2021

The Experience of Childhood Sibling Violence and Partner Violence in Adult Relationships

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Walden University
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Abstract

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MS, Walden University, 2017

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Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology

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Abstract

Victims of sibling violence may be at increased risk for revictimization in peer and dating relationships, and sibling violence may influence how the young adult reacts to conflict in their interpersonal relationships. The purpose of this study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. Bandura's social cognitive theory was the conceptual framework of this study. The research question was how individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults. Five individuals who experienced childhood sibling violence and intimate partner violence in adulthood were recruited through purposeful sampling and were interviewed using a semistructured interview format. Moustakas's phenomenological research design was used for data collection and analysis to identify common themes across interview transcripts. The seven themes that emerged from the data were family environmental factors that increase risk for sibling violence, the cycle of violence, participants' lived experiences with childhood sibling violence, participants' lived experiences with intimate partner violence, the effects of sibling violence, the effects of intimate partner violence, and perceptions of sibling violence and intimate partner violence relationships. The positive social change implications for this study include increasing public awareness of this social issue, and the findings may be used to influence public policy efforts and improve the programs and services for sibling violence and domestic violence victims.

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Dedication

In loving memory of my father, D. Clark Barger, and brother, Ryan C. Barger.

You provided me with the tools that I needed to be successful in my journey. I also

dedicate this study to my daughter, Penelope J. Barger.

Acknowledgments

I want to thank my mother, Alicia, my Aunt Sally, and my daughter's father, Walter, for the encouragement and support throughout this journey. I also want to thank my dissertation chair, Dr. Robin Friedman, for your support and guidance from the time you were my instructor to now as my dissertation chair. I want to thank my committee members Dr. Andrea Goldstein and Dr. Wayne Wallace for your patience and support. Each of your contributions made this dissertation study possible.

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Chapter 1: Introduction to the Study

Sibling violence is among the most common form of family violence (McDonald & Martinez, 2016), which may lead to severe emotional and behavioral disturbances such as the inability to relate to peers, low self-esteem, low self-efficacy, substance abuse, and dating violence (Perkins et al., 2017). More research is needed on strategies that parents can use to keep their children safe from *sibling violence* victimization and to help design intervention programs that can be accessible to both children and adults who have been abused by a sibling (McDonald & Martinez, 2016). The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced *intimate partner violence*. I used a social cognitive approach for understanding revictimization as a cyclical process, in which behaviors are learned through observation of model figures and experiences with violent siblings may be influential in developing a set of standards for relationships and conflict resolution abilities. I explored if these interactions may place an individual at risk for later revictimization in adult intimate partner violence relationships and how sibling violence may affect their emotional and behavioral functioning as an adult.

In this chapter, I will provide an overview of the background for this study that substantiates the problems associated with sibling violence and the need to further investigate if there is a relationship between childhood sibling violence and intimate partner violence relationships in adulthood. I will also provide information on how this study addressed the gaps in the current literature, evidence that the problem is current, the conceptual framework that was used to guide the study, research methodology and steps

to data analysis that were used to investigate the phenomena, key terms in the study, assumptions, scope and delimitations, and potential contributions that could advance the knowledge within the scientific community as a result of conducting the study. The chapter will be concluded with a summary and a transition to Chapter 2.

Background

Sibling relationships shape individual development such as self-esteem, relating to peers and relationship partners, socialization, cognition, social competence, and coping strategies (Meyers, 2017). Negative and hostile sibling relationships are associated with behavioral and mental health problems in adolescence and adulthood, such as anxiety, unhealthy peer relationships, antisocial tendencies, and delinquent behaviors (Katz & Hamama, 2018). There is also a strong association between childhood physical abuse, aggression, and criminality (King et al., 2018). Sibling violence occurring at least once per year has been associated with conduct disorder, lifetime physical aggression, and difficulty regulating emotions and temperament (King et al., 2018). Further consequences of sibling violence include poor peer relations, use of illegal substances, aggression, low self-esteem, dating violence, posttraumatic stress disorder (PTSD), and eating disorders (Perkins et al., 2017). Sibling relationships can also be detrimental to personality development, affecting how individuals may parent their children and relate to romantic partners in adulthood (Magagna, 2014). In their interpersonal relationships, victims of sibling abuse may be overly sensitive, blame themselves for the abuse, repeat the victim role, they may become distrusting of others, and oftentimes are suspicious (Meyers,

2015). Victims of abuse may also repeat attachments to new romantic partners that share similar characteristics to that of the abusive sibling (Meyers, 2015).

