPA are subject to negative labelling, with stereotypes linked to that label, leading to discrimination against them. Acknowledging IPA as a stigmatised identity can highlight potential elements of stigma that prove to be most detrimental during the process of seeking help (ibid), as is reflected in this thesis.

Further information about participants' experiences on this issue can be found in Research Findings 1. Questionnaire: #37. 'If 'yes', do you think that the barriers had anything to do with your declared or observed sexual identity?' Also see Research Findings 2: Interviews

and Findings 3: A review of interview notes, observations, post-interview conversations and key points.

Intimate Partner Violence Stigmatisation Model

The 'Intimate Partner Violence Stigmatisation Model,' proposed by Overstreet & Quinn (2013), highlights the obstacles victims face when seeking help for IPA. It focuses on three elements of the individual's IPA experience: 'stigma internalisation,' 'anticipated stigma,' and 'cultural stigma.' 'Stigma' originates from having an identity that is socially undervalued (Crocker, Major, & Steele, 1998).

- Stigma internalisation involves the internal acceptance of negative beliefs concerning IPA, which can significantly influence a person's willingness to seek help and the level of psychological stress they experience. Survivors may internalise feelings of guilt, shame, and self-blame, which can deter them from reaching out for assistance.
- Anticipated stigma pertains to the fear of how others may respond to their disclosure of IPA, potentially with judgment or rejection.
- Cultural stigma points to the 'victim blaming' mindset, where victims are perceived as being responsible for their own abuse.

(Overstreet & Quinn, 2013)

Overstreet and Quinn (2013) state that the stigma model is one of the key building blocks in understanding the personal obstacles faced by IPA victims of all kinds, particularly in the bisexual and LGT+ communities when seeking help. It clearly outlines the 'why?' in explaining the reluctance to reach out. Victims may not be consciously or intellectually aware of these obstacles, but they have some awareness of their existence through self-doubt, fear of criticism and anticipated societal rejection.

Bisexual and LGT+ stigmatisation

Calton, Cattaneo, and Gebhard (2015) inform us that LGBT+ stigma refers to the negative regard society has for people who are not heterosexual. This stigma acts as a barrier, preventing LGBT+IPA victims from seeking help and inhibiting community support. Certain LGBT+ subgroups, such as bisexuals and transgender individuals, who face higher levels of

discrimination (from inside and outside the LG+ communities), are particularly affected by this. Stigma can be experienced either overtly or covertly, with clear intent or in a more indirect, subtle manner (Calton et al., 2016; Gebhard, 2015; Daly, 2020).

The reactions of LGBT+ individuals to stigma vary, with some choosing to conceal their sexual identity while others internalise it, often leading to anxiety and various mental health issues (Meyer, 2003). Some LGBT+ subgroups, such as bisexual or transgender individuals, may experience stigmatisation from gay men or lesbian women (Weiss, 2004). The feelings of shame or embarrassment, exacerbated by LGBT+ stigma, can make it even more challenging to seek help (Calton et al., 2016; Gebhard, 2015). This is exacerbated for bisexual trans people who, in addition to the stigma and marginalisation experienced as bisexuals, have in addition those experienced by trans people (Dottermusch, 2016). This includes exposure to discrimination and exclusion from a young age within their families and a fear of seeking help from a support system that does not support or understand trans people's needs (ibid).

Fear of reaching out is not without foundation. Instances have been documented where LGBT+ victims have experienced or felt rejection from the helping community. The lack of awareness or ignorance about the specifics of LGBT+ IPA by aid providers only strengthens the stigma, creating a formidable barrier to seeking help (Calton et al., 2016; Gebhard, 2015).

Other types of stigmas:

- Intersectional or layered stigma refers to the experience of having multiple stigmas simultaneously. For instance, a gay man with HIV carries two stigmas—one related to his sexual orientation and the other to his health status. Bisexuals are at risk for multiple stigmas due to biphobia from the heterosexual and LGT+ communities. Having multiple stigmas can intensify the effect of stigma on individuals. (Earnshaw & Chaudoir, 2013)
- Associative stigma, also known as courtesy or affiliate stigma, is tied to having a relationship with a stigmatised person. As an example, a man who does not have HIV but whose daughter is living with HIV/AIDS may undergo associative stigma because of his association with his daughter. Those carrying an associative stigma might face negative repercussions through reflect stigma

mechanisms typically directed at those with a direct stigma (ibid). A lesbian dating a bisexual woman or a gay man dating a bisexual man may be shunned by their LGT+ social groups who do not like bisexuals (Barker, Richards & Bowes-Catton, 2012).

- Concealable stigmas are devalued traits that are invisible to others (Pachankis, 2007). These can include bisexual and LGT+ sexual orientation or gender identities, physical and mental illnesses, and certain perceived violations of social norms, such as drug use. Conversely, visible stigmas are devalued traits that are apparent to others, such as racial/ethnic background, obesity, homelessness, and gender expression. People with concealable stigmas can hide their stigma in certain social situations, whereas those with visible stigmas do not have this choice (Earnshaw & Chaudoir, 2013).

Minority stress in stigmatised sexual minority groups: mental health.

‘The minority stress model specifically refers to the discrepancy and conflict that arises between the values of the minority group and the dominant culture or society and has been largely conceptualised and utilised within the sexual minority health arena’ (Meyer, 2003).

Meyer (2003) introduced the concept of minority stress, which describes the experience of individuals belonging to stigmatised sexual minority groups, including bisexuals and people in the LGT+ communities and the effect on their mental health. Carvalho et al. (2011) state that individuals who identify as LGBT+ face distinct stressors resulting from their status as sexual minorities (Daly, 2020, pp. 15-16). Meyer's model incorporates internalised stressors, such as ‘internalised homophobia, disclosure, and stigma consciousness,’ as well as externalised stressors, including ‘experiences of violence, discrimination, and harassment’ and the negative effect that these stressors have on people’s mental health (ibid).

The minority stress experienced by individuals within the LGBT+ communities encompasses various factors such as encountering prejudice, internalised homophobia, expecting rejection, engaging in hiding or concealing one's identity, and employing coping mechanisms (Meyer, 2003; Daly, 2020). Understanding minority stress hinges on the belief that stressors are specific to being a minority, persistent (connected to societal and cultural

constructs), and socially rooted (involving social processes, institutions, and structures) (Meyer, 2003). The stress process becomes more intricate for minoritised and stigmatised individuals with intersecting identities, such as those based on gender, ethnicity, education, and class (Lehmann, 2018). Minority stress, resulting from being the 'different' individual within a predominantly heterosexual population, cannot be equated to an equivalent heterosexual experience (Meyer, 2003).

Minority stress and mental health issues for bisexual men and women (Theodore, 2011, pp. 175-201)

The Minority Stress Model and its connection to internalised homonegativity provide a comprehensive understanding of the relationships between sex, drugs, and HIV among gay and bisexual men (Meyer, 2003; Meyer & Dean, 1995). Derived from various stress and social psychological theories, Meyer expanded the Minority Stress Model to explain the development of health disparities within sexual minority populations. The model outlines a process wherein chronic minority stressors, such as experiences of discrimination and victimisation, predispose gay and bisexual men to internalise homonegativity (ibid).

Higher levels of internalised homonegativity are then linked to increased rates of mood and anxiety disorders, substance use, and engaging in risky sexual behaviour among gay and bisexual men (Frost & Meyer, 2009; Hamilton & Mahalik, 2009; Yi, Sandfort & Shidlo, 2010). As gay and bisexual men conceal their same-sex attractions, they often experience feelings of isolation and vulnerability. In their search for a sense of belonging, some individuals may turn to substance use, while others may seek connection and intimacy through unprotected sexual encounters (Theodore, 2011, pp. 175-201)

Studies indicate a connection between sexual minority status, gender, and mental health disparities (Cochran & Mays, 2011). When it comes to mood and anxiety disorders, women in the general population appear to be more susceptible to being labelled as such than men (Tasca et al., 2012). However, the gender-based differences in substance use disorders vary depending on sexual minority status. While males generally exhibit higher rates of alcohol and substance use disorders, this gap diminishes when specifically comparing alcohol use between sexual minority males and females. Combining data from multiple

studies, Cochran & Mays (2011) discovered that sexual minority women have higher rates of alcohol dependency compared to heterosexual women (ibid). It is also reflected in the increased risk of alcohol and substance abuse in the LGBT+ communities (Goldbach et al., 2014; Hughes et al., 2010; Marshal et al., 2008). LGBT+ clubs and bars are regarded as safe spaces (Eichenberger, 2012). Binnie & Skeggs (2004) discuss how these 'gay spaces' have become increasingly commodified. LGBTQ+ spaces, once places of resistance and community-building, are increasingly being shaped by economic and market forces. For example, Pride parades, which began as protests for rights and visibility, are now heavily sponsored by corporations seeking to market their products to a perceived 'pink economy.'

Additionally, Cochran and Mays (2011) refer to the literature supporting the idea that among sexual minority women, bisexual women are particularly vulnerable to mental health issues, including suicide attempts, alcohol misuse, and mood and anxiety disorders (Burgard, Cochran, & Mays, 2005; Kertzner et al., 2009). (From Theodore, 2011:175-201)

Minority Stress and Social Safety

This section has been informed by Diamond and Alley's (2022) *Rethinking minority stress*, and provides insight into the dynamics, support and criticisms of Minority Stress Theory (MST). In referring to minority groups, they (ibid) specifically include gender and sexually diverse individuals (SGD). This section is included as bisexual individuals are a part of these minority groups, and these findings are relevant to bisexual individuals' experiences.

MST (Meyer, 2003) and the role of stigma have long been common elements in attempting to understand issues of mental health among minoritised sexual and gender diverse (LGBT+) individuals. MST (ibid) has been influential in guiding psychological and social research into sexual and gender minority health. It is argued that minority stress is due to minority groups and individuals being subjected to violence, stigma and discrimination as means of exclusion by other members of society (Diamond & Alley, 2022). While there has been a link established between minority stress, stigma and poor mental health, there remains a difficulty in connecting them to physical health problems (ibid).

Diamond and Alley (2022) posit that the absence of social safety may explain this, a key component that describes the human need for belonging to a social group, availing of the protection, inclusion and social connection that this provides. McGray et al. (2025, p. 286) also discuss the importance of social support in mitigating the impact of trauma and providing support for victims of IPA. Diamond and Alley (2022) propose that the cumulative, chronic strain caused by minority stress and related stigma (Goffman, 1963) is exacerbated by the '*chronic threat-vigilance*' (hypervigilance) that is intensified by social exclusion, arguing that '*insufficient safety is a primary cause of stigma-related disparities and a key target for intervention*' (ibid). Lack of social safety can be just as harmful to the health of stigmatised individuals as direct experiences of minority stress.

For additional discussion on stigma, see the Bisexuality chapter (4): *The Role of stigmatisation, labels, and minority stress in Bisexual and LGT+ IPA*.

Meyer (2003) theorises that minority stress is cumulative. It may create a heightened (chronic) state of stress that can manifest in many ways, including social isolation, difficulty concentrating, avoidant behaviours, heightened fear, anxiety and emotional dysregulation. This can result in near-constant levels of anxiety that may lead to mental health breakdowns and exacerbate existing mental health conditions (ibid). MST is not accepted by all the LGBT+ communities, with some arguing that it does not fully capture the diversity of their experiences or overlooks other structural and cultural factors (Diamond & Alley, 2022)

Minority stress is not the only source of this stress (ibid). There are other sources for these mental and physical health problems, including, for example, childhood and adult trauma and abuse, particularly sexual abuse (Finkelhor & Browne, 1985). Stress as described can also be a key feature and result of complex PTSD (van der Kolk, 2014; Herman, 2015). Herman (2015) attributes many trauma-related issues as causes of these minority stress-related problems across all populations.

In Diamond & Alley's (2022) research, they argue that there is no clear link or agreement between minority stress assumptions as the primary mechanism underlying the attributed health issues (ibid: 3-5). Instead, Diamond and Alley (ibid.) argue that strong social ties and social safety are instrumental in supporting human social existence and development

(also McGray, 2025). They propose that social safety is a fundamental determinant of health disparities related to stigma. The absence of which may be the 'missing piece' to explain that linkage between stigmatisation and adverse health outcomes.

Without social safety, being 'othered' (less valued) through exclusionary societal social cues and signals may have a significant adverse effect on minoritised individuals (Barker, Richards & Bowes-Ca on, 2012; Diamond & Alley, p. 2). Exclusion devalues them. It denies them societal support, a sense of belonging and the benefit of a 'protective social fabric' (as reviewed by Pachankis et al., 2018 and cited in Diamon and Alley, 2022). Support for the concept that absence of social safety is a principal source of minority stress is derived from the Generalised Unsafety Theory of Stress (Brosschot et al., 2016, 2017, 2018, as cited in Diamond & Alley, 2022). This theory proposes that stress is not triggered just by specific threats but often results from a continuous perception (and anticipation) of unsafety, even in the absence of immediate danger.

To survive and adapt, these individuals may seek to make themselves socially invisible, and they may be overly sensitive to how others speak about them. This perceived absence of safety adds to the stress that they are already experiencing as stigmatised individuals (Diamond & Alley, 2022). By comparison, the concerns for seeking safe environments are rarely a concern for non-stigmatised individuals who enjoy a particular social 'privilege' of not having to constantly assess their environments for safety (ibid., p. 8).

It is also argued that heightened stress levels may be a function of human evolution, an evolutionary adaptation designed to ensure survival in a hostile environment. Stress responses are a natural and necessary part of our existence. The process of allostasis is dynamic and describes how the body adapts, responds and maintains stability in response to stress or change. The concept of 'allostasis load' (or overload) explains how the body responds to chronic stressors, resulting in widespread physiological changes that involve the nervous, endocrine, and immune systems (Flentje et al., 2020, as cited in Diamond & Alley, 2022).

Recommendations for resolution include moving beyond attempts at stress reduction and focusing on creating safe social environments. These would prioritise inclusion, protection

and identity affirmation. (ibid., p. 24). In addition, it is essential to reframe our perspective to appreciate and address what is missing from their lives, rather than merely addressing the issues presented.

Effects of childhood abuse and trauma on bisexual individuals.

Childhood Cumulative Trauma (CCT) refers to the exposure to various types of traumatic events experienced during childhood. Childhood cumulative trauma (CCT) can be highly damaging. It may lead to severe adverse psychological consequences in children and adults, including post-traumatic stress disorder (PTSD) (Lippard & Nemeroff, 2020; da Silva et al., 2024). Teicher et al. (2006) observe that experiencing abuse during childhood interferes with the child's development and is linked with a higher risk of adverse health effects in adulthood.

Finkelhor and Browne's (1985) Traumagenic Dynamics Model (TDM) proposes that childhood sexual abuse—experienced through traumatic sexualisation, betrayal, powerlessness, and stigmatisation—creates long-term risks of experiencing IPA in bisexual individuals and is identified as the central aspect of the psychological injury inflicted by abuse. The sexual abuse of a child can disrupt the child's mental and emotional orientation and alter their perception of self and the world, affecting the child's ability to experience and express emotions. TDM views childhood sexual abuse as an ongoing, lifetime, dynamic process. Their research (ibid) highlighted how cumulative trauma, combined with bisexual stigma and invisibility, may shape bisexual victims' experiences of abuse, affect barriers to help-seeking, and challenge perceptions of abusive behaviours as an adult.

Both models are seen in this research, as illustrated by the extremely high rates of abuse among participants as children and as adults, particularly sexual abuse.

Bisexual women's abuse and health

Cochran and Mays (2011) refer to the literature supporting the idea that among sexual minority women, bisexual women are particularly vulnerable to mental health concerns, including suicide attempts, alcohol misuse, and mood and anxiety disorders (Burgard, Cochran & Mays, 2005; Kertzner et al., 2009). (From Theodore, 2011:175-201).

Research also shows that bisexual women rate highest as victims of abuse and are susceptible to early death (Tilley, 2024). The lifetime prevalence of rape by any perpetrator (for women in NISVS survey) was:

- Lesbian - 13.1%
- Bisexual - 46.1%
- Heterosexual - 17.4%

(Breiding, Matthew Joseph et al., 2013, p. 1).

Other studies highlight that bisexual women tend to die younger ('37% sooner') than heterosexual women (Tilley, Caitlin, 2024; McKetta, 2024). This is due to their (and LGBT+ communities) being subjected to discrimination, stigma and prejudice. This contributes to chronic stress and, in response, to the adoption of unhealthy coping mechanisms (alcohol and substance abuse, for example). These, in turn, may lead to harmful health outcomes and premature mortality (ibid). Many bisexual IPA victims were abused in childhood, as was reflected in this research. Messman-Moore and Long (2003) inform us that early-life victimisation is a risk factor for experiencing abuse in adulthood.

In this chapter, we have reviewed bisexuality, the various definitions of bisexuality from many viewpoints, and the core issues of bi-erasure and discrimination through reviewing myths and stereotypes propagated against bisexual people. We completed this by examining the roles of minority stress and stigmatisation in compounding these discriminatory and marginalising tactics.

Summary

This chapter explored social and cultural attitudes toward bisexuality, tracing definitions, histories, and the evolution of identities beyond the heterosexual/homosexual binary. It highlighted how marginalisation, biphobia, stereotypes, myths and exclusion from both within and outside the LGBT+ community contribute to discrimination and over-sexualisation, particularly of bisexual women. The discussion also examined the role of stigmatisation, labels, and minority stress in shaping bisexual experiences of intimate partner abuse, alongside the health impacts of trauma and childhood abuse. Considerations for research practice were reviewed, emphasising inclusive methodologies, intersectionality, and the importance of engaging directly with bisexual individuals and communities. Together, these

themes provide essential context for understanding the lived realities of bisexual individuals and the relevance of this study's focus on IPA. In the next chapter, we will examine Intimate Partner Abuse, its dynamics and how it affects bisexual individuals.

5. INTIMATE PARTNER ABUSE

This chapter defines intimate partner abuse and explains its use in this study, outlining its forms, impacts, and patterns across diverse populations. It considers perpetrator behaviour, barriers faced by bisexual and LGBT+ victims, and the helping responses available through legal, social, and peer-based resources.

Introduction

In the previous chapter, we discussed bisexuality and the key components and tactics of discrimination against bisexual individuals. In this chapter, we will review intimate partner abuse (IPA) and how it affects the bisexual population. This chapter will IPA in-depth, beginning with a review of preferred terminology and a clear definition of IPA. The various types of abusive behaviour are discussed, including who commits it and how it affects bisexual and LGBTQ+ communities. The chapter will examine the large number of victims and perpetrators across diverse populations, highlighting common abusive behaviours and the criminal nature of IPA. Theories of abuse are reviewed, as are perpetrators, including focusing on the role of choice in perpetration, perpetrator manipulation, and control tactics. Additionally, bisexual women's greater victimisation of sexual abuse is examined.

Commonly referred to as domestic violence or intimate partner abuse (IPA), IPA describes abusive controlling behaviour by one (current or ex) partner or family member over another (Dobash & Dobash, 1979; Kelly & Westmorland, 2016). The primary goals of IPA are to exert power and control over the victim by the perpetrator (ibid; Hill, 2020). It is a phenomenon observed all over the world in every culture, and its tentacles stretch deep into history; records reveal numerous instances of women's subjugation in patriarchal societies (Ramsey, C. 2011). This issue exists today in various forms influenced by cultural, religious, and geographic nuances, all traditionally underpinned by the philosophy of patriarchal and sexist power exerted over an intimate partner (Dobash & Dobash, 1979) and evidenced by the epidemic levels of recorded occurrences of violence against women (Dodd, 2024). This form of abuse is prevalent, perhaps endemic, within heterosexual, bisexual and LGT+ communities (Donovan & Hester, 2015). Bisexual women are reported to have the highest reported rate of

IPA victimisation (Messinger, 2011; Head, 2020), particularly physical and sexual abuse by men. Bisexual women are reported to have the highest reported rate of IPA victimisation (Breiding et al., 2013, p. 1; Messinger, 2011; Coston, 2017; Brown, 2019). Using data from the Massachusetts Behavioural Risk Factor Surveillance System, Conron et al. (2010) found that compared to heterosexual women, bisexual women have a higher likelihood of experiencing intimate partner violence.

The World Health Organisation attributes most of the physical violence and sexual violence against women to male perpetrators (García-Moreno, 2013; WHO, 2013). The patriarchal philosophy is challenged by the evidence of IPA perpetrated by women and within the LGBT+ communities (Ramsey, 2011), where the issue is power over and control of an intimate partner. Non-physical IPA ('intangible') in the form of coercive control, psychological abuse, and associated controlling tactics are the domain of male and female perpetrators. In this thesis survey of bisexual victims, the participants reflected this, attributing most (but not all) physical violence to male perpetrators while dispersing non-physically violent abuse between male and female perpetrators. For further discussion, see Findings 1, question 27.

Patriarchy is a social system in which men hold primary power over women and non-hegemonic men. A hegemonic man represents the socially idealised version of masculinity that reinforces men's dominance over women and other forms of masculinity (Connell, 1995). They exert control in political leadership, moral authority, social privilege, and property control. This control is maintained through societal norms and institutions that give an advantage to certain masculinities—hegemonic masculinities—while marginalising others (Walby, 1990; Connell, 1995).

Walby describes patriarchy as having six structures: 1. production relations in the household where women are expected to work under her husband without compensation; 2. paid work where women are paid less than men; 3. culture (portrayals of women through a patriarchal perspective are supported in many facets of society, including religion, the media, and education); 4. sexuality (different rules and expectations apply to men and women); 5. male violence against women (when the government does little more than condemn violence against women, they are, in effect, condoning it), and 6. the patriarchal state (which is biased

toward men). These structures serve to maintain male dominance. Connell (1995) emphasises how hegemonic masculinity (the normalisation of traits like authority, toughness, heterosexuality, and economic power as the standard for male behaviour) is favoured by society, marginalising women and non-hegemonic males.

IPA is not perpetrator or victim-gender-specific (Johnson, 2008). It comprises a wide range of controlling behaviours, including physical violence, threats of violence, sexual assault, rape, stalking, psychological and emotional abuse, and coercive control. It usually describes a pattern of behaviour, but it may be just one event (Stark, 2007).

Intimate Partner Abuse is the preferred term in this research.

This researcher prefers the use of the term intimate partner abuse (IPA) as opposed to domestic violence, as, frequently, the abuse being described or reported is neither domestic nor physically violent (see 'Definitions' pages 3-4). Stark (2007, 2012) explained how violence is an instrument of abuse to be used as needed or not at all (Stark & Hester, 2019). Walker (1979) and Dobash & Dobash (1979) separated the other forms of abuse and labelled them as psychological, emotional, and coercive control, describing how this pattern of behaviours, through the application of fear and control, allows someone to exert and maintain power over another. Most reported abuse tends to be tangible—physical violence, assault, sexual assault, and threats of death—where there is evidence or a witness to support the report. Intangible abuse describes psychological abuse or coercive control and includes such abuse instruments as isolation, abuse of the shared children, financial control, stalking, neglect, social abuse, emotional abuse, and others (Stark, 2007; Stark, 2023). These are difficult to report as they often/might lack evidence. Recently introduced UK laws (Domestic Abuse Act 2021) address the issue of coercive control and non-tangible abuse and make it easier for such a case to be reported and prosecuted. This is an important step as it, for the first time, clearly delineates and highlights the most important fact that not all IPA is physically violent. Absent physical violence, many victims of abuse do not realise that they are being abused (Stark, 2007), due to violence being an integral part of the domestic violence description. This belief was a significant observation recorded from many of the participants of this thesis survey (See Findings 2 and Discussion).

Intimate Partner Abuse defined (UN, 2003).

The following adaptation of the UN 2023 definition will be used in this thesis.

Intimate Partner Abuse (IPA), also called 'domestic abuse,' 'domestic violence,' or 'intimate partner violence', can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power over and control of an intimate partner. Abuse may be physical (assault or threats of assault), sexual (non-consensual sexual contact or activity, including rape), emotional, intentional neglect, economic (control of finances, abuse of finances), or psychological actions or threats of actions that are designed to influence, establish, or maintain control of another person. This includes any behaviours that frighten, coerce, intimidate, terrorise, manipulate, hurt, humiliate, blame, injure, or wound someone. IPA may culminate in or be punctuated by serious physical injury or result in death. It can include 'honour-based violence', female genital mutilation, and forced marriage. Men are the primary source of recorded violence against women, although women abuse men and other women also (Fleming et al. 2015). IPA can happen to anyone of any race, age, sexual orientation, gender, ethnic group, or religion. It can occur within a range of relationships, including heterosexual and LGBT+ couples living or not living together, who are dating, who share children or who have separated or divorced. IPA affects people of all socioeconomic backgrounds and education levels (adapted from UN. 2023. Stark, 2007). It may describe a single incident or a pattern of conduct. The perpetrator and victim are over the age of 16 and are personally connected to each other (UKDAA, 2021).

This definition was chosen for this thesis because it provides a simple, thorough, and well-defined overview of abuse. Slight modifications were made for clarification (see included references). It is preferable to other models as it stays on point and avoids jargon, making it easy to read and understand. It leaves the reader in little doubt as to what IPA is.

'Personally connected.' An important clarification

Of note in this definition is the use of the term 'personally connected' taken from the United Kingdom Domestic Abuse Act (UKDAA, 2021) to describe the relationship between the perpetrator of the abuse and the victim. In many definitions of an IPA relationship, the emphasis is on intimacy as a qualifier, whereas this broader definition encompasses a wider range of family relationship statuses.

We can see here that this broader definition of the relationship includes family members (1g). In my professional work, I have seen some of the most serious abuse in families where one sibling takes the abuser role, and the other is the victim. This type of abuse can go on for a lifetime due to the 'blood' connection, which may act as an additional bond to a relationship that, under any other circumstance, could end. Greater Manchester Safeguarding (2023) confirms this, stating that the perpetrator of the abuse and the victim of the abuse *must be aged 16 or over and be 'personally connected' as intimate partners, ex-partners, family members or individuals who share parental responsibility for a child. There is no requirement for the victim and perpetrator to live in the same household'* (GMS, 2023).

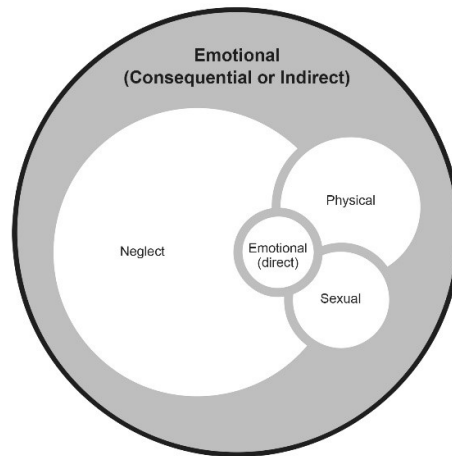
Types of Abusive Behaviour

Behaviour may be considered abusive if it comprises any of the following (not a complete list) (Stark, 2007; Dutton, Goodman, & Bennett, 1999; Adams et al, 2008; Campbell, 2002).

Category of Abuse	Examples / Notes
Physical or sexual abuse	Including assault (causing fear of imminent harm), battery (physically harming someone) and all non-consensual sexual actions against the victim.
Violent or threatening behaviour	Including threats of harm or death. Displaying a weapon with the intent to instil fear, 'one day I'm going to kill you with this'. Johnson (2008) refers to this as 'intimate terrorism,' which may leave the victim in a constant state of hypervigilance.
Controlling or coercive behaviour	Including restricting autonomy, isolation, abandonment (when pregnant), denying access to social media, destruction of property, monitoring activity (insisting on knowing where they are going, with whom, and when they are coming back, constant texts and calls while not at home, and demanding they return home.
Economic abuse	Controlling access to finances or spending, not paying household bills, denying access to funds for clothes, medicine, or food and more.
Psychological, emotional, or other abuse	Belittling, manipulation, gaslighting, harassment, threats to harm children, family members or pets, threatening suicide, threatening to 'out' the victim and more. See threats.
Intentional neglect	—
Consequential emotional abuse (CEA)	The result of living in an abusive relationship. (Daly & Wright, 2017; Daly, 2016) introduced this term to describe the ongoing effect of abuse that lasts long after the abuse ends (Abrahams, 2007).

Types of abuse. Figure 2
(Stark, 2007; Dutton, Goodman, & Bennett, 1999; Adams et al, 2008; Campbell, 2002).

This researcher developed these charts for an earlier publication (Daly & Wright, 2017) to help readers understand the interlocking nature of abusive behaviours. When described in texts or workshops, these behaviours are often understood as experienced singularly, stand-alone issues, and many times, they are. However, research indicates that abuse tactics are rarely perpetrated or experienced singularly but are part of a 'mix' of emotional, psychological and physical abuses (Stark, 2007). All abuse types, for example, are accompanied by consequential emotional abuse (ibid).



Emotional abuse is an integral part of all abuse types.
(Daly & Wright, 2017)

(Figure 3)

If it is considered abusive, it does not matter whether the behaviour consists of a single incident or a course of conduct (Kelly, 2013).



Abuse types are rarely experienced on their own.
(Daly & Wright, 2017)

(Figure 4)

IPA Statistical Overview

The awareness of statistics regarding injury and death from IPA is vitally important because it clarifies the reality of IPA, allowing us to make the scale and seriousness of the issue tangible. It shifts the discussion from personal narratives to solid historical evidence, making it easier to drive meaningful change through policy, advocacy, and research. Without these numbers, it is easy to overlook the devastating human and societal costs of IPA and its systemic societal

issues. As Campbell et al. (2003) highlight, understanding these patterns through data is essential for developing effective interventions and preventing further harm.

In the UK in 2021 (LWA, 2023):

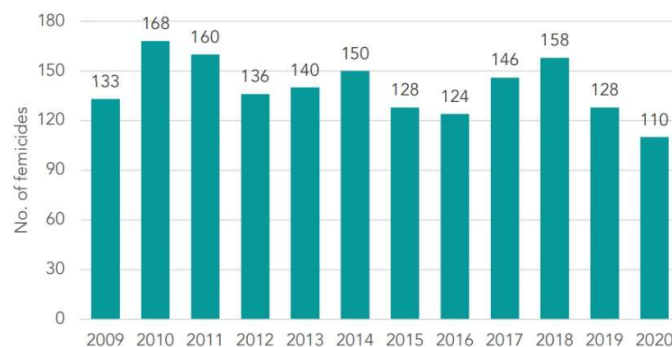
- One in five adults experiences IPA during their lifetime. This equates to one in four women and one in six to seven men.
- Women are more likely to experience repeat victimisation, be physically injured or killed and experience sexual violence.
- For every three victims, two are female, and one is male.
- It is estimated that fewer than 24% of IPA crimes are reported to the police.
- Although IPA accounts for 16% of all violent crime (Source: Crime in England and Wales 04/05 report), it is still the least likely violent crime to be reported to the police.
- Has more repeat victims than any other crime (on average, there will have been 35 assaults before a victim calls the police).
- IPA the single most quoted reason for becoming homeless (Shelter, 2002)

Death from IPA

The primary risk factor for intimate partner homicide, regardless of the sex of the victim, is prior domestic abuse and violence (Campbell et al., 2003; Campbell et al., 2007).

Femicides

Number of femicides per calendar year 2019-2020



Femicides by year in the UK because of IPA.

Figure 5. (www.femicidecensus.org)

(UK unless otherwise noted)

- Approximately two women a week are killed by their partner.
- 83 men were killed in domestic homicides between April 2016 and March 2019, which equates to over two each month.
- Leaving a relationship: The risk of serious assault and death is highest for a woman after she leaves an abusive relationship. According to the Femicide Census, 38% of women killed by their ex-partner from 2009 to 2018 were killed within the first month of separation, and 89% in the first year. (Femicide Census, 2020; LWA, 2023)
- Femicide is the leading cause of death in the United States among young African American women aged 15 to 45 years and the seventh leading cause of premature death among women overall. (Campbell et al., 2003)
- In the U.S., three women a day are murdered by their partners (DOJ, 2023).
- The presence of a gun increases the risk of homicide by 500% (ibid).
- Homicide is a leading cause of death for pregnant women in the US (Lawn & Koenen, 2022).

Suicide

Approximately 400 people who have attended a hospital for domestic abuse injuries in the previous six months take their own lives each year; 200 of these attend the hospital on the day they go on to take their own life (LWA, 2023)

IPA perpetration. Who Does It?

Both men and women perpetrate IPA (Straus, 2006). Men and women may use similar or different abuse types against each other, with men resorting more to overt and physically violent means. In contrast, women may utilise psychological or emotional tools (Im et al., 2018). Men are the primary aggressors when physical and sexual assault are involved (Tjaden et al., 2000). They are also the primary users of coercive control (Stark, 2007). Men and women are equally proficient in the use of psychological and emotional abuse (Romans et al., 2000, Swan et al., 2018). Research records that females are also responsible for high levels of physical assault against men (Swan et al., 2018). Men are the perpetrators of more deadly

violence against women, demonstrated, for example, by the statistic that in the U.S., men are responsible for three IPA homicides a day against women (DoJ, 2021; Romans et al., 2000).

Women's use of violence: In reviewing research on women's use of violence against men, the following emerged (Swan et al., 2008),

1. Women tend to be violent in response to an assaultive male (reactive, protective violence).
 2. Women are more frequently the injured party in violent incidents.
 3. Men lead in reported incidences of physical and sexual assault and coercive control (Stark, 2007; Johnson, 2008).
 4. Situational violence (arguments escalating to the point of minor violence not motivated by a wish to control) is equally initiated by men and women (Johnson, 2008).
 5. In relationships with severe violence ('violent terrorism'), men tend to be perpetrators and women the victims (Stark, 2007; Stark, 2023).
 6. Men use violence as a control tactic. Women may use violence as a form of defence (Dobash & Dobash, 2004).
 7. IPA interventional programmes for men may not work for women due to these different motivations and behaviours. Men's use of violence is often rooted in a desire for control, whereas women's violence is more likely to be reactive or defensive (ibid).
- (Swan et al, 2008)

Although articles have appeared in the media about women's use of violence, suggesting that women are just as violent as men (Straus, 2010), Swan & Snow (2006) criticised these, stating that they lack validity, are simplistic and stress a need to contextualise women's use of violence. These contexts include a response to being victimised by male partners and an examination of motivation for violent behaviour, including issues with childhood trauma, relationships, mental health issues and substance abuse (ibid).

As related by this thesis's research participants, while males were the primary source of physical violence against participants, several participants described severe physical abuse by other women, which in two cases resulted in their hospitalisation for injuries. One

described how when being beaten by a woman in public, nobody interfered as they egged them on, viewing it as a 'cat fight.' She went on to say that if they had been males, the police would have been called, and attempts would have been made to stop it.

Straus (2010) critically examines and presents evidence of how feminist and other academics have denied mounting empirical evidence of gender symmetry in partner violence, using tactics such as selective citation, suppression of data, and ideological framing to obscure a more complex, mutual reality of intimate partner abuse. This will be a topic worthy of scrutiny in future research.

For further discussion on this topic, see Chapter Research Findings 3: IPA perpetrator data.

Recognition of Bisexual and LGT+ IPA.

It was only at the end of the 1960s for heterosexual women and the late 1980s for the LGBT+ communities that IPA started to gain recognition (Messinger, 2017; Riskock, 2011). The study of this form of abuse as a social issue, especially concerning LGBT+ IPA, is relatively recent, as Messinger (2011) notes. People within LGBT+ communities appear to experience similar levels of IPA as heterosexuals (Gates, 2011; Walters et al, 2013). Determining this with certainty is challenging for numerous reasons. Research into heterosexual IPA has been traditionally conducted on a large scale, using various sampling methodologies over several decades to provide representative sampling findings. Walby and Allen (2004), for example, used data from the British Crime Survey to analyse IPA prevalence, providing relevant findings from a representative sample. By comparison, research into LGBT+ IPA has often relied on smaller-scale studies using purposive sampling (selecting participants based on specific characteristics or criteria), limiting the generalizability of findings (Edwards et al., 2015). Reporting abuse follows gendered patterns (Walby & Towers, 2018), where the wish or ability to report may be influenced and hindered by the victim's sexual orientation or sexual or gender identity. Donovan and Hester (2014) highlight that among LGBT+ individuals, stigma, fear of discrimination, or fear of not being believed or supported might lead to underreporting of abuse.

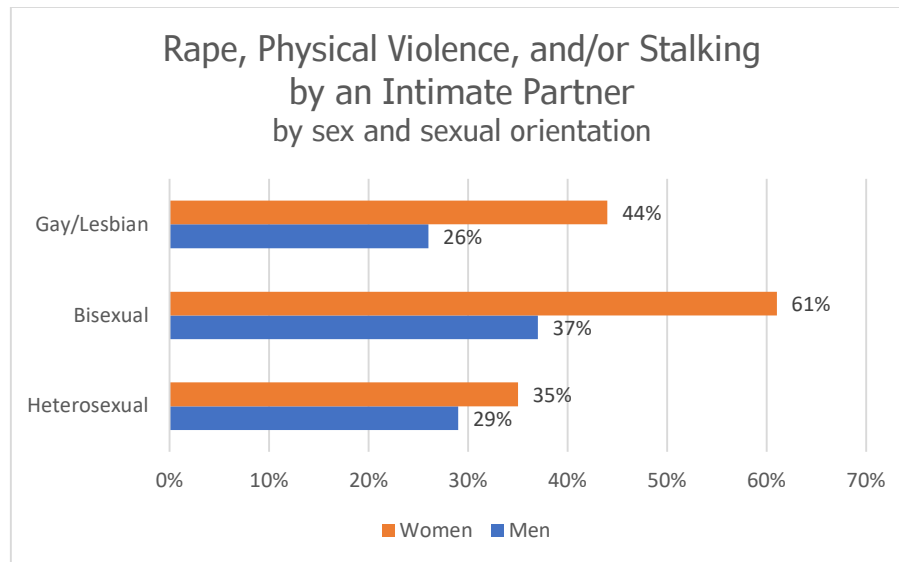
Messinger (2017) informs us LGBT+ IPA statistics are difficult to ascertain for many reasons. The first of which is that heterosexual IPA has been the subject of public attention and academic research since the 1970s and has been well-funded. LGBT+ IPA, by comparison, has been poorly funded; thus, getting accurate comparative research is challenging. Edwards et al. (2015) inform us that only 3% of domestic violence research in 2015 was dedicated to LGB+ DV. More importantly, LGBT+ IPA is community-specific (Ristock, 2011). Acronym ('LGBT+') IPA statistics refer to generalities at best and are difficult to attach meaning to without tailored research into specific communities. Indeed, making broad claims about LGBT+ IPA would be and is a stretch without this individual community research. Research into bisexual IPA, for example, is very recent and scant (Head, 2020; Callan et al., 2021). Further, LGBT+ people are reluctant to discuss their IPA experiences due to underreporting, due to fear of stigma and further discrimination (Donovan & Hester, 2014). The definition of IPA within the various LGBT communities may differ in understanding from those in the heterosexual community, and this provides a challenge for data collection and analysis (Messinger, 2017).

For bisexual women, the rate of abuse seems to be highest (Gates, 2011. Messinger, 2011; Coston, 2017) (see Figure 4). As with the heterosexual community, bisexual IPA encompasses physical, psychological, and sexual abuse, or threats thereof, occurring between two intimate partners of the same sex or gender (Murray, Mobley, Buford & Seaman-DeJohn, 2007). Several unique factors distinguish bisexual IPA from the heterosexual community, including the following.

Bisexuals comprise the highest number of IPA victims.

Bisexuals, particularly bisexual women, appear to have the highest reported rates of IPA across all populations, closely followed by bisexual men (Gates, 2011; Messinger, 2011; Coston, 2017). Bisexual women are vulnerable to abuse not only within heterosexual relationships but also within same-sex relationships. That they experience violence in both contexts may contribute to reported higher overall rates of abuse. The intersection of gender and sexuality may amplify the vulnerability of bisexual women. Research consistently shows that women are more likely to experience IPA than men, and bisexual women face compounded challenges due to their sexuality and gender (Dutton, 2006; Johnson, 2006).

Messinger (2011) and others reached this conclusion after reviewing and conducting a secondary data analysis of the 2010 National Violence Against Women Survey (n = 14,182). His report represented the first multiple-variable regression analysis of U.S. adult same-sex IPV prevalence using a nationally representative sample.



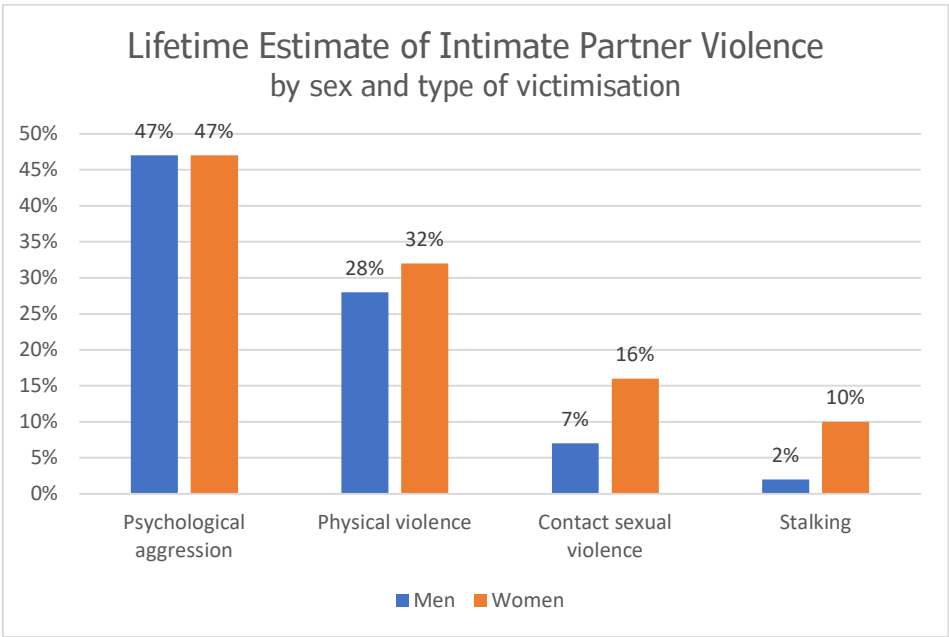
Bisexuals have the highest reported rate of violent IPA victimisation.

Figure 6. Smith, B. et al (2012)

An invisible behaviour and experience

There is a pervasive lack of awareness in society recognising IPA within the LGBT+ communities (Ristock, 2011). Many individuals, whether they are part of the heterosexual or LGBT+ communities, remain oblivious to the presence of IPA within these groups (Hudson-Sharp & Metcalf, 2016; Daly, 2020). ‘Gay’ communities are often perceived as benign and non-violent (Messinger, 2017; Daly, 2020). This perception is fostered by the relative invisibility of the LGBT+ communities in society—acknowledged superficially, yet essentially unseen (ibid). Additionally, IPA as a subject remains largely hidden, invisible inside and outside the LGBT+ communities; it is a topic not spoken about (Duberli, 2020). Many LGBT+DV victims do not recognise that they are experiencing IPA because their circumstances do not align with the stereotypical societal misogynistic portrayal of ‘men beating women’ (Donovan & Hester, 2014; Walker, 2009; Daly, 2020). Much of this can be attributed to the belief that IPA is an exclusively heterosexual issue that does not exist in the LGBT+ communities (Brown &

Herman, 2015). Early research into IPA centred on its experience in the heterosexual community, which went on to shape public perceptions and policy. This contributed to the invisibility and unawareness of IPA in the LGBT+ communities (Jamieson, 1998). This is reflected in the general belief within the bisexual and LGT+ communities that IPA is not an LGBT+ problem, which is under-reported (Hudson-Sharp & Metcalf, 2016). Instead, they see it as an exclusively heterosexual issue as they do not regard their experiences as abuse (Hester & Donovan, 2009; Walker, 2009). This 'invisibility' serves as both a benefit and a drawback for the LGBT+ communities. On the one hand, it enables these groups to exist without attracting further societal judgment or scrutiny. On the other hand, when it comes to issues like LGBT+IPA, the lack of societal awareness impedes the provision and accessibility of resources necessary to assist and protect victims (Duberli, 2020).



Lifetimes Estimate of IPV. Figure 7. Smith, B. et al (2012)

Barriers to seeking help

Research reveals that bisexual and LGBT+IPA victims face distinct challenges when seeking help, in addition to the obstacles encountered by victims of heterosexual IPA (Daly, 2020). These unique barriers are connected to their sexual orientation and gender identity (Brown, Taylor, & Herman, 2015). Head (2020, p. 121) suggests that an effective model for seeking

assistance for bisexual individuals should begin with services and individuals who affirm the experiences of intimate partner abuse (IPA) within the bisexual community.

Help-seeking barriers for bisexual and LGT+ IPA victims

Bisexual victims of intimate partner abuse (IPA) face a range of barriers when seeking help. Within the LGBT+ community, they may be less likely to turn to LGBT+ groups due to anticipated or actual exclusion (Turell & Herman, 2018). Similarly, in heterosexual contexts, they may conceal their bisexual identity to avoid exposure to biphobia (Head, 2020, p. 120). Structural barriers also exist, including a lack of legal definitions of IPA that include accommodations for bisexual or LGT+ intimate partners (Brown, Taylor, & Herman, 2015). Legal frameworks can be overly narrow and fail to reflect the experiences of bisexual or LGBT+ victims (Kelly & Westmarland, 2014). Access to support is further constrained by the limited availability of LGBT+ shelters (Head & Milton, 2014), poor understanding of bisexual and LGT+ communities and their needs (Herek, 2002), and a lack of awareness about IPA resources for these populations (ibid).

Professional responses often compound these issues: absent, misinterpreted, or insensitive questioning methods and terminology by legal and helping professionals can alienate LGBT+ victims (Daly, 2020), while medical and legal professionals may lack understanding of sexual abuse specific to LGBT+ communities, particularly gay men (Duberli, 2020). Victims also face the vulnerability of revealing their sexual orientation or gender, or being involuntarily exposed ('outed'), which may lead to rejection from family and friends (Brown, Taylor, & Herman, 2015). Finally, the possibility of encountering interactional homophobia from service providers, police, courts, or even other non-LGBT+ victims of IPA creates additional risks (Duberli, 2020).

Owing to the actual or perceived lack of available IPA resources, fear of biphobia, and homophobia, bisexual and LGT+ IPA victims may refrain from reporting their experiences of abuse. They might consider enduring their abuse less intimidating than facing potential victimisation from a system that is perceived as being unresponsive or unsympathetic (Elliott, 1996).

Legal options for LG+ and Bisexual victims of IPA

Brown, Taylor and Herman (2015) and Duberli (2020) indicate that there is an inclination within the LGBT+ communities to handle IPA cases internally within the communities and informally to avert intensifying the homophobic perspectives prevalent in a heteronormative society. This helps in avoiding any additional LGBT+ scrutiny or criticism that could be generated by publicity surrounding LGBT+IPA issues. When it comes to legal recourse for LGBT+ IPA victims, civil courts are sometimes favoured for seeking restraining orders over criminal proceedings (ibid). Several factors contribute to this preference; obtaining a civil injunction is usually faster and less complicated than filing a criminal complaint. This process also excludes police involvement. Choosing not to use criminal courts prevents the establishment of a criminal public record that would be readily available to anyone via their computer. In contrast, the civil court maintains a lower level of public scrutiny as it makes access to records more challenging to protect the petitioner (Daly & Bray, 2019, pp. 95-105). Conversely, resorting to criminal proceedings is a lengthy process that could take over a year to conclude, requires police involvement, and potentially subjects the victim to repeated re-traumatisation as they recount their ordeal in court and to various legal entities, depositions or support groups. There is also the risk of encountering homophobia and biphobia at different stages of the process, from initial contact with the police to medical services, and in the courtroom, dealing with a judicial system that has a limited understanding of the LGBT+ communities or their experiences with IPA (Brown et al., 2015).

The perpetration of intimate partner abuse (IPA)

Examining and analysing the behaviours and motivations of perpetrators of IPA, as well as the victim's response, is essential to understanding and recognising IPA. In reviewing the behaviours of perpetrators, the same core goals of the application and maintenance of power over an intimate partner are central to all levels of abuse perpetration (Stark, 2007; Gilette, 2021; Stark, 2023). These range from, at one extreme, being instrumentally violent and constantly battering their partners to the more benign, non-violent, but just as controlling nature of the psychological abuser who has never threatened or physically abused their partner (Kelly, 1988; Stark, 2007; Johnson, 2008; Pedersen, 2022). Despite the difference in the perpetration, the perpetrator's goal is the same: to modify and maintain control over the

victim's behaviour to suit the perpetrator's needs (ibid). With that in mind, IPA is a worldwide phenomenon perpetrated by and to people of all cultures and genders (Hill, 2019).

Humans, by nature, are controlling (Leotti, 2010). It is normal behaviour that involves manipulating people and circumstances to achieve daily goals and activities (Leotti et al., 2010). It is not an inert behaviour, however. As even the briefest review of IPA demonstrates, for many, it can develop into a compulsive, toxic need to control others, particularly those within families and intimate relationships (Dutton & Goodman, 2005; Gillette, 2021). Buss (1995) informs us that the idea that humans are inherently controlling has its roots in evolutionary psychology. Behaviours related to power and control may be seen as mechanisms for survival, where the need to control others could be linked to social and environmental issues. One of the primary aspects of the IPA 'relationship' is the exertion of power and control by one person over another (Kelly, 1988; Pence & Paymar, 1993; Stark, 2007). This is maintained by the removal or corraling of control from the victim. When control is lost due to IPA or trauma, many times, we see victims struggle to establish some semblance of control in their lives to regain a sense of autonomy and safety (Herman, 1992). It may be seen in simple or complex ways. For example, in a case in which I worked, an injured hospitalised IPA victim was obsessed with how she made her coffee, not allowing anyone else to do it for her. When I asked the psychologist about this, she said that coffee making was one of the few things in the patient's life over which she had control. All other decisions in the hospital environment were made for her. Stark (2007) informs us that control is removed from the IPA victim using abuse tactics, including coercive control, physical and sexual violence and psychological abuse (see also, Dobash & Dobash, 1979). The purpose is to remove the victim's agency and autonomy and to deprive them of the means of deciding against seeking help or leaving the relationship (ibid).

Large numbers of victims and perpetrators.

How many victims? A glance at the statistics shows that one in four women and one in six men over the age of 18 in the U.K. have been a victim of severe physical violence (assault and battery) by an intimate partner in their lifetime (NCDV, 2023). These reflect only reported cases of abuse; a large number of incidents, perhaps most, are never reported (Morgan & Truman, 2018). These statistics do not include the unmeasurable rate of just as damaging

intangible abuse (coercive control, psychological and emotional abuse, isolation, etc) that occurs (Myhill, 2015; Daly & Bray, 2019, p. 111; Stark, 2007).

Where there is a victim, there is also a perpetrator.

While these victimisation rates and statistics are disturbing, what should be equally disturbing is the obvious observation that for each victim, there is also a perpetrator. Even allowing for the possibility of multiple victims per perpetrator, reviewing the statistics on just the frequency of violent IPA victimisation reveals that a significant percentage of the population are perpetrators of violent abuse (Dodd, 2024). This is an important issue that many IPA articles, research reports and statistics miss. Realising just how many perpetrators exist completely changes the IPA perception dynamic. In an article, the UK's Metropolitan police commission confirms this realisation, stating that there are upwards of 4 million perpetrators of violence against women and children in the UK (Dodd, 2024a). Dodd (2024b) also reports that in the UK, 2,000,000 women a year are victims of physical violence from men, a statistic being called a 'national emergency.' UK police state that the internet is fuelling the increase. It is also likely that the increase is due to better reporting. The violence goes unchecked due to prosecution delays and victims withdrawing charges (Dodd, 2024a). The number of perpetrators is likely much higher than estimates. Intangible abuse that does not involve physical violence often goes unreported and, until recently, was not a prosecutable crime until coercive control was criminalised in 2015 (CPS, 2015). Many cases of IPA go unreported due to fear of consequences from the perpetrator, a distrust of the legal and police system and anticipated societal stigma (Calton et al., 2016).

Perpetration: a behavioural (ab)normality?

Official statistics reporting physical abuse do not include intangible, non-violent abuse, whose number adds considerably to the perpetrator/victimisation total (Stark, 2007). On reflection, given the commonality and frequency of the experience of violent IPA (one in four women, one in 6 men*) and the similarity in the methods used to implement IPA (Hill, 2019), it appears that the perpetration of IPA is not a behavioural anomaly per se, but a behaviour so common as to be described as a 'normal,' albeit toxic, human trait (Kelly, 2008). Kelly infers that men and women not acknowledging the 'epidemic' of (sexual) violence against women normalises it. If mammalogy researchers were observing these perpetrators and their

behaviours, they would be in awe at the degrees of maliciousness, repetitive cruelty and the calculated range of manipulative behaviours exhibited. And their similarity in their methods of perpetration (Hill, 2019). * Source: (Huecker, King, Jordan, et al. 2023)

Diverse populations; common abusive behaviours

Hill (2019) highlights the reality of the commonality of behaviours among perpetrators of IPA. In comparing the means of abuse application and the mindset of the perpetrators from different cultural and geographically diverse populations, Hill (ibid) points out that even though these perpetrators have no contact with each other, their behaviours are so similar that it appears as though they are all operating from the same perpetrator instruction manual. This pattern might be understood by examining patriarchal systems and traditional gender roles (Hill, 2019). In many cultures, masculinity is tied to power, control, and dominance, while femininity is seen as passive and submissive (Connell, 1995). These gender norms shape how relationships function, often reinforcing power imbalances that make abuse seem normal and acceptable. Patriarchy, as a societal structure, supports male dominance and pushes women to the margins, which can make abusive behaviour a means of maintaining control (Dobash & Dobash, 1979; Connell, 2005). Hill's insight highlights how deeply ingrained societal ideas about masculinity, femininity, and patriarchy fuel abusive behaviour, showing that these actions are not isolated but part of broader social patterns.

Common victim behaviours?

In light of this observation by Hill (ibid), this researcher posits that given the commonality of IPA perpetration, it is feasible to speculate that victimisation experiences are similarly common. Do victims respond and react in similar and predictable ways to the abuse that they are experiencing? Even allowing for cultural nuances. From this researcher's extensive review of IPA literature, reviewing 'consumer' articles on the subject and my professional experience in the domestic violence courtroom, the same patterns of perpetration and victimisation emerge, repeated over and over. To the point that in the courtroom and in investigations that I undertake, behaviours become repetitive and predictable.

I am not referring to a 'victim mentality,' far from it. What I am referring to about victims are instinctive defensive responses to being abused, including leaving the relationship, fighting back, placating the abuser, seeking help or accommodating the abuse. Each victim responds differently. The victim is responding to abusive behaviours, however overt or subtle, from someone they love, and they believe loves them (Donovan & Hester, 2015; Hazelwood & Michaud, 2001). Understanding these responses helps us understand how to help victims and return power to them. Women do not seek abusive partners; abusive partners seek them (Dutton & Painter, 1993).

Are we missing the obvious?

In our efforts to understand IPA, have we overlooked something by ignoring the obvious? Attributing complexity where little exists? How different would the IPA narrative be if we concentrated not on finding complex reasoning for IPA behaviours but on assigning simplicity of understanding as the goal and highlighting these commonalities of experiences? And in doing so, we could change our understanding of IPA behaviours and how society responds to them.

'We know who you are.'

How different would it be for victims of IPA if a perpetrator, when faced in the courtroom by a knowledgeable judge, was told that their behaviours were not unique, that they were informed that given the predictability of their actions, they are to be provided with a menu of consequences if they follow the roadmap of advancing their IPA behaviours? If the judge was to say, *'We know who you are. And we know what you will do next, should you decide not to change your behaviour. And this is what will happen to you if you don't.'* As it is now, the victim (absent involvement of the state attorney in criminal court) is the one who decides, forced into deciding to close or continue IPA cases that they file. Change that emphasis to the perpetrator with the unveiling that their behaviours are predictable, let them decide what happens next with penalties attached to their decisions. If this concept of commonality proves to be accurate, it will enhance the ability of mental health, medical support, and legal services to predict abuse paths and victim responses accurately and thus design specific victim needs in the support services. Future research should address this further.

Predictability experienced in the courtroom.

This researcher, in their role as an investigator of domestic violence involving children, attests to the commonality concept. In sitting in courtrooms for nearly 20 years, case after case presents the same range of perpetrator behaviours and victim responses from parties. They follow a similar and predictable pattern of presentation. An examination of family court proceedings also demonstrates similar patterns of common behaviour.

How would this affect bisexual and LGT IPA?

More research needs to be done to document the experience of IPA in individual LGBT+ communities (Barker et al., 2012). And compare the experiences of one community to another (Ristock, 2011). Perhaps this research would confirm the hypothesis on the commonality of behaviour (or not) given the differences between and dynamics of each community. This call for individual LGBT+ IPA community research has been ongoing for over a decade, as opposed to coming to conclusions from blanket research on the acronym (Barker et al., 2012, p. 380; Messinger, 2017; Ristock, 2011). Foundational research exists (e.g., Russell, 2020), but more is urgently needed.

This researcher believes advancing individual LGBT+ communities' IPA research is important for two reasons.

1. To acknowledge that bisexual and LGT+ people are just as vulnerable to IPA as the heterosexual population and to provide responding services to assist community victims specific to their needs.
2. To determine what, if any, community individual-specific needs are required to adequately support IPA victims.

The expansion of the recognition of the criminality of IPA behaviours

In 1994, the U.S. Congress passed the Violence Against Women Act (DOJ, 2022). This Act, and the 1996, 2000 and 2005 additions to the Act, recognise that domestic violence is a national crime (USAO, 2023). The UK's Domestic Abuse Act (2021) also (SCA, 2015) goes further than the U.S. and creates a statutory definition of IPA and the forms in which it is experienced. From this, we learn that forms of IPA are criminal offences. Criminal offences comprise threats or acts of physical violence, sexual assault, and stalking. In addition, in the UK, as opposed to

other countries, intangible abuse behaviours that are designed to make a victim dependent on the perpetrator (CPS, 2023; SCA, 2015) are criminal. This includes coercive and other controlling behaviours that isolate someone from support, exploit them, deprive them of independence, and regulate their everyday behaviour. To clarify, this researcher uses the terms 'tangible' and intangible' to differentiate between visible and invisible forms of abuse. Tangible abuse involves physical harm (evidential–visible), while intangible abuse may be coercive or psychological (invisible), affecting the victim emotionally or mentally. The difference between tangible and intangible abuse lies in their forms and how they are presented; tangible abuse is something that can be seen, touched, or measured. Intangible abuse is more problematic to observe and quantify, as it cannot be seen. However, it can be just as damaging as tangible abuse, as it affects the victim's mental health, self-esteem, and sense of reality (Dutton, 2006; Johnson, 2008).

Abuse can be categorised as a crime depending on what was done, to whom, by whom and how, by attributing the intent of the perpetrator. For example, threats of harm or death (assault), physical abuse (battery), sexual abuse (battery and rape), monitoring communications and movements (stalking), attempts to isolate (kidnapping), control of the victim's finances (theft), intimidation, psychological and emotional abuse (coercive control).

The reality of IPA

Intimate partner abuse (IPA), particularly violent IPA, is significantly different from how it is commonly portrayed in the media (Johnson, 2008). It is easy for us to distance ourselves from it when we hear about incidents of IPA being referred to casually as 'a domestic.' Using such dismissive terminology does nothing to acknowledge what is happening and does little to support the victim. To appreciate this reality is to sit in the public gallery in a domestic violence courtroom for a couple of hours (there is one in most towns), followed by a visit to a battered women's shelter, an emergency room or a morgue. In there, you will see the result of the escalation of IPA to the point of physical injury. And in some cases, permanent injury or death. The term 'battered woman' coined by Walker (1979) is criticised as it does not reflect the diversity of victim experiences or the dynamics of IPA. It is also accused of oversimplifying IPA, ignoring other forms of abuse. Critics also state that the term lends itself to victim blaming (Dobash & Dobash, 1992).

Absent the opportunity to sit in a courtroom, here is a video from the U.S. that I use for training that will leave you no doubt of how serious IPA is. Be warned, it is brutal. These are not reenactments; every sound and image are real. When I teach, I caution that this comes with a trigger warning: what you see and hear cannot be unseen. However, you will know that reality I refer to in my writings and professional career.

<https://www.youtube.com/watch?v=c5dVPVqOTDI>

Theories of abuse. The role of personal choice.

Theories of domestic violence/IPA seek to explain the underlying causes and dynamics of abusive relationships. This researcher lists various theories below to highlight that despite extensive research into intimate partner abuse (IPA), no definitive cause for its perpetuation can be identified other than the perpetrator's choice to do so (Stark, 2007; Glasser, 1998). While multiple factors, such as socio-economic conditions, childhood trauma, or substance abuse, may contribute to the occurrence of IPA, the core argument remains that the decision to engage in abusive behaviour ultimately lies with the individual (Glasser, 1998). These factors are referred to by this researcher as catalysts (not causes) to abuse. Catalysts to abuse should not be confused with choosing to abuse. By emphasising the role of personal choice, this perspective challenges deterministic explanations, focusing instead on the agency of the perpetrator in perpetuating the abuse (Heise, 1998). This theory suggests that abusive behaviour is not inevitable. However, it is a conscious decision made by the abuser, reinforcing the importance of addressing accountability and decision-making in interventions and prevention strategies (Glasser, 1998).

Prominent theories of IPA from researchers and psychologists

A list of 23 theories can be found in Appendix M, which demonstrates the extent of efforts to understand IPA behaviour. While this sampling of theories is expansive, none of the theories serves the purpose of providing a singular theory. There are myriad other theories. None can be agreed upon as the absolute theory explaining IPA. Glasser's (1998) *Choice Theory* highlights the responsibility of perpetrators by emphasising that abusive behaviours result from deliberate choices rather than uncontrollable impulses or external influences. This perspective, which prioritises accountability, is favoured by this researcher. For further

discussion on theories, see Chapter 3: Theories Informing the research and Appendix: *Prominent theories of IPA from researchers and psychologists.*

Perpetration choice theory.

IPA is rooted in a partner's need to gain power and control. IPA perpetration is a choice, not an uncontrolled impulse (Glasser, 1998; Pedersen, 2022), as is demonstrated by the perpetrator's ability to stop and start their abuse at will, to choose whom they abuse, how, and when (Stark, 2007; Dutton & Golant, 1995). Those who are physically abusive carefully choose how to inflict injury on their partners so that it is not visible to anybody else (SUNY, 2023). They can also choose to change their behaviour when in the presence of friends or other family members, instantly becoming the 'nice guy' (Bancroft, 2002). A central feature of IPA is coercive control, which Stark (2007) describes as the most common and devastating form of partner abuse. The central concept of coercive control refers to the drive within an IPA perpetrator to exert authority over not only the actions of their victim but also their thoughts and emotions. They aim to capture the victim's mind, body, and spirit, seeking dominance in every aspect of their lives what Stark (2007) and Johnson (200) refer to as 'intimate terrorism.' Such a goal requires not reflexive action but planned, ongoing, deliberate decision-making on the perpetrator's part. In other words, a choice.

Problems with psychological approaches to understanding the perpetration of IPA.

The psychological literature explains the perpetrator's mindset by describing IPA as a complex series of behaviours perpetrated by people whose abusive behaviours reflect equally complex issues in their own lives (Dutton, 2007; Gillette, 2021). Perhaps it does. This researcher posits that this tends to over-complicate what appears to be a far more straightforward concept: the choice of one person to implement and maintain control over another by whatever means necessary, up to and including killing them (Radford & Russell, 1992; Stark, 2007; WHO, 2021). In attributing abuse to complexities in the life of the abuser, the attention is diverted from their actions and the experience of the victim. Further, it draws attention away from the wide range of abuse tactics that abusers use to control their partners, the use of which and their effectiveness evaluation demands thought and analysis (ibid).

An explanation of, but not an excuse for.

In seeking to apply formulaic or pathologising explanations to understand IPA perpetration, however well-intentioned, this may dilute and cloud the reality of what is an insidious web of controlling behaviours (Kelly & Westmarland, 2016; Stark, 2007; Stark, 2023). Applying a 'because of this, the abuser does that' may serve to intellectualise abuse, isolating it as an abstract action/reaction as opposed to anchoring it back to the individual who perpetrates it and their choice to start and maintain a campaign of abuse over another. As such, it can divert attention away from the person who needs it most, the victim, onto the perpetrator (ibid).

Influences

Each person is a compilation of their genes, upbringing, experiences, formative influences derived from culture, religion, social, family, and personal factors, including sex, gender, friends, education, and media influences, combined with their current or recent circumstances and lived experiences (Plomin & Daniels, 1987). These can be bundled into three packages: 1. formative influences, 2. current influences and 3. behaviour catalysts (life experience, addiction, poverty, mental health, and others). These, in turn, filter down into the individual's belief system, which then influences decision-making (adapted from Ajzen, 1991). We all have unique influences and outcomes, although when viewed on a macro level, we share many with everyone else in society.

Perpetrators of abuse are no exceptions; they have them too. However, rather than accepting their behaviours at face value for what they are (as the legal system does), many times attempts are made to explain their motivations, to understand what drives their behaviour, to understand it. This implies that if the perpetrator had, for example, a better upbringing, perhaps they would not behave as they do now; they are decent people who are just misunderstood. Applying explanations or excuses for perpetrator behaviours may be seen as a need for leniency in responding to them. This factor would be absent if these behaviours were perpetrated outside of a family setting (against a stranger, for example), where they would be met with a different response. Formative issues may indeed be an influence, but what is it that allows one person to live a normal life while another is driven by the need to control and hurt another? Particularly when that person is someone so close to them, who trusts them and relies upon them, who at first may not even be aware of what is happening

to them. Who may, in fact, blame themselves for what is happening to them. It comes down to the final element of the perpetrator’s thought process: a decision, a choice to act (Glasser, 1998; Stark, 2007; SUNY, 2023).

Perpetrator choices.

This table presents the perpetrator’s decision-making process in intimate partner abuse (IPA), showing examples of how specific actions are selected to achieve control and domination (Kelly, 1988; Dobash & Dobash, 1979; Stark, 2007; SUNY, 2023). Adapted from Glasser (2008), Stark (2007, 2023) and SUNY (2023).

Choice Category	Specific Action	Purpose/Impact
Planning	Where and when to abuse; plan abuse in advance	Maximises control; minimises detection
Campaign	Implement and maintain a campaign of power and control, continuing the abuse over time.	Sustains dominance; reinforces intimidation
Escalation/Adjustment	Evaluate effectiveness and adjust intensity.	Increase or decrease abuse to maintain control. Monitors abuse effectiveness.
Control over Relationship	Pause actions; stop actions; end or continue relationship	Retain leverage; maintain dominance.
Audience/Exposure	Choose who witnesses abuse; involve children in the abuse*; destroy the victim’s reputation.	Intimidation; protect the perpetrator's own reputation; widen control to use children against the victim.
Legal/External Pursuit	Pursue the victim after the injunction/divorce; use children (visitation/ custody) as leverage.	Extend control beyond the relationship; enforce compliance.

Note. *Even if they are not directly involved, children who witness IPA become participants and thus victims.

(Perpetrator Choices. Table/Figure 8)

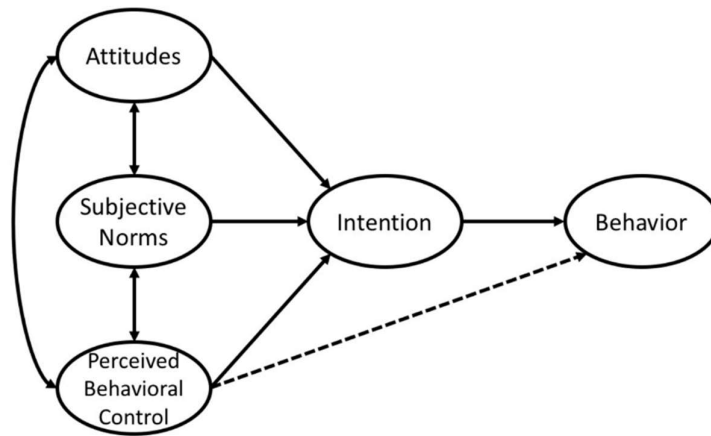
Supporting theoretical tenets

When viewed in this light, the role of personal choice becomes evident. Some theoretical constructs support this, as does the judicial system, which holds defendants responsible for their actions.

- Rational choice theory (RCT). Hobbes' (1651) RCT contended that humans pursue self-interest with little regard for such a pursuit's impact on others. This has been a cornerstone of our system of law and punishment ever since.
- The Theory of Planned Behaviour (TPB). TPB, initially developed by Icek Ajzen in 1985, provides a theoretical framework for understanding and predicting human behaviour through the lens of attitudes and beliefs. In 1991, Ajzen expanded the theory by introducing the concept of perceived behavioural control (Armitage & Conner, 1991). The TPB has gained recognition as a valid decision-making theory capable of predicting a broad range of behaviours. According to the TPB, the strength of an individual's intention to perform a specific behaviour directly influences their likelihood of engaging in that behaviour (Herrmann, 2017). Consequently, the TPB asserts that intentions are the primary determinant of actions (Shelley et al., 2023).

The TPB focuses on three key ideas that influence intention (ibid):

1. *Attitude toward the behaviour*: This reflects an individual's positive or negative evaluation of the behaviour (Ajzen, 1991).
2. *Subjective norm*: This represents the social pressure to either perform or abstain from the behaviour (ibid).
3. *Perceived behavioural control*: This assesses the individual's perception of the ease or difficulty in carrying out the behaviour, considering past experiences and anticipated obstacles (Ajzen, 1991).



Theory of planned behaviour (Ajzen, 1991).

Figure 9.

The TPB assumes that individuals generally act rationally, considering their attitudes, subjective norms, and perceived behavioural control (ibid). These factors may not always be consciously or actively considered during decision-making, but they serve as underlying influences on the decision-making process. In other words, people may not explicitly express a particular attitude, yet it can still shape their decision-making. There is some debate surrounding the assumption of rationality, as human behaviour is often guided by emotions rather than strict rationality (Sansom, 2022; Ajzen, 1991).

Disagreement with the choice model.

Frank and O’Sullivan (2022) disagree with the choice model, stating that perpetrators who use intangible means of controlling others may not even be aware of what they are doing, why they are doing it, or the consequences of their actions. Instead, they argue that not abusing is a choice given the myriad cultural and hierarchical beliefs that devalue women as they struggle against ‘normative male behaviour’ (ibid). This researcher considers this counterargument overly simplistic and dismissive. Perpetrators become aware of what they are doing when they see an adverse reaction from the victim or are asked to stop. These researchers’ position appears to be designed to divert responsibility away from the perpetrator and back onto ‘society,’ suggesting perpetrator ‘victimhood,’ while ignoring the real victim entirely.

Legal response to IPA perpetration

The legal system supports this choice theory, holding perpetrators personally responsible for their proven abusive actions (Brennan, 2004; Maxwell, 2023; Lindsay, 2016). There are two standards for proof: in civil court, a preponderance of the evidence is required, while in criminal court, proof beyond a reasonable doubt is necessary. Some exceptions may reduce the defendant's culpability in the form of mitigating circumstances (mental health issues, illness and others). A victim injuring or killing their abuser, for example, may result in a lesser sentence. Other circumstances may include mental health issues, developmental disability and others. It should be noted that while these may reduce the severity of a criminal offence and the defendant's culpability, they do not absolve them of personal responsibility (Tonry, 1997).

'Intervention.' Choosing to stop

Unlike with other types of assault and battery perpetrated against someone outside of a familial setting, the judicial system sometimes provides an escape clause for many IPA perpetrators, referring them to 'intervention' processes, batterers' intervention programmes (BIPS) or anger management (Babcock, Green & Robie, 2004; Daly & Wright, 2017, p. 208). Personal responsibility is the central tenet of these programmes. By attending these programmes, it is hoped that perpetrators will learn to take responsibility for their behaviours, become aware of the effect it is having on their partners and family, and choose to stop. Another area where choice comes into play is the choice to stop abusing. Only a small number of perpetrators enter these programmes through the court system; of course, no 'non-arrested' perpetrators do. Their efficacy appears to be subject to how individuals respond (Gondolf, 2004).