Although sibling abuse is rampant in American families, the emotional and behavioral effects on victims has not received much attention from researchers (McDonald & Martinez, 2016). There is also no sibling theory to explain the role of sibling perpetration of violence and the effects in adulthood (Katz & Hamama, 2018). Further, childcare policies are directed at the parents and not the abusive sibling (Perkins et al., 2017). In this study, I addressed the gap in the literature by exploring adult relationship difficulties to better understand these behaviors in adults who also experienced sibling violence in childhood. There is a need to investigate other types of relationship measures to understand adult behavior after experiencing childhood sibling violence (Mathis & Mueller, 2015). This study was needed to explore the lives of those who had endured childhood sibling violence and intimate partner violence as an adult to have a deeper understanding about the cyclical process of violence, imitative learning of aggression, and tolerance for abuse and the likelihood for revictimization in adulthood. The results can advance knowledge on family violence and its relation to later psychopathology. Such information can also be used to help restore the lives of those who have endured sibling abuse in childhood and adulthood through intervention efforts to reduce the risk for revictimization.

Problem Statement

More children are victimized by a sibling than by a caregiver (Tucker et al., 2018). Sibling abuse may lead to extreme forms of emotional and behavioral problems in

adulthood such as unhealthy peer attachments, low self-esteem and self-efficacy, alcohol and/or substance abuse, and interpersonal violence (Perkins et al., 2017). Furthermore, family violence may influence children's development of social identity, teaching children that violence is normal in relationships and increasing the risk for revictimization (Glatz et al., 2019). Parent–child victimization and sibling perpetration of violence can be influential on how young adults deal with conflict in their interpersonal relationships (Lee et al., 2014). In this study, I addressed the gap in the literature by exploring adult relationship difficulties to better understand these behaviors in adults who also experienced sibling violence in childhood.

Purpose

The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. There is a need for increased understanding into how siblings are influenced by one another and if this behavior is imitated in romantic relationships in adulthood. In this study, I explored the participants' lived experiences with childhood sibling violence and adult intimate partner violence, which may reveal how abusive sibling interactions could contribute to abuse outside of the family context such as adult intimate partner violence relationships. Participants were between 30 to 63 years of age and have experienced sibling violence during childhood and intimate partner violence as adults but were removed from the intimate partner violence relationship. Moustakas's (1994) phenomenological design was used to obtain data from participants. Participants were

asked to participate in open-ended qualitative interviews that focused on their relationship with their siblings and their experience with intimate partner violence.

Research Question

The research question for this study was "How do individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults?"

Conceptual Framework

The conceptual framework that guided this study was Bandura's (1991) social cognitive theory. Social cognitive theory focuses on both the development of competencies and regulation of human behaviors (Bandura, 1999). According to Bandura (2018), humans are a product of their social and familial environment. Social cognitive theorists suggested that observational learning through model figures, imitative learning, social interactions, past experiences, and the media influence an individual's cognitive development, moral reasoning, standards, and behavior (Bandura, 1999). Modeling and reinforcement are strong influences on thinking processes, morality, self-sanctions, and self-efficacy (Bandura, 1999). Behaviors that produce positive outcomes or are reinforced will be adopted and behaviors associated with negative consequences will be discarded (Bandura, 1999). For instance, siblings and peers are highly influential in justifying wrongful and problematic behaviors (Bandura, 1991). When children observe violence used as a tool for conflict and the desired goals are achieved, violence becomes morally justified and nonviolent actions are viewed as ineffective (Bandura, 1991).

Social cognitive theory can explain the cycle of violence in terms of learned aggression, normalizing violence, and the consequences of ascribed blame on victims of abuse and the risk for revictimization in other settings such as adult intimate partner violence. Social cognitive theory is applicable to this study because this theory focuses on peers and those in the immediate family environment and their role in working together in developing standards and moral codes (Bandura, 1999). Human functioning can be explained through the child's family environment, biological events, social networks, and past experiences and its influence on the development of self-efficacy, cognitive learning, and relationship standards in adulthood. Bandura (1991) also suggested that both parents and siblings are responsible in shaping behaviors, standards, and morality. By using this framework, I was able to explore the lived experiences of participants who had endured sibling violence in childhood and intimate partner violence as an adult. Through such interactions with participants, I was able to better understand the cyclical process of violence from childhood into adulthood, the impact of sibling violence and perception of relationships later in adulthood, and mental health outcomes. More information about Bandura's social cognitive theory will be presented in Chapter 2.

Nature of the Study

The nature of this study was qualitative research using a phenomenological design (Moustakas, 1994). In this study, I focused on the participants' experiences and behavior through first person accounts (Moustakas, 1994), with the ability to explore the meanings attached to these events. The participants' experiences that were of interest for this study were: (a) the experiences with childhood sibling violence, (b) and the experiences with

intimate partner violence in adulthood. The sample size for this study was 8–10 participants. A homogeneous population has little variation, and a small sample size may be used. A research study with homogeneous participants allowed me to gain a deeper understanding about the overall perceptions among the participants' lived experiences (Alase, 2017). The main source of data collection was qualitative interviewing, delivering a series of open-ended questions about the topic with the objective of addressing autobiographical meanings as well as the participants' social meanings and significance (Moustakas, 1994). Moustakas's (1994) phenomenological process and steps to data analysis was used to understand the lived experiences of the participants. More information about research design and methodology will be presented in Chapter 3.

Definitions

I used the following key terms throughout this study:

Intimate partner violence: Intimate partner violence refers to behavior within a married, unmarried, and live-in relationship that causes physical, psychological, or sexual harm toward those in that relationship (Patra et al., 2018).

Sibling violence: Sibling violence is any form of violence that is inflicted by one sibling to another with the intent to cause harm (Perkins et al., 2017).

Assumptions

The goal of this study was to explore the lived experiences of individuals who had suffered from sibling violence in childhood and how this type of childhood adversity may be associated with adult intimate partner violence relationships. The target population were those in adulthood who have experienced childhood sibling violence and adult

intimate partner violence and can provide in-depth descriptions of those events. Participants who had experiences with both forms of interpersonal violence were crucial for this study because the purpose of the phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. My assumption was that the participants recruited would be truthful and accurate in their recollection of events.

Scope and Delimitations

I used a phenomenological research design for this study to explore the lived experiences of participants who have endured sibling violence as a child and intimate partner violence as an adult. The participants' experiences shed light into the cyclical process of interpersonal violence beginning in childhood and continuing into adulthood. The scope of this study was limited to 8–10 participants who had experienced both forms of interpersonal violence (childhood sibling violence and adult intimate partner violence). Based on the criteria for inclusion, participants were recruited using a purposeful sampling strategy.

The boundaries of this study were the preselected criteria for participants and semistructured interviewing. The age criteria for participants were 18–64 years of age. Adulthood is the developmental period where the individual associates their worldviews and relationship standards with their mid-childhood experiences (Lee et al., 2014). Participants experienced both childhood sibling violence and intimate partner violence as an adult, and participants were removed from the intimate partner violence relationship to reduce risk and ensure participant safety. The criteria presented an opportunity to learn

the perspectives of adults while excluding those who are over 64 years of age who have had these same experiences. The form of questioning that was used was qualitative open-ended questioning, focusing on their experiences, and not individual or socioeconomic characteristics that may be included through quantitative measures. Despite these boundaries, the nature of the study was designed for individuals within the young adulthood to middle adulthood age ranges, and their experiences and perspectives were needed to address the research question. Due to a small sample size, transferability of the study's results may be limited. However, the goal in qualitative research is to produce descriptions of events that are relevant to the context, not to develop true statements that can be generalizable to other individuals and settings (Ravitch & Carl, 2016).

Limitations

One limitation of this study was a small sample size. In phenomenological research, small sample sizes may be used that may not be generalizable to other populations. A second limitation of this study was that the participants' recollection of events that had occurred during childhood may be distorted or may not be communicated clearly and/or accurately because memory does fade over time. This is a potential limitation in cases where participants are within a wider age group.

As a qualitative researcher, I remained neutral and objective to eliminate researcher biases. It is crucial to refrain from influencing the participants' responses and have a reliable source for audio recording. Qualitative researchers strive to achieve confirmability in the findings (Ravitch & Carl, 2016). The questioning was open-ended, the language of the questions was worded in a way that invites participants to be open

and truthful in their responses, and my language and responses were free of judgment (Ravitch & Carl, 2016). Member checking was also used to further ensure that researcher bias was not an issue throughout the research process, to have participants verify the accuracy of transcripts, and to establish credibility (Ravitch & Carl, 2016). In Chapter 3, additional details on the research design and data collection will be provided.

Significance of the Study

This study contributes to the gap in the literature by exploring adult relationship difficulties to better understand these behaviors in adults who also experienced sibling violence in childhood. There is currently no theory to explain sibling perpetration of violence and the impact in adulthood (Katz & Hamama, 2018). This phenomenological study focused on victims of childhood sibling violence and adult intimate partner violence. Sibling violence has not achieved status of a serious social or psychological problem until recent years (Mathis & Mueller, 2015). Less attention has been given to victims of sibling violence in childhood and the relationship to long-term adult behaviors (Mathis & Mueller, 2015).

The results of the study may advance knowledge in the discipline by understanding the potential psychological consequences associated with sibling violence and the likelihood for revictimization in adulthood. Childcare policies that are in effect to intervene on cases of sibling violence are directed at the parents and not the abusive siblings (Perkins et al., 2017). This study may result in achieving the status of a social concern, acknowledging the victims, and find ways to address their needs (Mathis & Mueller, 2015).

Positive Social Change Implications

The positive social change implications for this study include raising awareness of this problem and contributing to intervention and prevention programs needed to help restore the lives of those who have experienced childhood sibling violence and adult intimate partner violence. The participants' experiences revealed how the effects of childhood sibling violence contributed to revictimization in adult intimate partner violence relationships. Better understanding of this phenomenon may result in improved intervention services for this population.