Perpetrators can avoid a criminal record or a custodial sentence if they complete the programme successfully. Deciding to stop is another choice; nobody can force them to stop (Geanacopulos, 2012). Batterers and anger management programmes tend to upset perpetrators, reinforcing their belief that the reason they are there is not due to their actions but rather those of their abused partner's complaint to the court (USDOD, 2003). These programmes typically indicate attendance by males, but women also engage in battering behaviour (see previous discussion on the term 'battering' under 'The reality of IPA'). The

dynamics of battering may vary between genders, showing a necessity for intervention programs tailored specifically to address the needs of female batterers (ibid). There are no intervention programmes for the intangible and possibly most damaging aspects of IPA, such as coercive behaviour, intimidation, gaslighting, denigration, manipulation, and the more subtle forms of abuse. Of note is that perpetrators may gain relief from their abusive behaviours, and as such, it is a self-reinforcing behaviour. Abusive episodic anger may have a positive effect on the perpetrator; it relieves stress (Walker, 1979; Stark, 2007). Perpetrators of domestic violence can sometimes learn to manipulate intervention programmes, presenting themselves as rehabilitated or non-violent without genuinely changing their behaviour (Gondolf, 2004).

Stereotypical IPA 'causes'

In attempting to understand the IPA, psychologists and information-providing services may attribute the perpetration behaviours to myriad influences that are often labelled as the 'causes' of abusive behaviour. These 'causes' may include adverse childhood experiences, witnessing violence in the home, mental health issues, alcohol and drug misuse, societal, religious, and cultural influences, stress, poor education, low income, jealousy, attachment issues, fear of abandonment, high testosterone and more (Gupta, 2023).

Catalysts, not 'causes.'

Stereotypical causes are not valid reasons for IPA; they are instead potential catalysts (Cunha, 2022; Dutton, 2006). They exacerbate the IPA decision-making process. Ascribing them as 'causes' dilutes and diminishes the personal responsibility aspect—the actual cause—in perpetrating IPA by providing what may be perceived as an excuse for the behaviour (ibid). That there is an implied diminished responsibility. In attempting to understand the perpetrator, blame is shifted away from them onto the victim, who is often seen as being responsible for their own abuse (Dobash & Dobash, 1992).

Instead, the perpetrator and their behaviours should be seen in isolation for what they are—one person's deliberate control of another through whatever means they choose to use, up to and including violence and death (Radford & Russell, 1992; Stark, 2007).

In approaching IPA from a sociological viewpoint (as opposed to a purely psychological position), it is possible to see the behaviours without the window dressing of psychological 'causes.' There are no causes other than choices—the personal choice to perpetrate. To abuse, not some stranger on the street (who would not accept such behaviours) but someone very close to them, someone whose emotional closeness of trust with the perpetrator adds to the vulnerability and abject cruelty of these behaviours, regardless of the level or duration of their imposition (Ganley, 1998; Stark, 2007).

Most people exposed to the formative and experiential issues attributed to IPA causes do not behave this way (Neller & Favian, 2006; Jennings et al., 2012). Kelly (1998) disagrees with the cycle of abuse theory that posits that those who have been abused go on to abuse. She suggests that while many experiences and conditions may increase the propensity to abuse, they do not inevitably cause it; to abuse is a decision. Just as most firearm owners never hurt anyone, those who do choose to. Those who do so because they choose to pull the trigger. In providing and publicising stereotypical causes, perpetrators benefit. They benefit from the effect of implied diminished responsibility. The inference then is that somehow the perpetrator could not help themselves, reflected by a society that often sees victims as weak, undeserving, and unsupportive of their abuser, a cause of their own victimisation (Dunn, 2005).

Addiction model?

How do we make sense of this behaviour? Some research contends that the perpetrator benefits from feedback from their abuse in a way like that of addiction (Bancroft, 2003; Dutton, 1995; Stark, 2007). The addiction model of repeated exposure to something that provides a reward. The more that is 'consumed,' the more effective the abuse is in achieving the perpetrator's goals, and the more it reinforces the perpetrator's campaign created by a positive feedback loop; more > better > more. This model may underlie the compulsive need to control that drives many perpetrators of IPA. While the theory that it is an addiction may serve to understand the behaviour further, it risks oversimplifying the behaviour and diverting responsibility away from the perpetrator.

Perpetrator manipulation. DARVO.

IPA is a behaviour modification tool (Stark, 2007). This modification is accomplished by successfully manipulating the victim(s) and others, including family and friends, by the perpetrator. What is often missing in the understanding of the perpetration of IPA is the central role of manipulation. This manipulation is multifaceted, meaning that it does not just describe a behaviour used against the victim (Bancroft, 2002; Johnson, 2008). It describes the self-presentation of the perpetrator towards other people around them, including family, friends, therapists, and the courts, as friendly, caring people, the real victims in the relationship (ibid. SUNY, 2023). They do this while at the same time doing everything they can to present their victimised partner as the crazy one, the irrational one, the one who is really the source of the problems in their relationship (Swan & Snow, 2006; Bancroft, 2002), a behaviour known as 'victim-stancing.' They may employ DARVO, an acronym that refers to three steps an abusive partner takes to avoid responsibility for abuse: deny, attack, reverse victim and offender (Harsey, Zurbriggen & Freyd, 2017). Unintentionally supporting the perpetrator's deflection efforts, the victimised partner may present at times looking distraught, dishevelled, unsure, unkempt, depressed, anxious, or fearful, not due to personal inadequacies on their part but due to the pressures of anticipating and responding to the manipulations of the perpetrator (Bancroft, 2002; Stark, 2007).

Deliberate and calculated behaviour

This adds another dimension to the perpetrator's behaviours: deliberate, cruel, and calculated actions to achieve the perpetrator's goals without any concern for the detrimental effect on the victim—a campaign of abuse (ibid). The degree of manipulation, the forethought of action, and the cunning of the perpetrator cannot be overemphasised. Whether it is carried out unconsciously or in full consciousness, it can be an all-encompassing behaviour inflicted by a supposedly 'intimate' partner. And that's the rub. The one person to whom a victim lets down their guard, whom they love and trust completely, becomes their captor and abuser (Hazelwood & Michaud; Stark, 2007). Even the action of pausing abuse can create tension as the victim lives in anticipation of the abuse's return. The perpetrator can increase and decrease the intensity of the abuse and can pause it for a time. They decide. As any examination of perpetrator behaviour reflects, these actions result from their choices (Becker, 2019; Hill, 2019).

Perpetrators' manipulations can be complex, simple, extensive, compulsive, and endless. Examples include.

Strategy	Example / Source
Victim-standing	Presenting themselves as the victim when confronted by police, courts, or child services (Harsey et al., 2017).
Denial and minimisation	Denying or downplaying abusive actions (Smyth et al., 2024; Scott & Straus, 2007; Howe, 2008).
Deflecting blame	Alleging partner is 'crazy,' an addict, alcoholic, or mentally ill (Bancroft, 2002).
Legal pursuit	Relentlessly pursuing the victim through the family court (Campbell, 2017).
Undermining co-parent	Telling children that the partner is responsible for the family breakdown.
Self-presentation	Presenting themselves as the sole breadwinner or stable partner.
Child support manipulation	Refusing to pay or paying erratically; demanding child support from the victim during visitation.
False reporting	Reporting the victim to child protective services for alleged abuse/neglect (Stark, 2007, 2023).
Parental alienation claims	Accusing the victim of alienation when they attempt to protect children (Meier, 2009).
Social defamation	Informing family/friends that the victim caused the relationship conflict (Bancroft, 2002).
Public shaming	Revealing embarrassing information online or to friends (Litton, 2007).

Note. Adapted from Litton (2007); Daly & Wright (2017, pp. 206–207); Stark (2007, 2023).

(Perpetrator manipulations. Figure 10)

The State may also inadvertently support the perpetrator by filing a charge against the victim when children are involved, accusing them of failing to protect ('Failure to protect') the children from the abuse or accusing the victim of abusing them, even when the victim is a victim of abuse themselves (Mahoney, 2019).

Perpetrator rationalisation

The perpetrator's belief system is formed and maintained by formative and current influences. These include their genetic makeup, health, familial experiences, culture, religion, sex/gender, media, and political exposure. These combine to establish and maintain the perpetrator's belief system and, thus, decision-making, reinforced by rationalisation. Rationalisation serves the purpose of resolving any arising dissonance and justifying their abusive behaviour. Cognitive dissonance is a psychological concept that explains the uncomfortable feeling felt by a person holding two or more contradictory beliefs or when their actions contradict their beliefs. In the context of abusive relationships, the person experiencing the abuse might minimise the severity of the abuser's actions and downplay their own emotional response to lessen this internal conflict both for themselves and the abuser (Lawlor, 2022). In the case of the perpetrator of IPA, they overcome dissonance through rationalisation and desensitisation over time, facilitated by repetitive behaviour and the benefits that accrue from it (Ellis et al., 2005).

Control tactics—the abuse toolbox (adapted from Stark, 2007: 228-288).

IPA perpetrators rarely, if ever, control their partners with one form of abuse (Stark, 2007). Perpetrators have at their disposal a range of abusive tactics—an abuse 'toolbox' that they can use as they see fit. These 'tools' comprise every type of abuse imaginable – violence, threats, coercive control, financial control, sexual abuse, isolation, intimidation, gaslighting, stalking, technological surveillance of phones and social media, threats to children, shaming, and more (Stark, 2007; Stark, 2012). The perpetrator uses these tools to control their partner. As the perpetrator evaluates the effectiveness of their campaign of power and control over their partner through the tools they are currently using, they can adjust the rate, intensity, and duration of controlling behaviour by choosing to change the tools they use to fulfil their goals. For example, if intimidation seems not to be working, adding threats of loss of means of communicating with friends or family may do the trick; all abuse combinations are available. Violence, therefore, may be seen as a punctuation of abuse, or an endpoint, rather than the description of abuse as a whole (ibid).

When tactics are viewed as tools, it clarifies two issues: 1. the range of what comprises abuse and how they are implemented becomes clear, and 2. the deliberateness of the role of behaviour choice by the perpetrator is equally visible.

Daly and Wright (2017, pp. 11-13, 182) advise that all abuse is accompanied by what they term 'Consequential Emotional Abuse (CEA),' emotional abuse experienced because of other abuses. CEA lasts long after events have passed, long after the relationship has ended. CEA could be translated into trauma, post-traumatic stress, and mental health consequences, which, fortunately, may disappear after enough time has passed following the end of the relationship (Daly & Wright, 2017, p. 183). Research indicates that once IPA ceases, many victims experience significant improvements in their mental health, often returning to pre-abuse levels of well-being (Anderson et al., 2003).

Ignorance of what comprises abuse aids the perpetrator and hurts the victim

The legacy terminology used for IPA ('domestic violence,' 'battering') implies that abuse is always physically violent, even though most abuse does not involve physical violence. This dichotomy is captured by Head and Milton (2014:289), who describe the language and labels of IPA as 'narrow,' leaving their research participants 'feeling confused,' and that their experiences did not fit the abuse description or victim experiences (Kelly, & Westmarland, 2014; Hanmer, Radford, & Stanko, 1999). Head & Milton (2014) describe how their participants' experience of emotional abuse did not fit the physical abuse implications of the terms' violence and 'domestic abuse'. One participant opined, *'I didn't consider a relationship abusive when it was emotional and psychological abuse rather than physical'* (ibid: 290). This was also recorded from participants in this thesis's interviews.

Solutions proffered to rectify this lack of understanding included the use of broader labels to include other types of abuse and the use of examples so that people could identify their experiences as IPA. Daly & Wright (2017, p. 196) and Daly & Bray (2019), in writing about IPA, recognise this limitation and specifically provide readily identifiable signs and descriptive symptoms of abuse to overcome this issue. Most domestic abuse cases do not include physical violence. Instead, they are frequently characterised by subtle, deceptive actions to establish power and control, which can be just as harmful as physical aggression (Stark, 2007). A change

in the mindset of how perpetrators implement their abuse is needed to examine this. IPA perpetrators rarely, if ever, control their partners with one form of abuse. Indeed, even if they did, all abuse is accompanied by consequential emotional abuse (CEA) (Daly & Wright, 2017). The previously illustrated *Dynamic of Intimate Partner Abuse chart* (Stark, 2007; Daly, 2023) helps to illustrate this toolbox concept.

Victim responses. The power of love

Nobody is born to be a victim of abuse. Similarly, arguably, nobody grows up with the expectation that they will be subjected to IPA. They enter life hoping to meet someone with whom to share it, to fall in love. Donovan and Hester (2015) describe the bonds through which love ties victims of abuse to their abusive partners. This concept is echoed by Hazelwood and Michaud (2001), who state that '*love is a bridge over which much can travel, including abuse.*' Hints of abuse may be present during the initial stages of a relationship, even in adolescence (CDC, 2023). It may start harmlessly enough through teasing or insisting that they notify their dating partner that they got home safely after a date, which may then evolve into being notified whenever they go out. Another word comes to mind in describing how many perpetrators first manipulate their partner—grooming. A similar tactic to that used by abusers of children. It describes the deliberate manipulation of a person to gain their trust. It overcomes the victim's natural defences by incrementally desensitising them to abusive behaviours (Fontes, 2019). Abusive relationships may evolve and escalate slowly or more quickly as the perpetrator gains the soon-to-be victim's trust. As victims become aware of what they are experiencing in a relationship, many leave, never to return. Others escape later in the relationship. Many battle with the knowledge that someone who they believe loves them is treating them this way. Some may react and treat their would-be abuser in kind. Others attempt to rationalise the behaviours as one-offs, providing excuses to explain what is happening (the perpetrator is under pressure, tired, etc.) (Dunn, 2005).

Abuse accommodation

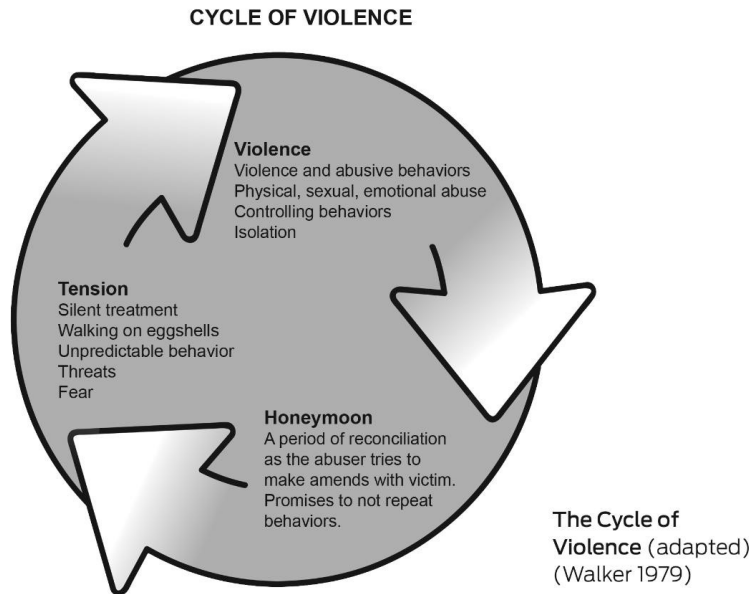
Just as Summit (1983) describes the ability of some child victims to accommodate their child sexual abuse ('child sexual abuse syndrome'), so too many victims of IPA may learn to accommodate their abuse. Summit (ibid) posits that abuse accommodation comprises five stages, after which disclosure of the abuse by the victim may be faced with disbelief and the

shifting of blame onto the victim. These stages include secrecy, helplessness, entrapment, and accommodation with unconvincing disclosure of the abuse. These IPA victims may learn to accommodate the abuse, learning to live in constant vigilance, a deeply exhausting state of being. They 'walk on eggshells', hoping that this will help avoid abuse (Bancroft, 2002; Stark, 2007). Others still accept their lot, seeing what is happening as 'normal,' perhaps believing (with the perpetrator's help) that this behaviour occurs in every relationship. Victims are often perceived as weak, as participants and instigators of their abuse. This results in victim blaming, and over time, victims may begin to think that this is part of who they are (Dobash & Dobash, 1992).

How the victim responds is essential to how the perpetrator maintains their power and control campaign. It is an essential feedback mechanism. If they feel their control slipping, they readjust their abuse tactics to increase or decrease the intensity, type, and frequency of abuse (see *Dynamics of Intimate Partner Abuse* chart).

IPA 'Cycles'.

IPA is sometimes spoken about as being perpetrated in 'cycles' as captured neatly in Walker's (1979) 'cycle of violence' model of aggression (see *Cycle of Violence* chart). Walker's (ibid) models do not capture the reality of the abusive experience. The idea of a cycle is an intellectual effort to put order into a misunderstood set of dynamic behaviours. It also describes a type of abuse that this researcher has rarely witnessed in their career. However, it describes but one type of abuse perpetration. It does not reflect that perpetrator behaviours vary according to the needs of the abuser; they can be constant and sporadic and may appear to follow a pattern when observed after the fact, although this may be an imposed pattern (Kelly, 1988; Stark, 2007). A pattern of abuse as proposed by Kelly (1988) should not be confused with a cycle of abuse. The use of the term 'cycle' suggests that there is predictability in the experience of abuse, that the victim would know when and what to expect. IPA is not like that, and abuse rarely, if ever, occurs predictably. Unpredictability is a key aspect of the power and control that abusers exert over their victims (Stark, 2007). The idea of a cycle may also presume that victims are to blame for not anticipating and acting in advance to a predictable cycle of abuse (NDVA, 2023)



Cycle of Violence. Figure 11

The frequency and pattern of the abuse experience can, for a victim, be a chaotic and confusing existence, but for the perpetrator, it may be normal (Stark, 2007). The perpetrator is in control. They dictate the who, what, where and when of their behaviours (ibid). The victim, on the other hand, can only react. The Walker (1979) 'cycle' is thus an imposed idea of order which bears little resemblance to reality for most, where the cycle is not one of tactics but a feedback loop of perpetration, reaction, adjustment, and repeated perpetration. The concept of a 'cycle' gives the impression that these are orderly events with peaks and valleys where downtime can be enjoyed. There is an inference that there is an ebb and flow to IPA perpetration. Perhaps there is from the perpetrator's point of view. However, for a seasoned IPA victim, they are constantly aware that a recurrence of absent abusive behaviours is but a heartbeat away (Stark, 2007, pp. 245-7). No luxury of a predictable cycle for them. Victims struggle to make sense of what is occurring to them, denying what is happening, attributing the experience to myriad other causes than the increasingly obvious fact that someone they love and who is meant to love them is treating them like this. They respond, react, act, accommodate, rationalise and understand the experiences. Some may leave as soon as they realise what is happening, while others may stay for a lifetime (ibid).

Options for victims of IPA

The best expert in an IPA relationship is the victim. They know everything about the perpetrator, their behaviours, their 'triggers,' and what they are capable of doing (Kelly, 1988). They also know the most opportune time to leave the relationship. Leaving the relationship can increase the rate and level of abuse exponentially, not only against the victim but it may also endanger anyone assisting the victim, including the children (Litton, 2007). However, even with a divorce, leaving the relationship is not the end. Children, if present, will remain as a link between perpetrator and victim after they leave the relationship. The court inadvertently supports this link and the ongoing danger of abuse in the form of orders of child custody and parental time sharing. Leaving the relationship can be the most dangerous time for a victim as it challenges the perpetrator's power and control. Geanocopoulos (2012) advises that of the women whose partners kill them, 75% are killed after they leave the relationship (Dobash & Dobash, 1992; Campbell et al., 2003).

Victims, too, have a toolbox of resources from which they respond. They consciously or unconsciously deploy their defensive tactics in the hope that they can understand what is happening to them and then begin the process of deciding if and how they can escape or stop the abuse. These defensive tools may involve leaving right away, never to return, leaving and returning (especially where children are involved or the abusive partner is the breadwinner, fighting back if assaulted ('violent resistance'), accommodating the abuse, attempting to appease the abuser, seeking help among their friends or family, seeking help from a hotline, calling the police, seeking a restraining order, fleeing to a shelter or just accepting what is happening and attempt to survive (Goodman, Dutton et al., 2003; Daly & Bray, 2019, p. 73).

Judicial option.

If a victim gets to a point where they have had enough and have weighed up the consequences of their seeking to leave the relationship, there are some steps that they can take. The first and quickest is to seek a court injunction to remove the perpetrator (order of protection) from the home. The court issues this on the basis that the victim or their children are in immediate harm. A hearing will be set weeks later. This approach may be effective, as the fear of imprisonment for breaching the court order could deter the perpetrator; however, its

effectiveness depends on the perpetrator's respect for it, as without this, it would be merely a piece of paper. If physical harm has been incurred, however minor, a criminal complaint through the police will also result in the issuing of an order of protection, and it will begin the process of a criminal case, which could result in harsh punishment for the perpetrator. Many times, depending on the injury and other evidence, it may result in an order of protection and a referral of the perpetrator to a diversion programme such as anger management or a batterer's intervention program (BIP), where it is hoped that therapeutic self-awareness or group intervention may stop the abusive behaviours. Finally, if the perpetrator has forced the victim into non-consensual sexual activity, a charge of sexual assault or rape can be filed with the police, and an arrest may result and the filing of a criminal case (Daly & Bray, 2019).

A peer-based solution option to IPA perpetration

Intervention programmes have a dubious success rate. Therapy, if not provided by a professional well-versed in the nuances of IPA, IPA perpetration and perpetrator manipulations, may serve as a vehicle not to change the perpetrator but for the perpetrator to manipulate the therapist and to blame the victim for the abuse ('therapeutic manipulation') (Mandell, 2021). Jail and treatment programmes may just make the perpetrators more angry and bitter, particularly if these interventions are perceived as punitive rather than rehabilitative (Gondolf, 2002). Only one option comes to mind when reviewing the limited options available for true intervention. Peer immersion recovery programs that reinforce personal responsibility. One such model is that provided by Alcoholics Anonymous (AA), generally referred to as a 12-step program. 12-step programs exist for many different types of behaviour, including domestic violence (see Recovering Anonymous) (Kurtz, 1979). The emphasis is on members taking responsibility for their own behaviours without minimising or blaming others (ibid). The AA model is replicated across the globe due to its success rate for addiction and other behaviours. This is a free model that perhaps should be mandated as part of a perpetrator diversion programme and should be available to all who seek help to correct their abusive behaviours.

Why are bisexual women sexually abused at high rates?

The absence of research into the targeting of bisexual women for rape and sexual abuse makes examining the causes of their victimhood a challenge (Walters, Chen, & Breiding, 2013).

Statistics highlight the much higher rate of sexual abuse (rape) that bisexual women experience (75%) than lesbian (46%) and heterosexual women (43%) (Breiding et al., 2013; Messinger, 2011, 2017; Coston, 2017; Walter et al, 2013). This statistic primarily draws from the National Intimate Partner and Sexual Violence Survey (NISVS) 2010 findings on victimisation by sexual orientation. Little prior primary data exists to support this conclusion until now. My research participants demonstrated very high levels of sexual abuse among all participants, equalling 85% of women (12 out of 14), 100% of trans women (2/2) and 50% of males (2/4). Closson et al. (2024) highlight the high rate of violence against trans individuals. This researcher acknowledges the smaller size of the trans and male participant pool.

When participants were asked why they thought bisexual women were so targeted, most were reluctant to speculate. Some comments included 'opportunity' due to intoxication, sexual assault due to the perception of bisexual women as being 'easy', and accommodating an abusive partner were among the reasons. It did not answer the question as to why bisexual women are sexually assaulted at, by this survey's results, double that of other women.

Research into bisexual women's sexual abuse.

Bisexual women's sexual assault is under-researched. This may be due to research being constrained by (see Johnson & Grove, 2017, p. 437)

1. their smaller population size compared to heterosexual women,
2. reluctance of bisexual individuals to disclose their bisexual identity (McLean, 2018),
3. the diverse range of sexual orientation and gender identities and their lack of recognition and acceptance by society,
4. Sample bias when recruiting through LGBT+ networks.

(Hughes & Eliason, 2002; Rosario, Schrimshaw, & Hunter, 2008; Worthen, 2013, in Johnson & Grove, 2017).

To those familiar with LGBT+ IPA research and the constraints of bisexual research, this is a familiar list (see Daly, 2020, pp. 27-33). Further, research such as this is often ignored or subsumed into lesbian and heterosexual women's research. The lack of research hinders the understanding of bisexual women's experience of sexual abuse (Johnson & Grove, 2017)

Factors that may make bisexual women more vulnerable to sexual abuse and rape

(Note: None of this discussion should be seen as victim-blaming.)

In determining theoretical sources of vulnerabilities of bisexual women to sexual abuse, factors may include any one or a mix of the following:

Individual risk factors: Johnson & Grove (2017: 437) propose that an individual's risk of victimisation by IPA may be rooted in their life experiences, biology, and personality.

Hypersexualisation: This refers to the excessive or inappropriate portrayal of individuals (often women) in a sexualised manner. It involves attaching exaggerated sexual characteristics or behaviours to them, which leads to objectification and the reduction of an individual to their sexual attributes. Several studies suggest that both men and women, regardless of sexual orientation or gender identity, often view bisexual women as more promiscuous compared to heterosexual women. These perceptions associate bisexuality with higher levels of sexual activity and an inability to maintain monogamous relationships (Friedman et al., 2014; John & Grove, 2017; Tales, 2023).

Objectification: the act of treating a person as an object or thing. This process can result in dehumanisation, disregarding the person's innate worth. They are viewed merely as tools for another person's (sexual) gratification or pleasure (John & Grove, 2017)

Dehumanising: the process of stripping away positive human attributes from an individual or group, perceiving or treating them as less than human. This often involves reducing people to the status of objects or animals, which can facilitate discrimination, violence, and mistreatment (ibid).

Fetishism: a psychological condition where someone has an excessive and sometimes obsessive connection to specific objects, body parts, or situations, which are typically non-sexual in nature. This attachment becomes necessary for sexual arousal or satisfaction (Tales, 2023)

Biphobia: the invalidation of their bisexual identities and pressure to conform to the LGT+ and heterosexual binary models of sexual orientation (Tales, 2023).

Internalised biphobia (Pollitt & Roberts, 2021; Yoshino, 2000)

Substance abuse (John & Grove, 2017). High levels of alcohol and substance abuse exacerbate the risks of assault. LGBT populations are at a greater risk for problematic use of alcohol and substances than their heterosexual counterparts (Goldbach et al., 2014; Hughes et al., 2010; Marshal et al., 2008). Research has demonstrated an even greater risk for substance use in bisexual women.

Victims often report personal substance use at the time of their assault (e.g., Messman-Moore et al., 2008). They are perceived by perpetrators as 'easy' victims while under the influence (e.g., Brecklin & Ullman, 2010) (Johnson & Grove, 2017).

Summary

This chapter defined intimate partner abuse and clarified its use as the preferred term in this research, highlighting the wide range of abusive behaviours and their consequences, including death and suicide. It examined the perpetration of IPA across diverse populations, with recognition of bisexual and LGBT+ victims, who face both invisibility and significant barriers to seeking help. The discussion considered the predictability of abusive behaviours, the limitations of psychological explanations, and the importance of understanding perpetration as deliberate, calculated, and rooted in choice. Legal responses, teaching models, and theories of abuse were reviewed, alongside the ways perpetrators rationalise their actions and manipulate victims. Finally, the chapter addressed options available to victims, including judicial and peer-based interventions. It reflected on why bisexual women experience sexual abuse at disproportionately high rates. These insights establish the complexity of IPA and provide the basis for further analysis in subsequent chapters.

6. METHODOLOGY

Thesis title: *Research into the experience of intimate partner abuse (IPA) perpetration and victimisation within the bisexual population.*

This chapter reviews the methodology and methods guiding this research. Methodological issues, including research ontology, epistemology, axiology, and ethics, and how these shape the research approach, are discussed. The methods used are detailed. Topics include research design, data collection techniques, interview formats and codes, and strategies for overcoming interview challenges. Questionnaire components, survey limitations, sampling and recruitment processes, ethical considerations, and data analysis methods are examined.

Introduction

This chapter reviews the research philosophy, methodology and methods adopted for and guiding this research into intimate partner abuse (IPA) in the bisexual community. This research sought to document this under-researched and under-appreciated range of toxic behaviours and their effect on bisexual victims (Bermea et al., 2018; Head, 2020). The goal is to add new knowledge about this subject by shedding light on the dynamics of this range of behaviours through the experiences of the thesis survey participants. Moreover, the intention was to provide a voice for this isolated community and to provide recommendations for helping resources for bisexual IPA victims.

Given the dearth of current information about this phenomenon, this research provides important foundational support for further research (ibid). IPA encompasses myriad forms of abuse occurring within dynamic, intimate relationships. The subject sets significant challenges for researchers due to its sensitive nature and the hesitancy of victims to speak out (Cowles, 1988, p. 163), particularly in the bisexual community, which suffers discrimination from within and without the LGT+ communities (Lindasusan, 2011; Barker, Richards & Bowes-Catton, 2012, p. 21).

My methodology was selected to align with social constructionist ontology and mixed-methods interpretivist epistemology. As such, it allows for a nuanced exploration of how societal norms, cultural narratives, and individual experiences shape the understanding of bisexual IPA (Creswell & Plano Clarke, 2018). This section includes research design, data collection and data analysis methods. Primary and secondary data sources were used.

Research conclusions

Any conclusions made in this thesis about bisexual IPA are based on the experiences of the participants recruited for the survey. Conclusions do not purport to speak for the wider bisexual community. Correlation with other bisexual IPA primary and secondary data is made to support points that arose in the survey.

Ontology

To understand the type of ontology used in this research study, I began by defining it. Crotty (2003, p. 10) defines ontology as ‘the study of being’ and deals with what constitutes reality, the nature of existence, and the world we examine. Guba and Lincoln (1989, p. 83) suggest that ontological assumptions answer the questions ‘What is the nature of reality?’ and ‘What is there that can be known?’ (Abdelhamid, 2008).

For this research, I adopted a social constructionist (SC) ontology. Berger and Luckmann (1966) theorise that reality is socially constructed through human social interactions, communications, and interpretations in a dynamic world (Mead, 2015; Blumer, 1969). The phenomenon of intimate partner abuse (IPA) is not a fixed objective reality but is dynamic, influenced by cultural, societal, and individual perceptions (Rakovec-Felser, 2014). In adopting SC, I recognise that IPA, including how it is experienced and perceived in the bisexual community, is shaped by social norms, historical contexts, culture and standards, biases, and personal beliefs. I also acknowledge the diversity and intersectionality in the bisexual community, encompassing a range of gender and sexual identities and social expressions (Ochs, 1996). This diversity may influence how IPA is perceived, recognised, and experienced (Ristock, 2011), emphasising the need for an SC approach to this research (Harding, 1993).

Epistemology

Epistemology is defined as a way of understanding and explaining how we know what we know (Crotty, 2003, p. 3). Understanding the complexities of the bisexual IPA necessitates an epistemological stance that values both objective data and the stories of bisexual individuals affected by IPA, recording their narratives and lived experiences (Audi, 1998).

The research employs a mixed-methods interpretivist epistemology (Creswell & Plano Clark, 2011). In doing so, I acknowledge the importance of subjective experiences and empirical data. Interpretivist epistemology involves understanding individuals' subjective personal meanings and interpretations of their experiences (Schwandt, 1994). Interpretivism assumes that reality is subjective, multiple, and socially constructed (UoN, 2024). We can only understand a person's reality through their experience of that reality, which may be different from another person's version (ibid). Interpretivist epistemology concerns understanding knowledge as a social process involving multiple viewpoints and influences from different meanings. Chowdhury (2014, p. 433) emphasises that these research methods adopt the position that people's knowledge of reality is a social construction by human actors, 'which distinctively rules out the methods of natural science.' Dawadi et al. (2021) inform us that mixed-methods research (MMR) is a research methodology that involves gathering, analysing, interpreting, and reporting both qualitative and quantitative data to address research questions appropriately and ethically (Bryman, 2012; Creswell, 2015; Creswell & Plano Clark, 2011). This approach supports my belief that knowledge about IPA within the bisexual community is best derived from a comprehensive understanding that includes quantitative (via questionnaire) and qualitative data (via interview and questionnaire). Using the interpretive lens, we may acquire an understanding of the bisexual IPA victim's perspectives, experiences, and personal narratives. In doing so, we acknowledge the complexity of understanding how personal experiences and society's role shape our viewpoint of IPA in the bisexual community.

Axiology

Axiology is the study of values and value judgments. It examines what individuals consider good or bad and why they prioritise certain actions or efforts over others (Rescher, 1969). The potential for bias and subjectivity is recognised in acknowledging the role of the

researcher's values and perspectives in shaping the research process. Every effort was made to acknowledge this and to maintain reflexivity and transparency throughout the study. My values include empathy, social justice, and respect for diversity. My research has been informed by a guide on researching and writing about bisexuality (Barker et al. 2012 p. 385). The guide was adapted from suggested rules for writing about trans people (Hale, 2009). See a copy in the Appendix and the discussion under 'Research Guidelines' in the Introduction of this thesis.

Ethics

My ethical approach is consistent with the principles of feminist research ethics. These prioritise the well-being and agency of research participants, particularly in studies related to gender-based violence (Lempert & Campbell, 2003). I recognise the importance of maintaining a 'do no harm' victim/survivor/witness-centred approach and perspective. In doing so, I endeavoured to ensure that my research process did not re-traumatise or harm victims/survivors/witnesses (see also 'Ethical Considerations' in the following Methods section)

Research barriers and constraints to researching bisexual and LGT+ IPA.

Researching bisexual and LGT+ populations is not without its difficulties. Sexual orientation, identity, and sexual behaviour are distinctly separate measures that do not always correspond with each other (Coston, 2017). The LGT+ acronym is a diverse group of minority communities subject to societal exclusion and discrimination; accessing them for research can be challenging. While there may be some similarities with other groups, it is critical to approach research on LGT+ IPA with sensitivity due to the unique nature of their experiences (McMahon, 2017; Messinger, 2015). Ristock (2011) suggests that each segment of the LGT+ population may benefit from having its own research protocols. Other researchers echo this need for improved research methodologies to represent specific experiences accurately, for example, IPA, in each distinct LGT+ community (Donovan & Hester 2015; Messinger, 2017).

This is especially true of the bisexual community due to its size as the largest group in the acronym, comprised of a widely diverse, difficult-to-define population (Yoshino, 2000). In contrast to the heterosexual community, the LGT+ communities consist of individuals who

may have different experiences of IPA. In the following discussion, the observations made for researching the LG+ communities apply particularly to the bisexual community, given its extra layer of exclusion, double discrimination, from the heterosexual community and the LG+ communities (Lindasusan, 2011; Barker, Richards & Bowes-Catton, 2012, p. 21). While LGBT+ IPA does receive research attention (mostly LG) as noted by Ristock (2011), much effort is needed to meet the needs of those overlooked parts of the acronym. Much can be learned about IPA by conducting comparative analyses between the heterosexual and LGBT+ communities, as well as within these communities themselves. LGB+ IPA research is not a central focus of academic research (Ristock, 2011). This is despite evidence that sexual minorities are at equal or greater risk of IPA, with bisexual women recording the highest rates of abuse (Walters, Chen & Breiding, 2013).

Lifetime prevalence of rape, physical violence, and/or stalking by an intimate partner			
Women		Men	
Lesbian	44%	Gay	26%
Bisexual	61%	Bisexual	37%
Heterosexual	35%	Heterosexual	29%

NISVS, CDC (2010). Figure 12.

LGT+ and the bisexual population size are underestimated.

Statistics likely underestimate the real size of the LGBT+ population. This deduction comes from the understanding that a portion of the LGBT+ community does not publicly reveal their sexuality, although the true extent of this undisclosed group remains unknown. The National Survey of Sexual Attitudes and Lifestyle (NATSAL) shows that the number of individuals reporting same-sex experiences is larger than those who identify as gay or bisexual (Nastal, 2012). This raises the question of why some people choose not to identify as LGB+. There are multiple reasons for this, which have been widely explored in previous studies (Head, 2020). As demonstrated in Figure 16 (Gates, 2011; Gallup, 2024), the bisexual population appears to be larger than other LGBTQ+ groups. One theory suggests that some people may identify as bisexual, as it seems closer to the heterosexual norm and can help avoid societal scrutiny that identifying as gay might invite (Todd, 2016). Perhaps this inflates the population numbers.

However, being bisexual does not necessarily provide a 'safe haven.' Research indicates that bisexual individuals often face added stress, stemming from both the heterosexual and LGBT+ communities due to a lack of support and marginalisation (Rollè et al., 2018, p. 4). Todd (ibid) agrees, arguing that bisexuality often faces misunderstanding and mistrust, or biphobia, from heterosexual, lesbian, and gay communities.

Power and control: overcoming the feminist paradigm.

The feminist model proposes that IPA stems from the exertion of male power and violence over women, signifying the existence of patriarchy and sexism in intimate relationships (Elliott, 1996). This perspective poses a challenge in comprehending IPA within LGT+ and bisexual relationships. Ristock (2003) advocates for an expansion of the feminist model to accommodate an understanding of IPA within the LGBT+ communities. Merrill (1996) posits that the core issues of LBG+IPA are not gender-based but instead revolve around the core issues of power and control. Donovan and Hester (2014) concur, asserting that power and control are key features of this model, provided that the context is taken into account. Intersectionality—the intertwining of gender, sexuality, ethnicity, age, and class—is vital in understanding IPA, as it situates individuals and their experiences differently (ibid; Daly, 2020). This is particularly true in the bisexual community, given the diversity of those who identify as bisexual. The existence of IPA in LGB+ relationships underscores the fact that intentional intimidation through abusive actions and words is not a gender problem but an issue of 'power over.' Some people, if given a chance to abuse their partners without consequences, will do so due to a craving for control over certain aspects of their lives (Merrill, 1996, p. 3).

Improved survey methodology

Survey methodology plays a crucial role in studying the bisexual and LGT+ population (Gates, 2011). The way surveys are conducted can impact respondents' inclination to disclose their LGB+ identities and behaviours. Factors such as assurances of privacy, confidentiality and anonymity can increase respondents' willingness to participate and provide accurate information about sensitive topics. Providing payment for survey participants may also increase participation rates and encourage diverse populations to engage with studies (Singer & Couper, 2008). However, these must be bound by ethical considerations to avoid coercion

and undue influence, which could lead to bias in favour of pleasing the researcher. Standardising questionnaires (used across studied populations), how they are asked (standalone or part of an interview), and their design may facilitate bisexual and LGT+ individuals in self-identifying and provide consistent data. Gates (2011) suggests that using consistent methods and sampling strategies, along with repeated standardised survey questions over time, can improve the reliability and accuracy of data gathered and estimate the size of the LGBT+ community. On the other hand, interviews may lead to an underestimation of the LGT+ community size due to limitations in acquiring representative samples. They are also time-consuming, which limits the number of people who can be interviewed. Results will be based on a sample of the population rather than the entire population and will therefore be subject to sampling error. Variables in deriving samples and securing meaningful sample sizes may also affect the quality of response and the quality of data gathered. (Gates, 2011). Acknowledging that the derived samples, while attempting to replicate a cross-section of the studied population, only produce data relevant to the sample participants. The issue of universalising research results and conclusions must be avoided by concluding that the data gathered from samples applies to the entire researched population (Barker et al., 2012, p. 380). They are not. The results apply to the sample participants, who we hope represent the studied population. The resulting new data does, however, become another foundational building block in the understanding of the studied subject.

Summary

This chapter outlines the methodological foundations of the research, including its ontological, epistemological, and axiological positioning, as well as the ethical considerations that underpin the study. It addressed the barriers and constraints of researching bisexual and LGBT+ intimate partner abuse, particularly the challenges posed by the difficulty of determining population size and the invisibility of bisexual experiences. The discussion also reflected on the role of power and control in shaping methodological choices, highlighting the need to explore moving beyond traditional feminist paradigms while maintaining a critical lens. Finally, the chapter explained the improvements made to survey design and methodology, ensuring that the research could capture the complexity and diversity of bisexual IPA.

7. METHODS

This chapter outlines the methods used to investigate bisexual intimate partner abuse, including participatory approaches, ethical safeguards, and snowball sampling. It explains how qualitative data were collected and analysed, while also noting limitations and recommendations for future research.

Research title and primary question.

Research into the experience of intimate partner abuse (IPA) perpetration and victimisation within the bisexual population. My primary research question is, 'How is the perpetration and victimisation of IPA experienced in the bisexual community as represented by the research sample participants?'

Why these methods?

Little primary research exists that records the experiences of bisexual victims of IPA (Callan et al., 2021; Head, 2020). The reasons why are well documented in this thesis and reflect the effects of biphobia, bi-invisibility, discrimination, and exclusion from the heterosexual and LGT+ communities (Todd, 2016; Rollè et al., 2018, p. 4). One notable previous study utilised primary qualitative data collected through interviews (Head & Milton, 2014), with a small sample size (n = 10). The small sample size may have reflected the difficulty accessing bisexual IPA participants using traditional recruitment methods, and the researchers thus relied on snowballing sampling (Head & Milton, 2014, p. 280). Past (non-primary) quantitative data assumptions were derived employing regressive analysis of secondary data, which provided indications of abuse intensity, identifying bisexuals as the group experiencing the highest rate of IPA (Messinger, 2011; Coston, 2017). There is little primary, experiential data besides Head & Milton (2014) and this thesis's survey (Bermea, 2018).

The methods used in this research, as described here and based on a questionnaire and interview, were employed to focus directly on self-identified bisexuals who had experienced IPA. The purpose was to reveal new data by giving the participants a voice while establishing a demographic and experiential baseline. The sampling method that was decided

upon, snowball sampling, was chosen early, prompted by interactions with friends and colleagues who showed an interest in my study. Head & Milton’s (2014) difficulties with recruitment and their resort to snowball recruitment had an impact on the methods used in this survey.

Where does bisexual IPA fit?

The subject of bisexual IPA, as has been discussed in this thesis, is one that has been under-researched for myriad reasons. One of the central concerns in studying this subject is where it falls in IPA research. Is bisexual IPA an issue of same-sex or opposite-sex relationships or both? How do we study a numerically large group of people in the LGBT+ acronym (Gates, 2011), traditionally understood and defined as existing within a binary framework of sexuality, when it has now become an adopted and evolving identity incorporated into new gender identities? As has been amply demonstrated here, there is insufficient data available to answer this question, which is why primary research, such as this, is so important. As such, from a research perspective, we are only at the beginning of the beginning of understanding bisexual IPA. Primary research such as this (and Head & Milton, 2014) is essential to providing foundational knowledge from which to study this subject.

A stand-alone subject



(Figure 13) Need for bisexual IPA research protocols

My research has demonstrated that bisexuality IPA is a subject that benefits from being treated as a subject of its own, unattached to LGT+ individual community, acronym or heterosexual models. Bisexuals are not a homogenous population, nor is it a homogenous sexual orientation (Head, 2020, p. 128). It has for too long been ignored, subsumed into heterosexual and LGBT+ research as an ‘add-on,’ or defined by assumptions that what applies to LGBT+ also by default applies to bisexuals (Barker et al., 2012), for example, see Ovenden

(2019). Todd (2021, p. 160) acknowledges the tendency to mix bisexuality research with research into lesbian and gay male sexuality. It never attained the status or urgency that other acronym member communities have demanded and received for research due to bisexual invisibility, and this is the difficulty in studying a phenomenon within a group of people who are told that they do not exist. It cannot be studied under a heterosexual or an LGBT+ framework due to its position as an invisible population excluded from both groups. To do so dilutes it as a subject and tends to draw it magnetically into either realm. To understand it, it must be studied on its own without interference or inference from either group. We do this by separating the research and recording experiences of bisexual IPA reporting it 'as is,' without reference to other research, by treating it as a separate IPA subject until a research basis is established from which conclusions may be derived.

Research design

In designing this research, considerable attention was given to studying IPA in other minority groups. Of particular interest was the research carried out by Donovan and Hester (2014) and the extensive detail into which they went to record their research process, the guidance regarding methodology by McCarry, Hester, and Donovan (2008) and the primary research on the subject by Head and Milton (2014) and Head (2020). All these studies provided insight into researching LGBT+ groups, which were focused more narrowly by Head and Milton (2014), whose work focused exclusively on bisexual IPA. Head and Milton (2014) provided the base for the primary research (such as this thesis) by providing a detailed overview of the process and difficulties in researching this elusive but numerically significant (Gates, 2011; Gallup, 2024) population.

Research instruments.

All the instruments used for this research, some of which are in this chapter, are also stored in the Appendix. These include the recruitment letter and information package, the questionnaire (which also served as the framework for the interview), participant anonymisation information and codes, information on data management, and the consent forms.

Participatory Research (Baum et al., 2006)

In future research, it is recommended that participant involvement be considered. Participatory Research (research approaches that actively involve participants in the study design, data collection, or analysis) or Participatory Action Research (PAR) (where participants are co-researchers, helping to shape the study to ensure it reflects their lived experiences) is encouraged, particularly in the design and testing of survey instruments. Testing instruments, questionnaires, and interview formats before use in surveys is recommended.

These measures help to:

- a. ensure that survey questions are relevant and understandable.
- b. reduce researcher bias by incorporating lived experiences.
- c. improve data accuracy by including the perspectives of those directly affected.

Ethical Considerations

Given the subject of this research and the sensitivity of the topics discussed, ethical considerations were prioritised from the beginning of the study and remained prominent throughout. As a court-appointed investigator, this researcher has considerable training and experience in interviewing people subjected to IPA.

The ethos was 'do no harm.' Ethics were guided by the University of Lancashire Ethics, Integrity, and Governance Unit, which reviewed, improved, and approved the research ethics application and questionnaire. Ethical considerations included obtaining informed consent from sample participants, ensuring participant privacy and data confidentiality, being aware of potential participant safety needs, being sensitive to avoid re-traumatising the interviewee, ensuring LBGT+ culture awareness and competency, ensuring respect for participant agency and autonomy, ensuring that participation was voluntary and not due to a sense of obligation to referees who had recommended them for the research. In addition, support sources were provided to participants who might be negatively emotionally affected by the discussions of IPA or past experiences.

Additional considerations and sensitivities were given to the two trans participants and to data that suggested that two young women may have been trafficked in the past. These

women were being provided with support by the LGBT+ victim support organisation through which they were contacted.

Cautions about interviewing IPA participants

Doing research into a population that has experienced intimate partner abuse and associated trauma requires sensitivity and an ongoing awareness of causing potential emotional harm in determining that '*damaging effects do not outweigh the benefit of taking part*' (McMahon, 2017). This researcher was qualified to conduct this sociological research due to extensive training and professional experience in interacting with people exposed to trauma as an investigator in domestic violence and family courts. The researcher was also aware of their personal interview limitations and did not attempt to draw participants into psychological explorations of their experiences (other than as related by the participants). This researcher would recommend that in future similar research that may wish to explore psychological approaches with the participants, in addition to a trauma-informed researcher, a qualified psychologist should also be present.

Avoiding triggering traumatic responses

The researcher has extensive professional experience and training in interviewing victims of trauma and sexual abuse, including children and adults. This was important given that the survey participants' experiences of abuse ranged from coercive controlling behaviours to an extreme of repeated violence, including childhood and adult sexual abuse, rape and threats of death. These topics had the potential to trigger negative responses from participants if not properly approached or managed (Campbell et al, 2009). Several of the participants projected indications of trauma and exhibited emerging traumatic behaviours during the interviews. The interviewer avoided triggering traumatic responses by recognising the indications of these responses and by taking action to stop or arrest them as soon as they were observed.

These arresting techniques included acknowledging that the participant appeared upset and allowing the participant to tell what they were feeling (if they chose to), redirecting questions, reassuring the participants of the value of their contribution, pausing the interview, or advising that the question being addressed could be ignored. The option to take a break

from the interview was also offered. These techniques proved to be effective (Liamputtong, 2007).

Warnings of approaching distress were indicated as some participants would, for example, change their narrative tense from the past to the present, show signs of agitation and anxiety or avert their gaze (blank stare) and become quiet (disassociate). One participant abruptly stopped and cried, and when the researcher acknowledged their emotion, they said, *'It's ok, I'm not sad, it's just that nobody had ever acknowledged or asked about my experiences before. I find this conversation healing.'* (3306: H/TW/W/55/Nicaragua/Miami). This acknowledgement was echoed by other participants, who indicated relief that someone was interested in and recognised their bisexual experiences and IPA that they had experienced in their lives, which confirmed the purpose and relevance of this research.

Caution is also advised when designing the questionnaire to avoid any questions that might trigger trauma. For example, in this survey, although the participants reported high rates of childhood sexual abuse, this information was volunteered by the participants as it was not included in the questionnaire to avoid trauma.

Research and survey phases

1. Initial research following the University of Lancashire research approval.

After research approval, research into previous studies on bisexual IPA began. See 'Secondary data sources.'). Over 13 months, hundreds of papers written about bisexuality, LGBT+, and bisexual IPA and associated topics were searched for, read, and noted for relevance. Besides Head & Milton (2014), little other primary research was evident. Myriad LGBT+ IPA studies included 'bisexual' in their titles, but little data of value was evident. Typically, the assumption in the reports was that what applied to other LGBT+ acronym members also applied to bisexuals, and the only reference throughout research papers was the two words 'and bisexuals.' Bisexuals were included simply because they are part of the acronym.

Other secondary data typically derive their conclusions about bisexual IPA from data on other issues, such as violence against women (see examples, Myhill, 2015; Straus, 2006; Swan & Snow, 2006; Alsina et al., 2024, and others). Some provided nuggets of valuable

bisexual IPA data; however, the topic of the source data was not about bisexuals specifically. Conclusions drawn from these reports (for example, Coston 2017; Messinger, 2011; Tjaden & Thoennes, 2000), which examined same-sex IPA in the 2010 same-sex IPV in the 2010 National Violence Against Women Survey, rely solely on secondary data, which were incomplete or contained missing datasets. As a result, their findings are largely presumptive and based on assumptions rather than comprehensive evidence. They were not without value, however, as they pointed to the high levels of violence, particularly sexual violence, faced by bisexual women.

Following this phase, it was concluded that there was little foundational research available on bisexual IPA, except for the work by Head & Milton (2014). Such foundational research was necessary to establish a foundation for the current understanding of the topic and to lay the groundwork for future bisexual IPA research. These conclusions shaped the focus of this thesis survey.

Data collection methods

Todd (2021), citing research into gay and bisexual men's experience of IPA, recommends using more than one method in researching issues of sexuality, as doing so allows for a better understanding of the researched population. This survey used a mixed-methods approach. For this thesis survey, quantitative and qualitative data were gathered using a questionnaire and interview, which followed the outline provided by the questionnaire. Secondary data was collected by reviewing prior subject and associated research (See Secondary data)

Timeline

While a longitudinal survey would have been preferred (Walter et al., 2013), given the time constraints of the PhD timetable, a cross-sectional timeline was used. This allowed for a snapshot of the experiences of a limited number of participants over a short period. Following the University of Lancashire ethical approval, the interviews took place over three months, from February 2024 to May 2024.

Recruiting sample participants

The survey participants were gathered over a long period throughout the survey right up to the beginning of the interviews. As friends and colleagues heard about my research, some contacted me asking on behalf of their friends or themselves, wanting to participate. Thus, snowball sampling began early, leading to a geographically and demographically diverse participant group (see Findings). Actively contacting the sample prospects began after the University of Lancashire's ethical approval, as did an intensive campaign to attract participants through advertising and contacts in LGBT+ and bisexual communities and clubs. Despite some interest, no participants came from these club efforts. Many of those who did respond expected payment for participation, and when they were told none was available, they no longer showed interest. All the participants came from snowball sampling. The participant pool was based in the U.S., which I visited frequently due to my work. They came from different states: New York, Florida, Georgia, Washington, North Carolina, Illinois, and Kentucky. Many were not U.S.-born, coming from various South American countries and Ireland, which added to the texture of the sample. One group of participants came from a Miami-based IPA support group which assisted LGBT+ clients. Not all were English-speaking, necessitating hiring an IPA-trained Spanish translator at the Miami IPA centre. Only participants who met the recruitment criteria of being bisexual and a victim of IPA were interviewed. The diversity of the participants balanced the sample size.

Sampling Method: Snowball sampling

Snowball sampling is recommended when attempting to access populations that are difficult to reach (Nikolopoulou, 2023). Snowball sampling involves the researcher starting with a few known members of the target population who will, in turn, introduce the research to other members of the studied population who will provide similar introductions, thus 'snowballing'. This continues until reaching the planned sample size or a saturation point. This method is also known as network or chain sampling (ibid). Participants may feel a greater level of trust speaking about their experiences with a researcher who has been introduced by someone they know; it may also encourage increased participation for the same reason (Layder & O'Connell Davidson, 1994-95).

Snowball sampling is a non-random research method, as random sampling is not possible given the constraints of accessing and researching this elusive population (Owen & Burke, 2004 p. 131). As a non-probability sampling method, it is susceptible to sampling bias and other research biases, for example, underrepresentation of the population or subjectivity on the researcher's part in choosing the sample participants. This issue of subjectivity was overcome by accepting only participants who self-identified as bisexual, subject to specific survey qualifications. Non-probability sampling uses non-random criteria to select a sample to answer a research question. Examples of such criteria could include expert knowledge or the availability of qualified candidates, such as self-identified bisexuals who have experienced IPA. In non-probability sampling, the target population does not have an equal chance of being selected. In comparison to probability sampling, each member of the studied population has an equal opportunity for selection (Nikolopoulou, 2023). This is also referred to as purposive sampling, which involves intentionally selecting participants based on their characteristics, knowledge, experiences, or other criteria to provide the most relevant and insightful information for the research (Patton, 2015). This method is often used in qualitative research when the goal is to gain deep insights into a specific topic, group, or phenomenon.

Participant recruitment criteria.

This researcher made every attempt to ensure that the samples were representative of the studied bisexual population by adhering to participant selection criteria, including ensuring that the participants:

- Self-identified as bisexual.
- Were over the age of 18.
- Were 'qualified' by referral.
- Disclosed that they have experienced IPA in the past. Those currently experiencing IPA were not included.
- They were not perpetrators of IPA.
- They were aware of the research parameters.
- They knew they could limit their participation or withdraw from the survey subject to university guidelines.
- That had read and understood the research recruitment package.

Avoid assuming prior knowledge of IPA or the participant's level of education.

In future research on this issue, it is recommended that no presumptions be made about participants' understanding of IPA or the types of abuse. Behaviours being researched should be clearly explained before or during participant interaction, or when using questionnaires. This was accommodated in this research by providing the participants with an IPA information sheet as part of their introduction and participation package. Even with the provision of this information, participants were unsure of what comprised IPA. In addition, participants' educational and literacy levels are important considerations in designing research surveys (Bryman, 2012; Layder & O'Connell Davidson, 1994-95).

Participant introduction and participation package

Participants who met the research criteria and agreed to participate were provided with the following prior to the interview (see copies in the Appendix):

- Participants contact letter and research information.
- Participant Consent Form for signature and identification.
- Foreword for participants (IPA information overview).
- Post-survey information for participants, which contained information for contacting helping organisations and a contact for an on-call therapist should the participant need to speak to a professional about their interview experience.
- Research questionnaire.

Provision of IPA definition to participants.

Due to the varying definitions of domestic violence and IPA, particularly as understood within the confines of bisexuality, before participating, the participants were provided with a written definition and explanation of IPA. This proved to be very important as many participants saw IPA as equating solely with heterosexual physical violence. A copy is available in the Appendix as part of the survey package.

Participant safety.

The participant interaction was limited to one in-person meeting in a place deemed 'safe' by the participant and the researcher. These spaces included spaces where research and participants were visible to others (for example, glass-walled conference rooms, an open yet

visible office space, a library, coffee shops or their home where others were present (this was for participants that were known to the researcher). Follow-up contact was done by phone as necessary.

While every attempt was made to avoid triggering trauma among the participants, steps were put in place should it arise, should the researcher not be able to address it. These included the provision of free access to a bilingual trauma therapist for 30 days following the interview. In addition, a help sheet providing contact information for domestic violence, bisexual and LGBT+ support groups was provided. None of the participants used the resources provided.

Participant geographic dispersal

No geographic restrictions were imposed on where participants resided, and this added an important dimension to the sample composition, balancing the limited sample size (n=20). It may also have helped counter any bias that might have been encountered had all the participants been based in one area. This researcher saw this as a positive influence given the sample size (n=20). Participants were recruited in the UK, Ireland, and the U.S. Only U.S.-based participants responded, and, as a result, all of the surveys were conducted in the U.S. However, many of the participants grew up in different countries prior to emigrating to the U.S. and they brought with them important cultural IPA experiences. This added an important dimension to the quality of the data gathered.

Interview locations

Interview locations in the U.S. included Seattle, Washington; Miami, Florida (various locations); Asheville, North Carolina; Atlanta, Georgia; plus two remote interviews. Most interviews were with individuals in their chosen setting. These settings were chosen by the participants with an emphasis on their personal and the interviewer's safety and protection of privacy. Settings included cafés, offices (with others present out of earshot), and homes (with others present in other rooms). A small group of interviews were undertaken at an LGBT+ IPA centre in Miami, Florida, where clients and staff who fit the research requirements volunteered to participate. These clients were LGBT+ IPA victims of IPA who identified as bisexual and provided a unique texture to the survey, given the severity of their experiences.

Remote interviews (2) with participants from Tennessee and Ohio, where the participant was not available for a face-to-face interview, were undertaken using Teams/Zoom, from which only audio was recorded. These interviews, which lacked the advantage of face-to-face contact, did produce engaging and emotive interviews given the focus of the subject and the participants' willingness to be involved and their stories heard. Perhaps they shared more openly due to the perception of anonymity provided by the distance of the technology interface, rather than face-to-face contact.

2. Questionnaire design

The questionnaire was designed to be sensitive to the guidance given by Barker et al. (2012), *Guidelines for Researching and Writing About Bisexuality*. The questionnaire was split into two sections. The first set of questions (1-15) gathered demographic data. The second set of questions (questions 16 to 40) gathered experiential data. This second section became the basis for the interview, which occurred concurrently with the participant filling out the questionnaire. The questionnaire was developed and tested with input from two bisexual IPA associates for relevance and to avoid questions that might trigger trauma. A mixture of closed and open-ended questions was used.

Quantitative data were collected via a 40-question questionnaire. A copy of which is available in the appendix and the Findings 1 section. The questionnaire consisted primarily of multiple-choice answers (tick-box), with some open questions that allowed for a narrative or written response. Questions were divided into two areas:

- Questions 1-15: participant demographic data
- Questions 16-40: participant IPA experiential data

Please refer to the questionnaire in the Appendix and the results, including charts and explanations, in Findings 1.

Qualitative data

This was collected through a concurrent semi-structured interview guided by questions 16-40 of the questionnaire. The interview was audio recorded (no video). The researcher asked the questions as the participants reviewed them; the participants then answered the questions (by ticking boxes) and spoke their responses as they did so, as many questions were presented as open-ended. This developed into a narrative of experiences and stories. The participants were free to speak uninterrupted about what was important. Everything they said was relevant.

3. Interviews

Interviews were conducted in person, via Teams (audio), and by phone. The interview was semi-structured and followed the outline of Questions 16 to 40 in the questionnaire. Interview times were planned for 60 minutes; for most interviews, it rarely went over that. The average interview took 41 minutes. Interviews were spaced to allow an overflow of time if the participant wanted to continue to speak; no attempt was made to stop their narratives. They spoke until they were done, or the interviewer interrupted them if the process appeared to be causing anxiety. The researcher was also aware that many participants were providing their time during the workday, and every attempt was made not to deprive them of income by meeting them at times and locations that were convenient for them.

Interview Topics

In addition to the demographics collected from the questionnaire, the topics of discussion were their demographics, their experience of IPA, their perpetrator partners, issues such as IPA frequency and intensity, witnessing IPA, and childhood experiences of abuse.

Control

The survey included one participant who fit all criteria except that they did not experience IPA. This was done to have a control, a participant against whom those with experiences of IPA could be compared. They were used to demonstrate and amplify, through comparison, the levels of abuse, intensity, and, in many cases, resulting trauma that those who had experienced IPA had experienced compared to people who had not. This researcher acknowledges that, given the survey size, including just one control member may not be

enough to provide an accurate comparative influence. However, their inclusion did provide value to the survey.

IPA intensity findings/

In gauging the intensity of participants' experiences, reference was made to the *Danger Assessment tool* (Campbell et al., 2009). The tool comprises a 20-question questionnaire (see a copy in the Appendix 'Danger Assessment'). This tool helped guide the intensity of abuse findings in this thesis by providing a proven set of criteria against which to measure participants' experiences.

Participant anonymity and privacy.

To ensure privacy, participants' identities were disclosed only on one document, the consent form. When that form was signed, each participant was given a copy and allocated a four-digit code (See Findings 2), which they used as their sole identifier on all research documentation and in communications to ensure anonymity. Their names were never used.

The consent forms are stored separately in a locked safe pending instruction from the University of Lancashire data management for destruction and have never been scanned, copied or digitised. All data was recorded in writing or audio; no video or images were recorded with reference to their participant code as an identifier. These procedures did much to reassure participants of their wish for privacy. Other details specific to the interviews are available in the Findings 2 section, which explains how the participants are referred to in the survey to attempt to ensure anonymity.

Anonymity and privacy codes

After completing and signing the consent form, each participant was assigned a unique number to identify themselves throughout the survey, ensuring their privacy. The code comprises a four-digit number designed as follows (an example: 3211). This information is also available in the Appendix.

The first number designates the country of the interview.

1 = UK

2 = Ireland

3 = USA

The second number designates sexual/gender identity as designated by the participant.

1 = Male

2 = Female

3 = Transgender

4= Other (not used by any participant)

The third and fourth numbers represent the participants' numeric value (count 1- 20). These are the order in which the interviews were conducted—01, 02, 03, etc. An example: 3221, referred to a U.S.-based female participant allocated number 21.

Expanded codes to include basic demographic data.

In the () following the numeric code, the following key applies. These codes provide anonymous participant demographic data when discussing themes or attributing interview quotes. For example, the 4-digit participant code is followed by (W/F/35-45/C2/Peru/Atlanta). Thus, the reader can determine that the participant is a White/Female/aged 35-45/ has two children/was born in Peru and now lives in Atlanta. If it is followed by 'TR Spanish,' it signifies that a Spanish-to-English-Spanish translator was present.

Key ()

- W=white, B=black, H=Hispanic,
- M=male, F=female, TW=trans-woman,
- Age or age range (25-35 or 38, for example),
- Children and the number of children: 'C' indicates that the participant has children. The number after the 'C' indicates the number of children that the participant has. 'C1,' for example, indicates that the participant has one child. If 'C' is absent, it indicates that the participant does not have children.
- The last word is the participant's resident city. If it is preceded by a country name that designates their country of birth and where they grew up, followed by their current resident city (Peru/Miami, for example, signified birth in Peru now resident in Miami).

- 'TR Spanish' signifies that the participant required a Spanish-to-English translator.

An example of a completed participant code, 3221, is a unique identifier noted on their consent form. In the survey, it is listed, followed by their demographic information. Thus (3221: W/F/35-45/C2/Peru/Atlanta) corresponds to a U.S.-based female, survey allocation number 21, a white female aged 35-45 with two children, born in Peru and residing in Atlanta. (There is no participant 21).

Please refer to the Appendix to view these codes and their applications.

Interview style and format

The interview was designed to be non-exploitative and descriptive, using the participant's narratives to form the data bed. Emphasis was on active listening to the participant, with input only when asked for or for clarification. The interviews followed the questionnaire framework. The interview style was feminist-informed, emphasising collaboration, reflexivity, acknowledgement of interviewer positionality and being aware of any potential power dynamics (Hesse-Biber, 2007) and participant-focused, using open-ended questions that paralleled the progressive completion of the questionnaire. The interviewer was aware of the potential for a power differential with the participant, and attempts were made to overcome this by building initial rapport. The interviewer's style was non-confrontational and non-dominant. The researcher recognised that there was no one-size-fits-all approach to interacting with the participants, as each had unique experiences and perceptions. No effort was made to constrain the participant's narrative or interaction with the interviewer. The interviewer dressed in a business casual manner, without a jacket, tie, or watch; visual symbols of power were kept to a minimum. The interviewer sat at an angle to the participant or to their side to avoid any perception of confrontation that direct face-to-face sitting may have indicated.

Note: This researcher, as a 20-year court-appointed IPA investigator, has extensive experience and relevant training in interviewing people who have been subjected to IPA, child abuse or have had traumatic events in their lives. In future research, it is recommended that

researchers have training in interviewing participants who have been subjected to trauma or include a co-researcher who has such training, such as a trauma-informed psychologist.

The interview sequence

1. The information the interviewer provided about intimate partner abuse was discussed.
2. The interviewer provided the participant with the interview questionnaire. The questionnaire comprised 40 questions. Questions 1-15 were demographic questions with multiple-choice answers designed to gather pertinent information and familiarise the participant with the study.
3. Items 16-40 became the basis for the interview. While visible to the participant, the interviewer read each question aloud, and the participant answered verbally. The answers were recorded on the audio. Responses not pre-printed on the multiple-choice answers could be handwritten into the questionnaire or answered verbally and recorded on audio.
4. Once the participant began speaking, the interviewer actively listened. No attempt was made to interrupt the participant's narrative unless the participant did so, asked for clarification, or the interviewer perceived an increase in stress on the participant's part. If a participant asked for clarification on a question or in their answer, it was provided, unless the request involved seeking the interviewer's opinion or advice on the topic. During pauses, the interviewer took notes with the participant's permission, ensuring the flow of the discussion was not interrupted.
5. The interview continued until the participant finished speaking, reached topic exhaustion, or was upset in their recollections and wanted to stop. If indications were present that the participant was getting upset, an escalating set of options was offered, including pausing the interview, stopping the interview, or calling the on-call therapist. No participant accepted this offer, but all were provided with the therapist's contact information in case they needed to call afterwards.

Interview conclusion

At the end of the interview, the participants were asked how they felt about the interaction. They were thanked for their participation, and the interviewer stressed the importance of

their involvement. If the participants showed signs of upset or stress, the interviewer offered access to the on-call therapist. Notes were made on any topics the participants spoke about following the interview's conclusion, and the recording was turned off.

Conversations that occurred after the interview concluded were noted with the participant's permission and can be seen in Research Findings 3.

Wrap-up

After the participant left, the audio file was tagged with the participant's four-digit code and backed up to the interviewer's laptop. The consent form was placed in an envelope and set aside for later secure storage. The interviewer made any additional notes about the interview before speaking to another participant.

Following the interviews, the researcher wrote extensive notes about the experience, which were recorded in Findings 3 (Interview notes).

Overcoming interview obstacles

- a) Difficulty reading: for those participants who had difficulty reading, everything was read out to them and, if needed, explained to them verbally. This also occurred with those who had problems reading the questionnaire. The questions were asked verbally, and the researcher wrote their answers as they dictated. All was recorded on audio. This occurred for one participant.
- b) Language translation: For participants for whom English was a second language, an IPA-trained Spanish-to-English-to-Spanish translator was used. Their IPA training allowed them to translate into and out of Spanish without losing the meaning or nuance of the questions. Spanish was the only language for which a translator was needed. The IPA training for the translator was essential to counter any potential perceived power imbalance or bias that using a non-specialised translator might have portrayed, given the sensitivity of the subject matter. It also ensured that any confusing terminology that did not have a Spanish language equivalent, such as 'gaslighting', was adequately translated and understood by the participant.

Limitations

I acknowledge the limitations of the data gathering imposed by the constraints of time, lack of budget, participant access, and resulting sample size ($n = 20$). A longitudinal study with a significantly larger sample size would have been preferable, as was seen in Donovan & Hester's research (2014). This is a recommendation for future research. Other limitations include acknowledging that the data gathered from the participants can only apply to them and not the entire bisexual community. The sensitive nature of the subject matter and their unfamiliarity with the researcher may have resulted in some participants underreporting their experiences. Other limitations include the difficulty in recruiting in the UK and Ireland, reliance on self-reported data, and biases of relying on snowball sampling. Recruitment in the UK and Ireland is best described as resistant. Network and individual leads to potential participants in Liverpool, Lancashire, London and Dublin resulted in few interested participants. Follow-up phone calls and correspondence did not provide any clarification on the lack of interest in participation. This researcher does not know why this was the case; it also follows the experience of Head & Milton (2014). Not having a budget to compensate participants may have reduced the number of participants as some were unable to take time off work for interviews. Payments were made for the use of office space and the translator's costs. There is debate about providing inducements to participants to participate in research. Concerns include the possibility that participants may be influenced by payment and that they may wish to please the researcher, the fact that the amount offered is not exploitative or coercive and the fairness of the offer. By ensuring fair, transparent, and respectful inducements, researchers can ethically encourage participation without compromising the research's integrity or participants' well-being (Singer & Couper, 2008).

4. Data Analysis

Concurrent data analysis (CDA):

Data analysis began concurrently with data gathering. Concurrent qualitative data gathering and analysis offer several advantages, including allowing the researcher to refine data collection (phrasing of questions, for example), react to emerging themes, improve the quality of insights, and make efficient use of time, particularly when time constraints are in play (Merriam & Tisdell, 2016). It allows for triangulation as the researcher can cross-check the validity of findings with participants or collect additional data to critically reexamine initial

conclusions (Patton, 2015). Charmaz (2014) posits that CDA supports ongoing reflexivity, encouraging researchers to consistently assess their biases, assumptions, and interpretations as they interact with the data, improving the research's value and credibility.

Data saturation

Indications of data saturation emerged early in the interview process. However, this may have been due to the researcher's professional familiarity with IPA behaviours through past research and writing. As interviews continued, new data emerged, given the broad demographic of the participants, while other data supported emerging findings. The relevance of the demographic range of the participants cannot be overstated, given their broad geographic and cultural origins and the variety of gender inclusion and experiences.

Data types

Quantitative data was analysed using descriptive statistical techniques (mean, median, mode, range) to collate results into charts and graphs and identify patterns and data associations. The results provided an array of 40 charts from which data may be quickly and easily understood (see Findings 1). A comparative analysis using secondary data (see sources below) was conducted to critically evaluate the results, as discussed throughout this thesis. Qualitative data from the interviews were subjected to inductive thematic analysis and discourse analysis to highlight emerging patterns, recurring themes, and experiences from the participant narratives, and to apply meaning to them. Discourse analysis examines how people communicate, including the content and context of their language use and the results are recorded in Findings 2. The thematic analysis method developed by Braun and Clarke (2012) involves six steps that are repeated in a cycle: firstly, becoming familiar with the data by reading and re-reading the narratives; secondly, generating codes; thirdly, generating themes based on the codes; fourthly, reviewing the themes; fifthly, defining and naming the themes; and finally, locating exemplars (Dawadi, 2021). Data was compiled and analysed manually concurrent with the survey. This allowed the researcher to identify emerging themes and assess thematic saturation, adjusting any question wording that may have been confusing. It also allowed the researcher to anticipate unexpected topics and adjust how questions were asked.

Primary data was gathered from two sources.

1. The completed paper questionnaire.
2. The audio file of the researcher/participant interaction, including the interview.

Notes taken by the interviewer may be helpful for future research and are available, along with commentary, in the Appendix. They are not directly relevant to the purpose of this thesis.

Demographic analysis

Demographic analysis is the collection and analysis of broad characteristics of groups of people and populations (Poston & Bouvier, 2016). It helps to understand who the participants are as individuals and as members of society. As previously discussed, this type of data was gathered in questions 1-15 of the questionnaire.

Analyses of the questionnaire results were done in two ways:

Descriptive analyses included stating the number and percentage of people who chose each response option.

Category analyses involve using demographic variables as categorical or grouping variables for statistical analysis, selecting a data category, and assigning a numerical score to that category (for example, assigning gender categories and determining the associated age ranges).

Analysis of participant experiential data from interviews

Interview audio files were transcribed using rev.com and MSWord transcription and checked manually. The researcher performed corrections and written narrative formatting. Coding was undertaken using NVivo. This was redone manually to ensure no data was lost through digital analysis. Clarifications, as needed, were conducted by phone with the relevant participant(s).

Inductive thematic analysis

The finished transcriptions were subject to inductive thematic analysis, which involves deriving broad conclusions or theories from specific observations or data patterns. Although

time-consuming, manual analysis was deemed preferable to capture participant experiences adequately. It was found that audio transcription digitally produces mechanical narratives that lack emotion and discursive nuances. Manual analysis corrected this and allowed correlation to interview notes.

Researcher notes were reviewed for supplemental data relevant to the data analyses. The notes were expanded upon to link with the findings from the questionnaire and interview (See Findings 3).

Secondary data

Secondary data is discussed (and referenced) throughout the thesis. The selection criteria for reviewed research included:

- Academic research published between 1995 and 2023 on bisexual IPA, supplemented by research into LGT+ and heterosexual IPA.
- Published peer-reviewed articles augmented by survey texts from academic sources.
- Research that had been published about bisexuality.
- Research published about IPA in the bisexual community,
- Research published about human sexuality, gender studies and intersectionality.
- Peer-reviewed articles enhanced by academic survey texts.
- Research published in English, predominantly in the UK and the U.S.
- Research that allows for a comparative analysis of perpetrator and victim behaviours and experiences among bisexual, LGT+ and heterosexual communities.
- Scholarly research focusing on adults (aged 18+), excluding adolescents.