Summary

In this phenomenological study, I explored the lived experiences of individuals who had endured childhood sibling perpetration of violence and intimate partner violence as an adult. This chapter included an introduction to the study and background information that supports the need to explore this issue. I also provided a description on how this study addressed the gap in the current literature. The conceptual framework that was used to guide this study was Bandura's (1991) social cognitive theory. The findings of this study may help expand efforts in intervention and prevention programs for children and their families by raising awareness of this social issue.

In Chapter 2, I will present information on Bandura's (1991) social cognitive theory, the relevance to the study, previous research that was conducted using a social cognitive theory approach, and the relationship among sibling interactions and adult interpersonal relationships. I will also present a synthesis on the current literature on childhood sibling abuse and violence in adulthood. Additionally, research studies that

contain information on sibling abuse, attachment systems, learned behaviors, and a

tolerance for violence in adulthood will be discussed.

Chapter 2: Literature Review

Childhood sibling interactions are influential on the ways that individuals resolve or cope with conflict in adult relationships (Lee et al., 2014). Sibling perpetration of violence may lead to emotional and behavioral difficulties in adulthood including problematic peer relationships, low self-esteem, substance abuse, dating violence, poor work and academic performance, delinquency, and conduct problems (Perkins et al., 2017). Learned behaviors through observing or experiences with siblings may carry over into adulthood. Adulthood is a critical point in an individual's life, where they associate worldviews and interpersonal relationships with their mid-childhood experiences, and 23% to 38% of adults report violence in their romantic relationships (Lee et al., 2014). However, the impact of childhood sibling to sibling aggression and adult functioning beyond 14 years old has not received much attention by researchers (Mathis & Mueller, 2015). The experience of sibling aggression and its impact on female siblings in adulthood also remains unclear (Mathis & Mueller, 2015). There is also a need to address how sibling characteristics may create the onset for sibling violence and dating violence perpetration for men (Lee et al., 2014).

The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. There is a need for increased understanding into how siblings are influenced by one another and if this behavior is imitated in intimate partner violence relationships. I explored the participants' lived experiences with childhood sibling violence and intimate partner violence as an adult in hopes of understanding if victims of sibling violence are

likely to experience revictimization such as intimate partner violence. This chapter will provide the review of the literature used for the study. An explanation of sibling perpetration of violence, environmental forces that may lead to sibling violence, the perspective of learned aggression, and revictimization and the cycle of violence in adulthood will be discussed. The chapter will be concluded with a summary of key findings in current literature, its relevance to the study, and recommendations for future research.

Literature Search Strategy

The review of the literature began through searching the databases PsycINFO, PsycARTICLES, SocINDEX, SAGE Journals, the Criminal Justice Database, and Google Scholar. The following keywords were used in the PsychINFO database: *dating violence*, *abuse*, *sibling violence*, *sibling perpetration*, *sibling relationships*, *adulthood*, *dating relationships*, *domestic violence*, and *intimate partner violence*. In that search, I retrieved articles on the statistics of sibling violence and reports of sibling violence victims. In addition, articles were retrieved on the psychological symptoms of childhood sibling physical, emotional, and sexual violence, focusing primarily on how childhood violence creates the onset of physical aggression in adulthood and the likelihood of choosing abusive relationship partners. The terms that were used for this search were representative of the key parts relative to the phenomena being studied. Journal entries were then narrowed down to articles related to the psychology or sociology of sibling violence and adult intimate partner violence.

The following key terms were used in the PsycARTICLES database: *sibling violence*, *violent sibling relationships*, and *dating violence*. In this search, I retrieved articles containing information on emotional disturbances following sibling perpetration of violence and aggression perpetration in adulthood. The following key terms were used in the SocINDEX database: *sibling violence* and *intimate partner violence*. In that search, I retrieved articles on sibling physical and sexual abuse, parental responses toward sibling violence, the link between sibling violence and adult sexual aggression, and sibling hostility and externalized symptoms of psychological distress. The following key terms that were used in the SAGE Journals database were *sibling violence*, *adulthood*, and *intimate partner violence*. In this search, I retrieved articles on accounts of sibling violence, psychological consequences such as abuse amnesia and powerlessness, family dynamics that contribute to sibling violence, and sibling violence and attachment to peers and parents.

The following key terms were used to search the Criminal Justice Database: *adulthood* and *sibling violence*. The articles that were retrieved through this search contained information on common personality characteristics for victims and perpetrators of sibling violence, influential factors in the home environment associated with sibling violence, and attachment-related perspectives on sibling perpetration of violence. The key terms that were used to search the Google Scholar database were *sibling violence*, *intimate partner violence*, and *adulthood*. The articles that were retrieved in this search provided information on sibling intimacy and lack of sibling intimacy and its impact on dating violence in adulthood, sibling violence and conflict resolution strategies in

intimate relationships, sibling bullying and its association with sexual and physical dating violence in adulthood, family dynamics and its influence on sibling relationships, attachment and violence in adulthood, and mental health problems associated with sibling violence in adulthood.

Conceptual Framework

Social Cognitive Theory

The conceptual framework for this study is social cognitive theory, which was introduced in the 1980s by Albert Bandura. Social cognitive theory was founded on an agentic perspective in which human functioning is a product of intrapersonal influences, behaviors that model figures engage in, and environmental forces that permit such standards and behaviors (Bandura, 2018). People act as agents, producing effects by the actions that they take (Bandura, 2018). Social cognitive theorists assert that observation of modeling figures, imitative learning, social interactions, experiences, and media contribute to an individual's thoughts, moral reasoning, and behavior bidirectionally (Bandura, 1999). In social cognitive theory, the knowledge structures, rules, and strategies that models display impact cognitive development and the construction of behavioral patterns (Bandura, 1999). Knowledge structures are formed from thought processes and behavior from the outcomes of exploration (Bandura, 1999). Modeling and reinforcement are strong influences on cognitive development, moral standards, self-sanctions, and self-efficacy (Bandura, 1999).

Bandura's focus was to understand how cognition and behaviors are influenced through observational learning and social modeling in an individual's familial and social

environment (Bandura, 2018). Models in the familial environment exhibit attitudes, values, coping skills, and patterns of behavior (Bandura, 2018), which is influential in youth during developmental stages. By observing both positive and negative reinforcements following an action, individuals learn which actions are suitable across different situations (Bandura, 1999). Observational learning of model figures and the information that they convey enables individuals to develop their knowledge, reasoning, and competencies (Bandura, 1999). As behaviors become routinized, they no longer require effort for change or higher cognitive control (Bandura, 1999). Behaviors that produce positive reinforcements are easily adopted and used routinely whereas, behaviors that produce negative consequences are discarded (Bandura, 1999). Individuals, especially during developmental stages observe behaviors and adopt those they have seen become successful in achieving a desired outcome (Bandura, 1999). Individuals then develop a set of standards and self-sanctions (Bandura, 1999).

Properties of Self Agency

There are three main properties to agency: forethought, self-reactiveness, and self-reflectiveness (Bandura, 2018). Forethought refers to how someone is motivated or guides themselves by creating plans of action, adopting goals, and visualizing the likely outcome following an action (Bandura, 2018). Behavior is influenced by a person's goal and anticipated outcome (Bandura, 2018). Self-reactiveness is how someone manages their behavior, adopting behavioral standards, and self-regulating their behaviors to align with their standards (Bandura, 2018). Self-reflectiveness is when the person reflects on their capabilities or competencies, thoughts, and actions (Bandura, 2018). In social

cognitive theory, personal factors such as cognition, biological events, behavioral patterns, and environmental forces influence one another (Bandura, 1999). People are agents, or producers, and are products of their social environment (Bandura, 1999). Behaviors are depicted as either being shaped by environmental factors or are driven by an individual's personality traits and feelings, referred to as triadic reciprocal causation (Bandura, 1999).

Imitative Learning of Aggression and Research

Bandura et al. (1961) examined the learned behaviors of a group of preschool children after observing an aggressive and non-aggressive model figure with the hypothesis that the children would learn imitative habits as a result of prior reinforcement. There were 36 girls and 36 boys who participated in the study, and the mean age was 52 months. Children were exposed to aggressive and non-aggressive models and tested for imitative learning in a new situation without the model present. One half of children were exposed to aggressive models, and one half were exposed to non-aggressive models, and then children were subdivided and observed same-sex models, and the other children viewed both opposite sex models. Using a Bobo doll, three responses of aggression were measured such as imitation of physical aggression, imitative verbal aggression, and imitative non-aggressive verbal responses (Bandura et al., 1961). Children exposed to aggressive models exhibited aggression resembling the model figure, and children in the non-aggression condition exhibited no imitative aggression (Bandura et al., 1961). One-third of children in the aggressive condition also repeated non-aggressive verbal responses (Bandura et al., 1961). The study revealed that

the subjects identified with the aggressor after exposure in the aggression model condition. The children became an agent of aggression by adopting the attributes of an aggressive authoritative model, and the concept of imitative learning of aggression had emerged (Bandura et al., 1961).

In a more recent, similar study, Mathis and Mueller (2015) used a community sample of 322 adult participants to study childhood sibling aggression and its relationship to emotional difficulties and aggressive behavior in adulthood. Mathis and Mueller found that sibling aggression is a contributing factor to aggressive behaviors in adulthood and that the behaviors are learned through observing others in the familial environment. Participants completed an online questionnaire measuring childhood sibling aggression, sibling relationship qualities, exposure to other forms of family violence, adult emotional difficulties such as depression and anxiety, and adult physical aggressive behaviors toward friends, family, dating partners, and strangers. One half of female participants reported sibling physical aggression. Sibling aggression was strongly associated with emotional difficulties and aggression perpetration in adulthood.