Databases included are Google, Google Scholar, The British Library, the University of Lancashire library search and its sub-engines, Microsoft Academic, the US Department of Justice, The Centre for Disease Control (NISVS Surveys), OpenAthens, PubMed, among others.

Data on perpetrators were derived from sources including Bancroft (2003); Cunha et al. (2022); Donovan & Barnes (2020); Donovan & Hester (2014); Eckhardt (2006); Harsey (2017);

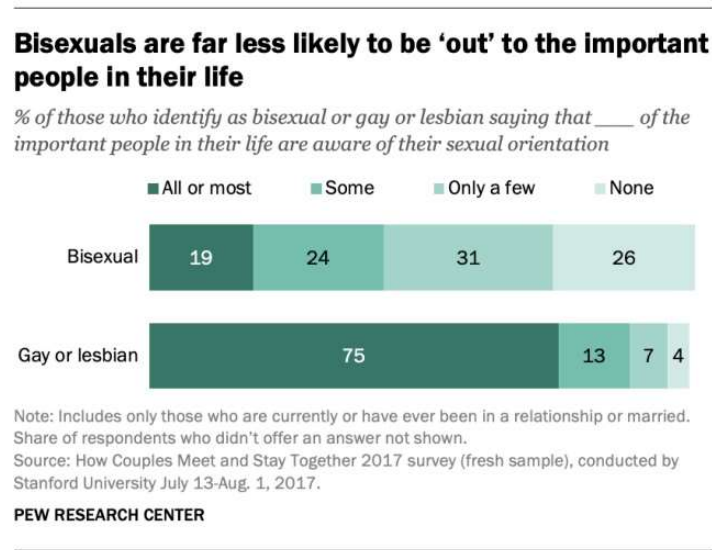
Head (2020); Hester (2013); Hill (2019); Johnson (2008); Kelly (1988); Mandel et al. (2021); Romans et al. (2000); Stark (2007, 2023) and others.

Research challenges. Notes for future research into bisexual IPA.

The following information reflects obstacles faced in designing this research and should be considered when designing future research. In addition to the discrimination and exclusion that many bisexuals face (including bi-invisibility, bi-phobia, and discrimination), as have already been discussed, the following factors may influence or inhibit bisexual IPA research. This section reflects data from my MA thesis on perceptions of IPA in the LGBT+ communities (Daly, 2020). While that study (ibid) was based on the LGBT+ communities, similar findings about research obstacles were found to be relevant to many of the acronym members, including the bisexual population.

- 1. A reluctance of bisexuals to self-identity: Bisexuals are less likely than other LGT+ communities to be ‘out.’ Bisexual individuals are the least likely to self-identify (Brown, 2019)

See the graph below

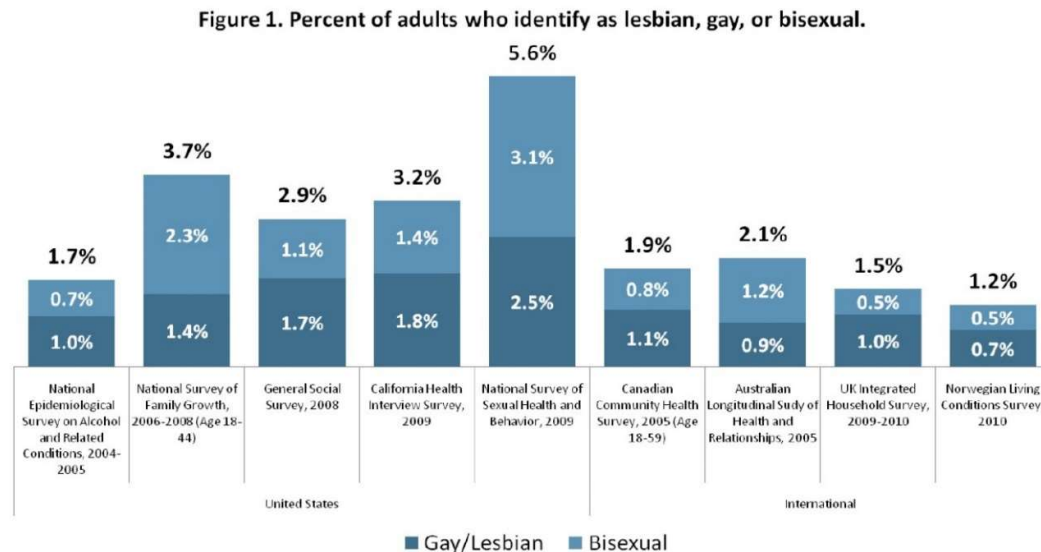


Bisexual individuals are less likely to be ‘out.’ (Brown, 2019). Figure 14.

This issue was addressed in this thesis through the use of snowball sampling. Further, the participant criteria for involvement were made clear from the beginning of the

research, i.e., bisexual individuals who were victims of IPA. This attracted a bisexual-only participant pool.

2. Measuring the population size of the bisexual and LGT+ communities. It is impossible to determine the precise size of bisexual or LG populations (Donovan & Hester, 2014; Gates, 2011; Brown, Taylor & Herman, 2015). There is a noticeable disagreement in the research regarding the estimated numbers of bisexual and LGT+ populations (Gates, 2011, p. 3; Murray & Mobley, 2009, p. 377; Donovan & Hester, 2014, pp. 38-39). For example, as shown in Figure 11, the bisexual population size ranges from 0.5% to 3.1% of the total population (Gates, 2011). See also Gallup (2024).
For further discussion, please see the Introduction: *Bisexuality and pansexuality, trans.*



Percentage of adults who identify as lesbian, gay or bisexual. Gates (2011). Figure 15.

3. Determining bisexual persons: Researchers have three ways of determining if a person is bisexual; one is through self-identification. The others are through behavioural observation (derived from survey questionnaires, data from other research or interviews without self-identification) and reporting, where a person self-reports bisexual behaviour without labelling themselves as bisexual. For this research, the author used bisexual self-identification in the recruitment process and the questionnaire demographics, where in Question Three, participants were asked to

indicate their sexual orientation. Participants also confirmed their bisexuality verbally at the interviews, although five indicated in answer to sexual orientation that they were Pansexual (2), Queer (1) or Lesbian (2). See Findings 1, Question 3. See Research Findings 1.

Changes in the terminology of sexual orientation or gender self-identification. Another issue that bears consideration is that a significant number of individuals from sexual and gender minority groups do not resonate with conventional labels of sexual identity, like gay, lesbian, or bisexual (Best, 2019). Instead, they are adopting emerging and previously less comprehended sexual identity labels such as pansexual, non-binary, or asexual (ibid). Determining this utilises data gathered from the LGBTQ National Teen Study, a project that Watson and Puhl carried out in partnership with the Human Rights Campaign. The online survey encompassed a diverse range of races, ethnicities, and socioeconomic statuses, engaging 17,000 teenagers (N = 17,093, comprising 4,720 males and 12,373 females). The results indicated that 26 per cent of the respondents identified with emerging sexual identity labels (Watson, Wheldon & Puhl, 2020). Many of these emerging labels may also identify as bisexual. This was accommodated in this thesis survey questionnaire, where options for self-identity were provided in addition to an 'other' section (which was not used and removed in the consolidated data chart). Two participants stated in the questionnaire and interview that they preferred the term 'pansexual.'

For further discussion, please see the Introduction, *Bisexuality and pansexuality, trans*. Also refer to the previous paragraph's reference to Question 3, '*Determining bisexual persons*.'

4. Bisexual and LGT+ participants may be reluctant to respond to IPA-specific research. Donovan and Hester (2015, p. 40) recount this issue when designing their survey (n = 746). Consulting with a range of LGBT+ groups, they tested two approaches: one naming the survey as being about IPA, the other with an emphasis on 'when things go wrong' in relationships, omitting any mention of IPA. The majority of those polled preferred the latter. In adopting this approach, the researchers elicited a wider range of participants. The survey subject, IPA, was not mentioned to the participant until the

last page of the questionnaire. Donovan and Hester (2015, p. 41) regard this covert approach as justifiable, as it allowed participants a method to engage and speak about their abusive relationships.

This researcher circumvented this issue by highlighting IPA from the beginning; there was no attempt to disguise it. As a result, it was found that bisexual individuals who volunteered to participate did so because they were curious about what the research was about—they volunteered because it was about IPA. This allowed them to speak about their experiences perhaps for the first time as bisexuals. A number welcomed the opportunity to speak about their IPA experiences from a bisexual perspective.

5. Previous bisexual primary surveys elicited small sample sizes: The other primary bisexual IPA research was Head & Milton (2014), where N = 10. Small sample sizes are representative of the studied population, and findings may only be applied to the participants as opposed to the entire population (Barker et al., 2012). Conclusions drawn from small samples make it difficult to conclude the study's relevance to the broader studied population. Even with larger samples, similar issues arise.

Given the success of snowball sampling in developing this thesis survey, this researcher believes that a greater number of participants could have been recruited had time allowed.

6. Representative sampling. Owen and Burke (2004) advise that it is impossible to establish a representative research sample of the bisexual (or LGT+) communities. They state that *'there is no sampling frame that lists gay and lesbian persons, so all samples are based on self-identification of sexual orientation; this makes a random sample impossible to design* (Owen & Burke, 2004, p. 131).' Donovan and Hester (2015, pp. 38-39) agree, noting that there are no national databases documenting the identity of individuals who identify as LGB+, along with their contact information or location (see Daly 2020, pp. 27-28).
7. Bisexual and LGT+ IPA goes unreported. Hudson-Sharp and Metcalf (2016) advise us that IPA is significantly underreported within the bisexual and LGT+ communities.

There are myriad reasons for this, among which may be the fear of self 'outing,' fear of a response from the perpetrator, and fear of rejection by their community, family or friends (Brown & Herman, 2015, pp. 1-31).

8. Lack of minority participation in bisexual and LGT+ intimate partner abuse (IPA) surveys. There is a notable lack of engagement from minority groups in surveys regarding intimate partner abuse (IPA) within the bisexual and LGT+ communities (Edwards et al., 2015). Despite persistent efforts to engage and include minority respondents in their research, Donovan and Hester (2014) report minimal participation from minority groups. Aside from a general reluctance to participate in IPA surveys, other barriers may hinder minority involvement. Such obstacles may be cultural or religious restrictions that make it unsafe or impossible to identify as bisexual or LGT+ openly. The absence of minority involvement impacts the relevance and accuracy of the research (Edwards et al., 2015). Without inclusive participation, research risks producing overly universalised results, missing critical nuances, and leading to interventions and policies that may not address the unique challenges minority groups face (Walters et al., 2013).
9. Limitations of LGBT+ IPA Research: Studies that study IPA, particularly in the LGBT+ communities, need more consistency in their use of agreed-upon definitions and community-specific research methodologies (Ristock, 2011). There are discrepancies in defining sexual orientation and gender. Bisexuality, for example, lacks a clear definition of what it is; it appears to be an evolving community based on self-identification. Bisexuals are pressured to decide if bisexuality is a behaviour or an identity from within and outside the LGT+ communities (Yoshino, 2000). Despite the range of literature on bisexuality and LGT+ IPA, a comparative analysis is frustrated by the absence of universally agreed-upon definitions and methodologies (Brown, Taylor, & Herman, 2015).
10. Perpetrator research: Information about IPA across all populations from the perspective of the perpetrators would be extremely valuable (Holtzworth-Munroe & Stuart, 1994). This researcher has a particular interest in research about perpetrator

behaviours supported by personal observations made as a domestic violence investigator. Getting perpetrator participation is problematic as there is a natural and understandable hesitation from perpetrators to report their abusive behaviour or to participate in research, as it would require their admitting to socially unacceptable and potentially illegal activities against their partners (Burke & Follingstad, 1999). There is also the issue of perpetrators misusing a research platform to deflect blame and responsibility onto the victim and providing data that only enhances their own standing (ibid).

Conclusion

This chapter, based on a social constructionist ontology, emphasises the importance of adopting a context-sensitive approach to recognising the distinct experiences, challenges, stigma, and discrimination faced by bisexual individuals who have experienced IPA (Rakovec-Felser, 2014). The use of semi-structured interviews, combined with thematic and discourse analysis, provides a rich understanding of the bisexual IPA experience. The research aimed to reveal the socially constructed realities of intimate partner abuse within this marginalised community by focusing on the narratives and stories of bisexual individuals who had experienced it (Mead, 2015; Blumer, 1969). The study aimed to create knowledge that reflects the varied experiences and viewpoints of bisexual victims/survivors through quantitative data, qualitative interviews, and reflexive engagement, guided by a review of prior research. This approach also contributes to the development of more inclusive interventions and support systems (ibid).

Summary

This chapter detailed the methods used to investigate bisexual intimate partner abuse, beginning with the research title and primary question and the rationale for the chosen design. It outlined the use of participatory approaches, ethical safeguards, and strategies to protect participants from retraumatisation. Sampling was conducted through snowball recruitment, with a focus on inclusivity, safety, and privacy. Questionnaires and interviews provided the core sources of qualitative and quantitative data. Data analysis combined demographic review, questionnaire results, and experiential accounts using inductive

thematic analysis, supported by concurrent data analysis to ensure validity. Limitations and challenges were noted, together with recommendations for future research into bisexual IPA.

8. RESEARCH FINDINGS/RESULTS 1: QUESTIONNAIRE ANALYSIS AND RESULTS

In the previous chapter, we discussed the framework for this survey (questionnaire and interview). This chapter reviews the 40-question questionnaire, covering participant demographics and experiences of intimate partner abuse. Analysis of responses highlights key findings and patterns that inform the thematic analysis process.

The following chapters (Results Findings 1–4) present the findings and results derived from the questionnaire and interviews. Guided by the research questions, these chapters examine how bisexual individuals experience IPA and identify new and confirmatory knowledge emerging from the data. The data are presented across four sections: questionnaire results, interview analyses and themes, perpetrator-related information, and a concluding review of findings with an emphasis on new contributions. Participant voices are central to the analysis, with demographic information coded to preserve anonymity, while reflected behaviours provide insights into perpetration. The diversity of the sample strengthens the reliability of the themes and findings that emerged, while acknowledging that the findings remain limited to the participant group.

Introduction

Participants were protected using anonymised codes, with each individual assigned a unique number. The coding process is fully explained in the Methods chapter and detailed further in the Appendix. This system uses simple abbreviations, ensuring clarity in identifying the participant to whom each code refers.

In the following pages, the results of each questionnaire question are presented in graph format along with written commentary. Questions 1-15 record participant demographics, while 16-40 record their experiences of IPA.

Questionnaire analysis and results

The following results follow the questionnaire format.

Question #	Number/Percentage

1. Please indicate your gender

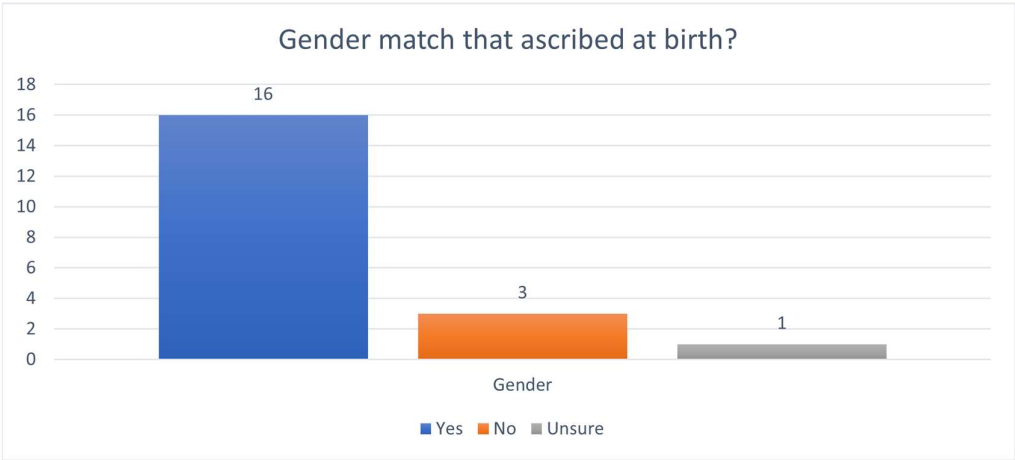


(Figure 16) Gender

a) Female	14	70%
b) Male	4	20%
c) Non-binary		
d) Other (Trans)	2	10%
e) Prefer not to say		

The survey comprises 20 participants. Fourteen self-identified as female (70%), four were men (20%), and two were transgender (10%) (trans-women). It would have been ideal to have used a representative bisexual sample; however, that was not possible as no databases are available that identify people by sexual orientation or gender identity (Donovan & Hester, 2015, pp. 40-45). Research indicates a higher interest among females in participating in such surveys, as reflected in the cited source (ibid). Participants in studies such as this are often those willing to engage in social research on sensitive topics like sexuality and violence (Kelly, 1988).

2. Does your gender identity match that which was ascribed at birth?

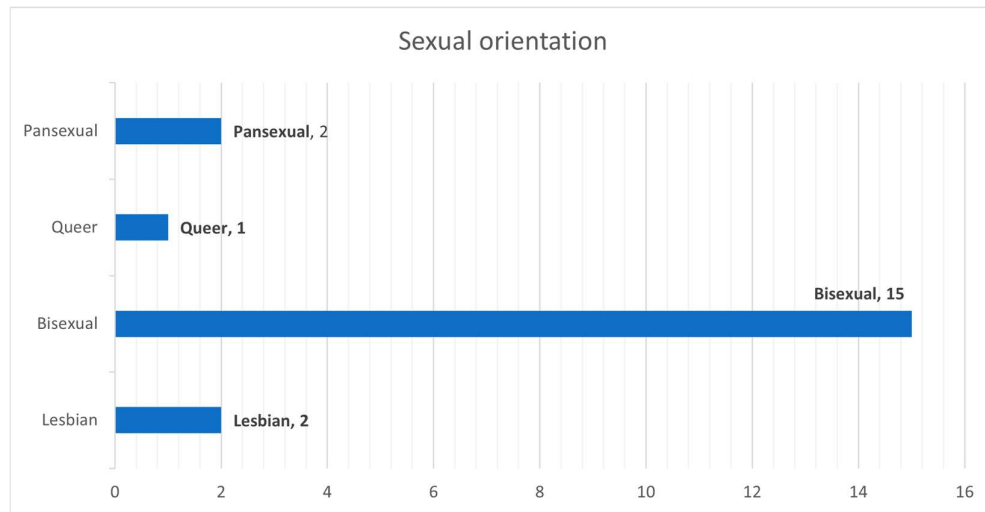


(Figure 17) Gender Match

a) Yes	16	80%
b) No	3	15%
c) Unsure	1	5%

Sixteen participants (80%) stated that their gender identity matched that ascribed at birth. Three (15%) said it did not (including both trans participants), and one (5%) was unsure. Participants who responded ‘no’ or ‘unsure’ did so without comment, nor did the researcher challenge their answer for clarification to avoid drawing attention away from the main subject of the survey. The other two respondents were one male and one female. It was interesting to observe this instability of gender labels among the two non-trans respondents who stated that their gender did not match that recorded at birth.

3. How do you identify your sexual orientation?

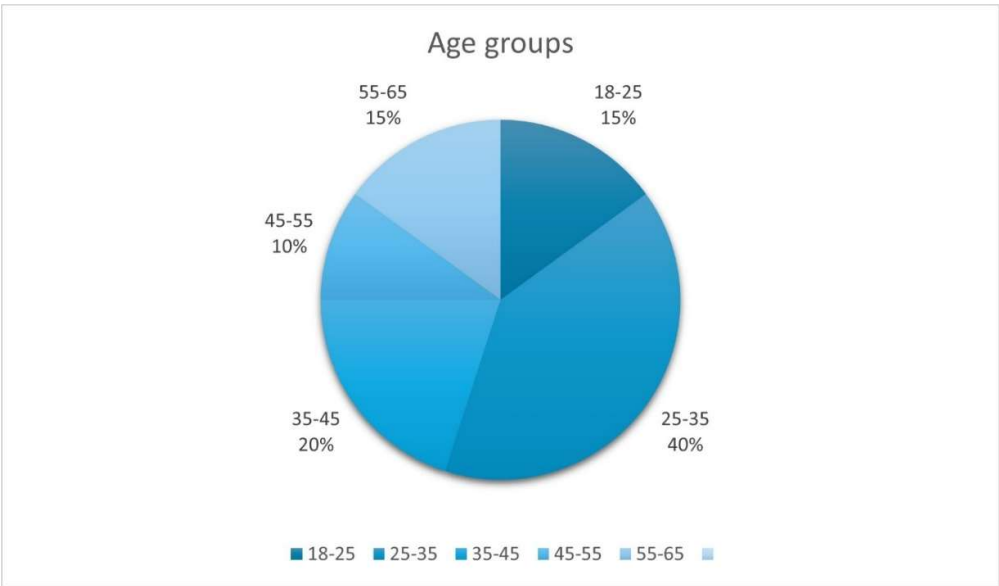


(Figure 18) Sexual Orientation

a) Lesbian	2	10%
b) Gay		
c) Bisexual	15	75%
d) Queer	1	5%
e) Pansexual	2	10%

Participants stated sexual orientation included 15 (75%) who identified as bisexual, two (10%) identified as pansexual, two as lesbian (10%), and one as queer (5%). All participants identified as bisexual when they enrolled in the research. Two participants (one male, one female) indicated that their preferred identification is pan-sexual. Older participants tended to retain their bisexual identifiers, while those who identified as queer, lesbian and pan-sexual were younger; the researcher asked why their labels had changed. 'Pan-sexual' is regarded as more modern and inclusive; the term bisexual was described as outdated. Lesbian and queer participants stated that while they consider themselves as bisexual, they identified differently 'in the moment' and 'context' of the people with whom they socialise.

4. What is your age?

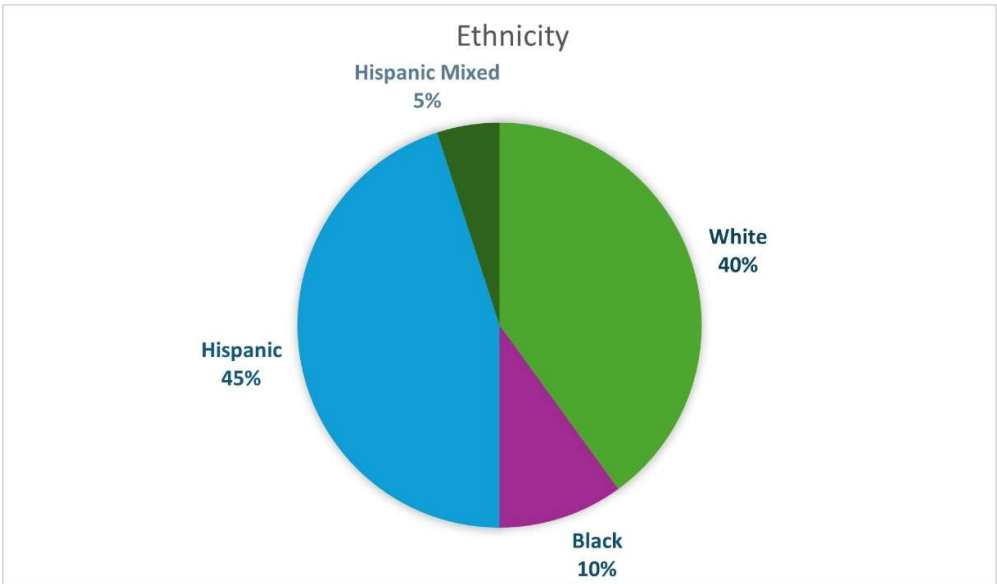


(Figure 19) Age

a) 18 – 25	3	15%
b) 25-35	8	40%
c) 35-45	4	20%
d) 45-55	2	10%
e) 55-65	3	15%

The largest age group was in the 25-35 range, with 8 (40%) participants. 18-25 comprised 3 participants (15%), 35-45 four (20%), 45-55 two (10%) and 55-65 three (15%). The age groups represented a broad age spectrum. The researcher did not attempt to target any specific age group, given the difficulty in recruiting bisexual participants (Head & Milton, 2014). The result and age spread were ‘as presented’ in response to the call for participants.

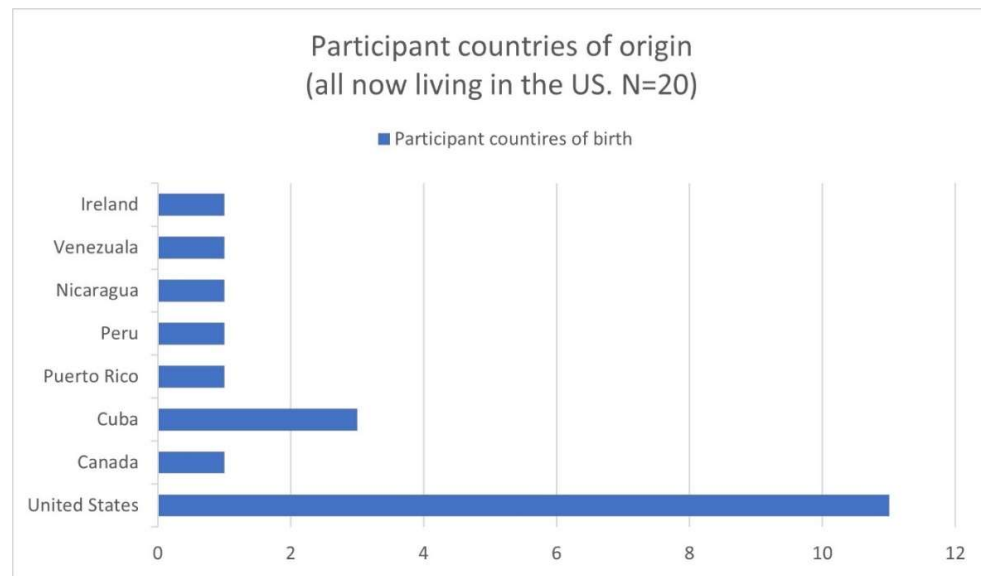
5. What is your ethnic group?



(Figure 20) Ethnicity

a) White	8	40%
b) Black	2	10%
c) Asian		
d) Hispanic	9	45%
e) Hispanic mixed ethnicity	1	5%

These are the ethnic groups into which participants identified themselves. The 45% Hispanic representation is attributed to the number of interviews conducted in Miami, Florida. Seven of the Hispanic participants were not U.S.-born. ‘Hispanic’ is considered an ethnicity, not a race. This means that someone of Hispanic origin can identify with any racial category. The ethnic breakdown of the sample is weighted toward Hispanic participants, given the geographic area in which much of the research was done. US ethnic breakdowns by comparison are 58% white, 19% Hispanic and 12% black (U.S. Census Bureau, 2024). Given the location of some of the interviews, particularly in Miami, the mix of ethnicities of participants is not unusual and did add significantly to the interview narratives. Refer to the supplemental chart on the next page, which lists the participant countries of origin.

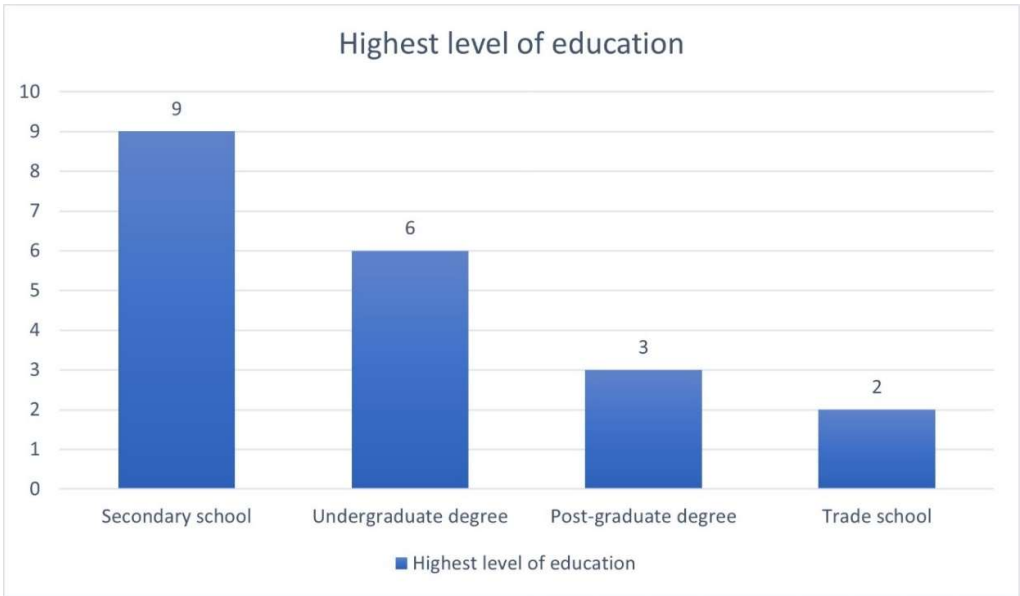


(Figure 21) Countries of origin

This broad geographic demographic added considerable contextual flavour to the stories recorded at the interviews. The importance of including those participants who were not US-born is reflected in the participant-related cultural norms and lived experiences they brought to the interviews. Despite exhaustive attempts to recruit participants in the UK and Ireland through direct (personal contacts) and indirect recruitment (contacting LGBT+ organisations, clubs, and groups), no one came forward, as discussed in the Methods chapter. Difficulties in recruiting participants in LGBT+ research are discussed in an early chapter on LGBT research. Head & Milton (2014) also record this difficulty in recruitment from the bisexual population. The US-based participants were recruited based on the interest generated in this study from its inception (See Methods). The topic of research was, for many, an area in which they had an interest but had not seen any previous research. Many people who showed an interest in participation invited the researcher to contact them when the research began. One source of participants in Miami was a domestic violence survivor group which has a large bisexual and LGBT+ clientele. This group provided access to this researcher to a range of bisexual victims of IPA, mostly of Hispanic origin. Three of them required the use of an IPA-trained Spanish-to-English translator. Translated stories had the potential to have lost some of their essence during the translation process (see methodology section); however, this was overcome by using an IPA trauma-informed translator. One term, 'gaslighting', has no Hispanic equivalent,

according to the translator, and this led to the provision of additional printed material to explain the concept, as seen in Findings 2.

6. What is your education level?

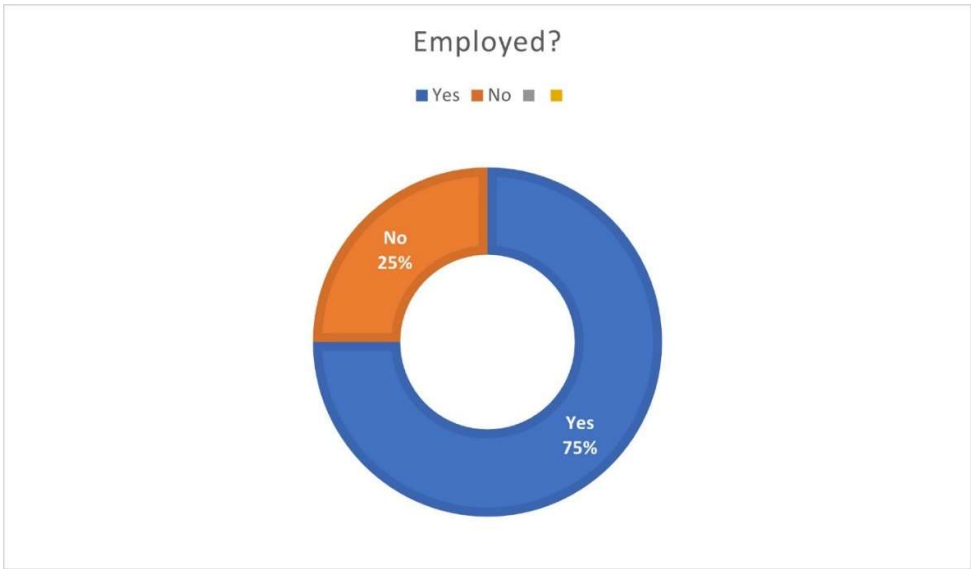


(Figure 22) Education Level

a) Completed high/secondary school	9	45%
b) Undergraduate degree	6	30%
c) Post-graduate degree	3	15%
d) Trade school	2	20%
e) Other (Please specify) _____		

The diverse sample reflected a broad range of educational attainment. All had finished secondary school (or their country's equivalent for those not born in the US. Two attended trade school. Six completed an undergraduate degree—four a postgraduate degree, including one as a medical doctor. The sample represented a wide range of social classes, although the concept of social class is not central to U.S. culture; however, it does influence societal structures and individual experiences (Manstead, 2018). Stating that educational achievement was important to some Hispanic participants.

7. Are you employed?

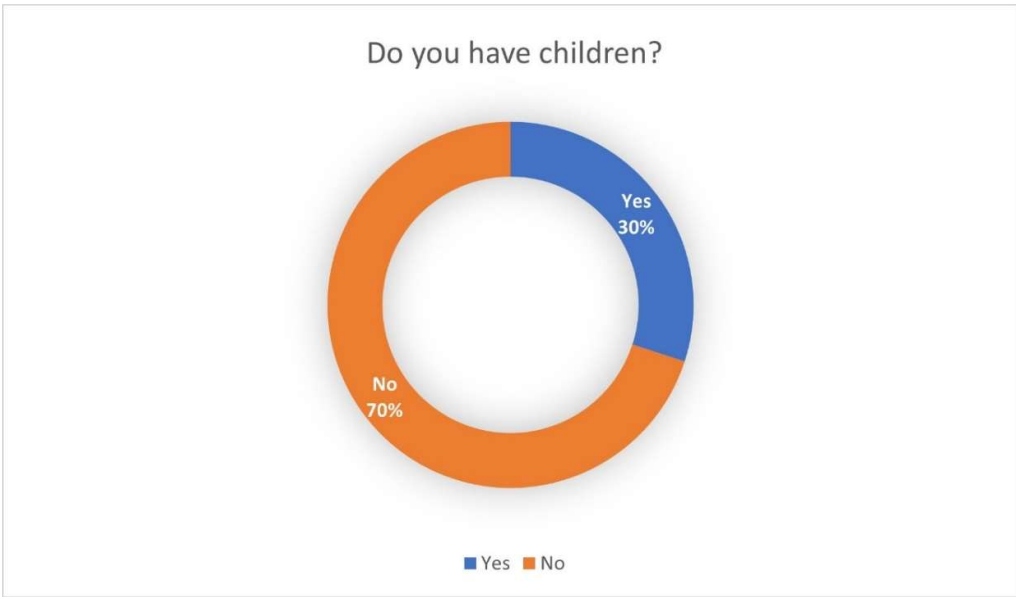


(Figure 23) Employment

a) Yes	15	75%
b) If 'yes,' what do you do? (* see below)		
c) No	5	25%

Those who indicated they were unemployed did not explain why they were so, nor were they asked to. * Those who were employed included a doctor, a philanthropist, a director of a non-profit organisation, four bar-tenders at different types of establishments (bars, clubs, restaurants), four office personnel of varying levels of seniority, a restaurant manager, a small company managing director, two people who stated that they were self-employed, and one who did not specify what they did.

8. Do you have children?

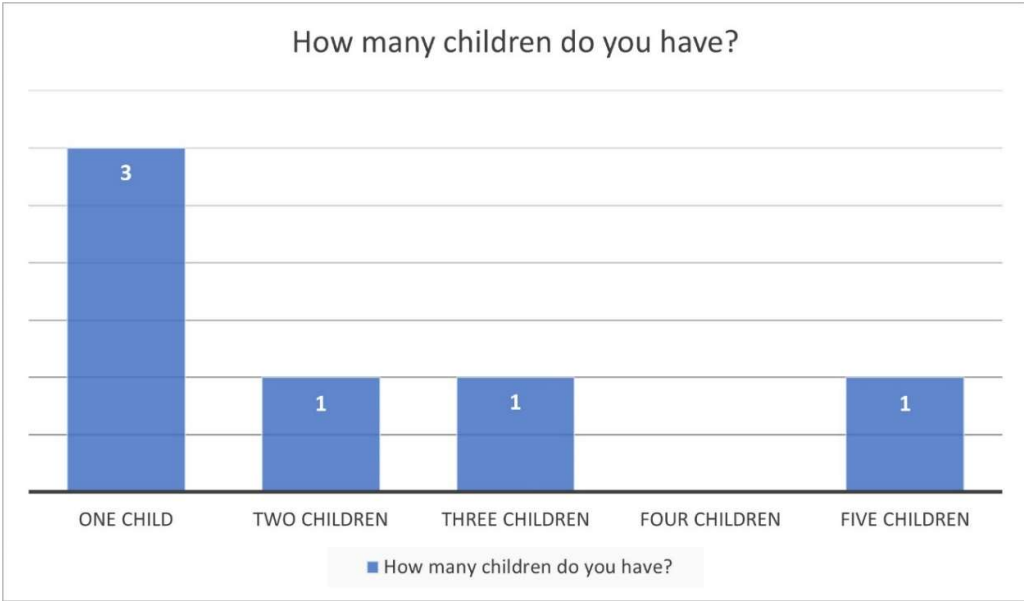


(Figure 24) Children

a. Yes	6	30%
b. No	14	70%

Six of the participants had children, and 14 did not. All of those participants with children were female. Of those who indicated they had children, three participants had one child each: one had two children, one had three children, and one had five children. Three stated that their current partners were the children’s parents, and three stated that their current partner was not the child’s (ren’s) parent. Most of the parents had their children during their abusive relationships. For some, the children are a continuing bond to their abuser as they have shared custody of the children, or the perpetrator has visitation rights (Hardesty et al., 2012). They also described how the perpetrator weaponised the children in their abuse of their partner either through hurting (or threatening to) the children directly to upset the victim, using the children as messenger or spy to report on their victim parent or using the child welfare or family court system as a means of continuing their abuse of the victim (Katz, 2016; Stark, 2007, 2023) by accusing the victim of a range of abuses typically towards their children.

9. If you answered 'yes,' please indicate how many children you have (Numbers are 'out of 6' participants who indicated that they had children)

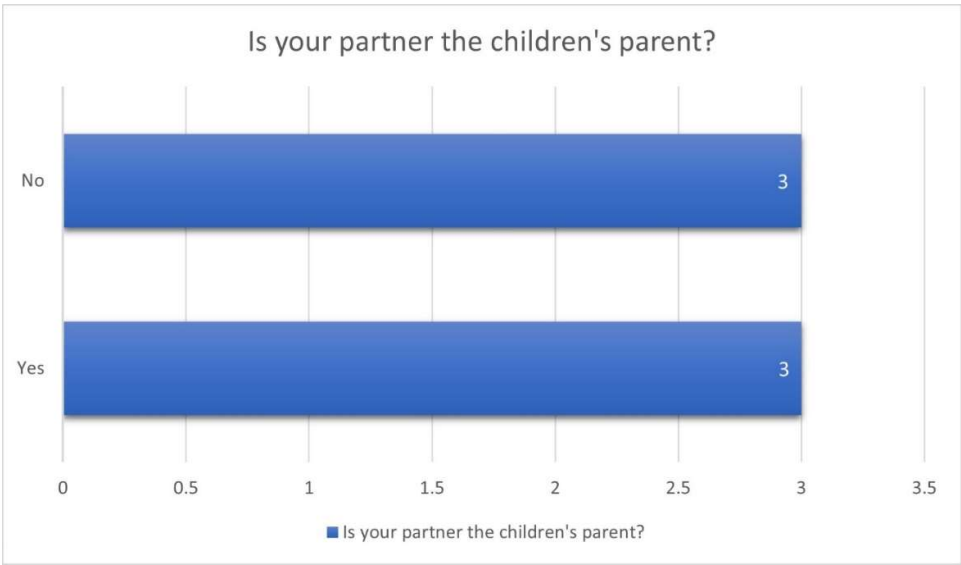


(Figure 25) Number of Children

a) One	3	50%
b) Two	1	17%
c) Three	1	17%
d) Four		
e) Five	1	17%
f) More (please specify)		*

(*% designates percentage of the total number with children n=6. 17% rounds up)

10. Is your partner the children’s parent?



(Figure 26) Children’s Parent.

a) Yes	3	50%*
b) No	3	50%*
N=6 *		

11. Do you consider yourself to be a member of the bisexual community?

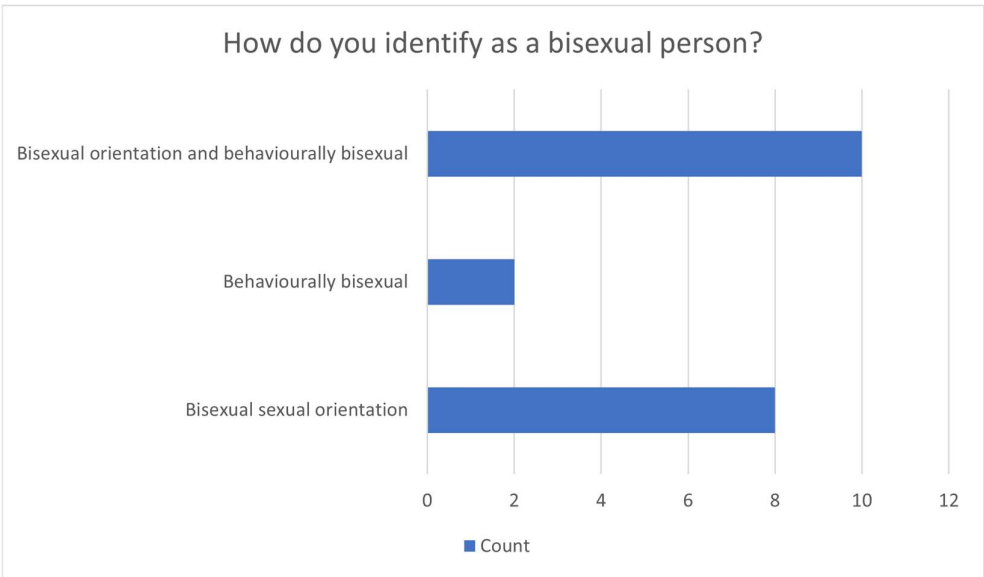


(Figure 27) Member of the bisexual community

a) Yes	17	85%
b) No	3	15%

Bisexual community. 75% of participants (17) stated that they regard themselves as members of the bisexual community. Three said they were not. All self-identified as bisexual when they signed up to participate in the survey. Of those who stated during the interview that they were not bisexual, two labelled themselves as 'pansexual' as it was, they said, a more modern and inclusive term. The term 'community' was problematic for some participants as they said that it is not a term commonly used with other bisexuals (3102/W/M/45-55/C2/Atlanta).

12. If you identify as bisexual, do you regard yourself?

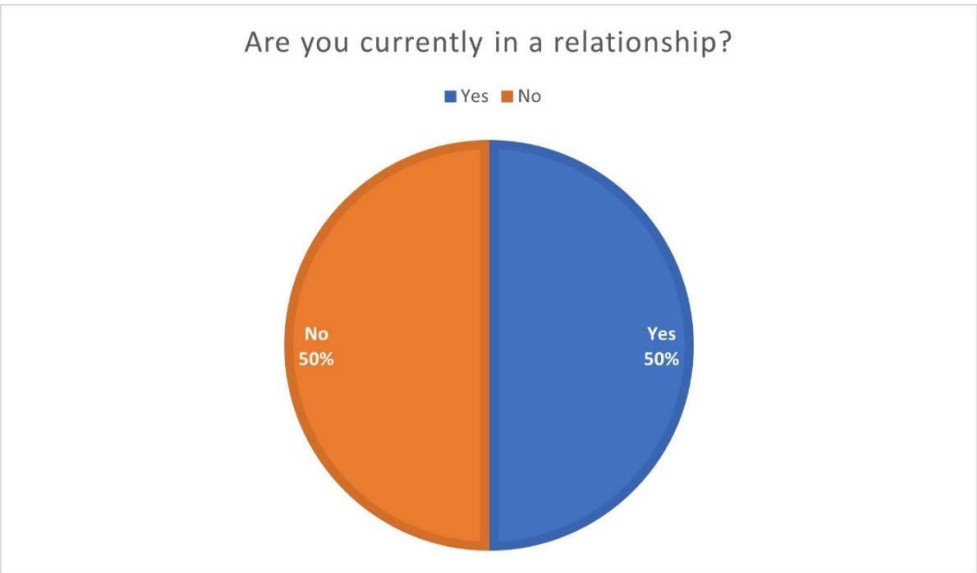


(Figure 28) Identify as Bisexual

a) Bisexual sexual orientation	8	40%
b) Behaviourally bisexual	2	10%
c) Both a and b	10	50%
d) Other (Please specify)		

All of the participants self-identified as bisexual during the recruitment process, as this was one of the conditions for participation. This question caused some confusion for some participants. The researcher felt that it was essential to differentiate between attributed, observed bisexual behaviour as seen in statistical reports and bisexuality as a sexual orientation derived from an individual’s self-identification. Self-identification was a vital component of this survey when recruiting participants was underway. The researcher explained that early IPA bisexual data (Messinger, 2011; Coston, 2017) drawn from secondary data attributed bisexual IPA data based on reported behaviour (heterosexually identified women reporting sexual activity with same-sex and opposite-sex partners but not self-identifying as bisexual), not behaviour attributed to people who self-identified as bisexual. This may have led to a bias in using this secondary data to represent bisexual IPA accurately.

13. Are you currently in a relationship?

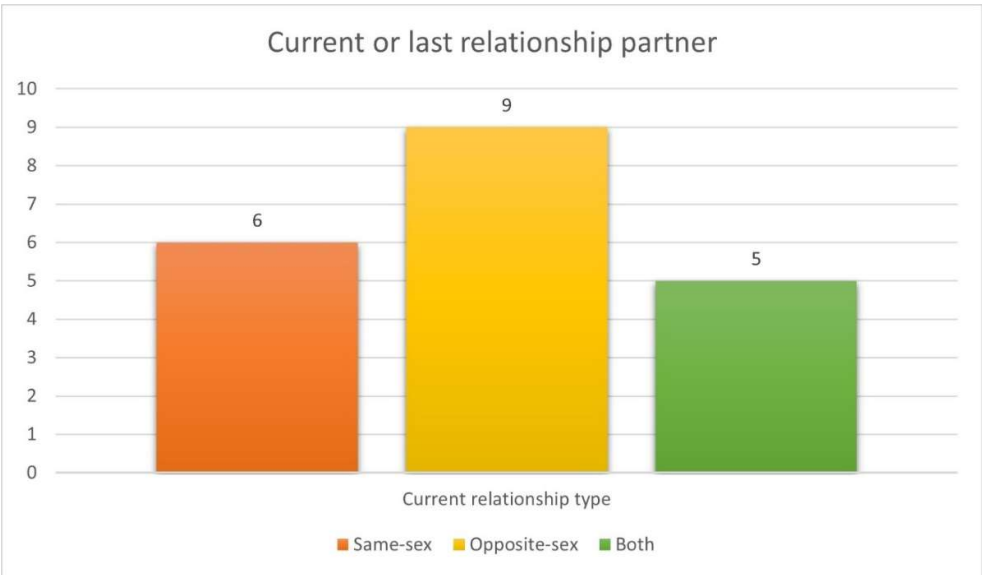


(Figure 29) Current Relationship

a) Yes	10	50%
b) If yes, how long have you been in this relationship (months)? *		
c) No	10	50%

Current relationships: 50% stated that they were in a current relationship, while the other 50% said that they were not in a relationship. *Participants mostly ignored questions about the length of relationships, and those who said they were in a relationship indicated that it was in the previous 12 months.

14. Is/was your partner(s) of the same sex, opposite sex, or both?



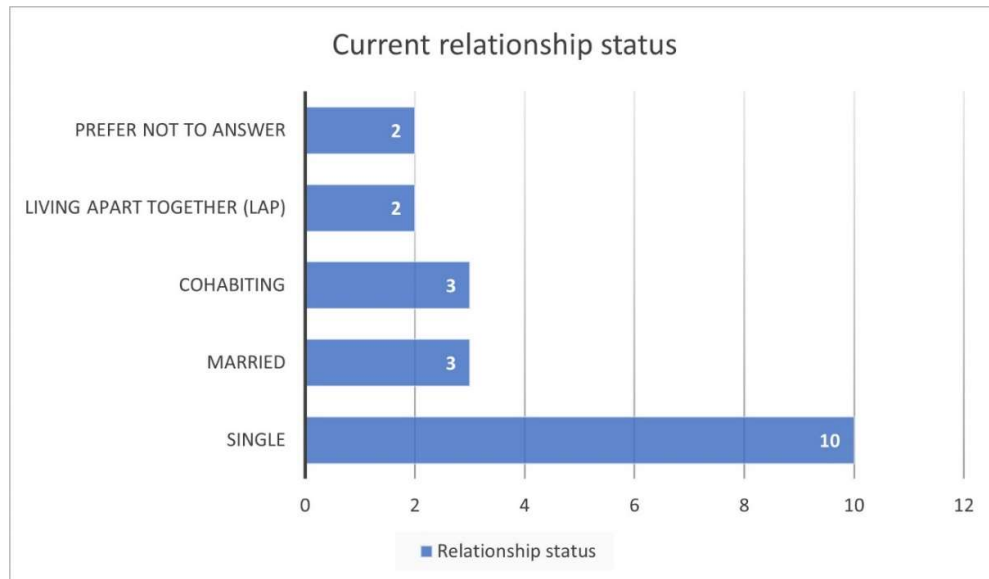
(Figure 30) Partner sexuality

a) Same-sex	6	30%
b) Opposite sex	9	45%
c) Both	5	25%
d) Prefer not to answer		

When current and past relationships were included, the breakdown of relationships provided a mix, with nine in opposite-sex relationships, six in same-sex and five having both opposite and same-sex relationships (concurrent). The first 15 questions were designed to capture a demographic snapshot of the participants. Every effort was made to record their answers as they were and not attempt to interpret or label their relationships. Regarding this Question (14), the previous question number 13 asked, ‘Are you currently in a relationship?’ The answers were 50% ‘yes,’ and 50% ‘no.’ Question 14 then sought to clarify these current or their last relationship by asking, ‘Is/was your partner(s) of the same sex, opposite sex, or both?’ The responses were same sex: 6 (30%), opposite sex: 9 (45%), both: 5 (25%). The ‘both’ category was, by some, a perfunctory answer without comment, while others did clarify. 3114 H/M/35-45/Cuba/Miami was most explicit, stating that he lived with a married couple and that he had sexual relations with both separately or together. He did not self-label this, but in

applying a label, it could be described as polyamory. The other participant who commented stated that it was a more casual issue that she (3212 H/F/26/Cuba-Mexico/Miami) had an ongoing relationship with an (abusive) male. When she went out socially without him, she would partner up with a girlfriend and stay over with her when possible. While not explicitly stated, two others inferred that their relationships with both same-sex and opposite-sex were more casual open relationships, lacking a boundary as to which partner they were 'attached' to at the time. This question was included to gather participant demographics, and no data was provided on how it may have influenced past relationships influenced by IPA. Participants' current relationships were stipulated to be non-abusive in order for them to participate in the research.

15. What is your current relationship status?



(Figure 31) Current Relationship Status

a) Single	10	55%
b) Married	3	15%
c) Cohabiting	3	15%
d) Living apart together (LAP)	2	10%
e) Separated		
f) Divorced		
g) Widowed		
h) Prefer not to answer	2	10%

Participants described a range of relationship types. None described themselves in the questionnaire as divorced.

16. Have you ever witnessed domestic violence or intimate partner abuse (emotional, psychological, sexual, controlling behaviour, violence)?

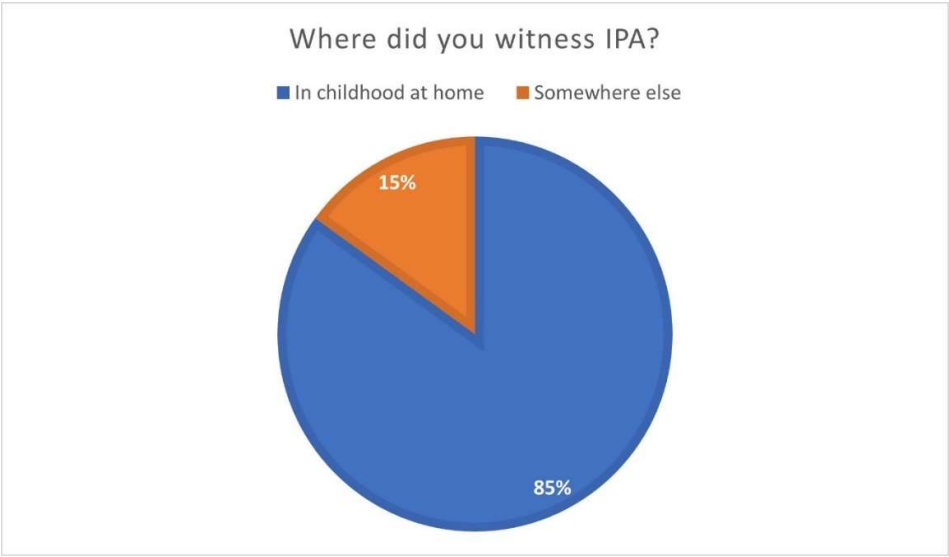


(Figure 32) Witnessed IPA

a) Yes	20	100%
b) No	0	0%

One hundred per cent of participants, including the control group, had experienced IPA in their lives, including during their childhood, witnessed in person (by family or friends), or experienced in their relationships. The control (3219: W/F/38/Ireland/New York City) had experienced brief emotional abuse in a relationship she left, in addition to witnessing IPA as a child in her home.

17. If 'yes,' where did you witness it?

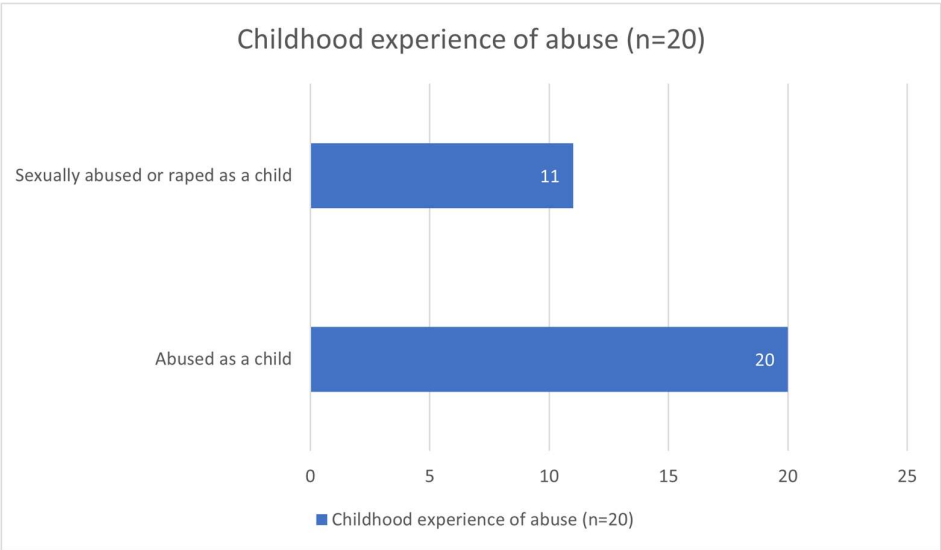


(Figure 33) Witnessing IPA Location

a) In childhood at home	17	85%
b) Somewhere else	3	15%

While all participants stated that they had seen IPA in their childhood, three said that it was not in their immediate home environment; it was seen in the extended family (grandparents, step-parents, family friends).

18. Can you elaborate on your answer if you experienced IPA during childhood?



(Figure 34) Childhood abuse

a) I was abused (Neglect, physical, emotional, witnessed)	20	100%
b) I was sexually abused*	11	55%

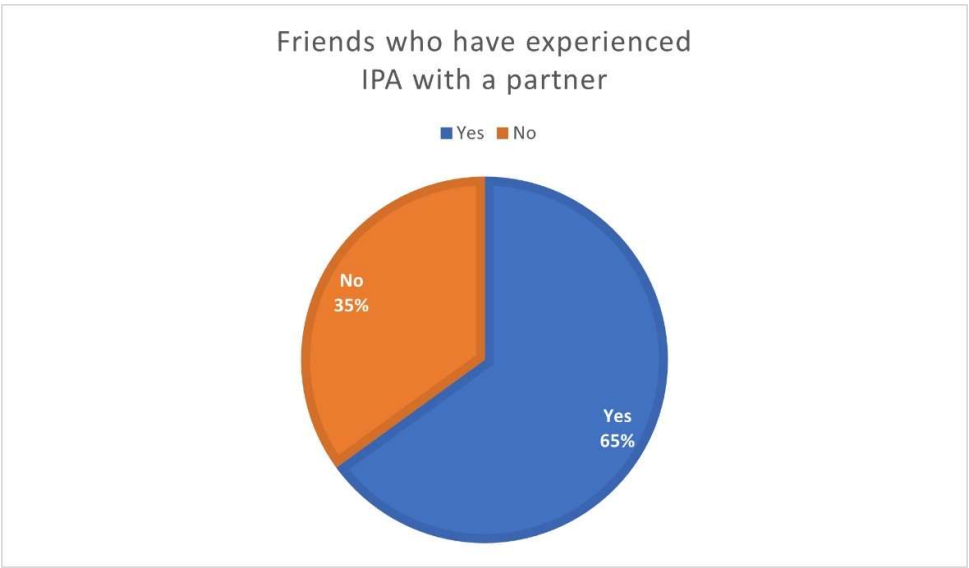
*Note about b). This was not asked as a question. It is included here as some participants voluntarily stated verbally that they had been sexually abused as children, and this researcher wanted to include this critical information as an abuse category.

This researcher believes that even when a child is not directly involved in abuse, as a witness, they are a participant, and as a participant, they are victims (Stark, 2023; Daly & Wright, 2017, p. 173). In asking participants to elaborate on their childhood experiences, it appeared that the term ‘witnessing’ of IPA hid the fact that all were victims of abuse, including the three participants who spoke about extended family. This abuse ranged from neglect, isolation, emotional abuse, physical abuse, religious abuse, sexual abuse and rape. This researcher believes that the rate of childhood sexual abuse and rape was higher, as even though it was not a question, many participants volunteered the information and shared their experiences. Some participants spoke quite openly about experiencing sexual abuse as children. In a follow-up call with one participant who said that she had experienced childhood sexual abuse. The

researcher asked her why she had not mentioned the abuse during the interview. She responded, ‘Well, you didn’t ask.’

The perpetrators of the sexual abuse were siblings, siblings’ friends, stepfathers, babysitters, family friends, and biological fathers.

19. Have any of your friends related that they have been abused by a dating or relationship partner?



(Figure 35) Friends experiencing IPA

a) Yes	13	65%
b) No	7	35%

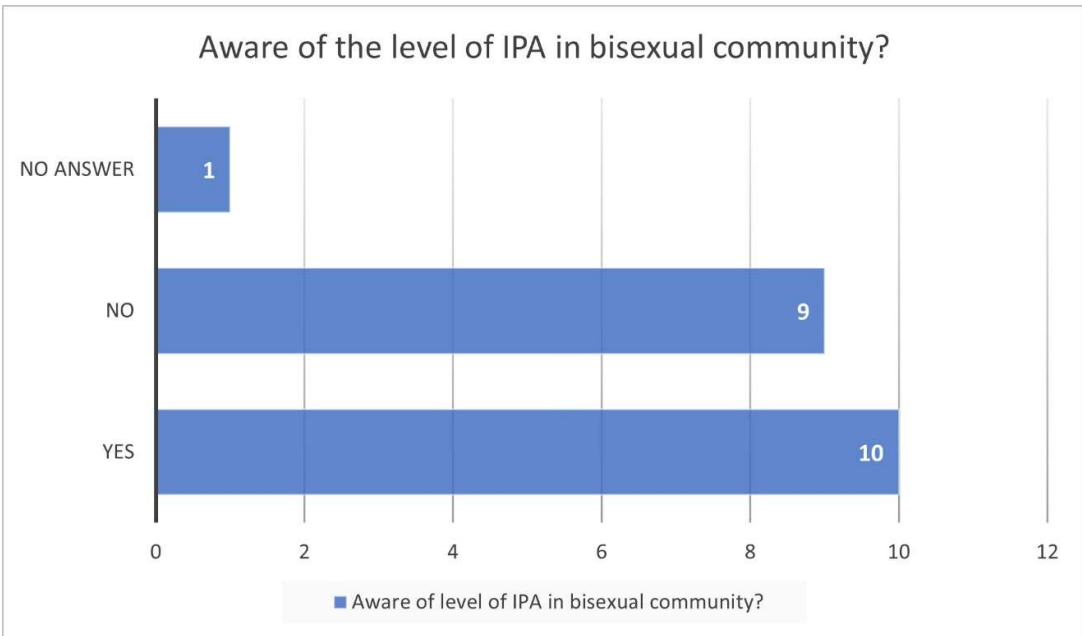
Thirteen participants' friends had related to them that they had experienced IPA during their dating or partner relationships. Seven did not.

20. If 'Yes', would you care to expand on what you are aware of in your friend's experience?

a) Yes	8	40%
b) No	1	10%

Of the eight who stated 'yes,' too little information was provided to make this a relevant data point.

21. Before reading the survey introductory statement, were you aware that Intimate Partner Abuse (Domestic violence) exists in the bisexual community?



(Figure 36) Awareness of IPA in the bisexual community

a) Yes	10	50%
b) No	9	45%
c) No answer	1	5%

There was a distinct lack of awareness of the extent of IPA in the bisexual community and the LGBT+ community overall. Of those who stated that they were aware, their understanding of what comprised IPA was centred on physical violence and as a heterosexual issue. Other forms of abuse were unfamiliar to them. The language, terminology and vocabulary of abuse appear

to be elusive to the participants, connecting 'domestic violence' and non-violent abuse types to heterosexual people. 'Violence' was a keyword in understanding abuse. Some participants related that IPA or (domestic) violence is regarded as normal conflict behaviour in the LGBT+ communities (Duberli, 2020; Turell, 2000) and not recognised as abuse. Participants from South America described the normality ('cultural') and everyday use of abuse in their patriarchal cultures against women and gay people.

22. During your relationships, have you ever experienced abuse from a partner?

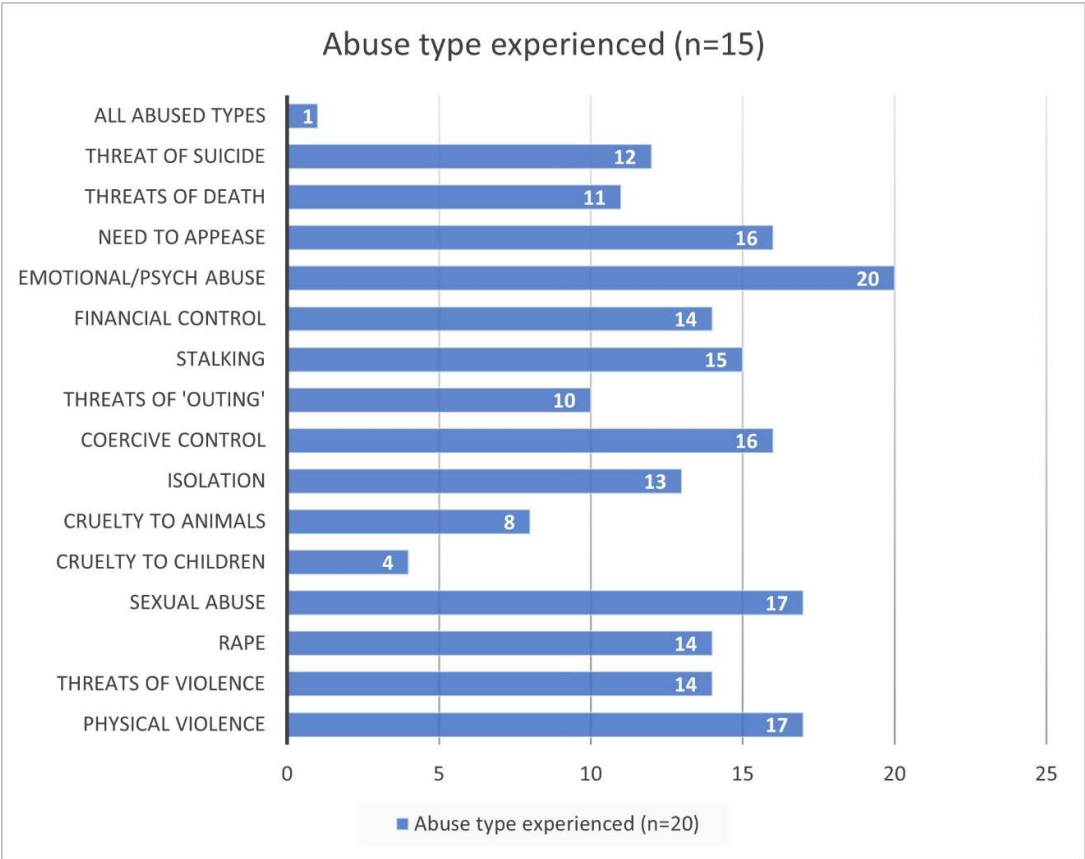


(Figure 37). IPA experience

a) Yes	19	90%
b) No	1	5%

The criteria for inclusion in this survey were that the participants had experienced IPA in their relationships. 19 out of 20 participants stated that they fit this criterion. The one participant who did not was the control (3219: W/F/38/Ireland/New York City) who was recruited to provide comparative experiences as someone who had not experienced IPA in relationships. She did say that in ending a relationship, she experienced emotional abuse but saw it for what it was, as an event as opposed to behaviour and left the relationship. She does not see herself as a victim of IPA. She did, however, state that she had experienced or witnessed childhood abuse ('domestic abuse').

23. If 'yes', please indicate what type of abuse you experienced.



(Figure 38) Abuse type experienced

a) Violence (hitting, shoving, physical violence)	17 85%
b) Threats of violence or death.	14 70%
c) Sexual coercion or sex without consent. Rape.	14 70%
d) Sexual abuse, including forced sexual activity that made you feel uncomfortable.	17 85%
e) Demonstrates cruelty to your children.	4 20%
f) Demonstrates cruelty to your animals or threatens to hurt them.	8 40%
g) Isolation (keeping you from your friends or family)	13 65%
h) Coercive control includes controlling behaviour. For example, a constant need for your partner to know where you are, who you are with, and what time you	16 80%

will be returning home. This is reflected in frequent texts, calls, and checks on your social media.

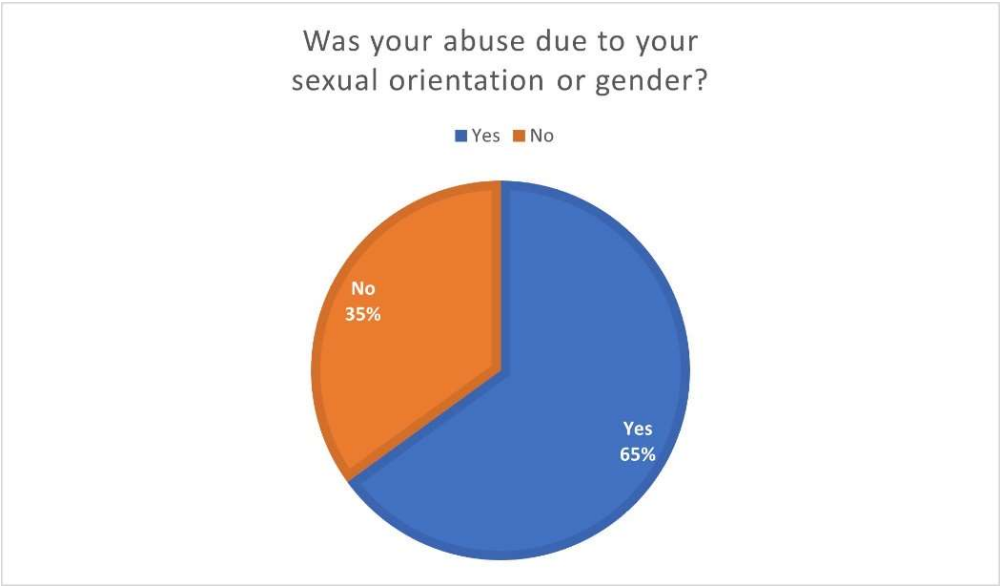
i) Threatens to 'out' you, revealing private sexual information to friends, family, co-workers, and employers.	10	50%
j) Stalking in person or using tech to track your movements.	15	75%
k) Financial control. Having access to your money controlled, comments on your spending, restrictive spending, being given an allowance.	14	70%
l) Emotional or psychological abuse. Put-downs, you're not good enough, embarrassing you in front of friends or family, gaslighting, moody, not speaking to you, sneering, shouting at you, giving you 'looks.'	20	100%
m) Feeling a need to appease your partner. Feeling that you are walking on eggshells.	16	80%
n) Threats of death. Has displayed a means or hurting of killing you.	11	55%
o) If you threaten to leave the relationship, your partner states they will commit suicide or threatens to hurt or kill you, your family, children or animals	12	60%
p) All the above	1	5%
q) Other (please specify)	0	0%

Note: The chart has 16 sections allocated to describe abuse types; however, there are only 15 as the category 'All abuse types' is not a type of abuse but an experiential accumulator descriptor. The one candidate who chose this ('p' above) also filled in the other abuse descriptors.

Types of abuse experienced by the participants. It was evident from the data gathered that not only was there an expansive range of abuse experienced by participants, but the high level of multifaceted abuse intensity was evident. The score of who experienced what does not correlate to all the participants experiencing the same types of abuse. Each had a different mix of abuse types except for psychological/emotional abuse, which was experienced by all. This was followed by sexual abuse (n=17), and rape (n=14) is also included here as some participants described sexual abuse as separate from rape but inferred that rape or unwanted sexual activity was an integral part of the abuse that they experienced. One participant (in the

55-65 age group) described a lifetime of experiencing rape. She was severely traumatised by the experience and is under psychiatric care as a result. 'Corrective rape' or corrective sexual activity by a straight partner to attempt to 'correct' their partners bisexually was reported by two participants in their interview (Doan-Mihn, 2019). The next high level of abuse was physical violence (n=17). Related experiences ranged from pushing and shoving to outright repeated assault. Some participants said this was something they experienced in most of their relationships. Many blamed themselves, *'I must attract this type of guy...'* and others said that their violent abusers were women. The participants from South America said that violence within relationships was 'normal,' a part of their culture. Only when they came to the US did they realise that it was not normal behaviour, generally after they sought help because of IPA experienced or witnessed in the US. Others related that violence was sometimes the result of escalation of verbal abuse by the victim and at times ended their being subjected to physical violence by the abuser. Some discussed 'mutual violence' in this cultural context where both parties assaulted each other. Some related that their partners threaten to kill them (n=14) should they leave the relationship, accompanied by the abuser showing them the means of how they would do it (displaying a gun or a knife). Others told of threats of suicide (n=12) by the abuser should the victim leave the relationship. All were extreme manipulation techniques used to continue or extend the abusive relationship. Coercive control (or individual tactics), the use of a range of controlling techniques, was recognised by 80% of victims (n=16). Most participants were generally unused to the term 'coercive control'. Still, they were familiar with coercive control behavioural elements such as controlling behaviour, stalking, stalking by phone (wanting to know where the victim was, who they were with, when they were coming home), financial control, monitoring of social media, texts and email. Many indicated that they had been subjected to most of the abuse types, with one emphatically stating that she had been exposed to all during a multi-decade relationship.

24. Was your abuse because of your sexual orientation or gender?

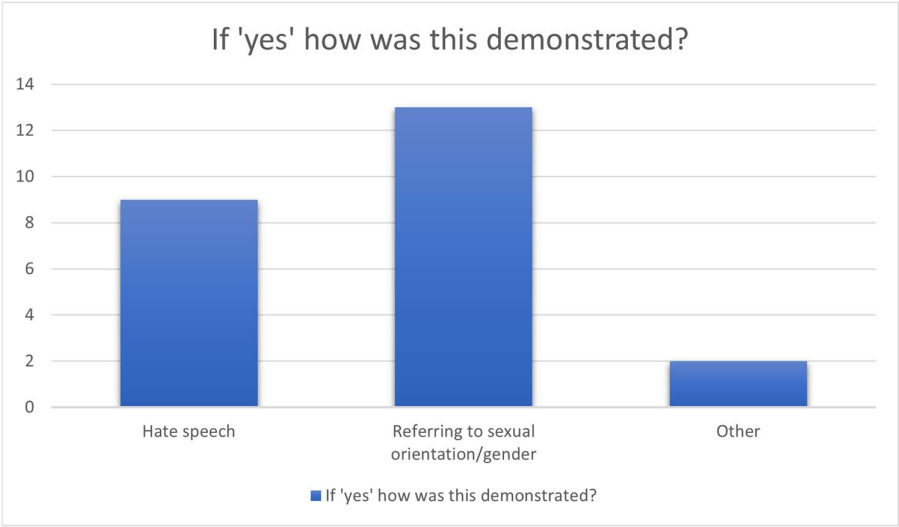


(Figure 39) Abuse caused?

a) Yes	13	65%
b) No	7	35%

Was your abuse due to your sexual orientation or gender? 65% (n=13) of participants said that it was, while the remaining 35% (n=7) said that it was not.