Research has also indicated that family plays a significant role on romantic relationships during adolescence and adulthood, though research has focused primarily on the influence of parental figures (Wheeler et al., 2016). Wheeler et al. (2016) examined sibling relationship characteristics and dating relationships in adolescence and early adulthood using a sample of Mexican-origin families. Consistent with the social learning framework, younger siblings observe and imitate older sibling's behaviors even outside of familial issues such as dating relationships and marriages. Siblings also serve

as role models for positive and negative behaviors and are likely to imitate model figures'

behaviors such as siblings. Older siblings often engage in the role of the leader within the

family. For example in Mexican families, it is expected of older siblings to become a

caregiver for their younger siblings. Further research has also suggested that individuals

learn behaviors through others' experiences, which can explain the significant impact of

the sibling relationship on interpersonal relationships (Donato & Dillow, 2017). This

supports the notion that if violence is used as a tool to resolve conflict and the results are

successful, the sibling or the observer of this behavior will utilize violence to solve

conflict in their interpersonal relationships. This is particularly the case for older siblings

who model behaviors for younger siblings (Donato & Dillow, 2017). Hostile siblings are

likely to use destructive conflict tactics due to the pattern of antisocial behaviors they use

toward each other (Donato & Dillow, 2017).

Personal Agency and Social Structure

In social cognitive theory, there is an interdependence between personal agency

and social structure (Bandura, 1999). Human adaptation and change are developed within

social systems (Bandura, 1999). Social structures are created within the familial

environment by adults, important figures, and peers to organize, judge and regulate

values and standards, and models authorize these rules and sanctions within this social

network (Bandura, 1999). Factors such as economic conditions, socioeconomic status,

and family structure all impact standards and behaviors, aspirations, self-efficacy, and

self-regulation abilities (Bandura, 1999).

Bandura (1999) also suggested that there is a link between moral reasoning and human activity. When individuals adopt standards which usually originate in the familial environment and experiences, they will behave in accordance with their moral beliefs (Bandura, 1999). Without moral codes, individuals would disregard the rights and welfare of others when their desired goals come into social conflict (Bandura, 1991). Bandura (1991) proposed that within this conceptual framework, personal factors such as moral thought, self-regulation, conduct, and environmental forces interact with one another that influence cognition and behavior. Individuals set standards based on how significant persons react to the behaviors (Bandura, 1991). Moral standards are rooted from the social environment or those prescribed by model figures (Bandura, 1991). The link between modeling and influencing conduct are strongly supported and documented (Bandura, 1991). Parents are not exclusive in the teaching of standards for morality and conduct; other adults, peers, and influential figures in the media play influential roles as well (Bandura, 1991). For instance, peers can be highly influential in justifying transgressive behavior and persuade one to believe that these behaviors are morally acceptable (Bandura, 1991).

Self-Efficacy

Social cognitive theory suggests that social interactions, experiences, and observation of model influences contribute to self-efficacy (Bandura, 1999). Individuals who lack feelings of self-efficacy may reduce their effort or give up when faced with obstacles or setbacks when attempting to achieve a personal goal (Bandura, 1999). Those with strong self-efficacy and belief in their competencies will exhibit greater effort and

find ways to overcome challenges and are resilient in demoralizing situations or adversity (Bandura, 1999). Those who do not believe in their capabilities are vulnerable to stress and depression when faced with threatening situations (Bandura, 1999). People tend to avoid activities or situations that they do not know or believe they can do (Bandura, 1991). Self-efficacy influences how threats or challenges are interpreted and cognitively processed (Bandura, 1999).

The Cycle of Violence

In many situations, individuals do not have control over the conditions of their social environment and familial practices that affect their lives (Bandura, 1999). To gain personal control over these conditions, investment in time, effort, and resources are required to enhance knowledge and competencies, and individuals may tend to surrender their control to avoid the burden of having direct control over their lives (Bandura, 1999). This may explain the likelihood of victims of violence experiencing revictimization over the course of their lives as a coping mechanism to justify their behaviors. But justified abuse has devastating consequences (Bandura, 1991). When victims are degraded and ascribed blame, they may eventually come to believe they are truly blameworthy and deserving of the abuse (Bandura, 1991).

Individuals do not live their lives in isolation. According to Bandura (1999), individuals work together to produce the outcomes of their goals that they may not be able to accomplish on their own. The family environment is a key part of collective agency, where beliefs are passed down to one another, and as a group, individuals operate through the behaviors and standards of its family members (Bandura, 1999). Children

repeatedly observe the behaviors and values of not only their parents, but also their

siblings (Bandura, 1991). The values and behaviors of the two parents is usually not

identical and siblings add a variety to what is modeled within the family environment

(Bandura, 1991). The views that models display support such justifications for making

decisions about the wrongfulness of transgressive behaviors (Bandura, 1991). When the

model figure uses violence as a conflict resolution strategy, and obtains their desired

goals, violence becomes morally defensible and nonviolent actions are judged to be

ineffective to the observer (Bandura, 1991). If individuals are not held accountable for

violent actions, use of violent force will be quickly used in times of conflict or distress

(Bandura, 1991).

  Social cognitive theory helped to explain childhood sibling violence and intimate

partner violence in adulthood in terms of imitative learning for aggressive behavior,

violence used for conflict resolution, or a built tolerance for violence from observing

model figures in the family environment. Social cognitive theory focuses on how peers

and those in the immediate environment all work together in developing standards, moral

codes, and action planning (Bandura, 1999). Behaviors may be learned through imitative

learning, modeling, and observing behaviors of significant persons (Bandura, 1991).

When children and adolescents are repeatedly exposed to family adversity and violence,

it becomes much like a conditioned response in which the abuse becomes tolerable and

normalized (Khan & Rogers, 2015), increasing the risk for revictimization outside of the

familial environment. Human functioning is a product of the familial environment,

biological events, social interactions, and past experiences (Bandura, 1999). The

standards and behaviors that are exhibited in the family environment contribute to self-efficacy, which is an important feature when considering the cycle of violence and enhancing one's knowledge and capabilities as an adult (Bandura, 1999). Those who suffer from childhood maltreatment may not believe in their capabilities enough to take interventive measures to escape the cycle of violence and may come to expect violence in their adult relationships (Devries et al., 2016). If violent tactics are seen as successful in the familial environment, an individual is likely to accept or use violence when faced with challenging or taxing situations (Bandura, 1999).

The research question for this study was, "How do individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults?" Bandura (1991) suggested that parents are not solely responsible in shaping the behaviors of their children, particularly when there are siblings. Parents do influence decision making skills in adulthood, as well as siblings because the sibling relationship is an ongoing relationship in the childhood family environment (Katz & Hamama, 2018). Siblings add to this variety in shaping standards, morals, and behavioral patterns (Bandura, 1991). The characteristics of the sibling relationship (supportive versus non-supportive) can influence how individuals perceive what constitutes as a healthy adult romantic relationship. Social cognitive theory provides a plausible explanation as to how and why victims of childhood sibling violence are at risk for intimate partner violence as an adult. By using this framework, I was able to explore the depths of the cycle of violence phenomenon such as how siblings learn from one another, the impact of sibling violence and the perception of intimate partner

violence relationships, the damaging effects on self-efficacy, attribution of blame, and mental health outcomes, all of which contribute to the risk for revictimization over the course of adulthood. Lastly, social cognitive theory helped to explain how violence rooted from childhood sibling violence causes a tolerance for violence in adult relationships. The research question was investigated using qualitative analysis. The participants displayed common features in their sibling relationship and adult intimate partner violence relationships.

Literature Review on Sibling Violence Perpetration

Introduction

In this section, I will provide a brief introduction on childhood sibling violence and aggression in adult interpersonal relationships. I will also present information on the prevalence of sibling violence, a review of the literature on sibling violence, the potential relationship between childhood sibling violence and intimate partner violence in adulthood, family environmental factors associated with increased risk for childhood sibling violence and aggression in adulthood, common perceptions of sibling violence, and the damaging impact of sibling violence on its victims.

According to the U.S. Department of Health and Human Services (2014), at least 2.3% of children were sexually assaulted by a sibling and 0.12% were sexually victimized by an adult family member (Caffaro, 2017). In a more recent national sample of 4,000 children and youth 0 to 17 years of age, 21.8% reported assault by a sibling the past year (Glatz et al., 2019). Sibling violence may occur from parental absence or a lack of supervision, insecure attachment, or differential treatment of siblings by a parent or

caregiver (Caffaro, 2017). The average age of onset for female victims of sibling sexual abuse is 9 years of age (Caffaro, 2017). Sibling abuse is associated with depression, sexual dysfunction in adulthood, and victims are at increased risk for revictimization in adulthood (Caffaro, 2017).

Maltreatment and the Sibling Relationship

This study was intended to explore childhood sibling violence and its connection to intimate partner violence in adulthood. Victims of sibling sexual assault report difficulty maintaining intimate relationships in adulthood (Caffaro, 2017). Sibling violence can include multiple forms of abuse such as physical abuse, sexual abuse, and emotional/verbal abuse. One of the main culprits of sibling rivalry is limited parental resources such as, attention, time, and money (Salmon & Hehman, 2015). Others may commit acts of violence against a sibling due to prolonged exposure to violence within the familial environment. It is estimated that more than 29 million children commit an act of violence against a sibling each year (Phillips et al., 2018). Maltreated children are at increased risk for the use or experience of intimate partner violence in early adulthood (Devries et al., 2016). Maltreated children learn that if caregivers or other close family figures display violence in the home, violence becomes normalized and is socially acceptable to use as a tool to resolve conflict in intimate relationships (Devries et al., 2016).