25. If 'yes', how was this demonstrated?



(Figure 40) If 'yes,' how?

a) Hate speech	9	45%
b) Referring to your sexuality, orientation, or gender negatively	13	65%
c) Other	2	20%

*Totals add to more than the number of participants, as many experienced multiple forms of abuse due to their sexual orientation or gender.

26. If you have experienced abuse, how often have you experienced abuse (frequency)?

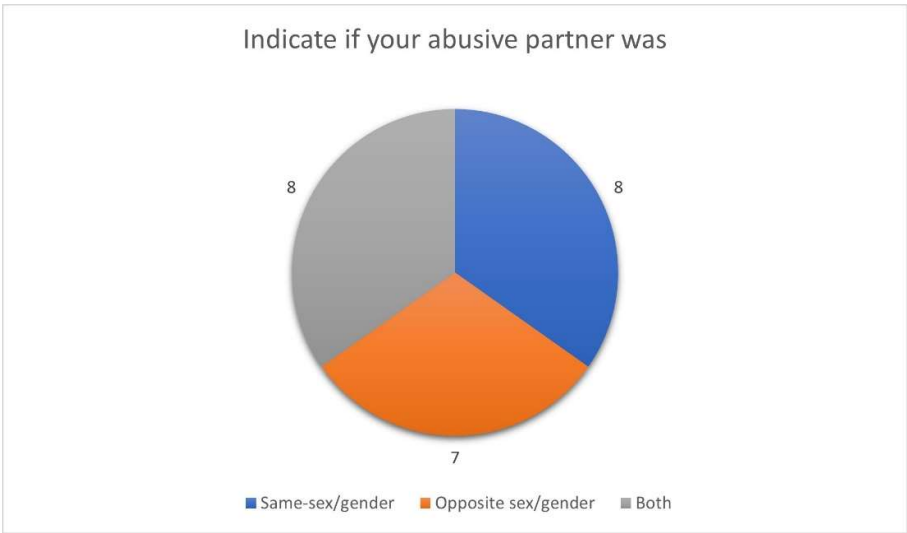


(Figure 41) Abuse frequency

a) Constantly (every day)	9	45%
b) Frequently (several times a week)	8	40%
c) Sometimes (some times a month)	2	10%
d) Rarely	1	5%
e) Never		

Starting with the control, who had not experienced IPA except for an incident of emotional abuse during her relationships, she stated that it rarely occurred as she immediately left the relationship. Many participants described the intensity of experiencing abuse as ‘near-constant’ with a blurred line between ‘near-constant’ and ‘frequently.’ This was confirmed in the interviews, where many described being constantly hypervigilant, having to be constantly aware of their abusive partner’s moods and actions, of ‘walking on eggshells,’ of put-downs, and close monitoring of their actions and movements. Sexual assault, as has already been discussed, was a frequent occurrence for many. There was confusion as to whether the lack of consent to sex in a relationship or marriage was regarded as rape or a criminal offence.

27. If you have experienced abuse, please indicate if your partner(s) was

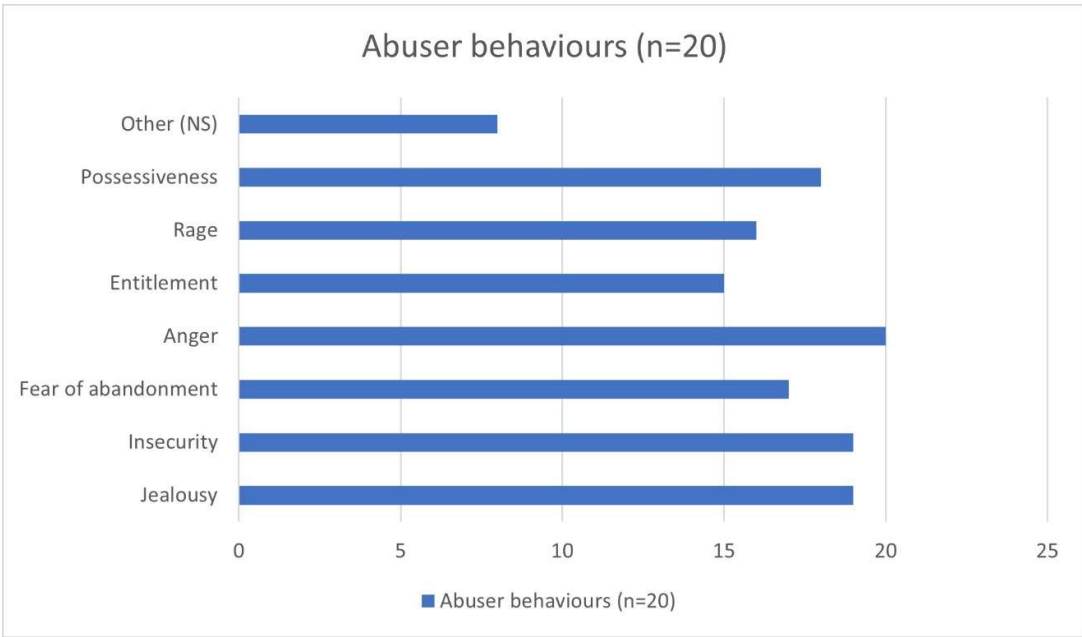


(Figure 42) Abuser gender

a) Same-sex	8	40%
b) Opposite sex	7	34%
c) Both	8	40%

This chart described the sex/gender of their abusers in the past. Note: The sum of the abuse genders does not add to 20 as some participants reported being abused exclusively by the opposite sex partners (35%, n=7), others exclusively by same-sex partners (40%, n=8), while 40% (n=8) reported being abused by both. Participants revealed that males were predominately (but not exclusively) the source of physical violence, while females were primarily emotionally and psychologically abusive (Stark & Hester, 2019, p. 93).

28. Did your partner/abuser display any of the following behaviours?



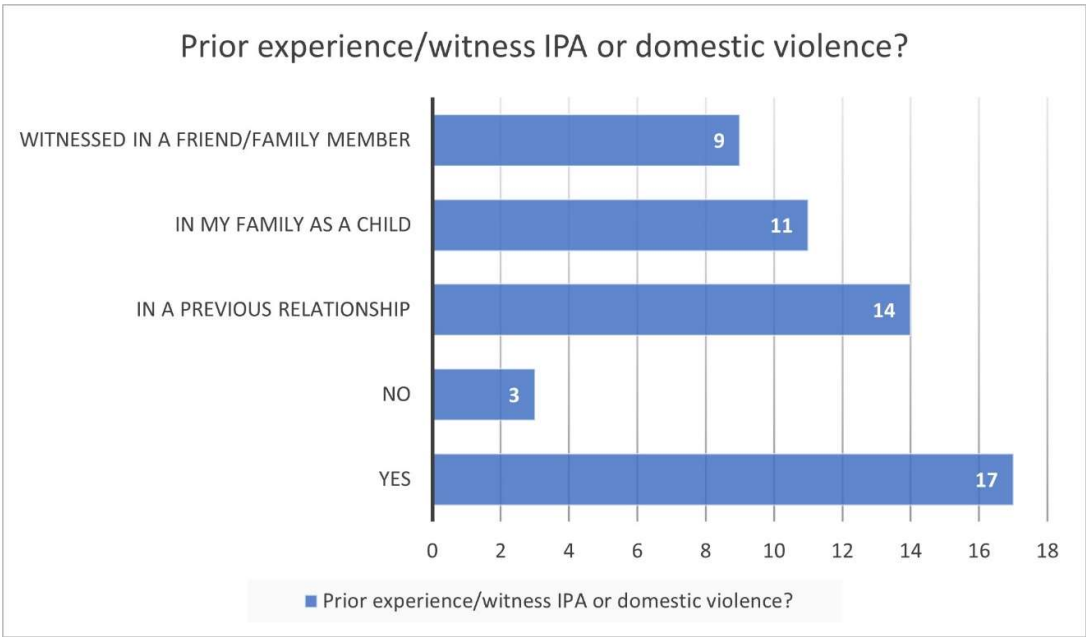
(Figure 43) Abuser Behaviours

a) Jealousy	19	95%
b) Insecurity	19	95%
c) Fear of abandonment	17	85%
d) Anger	20	100%
e) Entitlement	15	75%
f) Rage	16	80%
g) Possessiveness	18	90%
h) Other	3	15%

The range of abusers’ emotions recorded here is familiar to anyone who studies the behaviours of abusive people in relationships, regardless of their sexual orientation (Townshend, 2021). Almost all of the participants experience the full range of abuser emotions. Throughout the survey, jealousy (n=19) and anger (n=20) were the two abusers’ emotions that were mentioned repeatedly, as well as in the literature (Head & Milton, 2014; Head, 2020; Lindasusan, 2011). Bisexual partners (Lindasusan, 2011) are particularly prone to jealousy because there is an assumption by many partners that their bisexual partner will

either cheat on them or abandon them to be with a different same-sex or opposite-sex partner as was recounted by many of the participants of this survey. This manifested itself in the prevalence of the abuser's fear of abandonment (n=17), possessiveness (reflected in efforts to control the victim) (n=18), sense of entitlement that the victim somehow 'belongs' to them (n=15) and thus any demands that they make on them is valid, reinforced by rage (n=16). Rage is described as an outburst, episodic, instrumental anger. Anger was described as an ongoing underlying or visible emotion. Insecurity (n=19) may be one of the prime underlying emotions that motivate abusers to do what they must to control and keep their victims.

29. (and 30). Did you experience or witness Intimate Partner Abuse or Domestic Violence before your most recent abusive relationship?

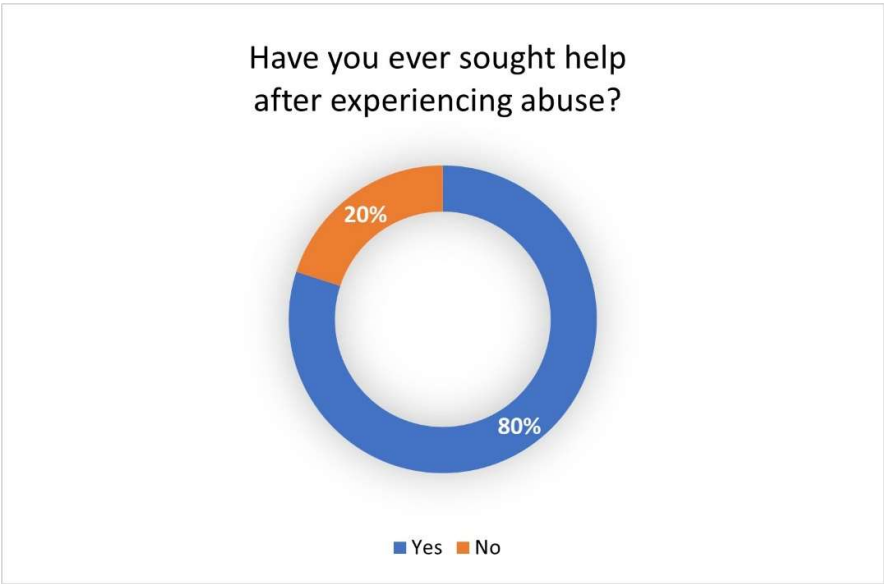


(Figure 44) Prior experience of IPA

a) Yes	17	85%
b) No	3	15%
If you answered 'yes' please indicate.		
c) In a previous relationship(s)	14	70%
d) In my family, as a child	11	55%
e) Witnessed it in a friend or family member	9	45%

This was a data checksum repeating already-asked questions about experiencing abuse. It was included to capture abuse experiences initially denied or overlooked. Two events of child sexual abuse were recorded in this as the participants became more familiar with the interview, the interviewer, and the questions.

31. Have you ever sought help after experiencing abuse?

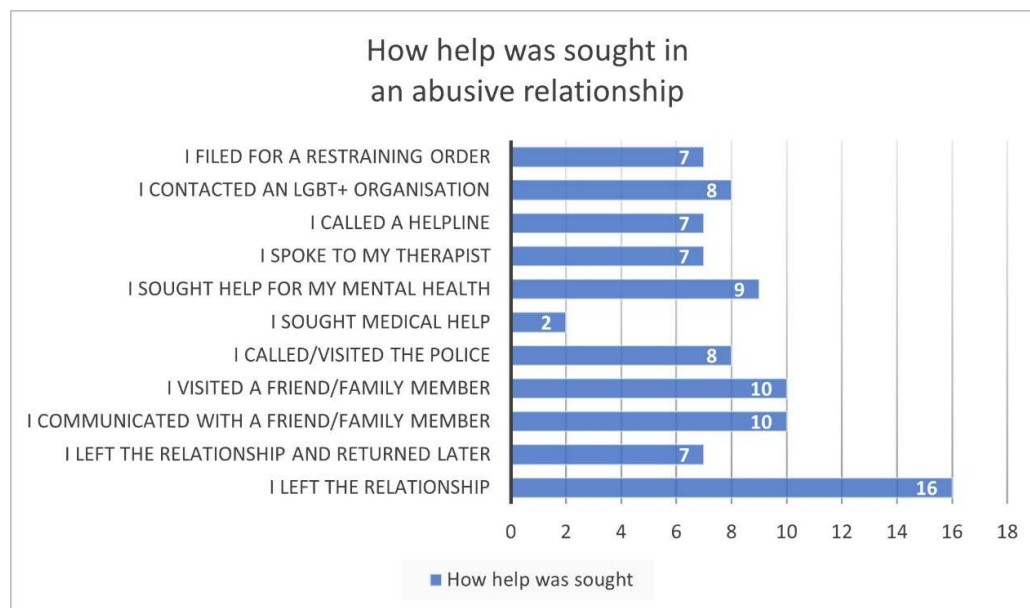


(Figure 45) Help-seeking

a. Yes	16	80%
b. No	4	20%

Those who sought help (n=16) did so in various ways, as is outlined in Question 31 (follows). Those who did not state that not knowing that help was available, or a fear of authority were the primary reasons for not doing so.

32. If you answered 'yes,' please indicate how you did this.



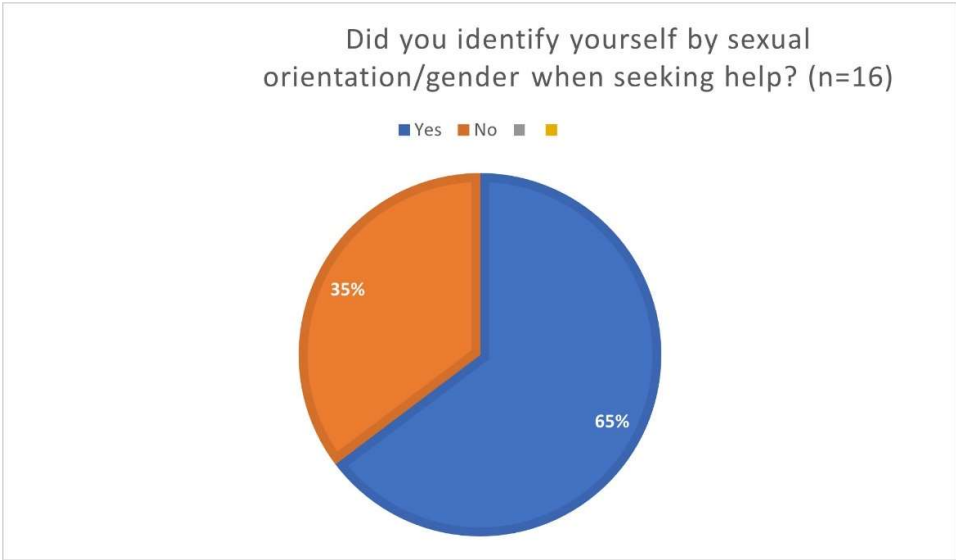
(Figure 46) How help was sought

a. I left the relationship.	16	80%
b. I left the relationship and returned later	7	30%
c. I communicated with a friend or family member (call, text, email, letter)	10	50%
d. I visited a friend or family member.	10	50%
e. I called/visited the police.	8	40%
f. I sought medical help.	2	20%
g. I sought help for my mental health.	9	45%
h. I spoke to my counsellor or therapist.	7	30%
i. I spoke to a helpline (phone or online)	7	30%
j. I contacted an LGBT+ organisation.	8	40%
k. I filed for a restraining order	7	30%
l. Other (please specify)		

'Why doesn't she leave?' is the typical stereotypical response when victims of IPA are discussed. The facts in this research contradict the typical knee-jerk response, demonstrating

that most victims — 85% — (n=16 + 1, including the sample control) did leave the relationship. 35% (n=7) returned to the relationship due to pressures, including a need to protect their children or efforts by the abuser to improve their behaviours, financial need or due to a judicial intervention (Batterer Intervention Programmes or anger management classes for the perpetrator, for example). All of them left again permanently. 50% (10) did nothing else. 35% (n=7) filed for a temporary restraining order (TRO); however, few sought a permanent order afterwards. This may have been due to the relief of successfully leaving the abuser or the fear of having to return to court and having to face them again. The TRO did provide the victim the opportunity to safely leave the relationship or remove the abuser from their home. Of the two victims who sought medical help, one was refused additional help when she pleaded with the nurse to contact authorities while the abuser was not in the room. She believed that it was due to her race as a black woman. Leaving the relationship significantly increased the abuser's agitation and danger to the victim (Kasperkevic, 2014).

33. If you sought help from an organisation (police, ambulance, clinic, hospital) did you identify yourself by sexual orientation (bisexual, gay, lesbian, heterosexual, gender identity)?

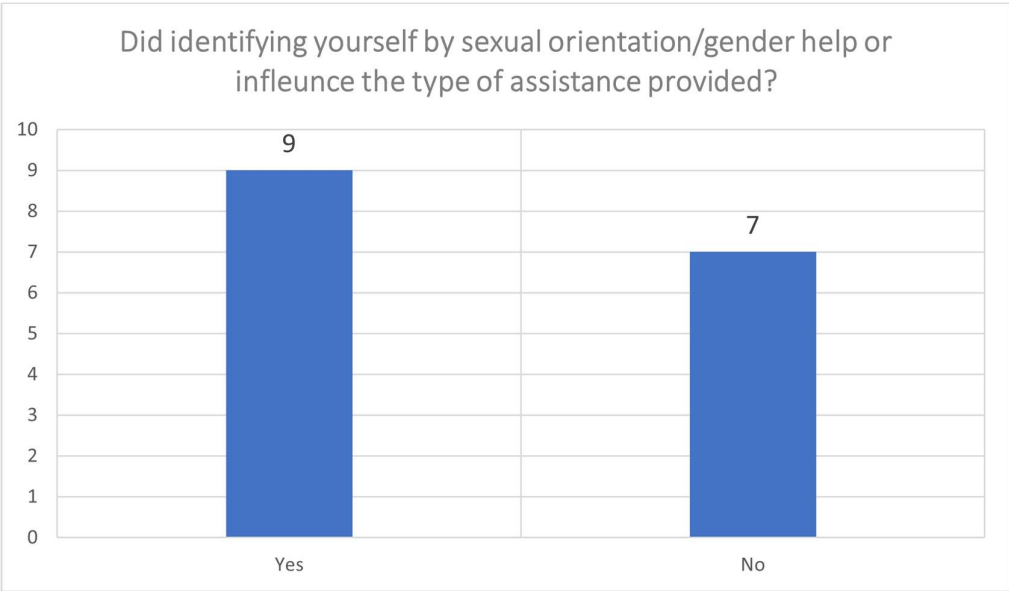


(Figure 47) Help-seeking identity

a. Yes	11	65%
b. No	5	35%

80% (n=16) of participants sought help from abuse. The values, therefore, in this graph are 'out of 16'). Participants who self-identified (n=11) by sexual orientation (heterosexual, lesbian, gay men, bisexual) found that identifying as bisexual did not provide any unique type of assistance. One trans woman participant said that identifying as such led them to be ridiculed and laughed at by the ambulance crew and police. Identifying as heterosexual or gay (lesbian/gay man) appears to provide all the assistance they need. The five participants who did not self-identify let the caregivers assume their identity. (*Percentages and numbers are rounded).

34. If 'yes,' (to question #32) did identifying yourself by sexual orientation or gender help or not help the type of assistance provided?



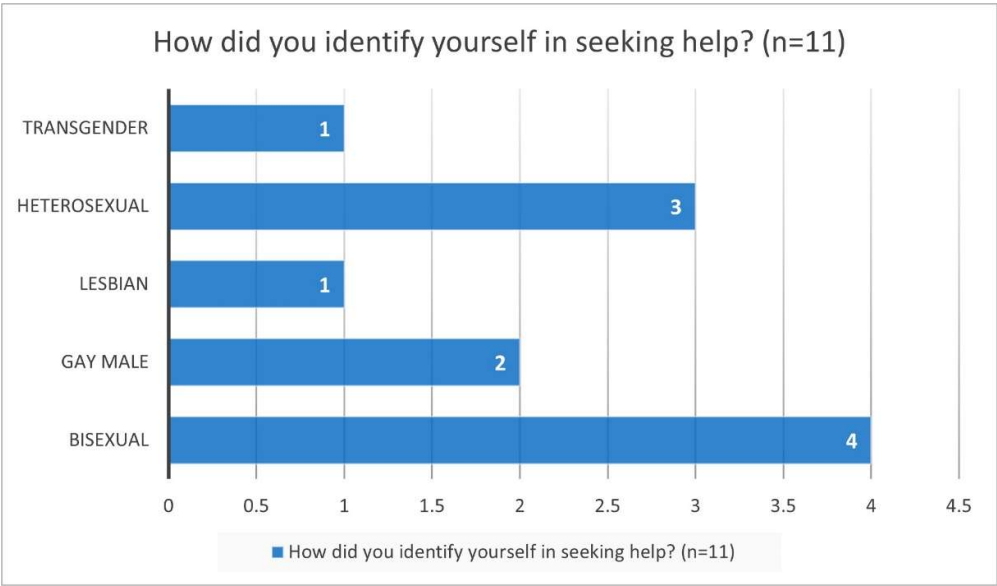
(Figure 48) Did identifying help?

a. Help	9	40%
b. Not help	7	35%

Of the sixteen participants who self-identified when seeking help, nine said it had a positive response. The remaining seven either did not answer or stated a negative response. In determining what 'help' was, the nine participants who answered 'yes' stated that identifying as heterosexual, gay (male or lesbian), trans (1), or bisexual (1) was met with a receptive or

respectful response from caregivers (police/ambulance/ clinic/hospital). Of those who said that they were met with a negative response, one was trans (woman) who said that she had been laughed at and ridiculed by the ambulance crew and the police, while others who identified as bisexual or gay had their sexual identities ignored. Positive helping responses may be geographically dependent with larger cities providing more LGBT+ support and sensitivity training.

35. How did you identify yourself? (to question #33, ‘Yes’ n=11)

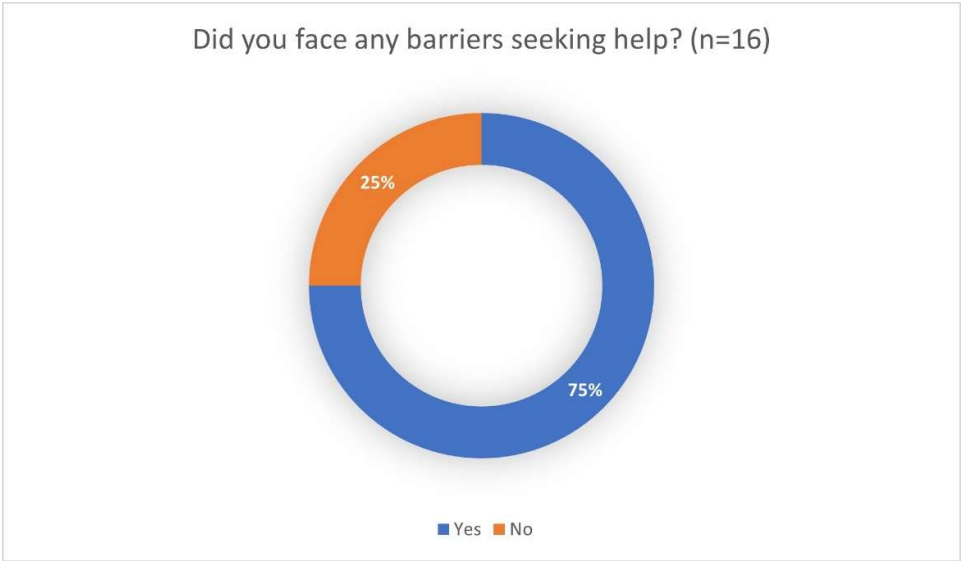


(Figure 49) How did you identify?

a) Bisexual	4	35%
b) Gay	2	10%
c) Lesbian	1	5%
d) Heterosexual	3	15%
e) Gender identity		
f) Other (trans)	1	5%

A common response among participants was that not saying anything or identifying as heterosexual or ‘gay’ (male or female) was sufficient. They felt that help providers were reasonably well-versed in responding to these latter identities.

36. Did you face any barriers or difficulties in seeking help? (n=16)

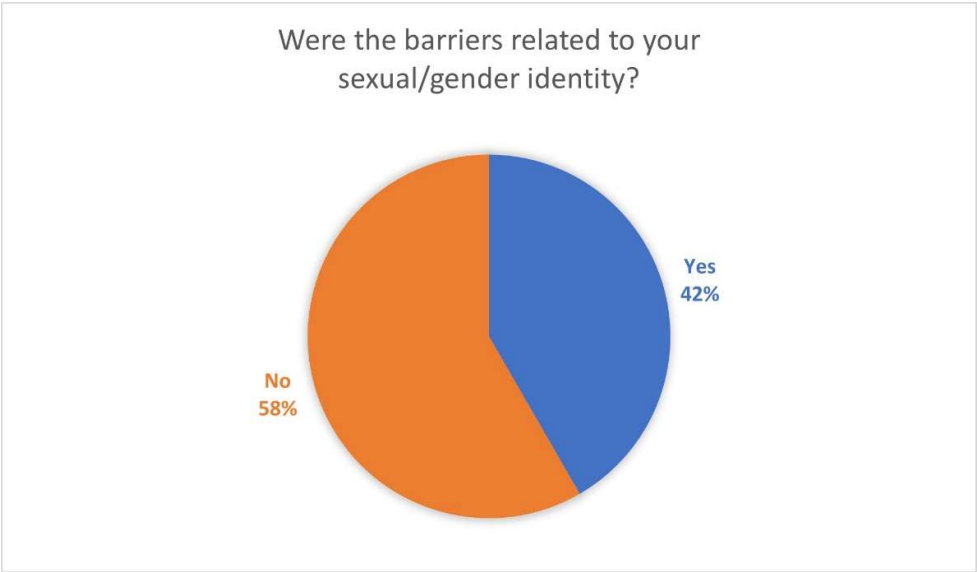


(Figure 50) Barriers

a) Yes	12	75%
b) No	4	25%

The number of participants who sought help following abuse was 16 (80% of all participants, see Question 30). Participants who stated that they faced barriers (n=12) described myriad actual or anticipated obstacles (see question 38 for a list of barriers faced)

37. If 'yes' do you think that the barriers had anything to do with your declared or observed sexual identity?



(Figure 51) Barriers and identity

a) Yes	5	25%
b) No	7	30%

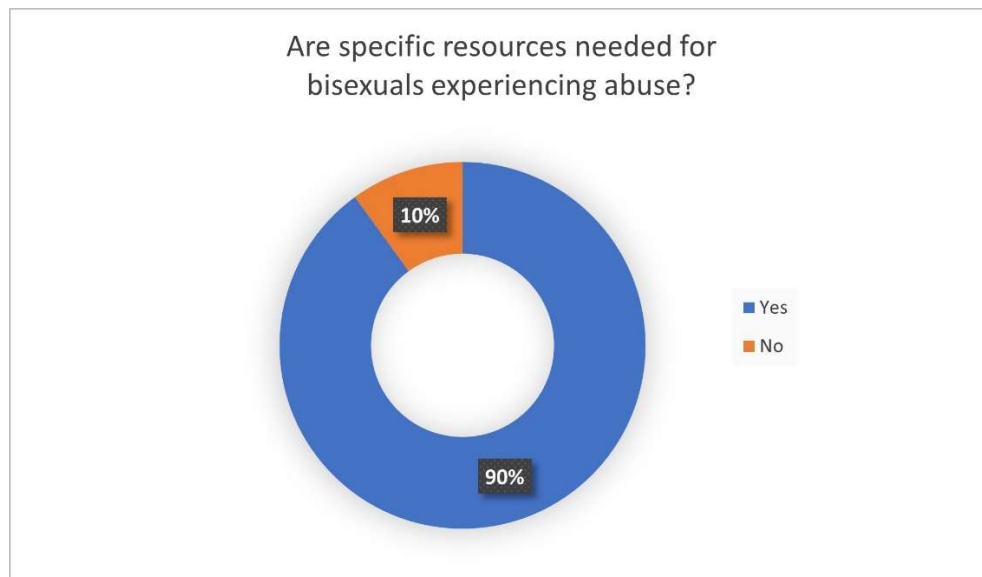
Five participants stated that their sexual/gender identity affected their ability to receive help. Most participants (n=8) had no opinion, while six denied that it did.

38. Please briefly describe these barriers or difficulties.

- They did not understand that what they were experiencing was IPA.
- A lack of understanding of the language of abuse ('violence' being the prime and exclusive understanding of abuse).
- The perceived normalisation of abuse within the bisexual and LGBT+ communities.
- Fear that their abusive partner's family or their shared community might turn on them if they reported the abuse.
- Lack of information about abuse in the bisexual and LGBT+ communities.
- Language barriers if English was a second language.

- Cultural issues based on their understanding of what IPA was in the context of their country of birth.
- Unfamiliarity as to what forms of help were available in seeking help (medical, legal, mental health).
- Being unable to reach out for help due to close monitoring by their abusive partners.
- Fear of consequences if their abuser found out that they sought help.
- Fear of authorities.
- Fear of discrimination about their sexual/gender identity.
- Fear of arrest/deportation with their immigration status.

39. Do you think that there is a need for specific helping resources for bisexual individuals experiencing abuse?



(Figure 52) Bisexual resources?

a) Yes	18	90%
b) No	2	10%

Among 18 participants, there was an emphatic agreement that specific resources were needed for bisexual individuals experiencing abuse. However, when pressed to name what

specific resources were needed, most participants felt that having LGBT+ informed resources available for gay (men/lesbian) individuals or heterosexuals would cover any needs. Of the two who said 'no,' one was the control who stated that she had no experience that would allow her to make a recommendation (3219: W/F/38/Ireland/New York City). The other was a trans woman (3313: B/TW/25-35/Miami) who said that her experience identifying as bisexual (and black and a trans woman) when seeking help showed that she had not been taken seriously and thus could see no reason to have any bisexual-specific resources unless they were explicitly designed for bisexual-identifying trans people and staffed appropriately.

40. If you answered 'yes,' please indicate what might be introduced or improved to provide (better) support.

Recommendations from the participants on what could be done better to support bisexual IPA victims, including:

- Better access to bisexual and LGBT+ informed law enforcement and medical services.
- Availability of bisexual and LGBT+ advocates when seeking help, including in the police and the courts.
- Better distribution of IPA educational materials highlighting how abuse appears in the LGBT+ communities.
- Clear ('simpler') language when describing and discussing what compromises IPA, particularly in the bisexual and LGBT+ communities.
- Provision of LGBT+ IPA victim support services.
- More inclusive LGBT+ inclusive emergency housing.

Summary

This chapter provided a detailed review of the 40-question questionnaire used in the study. The questionnaire results were comprehensively reviewed. Questions 1–15 established participant demographics, offering important context about the diversity of the sample. Questions 16–40 explored participants' experiences of intimate partner abuse, addressing a range of behaviours and impacts. Analysis was conducted for each question, highlighting key findings and patterns that emerged from the data. Together, these results form the basis for understanding the lived realities of bisexual IPA and inform the thematic analysis that follows.

9. RESEARCH FINDINGS/RESULTS 2: INTERVIEW RESULTS.

This chapter presents the main themes from participant interviews, including childhood and sexual abuse, bisexual invisibility, and barriers to recognising or reporting intimate partner abuse. It also explores perpetrator tactics, victim survival strategies, and wider structural influences such as patriarchy, sexism, and misogyny.

Introduction

In the previous Chapter (Research Findings/Results 1), the results of the 40-question questionnaire were reviewed. This section reviews the interviews conducted with the 20 individuals who participated in the survey. As demonstrated in the introduction to these Findings chapters, the broad demographics of the participants added to the quality of the research in terms of context and participant experiences.

The results presented here are based on the outcomes of extensive reviews of the interview audio recordings and transcripts. These are reflected in a distilled list of themes, and related findings are reviewed in this section under the corresponding themes. These themes were revised into nine, which encapsulate the participants' experiences of intimate partner abuse (IPA). As they are discussed, excerpts of the interviews relate the participant narratives and, where appropriate, their emotions.

Primary themes from the interviews

There is no significance to the order in which these themes are listed.

1. The frequency of exposure to childhood abuse.
2. Experiences of sexual abuse and rape as a child.
3. The frequency of adult rape.
4. An absence of bisexual identity outside of bisexual friends.
5. Bisexual invisibility.
6. The range and intensity of experienced IPA abuse types experienced.
7. Participant's poor understanding of what constitutes IPA.
8. Barriers to receiving help.

9. Perpetrator behavioural observations from participants.

These themes will now be reviewed as recounted by the participants using excerpts of their interviews.

1. The frequency of exposure to childhood abuse

All the participants, including the control, reported exposure through involvement, victimisation or witnessing domestic violence/abuse as children. *'Being Hispanic when I was growing up, I thought that parents fighting was normal; I thought nothing of it. Until I was much older and came to the US, I hadn't realised how abusive my father was being to my mother even though she frequently had bruises on her arms.'* (3212: H/F/26/Cuba-Mexico/Miami). Ignorance of what they were witnessing and the reported Hispanic cultural normalisation of abusive behaviours was a common explanation among these participants. Some also described this abusive behaviour between grandparents and children, mother and stepfathers and abusive behaviour perpetrated directly against the children.

(3201: W/F/35-45/Seattle) stated, *'When I was 14, my brother got in trouble with the police. My parents spent all their time taking care of him and ignored me; they left me to grow up essentially on my own.'* As a result of this, she said that when she got into an abusive relationship in her early 20s, she did not know what to do. She lacked a frame of reference for what was 'normal' in relationships. This lack of foundation, she said, cost her as she went from one abusive relationship to another. The most intense of which was with a same-sex partner who beat her in public, which she regarded as part of a pattern, IPA as opposed to a one-off assault, which resulted in her hospitalisation. She spent her life trying to please and appease others, seeking recognition and acceptance. As a result, she stated that she avoided conflict and lacked the skills to address it when it arose.

'Abuse as a child stays with the child for a lifetime.' (3202: W/M/45-55/C2/Atlanta) described how he and his sister would sit at the top of the stairs in their home and listen to their parents' fight. Eventually, the fight would turn on him. *'My father was...(a sadist). He would tell me to go to my room, wait for him, and think about what I had done wrong.'* He said that he had no idea what he had done, and he would sit on his bed, terrified, waiting for his

father to come. *'He wouldn't come upstairs right away...making me wait. Then, when he eventually came up, he would ask me if I had thought about what I had done.'* He said it didn't matter what he said in response to his father; he would be beaten with a belt. That was followed on his knees, praying, *'begging God for forgiveness for whatever I had done wrong.'* A favourite expression of his father was *'spare the rod, spoil the child.'*

(3203: W/F/25-35/Atlanta) in talking about domestic violence and personal abuse that she witnessed and experienced in her childhood, she stated, *'I've not healed from anything from my childhood. I don't belong in a relationship because I'm not healed.'* She described a life of recurring abuse, alcoholism, and drug use. She also said that women were the 'cruellest' perpetrators of abuse, and on one occasion, she ended up in hospital following an assault from a female partner. She used the word 'cruel' to describe actions by women whom she expected would have been 'not like abusive men.' The abuse she experienced was unexpected and affected her deeply as a result. These included violence and sexual abuse in addition to emotional abuse by those she loved and trusted.

2. Experiences of sexual abuse and rape as a child

55% (n=11) of the participants stated that they had been sexually abused (including vaginal, anal or oral rape) as a child. The number may have been higher, given some participants' reluctance to discuss this issue or the use of 'safe' words in discussing it, for example, referring to being 'touched' or 'caressed' by an abuser. The researcher was not looking for this data at the outset of the research. When it emerged as a pattern, the questionnaire and interview were retroactively adjusted to include it not as a question but to provide a category to record it, as it appeared so frequently from participants when discussing childhood abuse. Perpetrators included siblings, siblings' friends, stepfathers, an uncle, babysitters, and one father.

Fear of not being believed when they reported their abuse was a common obstacle if they ever did tell anyone. They did not know what to do or who to turn to. They had no language in which to relate what had happened to them. Some felt guilty because they thought that they had allowed the abuse to occur by not stopping it. Some felt guilty because they had become aroused by the experience. Many appeared to have accommodated their

experience (Summit, 1983), saying they had 'got over it' and put it aside. However, the reality of lived trauma for many of those reporting childhood sexual abuse contradicts the projection of self-assurance. The experience of childhood abuse and rape appears to have had a lasting effect for many. Few of the participants ever reported their abuse to anyone other than a trusted family member. One described how her stepfather was arrested when she disclosed his abuse to her mother (see 3204 below). The term 'sexual abuse' appears to be a euphemism for rape, oral rape or sexual intercourse. Many participants found it easier to discuss their experience that way. Other words used (in addition to the safe words mentioned above) were 'molested,' 'touched,' 'abused,' and 'did things to me,' and these allowed the participants to intellectualise, disassociate from or diminish their experiences.

Only one of the participants who reported sexual abuse stated that their abuser had faced any criminal or legal consequences (3204: B/F/29/C3/North Miami). The following interview excerpts reflected that many participants showed emotion while others were matter of fact. The latter may have been due to the setting and the fact that the interviewer was a stranger discussing issues that caused upset and discomfort or as a form of disassociation.

A note on the use of the word 'admitted.'

Three participants used the term '*I admitted that I had been abused...*' when talking about disclosure to others. This interviewer, in the course of their investigative work, has heard the term from other victims of abuse. It is, this interviewer believes, a manifestation of self-blame for their abuse (shame and guilt), of feeling that because they did not stop the abuse, the victim feels responsible for what happened. A 'responsibility' possibly instilled and reinforced by the abuser.

From the interviews about sexual abuse as a child (n=11)

'I was molested by my uncle when I was eight and again when I was 13.' (3102: W/M/45-55/C2/Atlanta). *'It was horrible. HORRIBLE. I didn't know what to do, who to tell.'* He had nobody to tell, given his father's psychological and physical abuse of him and the fear of his father that the family lived under. He told the interviewer that he went on to a life of addiction to drugs, alcohol, pornography, sex – *'anything that would numb me,'* he said.

'At night, when my mother was asleep, I would lie awake. I knew he was coming. My stepfather could come to my room and touch me. I was 10.' (3204: B/F/29/C3/North Miami). I asked if she had ever told anyone about what had happened. She said that she had told her mother but that she would not believe her. *'It was (is) upsetting that my mom never acknowledged what had happened. She would get angry at me; say I was making it up.'* Eventually, her stepfather got caught. One night, her mother stayed awake and followed her stepfather into the child's bedroom. When her mother saw what he was doing to her daughter, she threw up and screamed at him to get out of the apartment and called the police. He was arrested and criminally prosecuted. The participant did not elaborate any further other than to say that, as a result, she was highly protective of her own children.

'My brother (a teenager) forced me to give him oral sex when I was eight. He also brought his friend and made me do it for him as well. It went on for four years until I wouldn't do it anymore. Later, he apologised to me.' (3205: W/F/42/C5/Canada/North Miami). This came up in a phone call following the interview. When I asked why she had not mentioned this in talking about her experience of abuse at home as a child, she said, *'You didn't ask.'* The lesson here is that in interviews, we will receive answers to specific questions; if we want precise information, we need to ask for it. This may be particularly relevant when discussing sexual abuse, which in this survey was an 'accidental' topic which emerged when participants discussed childhood abuse. Some participants spoke of their sexual abuse and as has been demonstrated others did not discuss it as they were not asked and perhaps because it is a topic that is difficult to discuss.

(3218: W/F/33/Tennessee) described how her brother and a babysitter had sexually abused her (separately). She has never spoken to her brother since he/they had raped her. Her anger was evident. *'He never (expletive) said anything...never apologised. Nothing.'* The babysitter got caught as he had been molesting other children, too. She also stated, perhaps as a means of understanding her abusers or she had knowledge about her brother, *'people who have been abused, end up abusing.'* This participant was the only one who stated a concept such as this. Walby et al. (2014) argue against this abuser stereotype, stating that many other factors surround the behaviours of people who have been abused.

(3216: W/F/26/Ohio) stated and bitterly without expanding, *'My father abused me. He never touched my brothers.'* She went on to talk about living a life with a pattern of abusive relationships where she was sexually traumatised and became a sex worker for a time. *'I don't know how I ended up with the same types of guys; they all did the same thing to me.'* She spoke of her lack of self-confidence or being unable to defend herself from sexually abusive partners. She told of how her female partners were abusive also, but not to the degree she faced from men. Male abusers were physically and sexually violent, while female abusers were more adept at using psychological abuse she said.

3. The frequency of adult rape

Fourteen participants (75%) disclosed that they had been raped as older teens and/or as adults. 17 (85%) stated that they had been 'sexually abused,' including those who revealed childhood and adult rape. Many thought that they had been raped due to a perceived vulnerability when viewed as bisexual due to bisexual stereotypes that labelled them as promiscuous, sexually liberal ('anything goes') and sexually available (Dodge et al., 2016). Excessive alcohol/drug consumption was a factor for some when this occurred as it prohibited them from resisting the rapist, or their intoxicated silence may have indicated consent. Perpetrators included strangers at bars/parties and those who claimed to have a romantic interest in them. Many had been among the group who had been sexually abused/raped as children (See Findings 1, Question 18). The pattern emerged of feelings of hopelessness, detachment, betrayal by family from not being protected, of regarding abuse as 'normal,' as a form of 'love' from their abuser.

'I was at a party when I was 18. I got very drunk. I was in the bathroom. The door opened, and a guy came into the room. He grabbed me and tried to make out with me. I was too drunk to resist. He turned me around, so I was leaning over the sink, and he raped me from behind.' (3216: W/F/26/Ohio). She went on to say that she didn't know who the guy was or what he looked like as she was so intoxicated. She expressed deep shame at being unable to stop or identify him. Not knowing what to do, she never filed a rape complaint with the police. She continues to blame herself for not fighting him off.

(3201:W/F/35-45/Seattle) recalled how she was date raped by her roommate. *'I don't know why I call it a 'date rape,' we weren't on a date. He was just a guy I shared an apartment with. We were watching a game on TV, drinking beer. I passed out and woke up to find him on top of me (having sex).'* She didn't do anything about what happened, and he left the apartment soon afterwards. They did not talk about it. *'I ended up pregnant from that 'encounter.'* *I never heard from him for years until he found out about the child. Since then, he has been relentless in abusing me at work, in the courts, through our child and directly at work to try and get sole custody of the child.'* She tried to file a rape charge against him but was told that she was outside the statute of limitations.

'I was drugged at a gay nightclub. I passed out and found out later that four men had raped me in turn. They left me outside the club by a dumpster, where I woke up the next morning.' (3306. H/TW/55-65/Nicaragua/Miami). As a trans woman, this participant told me that trans women are perceived as being available for sex. She thought that it had to do with her bisexuality, the perception that she was 'open to anything (sexually)'. Men, she said, who live as heterosexuals but are gay find it acceptable to rationalise their (homo)sexuality by having sex with trans women. In addition to the levels of discrimination experienced as a bisexual, she added the additional burden of being a trans woman.

(3313: B/TW/25-25/Miami). This participant was a black bisexual trans woman who works as a sex worker. Rape was (is) a fact of life for her. She was visibly traumatised from her life. She spoke of societal exclusion, of exclusion also from the LGBT+ communities, where she said she should have felt protected and safe but did not. Of being ridiculed by health workers and the police when seeking help for injuries, particularly when identifying as a trans woman or a bisexual. Her sentences were short and clipped, her affect flat and detached. The interviewer did not linger on questions due to the participant's discomfort. She appeared relieved when the interview was over. As discussed in the Method section, all participants were advised before the interview began that they could be as involved (or not) as they wished and not answer any questions that caused discomfort. They were also advised that they could stop at any time without explaining why.

Another participant (3210: H/F/55-65. Nicaragua/Miami/TR Spanish) spoke of a life of trauma (for whom a Spanish-to-English translator was needed) perforated with sexual abuse and rape. The translator told the interviewer that the participant was receiving treatment for her trauma and support through an LGBT+ organisation. She has lived her life openly as a bisexual, and she felt that doing so made her susceptible to sexual abuse. *'I'm not ashamed of who I am,'* she said, *'I am who I am.'* The interviewer did not delve too far into the participant's history due to her perceived vulnerability. She had been subject to sexual abuse in Nicaragua and in the US.

4. An absence of bisexual identity outside of bisexual friends.

Unlike other members of the LGT+ communities, participants spoke of how they are reluctant to identify as bisexual outside of their bisexual friends. This was due to bisexual erasure and invisibility, in addition to criticism and exclusion from LGT+ groups and individuals.

Not all had this reluctance (3212: H/F/26/Cuba-Mexico) spoke of how she came out to her family when she was 15 and told them that she was bisexual. *'I didn't care. I was who I was. I like girls and boys. Turns out my family didn't care either,'* she said. Others disagreed, stating that so identifying drew the ire of straight and gay friends. (3201: W/F/35-45/Seattle) stated that *'bisexuals are not taken seriously. People think behaviour before sexuality.'* She opined that openly identifying as bisexual exposed bisexual individuals to more abuse from males and females.

(3203: W/F/25-35/Atlanta) on reviewing the statistics about the high levels of abuse for bisexuals (included in the pre-interview packet 'Survey introduction'), stated, *'I 100% agree that IPA is worse for bisexually identified women.'* For that reason, she said she avoids calling herself bisexual other than with other bisexuals. Instead, she has adopted a pansexual identity or identifies as a lesbian when at lesbian clubs or dating a woman. *'Calling myself pansexual is more acceptable now rather than bisexual,'* she said.

(3204: B/F/29/C3/North Miami) said that within the groups she socialised with, she readily identifies as bisexual. She said that females treat her with romantic affection while men are more driven by sex, assuming easy access to sex. *'They're (men) expecting something*

from you (sex), and you're not even considering that,' she said. Outside of social groups, she identifies as a heterosexual to fit in with her church group and the social aspects attached to that membership.

(3107: H/F/25-35/Peru/Miami/TR Spanish) was quite blunt, stating that outside of her friends, she does not identify as bisexual. She put this down to cultural misogyny growing up in Peru, where she said men felt comfortable abusing women for any reason, *'being a lesbian, being too fat...why give them something else to attack me for?'* she said. This issue of cultural misogyny was reflected in most Hispanic participants born and growing up in South America.

(3212: H/F/26/Cuba-Mexico/Miami) stated that when she is in gay clubs and identifies as bisexual, she feels excluded. *'A lot of lesbians don't think I'm gay enough.'* This was a common complaint from other participants, both male and female, who recalled facing exclusion from their LGBT+ clubs if they openly identified as bisexual. She said that men assume that bisexual women are into threesomes. *'If I identify as bisexual, I get heat for not being gay or straight enough.'* She said that she never identifies as bisexual outside of her groups with whom she feels comfortable.

(3115: H/M/18-25/Venezuela/Miami) said that he is open about his bisexual identity because he socialises and works with LGBT+ people. *'Maybe it's because I'm young, I just don't care,'* he said. *'Bisexuality is an issue, a problem, for gay men. They assume that their partner will cheat on them.'*

3218: W/F/33/North Carolina said that it's better to hide her bisexual identity due to the negative feedback she receives. *'My last boyfriend constantly harassed me when I spoke to girlfriends as he assumed I was going to cheat on him. Eventually, the relationship became so (expletive) abusive and controlling that I left.'* She echoed that finding many lesbians exclude bisexual women. To overcome this, she said that when she goes to lesbian spaces, she identifies as being gay. *'It's less hassle.'* She stated that the lack of acceptance of who she is causes her mental health issues.

5. Bisexual invisibility.

The term 'bisexual invisibility' is so common when referring to bisexuals that it has become a cliché. It appears to be, however, the reality of the bisexual existence, of existing but not being seen or accepted. *'Unlike other LGT+ community members, bisexuals don't go around wearing a sign saying that we're bisexual. To do so draws criticism and judgement from straight and gay people.'* (3102: W/M/45-55/C2/Atlanta). *'One of my siblings refuses to accept that I'm bisexual; he thinks that I'm into 'bizarre sexual stuff' that goes against his religious values.'*

(3203: W/F/25-35/Atlanta) stated, *'I've changed my identity, I refer to myself as pansexual. It's a more inclusive term today. And it lets me fit in better with my lesbian friends. Referring to myself as bisexual comes with a whole bag of negative (expletive) from straight and gay friends.'*

(3205: W/F/42/C5/North Miami) *'Invisibility isn't a factor for me because I don't (expletive) care what people think. I've raised five kids by myself against all types of hardships, so when people make any negative comment about my being bisexual, it makes me laugh.'*

'Bisexual invisibility? Trying living bisexual and trans!' (3306: H/TW/55-65/Nicaragua/Miami) *'I'm not recognised as a bisexual, just as an object of societal derision that I have to fight every day; a queer in a dress. The bisexual community is in limbo—nobody sees us.'*

(3209: H/F/45-55/C1/Cuba/Miami) *'(Invisibility) is not an issue for me; it never has. What do I care what people think about my sexuality? I'm too busy living my life. I do agree that more information about being bisexual and bisexuality as a sexual orientation is needed for the public so that we can be understood.'*

6. The range and intensity of IPA experienced.

In reviewing the range of abuse data collected, what is absent is a means (scale) of measuring the intensity and severity of the experience, given its subjectivity of experience and comparison by the participants. This data point would have been beneficial if it could have been measured. This survey was designed to record the experiences of abuse through a

sociological, not psychological, lens. There was no 'push' to have participants 'open up' about their experiences or the trauma that they endured, other than their statements. A survey that would discuss or measure intensity by asking participants to expand on their experiences might be better suited in a controlled, clinically supervised psychological setting to avoid triggering trauma or causing harm to the participant.

Intensity, as described by the wide range of abuse experienced by all participants, is indicated through observational and circumstantial evidence that emerged from the data. This concept of intensity is supported by Kelly (1988), who described abuse as existing along a continuum, highlighting how repeated, patterned, overlapping forms of abuse intensify women's experiences. Intensity indications can be indicated through observational and circumstantial evidence from the collected data. The amount of abuse types experienced, for example, by so many, and the associated high frequency rates of abusive behaviours, indicates an intensity of experience. What lends this evidence more context is the inclusion of the control (3219/W/F/38/Ireland/New York City) as a comparative baseline. This participant has not experienced any of the IPA or exposure to perpetrator behaviours, as has been recorded with the other survey participants.

The intensity of abuse may be inferred and framed by the following parameters.

- The variety of abuse types that all participants experienced (15).
- The severity and frequency of experience of the abuse types (for example. physical abuse, childhood sexual abuse, rape).
- The overlap of abuse types that each participant experienced. All participants, other than the control, experienced multiple abuse types. One indicated experiencing 'all.' Others would have indicated 'all' (all 15 types) except that they did not experience cruelty by the perpetrator against their children or animals, perhaps because most did not have either.
- The high frequency of abuse types experienced by the participants. Most participants experienced abuse 'constantly' or 'frequently' (several times a week).
- The frequency of childhood witnessing or experience of abuse.
- The frequency of childhood sexual abuse (n=11).

- The frequency of rape (n=14) and sexual abuse (n=17).
- Inferred data on alcohol and drug abuse by participants and perpetrators.

By comparison, the control experienced two types of abuse: exposure as a witness to childhood domestic violence and end-of-relationship emotional abuse from one boyfriend whom she immediately left with no lasting effect. If she can be categorised as 'normal,' the degree of abuse and its intensity experienced by the remaining demographically diverse participants appears disturbingly high.

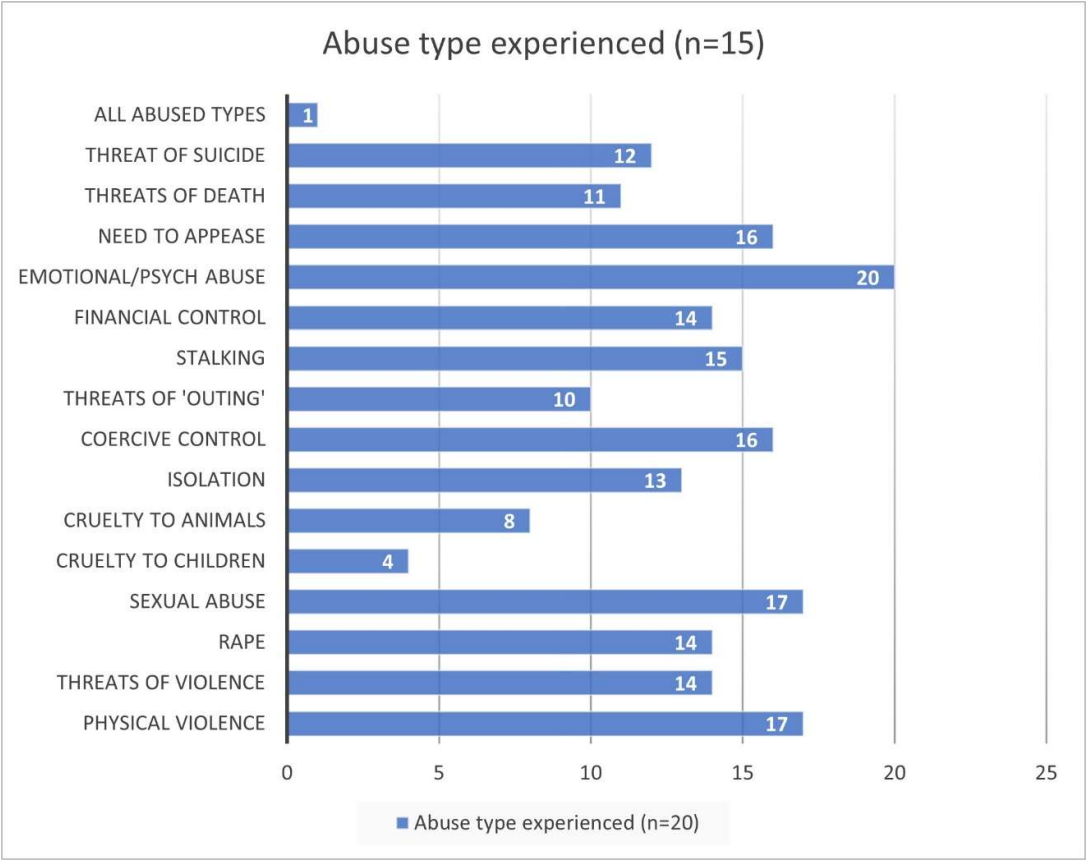
This outcome of this high rate of abuse among bisexuals is reflected in the literature where the combination of bisexual invisibility combined with social exclusion and discrimination from heterosexual and LGB+ populations may lead to increased toxic stress (Meyer, 2003; Carvalho et al., 2011) and the potential for an increased lack of self-care and increased alcohol/drug use. This, in turn, may lead to greater early morbidity and death among lesbian and bisexual women (Tilley, 2024; McKetta, 2024).

Given the broad demographic (particularly geographic) range of the participants, the similarities in their experiences of IPA were striking. Past research reflects this phenomenon (Donovan & Hester, 2014; Hill, 2019; Stark, 2007). Also see Secondary Data (in Methods), which has highlighted this similarity of perpetration and victimisation among heterosexual populations across cultures.

What was interesting about the participant sample was the diversity of the interviewees, their geographic dispersal, varied cultural backgrounds, extensive range of life experiences, and a wide range of age groups (20-55), as well as the variance in sexual experiences and identities. Even with this diversity, most had similar stories to tell, along with recounting a broad range of similar experiences, differentiating only in the nuances of their personal experience of abuse and the intensity. Some had been subject to more severe physical and sexual abuse (including childhood and adult rape) than others. Overall, the perpetrator's behaviours and the victim's responses appeared to follow similar and predictable patterns.

A note about participant behavioural clustering

Upon reviewing the similarity of the IPA experiences of the participants, it is worth noting that five participants were referred to the researcher by an LGBT+ IPA support organisation. This may have led to a concentration of experiences and, thus, behavioural clustering. This is where related similarities in experiences may be due to participants being influenced by and borrowing language from the experiences of others through participation in therapy, groups, or classes (Halonen, 2008).



(Figure 53) Abuse types experienced

These abuse types incorporate the full range of the IPA types experienced by participants. By comparison, the control scored 2 on this scale vs an average of 10.5 for the other participants.

'I thought that violence was part of life itself.' (3306/H/TW/55-65/Nicaragua/Miami).
'Letting emotions affect decisions lets you normalise (abuse) more than you should. I didn't recognise (what was happening as) abuse.' This participant engaged well in the entire survey

process. She expressed gratitude for being included and invited to contribute to what she described as a 'voiceless community.' She was referring here to the bisexual community. She stated that bisexual IPA research was vital as the research community had ignored it, and the subject and population were ignored by the public (heterosexual and LGT+ biphobia) in general.

Review of frequency and participant expressed intensity of abuse types

Fifteen types of abuse were listed, and we will review each with a comment on the responses from the interview participants, combined with their scores on the questionnaire. (See Figure 49 above).

All abuse types (n=1).

One participant selected this category. As has been discussed, more participants would have indicated experiencing 'all,' except that they lack children or animals. If the children/animals category had not been included, the frequency of this 'all' category would have been much higher.

(3220: W/F/45-55/Atlanta). This participant ticked the 'all abuse types' box. She earns a lot more than her ex-husband, who she described as a 'textbook abuser.' When they divorced, he got alimony even though she cared for the children. She stated that the abuse evolved incrementally over their years together; it took years to recognise that he what he was doing was IPA. She constantly rationalised his behaviour until an intervention from two friends who pointed out the obvious but by then it was too late. She recalled. *'There wasn't anything he wouldn't do to (expletive) me up. For 20 (expletive) years, I put up with his manipulations, his put-downs, and his cruelty to our children and our dogs. He once told my daughter when she was becoming a teenager to wear loose tops so that he couldn't see her developing breasts. He told her to never look into his eyes. When I was going out alone—a rare event—he would look me over, and if he thought I looked any way 'provocative' in how I dressed, he would berate me, call me a whore and demand to know who I was having an affair with and insist I change my outfit. When I was out, he constantly texted me, tracked me, and wanted pictures of where I*

was; he was relentless. He spent my money while allowing me little without explaining what I needed it for. He isolated us from my family. He controlled everything I did. He had cameras in the house! Not for security but to monitor what the kids and I were doing. When I told him I was bi, he started a raging campaign of telling me I was 'selfish;' he was beside himself with jealousy as he assumed that I would cheat on him and tried to force me to say I wasn't. It never ended, day and night. What's (expletive) up is that I grew up with dysfunctional parents, so I didn't know what I was experiencing was wrong. Who could I talk to? And what could I do? He would have killed me—at least he convinced me that he would if I left him. When I did divorce him – which I paid for—in the courtroom, he painted me as a 'crazy woman,' of alienating our children from him. The fact is the children were (expletive) terrified of him and ended up in therapy and medicated as a result. He harassed me through the court system, filing motion after motion to tie me up. I was at my wit's end. You know what's worse? I (expletive) PAID FOR IT! It never cost him a cent. Even after we got divorced, he tormented the kids to upset me and tried to restrict where I could live and where I could go, who I was with. He even followed me and tracked my car. He was relentless. And cruel. That's the word for it—cruel.' She went on to say that the shadow of his abuse still lingered. She still checks the street outside when she goes out and has moved address several times since their divorce to keep her and the children safe.

In this researcher's professional experience, this participant perfectly exemplifies the multifaced experience of long-term IPA perpetration and victimisation. A central factor of this was the victim's bisexuality, which was used as a component of control by the perpetrator (motivated by jealousy, fear of the victim's partner cheating, anxiety that there was another person in whom the victim might confide about how the perpetrator was treating her) and a responsive weapon used by the victim to destabilise and antagonise the perpetrator. It was one of the few control mechanisms she had in the relationship, even if it came at the cost of intensified abuse, but it provided the victim with some small solace that she had some power. This participant's IPA experience on its own could fill a textbook.

Threats of Suicide (n=12/60%).

More than half of the participants reported that their abusive partners threatened to kill themselves. These threats typically occurred when the participant was threatening to leave their abusive partner or had left them, and the perpetrator was attempting to manipulate them into returning. Typically, this threat has a more powerful effect on victims with shared children than on those without. None ever carried out the threat to completion, although some faked an attempt. Some then resorted to threatening to harm their victim partners. (3220: W/F/45-55/Georgia) (above) told of an incident where she had left her abuser and returned briefly with the children to retrieve some property. The perpetrator staged a suicide attempt, pretending to be unconscious with a rope around his neck. This backfired, however, as she had him committed for a psychiatric evaluation, but it did untold and lasting damage to the children who witnessed it.

Threats of death (n=11/55%).

Of those who disclosed that they had been threatened with death by their partners, some told of the threat being accompanied by the partner displaying a means or instrument of killing them: a knife, a club, or a gun. The presence of an instrument that the abuser stated would be used to kill the victim increased the fear threshold immeasurably. It put many into a constant state of hypervigilance—an exhausting position without any ability to relax. A particularly disturbing perpetrator threat was to display a firearm or knife and warn that they would kill the victim at the time of their choosing, even if the victim were asleep. The effect of threats like this was described as ‘intimate terrorism’ (Johnson, 2008; Stark, 2007) as the victim lives in constant fear of death for themselves and their children. Sometimes, the threat was accompanied also by an attempt to kill them. Such an occurrence was experienced by (3204: B/F/29/C3/ North Miami). *‘He threatened to kill me in lots of different ways. It was part of how he treated me. When I was pregnant, he beat me; I ended up in a hospital covered in bruises where he wouldn’t leave my side as he didn’t want the doctor or anyone to ask what happened. I tried to get the nurse to help me when we were alone for a minute, but she did nothing. Another time, he showed me a gun; he didn’t say a word, but I knew. Another time, he pushed me onto the bed and strangled me until I nearly passed out. It was terrifying. I never knew what he might do or when. (Silence). Eventually, I called the*

police, and he got arrested. I got a temporary restraining order, but I was afraid to go to court, so it never stuck. As soon as the police locked him up, I packed up and moved. We were gone in one night to a different part of town. It was better; I was stronger when he left the house. He would text me and tell me he was a 'changed man' and had 'found God.' Imagine!! (She laughed) (expletive) him, I never spoke to him again. But even now, I still look around when I go out to make sure he's not there waiting for me.'

(3102: W/M/45-55/C2/Atlanta) This male participant described how, in his 20s, his female partner tried to injure him or kill him. He had access to money and they had a life doing drugs—alcohol, cocaine, crack. On the one occasion that he did involve the police, the responding officers refused to get involved, seeing it as a 'domestic issue.' *'They left me alone with a woman who was violent and who had shown herself to be violent over and over.'* It was resolved when he got his family involved, and they contacted the police, and the participant was safely escorted from the apartment. He described a campaign of coercive control with him as the victim punctuated with violent fights where she would attack him with objects that could have killed him—a knife, an axe. *'It was crazy. We were both crazy...high most of the time. She spent my money. If I refused her anything, she would attack me physically. That's why I never had a gun in our apartment; she would have shot me. No doubt.'*

(3203: W/F/25-35/Atlanta) This female participant described how they find female partners to be more violent than males. *'They're able to control me...probably because I love them so much when we're together.'* She described an event after which she ended up severely injured in the hospital by a female perpetrator. When asked if the intention was to kill her, she responded, *'Of course. How much more effort does it take to kill? That was her intent...I got out of the situation before she did it. Still, I ended up in hospital.'* This participant gave the impression that she would be capable of caring for herself. Her life was one of parental abandonment as a young child with her father incarcerated, witnessing domestic violence, and repeated abusive relationships (*'75-80% of my relationships have been abusive'*). And of self-blame for all of it. She stated that she has a severe alcohol problem. Alcohol and drugs helped her to cope initially but no longer helped. *'I have severe abandonment issues, and that's a way (abusive partners) to get*

to me.’ Regarding abusive relationships, she said, *‘It can get real ugly...I try not to get into those situations anymore.’* She still carries a firearm, *‘just in case.’* Note: most U.S. states allow individuals to legally own and carry handguns with or without a permit (license).

In addition to those participants who indicated that they had been threatened with death by a partner, others had been threatened with violence (n=14, 70%), and 17 (85%) had experienced physical violence. An overlap and layering of experience are reflected here. The rate of threats of death was queried by one participant who said, *‘They didn’t (verbally) threaten to kill me in words, but I knew that he would given the right circumstances. When he got angry, I never knew what he’d do...he’s hitting you; how do you know what’s the difference between trying to hurt me and killing me? It just takes one blow to do it...and I knew he had a gun’* (3218: W/F/33/Tennessee). The point here is that the threat to kill does not have to be verbal; it can be inferred just as effectively through demonstration (brandishing a weapon), abusive actions (physical abuse) and increased frequency or intensity of abuse.

Need to appease (n=16/80%).

‘Walking on eggshells.’ The need to appease is a common victim action used to attempt to control the perpetrator's moods or regulate their abusive behaviours. While it may appear to be an innocuous activity, it can be a source of extreme stress for the victim living in a state of high alert–hypervigilance—all the time (Johnson, 2008). Throughout the interviews, participants described the efforts of keeping ahead of the abuse perpetrator, anticipating their moods, attempting to arrest or de-escalate developing abuse episodes, and pandering to their every whim. This, at times, took constant vigilance and required considerable effort and actions that they would otherwise not have done. This includes making themselves available for sex, admonishing children for perceived or abuser imagined transgressions before the abuser did, and enduring isolation from friends and family; *‘anticipating the abuser’s moods’* was the most common action that described the exhaustive continuous mental and physical efforts to appease their partner. Great care had to be taken to ensure that the abusive partner did not notice this effort for what it was and that they felt that it was a genuine sign of

affection as opposed to protective behaviour by the victim. It had to appear genuine to avoid the abuser noticing it as appeasement and negating future efforts by the victim to placate them. This applied regardless of the gender of the perpetrator or victim (same-sex or opposite sex).

(3205: W/F/42/C5/Canada/North Miami) described how the children's father (now ex-husband) has taken her to the U.S. from Canada with a promise of citizenship. She was 18 and he was in his 30s. Initially, life was good, but as the children arrived, he never made good on his promise; instead, he held it over her head to control her. She learned the language of appeasement early on, realising that without her US immigration status and her husband's help, she could be deported at any time. She did everything she could to keep him interested in her and the children, but he got progressively abusive to her. He said that *'he could find someone better than me.'* He had no interest in the children and left all the household and family issues to her. She said that she pandered to him constantly, but to no avail. He berated her verbally and psychologically and left her *'feeling worthless.'* He threatened to leave and take the children with him. He was interested in other women. One day, he came home after quitting his job at a bank and said he was leaving her. He emptied the bank account and left. When she begged him to stay and asked him what she would do to pay the rent and feed the children, he told her bluntly to *'go (expletive) for it.'* She did revert to working as a sex worker as, due to her immigration status, she was unable to apply for social welfare help, and she had no other way of making money. She relied on her work and church charity to pay her bills. She found solace in relationships with women. *'I liked girls and boys from a young age.'* Her husband didn't like it when she told him that she was bisexual, as he said that it made him feel *'left out.'* She said that in her experience looking back over the previous 20 years, *'women who have been abused sometimes seek female partners as they are less threatening, are protective and more affectionate.'* She stated that she was more comfortable with a female partner.

Hispanic Participants: Participants from South America stated that their cultures were steeped in patriarchy and misogyny. (3212: H/F/26/Cuba-Mexico/Miami) stated, *'There's nothing subtle in societies where men have (public) opinions about women—how*

they look, what they wear, how 'sexy' they are and who believe that women are subservient to them. As a result, women fight back; there's nothing to gain through appeasement. My mother 'walked on eggshells?' (she laughed). 'No way. The only time was when she wanted something. It did nothing to stop the abuse.' They described that women's power came from more blatant actions, through fighting back, escalating psychological counter-abuse or withholding sex. For further discussion (See Research Findings 2. *Patriarchy, sexism and misogyny. Hispanic participants*).

Emotional/psychological abuse (n=20).

This subject became a topic of much conversation and some confusion for some participants, particularly Hispanic participants, for whom English was a second language. The concepts of gaslighting and coercive control were unfamiliar to many people unless they had encountered them in their professional training or IPA classes. The concepts of emotional abuse, psychological abuse, coercive control and gaslighting became blended. The Spanish translator told the researcher that there is no precise translation of 'gaslighting' (See Findings 1. Questionnaire: Question 23, item L) in Spanish. The understanding of 'psychological and emotional abuse' did, however, translate well. After consulting with the IPA-specialised Spanish translator, prior to the interviews, it was decided to provide a brief written overview that explained the concepts, and this proved to be very effective in assisting participants to clarify their understanding. A copy is provided in the Appendix, entitled 'Emotional, psychological abuse addendum.'

All participants, even the control, scored a 20/20 on the issue of experiencing emotional or psychological abuse on the questionnaire. There were varying levels of understanding of what this comprised (see previous paragraphs), which was addressed. It was an abuse type that was central to the abusive experience, the central tenet from which all other abuses pervaded. Gas-lighting—making someone question their reality, perception, or memories—was a key component of more severe forms of this abuse for those participants who understood what it meant under the term 'gaslighting.'

Gaslighting can be seen among participants even from an early age, many of whom (n=11), as children, were sexually abused. Phrases from participant narratives where they accepted the perpetrator's version of what happened to them as children suggest widespread gaslighting as demonstrated by, for example, the phrases, 'i admitted to being sexually abused' (3102: M/W/45-55/C2/Atlanta) or 'It was my fault,' (3217: W/F/33/North Carolina) 'i blame myself,' (3203: W/F/25-25/Atlanta) 'i was responsible' (3306: H/TW/55-65/Nicaragua/Miami), (3216: W/F/26/Ohio) insinuated self-blame through avoiding naming what happened to her other than to say that her father had abused her, '*he never touched my brothers.*'

This continued for some participants in their lives, where they then began to accept blame for the abuse they experienced as adults. (3203: W/F/25-25/Atlanta) stated that '*blaming myself for the abuse (i experienced) allows me to deal with.*' (3205: W/F/42/C5/Canada/ North Miami) said that she spent her life blaming herself for her abuse for 'allowing' it to happen. It was only when she was involved with the court system on child welfare issues that threatened the removal of her children that an advocate worked hard on her behalf to protect her children from removal. She received therapeutic help, '*(the advocate) got me to open up a lot. He made me realise that i'm worth something. Nobody had ever told me that before.*' She realised that her ex-husband had encouraged her to believe she was at fault for years, but over time, she stopped believing it. '*It took a lot of guts on my part to face him.*'

Many of those who had not been sexually abused but who were abused as children physically or mentally or as witnesses to domestic violence also blamed themselves for what happened to them (3217: W/F/North Carolina). Those who had been sexually abused were also abused in other ways, including participating in or being targeted by domestic violence in the form of parent-on-parent abuse or being targeted by siblings.

Coercive control (n=16)

An important element of this was discussed in the section above on emotional /psychological. It was a form of abuse experienced by 16 participants based on their

understanding of the explained components of coercive control, many of which are discussed separately (Kelly, 1988; Dobash & Dobash, 1992; Stark, 2007, p. 198).

Many of the abuse forms listed in the ‘abuse type experience chart’ (Question 23) fall under the guise of coercive control, a concept of abusive control. It describes subjection using a pattern of coercive and manipulative behaviours within the relationship. It is a term now used in many domestic violence courts to help victims identify what is happening to them. A more inclusive term than ‘domestic violence’, it provides a means for victims to identify IPA in their lives that they might otherwise miss. Coercive control as a descriptor casts a wide net (Kelly & Westmarland, 2016; Stark 2007, 2023; Hill, 2019).

The term itself was not always familiar to the participants; therefore, before the interviews, during the testing phase of questionnaire development, it was decided to include the term, along with listing coercive control components that the participants might be more familiar with. This proved to be an effective strategy.

Reviewing a summary list of emotional and psychological examples also assisted participants in verbalising their experiences by indicating which ones applied to them. For example, the following list was helpful for many in indicating their experiences.

Components and identifiers of coercive control may include a wide range of abusive behaviours (Lamothe, 2019; Stark, 2007). These behaviours often involve isolation from friends and family, coupled with financial control that tightly restricts the victim’s access to money, including their own funds. Verbal put-downs are commonly employed both within the home and in public settings, designed to embarrass the victim in front of others. Stalking extends the abuse by monitoring the victim’s movements, communications, and activities, either in person or through electronic devices. Coercive control may also manifest in the instigation and maintenance of an ongoing campaign of coercion against the victim, reinforced through tactics such as gaslighting (see section on gaslighting in appendix). Perpetrators may weaponise friends and children by telling them that the victim is responsible for relationship problems or is a bad parent. Sexual

coercion is also a component, expressed through demands for sexual gratification on demand, instigating sexual activity without consent (rape), and exposing the victim to abusive sexual activity. Additional forms of control include preventing the victim from working or leaving the home for extended periods, as well as monitoring their access to healthcare, food, medicine, and self-care activities. Finally, threats of harm directed at children or animals further entrench the victim's subjugation within the coercive relationship.

Consequential emotional abuse (CEA): Also discussed was an indirect type of emotional abuse experienced. In this researcher's book (Daly & Wright, 2017, pp. 11-13), an additional form of abuse is discussed, 'consequential emotional abuse' (CEA). The concept posits that all types of abuse produce emotional abuse as a consequence of being abused, regardless of how. It is a source of trauma that may last long after the abuse has stopped. It envelops the experience of abuse even when the goal or tools of the perpetrator do not consciously include psychological abuse. This is reflected in this sample, where all had stated that they had experienced psychological and emotional abuse. CEA is a cumulative invisible trauma source, as the victim may not be aware of what they are experiencing, yet the stress registers in their psyche. They may only be aware of the consequences in the form of struggling to deal with this source of trauma (ibid) or post-traumatic stress (Nikulina & Brumbaugh, 2024).

Financial Control (n=14)

Two participants (3102: W/M/45-55/C2/Atlanta) and (3220: W/F/45-55/C/2/North Carolina) could have been described as financially comfortable; they had reliable large sources of income. However, both recalled how their abusive partners controlled their money to the point that they ended up having little to spend and having to explain to their partner what they were spending their money on (See 3320's statement under 'All abuse types' above). I highlight these two participants as their financial status made the issue of control more transparent. The score under financial abuse in the questionnaire indicated that 14 participants felt their finances were restricted. Participants who were poor or had high overheads due to having children may have had financial control

imposed due to a need to conserve cash, as opposed to a form of abuse. The abuse attribution of financial control was an issue of perception by the victim.

(3102: W/M/45-55/C2/Atlanta) recalled 'she (his partner) was pretty free with the purse strings. *Of course, we were both full-blown addicts, and crack cocaine cost a lot when you were using as much as we did. She just took over the money and only gave me cash when she wanted me to get more drugs.*' The researcher asked if there was anything that the participant could have done to stop this. He laughed, '*She scared me. She would fight with me, throw things at me, and she attacked me with an axe once. It was easier to let her be (with my money) until it got to a point where I was afraid that she was going to kill me, and I called my family to come and rescue me, and I left.*'

(3217: W/F/33/North Carolina) stated that her biggest mistake was moving in with their boyfriend. She said that he was driven 'insane' at her bisexuality. Once together, he began to control many aspects of her life under the guise of 'caring,' including her money. It started small; he insisted that they split bills, which was a change from before she moved in, when he had said he would pay. '*Then he began to charge me for costs associated with 'our house' even though it was his (expletive) house. He decided we needed to 'save money,' so he would take part of my pay and put it into 'savings.'* When I left him, I never got that money back; he insisted that I owed him money when I moved out, so I paid him to get free.' The net result became that he made her dependent upon him financially, and it became a form of imprisonment, and she had to ask for her own money to go shopping. She described it as a shrinking net that was strangling her.

Stalking (n=15)

75% of the participants (n=15) described how their partners stalked them. Some did not attribute the term stalking to their abusive experiences, describing it as 'controlling behaviours.' For many, they described it as a near-obsessive behaviour on the part of their abusive partners. Participants attributed much to their bisexuality and the fear of their partners that they would cheat on them; jealousy was a predominant factor. Stalking took the form of electronic surveillance of the participant's phone, texts, emails and social media accounts. Finding or suspecting tracking devices in their cars or

possessions was common (Air Tags, for example). It included constant texting and calls demanding their location, who they were with, photographs to prove where they were, and demanding to know what time they would return, as described by many participants.

(3201: W/F/35-35/C1/Seattle) described how, even though she was not in a relationship with her daughter's father, he harassed her constantly. He even got his current girlfriend to participate. They would harass her at work, write negative comments on her work reviews and social media accounts, and file complaints against her with her employers. He filed cases against her in court to get complete custody of their daughter. He would hire attorneys who would make claims in court that she was an unfit mother. *'He drove me to the edge of sanity. I couldn't afford to fight back as I didn't have the money for a lawyer. It only slowed down when I got some free legal help, and I went to court to the judge ordered them both to stop.'*

(3102: W/M/45-55/C2/Atlanta) described how his girlfriend insisted he be with her all the time. Any time he left the apartment, she would track his phone and demand that he checks in with if she perceived that he was delayed in returning. *'She also kept an eye on my email and texts.'*

(3203: W/F/25-35/Atlanta) described how women she dated: *'They're able to control me (because I let them).'* This included stalking her by following her phone location. She attributed this to her long-held abandonment issues from childhood. She also credited the controlling behaviour to jealousy on her partner's part and anxiety of her cheating on them.

(3205: W/F/42/C5/North Miami). *'My ex controlled me absolutely. I was young and didn't know better. He promised to get me my Green Card (permanent resident visa for the U.S.) but in all the years he never did. He would dangle it over me.'* Without it, she could not work in the US and lived in fear of being pulled over by the police and deported. *'He controlled everything, the money because I couldn't work and gave me*

just enough for food for the family. He didn't need to stalk me in the sense you describe because he knew I couldn't go anywhere. He knew where I was all the time.'

(3209: H/F/45-55/C1/Cuba/Miami) *'My ex stalked me by cloning my cell phone. Before I figured out what he was doing I had no idea how he got information about me but he had access to all of my calls, voice mails, texts—everything.'* My friend eventually warned me what was happening and it ended when I left him and changed my phone.

(3212: H/F/26/Cuba-Mexico/Miami) recalled how her partner's abusive behaviour would ramp up when she went out socially without him. She attributed this to her bisexuality, to fear on his part that she was cheating on him. *'He called me constantly when I was out; when I got back, there would be a huge argument.'*

Threats of 'outing.' (n=10)

Outing describes the threat by the abusive partner of revealing information about the participant's sexuality to their family, friends or employer with the intent of causing them harm. 50% (n=10) of participants said this was a factor in their relationships. The threat of an outing caused a more severe fear of consequences for some participants than others; some did not care. It was not a significant issue for much discussion during the interview, except that it was noted on the questionnaire. It was an issue for participants from more religiously conservative families, and some Hispanic communities where being outed as gay or bisexual would have allowed them to be targeted for abuse.

(3206: H/TW/55-65/Nicaragua/Miami) *'Being outed was a big fear for me. Remember that I grew up in a time and place (Nicaragua) where being gay was not at all accepted and the subject of rejection and (public) ridicule.'* She laughed, remembering, *'And I'm a bisexual trans woman!'*

(3217: W/F/33/North Carolina). *'I never cared about being outed. I never made it a secret that I like boys and girls. My brothers gave me (expletive) when I was a teenager as the younger sister, and my mom told me that I needed to 'pick a side.' I didn't care.'* She did

emphasise that she has found having to hide her bisexuality socially within her LGBT+ groups stressful and a strain on her mental health.

Threats of (n=14) and physical violence (n=17)

85% of participants recalled physical abuse, ranging from minor injuries to a need for hospitalisation.

(3220: W/F/C2/45-55/Atlanta) She recalled that during her decades-long relationship with her partner, the threat of physical violence was ever-present. He considered himself a martial arts expert, and he would assault her under the guise of teaching her to be ready if she were ever assaulted in public. *'He knew exactly what he was doing. I was terrified when he was in a bad mood because this is when he would do this. He would wait for me, jump out from a hiding place and pin me against the wall. I never knew if he was going to let me go, and he hurt me.'* She said that if she protested, he would laugh it off. *'Plus, our home was full of guns and the insinuation (threat of harm) that went with that.'*

(3201: W/F/35-45/C1/Seattle) *'I had a relationship with a woman who owned a club on a Caribbean island. She and I got into an (physical) argument (more than once), and it continued to the point that she beat the crap out of me (in public). Nobody stopped it or called the police.'* She stated that this was part of a pattern of abuse against her, but that she was very much in love with her partner. Regarding the public beating she received outside the club, she described the lack of intervention by the people regarding it as a 'catfight,' with sexual connotations attached to it as opposed to IPA. It was not seen, she thought, as an act of abuse by onlookers but as *'two gals fighting.'* The threats of further physical violence made her leave the relationship, although she hoped that she might see the woman again if things could be different.

(3313: B/TW/25-35/Miami) *'Physical violence is part of my life. In the gay (male) community it's normal behaviour; few think anything of it. As a trans woman, I get beaten all the time.'* This participant went on to say that this had been a life-long experience.

(3210: H/F/55-65/Nicaragua/Miami/TR Spanish). This participant was so traumatised from her life of abuse, particularly her exposure to physical and sexual abuse, that she found it difficult to discuss it. The translator was empathetic and supportive of her, but the researcher stopped this element of the interview discussion.

(3306: H/TW/55-65/Nicaragua/Miami) *'I keep pictures of my injuries on my phone so I won't forget what happened. I thought that violence was part of life itself,'* she said. She said that she had experienced physical violence from men and women. She now avoids long-term relationships to avoid abuse.

7. Participant's poor understanding of what constitutes IPA.

A recurring theme throughout the survey was the lack of understanding among participants as to what constituted 'domestic violence' and 'intimate partner abuse.' Most participants stated that their early understanding of these phenomena was that it was a behaviour that they attributed exclusively to heterosexuals. Within that framework of understanding, 'abuse' was most often defined as physical violence or assault, typically a man hitting a woman.

There was little understanding of this abuse as human behaviour, one that bridges all sexual or gender boundaries and cultures. It was difficult for them to understand how it related to them as bisexuals or to the LGBT+ community. Violence and other forms of abuse were regarded as 'normal' within their given community (Cruz, 2003, p. 310). They felt that the language of abuse did not apply to them. For many, this changed through exposure to educational programmes from LGBT+ advocacies, medical facilities where they sought treatment for injuries, the legal system and friends who took the time to explain that what they were experiencing fell outside of normal behaviour. The following excerpts from narratives follow the numerical order of the participants primarily because all relate to the lack of understanding of how IPA applies to them.

(3201: W/F/35-45/Seattle). Stated that she had no understanding of the behaviours that she was experiencing from her daughter's father since her birth over 14 years (she got pregnant when raped while intoxicated) was abnormal. It was only when she spoke to an IPA

advocate that she realised what she was experiencing was systematic and targeted abuse. Her daughter, too, was victimised and used a weapon by her father against her mother. She did not recognise or relate to the stereotypical understanding of what constitutes abuse, as the father was not living with her. *'How can it fit? It's not 'domestic' as he doesn't live with me and it's not 'partner' for the same reason.'* It has taken a lot of counselling to repair the damage that has been done to her by a perpetrator who has blamed her for everything negative that he has done to her. *'It needs to be explained better to the public,'* she said, *'with some real-life examples for us outliers.'*

Note: This was a common observation on the importance of language. Many participants stated that they do not identify with the words 'domestic violence' as their experiences do not match their stereotypical understanding of the term. Their living arrangements may not be seen as 'domestic' or their experiences 'violent.' Even if their experience is violence, it is negated by the term 'domestic' as not applying to them.

(3202: W/M/45-55/C2/Atlanta). His experience of abuse started very young with a father who believed in the adage 'spare the rod, spoil the child.' He did not understand the terminology of abuse or how it applied to him until he attended therapy. *'I was physically and psychologically abused by my father. My mother let him do it – she never got involved because he would hit her, too. Then, I was sexually abused as a child and as a teen. By my early 20s, I was addicted to alcohol and cocaine, living with a woman who beat the (expletive) out of me if I didn't give her money or get her drugs. I had no idea what was happening or that there was a form to the behaviours that I had experienced.'* It took years of therapy and interventions for the participant to understand how the language and terminology of intimate partner abuse and domestic violence applied to his life as a bisexual. Once he began to understand it, it provided a framework for recovery and to attempt to avoid getting into destructive relationships again.

(3203: W/F/35-35/Atlanta) made no bones about how she thought that abusive relationships were just how relationships were meant to be. Abandoned from a young age by her parents, she lived with grandparents for whom fighting and arguing were everyday events. Other than her family, she had no frame of reference to provide context to what she was

experiencing. She attributed this to a lack of knowledge about how descriptions of domestic violence or IPA applied to her experience, attributing it exclusively to a married heterosexual couple's experience. That did not translate at all to her experience of bisexual relationships within the LGB+ communities. *'75-80% of my relationships have been abusive,'* she said. *'I didn't know any better until I tried going to therapy which I found too heterosexual for my liking as a lesbian and a bisexual. It did help me understand what was happening to me, that the terminology of IPA applied to relationships outside of heterosexuals.'* She said that even with this late arrival of knowledge she has a lot of work to do to recover from the abuse that she experienced. She said that having the information about abuse in relationships in the family and romantic partners from an earlier age might have made her life different.

(3205: W/F/C5/Canada/North Miami). In referring to her lack of understanding of abusive relationships when she was younger, she said *'How can you know what you don't know?'* She was abused as a child and throughout her adulthood. She did not attribute her abuse to being bisexual. She attributed it to being manipulated and abandoned by her husband. She said that while she thought that what she was experiencing was abuse it was not until she was older and had been seeing a therapist that she came to the realisation that what she experienced fit within the definitions of IPA and domestic violence. *'When you're in it,'* she said, *'you're in it. It's too late to learn to swim when you're drowning.'* She said that she now teaches her children about IPA, as they had witnessed how their father treated their mother as they grew up. She felt that it is vital to expose children to the language and understanding of IPA from an early age to be prepared as they mature. She does not want her children to go through what she has gone through. *'I'm not saying that not knowing (about IPA) caused my life to turn out the way it did, but not knowing didn't help.'*

(3206: H/TW/55-65/Nicaragua/Miami). This participant was one of two trans-women interviewed. She works providing therapeutic services to LGBT+ victims of IPA. She felt that a lack of understanding of what constitutes IPA in the LGBT+ communities contributes greatly to the proliferation of IPA within the LGBT+ communities. On a personal level, she said, *'a professional knowledge of IPA does not equate to a knowledge of IPA in my personal life.'* She said that her first realisation that she has been a lifelong victim of IPA was from watching YouTube videos. It took her a long time to realise that what she was learning and teaching to

clients applied to her too. She attributed this to allowing her emotions to normalise abuse in her relationships. *'I thought that violence was part of life itself.'* She also said that a need for love allowed her to *'put up with the abuse.'* She made excuses to herself that what she was experiencing could not be abuse, even though as her knowledge of IPA increased, she began to realise that it was. She also said that the LGBT+ acronym distracts from the needs of bisexuals where IPA is concerned. *'we're always included (in LGT+ IPA studies) but rarely studied as a group or individuals (bisexuals).'*

(3207: H/F/25-35/Peru/Miami/TR Spanish) plainly stated that it never occurred to her that, as a bisexual, the language of abuse applied to her. She also said that she did not know the high levels of IPA among bisexuals until she started attending a support group.

(3208: H/F/18-25/Venezuela/Miami/TR Spanish). This female participant was in her early 20s and stated that she knew nothing about IPA or the bisexual community. She said that she grew up in a misogynistic Hispanic culture of men abusing women. Anything she now knows she only became aware of by living in the U.S.

(3209: H/F/45-55/C1/Cuba/Miami). She stated that more information about IPA is urgently needed to be presented in a way that bisexuals and the LGT+ community members can identify with as applying to them. She added to this by advising that more information is also needed about bisexuals and bisexuality in general.

(3111: H/M/55-65/Puerto Rico/Miami) echoed the need for bisexual-specific IPA knowledge and education.

(3212: H/F/26/Cuba-Mexico/Miami) stated that she had no knowledge of IPA or IPA within the bisexual community until recently. She said that growing up, she thought that seeing bruises on her mother's arms, inflicted by her father, was normal because her parent fought a lot. She said that in her experience, IPA was 'normal' in the Hispanic culture. *'there's a lot of fighting in relationships,'* she said, and wondered how information about IPA would or could have made a difference in a culture such as this. In her experience, she stated that LGBT+ victim support concentrates too much on 'theoretical issues' of power and control while

ignoring the knowledge of abuse tactics and specifics of coercion. She suggested that bisexuals and LGT+ victims might associate more with IPA if they were advised about the tactics that comprise IPA and where—in the family, as children and in relationships. In addition, she advised that more tangible data about IPA in the bisexual community needs to be written simply so a wider audience can understand it as a bisexual and LGT+ issue as one exclusively attributed to heterosexuals. *‘I need to hear other people’s stories so that I can relate to them and understand.’*

(3216: W/F/26/Ohio) stated that a lack of information about what constitutes IPA contributes to its continued existence. She suggested information about it be included in school curricula for the ages of 10 and up. Referring to her own experience of abuse as a bisexual and her unawareness of how IPA and IPA terminology applied to her, she said, *‘If I knew that I wasn’t the only one out there (experiencing IPA), things could have been better for me.’*

(3218: W/F/33/Tennessee) stated that prior to the interview she was unaware of the extent of IPA in the bisexual community but that she was not surprised. In her own relationships, even though she lacked knowledge about IPA, she noticed patterns in her abusive partner's behaviours. As she has learned more about IPA, she said that she can now see how the patterns fit into her knowledge of what abuse it. She said that more is needed to bring the ‘language of abuse’ to bisexuals so that they can protect themselves from abuse.

8. Barriers to receiving help from abuse. (Also see Question 38 in Research Findings 1)
As can be seen from the section about the lack of understanding of what constitutes abuse, this lack of information about IPA is widespread (Turell et al., 2012, p. 292). As a result, when asked about barriers to receiving help from abuse, many participants had little context through which to answer this question. LGBT+ advocates (Duberli, 2020) state that the LGBT+ communities tend to take care of abuse issues within the community rather than involve outsiders. This is to avoid additional negative scrutiny of the communities by society. When help is needed outside of the LGBT+ communities, it is due to physical injury requiring medical attention, legal reasons (perpetrator is arrested for assault) or being brought into the legal

system for issues such as child welfare issues. Barriers, therefore, tend to be practical as opposed to bisexual-specific. Among those barriers provided by participants:

- Language barriers if English is a second language.
- Lack of knowledge of what helping resources are available (in the police, criminal justice and medical system) and their efficacy.
- Lack of understanding that they are (abuse) victims.
- Fear of judgement.
- Fear of arrest and deportation if in a country without legal status.
- Cultural issues—not wanting to bring attention to their family or community.
- Fear of losing their children to foster care if the victim is also accused of abuse due to a failure to protect them from the abuser.
- A lack of money to talk to a lawyer.
- Not having health insurance or money to pay for health care.
- A lack of knowledge of LGBT+-specific IPA agencies and resources.
- Out of fear or love, not wanting their abusive partner to be arrested.
- Not wanting to be targeted by the abuser's family or community if they (the perpetrator) are arrested.

9. Perpetrator behavioural observations from participants.

Perpetrators of intimate partner abuse (IPA) were not interviewed for this survey. Their behaviours are reflected in and captured from the participants' narratives. See Findings 4: IPA Perpetrator Data.

What is particularly interesting in reviewing these perceived behaviours is the emergence of repeating similar abusive methods, the similarity of perpetrator personalities, and the array of commonly used abusive tools (tactics) used against the participants. This pattern of similarity suggests that these behaviours might be predictable, at least on a macro level (see Research Question 4).

The wide diversity of the participant sample lends credibility to the observation of similar perpetrator behaviours. This similarity of perpetrator behaviours and abuse methods

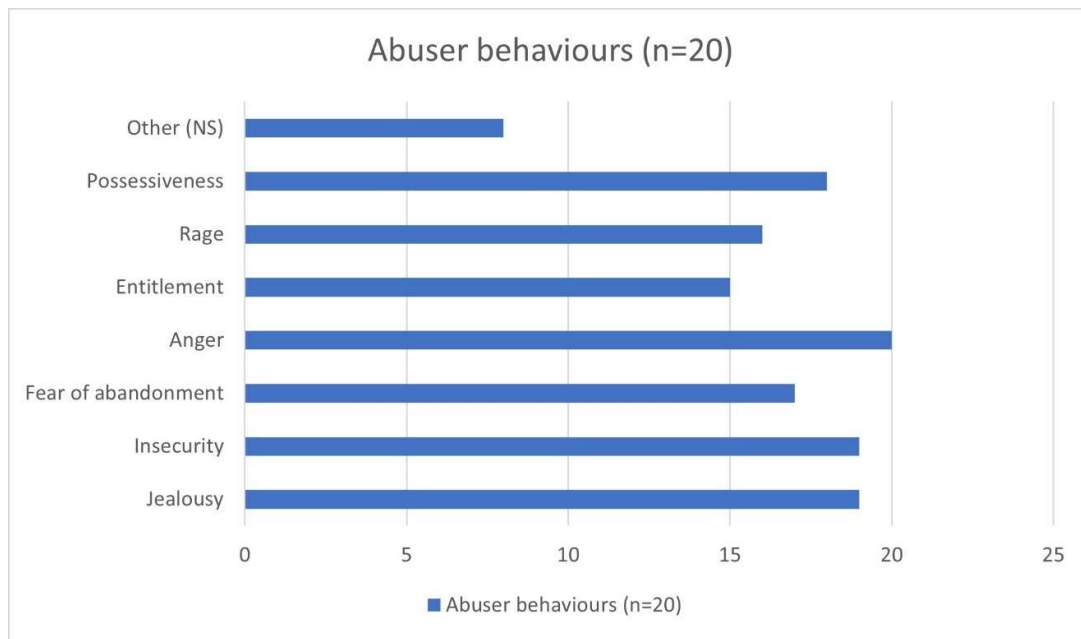
is reflected in the literature, including Dutton (2006) and Walker (1979. Hill (2019), Stark (2007), and this researcher's professional career working with victims of domestic violence.

The psychological components of perpetrator motivation are not the subject of this thesis and should be addressed in future research, which examines perpetrators from a psychological perspective. Many existing research papers point to the complexity of understanding IPA perpetrators. This researcher believes that acknowledging the similarities in perpetrator behaviours as they are presented and how they employ methods of abuse may lead to a far simpler model of understanding them through the recognition of predictability. Abusers' weakness may lie in acknowledging their behavioural predictability and using that information to design a more effective means of anticipating and responding to IPA (see 'IPA perpetration chart' in the Appendix and the end of the Discussion).

Common behavioural observations. Reflecting the literature in describing domestic violence (Huecker, King, Jordan et al. 2023), participants described various motivations behind perpetrators' abusive behaviours. They recall overt and covert methods of abuse; some only observed in hindsight when they had left the relationship or become aware that what they were experiencing was not normal. They describe an array of abusive behaviours that ranged from rape to physical abuse, coercive control, psychological abuse and stalking. Power over and control of the participants was a central component of the perpetrator's abuse. Please see the attached 'IPA perpetration flowchart' to see how these behaviours and methods were manifested. These observations manifestations apply to same-sex and opposite-sex relationships based on the data provided by the sample participants. It is also supported by the literature (Donovan & Hester, 2014; Stark, 2007, 2023). The primary perpetrators were male, although many participants described abuse by female partners. Physical abuse (violence) was mainly attributed to male perpetrators, while female perpetrators were described as primarily emotionally/psychologically abusive toward male and female partners.

Abuser behavioural observations.

As can be seen in Findings 1 (Question 27) and repeated in the following chart, the participants described the following behaviours in their abuse perpetrators.



(Figure 54) Abuser behaviours.

All the participants, except the control, readily identified these emotions. All scored near 100% in frequency. Some emotions were regarded as the same (anger/rage), (fear of abandonment/insecurity), hence the slight variance in the count. The near totality of the sample's experience with all these abusive behaviours, combined with the broad diversity of the participant sample, provides support for the emerging belief that abusers have far more in common across cultures (Javier et al., 2018; Hill, 2019). Participants in discussing anger and rage understood them as separate states; rage was regarded as episodic, reactive, explosive and instrumental, while anger is an underlying aggressive emotion. Fear of abandonment was understood as a psychological state of insecurity, typically revealed verbally by the perpetrator to the victim in a moment of intimacy, *'Don't ever leave me,'* or anger, *'I'll kill myself if you leave.'*

Participants described how they first experienced these behaviours. Some state an immediate engagement of abuse by the perpetrator. Others describe a 'slow boil' as the perpetrators disguised their tactics under the guise of love and demonstrating caring for the participant. Many describe repeated abusive engagement with abusive partners and did not understand why. Others, particularly as their understanding of IPA developed, learned to leave

relationships as soon as they saw the abusive patterns emerge (3219/W/F/38/Ireland/New York City).

Participant victim responses.

As can be seen in this chapter, the participants' responses to IPA ran the gamut of behaviours, including leaving the relationship, adapting to the abuser's behaviours, accommodating the abuser's behaviours, harm from physical injury, developing trauma responses, developing mental health issues, developing or advancing alcohol and drug addictions and others. For further discussion, please refer to the Appendix: Towards Prevention, *Dynamics of IPA chart*.

Patriarchy, sexism and misogyny. Hispanic participants.

Hispanic participants referred to their experiences of blatant patriarchy, sexism and misogyny in their societies when they were growing up in their countries of origin. Men filled a dominant role, and women were expected to be subservient. This system enforced and illustrated the application of power and control over IPA victims. What is described by the Hispanic participants is not unique to Hispanic culture. A global phenomenon, what is described is present in almost all societies. Its expression and intensity vary across cultures tempered by history, politics and location, being more overt in some countries than others (Hill, 2019).

Patriarchy, sexism and misogyny describe an interwoven social system that enforces the concept of men's dominance over women (Walby, 1990). Patriarchy describes the structure that formalises, institutionalises and maintains men's power and status in society. Sexism describes the supporting belief system that justifies this concept by compelling women into submissive gender roles. Misogyny enforces it through the application of punishment or shaming towards those who challenge male dominance (Manne, 2018; Walby, 1990).

(See discussion on patriarchy (Walby, 1990) and Connell, 1995) in the Intimate Partner Abuse chapter: Introduction.)

This system of domination complements the application of power over and control of partners by an abusive partner in the Western model, describing what is present in many abusive relationships (Dobash & Dobash, 1979). This patriarchal system was readily apparent

in mainstream UK society 40 years ago, and many would argue that it still is, albeit generally more covertly. In some communities, it is more apparent. It could be argued that in many U.S. states, we see a mainstream philosophy of contradictory 'devolving' patriarchy where we see women's 'progress' in many areas of society (income, professional roles, political representation for example) while being slapped down in others depending on the political climate in which they live (women's reproductive rights being criminalised, for example) (Gupta, Madabushi & Gupta, 2023). Walby (2011) argues that patriarchy has not disappeared but that it has adapted and evolved to fit modern society.

Women fighting back was described as reactive in most cases from the participants' perspective (Johnson, 2008). Withholding sex as an effective reactive response is seen as a defensive (offensive?) tool in many cultures, not just Hispanic. It can also be a tactic used for abuse. The literature is replete with stories of victims fighting back, which sometimes can belie the abuse, but often plays into the abuser's hands. It can amplify the abuse exponentially, even to the point of serious injury or death. Fighting back in whatever form is an instinctive response to a perceived threat. The abuser can use the victims' fighting back to justify their abuse, framing the victim's resistance as aggression or instability to deflect responsibility onto the victim and maintain control (Stark, 2007). Deflection also serves, if police or the court system are involved, to switch roles for the abuser to that of the victim, particularly if visible injury marks are evident and recorded (ibid; Dobash & Dobash, 2004). The participants' narratives reflected these experiences, both in their own lives and in observing their parents' relationships.

See also Research Findings 2: *The Need to Appease*. Last paragraph '*Participants from South America...*'

Summary

This chapter presented the primary themes emerging from participant interviews. It highlights the frequency of childhood abuse, experiences of sexual abuse and rape, and the persistence of adult victimisation. It examined issues of bisexual invisibility, the absence of identity recognition outside of peer networks, and participants' limited understanding of what constitutes intimate partner abuse. The analysis also explored barriers to help-seeking, the intensity and range of abusive behaviours, and key perpetrator tactics including coercive

control, financial abuse, stalking, threats of outing, and physical violence. Observations of common perpetrator behaviours, alongside participant responses such as appeasement and survival strategies, were reviewed. The chapter concluded with reflections on broader structural influences, including patriarchy, sexism, and misogyny, with particular reference to Hispanic participants. These findings provide critical insight into both the personal and social dimensions of bisexual IPA.

10. RESEARCH FINDINGS/RESULTS 3: IPA PERPETRATOR DATA

This chapter explores participant accounts of IPA perpetrators, identifying consistent patterns of abusive behaviour across contexts. It highlights the challenges of perpetrator-focused research while underscoring its importance for understanding bisexual intimate partner abuse.

Introduction

It is hoped that the perpetrator data presented throughout this thesis will inform future research into IPA perpetration. The topic of perpetrators could be the subject of a PhD in itself, and it is undoubtedly an issue that warrants urgent additional investigation in research. Data gathered about perpetrators is reflected throughout the thesis. This brief section will discuss the importance of perpetrator research, highlight key points from participants about perpetrators, and outline considerations and observations relevant to future research.

As has been stated, no perpetrators were interviewed. Any information about perpetrators was garnered as related by the participants and supplemented with data from the literature and other research Bancroft (2003); Cunha et al., (2022); Donovan & Barnes (2020); Donovan & Hester (2014); Eckhardt (2006); Harsey (2017); Head (2020); Hester (2013); Hill (2019); Johnson (2008); Kelly (1988); Mandel et al. (2021); Romans et al., (2000); Stark (2007, 2023) and others.

Why perpetrator research?

No research into IPA is complete without including data on perpetrators. Understanding their motivations and behaviours is a key to protecting victims. Understanding these factors ensures that prevention programs, legal protections, and support services are inclusive and tailored to the specific needs of bisexual and LGT+ individuals, with aim of reducing both victimisation and recidivism (Edwards et al., 2013, 2015). This researcher argues that an effective teaching module that clearly and simply explains the behaviours of perpetrators and the perpetration process is an essential component toward prevention (see the Discussion Chapter: *Dynamics of IPA* chart).

Rather than repeat what has already been discussed, the reader is referred to other sections where perpetrators are discussed. Participants' experiences with perpetrators are well-documented in Findings 1, 2, and 3. Data from secondary research is cited and well-referenced throughout this thesis, particularly in the chapter on Intimate Partner Abuse.

Participants in this survey also acknowledged perpetrator behaviours as predatory and manipulative (Bancroft, 2002; Stark, 2007, 2023; Johnson, 2008; Hill, 2019). Their goal is to control not only their victims but also others in society with whom they come into contact, thereby shining a positive light on themselves (ibid). This is reflected in legal systems, psychology communities, child welfare communities and a public that tends to blame victims for their predicament while trying to 'understand' the motivations and causes of perpetrator behaviours (Gordon, 1988; Kelly, 2013; Stark, 2023). More research is needed on this subject.

Perpetrators are typically invisible in IPA studies (Stark, 2023, pp. 32-38); IPA research tends to focus on the victims, particularly female victims (mothers), especially where children are involved (Stark, 2023, pp. 52-56). Where children are abused directly or as witnesses (participants) to IPA, it is generally the mothers who are held accountable under the auspices of 'failure to protect,' not the male perpetrator (ibid). The perpetrators are rarely found in academic, legal or case histories of child abuse. Instead, women are often held responsible and accused of collusion in the abuse of their children (ibid.; Gordon, 1988).

Perpetrators of abuse are often guilty of criminal acts. Until 2015, only physical abuse and violence fell under the umbrella of criminality. With the recognition within the court systems of the insidious malignancy of coercive control, which is now determined to be prosecutable as criminal behaviour in the Serious Crime Act 2015 (CPA, 2023), the recognition of IPA as a range of criminal behaviours has expanded. For this reason, it is challenging to include perpetrators in research because their participation and the revelation and admission of IPA behaviours could result in further or expanded criminal charges, if not now but certainly in the future as the recognition and definition of IPA matures.

Key points of participant experience with perpetrators

Reflecting the literature in describing domestic violence (Huecker, King, Jordan et al., 2023), participants described various motivations behind perpetrators' abusive behaviours. They recall overt and covert methods of abuse; some only observed in hindsight when they had left the relationship or become aware that what they were experiencing was not normal. They describe an array of abusive behaviours that ranged from rape to physical abuse, coercive control, psychological abuse and stalking. Power over and control of the participants was a central component of the perpetrator's abuse. These observation manifestations appear to apply to same-sex and opposite-sex relationships based on the data provided by the sample participants (Stark, 2007, 2023).

Participants described how they first experienced these behaviours. Some state an immediate engagement of abuse by the perpetrator. Others describe a 'slow boil' as the perpetrators disguised their tactics under the guise of love and demonstrating caring for the participant. Many describe repeated abusive engagement with abusive partners and do not understand why. Others, particularly as their understanding of IPA developed, learned to leave relationships as soon as they saw the abusive patterns emerge (3219: W/F/38/Ireland/New York City). Many participants questioned how they seemed to attract abusive partners; some were open to the suggestion that they do not seek to be abused or to attract abusers, but rather that abusers recognise vulnerabilities and target them.

Perpetrator similarity of behaviours

What is particularly interesting in reviewing the perpetrator behaviours as recalled by the participants is the emergence of repeating similar abusive methods, the similarity of perpetrator personalities, and the array of commonly used abusive tools (tactics) used against the participants.

The wide diversity of the participant sample adds credibility to the observation of the similarity of perpetrator behaviours. This similarity of perpetrator behaviours and abuse methods is reflected in the literature, including Dutton (2006), Walker (1979), Hill (2019), Stark (2007) and this researcher's professional career working with victims of domestic violence.

Many existing research papers point to the complexity of understanding IPA perpetrators. This researcher believes that it is important to acknowledge the similarities, patterns and thus predictability of perpetrator behaviours as they are presented. Abuser's weakness may lie in acknowledging their behavioural predictability and using that information to design a more effective means of anticipating and responding to IPA by designing programmes that highlight this.

Barriers to researching IPA perpetrators

Primary research on perpetrators of IPA presents significant challenges due to the complexity of their actions and behaviours, as well as ethical concerns and social stigma. Difficulties in engaging with this population include, for example:

1. An unwillingness of perpetrators to participate in research.

Perpetrators of domestic violence might be unwilling to participate in research studies due to the risk of legal consequences, social stigma, or shame associated with their actions (Henning & Holdford, 2006). Discussion of their actions could (advertently or inadvertently) result in criminal charges being brought against them. Few representing attorneys would approve of allowing their perpetrator client to discuss their actions in research.

2. Limited access to IPA perpetrator populations.

The settings where IPA perpetrators are recruited may produce results that do not represent perpetrators in the general population. These settings include correctional facilities and clinical or group support settings (Stover & Lent, 2014).

3. Perpetrator self-justification and denial.

Perpetrators frequently engage in self-justification, denial, or minimisation of their abusive behaviours, blaming circumstances or the victim for what they have done (Dutton & Golant, 2008).

4. Diversity of perpetrators and their behaviours.

IPA perpetrators are not a homogeneous group. Their attributed behaviours, motivations, personalities and psychological profiles can vary widely (Johnson, 2008). This may make the design and process of researching this group difficult.

5. Ethical and safety concerns.

Researching IPA perpetrators highlights significant ethical and safety concerns for the researcher and the victims. From a researcher's perspective, there is a possible danger from a violent perpetrator. Researchers must consider the potential for validating the perpetrator's behaviours by providing a forum for perpetrators to justify their actions. Most importantly, there is the risk of re-traumatising the victim (Ferraro, 2017). Care must be taken that the perpetrator is not manipulating the research, and the perpetrator is not using the interview to deny, justify, or distort IPA events (Herman, 1992). See Discussion: *Perpetrator's Data*.

Summary

This chapter examined participant accounts of IPA perpetrators, highlighting consistent patterns of abusive behaviours across diverse settings. It discussed the importance of perpetrator-focused research while recognising the barriers and challenges involved in gathering such data. Key participant experiences provided insights into both the similarities of perpetrator tactics and the obstacles to understanding them more fully. These findings contribute to a broader understanding of perpetration within bisexual IPA and underscore the need for continued research in this area.

11. FINDINGS/RESULTS 4: NEW KNOWLEDGE AND DATA SUMMARY

This chapter highlights the new knowledge emerging from the study, including the high prevalence of abuse, childhood trauma, and mental health challenges. It also addresses bisexual invisibility, discrimination, and identity erasure and reaffirms bisexuality as a valid sexual orientation.

Introduction

This chapter reviews key findings from the survey (as recorded in Findings/Results 1-3) and discusses new and confirmatory data about bisexual IPA. It serves to answer Research question 2: What new data has been gathered that adds to the knowledge about IPA in the bisexual community?

It may be argued that, given the limited research on bisexual IPA (Head, 2020), any primary study in this area contributes new knowledge and data. This is particularly true as most existing studies have relied on secondary sources. As discussed in this thesis, the only other example of primary research is Head & Milton (2014). Gathered data may also serve to confirm themes and conclusions in previous secondary research on bisexual IPA as well as in broader studies on sexuality. The data presented here are highlights of research findings, as well as those presented under Research Findings 1, 2, and 3. The following documents key new knowledge about this phenomenon as experienced by the survey participants. Where data is similar to that gathered about IPA findings in other research, academic references are included (items 5-10). It includes data gathered about lesbian and gay male IPA research.

1. The high range and intensity of abuse experienced by the participants.

As has been presented in Findings 1 and 2, the range of IPA experienced by the participant was extensive. This held true throughout the participant sample despite the broad demographics of the participants. This is discussed in the Methods section. What was not anticipated prior to the survey was the range of abusive and traumatic behaviours and experiences that all of the interviewed individuals had faced in their

lives. Many of these behaviours were commonly experienced despite cultural, racial, gender, ethnic and geographic differences.

2. The broad experience of childhood sexual abuse. One abuse type that emerged despite not being a question in the research was the extensive experience of sexual abuse as a child. 55% (11) of the participants had been raped or sexually abused as a child. The number may have been higher, with participants reluctant to discuss this issue. This topic was not a question in the questionnaire; rather, it was information volunteered by the participants. Eleven participants indicated that they were victims of rape (oral/intercourse) as children under the age of 14. Some were as young as eight when it began, and for many, it continued into their teenage years.

3. Extensive experience of rape

Lifetime experience of rape was experienced by 70% of participants (n=14), and sexual abuse (which may have included rape) was recorded by 85% (n=17). (see Findings 1, Question 23 '*Abuse type experienced*' chart).

4. Poor understanding of IPA and the terminology of abusive behaviours.

Of importance is the observation that most participants saw IPA as a heterosexual issue, not one experienced by bisexuals or members of the LGT+ communities. Further, a general theme throughout the data gathering (questionnaires and interviews) was a lack of understanding of what comprised IPA, and a general unfamiliarity with the terminology associated with it. Non-violent abuse was generally not recognised as abuse; it was rationalised as 'cultural,' 'normal,' and 'part of a normal relationship' (3212: H//26/Cuba-Mexico/Miami), also see (Cruz 2003, p. 310).

Exposure to abuse as a child also appears to have normalised the experience of violent and non-violent abuse experienced as teens and adults. Participants were provided with a description of the full range of abusive behaviours before the interview (see '*Foreword to Survey*' in the Appendix) to familiarise them with this issue of understanding IPA. Difficulty in understanding how it applied to their experiences of abuse had to be explained to some participants due to this lack of understanding.

Terminology for many was confusing, with poor understanding of differences between domestic violence, domestic abuse, violence vs physical abuse, sexual abuse vs rape, intimate partner (what defines this?), understanding of the concept of rape in a relationship/marriage, intimate partner abuse, and intimate partner violence, among others. As highlighted in previous studies, a broader, more straightforward, simpler language is needed to describe abuse (Head & Milton, 2014; Head, 2020).

5. Addiction to, or harmful use of, alcohol or drugs was a common theme for many perpetrators and victims of abuse. Confirms earlier findings by Burgard et al. (2005) and Kertzner et al. (2009) on observations of this subject in bisexual women.
6. High rates of mental health issues were a prevalent topic throughout the survey. Some of these were attributed to the stresses of living a bisexual life due to societal rejection, invisibility and discrimination, or a response to living with an abusive partner whether as a coping mechanism or use to appease the abuser ('companion user'), others to the effect of alcohol or drugs although it was difficult to ascertain if this was a response to mental health issues or a hallmark of 'lifestyle,' or to being susceptible to mental issues from a young age ('organic'). This confirms data from broader research into mental health issues in the LGBT+ communities (Taylor et al., 2019; Johnson, 2016; Mays & Cochran, 2001; Meyer, 2003)
7. Bisexual 'community.' It appears that bisexuals, unlike many other LGBT+ members, do not see themselves as a community. *'Unlike other LGT+ groups, not many people go around wearing a sign saying that they're bisexual...'* (3102: W/M/55/C2/Atlanta). Few participants spoke of bisexual people in any sense of community. Instead, their social setting 'community' reflected that of their current same-sex or opposite-sex partner. If they were with a same-sex partner, they identified as lesbian or gay. If they were with an opposite-sex partner, they identified as 'straight.' Much of this was attributed to avoiding the negative stereotypes against bisexual people that emanate from the LGT+ and heterosexual communities. This aligns with research from McGray et al. (2025).

8. Bisexual identity: social chameleons. *'I am who I am depending on who I'm with.'* (3217: W/F/33/North Carolina). Participants stated that they rarely disclosed their bisexuality publicly or within the LGBT+ community. Instead, they identify as part of the group they are with (gay male, lesbian, trans) or align with the identity of their romantic partner. *'If I'm in a lesbian bar I can get shunned (by identifying as bisexual) as not being 'gay enough'* (3216: W/F/26/Ohio) also (3204: B/F/29/C3/N Miami) (see 3. Below). *'There are too many negative stereotypes associated with identifying as bi; who needs it?'* (3203: W/M/45-55/C2/Atlanta). *'While I want to identify as bisexual, I face rejection as 'not being gay enough' when I am with lesbians. And with straight men, they sexualise me, assuming I'm open to anything (sexually).'* (3217: S/F/W/33). *'I don't mind telling people I'm bi. But it gets weird. Men go places sexually (wanting a threesome) that I haven't even thought of if I say I'm bi.'* (3204: B/F29/C3/North Miami). Participants reported that this is a common reaction from the heterosexual and LGT+ communities to bisexual identification. This reflects previous research by McLean (2018:77-93) and McGray et al. (2024:299).
9. Bisexual invisibility, erasure and discrimination. A 'behaviour.' Despite the numerical size of the bisexual population (Gates, 2011; Gallup, 2024), determined that the number of bisexuals is greater than the total of all the other LGT+ communities combined. According to the literature (Lindasusan, 2011), there is a preference in society to think of bisexuality as a behaviour as opposed to sexual orientation. This was reflected throughout the subject from participants and outside of it. In discussing my research with people (members of the 'public' not involved in the research) before the survey, some questioned or ridiculed the concept of bisexuality, *'it's just a phase college girls go through,'* one gay male associate stated, *'they become normal once they leave school and go on to have a regular family and babies.'* There was a commonly expressed and robust suggestive association of bisexuality with female promiscuity. A heterosexual male associate expressed disgust at the concept of bisexuality as 'unnatural' and against religious teaching. Others opined that bisexual people were 'try-sexuals,' who were 'open to anything sexual.' Participants stated that they experience discrimination and exclusion from the *'gay and straight communities'*, a theme that is prevalent throughout the literature on

bisexuality (ibid). Participants stated that in their experience, heterosexual and LGT+ individuals and groups regarded bisexual identification as invalid, that their bisexuality was *'a phase, a lifestyle choice, a behaviour, (sexual) experimentation.'* These are words that we have heard before, uttered by the heterosexual community when lesbians and gay men sought recognition in the 1980s (Herek, 1990). This aligns with research and reports from Lindasusan (2011) and Barker et al. (2012).

10. Bisexuality is an authentic sexual orientation. 'Bisexuality is real.'

All of the participants stated that their sexual identity was bisexual when they volunteered to participate in the survey. There was little ambiguity among participants that their bisexuality was/is their sexual/gender orientation and identity. One participant stated succinctly what many others stated. *'I am who I am. I'm a bisexual. Why are we (bisexuals) the only people who must constantly defend our sexual identities?'* (3217: W/F/33/ North Carolina). There was negative response to the use of the term 'behaviourally bisexual.' While it acknowledged that participants were indeed behaviourally bisexual, it tended to relegate it as a behaviour as opposed to a sexual orientation. This is confirmed by Yoshino (2000), who states that the term 'behaviourally bisexual' leans into a negative stereotype that attempts to deprive bisexuals of their identity by negatively labelling their sexuality exclusively as a sexual (and sexualised) behaviour. Reflects research by Yoshino, 2000.

Summary

This chapter highlighted the key new knowledge and data emerging from the study. Participants reported a wide range and intensity of abuse, including high levels of childhood sexual abuse and rape. Findings also revealed a poor understanding of IPA terminology, frequent links between abuse and substance use, and high rates of mental health challenges. Themes of bisexual invisibility, erasure, discrimination, and the absence of a cohesive bisexual community were noted, alongside the tendency for some participants to act as "social chameleons." Importantly, the research reaffirmed bisexuality as an authentic sexual orientation, countering narratives that dismiss it as a behaviour rather than a valid identity.

12. DISCUSSION

This chapter reflects on the value of the research, addressing key findings, participant experiences, and barriers faced by bisexual victims. It also considers implications for theory, policy, and practice, while directly answering the four research questions. In the previous Findings chapters, we reviewed the survey findings, including the questionnaire results (F1), the interviews (F2), and the interview notes (F3), as well as the research conclusions. This chapter reviews the entire project, including the issues and themes that have emerged, and presents the research conclusions. The Research Findings chapters include a threaded discussion of the results and conclusions. In this chapter, we will discuss how this research addresses the research questions, themes, and key observations, and how the research data can contribute to the development of theory, practice, and policy. Recommendations for future research will be presented.

Introduction

If we were to sum up the conclusion of this research project in one sentence, it would be this: Bisexuals comprise a diverse and expansive group of individuals with varied sexual and gender identities, many of whom have experienced multifocal Intimate Partner Abuse (IPA) from both within and outside the LGBT+ communities.

This study provides critical insights into the lives of bisexual individuals who have experienced IPA. The findings reveal intersections and links between childhood abuse and trauma, abuse as adults, the effects of bisexual identity invisibility, address potential barriers to seeking help and an in-depth look at perpetrator and victim experiences is discussed. This research contributes to the broader criminological and sociological discourse on IPA within bisexual and other marginalised communities. This thesis and all its findings are derived from a study of the bisexual experience of IPA. It is a fact-finding work designed to gather information about an under-researched population (Bermea et al., 2018; Head, 2020). As such, the data provided and the methods used in this research provide a foundation for future studies.

The value of this research

After reviewing the survey results, the question arises whether the findings were participant- or bisexual-specific. The answer, given that each participant met the research criteria (being bisexual and a victim of IPA) and that it is impossible to gather a representative, random sample to which to compare results (Owen & Burke, 2004, p. 131), is both. Conclusions are supported by observing patterns and similar findings from other, albeit limited, IPA research on bisexual individuals. Many findings are supported by Head & Milton's (2014) primary research, Head (2020) and conclusions from secondary research. In addition to the value of collected data bisexual and LGT+ specific research limitations and barriers were noted (see Methods) that were informed and confirmed by previous research including this researcher (Daly, 2020) for their MA thesis into IPA in the LGBT+ communities. Using this thesis data will, therefore, add value to the development of future bisexual IPA research.

Quality of interviews

Given this researcher's professional and academic history with intimate partner abuse, a conscious effort was made to avoid imparting previous knowledge into the survey process other than in the design of the questionnaire. This was aided by the lack of previous primary data research into bisexual IPA. There were no expectations as to what the survey would produce. Given the multifaceted nature of the topic under investigation, all data gathered was of value. The participants, except two (one trans woman and another woman who had had a lifetime of severe physical abuse), were enthusiastic in their involvement. Each interview lasted between 40 and 60 minutes, followed by an 'after time' conversation when the recording device was switched off before participants left the room. Notes from the interviews and the after-interview conversations can be viewed in the *Appendix: A Review of Interview Notes, Observations, and Post-Interview Conversations*. This researcher was surprised by the level of data gathered upon reviewing the survey after it was completed and analysed. The researcher defines 'quality' here as data of specific value as it relates to the subject of bisexual IPA as opposed to generalised data, for example, about LGBT+. This was due to two factors in the researcher's opinion:

1. The design and testing of the questionnaire design that was also used as a basis for the concurrent interview.
2. The level of rapport developed between the participants and the researcher.

Rapport

The rapport was formed because the survey followed the guidance provided by Barker et al. (2012) on writing about bisexuality and by Hale J (2009) about interviewing trans individuals and was adapted to fit the bisexual interview model (see a copy of Hale's guide in the Appendix). An initial level of trust was established with participants through the use of the snowball recruitment method, which allowed one participant to introduce the researcher to another via personal contacts, referrals, and word of mouth (Nikolopoulou, 2023). This added a level of trust between the participant and the researcher that might otherwise have been absent in a survey such as this. The researcher's professional 20-year background and training in investigative interviewing may also have been a factor. In recruitment, the emphasis was always on how the participant's involvement would help the researcher and the goal of developing an understanding of the bisexual community and IPA within it. Many participants expressed gratitude that this research was being done and, in doing so it gave them a voice and participation that they had never been previously offered. Any prior interviews on the subject that some had done were in the context of LGBT+, where they felt that they had to hide their bisexual experiences due to LGBT+ biphobia (Weiss, 2003). As can be seen from reviewing the Findings sections (1, 2, 3), the data gathered was comprehensive, far-reaching, and, for many participants, deeply personal.

Building rapport with participants/interviewees in IPA research is essential to ensuring ethical, reliable, and meaningful data collection (Liamputtong, 2007). Given the sensitive nature of the IPA experiences, victims may be reluctant to share their experiences unless they develop a sense of trust, empathy, and safety with the interviewer. Ellsberg & Heise (2005) inform us that discussing IPA experiences can be distressing for participants. If done incorrectly, it poses the risk of triggering past trauma (Campbell et al., 2010). Trauma-informed research practices, such as active listening (Herman, 1997) and allowing participants autonomy to determine their level of involvement, can help IPA participants feel safer and more in control during interviews (Rager, 2005; Liamputtong, 2007). As seen in this research's participants, cultural and intersectional sensitivity is important (Dickson-Swift et al., 2007). (For more information about this, please see Methods: *Interview style and format*.)

Key Findings

Introduction: This study casts a wide net, gathering new data about aspects of the subject that encompass participant experiences and hard-won data scraped from secondary research sources, addressing a subject that appears to lack research interest. Previous secondary research studies about bisexual IPA have been conducted (Breiding et al. 2013, p. 1, Messinger 2011; Coston, 2017; Brown, 2019; Walters et al., 2013), but only one comprised primary research (Head & Milton, 2014), whose research survey (n=10) examined bisexual IPA through a psychological lens. It was their research that sparked an interest in this subject for this researcher. That was the work of Head & Milton (2014). Their paper's approach to the subject set a starting point in bisexual research, which had previously been in a research desert, and established a base from which future studies could build. Dr Head, one of the research paper authors, provided a valuable updated contextualisation of the understanding of the dynamics of bisexual IPA in 2020 in her paper *Understanding Power Dynamics in Bisexual Intimate Partner Violence: Looking in the Gap* (Head, 2020, pp. 111-137).

For further information, please refer to the Introduction chapter, which includes a review of the research by Head & Milton (2014) and Head (2020) on primary research on bisexual IPA.

Sourcing bisexual IPA from secondary data. Entering this research, this researcher was under the (mistaken) impression that bisexual IPA research would be a topic already researched, given the implied widespread data available under the banner of LGBT+ IPA research. This proved not to be the case, as is well discussed in this thesis. Much time was spent early in the research process coming to the realisation that bisexual IPA has been ignored other than primary research by Head & Milton (2014) research and Head's (2020) important update on the subject. Secondary research appears presumptive and assumptive, given that much of it was derived from data sets not designed to measure bisexual IPA (see, for example, Caston, 2017; Messinger, 2011). Data scraped from LGBT+ IPA research under which bisexuals were subsumed also relied on other secondary data and added little to the understanding of bisexual IPA, see Ovenden, (2019); McLean, (2018, pp. 77-93); also see Johnson & Grove, 2017, pp. 438). In many LGBT+ research IPA studies, bisexuals were represented by few, if any, representative participants. One example of this is Ovenden's (2019, p. 8) survey 'Gay, Bisexual, Transgender, Intersex and Queer Men's Attitudes and Experiences of Intimate Partner

Violence and Sexual Assault’ which, despite bisexuals’ prominent position in the title, had little bisexual participant representation of 3.5% vs 90% of gay men. What minor bisexual data was presented in the study, and that was only on the risk of ‘outing,’ was sourced from Freedner et al. (2002). This highlights presumptive research by inferring that what appears true for one group applies to all. The value of this researcher’s thesis is that it will provide foundational research on bisexual IPA for future researchers who will not have to repeat this learning curve.

Much of what is known about bisexual IPA is derived from secondary research leading to a limited understanding of bisexual’s unique experiences. This type of research typically derives bisexual IPA data from analysis of data that was gathered about related subjects, for example, violence against women. The conclusions are based on assumptions from data not specifically gathered about bisexual IPA. There is value to some of the findings from secondary data however, for instance, the highlighting of high rates of sexual abuse against bisexual women (Messinger, 2011; Costson, 2017) who made determinations based on the *2010 National Violence Against Women Survey*. This 2010 survey did not have a category for bisexuals, so the research authors based their conclusion on two sources: women who happened to identify as bisexual in the report and women who did not identify as bisexual but who reported bisexual behaviours. These participants were then referred to as ‘behavioural bisexual’ (Messenger, 2011) or ‘non-monosexual’ (Coston, 2017). This researcher has an issue with these non-self-identifying categories as they are applied labels of convenience, drawing conclusions about reported behaviour and applying it to a group that does not identify as bisexual. Bisexual behaviour alone does not determine a person’s sexual orientation; instead, self-identification is the defining factor (Diamond, 2008). Indeed, many people vigorously reject their bisexual behaviour or experience being used to label them as bisexual (preferring to self-identify as gay, straight, or lesbian (Duberli, 2020; McGray et al. 2025). Including individuals in bisexual research without their consent risks conflating behaviours with identity, which can undermine the validity of the findings (Angelides, 2001). The value of their data to bisexual IPA knowledge is, in this researcher’s opinion, presumptive at best. It points to the need for new primary research in this area to capture the specific dynamics of IPA within the bisexual community. For further discussion, see the Introduction chapter: *Parameters: What this study is and what it is not*. And the Methods chapter: *Data Types*.

Bisexual research is subsumed into LGBT+ research.

Discussed throughout this thesis is the problem with including bisexual individuals in LGBT+ IPA research. Reflecting Ristock's (2011) guidance, research into the LGBT+ acronym should be undertaken on individual members of the acronym using a framework developed exclusively for their community. It is difficult to determine the value of broad stroke research under the LGBT+ acronym for individual members who end up not being research subjects. Too often, LGBT+ IPA research ends up just producing findings for lesbian and gay communities, with the insinuation that it applies to every acronym member, all given their implied inclusion in the research title. Many of these other communities, particularly bisexual individuals, have their individual experiences ignored, providing little value to the non-LG communities. Each community member group has specific research needs, and no one group can speak for another (Ristock, 2011; Alcott, 1991), a consideration that appears to be consistently overlooked in research labelled as LGBT+. In research, there appears to be an assumption that findings on IPA among lesbians and gay men will also apply to bisexual individuals (Head, 2020, p. 113). This researcher disagrees and calls for future research protocols to be developed that focus exclusively on bisexual IPA. It should be designed free from any influences or assumptions from heteronormative or LG+ IPA research. This will begin to fill the vacuum of knowledge about this important subject that may have consequences for other minority communities whose members identify as bisexual, particularly the trans community, which was represented (n=2) in this thesis survey. For further discussion, see the Introduction chapter: *Literature review: Why an embedded review?* Also see Introduction: *Bisexual IPA Research Restrictions*.

Poor participant understanding of IPA.

A recurring concern among the participants in this thesis research was the poor understanding of what constitutes IPA and the lack of awareness about its prevalence among bisexual individuals (McGray, 2025). A standard understanding from participants was that IPA was an exclusively heterosexual couple problem that involved physical violence. Those who did have some knowledge of how it affected the bisexual community learned it from seeking help for abuse through LGBT+ IPA resources, medical establishments or judicial processes when cases were prosecuted or a restraining order was sought. Any IPA training that participants received

outside of these settings was generally dismissed, as it was considered not applicable to them. For further discussion, see Research Findings 2. Interview Results: *Participant's poor understanding of what constitutes IPA.*

A need for better IPA training: A change in the mindset on how IPA is taught in the school system or through adult education is desperately needed to highlight that IPA happens in all communities, regardless of sexual orientation or gender identity, and that it comprises far more than physical violence (Stanley et al., 2015). A more intersectional, trauma-informed, culturally aware teaching model is needed, presented in a way that it can be quickly understood by as broad an audience as possible (Campbell, 2002). It is important to focus teaching on explaining the central role of power and control lensed through the dynamics of individual communities (Stark, 2007, 2023). The Duluth Power & Control Wheel (DAIP, 2024) is a commonly used teaching model. In discussing it with an instructor at a IPA support group (SP, 2024) they stated that in their experience, the Power & Control Wheel (ibid) is ineffective in properly communicating the reality of IPA particularly in LGBT+ audiences. They regarded the model as outdated, 'cluttered' (particularly the version adapted for LGBT+) and generally ineffective. *'It's used because it's a standardised model that's widely accepted, but in my experience, it's not effective,'* they said.

As part of their research into IPA and based on their professional experience, this researcher developed a new teaching model, drawing on Stark's (2007) coercive control model, which is presented in the Appendix: *Towards Prevention.*

Help-seeking by bisexual IPA victims. Social Safety

There are a few places that bisexual individuals can turn to for bisexual-specific help other than specialised mental health counselling (Yoshino, 2000; Monro, 2015). It is important to recognise that the broader LGT+ communities also lack IPA-specific resources (Turell et al., 2012, pp. 301-303), except in some urban areas (Russell, 2020).

Turell (ibid., p. 291) describes that most LGBT+ IPA victims seek help, not from community organisations, but from friends, personal networks or their therapist (Brown & Herman, 2015; Duberli, 2020). This is not an ideal response due to the inexperience of untrained individuals in dealing with such issues and the societal tendency to blame the victim

(Turell, 1995, as cited in Turell et al., 2012). However, it does fall within the framework of 'social support' (Gray et al, 2025; Diamond & Alley, 2022).

Diamond & Alley (2022) state that it is the absence of social safety and the benefits that it offers in the form of inclusion and social protections that is a leading cause of stress among LGBT+ individuals. This absence can detrimentally affect their mental and physical health. They argue that the need to belong, to be accepted in a social group, is a fundamental aspect of human growth and development (*ibid.*, p. 5). Regarding IPA, this social support benefits considerably when more formal IPA-specific support is provided.

Social support refers to the need we all have to be accepted by our families, communities, and society, and to benefit from the comfort and protection that such belonging offers (*ibid.*). Many LGBT+ people, bisexuals in particular, as related by these research participants, exist in the absence of this sense of belonging, which contributes significantly to their levels of stress, reflected in their recollections of issues of mental health.

Should programmes be explicitly developed for bisexuals, providers should receive robust training on the topics of bisexuality, bisexual individuals and their experiences of IPA. This would include training on biphobia, bisexual erasure, and the specific dynamics of abuse involving bisexual victims, including abuse from partners of any gender. Peer-led support groups and community engagement initiatives could help reduce isolation and affirm bisexual identity. Prevention and education programs should address bisexual internalised stigma and societal bias, which frequently hinders help-seeking (Gray et al, 2025; Diamond & Alley, 2022).

The research participants acknowledged this in general conversation. However, they quickly defaulted to the seemingly insurmountable issues of bisexual exclusion and the acceptance of the use of established heterosexual and lesbian and gay services (McGray et al., 2025). Therein lies the rub. Until there is a concerted effort by society to accept the existence of bisexuals as a unique population and bisexuality as a separate sexual orientation, it seems a difficult task to provide cohesive, informed and effective separate services. A good start to overcoming bisexual invisibility would be the inclusion of bisexual individuals and bisexual IPA in research and policy. As this thesis records, bisexual individuals experience the highest rates

of IPA, yet remain severely underrepresented in data, funding, and services (Walters et al., 2013; Turell et al., 2012; Friedman et al., 2014).

Perpetrators data

The data gathered on perpetrators from participants correlated with than gathered about perpetrators of abuse in the heterosexual and LGBT+ research (Johnson, 2008; Stark, 2007, 2023. Bancroft, 2003; Hill, 2019; Donovan & Hester, 2014. Cunha et al, 2022; Mandel et al., 2021; Romans et al, 2000; Eckhardt et al, 2006 and others). What emerged was confirmational data that perpetrators of IPA generally exhibit patterned, predictable, and similar behaviours across both heterosexual and LGBT+ communities (as reflected in LGBT+ acronymic research). Research indicates that abusive behaviours, including coercive control, physical violence, psychological abuse and manipulation, and financial abuse, follow consistent patterns regardless of the victim's or perpetrator's gender or sexual orientation. This is said with the understanding that existing research from which this conclusion is made mainly from research into heterosexual, lesbian and gay men. It cannot reflect the experiences of other LGBT+ individuals for whom IPA research has yet to be undertaken. This consistency suggests that the underlying mechanisms and tactics of power and control remain central to abusive relationships across different demographic groups (Stark, 2007; Rollè et al., 2018; Donovan & Hester, 2014; Dank et al., 2014). For a comprehensive overview of perpetrator data, see Research Findings 3, *IPA Perpetrator Data*.

Unexpected abuse findings.

The abuse findings from this thesis survey were expected, given the requirement that participants were all IPA victims. What was unexpected was

- a. the frequency, range and reported intensity/severity of the abuse experienced.
- b. the level of sexual abuse and rape experienced as adults (70% of participants) and,
- c. the exposure participants had to abuse, particularly sexual abuse (55% of participants), as children.

The issue of childhood sexual abuse (55%) was information volunteered by participants as it was not a question in the survey. In hindsight, had it been included as a question, the level of childhood sexual abuse may have been greater (see Findings 1, Question 28). This question

was not included in the questionnaire as this researcher did not want to include questions that might trigger a trauma response. What appeared evident was the link between childhood and adult abuse resulting from childhood sexual abuse.

(Also see in Chapter 4, Bisexuality: *Effects of childhood abuse and trauma on bisexuals*, Childhood Cumulative Trauma (CCT) and Traumagenic Dynamics Model (TDM).

Help-seeking by bisexual IPA victims

In a population as socially isolated as that of bisexual individuals (Turell et al., 2012), it is understandable that while bisexuals state that they would like bisexual-specific resources, this thesis's research participants stated that they found it difficult to specify what exactly these would be. Given the lack of research interest in this area, it is not surprising that participants would have little understanding of how to define their needs and adapt as necessary (Messenger, 2017). Many respondents reported greater comfort with adopting heterosexual or LG identities when seeking help (See Research Finding 1/Questionnaire; Questions 38-40), as these identities are already established in many areas, including helping services (McGray et al., 2025, p. 286).

In examining the reasons for this lack of resource specificity, several issues are important to consider. Consider first that bisexuals exist in a contested space (Best, 2019) where their existence is denied (Turell, 2012, p. 297). Beyond denied; ignored (Lindasusan, 2011). They lack a sense of community, as observed in other LGT+ groups, a fact confirmed by the research participants (ibid; Brown, 2019; McGray et al., 2025). As such, they lack the advantages that belonging to such a group would bring, such as a sense of leadership, group representation, spokespersons, advocates, and a community voice, which could provide guidance, as seen in other LGBTQ+ communities (ibid). They lack a sense of belonging to the LGT+ and heterosexual communities and are not regarded as part of the broader societal social structure (McGray, 2025).

Thus, for many, there is little sense of who they are as bisexual individuals or a group, and as was seen in this research, they express frustration at their invisibility. For example, (3217 W/F/33/North Carolina) reflected this in their statements that they 'are who we are' while wondering why they remain as an unacknowledged and isolated group.

If the core issues of bisexual self-identity and lack of societal acceptance are examined, combined with the general lack of information about how IPA affects them (most participants saw it as an exclusively heterosexual issue), it is understandable that bisexual individuals who wish for specific help may lack a form or framework in which it could be provided. The literature lacks any guidance in this area (Bornstein, 2006, as cited in Turell et al, 2012) while acknowledging that different patterns of abuse may be experienced in bisexual relationships. The statements expressed by bisexual participants that they are comfortable availing of helping services provided for heterosexual or lesbians or gay men reflect their having to masquerade as either to survive or seek help, what McGray et al (2025, p. 299) refer to as needing to 'lie and hide' to fit in.

Community-based help is often promoted as a means of support within the heterosexual and LGT+ communities (Turell et al, 2012; Duberli, 2020). In theory, this should also apply to bisexuals except that these communities exclude them (Turell & Herman, 2018). In adopting heterosexual and LG identities in help-seeking, bisexuals avoid adding to the experience of societal exclusion (McGray et al, 2025), minority stress and stigma that they already face. The need for and importance of community-specific research and help were highlighted by Ristock (2023) and Turell et al. (2012).

(Also see Research Findings 2: Section 8. 'Barriers to receiving help.' Pages 244-245. See Research Finding 1/Questionnaire: Questions 38-40. See also Chapter 4: Intimate Partner Abuse: 'Help-seeking barriers for bisexual and LGBTQ+ IPA victims.' Pages 91-2).

Patriarchy and misogyny

As it relates to theories and philosophies of abuse, patriarchy and misogyny were evident even within the constraints of the gender makeup of the sample: 14 females, four males and two transwomen participants. This female-centricity in studies such as this is also evident in other IPA research, as seen, for example, in Donovan and Hester (2014). (Ibid) posit that female-centricity in research may be due to a female willingness to be involved in such research. It appears the narratives of abuse from female participants support the feminist philosophy of IPA as male-on-female violence, emphasising patriarchal power structures, gender inequality, and coercive control as central factors in abuse (Dobash & Dobash, 1979). This was particularly

illustrated for participants from South America who described an overt culture of misogyny with the assumption of male dominance and female submission in how females and non-hegemonic males (Connell, 1995) were treated. Primary abuse, however, as described by participants, was from same-sex and opposite-sex abusers, with males being the primary violent perpetrators. This was accompanied by narratives that also described females as the perpetrators of abuse, some of whom were physically violent, but many whose primary means of abuse were psychological. Many participants described it as the '*same abuse...different tactics.*' Central to all issues of abuse was the need by the perpetrators, regardless of gender, to have the power and control over their partners (Stark, 2007; Rollè et al, 2018; Donovan & Hester, 2014; Dank et al., 2014). For further discussion on the role of patriarchy, see the Theory chapter: *Feminist Theories*.

Implications for Policy and Practice

The findings of this study emphasise the urgent need for targeted interventions and policies that acknowledge the unique experiences of bisexual victims of IPA. Service providers should be educated, and training programmes should be designed to recognise bisexuality as a distinct and valid identity and sexual orientation. This is to ensure that IPA support systems and resources do not continue to contribute to widespread bisexual erasure. In addition, awareness campaigns should focus on educating bisexual individuals about IPA beyond physical violence and the recognition of IPA as a bisexual issue within intimate relationships. IPA terminology and definitions should be reviewed to make it readily understandable to people in the bisexual and LGT+ communities to recognise it as a behaviour that exists within their communities and to promote early intervention strategies.

Theoretical Implications

The findings of this study contribute to several theoretical frameworks within criminology and victimology. First, they reinforce Traumagenic Dynamics Models (TDM) (Finkelhor & Browne, 1985) and Childhood Cumulative Trauma (CCT), and Cumulative Trauma Theory (Kira, 2001), which posit that repeated exposure to trauma, particularly sexual abuse in childhood, increases vulnerability to later victimisation as adults. The high frequency of childhood sexual abuse and subsequent adult rape among participants in this thesis supports this model. This

finding emphasises the need for interventions that recognise, appreciate and address early-life trauma as a means of preventing further trauma and exposure to abuse.

This thesis research expands on the Coercive Control Theory (Stark, 2007, 2023) by illustrating how this type of abuse is experienced in bisexual relationships. Perpetrators were described as using biphobia and bisexual identity erasure as control tactics, a factor not widely considered in existing coercive control literature, which tends to focus on heterosexual IPA (Meyer, 2015; Stark, 2007). Perpetrators often used negative stereotypes about bisexuality, such as assumptions of cheating and promiscuity, to justify abusive actions (Weiss, 2003). This was an issue repeated frequently by these research participants. This suggests a need to refine current theories to better account for bisexual and identity-specific forms of manipulation in IPA.

From a sociological perspective, the study underscores the influence of feminist theories of patriarchy that emphasise male power and control over women. This framework primarily views IPA as a tool for maintaining male dominance in patriarchal societies (Dobash & Dobash, 1979, 1992; Amin, 2024). This is tempered by LGBT+ IPA researchers advocating broadening the understanding of IPA within the LGBT+ communities beyond patriarchy to one centred on ungendered power and control (Riskock, 2002). Power and control (Pence & Paymar, 1993) is central to Stark's (2007) coercive control theory, which itself is underpinned by feminist patriarchal ideology. Further research is needed to develop theoretical models for bisexual and LGT+ people towards the understanding of non-gendered abuse, as was seen in this thesis research, by deconstructing heteronormative and monosexual assumptions in IPA discussions (Barker et al., 2012).

Methodological Implications

This thesis highlights several methodological challenges and considerations in researching IPA among bisexual and other marginalised populations. One key issue was the participants' limited understanding of IPA, which influenced their ability to recognise and report abuse experiences in relationships. Future studies should consider using IPA-specific questions highlighting bisexual examples of abuse scenarios to help participants identify IPA. This would

be in addition to providing materials that explain IPA, IPA terminology and definitions, and its connection to the bisexual community in an easy-to-understand way.

Another important methodological implication relates to sampling challenges in bisexual research. Many participants noted that they had difficulty discussing their IPA experiences (among those who recognised the abuse as IPA) outside of bisexual friends, which highlight the broader issues and consequences of bisexual invisibility. Recruitment strategies for similar studies should recognise the challenges in recruiting a bisexual participant sample, as highlighted in this research (See Methods review of recruitment process) and Head & Milton (2014). This is important given that snowball sampling has been the most common participant recruitment method in primary research to date. Recruitment is suggested to begin as early as possible in the research process to have a sizable and relevant sample when the survey starts. Consideration of participant involvement (Participatory Action Research - PAR) in the research (Baum, 2006), as well as testing of survey instruments, questionnaires, and interview formats for relevance and effectiveness prior to survey use, is recommended.

Future research should consider using mixed methods approaches (Todd, 2021), combining both qualitative narratives and quantitative instruments to enhance the breadth and depth of the research findings. The thesis employed mixed methods, utilising a qualitative approach (interviews) that allowed for a deep and nuanced exploration of participants' IPA experiences. Interviews revealed patterns, emotions and experiences that the quantitative instrument (questionnaire) would have overlooked. In contrast, the questionnaire provided a demographic snapshot of the participants and served as a basis for the interview.

Practical Implications

It is essential that bisexuality is recognised as a legitimate sexual orientation and that bisexual individuals are recognised and accepted as 'valid' members of the heterosexual and LGBT+ communities. Without such recognition and inclusion, even the most well-intentioned support systems will fall short as they risk leaving the very group that they are designed to support excluded and invisible.

The study's findings have several practical implications for policymakers, helping service providers and advocacy groups working in IPA prevention and victim assistance response. These are relevant not only for the bisexual community but also for many of the other LGT+ communities.

1. Improving Bisexual IPA Awareness and Education

Many participants lacked awareness of what constitutes IPA, particularly concerning non-violent abuse and the common perception of it being an exclusively heterosexual issue. This indicates a need for improved bisexual-specific educational and training programmes. (See 'Dynamics of IPA' in the Discussion).

Educational materials should address the link and highlight risks between childhood trauma and later IPA victimisation, prompting a need to explore designing an instrument for determining at-risk individuals (Finkelhor & Browne, 1985; Kisely et al., 2024). This is relevant not only for bisexual victims but for victims in other populations as well.

2. Enhancing Service and Resource Provision for Bisexual Victims

This study highlights barriers to seeking help, particularly in not recognising that what victims are experiencing is IPA. For those who do, barriers include fear of not being believed, a fear of biphobia, and concerns about discrimination. To counter this, as has been demonstrated in some trans specific service providers (SP, 2024), service and resource provider personnel should receive cultural competency training to better support bisexual victims and to avoid reinforcing identity erasure. This is particularly the case for trans bisexual victims, as was reflected in this thesis.

Helplines should explicitly include bisexual individuals in their outreach efforts to counteract invisibility within victim support systems. Personnel should be well-versed in the dynamics of bisexuality and the experiences of bisexual IPA victims. Given that the research participants expressed comfort in using alternative identities when seeking help (as heterosexual, lesbian or gay), there may not be a specific need for bisexual shelters, but this should be explored.

3. Expanding Legal and Policy Frameworks

Current IPA policies often assume heteronormative frameworks and experiential dynamics overlooking the unique experiences of bisexual (and LGT+) victims (Donovan & Barnes, 2020). Policymakers should work towards inclusive legal definitions of IPA that recognise the diverse ways abuse is experienced (and by whom) in bisexual and other minority relationships. There

is also a need for required training for police, medical and legal professionals to ensure that bisexual IPA victims are acknowledged and supported when reporting IPA.

4. Further Research and Data Collection

Given the lack of existing research on IPA among the bisexual population, future research should prioritise bisexual-inclusive (or exclusive) primary data collection rather than grouping bisexual individuals with either heterosexual or LGBT+ populations (Head, 2020, p. 113; Callen et al, 2021). Future research could examine a range of topics, including why bisexual individuals appear to be particularly vulnerable to intimate partner abuse. Particular attention should be given to reported high rates of sexual abuse that target bisexual women (Breiding et al., 2013; Messinger, 2011, 2017; Coston, 2017; Walter et al., 2013). Additional study is needed to understand why childhood abuse, including sexual abuse, features so prominently in the narratives of bisexual victims (Finkelhor & Browne, 1985). Another important direction for research concerns the severity and range of abuse experienced by bisexual victims (Messinger, 2017). It would be advantageous to contrast and compare these findings with the experiences of other populations, including heterosexuals and LGT+. The role of self-blame in shaping victims' responses to abuse should be examined. Finally, future work should address the continuing lack of recognition of bisexuality as a valid sexual orientation in this era of inclusivity.

Future Research Guidelines

The findings of this study highlight several critical gaps in understanding bisexual individuals' experiences of IPA. In addition to previous recommendations, future research should build on these gaps by addressing theoretical, methodological, and practical challenges (Corey et al, 2023). This will enhance the research finding's depth, relevance and applicability. Two unexpected research findings in this thesis included a significant lack of previous research specifically addressing IPA in bisexual individuals (Addington, 2019; Head, 2020, p. 130; Head & Milton, 2014. Corey, Duggan & Travers, 2022, p. 2132; Callan et al, 2021)., and an absence of understanding among bisexual participants of what IPA was and how IPA applies to bisexuals. The scarcity of literature indicates an urgent need for dedicated research that explores bisexual-specific victimisation experiences and theoretical implications (Head, 2020). The following areas are important issues for future research:

1. *Addressing the lack of existing primary research on bisexual IPA*

The limited academic focus on bisexual-specific IPA experiences has resulted in bisexual IPA experiences frequently being grouped with either heterosexual or LGT+ research. Bisexuals are often tokenised, included in research in name only, without any attempt to explore their experiences. This has served to ignore unique bisexual IPA challenges (Head, 2020). Future academic research should treat bisexuality as a distinct gender identity and sexual orientation category. The absence of studies on bisexual perpetrators of IPA also reflects a gap in understanding how abuse is experienced within bisexual relationships. Exploring perpetration dynamics within bisexual relationships could provide a more nuanced understanding of IPA dynamics.

2. Addressing the issue of a lack of bisexual understanding of IPA.

An examination of the effectiveness of how IPA is taught and understood is needed across all populations. Research into how IPA is perceived and experienced by minority groups should be expanded as a means of comparing similarities and differences of findings across different populations (Ristock, 2011). From these new methods of education and instruction should be explored and designed to ensure that IPA is effectively taught and understood by the broader population, particularly in bisexual, minority and LGBTQ+ groups. This should consider the dynamics of teaching to people for whom comprehension is difficult, including those under stress from current experiences of IPA, people for whom English is a second language and those with limited education and literacy.

3. Expanding Theoretical Frameworks

Current IPA theories, as discussed (See Theories chapter), including for example, Feminist Theories, Coercive Control Theory (Stark, 2007) and Cumulative Trauma Theory (Finkelhor & Browne, 1985), should be expanded to include a focus on vulnerabilities faced by bisexual individuals. Future studies should investigate how bisexual invisibility contributes to IPA, drawing on Minority Stress theory (Meyer, 2003) and the concept of Social Safety (Diamond & Alley, 2022). This is to understand how discrimination and biphobia impact bisexual IPA recognition and help-seeking behaviours.

4. Enhancing Research Methodologies

Longitudinal studies comprising primary research are needed to track bisexual IPA victims over time to examine the long-term effects of IPA on mental and physical health, relationship dynamics, and their interaction with helping and resource services (Rodriguez et al., 2024). A sample size and research approach and methodology, such as that of Donovan & Hester

(2014), are recommended (N = 746). The use of mixed-methods approaches (Todd, 2023) provides a rich data bed comprising quantitative and qualitative data. This is demonstrated in this thesis's research, which illustrated that combining quantitative surveys for broad prevalence data with qualitative interviews for deeper personal narratives offered a more thorough understanding of bisexual victimisation.

The undertaking of comparative research could compare bisexual IPA victims with heterosexual and LGBT+ survivors to identify unique risk factors, add depth to understanding perpetrator and victim behaviours and further examine barriers to seeking support. Care must be taken to avoid contamination of bisexual research by this comparison to avoid contributing to heteronormative or LGT+ assumptions about bisexual IPA as was reflected in this thesis. A significant limitation in comparative research is the apparent lack of cooperation in designing cross-population research protocols, including a standardised questionnaire, interview formats, and IPA definitions that would facilitate such comparisons (Gates, 2011; Messinger, 2017).

5. Addressing Bisexual and Other Underrepresented Groups

There should be an expanded focus on intersectionality, examining how bisexuality and IPA interact with other marginalised identities, including ethnicity, gender identity, socioeconomic status, and disability. Particular attention should be given to the experience and needs of trans and non-binary bisexual individuals who are underrepresented in IPA research. Future studies should specifically explore their experiences.

Older bisexual individuals may face unique challenges (Todd, 2013), including age-related stigma, age-related invisibility and reduced access to support services and this warrants specific research. In this survey, there were no participants over the age of 65. Three participants identified as being in the 55-65 age group. This absence was not by design; rather, few older people responded when participant recruitment began.

6. Improving Access to Support and Legal Protections

Future research into bisexual-specific IPA support and resources, including legal resources, should be explored. As was reflected by this research participants, many bisexuals seek help self-identifying not as bisexuals but as heterosexual, lesbian, gay or not identifying at all. This was due in part to bisexual invisibility but in large part to participants not recognising their experiences as abusive. Intervention development studies should explore targeted programs

that increase IPA awareness in bisexual communities and improve LGBT+-affirming service models.

7. Societal and Cultural Attitudes Toward Bisexuality and IPA

A campaign or educational programme is needed to establish bisexuality as a legitimate sexual orientation and to counter biphobia across all populations. Further research is needed to analyse how media portrayals of bisexuality shape societal attitudes toward bisexual victims of IPA to end stereotypical and degrading depictions. Studies should examine the role of how bisexual stereotypes, including hypersexualisation and assumptions of promiscuity, influence increased victim-blaming attitudes in IPA cases. Finally, research should explore IPA prevention strategies that specifically address the bisexual community's needs, incorporating education and awareness campaigns.

Conclusion

One of the most unexpected findings in this study was the significant lack of prior research dedicated to bisexual individuals' experiences of IPA. This was exacerbated by the lack of understanding among participants regarding how IPA is perceived as a non-bisexual issue and their ignorance of what behaviours comprise IPA. These absences reflect biphobia and broad bisexual erasure within criminological, sociological, and victimological research. Future research should focus on bisexual-specific, intersectional and victim-centred approaches to understanding bisexual experiences of IPA. By expanding theoretical frameworks, improving research methodologies and developing targeted interventions, bisexual victims may finally receive the recognition and support they need (Gram et al., 2024). In bridging these research gaps, researchers can contribute to a more comprehensive and inclusive understanding of bisexual IPA.

Addressing the four research questions

Further discussion will follow my four research questions under the umbrella of the thesis title, *'Research into the experience of Intimate Partner Abuse (IPA) perpetration and victimisation within the bisexual population.'*

Research gap: This project was prompted by the absence of primary research into IPA among bisexual individuals (Addington, 2019; Head, 2020, p. 130; Head & Milton, 2014; Corey, Duggan, & Travers, 2022, p. 2132; Callan et al., 2021). Bisexuals as a group have been consistently ignored where IPA is concerned. Research that does exist, other than one primary study (Head & Milton, 2014), has been secondary research, with data derived from non-bisexual specific sources (Coston, 2017; Messinger, 2011). Bisexual IPA research has been readily subsumed into LGBT+ IPA research and included as part of the acronym, rather than being a subject of its own (Brown & Herman, 2015). This has provided little in the way of valuable data on the subject, and in many LGBT+ IPA studies, bisexual inclusion might be best described as tokenism. For further discussion, refer to the Introduction chapter, specifically the section on *Research Gap*.

Research questions and themes

The themes are derived from the data that emerged from the questionnaire and interviews. The research title and the research questions guided the study. In the following discussion, both will be reviewed and intermingled, as they are intrinsically interconnected.

Summary of relevant findings

This question is summarised in the following nine themes that emerged from participant interviews and survey data, as discussed in Research Findings 2. *Interview results*. Additional data is discussed in Findings 3: *A review of interview notes, observations, post-interview conversations and key points from the survey*. Data in perpetrators is reviewed in Research Findings 4. These themes were compiled through analysis of questionnaire data combined with repeated reviews of interview transcripts and research notes.

Main themes

1. The frequency of exposure to childhood abuse.
2. Experiences of sexual abuse and rape as a child.
3. The frequency of adult rape.
4. An absence of bisexual identity outside of bisexual friends.
5. Bisexual invisibility.
6. The range and intensity of experienced IPA abuse types experienced.
7. Participant's poor understanding of what constitutes IPA.

8. Barriers to receiving help.
9. Perpetrator behavioural observations from participants.

The research was begun with few expectations for the researcher and was informed by primary data from Head & Milton (2014), secondary data from bisexual IPA research supplemented by data derived from LGBT+ IPA research. What emerged from the very first interview of this survey was the extent of IPA to which participants have been exposed. Initial thoughts were that perhaps this might have been an anomaly. However, as the interviews progressed, the extent, frequency and severity of abuse to which the participants recalled have been exposed became apparent. Many revealed high levels of psychological trauma from their experiences. While vital data was derived from the questionnaire (Findings 1) and the interviews (Findings 2), as much was derived from interviewer observations and notes combined with post-interview commentary by participants many of whom were keen to talk further about issues of bisexual IPA that were important to them (Findings 3). An important correlation between child and adult experiences was noted that aligns with Childhood Cumulative Trauma (CCT) and Finkelhor & Browne's (1985) Traumagenic Dynamics Models (TDM), which will be discussed.

Research questions

Research Question 1: *How is the perpetration and victimisation of IPA experienced in the bisexual community as represented by the research sample participants?*

This question has been meticulously addressed in the thesis through the participants' accounts, both as victims and in their recollections of perpetrator behaviours. A conspicuous outcome was the unexpectedly high disclosure of childhood sexual abuse. Although this was not a specific item in the questionnaire, over half of the participants volunteered these experiences when discussing childhood abuse. This aligns with earlier studies that identified bisexual individuals, particularly women, as being at heightened risk of sexual victimisation in childhood (Friedman et al., 2011; Lehavot et al., 2012; Walters, Chen, & Breiding, 2013; Brown & Herman, 2015). When viewed through Finkelhor and Browne's (1985) Traumagenic Dynamics Model and Herman's (2015) work on trauma, these disclosures highlight how early victimisation may affect victims into adulthood, shaping their vulnerability to further abuse.

Another important concern that arose was the struggle by participants with social invisibility (bisexual invisibility, biphobia). Many participants described the absence of recognition of bisexuality as distressing. Some responded by adapting and adopting a different identity when in social settings, presenting as lesbian, gay or straight depending on the social context, or adopting more 'acceptable' social identities such as pansexual or queer. This internal pressure from concealing or reframe their personal identity is consistent with Meyer's (2003) minority stress framework, which shows how stigma (Goffman, 1963) and marginalisation can affect mental health and the ability to seek support.

Taken together, these findings suggest that IPA in bisexual lives has to be viewed with the impact of childhood trauma and the social erasure of bisexual identity. Both dynamics create barriers to disclosure, coping, and access to tailored services. This contributes to the literature by confirming earlier indications of high abuse prevalence among bisexuals (Brown and Herman (2015) while also showing how invisibility and identity are central to how IPA is experienced.

A concerning outcome was the pervasive rate of rape experienced in adulthood. Participant accounts suggested a connection to earlier childhood sexual abuse, even when participants themselves did not always make that link. This connection echoes Finkelhor and Browne's (1985) Traumagenic Dynamics Model, which shows how early abuse can shape later vulnerability. The effects of cumulative trauma, as described by Teicher et al. (2006) and more recently by Lippard and Nemeroff (2020) and da Silva et al. (2024), were evident in the ways participants managed their distress. Their coping often emerged through adaptive or accommodative strategies, such as alcohol or substance abuse, or remaining in abusive relationships. I say this with caution as it was never the intention for the participants to seek abusive relationships.

A further theme was participants' difficulty in recognising their experiences with partner abuse as intimate partner abuse. As with other LGBT+ communities, these interviews highlighted that many bisexuals normalise or minimise intimate partner abuse (IPA), assuming it is a common or expected aspect of same-sex relationships (Donovan & Hester, 2014; Messinger, 2017). Many assumed that IPA was a problem limited to heterosexual

relationships, reflecting wider cultural beliefs in the LGBT+ communities (Donovan & Hester, 2014). This lack of recognition was reinforced by participant's limited awareness of IPA definitions and terminology as they apply to bisexual people. Several participants reported only realising that their experiences constituted abuse after discussions with friends or when engaging with support services. This finding mirrors earlier research showing gaps in recognition of IPA within LGBT+ communities (Brown & Herman, 2015; Walker, 1979; Hudson-Sharp & Metcalf, 2016). It demonstrates how bisexual individuals can be left vulnerable without the language to name their experiences.

Although perpetrators were not interviewed, participants provided valuable reflected insights into perpetrator behaviours. Of particular interest was the similarities in the abusive tactics described and how they were used to control the participants. Within the wide array of abuse types reported, common patterns emerged (Kelly (1988). The participant narratives recalled nearly identical methods of perpetration. These accounts reflect Hill's (2019) observations of similarities of perpetrator behaviours and attitudes across different populations. The use of coercive control and power and control tactics was strikingly evident, aligning with the frameworks established by Stark (2007), Rollè et al. (2018), Donovan and Hester (2014), and Dank et al. (2014).

Participants described a wide range of barriers to seeking help for IPA, consistent with Calton et al.'s (2016) findings. Their awareness of exclusion from both heterosexual and LGBT+ communities shaped their help-seeking responses and reinforced the sense of stigma attached to being bisexual and victims of abuse. To access helping services, a few identified as bisexual, as discussed above, reflecting McLean's (2018) observations. Many relied on their own networks of friends for help (McGray, 2025). See further insights in Research Findings 5: New data.

Research question 2: *What new data has been garnered that adds to the knowledge about IPA in the bisexual community?*

An unexpected but important finding was the high rate of childhood sexual abuse and later experiences of rape in adulthood among participants. While such patterns have been noted

in earlier secondary research (Messinger, 2011; Coston, 2017) this is the first time they have been confirmed through primary data in this context, making it a significant new contribution.

Consistent with broader literature, bisexuals, particularly bisexual women, have the highest reported rates of IPA victimisation, followed closely by bisexual men (Gates, 2011; Messinger, 2011; Coston, 2017). Bisexual women are especially vulnerable, experiencing abuse in both heterosexual and same-sex relationships. National data show that 61% of bisexual women report violence and sexual assault compared with 44% of lesbians and 35% of heterosexual women (Smith et al., 2012). Bisexual men also report disproportionately high rates of victimisation. This is now confirmed through this thesis primary research.

In addition, participants contributed significant new insights into perpetrator behaviours with bisexual IPA. While men were described as more likely to use physical and sexual violence, women were often reported as relying on psychological abuse, confirming distinctions observed in previous studies (Brown & Herman, 2015; Ramsey, 2011).

The study also highlighted issues for trans women identifying as bisexual, reflecting findings from the 2016 U.S. Transgender Survey where around 20% identified as bisexual (Herman et al., 2016). The trans participants highlighted that this trans/bisexuality intersection can serve to intensify their experiences of IPA.

Another issue raised by participants, particularly older participants, was the perceived encroachment of emerging gender and sexual identities (e.g., pansexual, non-binary, genderqueer), some of whom also identify as bisexual (Callis, 2014). While this broadens inclusivity, it also complicates definitions of bisexuality and may affect how bisexuals experience IPA. Some participants viewed this expansion as an encroachment on an already marginalised community.

Finally, the research confirmed previously observed high rates of alcohol and drug use among bisexual IPA victims (Burgard et al., 2005; Kertzner et al., 2009). Participants described substance use as both a coping mechanism and an additional vulnerability factor, reinforcing the interconnected nature of trauma, abuse, and health risks within this group.

Research question 3: How can the data collected add to the support of victims of IPA in the bisexual community?

The data collected in this study provide several important insights into how support for bisexual victims of intimate partner abuse (IPA) can be strengthened. Most is dependent on the broad social recognition of bisexuality as a 'legitimate' sexual and gender identity.

One of the study's clearest contributions is the detailed description of perpetrator behaviours, as reviewed in Research Findings 4 and throughout the thesis. Even though perpetrators themselves were not interviewed, participants provided consistent accounts of violence, coercive control, manipulation, and other abusive tactics. These narratives mirror established frameworks on power and control (Stark, 2007; Donovan & Hester, 2014). Training for helping service practitioners that incorporates these specific insights derived from the data would better equip providers with the language and knowledge of bisexual living to provide more effective services.

As already discussed in Research Question 2, bisexuals (and many LGT+ individuals and communities), as reflected by participants, do not recognise IPA as a behaviour that applies to them. This lack of information suggests a strong need for simplified, bisexual-inclusive educational models of IPA that clearly explain patterns of abuse in a way that bisexuals can relate to. Such frameworks could help victims identify their experiences as IPA and direct them towards effective help-seeking (Calton, 2016; McLean, 2008). This is addressed in the Appendix, where a paper on IPA education, titled 'Towards Prevention,' is available.

The study further underscored the importance of acknowledging the experiences of bisexual trans women. The two trans participants revealed a combination of additional vulnerabilities that are often overlooked in both mainstream IPA services and LGBT+ support spaces. These are experienced in addition to barriers experienced by LGB victims. Recognising these intersections is vital if services are to become genuinely inclusive and responsive to all bisexual survivors (Herman et al., 2016).

Bisexual-Specific Services and Resources: Exclusion and biphobia were recurring themes in participant narratives. This raises the question of whether bisexual-specific services should be developed or whether existing services should be adapted to become explicitly bisexual-inclusive. Either approach requires a clear commitment towards society and helping services finally recognising bisexual identities and addressing and countering the stigma and invisibility that participants described (Brown & Herman, 2015; McLean, 2018).

Addressing Substance Use: The study highlighted the close link between IPA victimisation, trauma, and substance and alcohol abuse. Integrating trauma-informed approaches with substance recovery services would be a useful step in meeting bisexual victims' needs (Burgard et al., 2005; Kertzner et al., 2009)

Research question 4: *Does the data gathered support or contradict the hypothesis that perpetrator and victim experiences are similar across all populations?*

The data supplied by the participants does support the hypothesis. Participants' narratives consistently recalled similarities in the behaviours of perpetrators and their responses to them. The wide diversity of the participant sample lends credibility to the observation of similar perpetrator behaviours. This similarity of perpetrator behaviours and abuse methods is reflected in the literature, including Dutton (2006), Walker (1979), Hill (2019) and Stark (2007). As to the similarity of victim behaviours, these were derived through observation and analysis of participant interviews and are, particularly where the disclosure of trauma is concerned, supported by Herman's research (2105). This researcher is in the early stages of developing research into this area of behavioural similarities under the framework of Unified Dynamics Theory (Daly, 2024). In conclusion, as confirmed by this research, IPA perpetration, causes, tactics, effects, and victim experiences appear similar regardless of sexual orientation or gender identity.

Summary

This chapter discussed the value of the research, reflecting on the quality of the interviews, rapport with participants, and the key findings. It highlighted the continued subsuming of bisexual research into broader LGBT+ studies, participants' limited understanding of IPA, and

the barriers faced by bisexual victims in seeking help and achieving social safety. Perpetrator data, unexpected abuse findings, and the influence of patriarchy and misogyny were also examined. The discussion considered implications for policy, theory, methodology, and practice, alongside recommendations for future research. Finally, the chapter addressed the four research questions directly, linking themes and findings to provide comprehensive answers and reinforce the contribution of this study to knowledge on bisexual IPA.

13. CONCLUSION

This thesis was designed with a broad reach to examine the experience of intimate partner abuse (IPA) in the bisexual population. The result has been an extensive review of the intersection of bisexuality and IPA, revealing new knowledge and confirming existing data about this abuse phenomenon. This has contributed to the limited knowledge on the subject and the growing sociological understanding of IPA beyond heterosexual and LGT+ frameworks. In doing so, it has helped establish a strong foundational base for future research. It has addressed critical gaps in IPA research as it applies to bisexuals by engaging with a diverse research participant sample, producing both quantitative and richly textured qualitative data. The findings highlight the dynamic, multifocal nature and intersectionality of bisexual IPA victimisation and perpetration. This research has helped fill an important in the research of bisexual IPA. It has provided much-needed primary research into the phenomenon. The research and the data that emerged from it significantly contribute to the knowledge of bisexual IPA, its dynamics, and the unique experiences of this population.

Research title and questions

The research was undertaken under the thesis title *‘Research into the experience of intimate partner abuse (IPA) perpetration and victimisation within the bisexual population.’* This research was structured around four intersecting research questions designed to capture as broad a snapshot as possible of how IPA is experienced in the bisexual population. It was designed to identify new data and evaluate previous bisexual IPA research.

Research Question	Description
Research Question 1	How is the perpetration and victimisation of IPA experienced in the bisexual community as represented by the research sample participants?
Research Question 2	What new data has been garnered that adds to the knowledge about IPA in the bisexual community?
Research Question 3	How can the data collected add to the support of victims of IPA in the bisexual community?

Research Question 4	Does the data gathered support or contradict the hypothesis that perpetrator and victim experiences are similar across all populations?

Research questions (Figure 55)

Summary of key findings and new data

This research confirms the observation about the systemic lack of bisexual IPA research, particularly primary research. It identifies a need for new research methodologies in researching bisexual IPA beyond the heterosexual or LGBT+ frameworks. Importantly, it identified consistent and intensive experiences of abuse and resulting trauma across the varied demographics of the participants. These included high rates of childhood abuse, childhood sexual abuse and adult victimisation, including rape. Findings suggest that these IPA experiences were influenced by patriarchy, misogyny, biphobia and social exclusion by both the heterosexual and LGT+ communities. Participants reported that perpetrators were both same-sex and opposite-sex, with men named as the primary perpetrators of physical and sexual violence. Females were also reported to use physical violence, but were more likely to use non physically violent abuse methods. Male and female perpetrators engaged equally in these other forms of abuse, including widespread coercive control (and its components), and emotional and psychological abuse. Responses to this abuse included mental and physical problems and high rates of alcohol and substance use among a large number of participants. IPA experiences were exacerbated by the prevalent lack of knowledge about IPA among participants, including their attribution of IPA as an exclusively heterosexual issue, compounded by a lack of understanding of IPA definitions, terminology and how it could apply to the bisexual population. This made it difficult to acknowledge or define their experiences of abuse in relationships as IPA. Jealousy, accompanied by an assumption of infidelity, was a primary reported trigger of IPA by many participants. Most participants, other than the two trans-women, although stating that they would like bisexual specific helping services, could not name any and were content to seek them under other gender identities, such as heterosexuals, lesbians or gay men. Finally, the research supports the similarity hypothesis among IPA perpetrators and victim experiences based on the participants' narratives.

These research findings contribute to a new, more nuanced and intersectional understanding of how IPA is experienced in the bisexual population. It challenges the

prevailing heteronormative and LGT+ IPA research frameworks by setting out bisexual experiences as distinct with unique experiential dynamics. It has successfully established a foundation of knowledge and understanding of the phenomenon as it is today. It also provides a solid platform for understanding the subject, from which new research can be undertaken.

Several key themes emerged from the research, offering insight into the lived experiences of participants. A recurring pattern was the frequency of exposure to childhood abuse, with many reporting experiences of sexual abuse and rape during childhood. These early traumas were often followed by further experiences of adult rape, highlighting a continuum of vulnerability across the lifespan and recollections of accumulated trauma. Participants also described an absence of bisexual identity recognition outside of their immediate circle of bisexual friends, reflecting the broader reality of bisexual invisibility. The participant accounts revealed the wide range and intensity of IPA experienced, joined by a general lack of understanding about what constitutes IPA. Barriers to receiving help were frequently noted, demonstrating systemic and social obstacles to support and how the participants adapted. Finally, participants provided important behavioural observations of perpetrators, which added depth to the understanding of abusive dynamics.

The findings under these themes, as reviewed in the Discussion chapter, are important not only to bisexual IPA research but also to IPA research when examining the experiences of minority communities. This thesis provides a unique sociologically focused snapshot of the bisexual IPA experience, captured from a diverse demographic sample. It does so by:

1. Aligning with many of the research findings from the other primary research project by Head & Milton (2014).
2. Confirming many previous bisexual IPA research findings from secondary research, particularly about the extensive sexual abuse of bisexual women.
3. By pulling together a base of narratives and experiences from as representative a sample of bisexuals who have experienced IPA as possible, given the barriers in researching this diverse population within the given time.
4. By documenting barriers to research and noting their applicability not only to bisexual research but also to researching other minority LGT+ groups. Documenting them here saves future researchers the effort of having to learn them again.

Overcoming and Adapting to Limitations.

1. Sample size: It is acknowledged that the sample size of 20 participants is a limiting factor. This researcher believes that the demographic diversity of the sample balanced it out.
2. Representation: The primary data gathered relates only to the 20 participants as representatives of the entire population. Every effort was made to ensure that participants were as representative as possible through meeting the research criteria.
3. Gender imbalance in sample: The sample comprised (self-identified) 14 women, two trans women and four men. This may have influenced the findings, but it allowed for a nuanced review of gender experience.
4. Educational and language skills may have been challenging for participants, particularly for those for whom English was not their first language. The use of an LGBT+ and trauma-informed translator ensured accessibility and meaningful participation.
5. Two participants' trauma exposure may have influenced their engagement with the interview process. Every effort was made to support these participants to minimise distress and to ensure that ethical research practices were maintained.
6. Location: This was to be a UK-based research project, although that was not a conditional factor. When the survey began, none of the potential participants from the UK or Ireland came forward despite every effort to include them. Due to this researcher's work (and contacts) in Dublin and the US, US-based participants came forward as described here. This broadened the study's reach and enriched its findings.
7. Time: Due to the constraints imposed by the PhD, time was an issue. This limited the time spent recruiting participants. Having more time may have added more participants. The study did gather meaningful and diverse participant insights within the time constraints.
8. Researcher bias. The researcher was acutely aware of potential research bias based on the researcher's sociodemographic and professional background. The researcher strove to ensure objectivity and balance throughout the survey.

9. Interview power balance: The researcher was aware of potential power imbalances in the interview process and was sensitive to creating a comfortable, equitable space and interview interaction.
10. Confidentiality and disclosure: Given the hidden nature of bisexual existence and the experiences of IPA, a reluctance to disclose was anticipated. The study was designed to ensure confidentiality and to provide a safe space for interaction with the participants.
11. Financial compensation: Some participants expressed a preference for payment for their time; a measure not approved for this study. While this resulted in some attrition in recruitment, it did not hinder the gathering of a significant sample that provided valuable results.

The implications of the findings extend beyond the studied population. It also serves to draw attention to the existence of a large yet invisible bisexual community whose identity is refuted and denied by all aspects of society, LGT+ and heterosexual alike. It also serves to capture the difficulties in researching minoritised populations which fall under the LGBT+ acronym.

Implications

This research highlights the need for society to recognise bisexuality as a distinct sexual orientation. As one participant put it, it appears illogical that such a large group continues to experience exclusion in this era of inclusion. This research has applications beyond the studied population. The methodology employed here may have implications and be applicable to research in other minority populations. The need for better communication of what comprises IPA and how it is applied and experienced is evident not only for bisexuals but for society in general. How bisexuals are depicted in the media, particularly the hypersexualisation of bisexual women, needs to be rethought as it contributes to their continued sexual victimisation. There is a need to educate helping service providers about the legitimacy of how people self-identify on their presentation for assistance. Gender expression and sexual orientation should not be viewed as a reason for not providing treatment, regardless of the religious or cultural beliefs of the providers.

Expansion of this research. Future research

This research may act as a platform for expanded research into the bisexual and other minority communities in the LGBT+ acronym. The purpose of such research would be to intervene and prevent abuse by examining the role of society and individuals in the perpetration of IPA. A longitudinal study with a significantly larger sample would add to the depth of understanding of many aspects of bisexual or minority IPA in future studies. It would serve to expand current knowledge of the topic and seek new data. Issues such as the linkage between childhood maltreatment and adult abuse warrant attention. Further broadened investigation of perpetrator behaviours, motivations and behaviour similarities experienced across different minority demographics is an area that would benefit from new comparative research with heterosexual, lesbian and gay male IPA research would be valuable. Further research expanding theoretical applications related to choice theory and Stark's Coercive Control model will help provide new and important understandings of the IPA process.

Regarding perpetration, there is a need to be less abstract about perpetrator behaviour. It is critical to humanise these and make them identifiable to would-be victims. Issues such as the central roles of abuse pre-planning, cruelty, jealousy, conspicuous manipulation and malicious intent in their applications of abuse. By humanising these behaviours, researchers may be better able to understand the abusive mindset and, by doing so, consider these in planning educational and prevention strategies toward avoiding future victimisation.

Finally, future research must be inclusive to all people who identify as bisexuals, not just those who fit the bisexual binary understanding. Such awareness of other aspects of intersectionality will add to the context of research and may provide essential keys to experiences in other minority populations.

Implications and future for this researcher

This thesis is the capstone of a career investigating and testifying in domestic violence cases.

The knowledge gained from this research will be applied in several areas. These include:

1. Journal articles about this research and aspects of the findings, including bisexuality, bisexual IPA, contrasting findings with heterosexual and LG+ IPA research, and perpetrator behaviours.
2. Continuing toward finalising a new teaching course about IPA designed to be used across many populations, including heterosexuals, LGBT+, and different cultures.
3. Complete a new judicial training course for domestic violence and family court judges.

This researcher wishes to express gratitude to the study participants, who showed deep trust in sharing deeply personal aspects of their lives with a stranger.

Final thoughts

This thesis was designed to capture a broad swath of data about the bisexual IPA experience. Crucial new knowledge emerged about the IPA experiences supported by confirmatory data about prior secondary research. This thesis fills a heretofore unacknowledged and overlooked gap in the literature and, in its investigation, brings forth knowledge relevant not just to the bisexual population but also to other demographics in the heterosexual and LGT+ communities.

It is vital for all populations, not just bisexuals, that educational initiatives are redesigned, simplified and taught to encourage the understanding of IPA from an early age. By adulthood, it may be already too late for many people. Providing the information to victims when they seek help is indeed important, but its relevance may be lost amongst the clutter of an abusive relationship. As one participant said, *'It's too late to learn to swim when you're drowning.'*

While IPA remains an under-recognised and complex issue in the bisexual and other communities, this research contributes toward expanding awareness, understanding, and the drive for meaningful change in how society understands bisexuals and their experiences of IPA. Highlighting the participants' narratives and lived experiences of abuse helps pave the

way for better prevention and support systems, educational initiatives, and, one would hope, more inclusive policies.

There is reason to be hopeful. This research demonstrated that people are receptive to learning that their abusive experiences can be attributed to a cause that is not their fault. That it is centred on another person's need to control them as opposed to something they did to deserve it. They register relief in the realisation that in answer to their question, 'How do I keep ending up with (abusive) partners? What did I do?' the answer is that they did nothing, that abusers seek them. That one point can completely change a victim's mindset. In this understanding, the seeds of freedom grow, and IPA victims can realise that they are not alone but part of a large community of people with shared experiences. A group whose collective voice can facilitate change in how they are treated by society.

Through more informed education, expanded legal reforms and community-driven initiatives, it is within our reach to achieve a future that protects all IPA victims, regardless of gender identity or sexual orientation, where they will receive the protection, justice and support that they need and deserve. A future where society's understanding of the abusive mindset will create an intolerance for these toxic behaviours that they can be, if not eliminated, certainly seen and contained, where the cost of perpetration will grossly outweigh the benefit to the perpetrator. It is an evolution, perhaps idealistic but achievable, where people can live and thrive in a society free from the fear of IPA.

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APPENDIX

<u>Appendix</u>	<u>Page numbers</u>
A. Glossary and Terminology	378 - 425
B. Participant Contact/Correspondence Letter	426 - 428
C. Participant Survey Information sheet (including researcher bio)	429 - 433
D. Participant Data Management	434 - 436
E. Information about Intimate partner abuse	437 - 439
F. Participant consent form	440 - 442
G. Post-interview support information (Therapist and helplines)	443 - 444
H. Participant questionnaire and interview framework	445 - 455
I. Participant participation codes	456 - 459
J. Addendum: Gaslighting and coercive control overview for participants	460 - 464
K. Good Practice Guidelines for Research/Writing on Bisexuality https://doi.org/10.1080/15299716.2012.702618	465 – 468
L. Danger Assessment (Campbell, 2004) https://pmc.ncbi.nlm.nih.gov/articles/PMC7878014/	469
M. Prominent theories of IPA from researchers and psychologists	470 - 473
N. A Review of Interview Notes, Observations, and Conversations	474 - 484
O. Towards Prevention – A New Educational Model	485 - 503
P. Researcher publications. ‘Killing you softly.’	504
Q. Research publications too large to attach to this report. <u>The Bisexuality Report</u> . Bisexual inclusion in LGBT equality and diversity (Barker et al., 2012) https://bicomcommunitynews.co.uk/wp-content/uploads/2020/05/TheBisexualityReportFeb2012-1.pdf <u>Bisexual Invisibility</u> : Impacts and Recommendations (Lindasusan, 2011) https://phimc.org/wp-content/uploads/2018/08/Bisexual-Invisibility-Impacts-and-Recommendations.pdf	

Appendix A.

Glossary and terminology

All the content here is sourced or amalgamated from organisations that specialise in their areas of subject matter expertise on bisexuality, LGBT+ and intimate partner abuse. Other than the document's compilation, organisation and summarisation, none of this glossary content is my work. To ensure accuracy, definitions are presented as found to avoid misrepresenting the language, meaning or context in which these specialists developed them. A reference/source list is given at the end of the document. Additional definitions are added as a second paragraph to a topic. Where it is felt that additional information will benefit the understanding of the topic additional information is provided. Any omissions are unintentional and the responsibility of this researcher. All the content is freely available online.

Ace

A common abbreviation for asexual.

Abuse

Abuse is any action intentionally harming, injuring, or manipulating another person. It can take many forms, including physical violence, emotional manipulation, verbal insults, sexual coercion, or financial exploitation. Abuse often involves a pattern of behaviour where the abuser exerts power and control over the victim, leading to significant physical, psychological, or emotional harm. Abuse can occur in various relationships, such as intimate partnerships, family dynamics, workplaces, or institutional settings, and it has long-lasting effects on the victim's well-being.

Any action that intentionally causes harm or trauma to another living thing. In the case of intimate partner abuse, it's important to know that a person is abusive, not a relationship. Using the term "abusive relationship" is a misnomer, as it can imply both parties have some responsibility for the abuse. The correct way to define it is to say a person can be in a relationship with an abuser.

Abuse Indicators

Indicators are presenting problems or conditions that are associated with domestic violence and abuse. They can include:

- symptoms of depression, anxiety, post-traumatic stress disorder, sleep disorders
- suicidal tendencies or self-harming
- alcohol or other substance use
- unexplained chronic gastrointestinal symptoms
- unexplained reproductive symptoms, including pelvic pain and sexual dysfunction
- adverse reproductive outcomes, including multiple unintended pregnancies or terminations, delayed pregnancy care, miscarriage, premature labour and stillbirth
- unexplained genitourinary symptoms, including frequent bladder or kidney infections
- vaginal bleeding or sexually transmitted infections
- chronic pain (unexplained)
- traumatic injury, particularly if repeated and with vague or implausible explanations
- problems with the central nervous system—headaches, cognitive problems, hearing loss
- repeated health consultations with no clear diagnosis
- intrusive 'other person' in consultations, including partner or husband, parent, grandparent or an adult child (for elder abuse).

(Adapted from Black 2011.)

Abuser

An abuser is a person who intentionally engages in harmful or manipulative behaviour towards another individual, often to exert control or power over them. This behaviour can manifest in various forms, including physical violence, emotional manipulation, verbal abuse, sexual coercion, or financial exploitation. Abusers often use tactics like intimidation, threats, isolation, and blame to dominate their victims. Abuse can occur in different contexts, such as intimate relationships, family settings, workplaces, or institutions, and it can have severe and lasting effects on the victim's well-being.

Adverse Childhood Experiences (ACEs)

Events that occur during childhood, between birth to age 17, that likely cause trauma. Studies have shown that the more ACEs someone experiences, the higher the risk of chronic health problems as an adult. ACEs also increase the risk that an individual will experience domestic violence or be a perpetrator of domestic violence in adulthood.

Advocate

In the realm of domestic abuse, this is a person who supports survivors, helps connect them with information and resources, and can be an empathetic presence for them in their journey to safety, including in court. Advocates are found on the other end of shelter helplines as well as within Family Justice Centres, social services, the military and the court system.

Agender

A term often used by people who identify as outside the binary man/woman sex and gender categories or who decline to define themselves in terms of gender at all.

AIB Model

The AIB model highlights the three main elements that make up a person's sexuality: attraction, identity, and behaviour.

Allosexual

An adjective used to describe a person who experiences sexual attraction to others, and is not asexual (e.g., allosexual person).

Ally

An adjective used to describe a straight and/or cisgender person who supports and advocates for LGBTQ people. Plural is allies.

Androsexual/Androphilic

An adjective used to describe a person who is primarily sexually, aesthetically, and/or romantically attracted to masculinity.

Aromantic

An adjective used to describe a person who does not experience romantic attraction. Aromantic is an umbrella term that can also include people who are demiromantic, meaning a person who does not experience romantic attraction until a strong emotional or sexual connection is formed with a partner.

Asexual

- An adjective used to describe a person who does not experience sexual attraction (e.g., asexual person). Sometimes shortened to “ace.” Asexual is an umbrella term that can also include people who are demisexual, meaning a person who does experience some sexual attraction but only in certain situations, for example, after they have formed a strong emotional or romantic connection with a partner.
- Describes a person who does not experience sexual attraction. This is different from celibacy, a state of abstaining from sexual activity. On the Kinsey Scale, asexuality is denoted with an “X.”

Attraction

Evoking interest, pleasure, or a wish for closeness with another person based on sexual or romantic desire. A person's patterns of attraction (same-sex, different-sex, both, or none) is the foundation of sexual orientation.

Battered woman

In the 1970s, when the social movement to combat domestic violence started in earnest, survivors of abuse were often referred to as “battered” in conjunction with “battered woman syndrome”. The phrase is largely outdated now, replaced with “survivor” in many instances, though some shelters are still referred to as “battered women’s shelters.”

Battered woman syndrome

Originally introduced in the 1970s by psychologist Lenore Walker, this phrase was used to explain common experiences and behaviours of women who were abused by their intimate partners, similar to PTSD. It was used as a legal defence by women who fought back against

or killed their abusive partners. It isn't used as much today, as advocates say its definition is limited and can stigmatise survivors.

Behaviour

Regarding sexuality, behaviour refers to how a person interacts with others romantically or sexually. Along with attraction and identity, behaviour is one of the 3 main components of sexual orientation.

Bi

Bi is a shortened form of bisexual and is often used as an identity label.

Bias

A set of negative beliefs about a group of people with an actual or perceived shared identity.

Bi-elimination

Bi-elimination refers to the erasure or exclusion of bisexual identities and experiences within both heterosexual and LGBTQ+ spaces. It involves dismissing bisexuality as a legitimate sexual orientation, often forcing individuals into binary categories of either heterosexual or homosexual, based on the gender of their current partner.

Bi-erasure

Bi erasure is a tendency to ignore, remove, falsify, or reexplain evidence of bisexuality. Examples of bi erasure could include referring to all same-sex couples as "gay marriages"—the active denial of the existence of bisexuality, or a history book ignoring or dismissing a figure's bisexuality and instead labelling them as gay or straight.

Binary

A binary system has only two parts and two possibilities. Whatever the topic, humans tend to categorise people, ideas, and almost anything else as belonging to either group A or group B to make the world easier to understand. Regarding bisexuality, the prefix "bi-" in bisexuality refers to having both same-sex and different-sex attractions. It is not a commentary on the

number of genders available in a society. People's tendency to think of sexuality itself in terms of binaries is a significant source of biphobia.

Bi-umbrella

The bi umbrella refers to the fact that bisexual is a broad term for a sexual orientation. There are many identity labels that people may choose to use that fit under that umbrella.

Bisexual invisibility/bisexual erasure

This is the tendency to ignore, remove, falsify, or re-explain evidence of bisexuality in history, academia, news media, and other primary sources. It can also refer to questioning or denying the existence or legitimacy of bisexuality in general or regarding an individual.

Bi-visibility

Bi-visibility is about seeing and creating a bi-representation. Examples of bi visibility would be a person choosing to come out, wearing a bi shirt, having bi characters in media, or simply having bisexuality be a bigger part of the LGBT conversation.

Biphobia

Fear or hatred of bisexuals, sometimes manifesting in discrimination, isolation, harassment, or violence. Often, biphobia is based on inaccurate stereotypes, including associations with infidelity, promiscuity, and transmission of sexually transmitted diseases. *See also* homophobia, transphobia.

BIPOC

BIPOC stands for Black, Indigenous, (and) People of Colour as a term to honour the diverse experiences of racially oppressed groups in the U.S. with different proximity to power, privilege, and oppression.

Bisexual

- An individual whose enduring physical, romantic, emotional, and/or spiritual attraction is to people of more than one sex/gender. While some people call themselves *pansexual* or *omnisexual*, these terms should be avoided unless quoting someone who self-identifies that way. *VARIATIONS*: Fluid, ambisexual, pansexual
- A term often used by people who are attracted to people of their own and other genders, not limited to a binary understanding of gender. The “Bi” in bisexual refers to the person and someone else.

Bisexual, Bi, Bi+

An adjective used to describe a person who has the potential to be physically, romantically, and/or emotionally attracted to people of more than one gender, not necessarily at the same time, in the same way, or to the same degree. The *bi* in bisexual refers to genders the same as and different from one’s own gender. Do not write or imply that bi means being attracted to men and women. That is not an accurate definition of the word. Do not use a hyphen in the word bisexual.

People may experience this attraction in differing ways and degrees over their lifetime. Bisexual people need not have had specific sexual experiences to be bisexual; in fact, they need not have had any sexual experience at all to call themselves bisexual. Some people use the words bisexual and bi to describe the community. Others may use bi+, which is intended to be inclusive of those who call themselves bisexual, pansexual, fluid, queer and other words which describe people who have the potential to be attracted to more than one gender. Similar to questioning, people might say they are bicurious if they are exploring whether or not they are attracted to people of the same gender as well as people of other genders.

Bisexual discrimination/Biphobia

Bisexual discrimination, also known as biphobia, refers to the prejudice, stereotyping, and unequal treatment faced by bisexual individuals from both heterosexual and LGBTQ+ communities. This form of discrimination includes misconceptions that bisexuality is a phase, that bisexuals are promiscuous or incapable of monogamy, and that they are less committed to their relationships. Bisexual individuals often face social exclusion, invisibility, and erasure, which can lead to mental health challenges, such as anxiety and depression. Bisexual discrimination perpetuates stigma and reinforces the marginalisation of bisexual people.

Burnout

A state of physical, emotional and mental exhaustion caused by a long-time involvement in emotionally demanding situations

Casework

Casework for Intimate Partner Abuse refers to the professional support and services provided to individuals affected by IPA. This involves assessing the victim's safety, providing emotional support, and assisting them navigate legal, medical, and social services. Caseworkers develop individualised safety plans, connect victims with shelters, counselling, and legal resources, and advocate on their behalf.

Child abuse

Not adequately caring for a child that results in physical, emotional or sexual harm, or exploitation. Studies show that it is highly likely that domestic violence and child abuse will occur simultaneously. Anywhere from 30 per cent to 60 per cent of perpetrators of partner abuse also abuse children in the household.

Child Abuse Accommodation Syndrome (CAAS)

Child Abuse Accommodation Syndrome is a theory first proposed by psychologist Roland Summit in the 1980s to explain how children attempt to cope with and adapt to the experience of sexual abuse. Summit argued that children who are sexually abused go through a series of stages in their efforts to reconcile the trauma with the need to survive within their family environment. Here are the key components of CAAS:

1. **Secrecy:** Due to the perpetrator's manipulation or direct threats, the child keeps the abuse a secret.
2. **Helplessness:** The child feels powerless to stop the abuse due to physical or psychological dominance by the abuser.
3. **Entrapment and Accommodation:** Recognizing that escaping the situation is not feasible, the child tries to manage the situation by accommodating the abuser.
4. **Delayed, Conflicted, and Unconvincing Disclosure:** When children do disclose the abuse, their accounts may be ambiguous or contradictory, often due to the complex emotions and conflicts they feel.

5. **Retraction:** Under pressure from family members or the abuser, or due to guilt and fear of the consequences, children may withdraw their allegations.

Child custody

Referring to who has shared children living with a parent after a separation or divorce (physical custody) and who can make decisions for a child, usually regarding school and medical choices (legal custody). Custody is often a point of contention after domestic abuse, with some abusers utilising post-separation legal abuse to continue their torment of a protective parent.

Childhood domestic violence (CDV)

A term often used to describe the effects of children who grow up witnessing and/or are direct victims of domestic abuse by a parent's spouse or partner. CDV can result in lifelong mental and physical health consequences if there is not adequate intervention.

Choking

The term is often mistakenly used to describe strangulation. Choking technically refers to an item lodged in one's airway that restricts breathing, not the act of someone putting their hands around another's neck.

Cis

An abbreviation of cisgender.

Cisgender

Cisgender refers to someone whose apparent reproductive sex is in alignment with their gender identity. It is generally regarded as the opposite of transgender.

Civil Union

Historically used in the U.S. to describe state-based relationship recognition for same-sex couples that offered some or all of the state rights, protections, and responsibilities of marriage, but none of the federal rights. While many Western countries (including the United States) have now legalised marriage equality, others only legally recognise same-sex relationships through civil unions or other legal partnerships.

Closeted

Describes people who are not open about their sexual orientation and/or gender identity. Note, though that for a transgender person, being closeted is different from passing as one's preferred gender, which does not have the negative connotation of hiding something (see *passing* below).

Consent

Fully formed, freely given, and enthusiastic permission for what someone is okay with about their body. A person cannot give consent if they are being physically forced, guilty, manipulated, threatened or coerced. Consent can be withdrawn at any time and is not contingent upon relationship status or consent previously given. Consent cannot be given if the person is underage, incapacitated, sleeping, physically helpless, or has certain disabilities.

Consensual Non-Monogamy

Consensual non-monogamy is when people choose to have non-exclusive romantic or sexual relationships. This may take the form of swinging, polyamory, or whatever else is negotiated. This is distinct from infidelity in that all parties are aware of and happy with the arrangement.

Controlling behaviour

Controlling behaviour involves a range of acts designed to make a person subordinate or dependent. This could range from isolating them from sources of support to exploiting them for personal gain. It can also involve depriving them of the means to be independent, including stopping them from leaving and regulating their everyday behaviour.

Cross-Dresser, Transvestite

An individual who occasionally wears clothes traditionally associated with people of a different sex. Cross-dressers are usually comfortable with the sex they were assigned at birth and do not wish to change it. "Cross-dresser" should NOT be used to describe someone who has transitioned to live full-time as a different sex, or who intends to do so in the future. Some people prefer to use the term *transvestite* to describe themselves, but it is not universally

accepted and should be avoided unless quoting someone who self-identifies that way. *See also* gender expression.

Coercion

Attempting to or forcing another person to act differently

Coercive control

Any pattern of behaviour an abuser uses to dominate their partner in all areas of their life, limiting their freedom. This can include physical violence, but often, coercive control is more subtle and relates to things like isolation, stalking, gaslighting and intimidation. It is present in almost all cases of domestic abuse.

Cultural discrimination

Cultural discrimination is the unjust treatment of individuals or groups based on cultural differences, including race, ethnicity, language, religion, or customs. It involves devaluing certain cultures while privileging others, often leading to social exclusion, marginalisation, and inequality. This form of discrimination can manifest in various areas such as employment, education, healthcare, and media representation, where the dominant culture's values and norms are imposed, marginalising those of minority cultures. Cultural discrimination perpetuates stereotypes, prejudice, and systemic injustice, reinforcing social hierarchies and power imbalances.

Cultural misogyny

Cultural misogyny refers to the widespread and ingrained attitudes, practices, and beliefs within a culture that devalue, disrespect, or discriminate against women. This form of misogyny manifests through various social norms, media portrayals, and institutional structures that perpetuate gender inequality and reinforce stereotypes that marginalise or oppress women. It often results in the normalisation of gender-based violence, discrimination, and exclusion of women from positions of power and influence within society. Cultural misogyny is deeply embedded in the fabric of many societies, making it a significant barrier to achieving gender equality.

Culturally Responsive

Survivors' experiences and needs are different depending on their class, race/ethnicity, culture, age, sexual orientation, gender identity or expression, geography, and many other lived experiences and identities. Culturally responsive services respond to these differences to actively meet the needs of all survivors and communities.

Cycle of Abuse

The theoretical concept that abuse often follows a pattern, which includes three main stages: honeymoon, tension building, and explosion. The honeymoon stage often involves the abusive partner being charming and sweet and, quite possibly, apologising for the last explosion. They may give gifts, cry, and beg for forgiveness. Tension building is the stage where the abusive partner starts yelling more, nitpicking, acting moody, and using put-downs. The explosion stage can involve the use of a weapon, humiliating, hurting, and sexually abusing a partner. Then the cycle begins again; each time, the honeymoon stage gets shorter and less intense, and the explosion becomes more violent or abusive.

DARVO

An acronym that refers to three steps an abusive partner takes to avoid responsibility for abuse – deny, attack, reverse victim and offender (Harvey et al, 2017)

Dating Abuse

This refers to abuse that happens between two people who are dating. The most common age in which intimate partner abuse first occurs is between 18 and 24, with the next most common age group being 11 to 17.

Different-Sex Couple

A romantic pairing involving two people of different sexes. The individuals involved may identify with any sexual orientation.

Discrimination:

- The denial or interference with accessing services or resources based on individual or institutional bias.
- Discrimination is the unfair or prejudicial treatment of individuals or groups based on characteristics such as race, gender, age, religion, sexual orientation, disability, or other personal attributes. It involves actions, policies, or behaviours that create disadvantages for certain groups while privileging others. Discrimination can manifest in various forms, including social exclusion, unequal access to resources and opportunities, and systemic inequalities. It perpetuates social injustice and reinforces power imbalances, contributing to the marginalisation and oppression of affected individuals or groups.
- Discrimination refers to the unfair or prejudicial treatment of individuals or groups based on characteristics such as race, gender, age, religion, sexual orientation, disability, or cultural background. It involves actions, policies, or practices that result in unequal access to resources, opportunities, and rights, often perpetuating social inequality and injustice. Discrimination can occur in various forms, including overt actions like harassment or more subtle practices like institutional biases that disadvantage certain groups while privileging others. This contributes to social exclusion and reinforces systemic inequalities.

Domestic Partnership

Civil/legal recognition of a committed relationship between two people that sometimes extends limited legal protections to them.

Domestic Violence/Abuse

Domestic violence or domestic abuse involves a person exerting power and control over a partner. The relationship may be long-term or dating or anywhere in between. Domestic violence is not always physical; it can also be in emotional, psychological, sexual, verbal, and financial. In this thesis, the term “partner abuse” refers to both domestic violence and sexual assault.

Drag Queen, Drag King

An individual who wears clothes traditionally associated with people of a different sex primarily as a costume or persona, usually in the context of a public event or performance. The outfits of drag queens/kings often include elements that are exaggerated or over-the-top, such as elaborate gowns or fake facial hair.

Domestic Abuse/Intimate Partner Abuse

Intimate partner abuse, also known as domestic violence, refers to a pattern of behaviour used by one partner to gain or maintain power and control over the other partner in an intimate relationship. This abuse can be physical, emotional, sexual, psychological, or financial. It often involves tactics like intimidation, manipulation, isolation, and threats. Intimate partner abuse can occur in any relationship, regardless of gender, sexual orientation, or socioeconomic status, and it can have severe emotional and physical consequences for the victim.

Domestic violence – see ‘Domestic Abuse’; often only associated with physical abuse

Double Discrimination

This term describes the unique discrimination faced by bisexual individuals, stemming both from the heterosexual community and from within the LGBTQ+ community.

DSD

An acronym that can stand for both "Differences of Sexual Development" or "Disorders of Sexual Differentiation," both more modern terms for intersex conditions. Many medical care professionals and activists prefer the term DSD because intersex conditions are frequently misunderstood in academic and online discourse and because intersex has come to be used as an identity label by people who do not have the chromosomal, hormonal, or developmental differences that the term was originally intended to describe.

Dyke

Traditionally a pejorative term, *dyke* has been reclaimed by many lesbian and bisexual women to describe themselves. Some value the term for its defiance. Nevertheless, it is not universally accepted and should be avoided unless quoting someone who explicitly identifies as such.

Elder abuse

The intentional or negligent mistreatment of an adult over age 60. It can include physical, sexual, emotional or psychological abuse, as well as neglect, abandonment or the illegal use of an elder's finances for someone else's gain.

Emotional abuse

Using a victim's emotions or manipulating their mental state to control them is referred to as emotional or psychological abuse. The abuser tries to tear down a victim's self-esteem through mind games, insults, humiliation, or attempting to convince the victim he or she is mentally unstable or to blame for the abuse. This can also be known as verbal abuse.

Families of choice

Families of choice describe alternative familial structures formed by LGBTQ+ individuals outside traditional biological or legal family units. These families are built based on mutual support, care, and emotional bonds rather than blood relations or marriage.

Family Justice Centres

A place where survivors of domestic violence, sexual assault, child abuse and human trafficking can access a multitude of services in one centralised location, such as counselling, shelter, legal or law enforcement support, parenting assistance and basic needs like clothing. Their goal is to reduce the number of places survivors need to go to access services.

Financial abuse

When an abuser uses finances to exert power and control over a victim. This may include stealing a partner's money, making a survivor beg for money, giving a survivor an allowance, opening credit cards in the survivor's name in order to ruin their credit, preventing the

survivor from accessing bank accounts, not allowing the survivor to get a job, forcing a survivor to work or failing to pay child support and expenses during a custody dispute.

Forced marriage

A forced marriage is one in which one or both spouses do not (or, in the case of some adults with learning or physical disabilities, cannot) consent to the marriage but are forced into it using physical, psychological, financial, sexual or emotional pressure.

Gaslighting

A tactic of abusers in which they use manipulation to create doubt in a survivor's mind that the survivor can trust their own memories, instincts or beliefs. The name comes from a 1930s play called "Gas Light" in which the main character attempts to drive his wife crazy by dimming the lights in their home, which were powered by gas, and then denies the lights are changing.

Gay

- An individual whose enduring physical, romantic, emotional, and/or spiritual attraction is to people of the same sex. The term usually applies specifically to men. In contemporary contexts, *lesbian* is often a preferred term for women, though some women of colour, working-class women, and older women still describe themselves as gay. Avoid using *gay* as a collective adjective when *LGBT* would be more accurate (for example, *LGBT movement* rather than *gay movement*).
- Most used to describe men, gay indicates that a person is attracted to people of the same sex. It most often describes men who are physically, emotionally, and sexually attracted to other men. The word "gay" describes a sexual orientation and can include attraction, partnering patterns, sexual behaviours, or any combination of these. If a person identifies as gay, this does not mean they have had a same-sex relationship or have had sex with a person of the same sex.

Gender

Gender refers to the roles, behaviours, activities, and attributes that a given society considers appropriate for men, women, and people of other gender identities. It includes gender

identity (how one perceives oneself) and gender expression (how one presents oneself to others). Unlike sex, gender is socially and culturally constructed.

Gender-Based Violence

Violence or threats that happen because of someone's sex, gender, sexual orientation, gender identity or expression, or other related characteristics.

Gender binary

A system in which gender is constructed into two strict categories of male or female. Gender identity is expected to align with the sex assigned at birth and gender expressions and roles fit traditional expectations.

Gender Dysphoria

A feeling of profound discomfort with the gender norms associated with one's sex.

Gender Expression

The external manifestation of one's gender identity is usually expressed through "masculine," "feminine," or gender-variant behaviour (including interests and mannerisms), clothing, haircut, voice, or body characteristics.

Gender Identity

- The way people experience, understand and identify their own gender.
- Gender identity is an elaborate set of cultural norms around reproductive sex used to define and communicate a person's role in society. Gender norms can dictate how a person speaks, dresses, behaves, and even what professions are available to them. Gender identity describes a person's inner sense of where they fit—or don't—within these norms.
- One's internal, personal sense of being male, female, or third-gender. For transgender and third-gender people, their birth-assigned sex and their own internal sense of gender identity do not match.

Gender Identity Disorder (GID)

A controversial DSM-IV diagnosis given to transgender and other gender-variant people. Because it labels people as “disordered,” *gender identity disorder* is often considered offensive. Replaces the outdated term *gender dysphoria*.

Gender non-conforming

A term often used by those whose gender expression may not conform to what is expected of someone with their gender identity.

Gender performance

Gender performance is a concept introduced by Butler (1990), which suggests that gender is not an inherent identity but rather an ongoing set of actions or behaviours that people perform based on societal expectations. According to this theory, individuals "perform" their gender through behaviours, dress, speech, and other actions that align with societal norms for masculinity or femininity. Butler argues that these performances create the illusion of a stable gender identity, but in reality, gender is fluid and constructed through repeated actions over time

Gender pronouns

The pronouns a person chooses to use for themselves may correspond to their gender identity. Gender pronouns are the pronouns we use to refer to people in sentences and conversations.

Gender queer

Genderqueer people typically reject notions of static categories of gender and embrace a fluidity of gender identity and often, though not always, sexual orientation. People who identify as "genderqueer" may see themselves as being both male and female, neither male nor female or as falling completely outside these categories.

Gender-variant

Refers to anyone whose gender identity varies from the male/female binary, including transgender and third-gender people.

Grooming

A predatory tactic of abusers meant to elicit a strong emotional bond with a potential victim, often a young or underage individual. The abuser may start with an abundance of attention, care, flattery and romance to get the victim to trust them before the abuser becomes controlling and potentially dangerous.

Gynesexual/gynephilic

An adjective used to describe a person who is primarily sexually, aesthetically, and/or romantically attracted to femininity.

Helpline

A free telephone service to provide support

Heterosexual

Heterosexual refers to a sexual orientation in which an individual is romantically or sexually attracted to people of the opposite gender. For example, a heterosexual man is attracted to women, and a heterosexual woman is attracted to men. This term is commonly used to describe people who experience attraction exclusively to the opposite sex, which is often considered the societal norm in many cultures.

An adjective used to describe a person whose enduring physical, romantic, and/ or emotional attraction is to people of a sex different than their own. Also: straight.

Heteroflexible

An identity label that falls under the bi umbrella that describes people who mostly exhibit heterosexual attraction patterns but occasionally experience same-sex attraction.

Heteronormativity

The set of power relations that normalise and regiment sexuality, marginalising everything outside the ideals of heterosexuality, monogamy, and gender conformity.

Heterosexism; Heterosexual Privilege

Heterosexism is the attitude that heterosexuality is the only valid sexual orientation. It often takes the form of ignoring bisexuals, gay men, and lesbians. Heterosexual privilege refers to the benefits granted automatically to heterosexual people that are denied to bisexuals, gay men, and lesbians. Bisexuals are sometimes accused of hiding behind “heterosexual” privilege when they are in different-sex couples.

Honeymoon Stage

Abuse in relationships may in some cases follow a cyclic pattern. The honeymoon stage often follows an outburst or explosion of abuse by the abusive partner. During the honeymoon stage, the abuser may apologise, buy gifts, beg for forgiveness, vow never to do it again, and be very emotional about what happened.

Homophobia

- Prejudice or hatred toward gay, lesbian, bisexual, or queer people, expressed in speech or actions. Intolerance, bias, or prejudice is usually a more accurate description.
- Fear or hatred of lesbians and gay men, sometimes manifesting in discrimination, isolation, harassment, or violence. *Prejudice* is usually a more accurate description of hatred or antipathy toward LGBT people. *See also* biphobia, transphobia.
- A range of negative thoughts, actions, or feelings about someone who is or is perceived to be gay or lesbian. Anyone can act in a homophobic way. An abuser may use homophobia by calling a partner “fag” or “dyke” in a derogatory way. An abuser could also use mainstream homophobic beliefs to abuse a partner; a few examples include saying that homophobia is a sin, justifying sexual behaviours, or threatening to out the survivor to friends, coworkers, or family members.

Homosexual

Outdated clinical term considered derogatory and offensive. Homosexuality is a sexual orientation that describes people who exclusively experience romantic or sexual attraction to a sex that is the same as their own. The term is considered offensive by some LGBT+ people. The term "homosexual" has been increasingly considered offensive by some because it has

historically been used in medical and psychological contexts to pathologise same-sex attraction. The term can also carry a clinical or stigmatising connotation, which may feel outdated or alienating. Many people prefer terms like "gay," "lesbian," or "bisexual," which are seen as more affirming and reflective of identity rather than a medical condition.

Hope Score

A measurement used by researchers to determine an individual's feelings of hope, particularly after trauma. Developed in the early '90s by psychologist C.R. "Rick" Synder, PhD, a professor out of the University of Kansas.

Human trafficking

The modern-day trade of humans for sexual slavery, forced labour, or exploitation. In the realm of domestic violence and abuse, young victims can be groomed by a predator to believe they are in a relationship with that person, only to then be used for sexual exploitation, forced sexual slavery or forced labour as a means of control and profit.

Identity

Identity is how a person conceptualises themselves and wishes to be seen and thought of by others. It is a social construct highly influenced by factors such as cultural background, education, class, social incentives, and religion. Along with attraction and behaviour, identity is one of the three main components of sexual orientation.

Intersectionality

Intersectionality is a framework for understanding how various forms of social stratification, such as race, gender, class, and sexuality, overlap and intersect to create unique experiences of oppression and privilege. The concept highlights that these social categories are not independent of one another but are interconnected, leading to complex systems of discrimination and disadvantage. Intersectionality emphasises that people's experiences are shaped by multiple, interrelated factors, and addressing social inequalities requires considering these overlapping identities (Crenshaw, 1989)

Intersex; Person with Intersex

A term often used by people who may experience a variety of conditions in which a person is born with a reproductive or sexual anatomy that doesn't seem to fit the typical definitions of female or male. Intersex is a socially constructed category that reflects biological variation.

Describes a person whose biological sex is ambiguous. There are many genetic, hormonal, or anatomical variations that can make a person's sex ambiguous (such as Klinefelter Syndrome or adrenal hyperplasia).

VARIATIONS: Disorder of sex development; person with an intersex condition

Intimate partner abuse/violence

- This is another term for domestic violence, sometimes also referred to as domestic abuse. While domestic violence typically refers to abuse happening between two people in a relationship, including a spouse and partner, parent and child, siblings, etc., intimate partner violence refers more specifically to abuse by a spouse or ex-spouse, or a dating partner or ex-dating partner. Intimate partner violence does not require sexual intimacy to occur.
- A term often used in LGBTQIA+ communities to refer to power and control dynamics in relationships, similar to domestic violence, but recognising that term often only applies to traditional heterosexual relationships.

'Honour'-based violence or 'honour' violence

A crime or incident committed (or possibly committed) to protect or defend the perceived 'honour' of a family or community. Often this term is enclosed in quote marks, or prefaced with 'so-called', to emphasise that the concept of honour in these cases is contested and that it is generally invoked as a means of power and control.

Internalised Homophobia/Biphobia

Some lesbian, gay, and bisexual (biphobia) people experience negative feelings toward themselves related to sexual orientation. Regardless of whether a person is in an abusive relationship or not, internalised homophobia can lead to feelings of low self-esteem, a desire to not be out, and possibly abuse of alcohol or other drugs to cope with negative feelings or denial.

Internalised Transphobia

Some transgender people experience negative feelings toward themselves related to gender identity. Regardless of whether a person is in an abusive relationship or not, internalised transphobia can lead to feelings of low self-esteem, a desire to not be out, and possibly abuse of alcohol or other drugs to cope with negative feelings or denial.

Intersectionality

Intersectionality is an examination of how identities connect and create different experiences within oppressive, marginalising, and discriminatory systems.

Intimate Partner Violence (IPV). Intimate Partner Abuse (IPA)

Intimate partner violence includes domestic violence and sexual assault that happen in any relationship from a first date to a long-term relationship. IPV includes all types of abuse: emotional, verbal, psychological, physical, sexual, and financial. People who abuse their partners in these ways use power and control to isolate and threaten their partners. Partners do not need to live together for IPV to occur. Sexual assault or rape does happen as part of IPV in some relationships. IPV is mainly referred to as “partner abuse” in this thesis.

Intimidation

When one person uses threats to cause fear or coercion

Isolation

In domestic abuse/violence, isolation is a common and typically early tactic of abusers to keep a survivor under their control by separating them from support persons, such as friends and family, who may notice indicators of abuse. This could mean convincing a survivor to unfriend individuals close to them, not visit or speak to family, quit their job or studies, or move to a far-away or rural location.

Kinsey Scale

The Kinsey Scale is a tool developed by Alfred Kinsey. It expresses sexual orientation on a scale from 0, meaning exclusively heterosexual, to 6, meaning exclusively homosexual. "X" denotes asexuality. Scores within the range of 1 and 5 are along the spectrum of bisexuality.

Klein Grid

The Klein Grid is a tool developed by Fritz Klein that builds on Alfred Kinsey's work and his Kinsey Scale. It provides a more nuanced look at attraction patterns over time and how they change.

Lifestyle

This inaccurate term is used by anti-LGBTQ activists to denigrate LGBTQ people and inaccurately imply that being LGBTQ is a voluntary or a "choice." As there is no one straight lifestyle, there is no one LGBTQ lifestyle.

Marriage or Marriage Equality

In June 2015, the U.S. Supreme Court ruled in *Obergefell v. Hodges* that every American has the constitutional right to marry the person they love. When reporting on marriage for same-sex couples, preferred terminology includes marriage equality, marriage for same-sex couples, or just marriage. Note, the terms "gay marriage" and "same-sex marriage" should be avoided, as they can suggest marriage for same-sex couples is somehow different or less equal than other marriages.

Minority Stress

Stress experienced as a result of being a stigmatized minority group member, which can exacerbate experiences of IPV among bisexual individuals.

Monosexism

A form of biphobia, monosexism refers to the assumption that people are only capable of attraction to one sex. Monosexism views sexual orientation as a rigid binary, where people can only be either heterosexual or homosexual in orientation.

Monosexual

Monosexual means that a person only exhibits heterosexual or homosexual attraction patterns.

Lesbian

A woman whose enduring physical, romantic, and/or emotional attraction is to other women. Some lesbians may prefer to identify as gay (adj.) or as gay women. Avoid identifying lesbians as “homosexuals.” Lesbian can be used as a noun or adjective. *AVOID*: Homosexual

LGBTQ

Acronym for lesbian, gay, bisexual, transgender, and queer. The Q generally stands for queer when LGBTQ organisations, leaders, and media use the acronym. In settings offering support for youth, it can also stand for questioning. LGBT and LGBTQ+ are also used, with the + added in recognition of all non-straight, non-cisgender identities. Both are acceptable, as are other versions of this acronym. The term “gay community” should be avoided, as it does not accurately reflect the diversity of the community. Rather, LGBTQ community or LGBTQ+ community are recommended.

LGBT+ Abuse

Abuse towards or between someone in the lesbian, gay, bisexual and transgender communities.

Mandated reporter

Also known as a mandatory reporter, these individuals have a duty to report known or suspected abuse or neglect of children, elders or dependent adults to protective services. Laws vary by jurisdiction as to who is mandated to report, but these individuals may include social workers, medical professionals, teachers and law enforcement officers.

Marriage Equality

Access to civil marriage regardless of sexual orientation and/or gender identity. If necessary to distinguish between different types of rights, benefits, etc., use *same-sex marriage* and

different-sex marriage. However, because same-sex couples are seeking access to an existing structure rather than trying to create a new one, it is preferable to refer to *marriage equality* whenever possible.

AVOID: Gay marriage

Misogyny

The hatred of, contempt for, or prejudice against women or girls. It is a form of sexism that can keep women at a lower social status than men, thus maintaining the social roles of patriarchy.

MSM

Men who have sex with men. This term is used, particularly in research, to describe sexual behaviour as distinct from sexual orientation.

MSMW

Men who have sex with men and women. This term is used, particularly in research, to describe sexual behaviour as distinct from sexual orientation.

Nonbinary

Nonbinary is an adjective used by people who experience their gender identity and/or gender expression as falling outside the binary gender categories of man and woman. Many nonbinary people also call themselves transgender and consider themselves part of the transgender community. Others do not. Nonbinary is an umbrella term encompassing many different ways to understand one's gender. Some nonbinary people may also use words like agender, bigender, demigender, pangender, etc. to describe how they are nonbinary. Always ask people what words they use to describe themselves. Nonbinary is sometimes shortened to enby. Do not use NB, as that is often shorthand for non-Black. Nonbinary may also be written as non-binary. Both forms are commonly used within the community and both are acceptable.

Omnisexual

Omnisexual is an identity label that falls under the bi umbrella with a political emphasis on gender non-conforming individuals.

Openly Bisexual/Gay/Lesbian/Transgender

Describes people who self-identify as bisexual/gay/lesbian/transgender in their public and/or professional lives. Unless the openness is important in context, it is preferable simply to describe the person as bisexual, gay, lesbian, or transgender. This phrase is now dated.

“Openly gay” has been used to describe people who self-identify as gay in their personal, public, and/or professional lives. Also openly lesbian, openly bisexual, openly transgender, openly queer. While technically accurate, the phrase implies a confessional aspect to publicly acknowledging one’s sexual orientation or gender identity. It is now better to avoid this phrase.

Oppression

Systems of power and privilege, based on bias, which benefit some social groups over others. Oppression can 1) take many forms, including ideological, institutional, interpersonal and internalized; 2) be intentional and unintentional; 3) be conscious and unconscious; and, 4) be visible and invisible. Oppression prevents the oppressed groups and individuals from being free and equal. Many people face oppression based on more than one of their identities, creating a unique complexity of challenges and resilience.

Oppression forms

- Ableism: A system of oppression that benefits able-bodied people at the expense of people with disabilities.
- Classism: A system of oppression that benefits people with high and middle socioeconomic status at the expense of people with lower socioeconomic status.
- Genderism: A system of oppression that benefits cisgender people at the expense of transgender and gender-nonconforming people. Genderism may take the form of Transphobia, bias and discrimination towards transgender and gender-nonconforming people.

- **Heterosexism:** A system of oppression that benefits straight/heterosexual people at the expense of lesbian, gay and bisexual people. Heterosexism may take the form of Homophobia or Biphobia, bias and discrimination towards lesbian, gay and bisexual people.
- **Racism:** A system of oppression that benefits white people at the expense of people of colour.
- **Sexism:** A system of oppression that benefits male-identified people at the expense of female-identified people.

Out/Coming Out/Outing

- Being out describes a person who is open about being bisexual, gay, lesbian, or transgender. Coming out is a lifelong process of self-acceptance of one's sexual orientation and/or gender identity. People forge an identity first for themselves and then may reveal it to others. Publicly identifying one's sexual orientation and/or gender identity may or may not be part of coming out. Outing is the act of publicly declaring or revealing another person's sexual orientation (sometimes based on rumour and/or speculation) without that person's consent; it is considered inappropriate by a large portion of the LGBT community.
- A lifelong process of self-acceptance. People come to understand their own sexual orientation first, and then they may reveal it to others. It is not necessary to have sexual experiences to come out as LGBTQ, nor is it necessary to tell others. It is possible to simply be out to one's self.

Outing

The act of publicly revealing (sometimes based on rumour and/or speculation) another person's sexual orientation or gender identity without that person's consent. Considered inappropriate and potentially dangerous by a large portion of the LGBTQ community.

Pansexual

- Pansexual is a sexual orientation characterised by the potential for romantic or sexual attraction to people regardless of their gender. This means that a pansexual person

can be attracted to individuals of any gender identity, including men, women, non-binary, and gender-fluid people. Pansexuality emphasises the attraction to a person based on their qualities and personality rather than their gender.

- An adjective used to describe a person who has the capacity to form enduring physical, romantic, and/ or emotional attractions to any person, regardless of gender identity. This is one of several terms under the bi+ umbrella.
- A term often used by people who are attracted to people of all genders.

Parental alienation

When weaponised by an abuser, this term is used in family court to shift blame to a protective parent who is trying to keep their children away from the abusive parent. In the 1980s, a psychiatrist named Richard Gardner created a now-debunked diagnosis of “parental alienation syndrome” that was used mostly against women who were trying to keep their children safe from an abuser. However, many advocates and survivors alike argue that it is the abuser who attempts to alienate children from the protective parent and take custody as a means of power, control and torture after separation.

Partners

People who are in a romantic or sexual relationship

Partner Abuse

– see ‘Domestic Abuse’

Passing

When applied to a transgender person, describes someone living as her/his preferred gender without (or rarely) being questioned. However, when applied to a bisexual, gay, or lesbian person, the word takes on a negative connotation (see also *closeted*).

Patriarchy

The term "patriarchy" refers to a social system where men hold disproportionate power over women in various aspects of life, such as politics, economics, and culture. In patriarchal

societies, men enjoy more privileges and opportunities, while male values and beliefs shape cultural norms. This system often perpetuates the belief that men should dominate both family and society, leading to the acceptance of violence against women. Patriarchy contributes to social inequalities, discrimination, and injustice, with gender-biased laws and punishments that often disproportionately affect women.

Perpetrator

This is the abuser, also sometimes referred to as the batterer. In court, this person is the defendant or the person accused of a crime. The victim is the plaintiff, or the person accusing the defendant of a crime.

Person receiving harm

A person who has experienced violence from a person or a system. The term has been popularised in restorative justice practice. See also *victim*, *survivor*.

Physical Abuse

- Physical abuse is the intentional use of force against another person that results in injury, pain, or bodily harm. This can include behaviours such as hitting, slapping, punching, kicking, choking, or using objects to cause harm.
- A pattern of repeated contact by an abuser that is violent, intimidating, controlling or nonconsensual to exert power and control. This can include, kicking, hitting, slapping, shoving, shaking, burning, hair-pulling, strangulation or using a weapon against a survivor.

Plus (+)

Including “+” at the end of an acronym that refers to gender identity and/or sexual orientation acknowledges that language and terminology are ever-evolving and that identities are as infinite as the individuals and groups who use them.

Polyamory

Polyamory is a form of consensual non-monogamy in which participants may have multiple romantic attachments.

Poly-victimization

Experiencing multiple lifetime exposures to various types of traumatic events or victimisations, such as physical abuse, sexual abuse, exposure to family violence, neglect and bullying, and usually at the hands of multiple perpetrators.

Positionality

Positionality refers to where one is located in relation to their various social identities (gender, race, class, ethnicity, ability, geographical location etc.); the combination of these identities and their intersections shape how we understand and engage with the world, including our knowledges, perspectives, and teaching practices. As individuals and as instructors, we occupy multiple identities that are fluid and dialogical in nature, contextually situated, and continuously amended and reproduced (Alcoff, 1988).

Post-separation abuse

Abusive tactics that are employed by the abuser after a survivor separates from the abuser. This can include economic abuse, legal abuse, alienating the survivor from friends and family, stalking, threats, sexual abuse and child abuse or counter-parenting. It may also involve the misuse of the court system against the victim by accusing them of criminal or abusive behaviours against shared children.

Post Traumatic Stress Disorder (PTSD)

A mental health condition triggered by experiencing or witnessing a traumatic event, such as violence, natural disasters, or severe accidents. Individuals with PTSD may suffer from intense, disturbing thoughts and feelings related to the event, which can manifest as flashbacks, nightmares, severe anxiety, and uncontrollable thoughts about the trauma.

Power and control

Rooted in the perceived entitlement of abusers, this phrase is often used to describe the reason abusers choose to abuse. Many abusers implement power in the form of intimidation or withholding basic needs to control or force a partner to act a certain way or do what an abuser demands.

Power and Control Wheel

- A tool used to understand the various behaviours used by abusers to maintain power and control over their partners, including tactics specific to the experiences of bisexual individuals.
- The power and control wheel is a tool with a long history in the partner abuse movement. It is a diagram that appears as a wheel with power and control at the centre, and various types of abuse, with examples, as its spokes. (Domestic Abuse Intervention Programs (DAIP). 2024)

Preferred Gender Pronouns (PGPs)

This term refers to what pronouns an individual would like used when being addressed. While some individuals prefer pronouns like “he” or “she,” others may prefer gender-neutral pronouns that do not indicate femininity or masculinity. It is best to ask what pronouns each person prefers rather than assuming or guessing.

Protective parent

The parent who is not abusive in a relationship where intimate partner abuse or child abuse occurs. This phrase is often heard in custody or other legal hearings when describing the parent who is trying to keep their children safe from an abuser’s manipulation, control or violence.

Protection Order

Also known as a temporary protection order (TPO), permanent protection order (PPO), personal protection order (PPO), an order of protection (OOP), protection from abuse order (PFA), an emergency protection order or a restraining order, this is a document issued by a

circuit court, or during a criminal or civil case, and is designed to stop violent or harassing behaviour, including stalking.

Reflexivity

Reflexivity is the recognition of the assumptions, beliefs, opinions and values that researchers and writers themselves bring to their research and writing. It involves acknowledging the impact that these are likely to have on the research, and attempting to ameliorate this, to some extent, through as much openness as possible about such assumptions and through the willingness to be challenged and disputed. (Barker et al, 2012 381-382)

Queer

An adjective used by some people, particularly younger people, whose sexual orientation is not exclusively heterosexual (e.g. queer person, queer woman). Typically, for those who identify as queer, the terms lesbian, gay, and bisexual are perceived to be too limiting and/or fraught with cultural connotations they feel do not apply to them. Once considered a pejorative term, queer has been reclaimed by some LGBTQ people to describe themselves. However, it is not a universally accepted term even within the LGBTQ community, so use caution when using it outside of describing the way someone self-identifies or in a direct quote. When Q is seen at the end of LGBT, it typically means queer. In a setting for support, particularly for youth, it may mean questioning.

Questioning

Refers to people who are uncertain as to their sexual orientation and/or gender identity. They are often seeking information and support during this stage of their identity development.

Rape

A type of sexual assault with actual or attempted penetration of the vagina, anus, or mouth without the consent of the victim.

Rape culture

An environment with cultural norms, stereotypes and institutions that contribute to sexual violence, while ignoring the realities of sexual violence. The impact of rape culture is different for everyone but occurs across sex and gender.

Rape/Sexual Assault

Rape / Sexual assault includes unwanted, coercive, non-consensual sexual contact. Rape includes oral, vaginal, and anal sex. Sexual assault also includes: touching genitalia, chests/breasts, and other body parts without permission. Rape does happen in relationships. Rape does happen to LGBTQ people. It can happen as part of a date or a longer relationship.

Refuge/Shelter

A sheltered place to live when leaving an abusive home. A safe space.

Reproductive coercion

A tactic of abuse in which a perpetrator or abusive partner forces a victim to have sex, become pregnant or impregnate without consent. As opposed to sexual assault which uses force, reproductive coercion most often involves manipulation, including guilt trips, gaslighting, threats of violence, religious abuse or deception (i.e., lying about a vasectomy or birth control).

Safety Plan

- A plan a victim of domestic abuse creates to minimise or prevent further abuse, particularly when leaving the relationship.
- A series of steps the survivor is planning to take to keep (her) and other family members, including children and/or pets, if applicable, safe from an abuser. It walks a survivor through possible scenarios and helps the survivor plan what they can do should each happen (i.e., the abuser comes to your place of employment). It also helps a survivor think through how and when it may be safest to separate from the abuser, what the survivor needs to bring with them and where the survivor can go. It can also help to organize any evidence the survivor has, which can help when filing

for an order of protection or pressing charges. An advocate can help a survivor compile a safety plan, but we also offer a DIY worksheet on our site. A safety plan is updated every time there is a significant change in the survivor's living conditions. It should be noted that the victim is their own best expert on what they should do and when given their knowledge of the abuser.

Safety planning

- An intervention to help people judge their risk of violence, identify the warning signs and develop plans on what to do when violence is imminent or is happening.

Same-Sex Couple

A romantic pairing involving two people of the same sex. The individuals involved may identify with any sexual orientation. *AVOID*: Gay couple, lesbian couple, homosexual couple

Same-Gender Loving

Also known as SGL, this is a term used by some African American people as an Afrocentric alternative to what are considered Eurocentric, or white, identities like gay and lesbian. Coined by activist Cleo Manago in the 1990s, the term and its usage explicitly recognizes the histories and cultures of people of African descent.

Science of hope

A study of how hopeful a person is in their current situation, which is useful in predicting an individual's ability to heal from trauma. The research is believed to have originated from the work of late psychologist C.R. "Rick" Synder, PhD, a professor from the University of Kansas in the early '90s who went on to develop the Hope Scale to predict a person's level of well-being after trauma.

Sex

- Sex refers to the biological characteristics that define humans as male, female, or intersex, including aspects like chromosomes, hormone levels, and reproductive/sexual anatomy. It is recorded at birth based on observed physical attributes.

- The classification of people as male or female. At birth, an infant's sex is recorded based on observation of bodily characteristics, including genitals, chromosomes, hormones, and internal reproductive organs. *See also* intersex
- The word sex has a wide variety of meanings, which can sometimes lead to confusion. It's often used to mean intercourse, which can cause some people discomfort with the term and lead them to use euphemisms or alternate words (such as gender) for its other connotations.
- Another meaning of sex is the biological capacity by which humans and most other species reproduce. All mammals reproduce via two sexes: male and female. Sex can also refer to the X and Y chromosomes or even the specific SRY gene (normally found on the Y chromosome) that, under typical conditions, directs an embryo to develop as either male or female. Occasionally, this differentiation process follows an atypical route and results in individuals with Differences of Sexual Development (DSDs), otherwise known as intersex conditions. The genitals and other organs associated with reproduction are "primary sexual characteristics."
- Sex can also refer to "secondary sexual characteristics," meaning observable characteristics such as body type, height, shape, voice, bone structure, hair growth patterns, fat distribution, etc., that other people can observe to varying degrees in everyday life.

Sexuality

Sexuality encompasses the capacity for sexual feelings and the ways individuals experience and express themselves as sexual beings. It includes a wide range of behaviours, identities, orientations, attractions, and expressions related to sexual desire and relationships.

Influenced by biological, psychological, social, cultural, and ethical factors, sexuality involves concepts like sexual orientation (e.g., heterosexuality, same-sex attraction, bisexuality) and sexual behavior. As a fundamental aspect of human identity, sexuality varies significantly among individuals, reflecting the diverse nature of human experience.

Sex Act

Contact between the penis and vulva, or the penis and the anus involving penetration,

however slight; contact between the mouth and the penis, vulva or anus; or penetration of the anal or genital opening of another person by a hand, finger or other object.

Sex Reassignment Surgery (SRS)

Refers to surgical alteration for transgender people (see *transition*). Not all transgender people choose to or can afford to have SRS.

AVOID: Sex change operation

Sex Work

Refers to the exchange of money for sexual services either regularly or occasionally. This may involve female, male, and transgender adults, young people and children. The person may or may not consciously define such activity as income-generating or self-identify as a sex worker. No single term adequately covers the range of transactions that take place across the world that involve sex work. The appropriate term to use for sex work is best defined relative to the local context. This definition may change over time as attitudes evolve. Priority must be given to reflecting how those involved in sex work perceive themselves in that role. Most self-identified sex workers define sex work as work.

Sexual

About or relating in some way to sex or sexuality.

Sexual abuse/sexual coercion

Any unwanted sexual contact obtained by force, threats, manipulation or when a victim is unable to consent. Overwhelmingly, people who experience sexual abuse report knowing the abuser. And for half of women, that person is their intimate partner. This intimacy does not mitigate the criminality of the abuse.

Sexual Assault: Unwanted sexual contact through physical force, threats, guilt, manipulation, or coercion to establish power and control. Some victims are assaulted by a stranger, but most know their attacker. It may be a current or former intimate partner, a friend, an acquaintance, or a family member.

Sexual Fluidity: Sexual fluidity refers to the capacity for an individual's sexual attractions, behaviours, or identity to change over time or in different contexts, rather than remaining fixed, and is influenced by various social, cultural, and personal factors (Diamond, 2008).

Sexual Harassment: Unwanted verbal or physical sexual advances, sexually explicit statements, or discriminatory remarks because of the victim's sex. Examples include requests for sexual favours, sexual comments or questions, offensive remarks about a person's sex or gender identity and expression, and unwanted messages or images that are sexual in nature.

Sexual Orientation

- The scientifically accurate term for a person's enduring physical, romantic and/or emotional attraction to another person. Sexual orientations can include heterosexual (straight), lesbian, gay, bisexual, queer, asexual, and other orientations. Avoid the offensive term "sexual preference," which is used to inaccurately suggest that being gay, lesbian, or bisexual is voluntary and "curable." People need not have had specific sexual experiences to know their own sexual orientation; in fact, they need not have had any sexual experience at all.
- The scientifically accurate term for an individual's enduring physical, romantic, emotional, and/or spiritual attraction to members of the same and/or different sex, including bisexual, gay, heterosexual, and lesbian orientations. Also note that gender identity and sexual orientation are not the same; transgender people may be bisexual, gay, heterosexual, or lesbian. *AVOID:* Lifestyle, sexual preference
- Gender identity and sexual orientation are not the same. Transgender people have sexual orientations too, and they may be straight, lesbian, gay, bisexual, queer, etc. For example, a transgender woman who is attracted exclusively to women would typically describe herself a lesbian; if she were exclusively attracted to men, she would likely describe herself a straight woman. A transgender person who is attracted to more than one gender will likely identify as bisexual or pansexual.

Sexual Violence: Sexual violence includes sexual acts or activities that happen without consent. This may include rape, sexual assault, and sexual abuse. Sexual violence includes different types of unwanted physical contact including rape, molestation, groping, sexual abuse by an intimate partner and child sexual abuse, which may or may not be criminal.

Short-term/transitional housing

This refers to temporary living arrangements that survivors may need after their time at an emergency shelter is up. This is often coordinated by the shelter staff or other community-run nonprofits and could include a short-term lease in an apartment, a hotel stay or an individual transitional housing unit run by a shelter. Survivors who cannot return home after a shelter stay for safety reasons should inquire with an advocate about short-term housing or transitional housing.

SOGIESC

Acronym for sexual orientation, gender identity and gender expression, and sex characteristics, more commonly used in countries outside the United States. Inclusive of all sexual orientations, gender identities, gender expressions, and sex characteristics, including intersex traits. Some also use SOGI (sexual orientation, gender identity) or SOGIE (sexual orientation, gender identity and gender expression). The acronym refers to all humans with sexual orientations and gender identities, including cisgender and straight people. When talking about people with marginalised identities, it is important also to use words that specify the marginalised groups you are referring to (e.g. transgender, nonbinary, lesbian, etc.).

Spiritual/religious abuse

Within the context of domestic violence, this refers to an abuser using a victim's religious beliefs to control them or coerce them to put up with abuse because their religion justifies it or when an abuser prevents a victim from practising their religion. Within a religious organisation, spiritual abuse is when a religious leader shames or controls members using their position of power.

Strangulation

Restricting an individual's ability to breathe by placing pressure on their throat, typically by wrapping one's hands around the victim's neck. Strangulation is one of the most dangerous acts of physical abuse and a leading indicator of future lethality (aka, death). It can take less than 10 seconds for a person to lose consciousness as a result of strangulation, and death can occur in just under five minutes. Strangulation as a form of abuse is also one of the leading causes of TBI or traumatic brain injury. Even if a person doesn't lose consciousness or has no visible marks after strangulation, they should seek immediate medical attention any time their airflow is restricted for any amount of time.

Survivor

An individual being abused—physically, verbally, sexually, emotionally, psychologically or in another harmful manner—is referred to as a survivor. This person can also be called a victim, though survivor is typically considered by some advocates to be more empowering.

Survivor-Centred

A survivor-centred approach recognises survivors' rights to decide about their safety and future. It's strengths-based and recognises that survivors with different backgrounds have different needs and experiences.

Spiritual/Religious Abuse

Abuse that uses spirituality or religion to develop and maintain power

Stalking

"Stalking is a pattern of repeated and unwanted attention, harassment, contact, or any other course of conduct directed at a specific person that would cause a reasonable person to feel fear," U.S. Department of Justice (2022). Similar to crimes of sexual violence, stalking is about power and control. Stalking laws and definitions differ between jurisdictions. Stalking behaviour can take many forms, including:

- Making threats against someone or that person's family or friends
- Non-consensual communication, such as repeated phone calls, emails, text messages, and unwanted gifts

- Repeated physical or visual closeness, like waiting for someone to arrive at certain locations, following someone, or watching someone from a distance
- Any other behaviour used to contact, harass, track, or threaten someone

Stalking through technology/Cyberstalking

Perpetrators of abuse may stalk victims using technology. “Use of technology to stalk” is a broad term used to cover all forms of stalking that rely on technology.

Some uses of technology to stalk include:

- Persistently sending unwanted communication through the internet, such as spamming someone’s email inbox or social media platform
- Posting threatening or personal information about someone on public internet forums
- Video-voyeurism, or installing video cameras that give the stalker access to someone’s personal life
- Using GPS or other software tracking systems to monitor someone without their knowledge or consent
- Using someone’s computer and/or spyware to track their computer activity

Stalking/Cyberstalking tactics

The following list includes some of the ways a person can use digital technology in a sexually explicit or violating way.

- Catfishing, or lying about one’s identity online in order to initiate a romantic or sexual relationship
- Cyberbullying, or the “wilful and repeated harm inflicted through the use of computers, cell phones, and other electronic devices” often to threat, harass, or humiliate another, according to the Cyberbullying Research Centre.
- Cyberstalking by monitoring someone’s whereabouts with GPS or other tracking systems or persistently contacting someone against their will through text, email, social media, or other digital platforms.
- Distributing or threatening to distribute sexual or intimate images of someone without their consent, also known as digital sexual assault or revenge pornography.
- Hacking into someone’s online accounts or devices to steal personal images or information not intended for public sharing.

- Harassing someone through an online gaming platform or forum.
- Posting shaming, embarrassing, sensitive, or otherwise inappropriate information about someone on social media or other public sites, whether it is true or not.
- Pressuring you to send explicit images of yourself Sending sexually explicit emails, chats, texts, photos, videos, or emojis that are unwelcome or unsolicited.
- Taking sexually explicit pictures or videos of someone without their consent.
- Trolling or deliberately posting upsetting or provocative statements or photos to provoke others.
- Unsolicited or unwanted sharing of pornography or pornographic images.

Stigma (LGBT+)

A complex process that involves social exclusion, devaluation, and reduced access to opportunities for gender and sexual minorities.

Straight

Straight is an identity label that is mainly used to describe heterosexual men and women.

Structural and institutional violence is any form of violence that occurs through patriarchal channels that sustain and recreate male supremacy and female subordination. Structural or systemic violence is generally invisible, embedded in ubiquitous social structures and is often normalized by formal institutions, such as the police, law, education and health systems. Structural violence occurs whenever people are disadvantaged by political, legal, economic or cultural traditions (Winter and Leighton, 2001).

Teen dating abuse/violence

Partner abuse/violence within the demographic of teens is often referred to as teen dating violence. Women between the ages of 18 and 24 are most at risk of being targeted by abusive partners, though any gender identity can be a victim of abuse. Teen dating violence is especially prevalent because young people are often new to relationships, more trusting, more impulsive and may not have learned what healthy boundaries look like and, therefore, more vulnerable to an abuser's manipulation.

The person causing harm

A person whose behaviour, including emotional or physical violence, has caused harm to someone else. The term has been popularised in restorative justice practice. See also *perpetrator, abuser*.

Therapy

Professional clinicians, such as psychologists deliver a structured psychological or psychiatric treatment. Therapeutic interventions may be offered in an individual or group format.

Third-Gender, Genderqueer

Refers to people who identify their gender as not conforming to the traditional western model of gender as binary. They may identify their gender as combining aspects of women and men or as being neither women nor men. *VARIATIONS*: Androgynous, androgyne, polygender

Transactional Sex refers to the exchange of goods or services (excluding money) for sexual services, either regularly or occasionally, involving female, male, and transgender adults, young people and children where the person may or may not consciously define such activity as income-generating, or self-identify as sex workers.

Transgender; Transgender Person

An umbrella term for people whose gender identity and/or gender expression differs from the sex they were assigned at birth. Transgender people may or may not choose to alter their bodies hormonally and/or surgically. The term may include but is not limited to transsexuals, third-gender/ genderqueer people, cross-dressers, and other gender-variant people. Use the descriptive terms (transgender, transsexual, cross-dresser, female-to-male [FTM], trans man, male-to-female[MTF], trans woman) and pronouns preferred by the individual. *AVOID*: She-male, he-she, it, trannie, tranny, gender-bender

Transition

The multi-step process of altering one's birth sex over a long period of time. The cultural, legal, and medical adjustments made as part of transitioning may include telling one's family, friends, and/or co-workers; using different pronouns to describe oneself; changing one's name

and/or sex on legal documents; beginning hormone therapy; and/or possibly (though not always) undergoing some form of surgical alteration. *AVOID*: Sex change; pre-operative, post-operative.

Transphobia

- Fear or hatred of transgender people, sometimes manifesting in discrimination, isolation, harassment, or violence. *See also* biphobia, homophobia.
- A range of negative thoughts, actions, or feelings about someone who is or is perceived to be a transgender person. Anyone can act in a transphobic way, including gay or lesbian people who may treat transgender people poorly or do not want transgender people in the LGBTQ community. Non-transgender people often misunderstand what it means to be transgender and judge the way a transgender person, or anyone perceived to be transgender, acts, dresses or identifies. An abuser could use transphobia to abuse a transgender partner by threatening to interrupt medical interventions involved in transitioning or to out a transgender person to family, friends, or coworkers. The abusive partner can also use derogatory words about the transgender partner.

Transsexual

An older term which originated in the medical and psychological communities. Many transgender people prefer the term “transgender” to “transsexual.” Some transsexual people still prefer to use the term to describe themselves. However, unlike *transgender*, *transsexual* is not an umbrella term, and many transgender people do not identify as transsexual. It is best to ask which term an individual prefers. *VARIATIONS*: Transexual

Trauma bonding/trauma bond

A type of attachment that one can feel toward someone causing trauma. It may include simultaneous feelings of sympathy, compassion, love, and confusion. It often traps a survivor with an abuser indefinitely because, while it feels like genuine feelings of compassion, it’s manipulation on the part of the abuser that’s causing the survivor to stay attached or leave and then return again.

Trauma-Informed

Being trauma-informed is realising that trauma is common, recognising the signs, triggers, and symptoms of trauma, and using this knowledge in practices, policies, and procedures. It promotes compassion and healing instead of re-traumatising individuals.

Two-Spirit

An adjective used by some Indigenous and First Nations people as an umbrella term to describe people who are not straight and/or cisgender. Many Indigenous communities have specific words in their language to describe these experiences, but some do not. This term should not be used to describe people who are not Indigenous. Only use it for an Indigenous person if they use it to describe themselves.

Threats

An expression of intent designed to cause fear of harm, pain or injury to another person. Threats can be direct, such as explicitly stating a harmful intent, or indirect, implying harm through suggestive language or behavior. They can be conveyed verbally, in writing, or through actions, and are often used to intimidate, coerce, or manipulate others into compliance or submission.

Trauma

Trauma is a psychological response to an intensely distressing or disturbing event that overwhelms an individual's ability to cope.

Verbal Abuse

Verbal abuse is the use of words to harm, control, or manipulate another person. It involves behaviours such as name-calling, insults, threats, and other forms of demeaning language intended to degrade, humiliate, or belittle the victim. Verbal abuse can occur in various relationships, including intimate partnerships, workplaces, and family settings. It is often a form of emotional abuse that can lead to significant psychological harm, impacting the victim's self-esteem, mental health, and overall well-being. Verbal abuse is a serious issue that can have long-lasting effects.

Victim

A person who is abused, harmed or killed by another person

Victim/victim-survivor

An alternate term for a survivor of domestic violence. "Victim" may also refer to someone who an abuser has killed.

Violence Against Women

The United Nations defines violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life."

Violence Against Women Act (VAWA)

A piece of U.S. federal legislation specifically designed to provide protections for survivors of domestic violence, dating violence, sexual assault and stalking. The bill was authored and sponsored by future President Joe Biden as part of the Crime Bill of 1994 and signed into law the same year by President Bill Clinton. It authorised \$1.6 billion over six years toward the investigation, prosecution and prevention of violent crimes against both women and men. The Act also led to the creation of the Office on Violence Against Women within the Department of Justice. It was most recently reauthorised in 2022.

WSMW

Women who have sex with men and women. This term is used, particularly in research, to describe sexual behaviour as distinct from sexual orientation.

WSW

Women who have sex with women. This term is used, particularly in research, to describe sexual behaviour as distinct from sexual orientation.

Comparative terminology

Sex refers to the biological and physiological characteristics that define individuals as male, female, or intersex, based on attributes like chromosomes, hormone levels, and reproductive organs.

Sexuality encompasses how individuals experience and express themselves as sexual beings, including their sexual orientation, desires, behaviours, and identities, influenced by biological, psychological, social, and cultural factors.

Gender refers to the roles, behaviours, activities, and attributes that a given society considers appropriate for men, women, and other gender identities. It includes gender identity (how one perceives oneself) and gender expression (how one presents oneself to others). Unlike sex, gender is socially and culturally constructed.

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Appendix B

Proposed correspondence to participants.



Proposed correspondence to Participants

Date

Dear *[contact name here]*

I am writing to request your participation in a new research project focused on the experience (perpetration and victimisation) of intimate partner abuse (IPA) in the bisexual community.

Bisexuals comprise the largest IPA victim group of all the LGBT+ communities, a fact that is under-researched and remains generally unrecognised. This research project aims to record participants' experiences of IPA on this subject and to use the collected data to provide help and support resources to bisexual victims. Your participation will contribute greatly to this research effort.

For an overview of what comprises intimate partner abuse, please see the attached 'Foreword to survey.' For further clarification, please ask me.

To be included in the research, you have to meet the following criteria:

- Be over 18 years old.
- Identify as bisexual.
- Speak English. Accommodations for deaf participants will be provided.
- Have experienced intimate partner abuse directly or indirectly.
- Are not a perpetrator of abuse. See item 13 in the attached Participation Sheet.
- Are not currently experiencing intimate partner abuse.

If you are currently experiencing intimate partner abuse, I encourage you to seek help from the police or a domestic violence hotline (see attached information sheet). If, during the interview, you reveal information that demonstrates that you or someone you know is in danger from an abusive partner, I will end the interview, and the data gathered will not be used. I will be obliged to notify the police or the appropriate agency of the pending threat of harm.

This research is being undertaken as part of my Ph.D. studies at the University of Central Lancashire (www.uclan.ac.uk) in the U.K. I have been involved in the LGBT+ communities for most of my life, personally and professionally. As a professional, I investigate domestic violence and abuse cases involving children for people seeking permanent protection orders, not as a police officer but as a court-appointed investigator. Many of the people and families that I have represented are from the LGBT+ communities. I am also an outspoken advocate on LGBT+ issues. Since 2014, I have authored two books, one a guide to understanding domestic violence ('Killing You Softly') and the other about the protection of children from abuse ('Child Abuse. Prevention through Understanding').

Your Privacy

Your privacy is paramount. The only time that your name will appear in this research is when you sign the consent form. That form will be stored in a locked safe until it is destroyed in accordance with the University's guidelines. Once signed, you will be provided with a four-digit number, which will serve as your sole identifier in written or oral research records; your name will never be used. Furthermore, the number can protect your identity when speaking to us or contacting me about the project. For example, in a text, you might write, 'Please call me about #### (your number).'

How the interview works

We will meet in person in a place that you deem safe. My only criterion is that other people are present. It could be a coffee shop, shared open office, library, or anywhere else you are comfortable with.

You will be provided with a package when we meet. This will comprise:

- The consent form, which you will be invited to sign.
- Survey introduction - a pre-interview information sheet about intimate partner abuse which you can read, and/or I will discuss with you.
- Copies of this introductory letter and information sheet, which explains how this interview process works.

- A copy of our support referrals indicates how to contact our on-call counsellor or helplines.

I am providing you with this letter our support referral sheet, which contains information on how to contact our on-call counsellor and helplines should you need to,

The project comprises a written questionnaire (provided on paper or via MS Forms) and a concurrent interview, which will be conducted in person in a public space of your choice or via MS Teams (where only the audio will be recorded). The interview will follow the questionnaire. The written questionnaire and interview (audio-recorded) will take approximately 60 minutes. Questions 1-15 in the questionnaire focus on your general demographic information. The remaining questions focus on your experience of abuse and form the basis of our interview. We will address such issues as your experiences of IPA, and your opinions and observations about the experience (perpetration and victimisation) of intimate partner violence in the bisexual community. Your responses will be anonymised to allow you to speak candidly – and confidentially - about your experiences and to ensure that your responses cannot identify you. The report, compiled at the end of this research, will not contain any personally identifying information about you. I am interested in anything you say as long as it does not upset or re-traumatise you. If you feel this is occurring, a counsellor is available to speak with you by phone at no cost to you.

Protecting your identity: To ensure your data privacy, as mentioned, after you have signed the consent form to participate, you will be provided with a unique code, which will be used on the survey. This code will be the only identifier used in your survey and interview. The code will be used in all documents. Your personal details will be stored separately in a locked archive and will never be placed or associated with the survey and interview. The audio interview will be transcribed verbatim, and the audio files will be stored (without your details) securely. According to the university policies, all notes, audio files, and transcriptions will be destroyed. If you have any questions about this, please ask the interviewer.

I hope that you will agree to participate in this vital research. Your contribution of time and experience will significantly enhance our understanding of this subject. If you require any further information, please do not hesitate to contact me. **Please let me know if you agree to proceed within the next ten days.** I look forward to hearing from you.

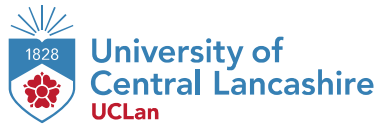
Sincerely yours,

Eimhean (Evin) Daly

Edaly3@uclan.ac.uk Enclosure (below) – *Proposed participant information sheet*

Appendix C

Proposed Participant Information Sheet



Proposed Participant Information Sheet

1. **Title of Study:** Research into the experience of intimate partner abuse (IPA) perpetration and victimisation within the bisexual community.
2. **What is the purpose of the study?** To add to the research into this subject as part of my Ph.D. as very little data on the subject exists. Also, to provide data toward the provision of helping resources for victims of IPA in the bisexual community.
3. **Why have I been invited to take part?** You have been invited through a referral from another participant, a friend or an associate who thought that you might fit the criteria for participation.
4. **What are the criteria for selection for this research?**

To be included in the research, you must meet the following criteria:

- Be over 18 years old.
 - identify as bisexual.
 - Speak English. **Accommodations and an interpreter for deaf participants will be provided.**
 - Have experienced intimate partner abuse directly or indirectly.
 - Are not a perpetrator of abuse.
 - Are not currently experiencing intimate partner abuse. See item 12 below.
5. **Do I have to take part?** No. Should you participate, you may withdraw from the survey up to 15 days after the interview as determined by university policies, and your records will be destroyed.
 6. **What will happen if I take part?** Detailed information about IPA will be provided along with instructions on participating in the questionnaire and interview. The results will be published as part of my Ph.D. without referencing your identity. The data, free from any personally identifying information, may be published in

research publications, peer-reviewed research papers, used at conferences, or in articles on the subject of intimate partner abuse. You are welcome to copies of the published materials. The data will be gathered in a way to ensure your privacy.

- 7. How will my data be used?** Your data will be analysed, and the results will be used to provide guidelines to other researchers and IPA resource providers about intimate partner abuse in the bisexual community and to those identifying as bisexual.

Because this work is being produced for a UK-based University, it is covered by the Data Protection Act in the UK and GDPR in Europe. More information on this can be provided on request.

Under UK data protection legislation, the University acts as the Data Controller for personal data collected as part of the University's research. The University privacy notice for research participants can be found on the attached link https://www.uclan.ac.uk/data_protection/privacy-notice-research-participants.php

8. Are there any risks in taking part?

Yes. The subject matter of abuse may be upsetting or triggering for some participants. As a result, they are free to withdraw from the subject without reason, and they will, if requested, be provided access to an on-call counsellor and provided a list of IPA helplines.

Responses and data/insights derived from the questionnaire and research interviews will be compiled to ensure your privacy and enable you to speak freely about your experiences. No identifying information will be used in the research or analysis at any project stage or afterwards. The only form that contains your name will be the consent form, which will be stored separately from the research data. Gathered data will be destroyed according to the university policies and procedures.

The only people who will see/hear your interview responses are my research supervisors, myself, and the examining board. In each instance, all participants will be asked to sign a consent checklist to use data and insights for this study.

Post-interview, if you wish to withdraw from the study (or exclude some of your answers), you will have two weeks to do so (according to university guidelines). This can be done by notifying me by email at edaly3@uclan.ac.uk.

This research has obtained ethical approval from The University of Central Lancashire's Business, Arts, Humanities, and Social Sciences (BAHSS) Ethics Review Panel, Ref: XXX"

9. What will happen to the results of the study?

The findings from this research will be published as part of my Ph.D. thesis. This will be made available via the University of Central Lancashire's website and on other academic platforms such as SSRN, ResearchGate, and Academia.edu. The results, thesis or papers may be published for academic or general reading about IPA. No personal information about the participants will be published.

10. Participant assistance.

If, for whatever reason, the participant needs assistance reading or writing during the interview, the researcher will be happy to do this for them. Participants may also verbalise their answers to questions as they will be audio recorded.

11. How long will the interview take?

About an hour.

12. May I participate if I am currently in an abusive relationship?

If you are in an abusive relationship, I cannot invite you to participate in this study. If you need immediate help or are in danger of harm, please call the police or a domestic violence hotline.

If, during the interview, you disclose that you or another person are in danger, I am obliged to end the interview and report this to the appropriate authorities, including the police, social services or both if children are involved. If you are currently in an abusive relationship, I encourage you to seek help from the police or the domestic violence hotlines.

13. Exclusion criteria

You are a current victim of abuse (see item 12 above)

You are a perpetrator of abuse. If, during the interview, it becomes apparent that you are a perpetrator of abuse, the interview will stop, and the records will not be used. Depending on what perpetration information is revealed, I may be obliged to notify the police or relevant reporting services, including child welfare, if children are involved.

14. How do I participate in this research?

You become a participant when you sign the consent form and return it to me. You may send this by email, mail or give it to me when we meet.

15. What will happen if I want to stop taking part?

After the interview, you have up to 15 days to withdraw in whole or in part. This might occur if, for example, a participant regrets sharing something in the interview and wishes to have it removed from the data. After the 15th day, data analysis will commence, and it will not be possible to remove any data.

All interviewees will be asked to sign a consent form so that their information and insights can be used. Even if this has been signed, if a participant decides they do not wish to participate in the intervening time before the interview, this will be honoured. To withdraw from the study, please email me, and I will comply with this request at edaly3@uclan.ac.uk

16. What if I am unhappy or if there is a problem?

If you are unhappy or if there is a problem, please feel free to let me know by contacting me or my supervisor. We will respond right away. Contact information follows below.

If you remain unhappy or have a complaint you feel you cannot bring to us, please contact the Ethics, Integrity, and Governance Unit at OfficerForEthics@uclan.ac.uk.

The University strives to maintain the highest standards of rigour in the processing of your data. However, if you have any concerns about the way in which the University processes your personal data, it is important that you are aware of your right to lodge a complaint with the UK Information Commissioner's Office by calling +44 303 123 1113 or by visiting <https://ico.org.uk/make-a-complaint/>

17. Who can I contact if I have further questions?

Please contact me by email at (edaly3@uclan.ac.uk). You may also reach me by phone or text at 44 7472 076242 in the UK or Ireland and in the U.S. (1) 561 654 8245. Any time you contact me, please also send me an email, as I travel frequently.

Thank you for your interest,

Eimhean (Evin) Daly

Researcher Bio

Eimhean (Evin) Daly (M.A.) is a Ph.D. candidate at the University of Lancashire. He has been involved in research into interpersonal and intimate partner abuse (perpetration and victimisation) for over 20 years.

LGBT+ advocate: Evin has been an outspoken LGBT+ advocate for over 50 years and has an academic and practical interest in how intimate partner abuse is perpetrated and experienced within the LGBT+ communities. His PhD concentrates on this experience in the bisexual community due to the critically high number of IPA victims in the community (Messinger, 2011) and the distinct lack of research into this subject (ibid). His MA thesis at the University of Lancashire centred on how 'domestic violence' in LGBT+ communities is perceived in society and portrayed in the media. He is a board member of the Domestic Violence and Sexual Assault Council of Greater Miami (DVSAC), where much work is LGBT+ specific. He was also a member of the Miami-Dade Domestic Violence Fatality & Child Abuse Death Review Team.

Professionally and for 20 years, he has been an investigator (judicially appointed, not police) of child abuse (primarily sexual abuse) and domestic violence cases that involve children. In his role, he conducts interviews of court case parties and victim support/reports resources (child protective team, police, medical professionals,

therapists, and others). Many of his clients are from the LGBT+ communities. Mr. Daly provides written reports to the courts and testifies during cases (domestic violence, dependency, criminal, and family courts). His extensive ongoing training in child, domestic and intimate abuse includes training with the Child Exploitation and Online Protection Centre (CEOP, London, Manchester) and the Academy (FBI) in Manassas, Virginia (one of 180 graduates). He is a court-certified forensic interviewer of children who have been sexually abused and has a broad range of training in interviewing victims and perpetrators of violence and abuse involving children. He is a Certified Forensic Interviewer (Wicklander-Zulawski, Reid) and is court-certified to represent the interests of children in dependency court (child welfare).

Some of his cases include LGBT+ teens and LGBT+ parents who have unique needs within the judicial, child welfare and foster care systems, as do their children. Evin provides information about these needs to judges and support services.

Evin is a published author of books on child abuse (Child Abuse: Prevention through Understanding – 2015/2017) and domestic violence (Killing You Softly – a guide to understanding domestic violence and abuse – 2019 – Parker Publishing/Amazon). He received his M.A. (2020) and a postgraduate qualification in forensic behavioural psychology (2011) from the University of Lancashire.

Please contact him: edaly3@uclan.ac.uk.

Appendix D

Data Management

Data Management

The University processes personal data as part of its research and teaching activities in accordance with the lawful basis of 'public task', and in accordance with the University's purpose of "advancing education, learning and research for the public benefit".

To help you with this, further information on how your data will be used can be found in the table below.

How will my data be collected?	The questionnaires and interviews will be done concurrently, in person, whenever possible at a public place of your choice. If it is not possible to conduct interviews in person, they will be conducted remotely via MS Teams (in accordance with the University of Lancashire's guidance), with audio recording only (no video recordings stored). Interviews will be recorded, and the audio will be transcribed (then manually reviewed and corrected).
How will my data be stored?	Completed audio recordings, questionnaires and interview transcriptions will be stored on the University of Lancashire OneDrive/secure cloud. Personally identifying information will be stored separately in a locked safe until they are destroyed according to the university policies.
How long will my data be stored for?	Data will be kept for a period of seven years and then destroyed per the University of Lancashire guidelines. If this needs to be extended (e.g., due to delays in completing my Ph.D.) you will be notified, and consent will be requested for an extension. This will include an explanation of why this is being requested.
What measures are in place to protect the security and confidentiality of my data?	Any printed papers (e.g., transcripts for the purposes of coding) will be kept at my place of work (where I have my own locked office) or home (in a secure, locked space).

	Files and audio-visual recordings will be kept on the University of Lancashire One Drive. This can only be accessed via two-factor authentication.
Will my data be anonymised?	All questionnaires, notes and interviews will be anonymised. The only form containing identifying information will be the research consent form which will be stored separately from the research data. In the research you will be identified only by a unique code.
How will my data be used?	It will be used for my Ph.D. thesis and in presentations and articles highlighting the research findings.
Who will have access to my data?	Me. And my PhD Supervisors and examiners.
Will my data be archived for use in other research projects in the future?	No.
How will my data be destroyed?	Data will be kept for a period of seven years and will then be destroyed according to university guidelines if this needs to be extended (e.g., due to delays in completing my Ph.D., you will be notified, and consent will be requested for an extension. This will include an explanation of why this is being requested).

Transferring data outside the EU

My research will take place in the UK, Ireland and US, starting in February 2024 and ending in April 2024. When based in the USA and outside the EEA, I will only access materials stored on my University of Lancashire accounts e.g., OneDrive, SharePoint, 365 Outlook.

Are there any benefits from taking part?

Yes. Your involvement in this study will help provide valuable insights into the experience of IPA among individuals who identify themselves as bisexual. The amount of existing data on the subject in the bisexual community is critically absent. The results of this research will provide a foundation for future studies and offer essential guidelines for those providing support, resources, and assistance to individuals in the bisexual community who are exposed to IPA.

Your insights and expertise will play a valuable role in shaping this research – thank you.

Expenses and / or payments

In keeping with academic research in this space, participation is voluntary and unpaid.

Appendix E

Information about Intimate Partner Abuse



Survey Introduction – Intimate Partner Abuse Information

What is Intimate partner abuse?

Please read prior to the interview and ask the interviewer if you need clarification about any aspect of this statement.

What is Intimate partner violence and abuse?

Intimate partner abuse (Domestic Violence) is a worldwide phenomenon experienced across all cultures. It may involve physical violence or threats of violence. However, it does not always come in the form of physical violence; violence may not be involved at all. The abuse can also be subtle, emotional, controlling, and psychological. Abuse can exist in all intimate relationships, and although it is generally attributed to the heterosexual community, it is equally common in the LGBT+ communities. IPA can happen to anyone of any race, age, sexual orientation, gender, ethnic group, or religion. The purpose of the abuse is to achieve and maintain power over and control of the victimised partner. IPA may comprise one type of abuse or many types.

Examples of subtle forms of intimate partner abuse may include:

1. **Coercive control:** The abuser uses a pattern of behaviour to control the victim through threats, humiliation, and intimidation. This can include controlling the victim's daily activities and repeatedly belittling them to damage their self-confidence and esteem.
2. **Gaslighting:** This form of emotional abuse involves manipulating someone to doubt their own feelings, thoughts, or events happening around them, causing them to question their own reality or sanity. For example, the abuser might deny that certain events occurred or dismiss the victim's feelings.
3. **Isolation:** The abuser may (try to) cut the victim off from family and friends, making the victim increasingly dependent on the abuser. They might control whom the victim sees, where they go, or limit their ability to leave the home at all.

4. **Financial abuse** involves controlling a person's ability to earn, spend, and keep financial resources. The abuser might control all of the finances, refuse to allow the victim to work, take their pay check from them and provide them with limited funds for their own use.
5. **Tightly controlling daily activities:** This could include controlling what the victim eats, how they dress, or dictating their daily schedule. They may monitor whom they talk to and whom they text. They may (constantly) check in on them during the day when they are apart, wanting to know where they are, who they are with, and when they will return home. The goal is to control the victim's every move.
6. **Sexual abuse:** Even within relationships, consent for sexual activity is necessary. An abuser might guilt, force, or manipulate their partner into sexual activity they are uncomfortable with. Sexual intercourse without consent is rape, even in a relationship.
7. **Control through technology:** The abuser might monitor the victim's social media accounts, read their texts, or demand access to their personal communications.
8. **Parental alienation:** If children are involved, the abuser might attempt to turn them against the other parent or use them as a tool for manipulation or control.
9. **Threats of physical harm or death comprise assault.** Assault is an action that induces a reasonable fear of impending harm in someone. Physical abuse, however minor, is battery and refers to the actual act of inflicting bodily harm upon someone.

Intimate Partner Abuse defined.

(adapted from a definition from the United Nations).

Intimate Partner Abuse (IPA), also called 'domestic abuse,' 'domestic violence,' or 'intimate partner violence,' can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse may be physical (assault or threats of), sexual (non-consensual sexual contact or activity including rape), emotional, intentional neglect, economic (control of finances, abuse of finances), or psychological actions or threats of actions that are designed to influence, establish, or maintain control of another person. This includes any behaviours that frighten, coerce, intimidate, terrorise, manipulate, hurt, humiliate, blame, injure, or wound someone. IPA may culminate in or be punctuated by serious physical injury or result in death. It can include 'honour-based violence', female genital mutilation, and forced marriage. Men are the primary source of recorded violence against women, although women abuse men and other women also

(Fleming et al. 2015). IPA can happen to anyone of any race, age, sexual orientation, gender, ethnic group, or religion. It can occur within a range of relationships, including heterosexual and LGBT+ couples living or not living together, who are dating, who share children or who have separated or divorced. IPA affects people of all socioeconomic backgrounds and education levels (adapted from UN. 2023. Stark, 2009. Daly, 2015; Daly, Bray, 2019). It may describe a single incident or a pattern of conduct. The perpetrator and victim are over the age of 16 and are personally connected to each other (UKDAA, 2021).

Who constitutes an intimate partner?

Of note in this definition is the use of the term ‘personally connected’ taken from the UK’s Domestic Abuse Act (2021) to describe the relationship between the perpetrator of the abuse and the victim. In many definitions of an IPA relationship, intimacy is emphasised as a qualifier, while this broader definition includes a broader family relationship status.

Definition of ‘personally connected’. (UKDAA, 2021)

(1) For the purposes of this Act, two people are “personally connected” to each other if any of the following applies—

- (a) they are, or have been, married to each other;*
- (b) they are, or have been, civil partners of each other;*
- (c) they have agreed to marry one another (whether or not the agreement has been terminated);*
- (d) they have entered into a civil partnership agreement (whether or not the agreement has been terminated).*
- (e) they are, or have been, in an intimate personal relationship with each other.*
- (f) they each have, or there has been a time when they each have had, a parental relationship in relation to the same child.*
- (g) they are relatives.*

(2) For the purposes of subsection (1)(f) a person has a parental relationship in relation to a child if—

- (a) the person is a parent of the child or*
- (b) the person has parental responsibility for the child.*

(3) In this section—

“child” means a person under the age of 18 years;

Appendix F
Participant Consent Form



Participant Consent Form (Research)

Version number & date:

Research ethics approval number: BAH SS2 01137

Title of the research project: *Research into the experience of intimate partner abuse (IPA) perpetration and victimization within the bisexual population.*

Name of researcher: Eimhean (Evin) Daly

Please initial box

1. I confirm that I have read and understood the information sheet dated 2024 for the above study, or it has been read to me. I have had the opportunity to consider the information, ask questions, and have these answered satisfactorily.
2. I understand that participating in the study involves a written questionnaire and a concurrent audio-recorded interview conducted in-person or via MS Teams (the interview may be conducted using video/camera-on. No images, only audio will be retained).
3. I understand that my participation is voluntary and that I am free to stop taking part and can withdraw from the study at any time without giving any reason and without my rights being affected. In addition, I understand that I am free to decline to answer any question or questions. If I decide to withdraw from the research or revoke my consent, I may do this, according to the guidelines (see 4), by sending an email to the researcher and their study supervisors stating my wish to withdraw. Please see the email addresses at the end of this form.
4. I understand that I can ask for access to the information I provide, and I can request the destruction of that information before two working weeks from the interview date. I understand that following this two-week working period, I will no longer be able to request access to or withdraw the information I provide, as data analysis will commence, the data will be anonymised for analysis, and removing any data will not be possible.

☐☐☐☐

5. I understand that the information I provide will be held securely and in accordance with the University of Lancaster's data protection requirements in Preston, UK. ☐
6. I understand that my contributions to this study will be protected and that no identifying information about me – and the information I provide – will be included in any reports, presentations, or publications arising from the research. ☐
7. I understand that the researcher may use an excerpt(s) verbatim from my interview to emphasise points raised in the survey. My general demographic information will also be used to compile survey statistics and points. None of my personally identifying information will be used, and my identity will be protected. ☐
8. I understand that I will not directly benefit from participating in this research and will not receive financial compensation. ☐
9. I understand that if I inform the researcher that I, or someone else, is at risk of harm, they may have to report this to the relevant authorities - they will discuss this with me first but may be required to report with or without my permission. ☐
10. I understand that signed consent forms and original audio recordings will be retained in a facility provided by the University of Central Lancashire for a length of time as dictated by the examination board. ☐
11. I agree to have my data from this research stored in the UK by the University of Central Lancashire and retained/destroyed according to their data management policies (for participants not resident in the UK) ☐
12. I agree and consent to take part in the above study.

Participant name	Date	Signature
Name of person taking consent	Date	Signature

Principal & Student Investigator

Eimhean (Evin) Daly, Researcher, the University of Lancashire. Edaly3@uclan.ac.uk.

For more information, or if you have any questions about this project, please contact:

Eimhean (Evin) Daly, Researcher, the University of Lancashire. Edaly3@uclan.ac.uk, using the details above or the research supervisors, Dr Megan Todd, Mtodd2@uclan.ac.uk or Dr Tim Owens towen1@uclan.ac.uk

Appendix G
Participant post-survey information



Participant post-survey information

Thank you.

Thank you for participating in this survey. Your input is essential in providing the critical building blocks for understanding intimate partner abuse in the bisexual community. Further, your valuable contribution will contribute to furthering resources needed to support bisexual victims who experience intimate partner abuse. I am very grateful for your time.

Sources of support

If participation in this interview causes you any discomfort or concern, please let me know. Resources are available to help you in the form of a therapist who has agreed to participate and assist. To contact this therapist, please either advise me and/or contact the therapist directly by email, providing your contact information, and Dr. Quintas will call you. There is no cost to you for this consultation.

Dr. Celia Quintas: quintasc@yahoo.com

Police and helplines.

United Kingdom

- If you are in immediate danger, please call the police at 999.
- Domestic Violence helplines and resources.
<https://www.gov.uk/guidance/domestic-abuse-how-to-get-help#get-help-and-support>
- National Domestic Abuse Helpline for free and confidential advice, 24 hours a day on 0808 2000 247

- Switchboard LGBT+ (open 10:00 to 22:00 daily)
0800 0119 100
<https://switchboard.lgbt/>

Ireland

- Police (Gardai) 999 or 112.
- Domestic violence help information (List)
<https://spunout.ie/life/abuse/domestic-violence-ireland/>
- LGBT+ Ireland
+353 1 685 9280
- National LGBT+ Helpline
Freephone the National LGBT+ Helpline
on 1800 929 539
Available Monday – Thursday (6.30pm – 10pm), Friday (4pm-10pm),
Saturday and Sunday (4pm-6pm)
- Out-Of-Hours: Freephone the Samaritans on 116-123
available 24/7 and 365 days a year.

United States

- Contact law enforcement at 911 for immediate help.
- National Domestic Violence Hotline: (1) 800-799-7233
<https://www.thehotline.org/>
Hours: 24/7. Languages: English, Spanish, and 200+ through interpretation
service [Learn more](#)

Thank you,
Eimhean (Evin) Daly
Edaly3@uclan.ac.uk

Appendix H

Survey: questionnaire and interview



Survey: questionnaire and interview (Rev 2*)

Participant code (Do not include your name on this form):

Time/date/location:

Self-identification (not required. Please provide if you wish to)

- ☐ Sex/gender
- ☐ Age
- ☐ Where did you grow up?

Purpose of the survey: Thank you for your participation. The purpose of this survey and interview is to capture experiences – perpetration and victimisation - of intimate partner abuse in the bisexual community. There is minimal information about this phenomenon available other than research that indicates that bisexual women comprise the largest group of IPA victims overall.

Should any aspect of this survey cause you distress, please understand that you do not need to continue the survey, and you may withdraw consent for participation. A counsellor is available to discuss any issues that may arise. Furthermore, if you have any questions that you do not wish to answer, please leave them blank or draw a line through them. Thank you.

Instructions

- a. Please answer the following questions.
- b. You do not need to answer any questions that cause you distress.

- c. In answering the questions, please feel free to expand on your answer in writing or verbally with the interviewer.
- d. Please note that there are no 'right' or 'wrong' answers.
- e. This survey was designed to protect the privacy and confidentiality of participant identities and data.

Questionnaire

1. Please indicate your gender
 - a. Female ☐
 - b. Male ☐
 - c. Non-binary ☐
 - d. Other ☐
 - e. Prefer not to say ☐

2. Does your gender identity match that which was ascribed at birth?
 - a. Yes ☐
 - b. No ☐
 - c. Unsure ☐

3. How do you identify your sexual orientation?
 - a. Lesbian ☐
 - b. Gay ☐
 - c. Bisexual ☐
 - d. Queer ☐
 - e. Pansexual ☐
 - f. Other ☐

4. What is your age?
 - a. 18 – 25 ☐
 - b. 25-35 ☐
 - c. 35-45 ☐
 - d. 45-55 ☐

- e. 55-65 ☐
- f. 65+ ☐
- g. Prefer not to answer. ☐

5. What is your ethnic group?

- a. White ☐
- b. Black ☐
- c. Asian ☐
- d. Hispanic ☐
- e. Mixed ethnicity ☐
- f. Other (Please specify) _____
- g. Prefer not to say ☐

6. What is your education level?

- a. Completed high/secondary school ☐
- b. Undergraduate degree ☐
- c. Post-graduate degree ☐
- d. Trade school ☐
- e. Other (Please specify) _____

7. Are you employed?

- a. Yes ☐
- b. If 'yes,' what do you do?
- c. No ☐
- d. If no, please specify.
 - i. Unemployed ☐
 - ii. Student ☐
 - iii. Retired ☐
 - iv. Disabled ☐
 - v. Long-term illness ☐

- vi. Other (Please specify) ☐
8. Do you have children? (If no, leave blank) ☐
9. If you answered 'yes,' please indicate how many children you have
- a. One ☐
 - b. Two ☐
 - c. Three ☐
 - d. Four ☐
 - e. Five ☐
 - f. More (please specify) ☐
10. Is your partner the children's parent?
- a. Yes ☐
 - b. No ☐
11. Do you consider yourself to be a member of the bisexual community?
- a. Yes ☐
 - b. No ☐
 - c. I am a member of a different community (Please specify) ☐
12. If you identify as bisexual, do you regard yourself.
- a. Bisexual sexual orientation ☐
 - b. Behaviourally bisexual ☐
 - c. Both a and b ☐
 - d. Other (Please specify) ☐
13. Are you currently in a relationship?

- a. Yes ☐
 - b. If yes, how long have you been in this relationship (months)?
 - c. No ☐
 - d. If no. Have you been in a relationship in the past 12 months?
 - 1. Yes ☐
 - 2. No ☐
14. Is/was your partner(s) of the same sex, opposite sex, or both?
- a. Same-sex ☐
 - b. Opposite sex ☐
 - c. Both ☐
 - d. Prefer not to answer ☐
15. What is your relationship status?
- a. Single ☐
 - b. Married ☐
 - c. Cohabiting ☐
 - d. Living apart together (LAP) ☐
 - e. Separated ☐
 - f. Divorced ☐
 - g. Widowed ☐
 - h. Prefer not to answer ☐
16. Have you ever witnessed domestic violence or intimate partner abuse?
- a. Yes ☐
 - b. No ☐
17. If 'yes' where did you witness it?

- a. In childhood, at home ☐
- b. Family ☐
- c. Friends ☐

18. If you witnessed in childhood, can you indicate:

- a. I was abused (Neglect, physical, emotional, psychological) ☐
- b. I was sexually abused* (This was not asked as a question. It is listed here to account for information voluntarily provided by participants.)

19. Have any of your friends related that they have been abused by a dating or relationship partner?

- a. Yes ☐
- b. No ☐

20. If 'Yes', would you care to expand on what you are aware of in your friend's experience?

- a. Yes ☐
(please inform the interviewer or write on paper provided)
- b. No ☐

21. Prior to reading the survey introductory statement, were you aware that Intimate Partner Abuse (Domestic violence) exists in the bisexual community?

- a. Yes ☐
- b. No ☐

22. During your relationships, have you ever experienced abuse from a partner?

- a. Yes ☐
- b. No ☐

23. If 'yes', please indicate what type of abuse you experienced (please write your experience of the abuse type is not listed). Tick all that apply.

- a. Violence (hitting, shoving, physical violence) ☐
- b. Threats of violence or death. ☐
- c. Sexual coercion or sex without consent/rape. ☐
- d. Sexual abuse, including forced sexual activity ☐
that made you feel uncomfortable. ☐
- e. Demonstrates cruelty to your children. ☐
- f. Demonstrates cruelty to your animals or ☐
threatens to hurt them. ☐
- g. Isolation (keeping you from your friends or family) ☐
- h. Coercive control includes controlling behaviour. ☐
For example, a constant need by your partner to know where you are,
who you are with, what time you will be returning home? Reflected in
frequent texts, calls, and checking on your social media.
- i. Threatens to 'out' you, revealing private sexual information ☐
to friends, family, co-workers, and employers. ☐ j.
Stalking (following you) or tracking your movements. ☐
- k. Financial control. Having access to your money controlled, comments
on your spending, restrictive spending, being given an allowance. ☐
- l. Emotional or psychological abuse. Put-downs, you're not good enough,
embarrassing you in front of friends or family, gaslighting, moody, not
speaking to you, sneering, shouting at you, giving you 'looks.' ☐
- m. Feeling a need to appease them your partner. Feeling that ☐
you are walking on eggshells. ☐
- n. Threats of death. Has displayed a means or hurting of killing you. ☐

- o. If you threaten to leave the relationship, your partner states they will commit suicide or threatens to hurt or kill you, your family, children, or animals ☐
- p. All the above ☐
- q. Other (please specify) ☐

24. Was your abuse because of your sexual orientation or gender?

- a. Yes ☐
- b. No ☐

25. If 'yes' how was this demonstrated?

- a. Hate speech ☐
- b. Referring to your sexuality, orientation, or gender negatively ☐
- c. Other ☐

26. If you have experienced abuse, how often have you experienced abuse?

- a. Constantly (every day) ☐
- b. Frequently (several times a week) ☐
- c. Sometimes (some times a month) ☐
- d. Rarely ☐
- e. Never ☐

27. If you have experienced abuse, please indicate if your partner(s) was

- a. Same sex ☐
- b. Opposite sex ☐
- c. Both ☐

28. Did your partner/abuser display any of the following behaviours? Tick all that apply.

- a. Jealousy ☐
- b. Insecurity ☐
- c. Fear of abandonment ☐
- d. Anger ☐
- e. Entitlement ☐
- f. Rage ☐
- g. Possessiveness ☐
- h. Other ☐

29. Did you experience or witness Intimate Partner Abuse or Domestic Violence prior to your current relationship?

- a. Yes ☐
- b. No ☐

If you answered 'yes' please indicate.

- c. In a previous relationship(s) ☐
- d. In my family. ☐
- e. Witnessed it in a friend. ☐

30. Have you ever sought help after experiencing abuse?

- a. Yes ☐
- b. No ☐

31. If you answered 'yes,' please indicate how you did this (Tick all that apply)

- a. I left the relationship. ☐
- b. I left the relationship and returned later ☐
- c. I communicated with a friend or family member (call, text, email, letter) ☐
- d. I visited a friend or family member. ☐
- e. I called/visited the police. ☐
- f. I sought medical help. ☐

- g. I sought help for my mental health. ☐
- h. I spoke to my counsellor or therapist. ☐
- i. I spoke to a helpline (phone or online) ☐
- j. I contacted an LGBT+ organization. ☐
- k. I filed for a restraining order ☐
- l. Other (please specify) ☐

32. If you sought help from an organization (police, ambulance, clinic, hospital) did you identify yourself by sexual orientation (bisexual, gay, lesbian, heterosexual, gender identity)?

- a. Yes ☐
- b. No ☐

33. If 'yes,' did identifying yourself by sexual orientation or gender help or not help the type of assistance provided?

- a. Help ☐
- b. Not help ☐

34. If 'yes' how did you identify yourself?

- a. Bisexual ☐
- b. Gay ☐
- c. Lesbian ☐
- d. Heterosexual ☐
- e. Gender identity ☐
- f. Other ☐
- g. I didn't say anything ☐

35. Did you face any barriers or difficulties in seeking help?

- a. Yes
- b. No

36. If 'yes' do you think that the barriers had anything to do with your declared or observed sexual identity?

- a. Yes ☐
- b. No ☐
- c. Unsure ☐

37. Please briefly describe these barriers or difficulties.

a. _____

38. Do you think that there is a need for specific helping resources for bisexual individuals experiencing abuse.

- a. Yes
- b. No

39. If you answered 'yes,' please indicate what might be introduced or improved to provide (better) support.

Thank you for answering this survey and interview. Your identity and responses are completely anonymous. No identifying information appears on this survey, nor will any appear on the analysis and presentation of the results of the survey and interview. You are welcome to contact me at any time with questions at edaly3@uclan.ac.uk. Use your unique number allocated as a reference. I will be happy to contact you right away.

List of attachments (Notes):

[* Revised April 2024 for clarification purposes]

Appendix I

Participant codes

The code employs a straightforward system of abbreviations that facilitates a clear understanding of the participant to whom it applies. This is explained on the following three pages, followed by the participant codes on a separate sheet. This document does not contain any participant-identifying information. Also see the Methods chapter.

Participant codes

After completing and signing the consent form, each participant was assigned a unique number to identify themselves throughout the survey, ensuring their privacy. The code comprises a four-digit number designed as follows (an example: 3211).

The first number designates the country of the interview.

1 = UK

2 = Ireland

3 = USA

The second number designates the participant's sexual or gender identity.

1 = Male

2 = Female

3 = Transgender

4= Other (not used by any participant)

The third and fourth numbers represent the numeric values of the 20 participants (count 1-20). These are the order in which the interviews were conducted—01, 02, 03, etc.

Expanded codes to include basic demographic data

In the () following the numeric code, the following key applies. These codes provide anonymous participant demographic data when discussing themes or attributing interview quotes. For example, the 4-digit participant code is followed by, (W/F/35-45/C2/Peru/Atlanta), and thus the reader can determine that the participant is a White/Female/aged 35-45//has 2

children/was born in Peru and now lives in Atlanta. If it is followed by 'TR Spanish,' it signifies that a Spanish-to-English-Spanish translator was present.

Key ()

- W=white, B=black, H=Hispanic,
- M=male, F=female, TW=trans-woman,
- Age or age range (25-35 or 38, for example),
- Children and the number of children:
'C' indicates that the participant has children. The number after the 'C' indicates the number of children that the participant has. 'C1,' for example, indicates that the participant has one child.
If 'C' is absent, it indicates that the participant does not have children.
- The last word is the participant's resident city. If it is preceded by a country name that designates their country of birth and where they grew up, followed by their current resident city (Peru/Miami, for example, signified birth in Peru now resident in Miami).
- 'TR Spanish' signifies that the participant required a Spanish-to-English translator.

Sex/Gender (participant self-identification)

Males: 4

Females: 14

Trans-women: 2

Participant notes

- Translated Spanish/English/Spanish (3 participants). The translator was an IPA-versed Spanish/English-speaking LGBT+ specialist.
- All participants self-identified as bisexual.
- All identified as victims of IPA except one #3219 (control)

Ethnicity (Self-identification)

White: 9

Black:2

Hispanic: 9

Hispanic mixed ethnicity: 1

Interview participant locations.

Seattle. Washington: 1

Atlanta, Georgia: 2

North Miami, Florida: 2

Miami (various locations), Florida: 10

Ohio: 1*

Asheville, North Carolina: 2

Tennessee: 1 *

New York City: 1

[* met via Zoom/Teams/phone/audio only if recorded]

Vocabulary

Sexual orientation/gender descriptions/use of pronouns and IPA descriptions and terminology are written verbatim as provided by the participants.

Participant codes (Feb/May 2024 survey) are written in the text in parentheses, such as (3102: W/F/35-35/C1/Seattle). They are presented below for ease of visual reference.

3201 – (W/F/35-45/C1/Seattle)

3102 – (W/M/45-55/C2/Atlanta)

3203 – (W/F/25-35/Atlanta)

3204 – (B/F/29/C3/N Miami)

3205 – (W/F/42/C5/Canada/N Miami)

3306 – (H/TW/55-65/Nicaragua/Miami)

3207 – (H/F/25-25/Peru/Miami/TR Spanish)

3208 – (H/F/18-25/Venezuela/Miami/TR Spanish)

3209 – (H/F/45-55/C1/Cuba/Miami)

3210 – (H/F/55-65/Nicaragua/Miami/TR Spanish)
3111 – (H/M/55-65/Puerto Rico/Miami)
3212– (H/F/26/Cuba-Mexico/Miami)
3313 – (B/TW/25-35/Miami)
3114 - (H/M/35-45/Cuba/Miami)
3115 – (H/M/18-25/Venezuela/Miami)
3216 – (W/ F/ 26/Ohio)
3217 – (W/F/33/North Carolina)
3218 – (W/F/33/Tennessee)
3219 – (W/F/38/Ireland/New York City–Control participant)
3220 – (W/F/45-55/C2/Atlanta)

Appendix J

Understanding the term 'gaslighting.'

This Addendum was provided to participants who did not understand the term 'gaslighting' during the interview.

(See Findings/Results 2. Interviews)

Gaslighting

There are varying levels in the application of conscious psychological abuse, from an extreme of debilitating, planned, all-encompassing campaigns and the use of gaslighting to the lower end of abuse types (but just as damaging) that includes verbal put-downs or criticism. All are designed to fulfil a goal: that of controlling the victim. The literature is replete with studies that demonstrate and record how this abuse has a severely detrimental effect on the short and long-term mental and physical health of victims (NNEDV, 2023).

Bisexuals are particularly vulnerable to higher levels of psychological abuse due to the added discrimination that they face in a heteronormative society and from the LGT+ communities (Tilley, C. 2024). This may be manifested in increased minority and toxic stress with direct effects on the physical and mental health of the victims, leading to poor health outcomes and early death (ibid).

These were the parameters provided in describing perpetrators' psychological abuse, some of which are discussed separately:

- Insists on constantly knowing your activities and expects continuous communication about where you are, who you're with, and when you'll be back.
- Requires access to your phone, email, and social media passwords (digital abuse).
- Displays extreme jealousy, frequently accusing you of cheating. This is a recurring complaint among bisexual participants.
- Isolating you - discourages or prevents you from spending time with friends or family.
- Attempts to hinder your ability to work or attend school (an extension of isolation).

- Exhibits anger in a manner that intimidates you.
- Controls your finances or dictates how you spend your money.
- Restricts your access to medical care.
- Publicly humiliates you.
- Calls you degrading names such as 'stupid,' 'disgusting,' 'worthless,' 'whore,' or 'fat.'
- Threatens to harm you, your loved ones, or pets.
- Threatens to report you to authorities for alleged wrongdoing.
- Threatens self-harm when upset with you.
- Makes statements like, 'If I can't have you, then no one can.'
- Makes decisions for you that you should make yourself, such as what to wear or eat.

(USDHHS, 2024).

Gaslighting

The following review of gaslighting helps to clarify the intensity and all-encompassing nature of gaslighting.

Gaslighting. Gaslighting is a widespread manipulation tool used by perpetrators of abuse. Gaslighting is defined as *'psychological manipulation of a person usually over an extended period that causes the victim to question the validity of their own thoughts, perception of reality, or memories and typically leads to confusion, loss of confidence and self-esteem, uncertainty of one's emotional or mental stability, and a dependency on the perpetrator'* (Merriam-Webster, 2024).



Gaslighting. (Guy-Evans. 2024) Figure J1.

Gaslighting is a form of psychological abuse or manipulation in which the abuser attempts to sow self-doubt and confusion in the victim's mind. This type of abuse is designed to interfere with the victim's sense of self-worth, personal identity and perception of their reality. Gaslighting tactics are used to lower the victim's self-esteem, make the victim dependent on the perpetrator, and upset or destroy their confidence by questioning their intuition and judgment (Guy-Evans, 2024).

Gaslighting tactics may vary in their use, much like a shepherd using dogs to herd sheep, in order to attain control over the victim. Gaslighting is a form of isolation tool designed to hinder the victim's ability to lead a normal life. It may interfere with their mental health. It is also designed to separate the victim from family and friends (Guy-Evans, 2024)

Tactics may include.

- **Denial**—denying that negative events occurred or that abusive interactions happened. It is designed to make the victim doubt their memory and sanity. Denying that the events that the perpetrator caused occurred (even in the face of proof) instead of blaming the victim. "I didn't say that, you did.'

- **Minimising.** The perpetrator minimised the seriousness of negative events or conversations that they caused, accusing the victim of overreacting and attributing hurtful comments to 'joking.' This caused the victim to doubt themselves, wondering if they were overreacting to events that distressed or hurt them.
- **Shifting blame:** This involves shifting blame for abusive events onto the victim, persuading the victim that they, not the perpetrator, cause the perpetrator's negative behaviour.
- **Diverting/Discrediting** – the perpetrator tells others that the victim is crazy to discredit the victim and have others align with the perpetrator. Telling the victim, 'Everybody thinks you're crazy.'
- **Withholding/silent treatment.** The perpetrator refuses to engage with the victim to discuss problems, claiming (for example) that they are unaware of what the victim is discussing. This may involve giving the victim the 'silent treatment' where they are ignored.
- **Countering** – denying that abusive events occurred or that they occurred differently from how the victim recalled, accusing the victim of making things up. This leaves the victim questioning their memory.
- **Medical gaslighting.** The perpetrator minimises medical issues or concerns of the victim. Accusing the victim of exaggerating or imagining their medical issues.
- **Deflection and distraction.** When confronted by the victim about their abusive behaviour, the perpetrator changes the subject to avoid the issue.
- **Use of negative stereotypes.** Perpetrators may use negative stereotypes to attempt to manipulate the victim – these may be based on race, sex, disability, gender, age, nationality, or/and ethnicity. For example, telling a partner to calm down, that they are being hysterical or irrational, feeding a gender stereotype.
- **The use of affection or loving words as a tool of manipulation.** The perpetrator downplays complaints against them by the victim, telling them that they are imagining things and that they would never hurt them as they love them so much.

- **Switching/ Rewriting history.** The perpetrator, in recalling an event where they have abused the victim, retells the story so that they are the victim. This is designed to confuse the victim and to doubt their memory.

[Compiled from Guy-Evans, 2024]

Appendix K

Good Practice Guidelines

Good Practice Guidelines for Researching/Writing on Bisexuality

(Barker, M., Yockney, J., Richards, C., Jones, R., Bowes-Catton, H., & Plowman, T. (2012) 'Guidelines for Researching and Writing About Bisexuality', *Journal of Bisexuality*, 12(3), pp. 376-392.)

1. *Separate bisexuals from the other groups:* If you are researching or writing about a wider group that includes bisexuals, do not subsume bisexuals under another category (e.g., including them with 'gay' or 'heterosexual people'), and do not assume that issues for LGB (or LGBT) people will be identical across all those groups.
2. *Avoid bisexual erasure:* Don't engage in bisexual erasure or reinforce sexual invisibility by conducting research or writing with the implicit or explicit goal of questioning the existence of bisexuality or forms of bisexuality.
3. *Be cautious of explanations:* Don't assume that questions of the causation or explanation of bisexuality are any more pertinent, interesting, or useful than questions of the causation or explanation of heterosexuality, lesbian and gay sexuality, or any other form of sexuality.
4. *Avoid 'othering':* Avoid the common representation of bisexuals as an interesting and/or exotic 'other,' outside the norm, to be fascinated with. Remember that everybody has a sexuality, that there is great diversity in sexuality, and that bisexual lives are experienced as just as normal and every day as anybody else's. Don't write as if your entire audience is not bisexual—many of them will be.
5. *Avoid unfair criticism:* Avoid the common claim that bisexuals are a group who imagine that they are doing something radical, but actually are not. Not all bisexual people aim to be radical or queer, and there are many different understandings of what bisexuality means. For example, some speak of being attracted to 'both' men and women, some speak of being attracted to people 'regardless of gender,' and some deliberately challenge the idea that the people they are attracted to are either men or women.
6. *Assume multiplicity:* Be mindful of the multiplicity of experiences among bisexuals and bisexual communities. Do not assume that what is true for one individual, group or community will be true for all. Do not write about bisexuality or 'the bisexual' as if

there was only one way of being bisexual or one bisexual experience. Particularly, be aware of intersections of gender, race, culture, religion, class, age, generation, ability, geographic location, body form, and other socio-cultural and historical386 Journal of Bisexuality aspects that will affect the ways in which attraction to more than one gender is experienced and understood. If you are not bisexual yourself, avoid the trap of assuming that all bisexuals will be like those you have spoken with. If you are bisexual yourself, avoid the trap of assuming that all other bisexuals will be like you—or using their experiences to bolster your own.

7. *Familiarise yourself:* Make sure that you familiarise yourself with bisexual communities and conversations before embarking on writing and research. If you are not part of these communities and conversations yourself, strongly consider involving coresearchers and/or steering group members of people who are and spend significant time becoming familiar before starting your work. There are a number of print and online spaces where you can advertise for participants and a number of groups and events that you can attend to talk to people. Use these spaces appropriately and with respect. Remember that you are working with people, not with exhibits or reference books. State who you are, provide a procedure for people to contact your institution, and be clear what the research is for. If people are not comfortable with you being in a bisexual space as a researcher, respect the fact that they may need to be in that space more than you do.
8. *Be accountable:* Make sure that your work is of some use to those it is representing, ask them what questions are important to them before embarking on your work, and do not simply reproduce work which has been done before. It is good practice to give participants the chance to comment on research and to give feedback to the people and communities that you are representing. Invite bisexual people and bisexual communities themselves to engage with your work, and welcome their input and the time and energy that it involves.
9. *Be open:* Approach your work humbly and with an openness to learning. You are not the expert on the experiences of the people you are researching or writing about: they are. Try to avoid beginning with assumptions about what you will find, and be self-aware about the assumptions that you do—inevitably—have. Likewise, be open to having these assumptions challenged.

10. *Reflect on power imbalances:* Reflect on your own position in relation to those you are researching or writing about. What kinds of power do you have as the one framing the questions, being seen as the 'expert researcher,' perhaps paying participants or having the support of an institution, and forming your interpretations and conclusions and deciding what information to include in your publications? Think about why you are interested in this area and what your stake in it is. How might this influence how you ask questions, approach people, conduct research, and write and publish? What is the impact of this on the people you are representing? Consider alternatives and ensure that you are open about these matters with the communities themselves and in your writing.
11. *Be aware of context:* The context in which people speak has a marked effect on what is said and how it is said. For example, people may speak differently about bisexuality at a community event, with a partner, with a researcher whom they know from their own community, or with a non-bisexual take statement researcher whom they have never met before. Do not take statements out of context or assume that they reflect everything that a person understands or says about bisexuality.
12. *Don't assume membership of other groups:* Not all bisexual people also belong to other categories. Common misconceptions are that bisexuals are all: polyamorous or non-monogamous, White, academic or comfortable and familiar with academic terms, out as bisexual, comfortable with the bisexual label, in the LGBT scene, subscribers to the same politics, attending bi community spaces or willing to be questioned by you.
13. *Respect language use:* Use the labels that the people you are writing about or researching use themselves. Make sure that you do not misrepresent their language, for example, by hyphenating bi-sexual or bisexuality (the 'b' words have been around long enough not to count as neologisms, so there is no need for a hyphen to impart meaning), or adding 'sexual' when somebody just uses the word 'bi.' Recognize that people who are attracted to more than one gender may use no label at all, or may use other labels (e.g., pansexual, omnisexual, queer, gay), and that they may use this in addition to bisexual or rather than bisexual (just as some lesbians would also refer to themselves as gay and others wouldn't).

14. *Put yourself in their shoes:* Consider how you would feel if you, or your own group/community, were being studied or written about in the ways in which you are planning to study or write about this particular group of bisexuals.
15. *Don't make assumptions about researchers:* Don't assume that others engaged in bisexuality research either are or are not bisexual themselves. Don't assume that bisexuals will not, themselves, have academic credentials and/or be engaged with writing/research. Don't assume that researchers who are bisexual themselves are either less valid or more valid (and therefore beyond criticism), than anybody else.

Bibliography

Barker, M., Yockney, J., Richards, C., Jones, R., Bowes-Catton, H., & Plowman, T. (2012) 'Guidelines for Researching and Writing About Bisexuality', *Journal of Bisexuality*, 12(3), pp. 376-392. DOI: 10.1080/15299716.2012.702618.

Appendix L

Danger Assessment

DANGER ASSESSMENT

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Several risk factors have been associated with an increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when your partner or ex-partner abused you. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking, bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones, miscarriage
4. Threat to use a weapon; head injury, internal injury, permanent injury, miscarriage
5. Use of a weapon; wounds from a weapon

(If any of the descriptions for the higher number apply, use the higher number.)

Mark Yes or No for each of the following.

("He" refers to your husband, partner, ex-husband, ex-partner, or whoever is currently physically hurting you.)

View this document as a pdf: <https://safvic.org/wp-content/uploads/2017/05/Danger-Assessment.pdf>

Appendix M:

Prominent theories of IPA from researchers and psychologists

Prominent theories of IPA from researchers and psychologists.

These are provided to demonstrate the extent of efforts to understand IPA behaviour. While this sampling is expansive, none of the theories serves the purpose of providing a singular theory.

1. Feminist Theory: Feminist theory posits that domestic violence is a result of patriarchal social structures that perpetuate gender inequalities, which is reflected in the pattern of behaviours and attitudes toward women. Violence and abuse are viewed as expressions of social power and are used as a way for men to control and dominate their female partners. This theory emphasises the power and control that men exert over women as a central component of domestic violence (Dobash & Dobash, 1979).
1. Social Learning Theory: Social learning theory proposes that domestic violence is learned behaviour. It is acquired through observing and imitating violent behaviours in family and social environments (Bandura, 1973).
2. Ecological Model: The ecological model considers multiple sources of influence on behaviour. These include individual, relationship, community, and societal factors. This model proposes that domestic violence results from complex interactions between these sources (Heise, 1998).
3. Attachment Theory: Attachment theory posits that early childhood experiences with parents and caregivers influence attachment patterns. Negative attachment patterns can influence later relationships. It may also manifest itself in an inclination towards violence in intimate relationships (Bowlby, 1988).
4. Psychopathology Theory: This theory proposes that domestic violence may be associated with individual psychopathology, such as mental illness, personality disorders, and substance abuse issues. (Dutton, 1995).
3. Resource Theory: Resource theory posits that individuals with fewer economic, social, and educational resources may be more likely to use violence to exert control and compensate for their lack of resources (Goode, 1971).
5. Cycle of Violence Theory: The 'cycle of violence,' in explaining how abusive relationships perpetuate over time, outlines a theoretical repetitive pattern of tension

building, leading to abusive incidents followed by a honeymoon phase before starting the cycle all over again (Walker, 1979).

6. Trauma Theory: Trauma theory posits that abusive behaviours in adulthood may be the result of past childhood traumatic experiences. This theory stresses the impact of unresolved trauma on an individual's behaviour in intimate relationships (Herman, 1992).
7. Intersectionality Theory: Intersectionality theory examines how different social identities (e.g., race, gender, age, social position, sexuality, gender) intersect to create unique experiences of oppression and violence. It highlights how domestic violence cannot be fully understood without considering these overlapping identities (Crenshaw, 1991).
8. Power and Control Theory: This theory, often associated with the Duluth Model (DAIP, 2024), posits that domestic violence is a result of the abuser's desire to exert power over and maintain control of the victim. It is illustrated in the 'Power and Control Wheel'(ibid), which outlines various abusive behaviours used to maintain control (Pence & Paymar, 1993).
9. Rational Choice Theory: Rational choice theory proposes that abusers use violence as a strategic choice to achieve their goals of control, intimidation, or gaining other benefits. This theory focuses on the decision-making processes of the abuser (Felson & Messner, 2000).
10. Social Exchange Theory: Exchange theory posits that domestic violence occurs when the perceived rewards of abusive behaviour outweigh the costs. It views domestic violence as a result of rational decision-making processes (Gelles, 1983).
11. Family Systems Theory: Family systems theory proposes that domestic violence is a symptom of dysfunctional family dynamics. It emphasises the interactions between family members and how these relationships contribute to abusive behaviour (Bowen, 1978).
12. Subculture of Violence Theory: This theory suggests that domestic violence is more prevalent in subcultures, where violence is an accepted or normative response to conflict. It highlights cultural and social norms that condone violence (Wolfgang & Ferracuti, 1967).

13. Gender Role Theory: Gender role theory posits that domestic violence is influenced by culturally prescribed roles and expectations for men and women. These roles can be used to perpetuate power imbalances and justify abusive behaviours (Kimmel, 2002).
14. Psychodynamic Theory: Psychodynamic theory posits that domestic violence is a manifestation of unconscious conflicts and emotional issues rooted in early childhood experiences. It emphasises the role of internal psychological processes in abusive behaviour (Dutton, 1995).
15. Biological Theory: Biological theories suggest that genetic, neurobiological, and physiological factors can predispose individuals to aggressive behaviour, including domestic violence (Raine, 2013)
16. Evolutionary Theory: Evolutionary theory posits that behaviours, including domestic violence, have evolved because they were advantageous for survival and reproduction (Daly & Wilson, 1988).
17. Conflict Theory: Conflict theory proposes that domestic violence occurs because of conflicts of interest between individuals, often related to resources, power, and control. The theory focuses on the role of social structures and inequalities in fostering violence (Goode, 1971).
18. General Strain Theory: General strain theory posits that individuals who experience stress or strain are more likely to engage in deviant behaviours, including domestic violence (Agnew, 1992; Broidy & Agnew, 1997).
19. Intergenerational Transmission of Violence Theory: This theory posits that individuals who experience or witness violence in their family of origin are more likely to exhibit violent behaviour in their own relationships, perpetuating a cycle of abuse (Ehrensaft et al., 2003).
20. Systems Theory: Systems theory views domestic violence as a product of interactions within the family system. It emphasises the interdependence of family members and how changes in one part of the system affect the whole (Straus, 1973)
21. Cognitive Behavioural Theory (CBT): CBT suggests that maladaptive thought patterns and behaviours influence domestic violence. It focuses on changing these cognitive distortions to reduce abusive behaviour (Dutton, 1998).

22. Cultural Theory: Cultural theory examines how cultural norms, values, and beliefs contribute to domestic violence. It highlights how certain cultural contexts may normalise or condone abusive behaviour (Nason-Clark, 2004; Counts et al., 1999).
23. Masculinity Theory: Masculinity theory examines how societal expectations of masculinity and gender roles contribute to domestic violence. It highlights how pressures to conform to traditional masculine norms can lead to abusive behaviours (Connell, 1995).
24. Psychosocial Theory: Psychosocial theory combines psychological and social factors to explain domestic violence. It examines how individual psychological traits and social environments interact to produce abusive behaviours (Laing & Humphreys, 2013).
25. Victim-blaming theory: Describes the practice of holding victims responsible for their victimhood. It emphasises the importance of being aware of and avoiding dangers in society. Victims are often blamed for staying in abusive relationships (Martin, 2001; Pugh, 1983).

There are numerous theories and frameworks, none of which can be considered an absolute theory that explains IPA.

Appendix N:

A Review of Interview Notes, Observations, and Post-Interview Conversations

This appendix presents additional insights drawn from interview notes, informal conversations, and participant reflections that extend beyond the formal framework of the thesis. While not central to the core research objectives, these contributions provide valuable context, highlight overlooked experiences, and offer further depth to the analysis of bisexual intimate partner abuse. Their inclusion here is intended to guide future research. All material is fully referenced, with commentary and analysis provided.

Introduction

This chapter comprises research interviewer observations and key points compiled from interviewer observations, interview notes, and post-interview conversations with the participants. Many participants stayed on to discuss their experiences, and additional data emerged that was not covered in the interview. The purpose of including this information is to utilise all the participants' input and extract all data pertinent to the subject of bisexual IPA. Many of these issues, although not included in the themes list in Research Findings 2, are crucial for understanding the bisexual and bisexual IPA experience. Any duplication of data presented serves to underline the importance of that data to the participant. References to the literature and prior research are also included where appropriate. These observations and notes are presented as gathered. Some of the subject matter overlaps with the results gathered in Findings 1 (questionnaire) and Findings 2 (interviews), to emphasise important points and support the conclusions. The order in which these points are presented is not significant.

These are recorded participant experiences that fell outside of the questionnaire/interview framework. They should be regarded as personal and informal findings, as they reflect the specific experiences of some participants who thought them important enough to mention. They are included here in a separate chapter as they may singly or collectively support the other research findings (1 and 2) and form the basis of future research on the subject. There is no inference that the IPA data recorded here are new in

terms of general sexuality research. Some topics may have been explored in previous general bisexual or sexuality research, or in secondary bisexual IPA research. However, it is new or confirmatory data when presented in this bisexual IPA context, given that little previous IPA bisexual primary research data exists. Academic references are provided where this data has been researched in other contexts of sexuality research.

1. Sexual fluidity among the participants (Diamond, 2008).

Most of the women interviewed described the ease of switching between relationships with both same-sex and opposite-sex partners. It was recounted as a comfortable process that happened easily. Of the four men I interviewed, two had similar experiences with fluidity, with one living with and 'sharing (sic)' a husband and wife. The trans-women interviewed expressed similar fluidity when young, but as they have grown older, they cited more caution in this area, given their histories of abuse from men in the past.

2. Initial attraction of females to females is emotional over sexual. (Diamond, 2008).

Participants generally describe female-on-female attraction as based on an initial emotional attraction as opposed to a sexual attraction as experienced with males. One participant stated that she found that when she was out socially, men were aggressively sexual in their approaches (*'going places in their minds I hadn't even thought of'*) while she was drawn emotionally to female partners with sex as a secondary issue (3204/B/F/29/C3/North Miami).

3. There was a broad range of demographics among women interviewed.

As is highlighted in the Findings (1), the demographic range—geographic, cultural, age, and abuse experience—of the female participants was wide and varied (N=14 and transwomen N=2).

4. Males and female participants recall that males are primarily aggressive physical abusers (Walby & Towers, 2017; Dobash & Dobash, 2004).

Women are described as being more emotionally and psychologically abusive. There were two exceptions to this (3201/W/F/35-45/C1/Seattle) and (3203/W/F/25-35/Atlanta), who described female partners as exceptionally physically abusive. *'When my girlfriend was hitting me outside a bar, nobody interfered. Women-on-women fights are seen as 'cat-fights,' a source*

of amusement. While if it was men doing the beating, the police would have been called' (3201/W/F/35-45/C1/Seattle).

5. In seeking help, victims avoid the bisexual label and seek help based on heterosexual or LG identities. 'Whatever works.' (3114/H/M/35-45/Cuba/Miami). (Munro, 2015)

Most participants stated that when they had sought help from abuse, they either presented for help without self-identifying their gender or sexual identity or as heterosexual or as 'gay.' The consensus was that these identities were sufficient to receive the help they needed.

6. Helping services available with anomalies.

Myriad barriers, real and imagined, stopped many participants from seeking help, including not knowing what they were experiencing, who to turn to, and cultural barriers, including language and immigration status. When help was sought, the response was inconsistent, with some geographic areas (cities/towns) more versed in dealing with LGBT+ victims while others did not. One candidate who sought help for IPA (presenting with visible injuries to her body) from a nurse in a hospital in Miami was ignored (3204/B/F/29/C3/North Miami), which she attributed to racism as she is a black woman.

7. *'Some women explore bisexuality as a response to male partner abuse.'* (3205/W/F/42/C5/Canada/North Miami). (Rictock, 2002; Rollè et al., 2018)

This participant verbalised an observation made by this researcher over the years attending domestic violence court that female victims may seek female partners following abuse by males. Whether this is due to bisexuality, comfort-seeking or a reaction-seeking safety—from male abuse is unknown.

8. South American women and men report severe abuse from 'macho cultural' norms. 'It's cultural.' (3107: H/F/25-35/Peru/Miami/TR Spanish). (Sense of entitlement toward women. Justification of sexual assault)

All the Hispanic participants spoke of their experience of widespread patriarchy and misogyny in South America. Physical violence and abuse by men towards women and LGBT+ people within and outside their homes were common. So much so that most participants consider(ed) it 'normal.' *'It was a macho male sense of entitlement justifying sexual assault when I lived in Cuba'* (3212/H/F/26/Cuba-Mexico/Miami) recalled. This changed for some

Hispanic participants when they came to the U.S., and they became aware of IPA through either their work or the communities in which they lived. *'I thought violence was part of life itself'* (3206/H/TW/55-65/Nicaragua/Miami).

9. Myriad barriers to help-seeking. (Overstreet & Quinn, 2013)

The participants related the following barriers to seeking help when subjected to IPA. These include their culture, financial dependence on their abusive partners, ignorance of what help was available, misunderstanding of IPA and IPA terminology as it related to LGBT+, not identifying IPA experience as IPA, lack of helping resources where they lived (fear of) not being taken seriously by law enforcement, general fear of rejection when seeking help, language difficulties in communicating when English was their second language, perceived social constraints caused by a lack of general education, fear of deportation and others.

10. Trans bisexual women have additional barriers to not being seen as 'real.' (Peitzmeier, 2020)

Both trans-women participants told stories of heaped discrimination from all aspects of society as bisexual and trans women; for both, violence from men and women was common. They both described how men who denied their homosexuality would seek sex with the participants, as it allowed them to deny that they were gay. Afterwards, these encounters could turn abusive and violent. They recalled alcohol and drug abuse, and social isolation for not being seen as 'real people.' (3206/H/TW/55-65/Nicaragua/Miami) described how they only became aware of how abnormal their experience of IPA was as a bisexual and trans woman from watching a YouTube video about IPA. They explained how their relationships tend to be short-term to avoid abuse. (3313/B/TW/25-35/Miami) added that another layer of discrimination came from being black. They spoke of being invisible when seeking help, of being laughed at by medical first responders and the police.

11. Sexualisation of bisexuals. (Barker, Richards & Bowes-Catton, 2012)

All the participants, including the control, described how revealing that they were bisexual to men many times resulted in stereotypical sexualised responses. There was an assumption that they were sexually promiscuous, that they would be open to 'easy sex,' and that they would

willingly participate in threesomes. They became the subject of turning sexual fantasies into reality (3205/W/F/42/C5/Canada/North Miami). If they got into relationships, jealousy was a common partner behaviour that justified abusive behaviour, as there was an assumption that being bisexual meant that they would cheat on their partner.

12. Jealousy due to fear of cheating by partners is a repeated issue. (Lindasusan, 2011),

As supported by the literature (ibid), jealousy was a near-unanimous trait in bisexual relationships, particularly with male partners, regardless of the gender of the IPA victim. The assumption that their partner would cheat on them was a given for many. This led to increased controlling perpetrator behaviours disguised under the auspices of 'caring' and 'concern' for the victim partner. It justified what became increasing levels of abuse for the same reasons. It manifested itself in the isolation of the victim from people with whom the perpetrator suspected they might cheat, increased surveillance of the victim through communications monitoring, demanding (if the victim was allowed to leave alone) where the victim was, who they were with, what time they would return. (3212/H/F/26/Cuba-Mexico/Miami) recalled how when she became aware that this was happening to her, she left her partner. She described that she had similar experiences with women with whom she has relationships; *'they can be very physically and emotionally abusive,'* she said.

13. Definitions of IPA are too narrow and too heterosexual to be recognised as relevant to bisexuals (and LGT+). (Swan & Habibi, 2019, p. 13)

This was an important and recurring theme throughout the survey. Participants stated that they were unaware that they were being subjected to IPA. (3220/W/F/45-55/C2/Asheville) *'I honestly didn't know that this was IPA. I blamed myself, thinking that whatever was happening to me was caused by something I did. That somehow...I deserved it, that I had had to be or do better. I believed all of the (expletive) he told me and never saw through his gaslighting that drove me to a nervous breakdown.'* She blamed this on her ignorance of what IPA is. Participants spoke of how they believed that the definitions of IPA were too heterosexual to apply to LGBT+ or to bisexuals. The terms 'domestic' and 'violence' did not connect with their experience of multifaced abuse. There was a call for broader definitions and the provision of general IPA information in a more simple-to-understand format that would resonate with all LGBT+ communities.

14. 'Corrective' rape. (Doan-Mihn, 2019)

Rape in childhood and adulthood was a repeating theme in the interviews. 'Corrective' rape was described by two participants describing how their male partners demanded that their partners renounced their bisexuality and reinforced this demand through forced sexual activities and rape (Doan-Mihn, 2019). *'When I told him that I was bisexual, he went nuts. He kept screaming at me that I wasn't bisexual and that I was looking for an excuse to cheat on him. He couldn't get his head around the idea that I could be intimate with someone else in a same-sex relationship. He told me that he would (expletive) it out of me...'* (3220/W/F/45-55/C2/Asheville).

15. Reports of severe trauma. (Brown & Herman, 2015)

Many older participants described a life where they were exposed to severe trauma. This trauma resulted from childhood experiences of sexual abuse, teenage exposure to rape and physical abuse, and adulthood, where they encountered abuses that left them with deep psychological scars and, in two participants who self-identified as trans women, physical marks and scars. *'I've kept photographs of marks on my body from when he beat me so that I won't forget what people are capable of'* (3306/H/TW/55-65/Nicaragua/Miami). Another participant, who was using the Spanish translator, was so visibly traumatised in remembering aspects of her life that the researcher interrupted her narrative and successfully redirected her onto another topic. Her experiences were deeply disturbing with a long history of physical abuse and rape which included the death of her child from suicide (3210/H/F/55-65/Nicaragua/Miami/TR Spanish). (3220/W/F/45-55/C2/Atlanta) stated that physical and sexual abuse aside, her long-term partner subjected her to decades of psychological abuse and coercive control, *'I'll never get over what he did. He haunts my dreams; I see him lurking in my imagination when I'm out. The trouble is I have seen him, so I never know for sure if it's accidental or if he's following me. I'm afraid he'll kill me'* (she sat shaking her head).

16. Reports of childhood abuse, including sexual abuse. (Finkelhor & Browne, 2015; Messman-Moore & Long, 2003).

As is recorded in Findings (1) and (2), every participant recalls witnessing childhood abuse or being victimised by it directly. Eleven participants described being sexually abused as children

by siblings, siblings' friends, babysitters, mother's boyfriends, and stepfathers. The researcher suspects but did not pursue questioning that some were also sexually abused by their biological fathers. Abuse types included fondling (touching of genitals and anus), oral sex, and sexual intercourse.

17. Overall reports of a lack of social acceptance of bisexual identities and sexuality. (McLean, 2018, pp. 77-93).

'As a group, we're (bisexuals) essentially invisible in a world where you can be either straight or gay but not both.' (3217/W/F/33/North Carolina). Participants recalled that their sexuality is not taken seriously and that they are pressured to *'pick a side'* (3111/H/M/55-65/Puerto Rico/Miami). This discrimination was described as emanating not only from the heterosexual community but also from the LGT+ communities, where exclusion could be quite aggressive.

18. Trans seen as a fringe element in the interviews.

Among the participants interviewed, trans people were not mentioned in bisexual discussions (other than the interviews with the trans women). However, one transwoman was highly knowledgeable about bisexual IPA and IPA generally (3206/H/TW/55-65/Nicaragua/Miami). She provided valuable input to this researcher about cultural influences (barriers/discrimination/helping services) on IPA in the LGT+ communities.

19. Similarity of stories regardless of background. (Herman, 2015)

Similarities and patterns of experiences began to emerge early in the interview process, with participants' experiences paralleling each other in the areas of perpetrator behaviours, tactics, and their (the participants') responses to abuse.

20. Some participants spoke more than others.

While all the participants were involved in the surveys at their own volition, some were markedly more trusting than others. Those who spoke the least were two young Hispanic women (3207/H/F/25-35/Peru/Miami/TR Spanish) and (3208/H/F/18-25/Venezuela/Miami/TR Spanish) and one trans woman (3313/B/TW/25-25/Miami). The Hispanic women were recently entered the US, but they lacked legal status. Their lack of input may have been due to English not being their primary language, care not to divulge too much

due to their immigration status or their youth and lack of exposure to the language of abuse. The trans-woman exhibited signs of trauma and was brisk in her answers which may have been due to a fight that they had with their partner before attending the interview. Overall, all the survey participants showed enthusiastic involvement.

21. Participants from South America were an important demographic addition due to their cultural experiences of abuse.

Hispanic men and women for whom Spanish was a first language and who grew up in South America recounted high levels of misogyny, homophobia and abusive behaviours toward women and gay men in their countries of origin.

22. Some (non-interviewed) males who reported bisexual behaviour did not identify as bisexual due to fear of exclusion from the gay scene. (Tales, 2023)

In addition to input from bisexual participants, other men the researcher spoke to in the bisexual community who did not want to be interviewed echoed the common complaint of fear of exclusion from the gay community if they openly identified as bisexual (Duberli, 2020).

23. Bisexuals become social chameleons to blend into the gender groups of those they are with – gay/lesbian/straight. Rarely openly bisexual except in bisexual safe spaces. (McLean (2018, p. 77-93)

Becoming social chameleons is a common adaptive behaviour for bisexual participants to fit in with the group in which they are socialising. Instead of identifying as bisexual, they may identify as straight if in a heterosexual group or gay in whatever LGB+ group they are with.

24. There were few reports of gender issues, primarily sexual orientation among participants.

Sexual orientation and behaviour were the prime subjects; gender was not an issue that participants discussed as a particular topic.

25. Trans participants reported severe abuse as bisexuals and trans. (Peitzmeier, 2020)

Of all the participants, the trans women reported the highest levels of lifelong abuse. They were abused for being different, for being regarded as less than due to their trans visibility, and regarded as an opportunity for easy sex. They were the focus of derision and

discrimination for not fitting in. They also reported a lack of support from the medical or law enforcement communities, occasionally being laughed at by the police and ambulance crews when seeking help. An additional level of abuse was endured by the black participants, who were also discriminated against due to their race.

26. Males reported normalisation of abuse as a 'guy thing.' (Cruz, 2003, p. 310)

Participants reported that in the gay male community, IPA is not regarded as abusive behaviour. This reflects the observation made by Cruz (ibid) that men are brought up to express themselves physically through aggression and anger, and this may serve to normalise such behaviour.

27. Many first recognised IPA through their exposure to helping services and being educated in what comprises abuse beyond physical violence.

28. Female participants reported that their bisexuality is a source of male abuse (Donovan & Hester, 2014).

This is manifested in the form of abusive partner jealousy and fear that they will cheat with a same-sex partner. Bisexual women report being regarded as over-sexualised, up to anything sexually. This fear of cheating manifested itself in their being isolated from friends by their partner, reinforced by technological stalking where the perpetrator monitored their location, texts, emails and social media.

29. Any assumption, as recounted and observed by the participants, that there is an understanding of the language of abuse is incorrect. (Yoshino, 2000).

This survey underlined the reality that the language, terminology and understanding of what comprises IPA is severely lacking, particularly in the bisexual and LGT+ communities. From the participants, there was the feeling that IPA is an exclusively heterosexual issue. Much more work needs to be done to create a simpler IPA model that people will understand across all sexual, gender and cultural boundaries.

30. The assumption that there is more acceptance of LGBT in society is incorrect, as was experienced by this researcher. (Trevor Project UK, 2024).

Following many years of LGBT+ research and involvement in the LGBT+ communities, including representing members in court, this researcher, before this survey, concluded that the LGBT+ communities were truly accepted in society. Throughout the survey, in response to the interest shown in my PhD, a surprisingly large number of reactions were hostile to the subject matter and dismissive of the LGBT+ communities. One (professional) person opined, *‘there is no gay.’*

31. Bisexuals are less of a community than LGT+. If at all. (Monroe, 2015)

When asked if bisexuals belong to a community, many participants stated they did feel some sense of community, but very loosely. Their sense of community is not as solid as that of other LGT+ community members. Others denied that there is a bisexual community at all.

32. Bisexuality is dynamic. (Diamond, 2008)

Some participants described feeling equally attracted to other genders, while others described a preference that fluctuates.

33. Despite its majority size in the LGBT+ acronym, bisexuality lacks recognition as a sexual orientation. (Eisner, 2013)

Bisexual participants, almost in unison, commented on their invisibility in the LBGT+ communities despite their group’s size being larger than all of the other communities combined (Gates, 2011; Gallup, 2024).

34. Poverty and economic dependence may influence whether victims stay/leave an abusive relationship. (Dipela & Ndhlovu, 2025).

Already documented about IPA in the heterosexual community, a financial reliance on an abusive partner or poverty may have a marked influence on whether a victim stays or leaves a relationship, particularly when children are involved.

35. Some participants wanted to talk beyond the interview. Nobody ever asked them about IPA before.

When asked why they wanted to participate in the bisexual survey, four participants stated that they welcomed the opportunity to discuss bisexual IPA, and that nobody had ever asked them about the subject before.

Summary

This chapter presents interviewer observations and additional insights gathered from interview notes, observations, and post-interview conversations, which extend beyond the formal research framework. These contributions provided important context, highlighting experiences and perspectives not fully captured in the questionnaire or structured interviews. While some material overlapped with earlier findings, its inclusion emphasises the significance participants attached to these issues and strengthens the overall analysis. The data is considered informal but valuable, offering new or confirmatory insights within the context of bisexual IPA and pointing to areas for future research.

Appendix O

Towards Prevention – A New Educational Model

Although not central to the thesis’s primary aims, this appendix presents a proposed educational model as a reference point for future research. It is fully referenced and includes critical analysis. The section explores how adapting current teaching approaches may foster a stronger understanding of intimate partner abuse (IPA) in bisexual and wider LGBTQ+ communities. Existing models are reviewed alongside the researcher’s new IPA perpetration framework (Dynamics of Intimate Partner Abuse chart), developed in relation to Stark’s (2007, 2023) coercive control model. The goal is to outline a foundation for an educational programme that is both accessible and effective across diverse populations, regardless of cultural or educational background.

Prevention initiatives

Myriad educational initiatives have been put in place to control and eliminate intimate partner abuse, primarily in the heterosexual population. As can be seen in the media (Dodd, 2024a, 2024b), new incidences of IPA appear daily; these educational initiatives appear to have been unsuccessful, and IPA continues to be endemic in the UK and worldwide (ibid). Legal frameworks implemented towards prevention by punishing offenders catch only those whose abusive actions have been reported to the police and have made it through the court system. Most cases of IPA are not reported due to barriers such as fear of retaliation, stigma, shame, economic dependency, lack of trust in legal and support systems (WHO, 2024) or love (Hazelwood & Michaud, 2001; Donovan & Hester, 2015). Until recently, when coercive control was added as a criminal offence (CPS Serious Crime Act, 2015), only physical or sexual violence with tangible proof resulted in punishment. Large numbers of offenders are sent to diversion programs (Batterer’s intervention programmes (BIPS), or anger management) with limited success in reducing recidivism or altering abusive behaviour (Babcock, 2004). BIPS tend to be based on the Duluth Model, and anger management programs are often inappropriate for IPA offenders since IPA is typically rooted in the dynamics of power and control rather than generalised anger (Eckhardt et al., 2006). Rather than being an uncontrollable emotion anger

may be a form of emotional release for the perpetrator (Daly & Wright, 2017, pp. 208), a psychological benefit for the perpetrator that is often overlooked.

So what does work? Teaching the dynamics of IPA early may be the gateway to developing an effective IPA prevention model (Foshee et al., 2004). Other initiatives are urgently needed, such as better legal protection and enforcement and improved and more inclusive support services for victims (Sullivan, 2018), but education is the most universal means. The fact that the educational model has had limited success to date reflects not the initiative but the teaching model. Most models rely on the Duluth model of the Power and Control wheel (DAIP, 2024), which was developed based on the feedback of women who had been the subject of physical abuse (battering). This thesis' research and the literature record its limited success, particularly among those with diverse relationships, such as members of the bisexual, LGT+ communities and minorities with different cultural backgrounds. Participants stated that the Duluth model (DAIP, 2024), as they experienced in support groups, was too complex, and its components were difficult to identify with or understand in their bisexual relationship contexts (SP, 2024). Participants in this thesis research who spoke about education felt that the Duluth model did not apply to LGBT+ populations and that it related to heterosexual relationships. They also had difficulty in identifying with a model that mainly focused on physical violence as they could not see how their non-violent IPA relationships fit (ibid).

Participants who spoke about IPA education suggested that the most effective way of addressing IPA is to teach it using a simpler model that moves away from the stereotypical focus on violence as the central means of perpetuation. Stark (2007) argues that we should move away from the Duluth model and adopt the coercive control model he developed, along with its broader understanding of abuse prevention through education. Coercive control describes the array of non-violent tools of abuse available to perpetrators in asserting and maintaining power and control over partners (ibid). These include patterns of psychological manipulation, isolation, control of communications (Email, text, phone, social media) and finances in abusive relationships. The coercive control model provides a broader framework for understanding what IPA is, a range of abuse tactics (abuser toolbox) that perpetrators use as they choose to maintain control over their partner. Unlike the Duluth model, which

emphasises gender-based power dynamics, the coercive control model can be applied across many different types of abusive relationships. These include non-heteronormative relationships (LGBT+), and multicultural contexts and highlight abuse scenarios that do not involve physical violence. The coercive control model simplifies the understanding of abuse by focusing on the abusive relationship processes rather than just on specific behaviours. This focuses on recognising systemic abusive patterns of behaviours and their myriad abusive components as opposed to seeing IPA as just acts of violence (Stark, 2007, 2023). It is universal and inclusive and recognises the diversity of relationships in terms of gender and culture. It also provides early warning of behavioural indicators and patterns that can indicate IPA intent, including those seen early in relationships, such as behaviours disguised as ‘caring’ for their new partner. These include for example asking the victim partner to update them on location throughout the day as they are ‘concerned about their safety,’ asking who they are socialising with and how they manage their money (Charlot, Joel & Campbell, 2023). This behaviour set the groundwork for abrupt or incremental escalation to IPA. Two participants (3217: W/F/33/North Carolina) and 3220: W/F/45-55/C2/Atlanta) described this exact process as an incremental assertion of control under the guise of love and caring for them until they found that they were completely trapped in their relationships with their abusers, managing all aspects of their lives.

Advantages of the Coercive Control Model for Bisexual and LGBT+ Communities

Stark’s (2007) coercive control framework offers significant advantages when applied to teaching about intimate partner abuse (IPA) within LGBT+ communities compared to traditional models. It does so by acknowledging the widespread non-physically violent abuse that, as recounted by this research participants, is prevalent in bisexual relationships. Traditional models which focus on physical violence fail to capture the nuances and dynamics of abuse in LGBT+ relationships (Donovan & Hester, 2015). It also addresses the power imbalances in LGBT+ relationships, which can be used as a coercive tactic (threats of outing, for example) (Ristock, 2011). It is flexible and allows for a more comprehensive understanding of abuse within marginalised groups. It also challenges heteronormative assumptions that are prevalent in many IPA teaching models and that focus on the male as the perpetrator and the female as the victim assumption. Instead, the coercive control framework shifts the focus to patterns of power and control (Stark, 2007). This broadens the understanding and makes it

more inclusive of the LGBT+ diverse relationship strictures (ibid). It also discusses societal influences such as minority stress, discrimination and lack of legal protections that compound the bisexual and LGT+ experiences and provides a universal, comprehensive understanding of IPA and its process. Finally, it empowers victims by valuing their narratives and lived experiences to better understand the abuse they experience. This can lead to better engagement with IPA advocacy and helping services.

Why IPA continues to proliferate in the bisexual, LGT+ and heterosexual communities.

Hetero-patriarchal teaching models can inhibit the understanding of IPA in the bisexual and LGT+ communities (Head, 2020, p. 129. SP, 2024): This researcher's belief, based on their 20-year professional experience (as an intimate partner abuse analyst and court-appointed IPA investigator) is the reason that IPA continues to permeate society is that it exists unrecognised outside its application through violent or physical abuse (Meyer, 2015) particularly in the LGBT+ communities (Donovan & Hester, 2014). This is because of an inconsistency in the use of IPA terms, definitions and terminology (Brown et al., 2015) and the failure to link these definitions to real-life examples of abuse to which people can identify. This is particularly true but not exclusively in the bisexual and LGT+ communities (Ristock, 2011). Stark (2007), for example, determined that the term 'domestic violence' excludes the many non-violent tactics of intimate partner abuse, such as patterns of manipulation and coercive control. This can lead to victims who have not been exposed to physical abuse feeling isolated as they have no means by which to identify the abuse they are experiencing as IPA. This narrow view makes it harder for victims, especially in marginalised groups, to recognise their experiences as abuse, delaying them from getting help and support (ibid). It remains a series of behaviours many people cannot identify unless exposed to a broadened definition of IPA. Hill (2019) made inroads in identifying abuser tactics by highlighting the similarities of abusers' behaviours and emotions across cultures, although her emphasis was on violent behaviour. Her efforts emphasised the commonality of what she termed the 'textbook' of perpetrator behaviours and manipulation. Donovan and Hester (2014) discuss the commonalities of IPA behaviours in same-sex relationships. The key is to make victims aware of this range of tactics to help them identify their experiences as IPA.

This lack of connection and this continuing failure to identify behaviours as IPA occur because individuals (in heterosexual and LGBT+ populations alike) do not recognise, nor can

they recognise, that their experiences of abuse are IPA (Donovan & Hester, 2014). This is because IPA, in many cases, is not gender-specific for the perpetrator or victim; men and women are both perpetrators and victims, as this research has recorded from participants (Johnson, 2008). Many victims deny their IPA experience and counter their discomfort through rationalisation, often supported by the perpetrator (Dutton & Painter, 1993; Stark, 2007)

A broad lack of understanding of what IPA is

Whatever is being taught about IPA or the methods used does not work in a way that lends itself to being widely understood. They fail to connect with diverse audiences or adequately address the complexities of abuse. The heteronormative focus on males as perpetrators and females as victims fails to recognise the dynamics of IPA in bisexual and same-sex partnerships (Dobash & Dobash, 2004). Educational frameworks lack broader applicability by failing to account for LGBT+ relationships or cultural or intersectional differences.

The participants in the survey reflected evidence of this; they had little idea of how IPA applied to them within the context of their bisexual relationships. (SP, 2023) and some participants on discussing IPA training stated that they could not identify with what was being taught. This may be due to ‘domestic violence’ modelling exhaustion where, for 50 years, the same methods and language have been used to teach the subject to a point where the public no longer sees it and, in many cases, is no longer alarmed by it (Hester et al., 2005). Some of the modelling has taken an intellectual bent (see Duluth Power and Control Wheel and LGBT Power and Control Wheel adaptations in the appendix and later in this chapter), leaning away from the practical. However, teaching IPA prevention is not an intellectual exercise; it has deeply practical implications for people who face victimisation daily. How, then, can they (we) prevent what they (we) cannot see, recognise and understand?

An examination of the IPA teaching methods that emerge when, for example, Googling ‘teaching about domestic violence’ demonstrates a plethora of teaching strategies that focus on the causes, reasons, effects, and consequences of IPA as opposed to highlighting perpetrators' behaviours, goals, the dynamics of the perpetration process, and the choices that perpetrators make in instigating and maintaining IPA (Campbell et al., 2024). They miss the concept that IPA is a predictable process on a macro level following identifiable patterns

and stages (Stark, 2007), even though the application of abuse tactics within a relationship may be unpredictable to victims.

In this researcher's opinion, and as evidenced by the participant experiences in this survey, current IPA training is ineffective (Campbell et al., 2024). This is because it relies on gendered models that have failed to adapt over time. They neglect coercive control, exclude many cultural understandings of abuse (including abuse in bisexual and LGBT+ relationships) and those who experience abuse from female perpetrators and continue stereotypical beliefs about IPA as a heterosexual violence-based behaviour (Murray & Graves, 2012). Participants echoed the opinion that current prevention teaching does not reach the audience that needs it (SP, 2023). When many victims of abuse realise that they are in an abusive relationship, it is often too late to learn. As one participant said in an interview, *'it's too late to learn to swim when you're drowning'* (3205: W/F/C5/Canada/North Miami). A form of understandable, relatable IPA instruction needs to be designed and taught from a young age. This thesis proposes such a model in the following pages based on Stark (2007, 2023), which focuses on abuse tactics through coercive control and holding perpetrators accountable.

Victims, too, have a set range of responses to the experience of IPA. These, too, are predictable (Dutton & Painter, 1993; Herman, 1992; Walker, 1979). These can include trauma bonding, identifying with the abuser, learning helplessness, and developing survival strategies. Many victims leave the relationship; others may be tied to their abuser through economics or their shared children. Many deny that the abuse is happening or minimise it, blame themselves, become emotionally numb or experience hypervigilance among others (ibid). See the accompanying *'Dynamics of Intimate Partner Abuse* (chart).'

Key components of IPA that should be emphasised when designing a prevention or educational model.

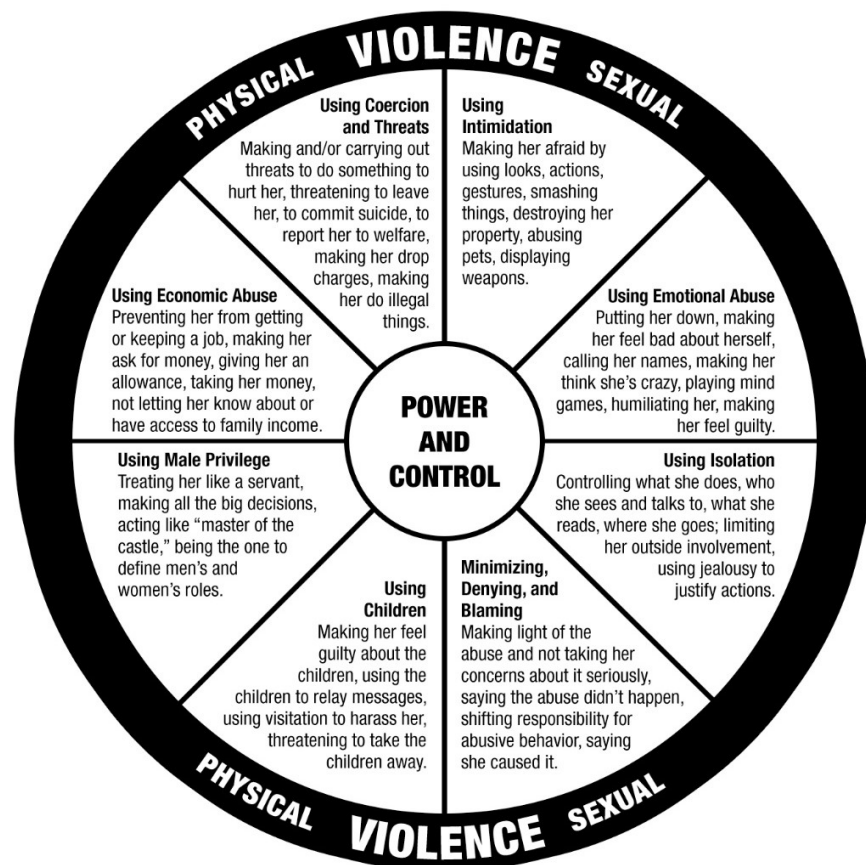
The 'why' he/she/they do it is an interesting aspect of understanding IPA but not the key component. A victim does not understand their abuser's motivations when they are being abused. The critical element is understanding that IPA is a predictable pattern of behaviour (Stark, 2007) and process based on:

1. The goal for perpetrators is to attain and maintain power and control over another person (NDVH, 2023).
2. Perpetrators abuse because they choose to (Dobash & Dobash, 2004; Bancroft, 2002; Gilette, 2021; Stark, 2007).
3. Perpetrators use a toolbox of tactics (tools of abuse) to achieve their goals, including coercive control, threats, violence, rape, isolation and others. They also use an absence of abuse as a tool (Stark, 2007; Hill, 2019).
4. Perpetrators may adapt these tactics to their needs, employing each until they no longer work on the victim and then changing to another or a combination of others (ibid).
5. Perpetrators may increase and decrease the intensity of their abusive behaviours to suit their needs (ibid).
6. Many perpetrators are innately skilled manipulators (consciously or unconsciously) capable of convincing everyone around them, including family, friends, the police, and the courts, that they are 'nice guys' and that the victim is the problem (Holland, 2022; Daly & Bray, 2019, pp. 33-34; Bancroft, 2002).
7. Abuse may be overt (evident and easy to identify, for example, physical abuse/violence) or covert (subtle and manipulative; for example, psychological abuse, gaslighting and coercive control)—or both (M3ND, 2024; Stark, 2007).
8. Some perpetrators will do almost anything to maintain their position of power and control, up to and including killing the victim and their child(ren) and themselves (see Hernandez, 2024). They may pursue the victims through the court system, ignore court orders and lie in court to maintain their control. Some are relentless and will use the legal system to pursue the victim long after the relationship is over, particularly if there are children involved using such tools as false allegations of criminal behaviour, accusations of child neglect against the victim ('failure to protect'), accusations of parental alienation and others (Morrison, 2015, pp. 274-285; Stark, 2023, pp. 32-63; Katz, 2016, pp. 46-59).
9. Perpetrators may have had many negative experiences in life; however, these are not the causes of abusive behaviour. Abusive behaviour is the result of a choice on the perpetrator's part and a constant repetition of choices even when the victim asks them to stop (Glasser, 1998; Gilette, 2021). Exceptions to this may include mental health

problems on the perpetrator's part (ibid). This choice model is reflected in the court system, where judges pass judgment based on the perpetrator's choices and personal responsibility.

A critical review of the Power and Control Wheel (Duluth model) IPA teaching model ('domestic violence') (DAIP, 2024).

An often-used model to explain the dynamics of IPA is the Power and Control (P&C) wheel, developed in 1984 by the Domestic Abuse Intervention Project in Duluth, Minnesota. The model was designed to help describe the experience of victims of violence and the tactics that abusers use. It was created using input from women attending battered women's centres and support groups (DAIP, 2024).



The P&C wheel captures the essence of tactics used to subjugate victims of IPA. (Figure O1)

The National Domestic Violence Hotline makes use of the 'power and control wheel' (P&C Wheel) (DAIP 2024) in explaining the dynamics of the abuser's power and control over their

victims. Visually, its high emphasis on physical and sexual abuse, which is theoretically higher in the LGT+ communities and shown to be higher among bisexuals (Brown et al.; J. L., 2015), does not reflect the predominant type of abuse, 'psychological abuse' a kind of abuse better and more often inclusively described under the auspices and title of 'coercive control' (Dokkedahl et al., 2019). This is because the P&C Wheel was developed by and for women who had been subjected to physical abuse ('battering') (DAIP, 2024). Many feminists critique the term 'battering' as exclusionary, as it constrains the concept of abuse to one factor: violence. It obscures the other tactics of abuse, including psychological, emotional, sexual, and coercive tactics, a perspective supported by Stark (2007). The message about power and control is essential. In addition to concerns about other aspects of the teaching content, the method in which it is presented is lacking. Wheels may look visually appealing, but they reveal little about the IPA process beyond the fact that they pack as much information as possible into a series of circles. More does not equate with better.

Its pizza slices in the circle are filled with the tactics of the abuser. In this researcher's opinion, the central point of the 'Power and Control' circle is misplaced; it should be in the outer circle, replacing 'Physical, Violence, Sexual.' If so, it would emphasise the most central aspect of understanding IPA: the extension and maintenance of power and control over another. The central hub should contain the word 'victim' surrounded by the tactics of abuse. This would make the chart visually and verbally more easily understandable.

The Duluth Power and Control Wheel design visually focuses attention on physical and sexual violence as the primary forms of abuse; it does not fully reflect modern understandings of IPA. This is particularly the case when it comes to recognising non-physical abuse and the diverse dynamics of relationships today, including those in the bisexual community and LGT+ communities. It is a perpetration model focused on the tools of the abuser, with violence and sexual abuse as its central point (see outside chart ring). The pizza slices illustrate how power and control can be applied through isolation, economic control, and other means, such as involving children. However, this process leaves out specific essential components such as victim responses, the variables of abuse (more/less/absence), how abuse tactics are variably applied, which include the intensity of how abusers can increase and decrease their levels of applying abuse tactics (Stark, 2007, 2023), and that women too can be perpetrators (ibid).

Females as perpetrators were an essential component of data provided by this thesis participants. During this thesis research, the Duluth teaching model was discussed with an LGBT+ IPA support agency. Their instructor described it as 'inadequate and confusing' for their clients (SP, 2024). It required extensive supplemental information to make it relevant for their clients, particularly given the intersectional lenses of culture, language, educational levels, literacy and economic challenges seen among them. This researcher believes that while the wheel incorporates some of the tactics of how abusers use power and control, it is presented in an abstract and unrelatable way. Some might describe it as an intellectual format. Understanding the concept requires assumptions of comprehension that may not exist for those being taught. It is an evolved, layer format based on the foundation of physical and sexual violence.

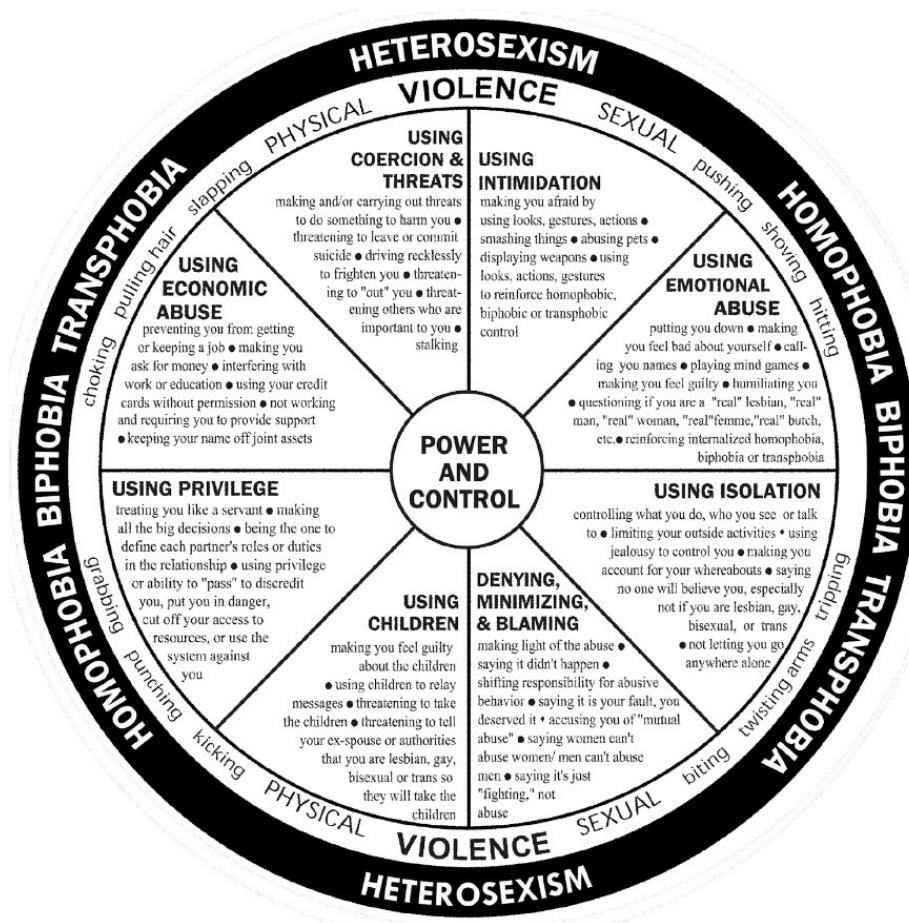
Stark (2007) informs us that physical violence is not a central component of many IPA experiences and, if present, it may be a threat, punctuation, or an endpoint of a relationship (Stark & Hester, 2019). Broadening the understanding of IPA as more than violence (see tactics) is vital to improving and widening the understanding of IPA. Kelly & Johnson (2008) inform us that the P&C Wheel's format suggests abuse as static categories. This may fail to capture the dynamic, unpredictable (for the victim) and evolving nature of abusive relationships. Perpetrators often adapt their tactics over time, using patterns of control that extend beyond the physical and sexual violence emphasised by the Duluth model (Kelly & Westmarland, 2016; Stark, 2007).

The wheel does not illustrate the linkage between perpetration and tactics in the perpetration process. Listing tactics and abuse types are simply that—a list. To be effective, a model such as this should be entirely self-explanatory and capable of being viewed and understood with little outside intervention.

As we have seen in the survey, participants experienced very high rates of physical and sexual abuse. Most did not understand that what they were experiencing was IPA, attributing it to 'normal' behaviours that included episodic violence. Many participants blamed themselves for the abuse they endured as children and adults. Those who had some understanding of what they experienced as IPA had benefited from guidance from support groups or therapists.

The Duluth model adaptation to the LGBT+ control wheel (Roe & Jagodinsky, 2024)

This is an adaptation of the Duluth Power and Control Wheel (DAIP, 2024). Many other wheels, including this one, seek to address how the power and control model applies to the LGBT+ population. We can immediately see the sheer complexity of the data portrayed on the wheel. The additional LGBT+-specific information is just thrown on there, which does little to assist in understanding the subject and, in this researcher's opinion, detracts from it.



LGBT+ Power & Control Wheel (Roe & Jagodinsky, 2024). Figure (O2)

The usefulness of the Power and Control (NDVH, 2024) wheel can be judged by its effectiveness. While it has been in use for decades in the heterosexual community, it appears to have little practical impact among bisexual and LGT+ communities (SP, 2024). This may be due to its position as a hetero-patriarchal model. After 40 years, there continues to be a lack of understanding of what IPA is as it applies to the bisexual and LGBT+ communities, as reflected in the research participants and by Head (2020) and SP (2024). This may be due to a

lack of exposure to IPA information within these communities. However, it also reflects the inability to identify with what has been essentially regarded as a heterosexual problem. That said, given the continued high levels of IPA in the heterosexual community, this model could be judged as ineffective in that population also (Dodd, 2024a, 2024b). This criticism stems from the model's foundational premise that abuse is primarily rooted in patriarchal power dynamics. This does not account for the diversity of experiences and motivations that have become increasingly evident (Stark, 2007) in heterosexual relationships. The Duluth Model frames IPA as male-perpetrated and female-victim (Pence & Paymar, 1993). This overlooks instances where women perpetrate abuse or where abuse stems from factors outside traditional gender roles (Hamel, 2009; Johnson, 2008).

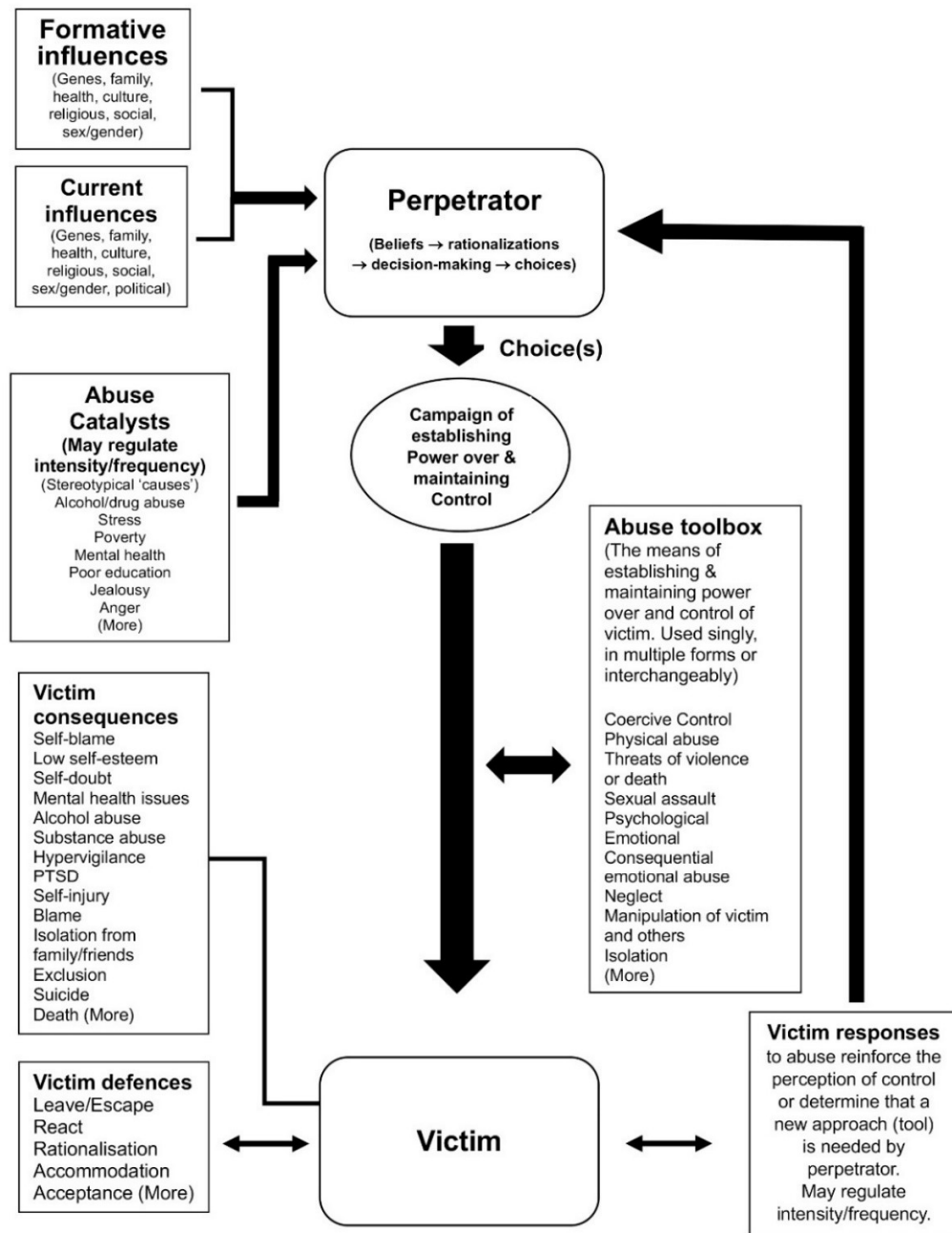
Criticism concludes that it is not a self-contained, self-teaching model; it requires teacher support to be understood. Teachers then add their input, which may be subjective depending on their backgrounds, experiences, education bias, and understanding of IPA (SP, 2024).

Finally, the power and control wheel was developed and is promoted under the legacy position of men and women and has been the subject of widespread criticism as it does not adapt to minority LGBT+ experiences (SP, 2024). Teaching models that reflect what is known about male and female perpetrators would benefit from being gender-neutral to teach that anyone, not just males, may perpetrate these behaviours and that women are not always the default victims (Dutton & Corvo, 2006).

Creating a solution

A more inclusive teaching model for intimate partner abuse (IPA) than the traditional Power and Control Wheel is the Coercive Control Framework developed by Stark (2007). As has been discussed, this model moves beyond the primarily physical and gendered focus of the Duluth Power and Control Wheel, providing a broader understanding of abuse that includes non-physical, psychological, and systemic dimensions. It is the basis for developing the *Dynamics of Intimate Partner Abuse* (chart) (Stark, 2007, 2023; Daly, 2023), which follows on the next page.

Dynamics of Intimate Partner Abuse
(adapted from Stark's, 2007, Coercive Control model. Daly, 2023)



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The dynamics of Intimate Partner Abuse (IPA). (Figure O3)

Evan Stark's (2007) concept of coercive control offers a comprehensive framework for understanding IPA. Stark describes coercive control as a pattern of abusive behaviours aimed at removing the victim's autonomy and eroding their sense of identity. His model of coercive control surpassed the traditional Duluth Model in several important aspects, as discussed. While the Duluth Model, developed in the 1980s, emphasises the Power and Control Wheel to illustrate tactics abusers use to dominate their partners, it primarily focuses on physical violence and overt behaviours (Pence & Paymar, 1993). Stark's model reaches more deeply into the subtle, pervasive patterns of control that often go unnoticed yet profoundly impact victims. His model, based on the feminist theory of male-on-female violence, using this chart, now goes beyond that to include LGBT+ applications (Stark & Hester, 2019, pp. 81-104) of same-sex IPA. By recognising non-physical forms of control as central to the abusive dynamic, the coercive control framework provides a more inclusive understanding of domestic abuse (Wilcox, 2006). Donovan and Hester's 2014 study illustrated that coercive control is also a feature of same-sex relationships. They observe the similarities of how it is experienced across all same-sex sexualities, including lesbian, gay male, and bisexual people (ibid).

One significant feature of Stark's model is the emphasis on abuse's multifaceted, patterned, and continuous nature. Stark argues that coercive control involves a range of tactics (abuse 'tools') that entrap, overpower and maintain control of their partners—including psychological manipulation, emotional abuse, isolation, monetary control, stalking and various forms of physical and technological surveillance (Stark, 2007). This perspective shifts the focus from the 'domestic violence' concentration (Pence et al., 1993) of recurring incidents of physical violence to a broader understanding of how abusers use the tools of coercive control to systematically strip away their partners' autonomy and freedom. This shift in perspective may make the understanding of IPA in the bisexual and LGT+ communities easier to understand and more related to their experiences.

Stark's (2007) model addresses the limitations of the Duluth Model by acknowledging the experiences of IPA victims who may never face physical violence but experience severe psychological and emotional abuse. By recognising non-physical forms of control as central to the abusive dynamic, the coercive control framework provides a more inclusive understanding of IPA (ibid). This inclusivity is crucial for victims, professionals and educators, ensuring that

interventions and teachings are relevant to a broader range of victim experiences, including bisexual and LGBT+ people (Stark & Hester, 2019).

A critical aspect of Stark's model is its focus on the socio-political context of abuse. He posits that coercive control is deeply rooted in societal structures and perspectives that preserve gender inequality. His model encourages a holistic approach to addressing and understanding IPA, which goes beyond individual relationship experiences to challenge systemic IPA issues (Stark, 2007).

Teaching the dynamics of IPA from a young age

Nation et al. (2003) argue that prevention programs targeting youth are crucial for reducing IPA, as they teach young people to identify abusive patterns early. Wolfe et al. (2012) emphasise that by adolescence, many teens are already exposed to or engaged in unhealthy relationship dynamics, including emotional and physical abuse. The advent of social media has created new avenues of abuse for supporting this abuse. Existing IPA prevention curricula have been described as exclusionary, overly academic and disengaged from real-life experiences (Flood & Pease, 2009) that do not reflect relationship dynamics including age, stages, and development. Donovan and Hester (2014) highlight that many IPA curricula are built on heteronormative assumptions, which may exclude bisexual and LGT+ audiences. They do not consider that the 'audience' is diverse and includes individuals across a wide range of demographics and (dis)abilities. These diverse audiences may learn more effectively through alternative means, such as visual presentations, storytelling, and community-based teaching methods (Flood & Pease, 2009).

To conclude, it is not solely about the victim; understanding the perpetrators is also key to preventing IPA (Bancroft, 2002; Kelly & Johnson, 2008). If we teach that perpetrator behaviours are predictable, it serves to disempower the perpetrator (Stark, 2007, 2023, pp. 335-340; Bancroft, 2002; Walker, 1979). They become 'found out,' and their control efforts become transparent and predictable. (ibid).

Guide for teaching about IPA

Principle	Description
Simplify	The message should be simple and easy to understand, preferably presented on a single page or in an image/chart.
Intuitive design	It should be designed to be both visually and verbally intuitive.
Accessibility	Do not assume the audience's education, language or literacy level; simpler is better.
Gender neutrality	Avoid hetero-patriarchal modelling – teaching should be gender-neutral to reflect how perpetration goes beyond male-on-female violence as experienced in the bisexual and LGB+ communities.
Behavioural focus	Concentrate on perpetrator behaviours, the IPA process and victim responses. These are often predictable and similar across all populations (Hill, 2019).
Narratives	Include a range of stories and narratives that illustrate IPA experiences relevant to the audience being taught.

Teaching guide (Figure O4)

Dynamics of Intimate Partner Abuse (chart) (Stark, 2007, 2023; Daly, 2023)

Gender-neutral model based on ‘power and control’: This researcher has developed an illustrated model based on Stark’s Coercive Control model (Stark, 2007, 2023) – the ‘Dynamics of Intimate Partner Abuse (chart)’ (attached) as an alternative to the Duluth model. It was developed in 2023 during the development of this thesis and has been under improvement and testing since then. The abuser-tactics-victim model was developed based on Stark’s (2007) coercive control model by this researcher, influenced by working on this thesis’ survey, combined with past writing and professional experience working with victims of IPA. It can be theoretically applied to any abuser-victim IPA relationship regardless of sexual orientation, gender identity or cultural differences. The Dynamics of Intimate Partner Abuse (Chart) is designed to be relevant to all relationships, bisexual, LGT+, heterosexual, interfamilial and others.

Testing. This chart will undergo further testing in 2025/6 as part of this researcher's writing of a new IPA course for the judiciary. It was not included or shown to the participants in this thesis research.

A system that provides an intuitive understanding of the IPA process is essential for effective teaching (Kelly & Johnson, 2008). This new 'Dynamics' model developed by this researcher aims to provide just that, following the completion of this thesis. The Dynamics of Intimate Partner Abuse (chart) was designed as a self-teaching tool to convey an intuitive message that can be understood with minimal instruction. Simplicity is its core, as it simplifies the process into its essential components: who, what, how, when and to whom.

Model development and testing

Initial testing of this model began with providing the chart as is, without explanation, to a testing subject. After a short review, they are asked to explain to the researcher what the chart represents and what it means to them. Notes are made of participants' comments on whether they understand the concept described in the chart and, if not, what can be improved or changed. It is close to the point that the researcher is content that the chart is self-explanatory. It will be expanded in 2025/2026 to a larger test audience, including an LGBT+ IPA support agency, which serves clients from diverse cultural backgrounds. The next challenge will be translating it into different languages and exposing it to people from other cultures to assess their understanding, as previously tested.

When describing this as a 'teaching model', it is a model that lends itself to victims of IPA and broader dynamic audiences, including marginalised groups, minorities and LGBT+ audiences. It is a practical model designed to clearly explain the dynamics of perpetrator behaviours, tactics and victim responses. It is hoped that by doing so, the concept of predictability, patterns, and similarity will become evident, leading to a better understanding due to familiarity (Frieze et al., 2020). It will be deemed successful if it can be gauged as effective in prevention and can be part of a self-taught or instructed package in multiple languages. This model will be used post-PhD qualification as part of a training programme for domestic violence and family court judges to provide them with a standard, easily understood basis for understanding the topic. It will also be provided as a package along with other

support materials for court case officers and staff and as an advisory for filers in their courtrooms.

The Dynamics of Intimate Partner Abuse (chart) can be adapted for various audiences, e.g., it is designed to encourage questions and demonstrate that the perpetration-victimisation process is not gender-specific, which will make it readily understandable to an LGBT+ audience. Tests by this researcher have shown that audiences have a high rate of understanding and retention. When presented as part of a lesson, comprehension among individuals with limited literacy and education is high, as well as among those for whom English is a second language. More development is needed in this area.

The Dynamics of Intimate Partner Abuse model (Stark, 2007; Daly, 2023) is designed to help prevent IPA through the three stages (Chamberlain, 2008).

Stage	Description
Primary prevention	Providing practical education and a means of understanding before IPA occurs.
Secondary prevention	It can make sense to someone who is an active victim of abuse to understand what is happening to them, why, and where they fit in the process.
Tertiary prevention	Providing IPA understanding after the abuse has occurred (ibid).

Dynamics of IPA (Figure O5)

The Dynamics of the IPA chart explain how the abuse process works and how the perpetrator initiates and maintains it. It also describes the decision-making of the perpetrator and the victim, and the ways that perpetrators and victims behave and respond to the abuse. This is crucial to understanding the process (Dutton, 2006; Dobash & Dobash, 2004).

When compared to the NDVH (2024) power and control wheel, the difference is immediately apparent. The Dynamics of Intimate Partner Abuse (chart) is relatable by providing context and form to the actions described, not ascribing gender to the perpetrator or victim and

describing the influences and reactions on the perpetrator and the victim. The process is straightforward to follow.

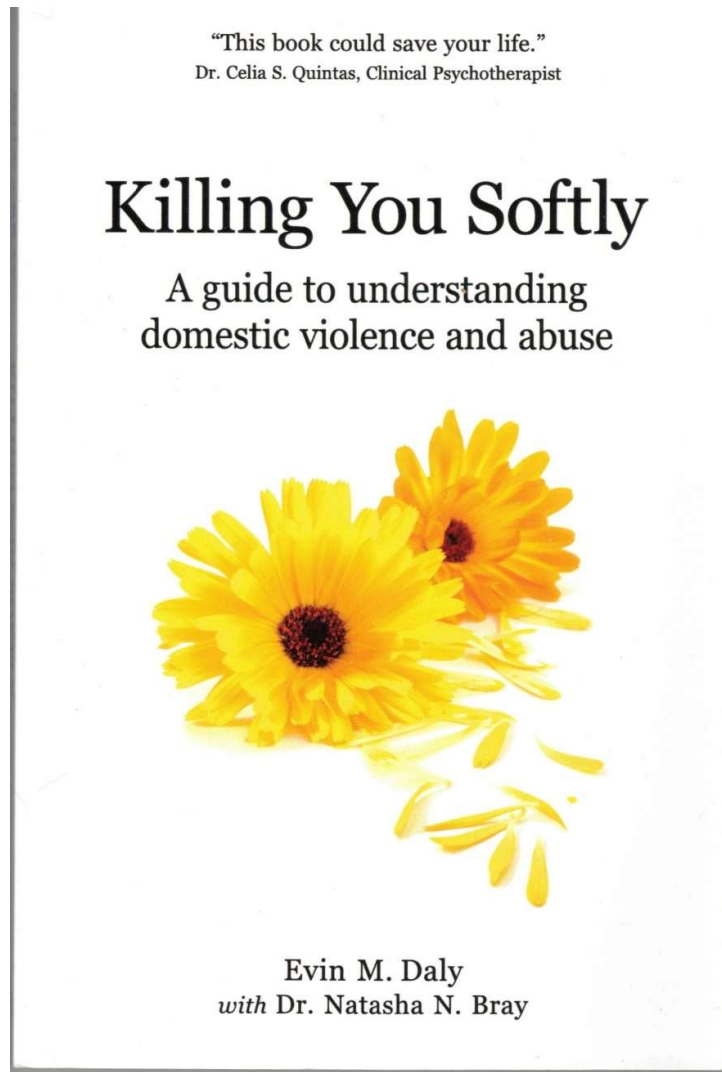
Summary

This chapter explored strategies for preventing intimate partner abuse within bisexual, LGBT+, and heterosexual communities, emphasising the advantages of adopting a simplified coercive control educational framework. It highlighted the widespread lack of understanding of IPA and reviewed existing prevention initiatives, including a critical assessment of the Power and Control Wheel and its adaptation for LGBT+ individuals. The chapter proposed that prevention should begin with education from a young age, guided by clear teaching tools such as the Dynamics of Abuse chart. Building on this, it introduced the Dynamics of Intimate Partner Abuse model as a new framework for IPA prevention, outlining its development, application, and potential for testing in educational and community contexts.

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Appendix P

Researcher's publications



Killing You Softly, book cover. Figure P1.

Daly, E., Bray, N (2019). Killing you softly. A guide to understanding domestic violence and abuse. Parker Publishing Inc. Miami, Florida.

Daly, E., Wright, J.E. (2017). Child Abuse. Prevention through understanding. Parker Publishing Inc. Miami Beach, Florida. USA.