Parent and sibling-directed aggression often co-occur in families where there is domestic violence (Desir & Karatekin, 2018). Individuals that the children are frequently exposed to with a higher social power are more likely to have an influential impact on

siblings and how they interact with each other (Rakovec-Felser, 2014). For example if fathers use aggressive behavior against a child or the wife, children are more likely to model this behavior toward their siblings (Rakovec-Felser, 2014). If the results are successful after using violence to achieve a need or goal, children will imitate these behaviors not only toward a sibling, but toward their peers and significant others in adulthood.

There is currently no sibling theory to explain the role of negative sibling relationships, and its impact in adulthood (Katz & Hamama, 2018). Sibling interactions contribute to a child's process of socialization (Katz & Hamama, 2018). Siblings influence worldviews and identity formation (Katz & Hamama, 2018). Sibling relationships endure over the lifespan, beginning from birth and continuing until death (Katz & Hamama, 2018), which could explain why sibling relationships may influence destructive tendencies when experiencing relationship conflict. Siblings rely on one another for comfort in times of stress or challenges in the family environment. Sibling violence victims have reported psycho-behavioral consequences such as delinquency, antisocial behavior, low self-esteem, anxiety, depression, eating disorders, and PTSD (Khan & Rogers, 2015). Common forms of sibling violence include minor cuts and bruises from hitting, kicking, slapping, and punching to burns, puncture wounds, and broken bones (Khan & Rogers, 2015). Weapons that are commonly used against siblings include pillows, hangers, knives, broken glass, scissors, razor blades, and guns (Khan & Rogers, 2015).

Recurrent physical violence between a parent and child, and sibling-to-sibling increases the risk for lifetime aggression (King et al., 2018). Sibling violence that occurs at least once per year is associated with conduct disorder, physical aggression over the lifespan, and problems with emotion regulation and temperament (King et al., 2018). Sibling relationships can influence self-esteem and are detrimental to personality development (Magagna, 2014). Furthermore, sibling relationships effect how individuals may parent their children and these relationships are often reenacted in adult interpersonal relationships (Magagna, 2014).

Environmental Factors Associated with Sibling Violence

Researchers have concluded that childhood sibling violence may be mediated by family adversity (Lee et al., 2014). Violent behaviors can be learned from within the familial environment and may be imitated in adult interpersonal relationships. Lee et al. (2014) used a multiple mediator model to explain how sibling perpetration and attachment style mediate the relationship between parent-child victimization and dating violence perpetration on a sample of both male and female undergraduate students. The purpose of the study was to explore how family violence and attachment style may vary by gender, and to explain how behaviors are learned from the family environment and displayed in interpersonal relationships. When parental violence is occurring in the home, children may imitate those behaviors toward siblings (Lee et al., 2014).

The results of the study had shown that there was no association between parent-child victimization, sibling perpetration, anxious attachment style, and dating violence perpetration for men (Lee et al., 2014). There was a positive association among male

participants with an avoidant attachment style, and dating violence perpetration (Lee et al., 2014). There was a direct association between parent-child victimization, sibling perpetration of violence, anxious attachment style, and dating violence perpetration among women (Lee et al., 2014). Sibling aggression was associated with dating violence perpetration for women, and findings were inconsistent among male participants (Lee et al., 2014). Results from the study show that not only are troubled parent-child relationships a factor associated with later aggression, but volatile sibling relationships may play a role in aggression perpetration in adult relationships.

More children are victimized by a sibling than a caregiver (Tucker et al., 2018). Adverse family events place children at risk for increased aggression, impulsivity, and violent sibling relationships (Tucker et al., 2018). Tucker et al. (2018) conducted a study on children from across minority groups and low-income households for the purpose of documenting patterns of initiation or termination of sibling violence and gender differences, regarding victimization. Family adversity was associated with sibling victimization and termination of sibling violence was associated with families with a decline in family stress (Tucker et al., 2018). Families that are experiencing loss (loss of job, hospitalizations, divorce), illness, and other adverse events may need support in intervening or preventing sibling victimization (Tucker et al., 2018). Hostile parenting was linked to peer victimization and mental health concerns for girls (Tucker et al., 2018). Parent education, minority membership, age, marital conflict, family violence, and problematic parent-child relationships were also associated with sibling victimization

(Tucker et al., 2018). Female participants were more vulnerable to sibling victimization than male participants (Tucker et al., 2018).

Dantchev and Wolke (2019) surveyed 6,838 children on the family characteristics commonly associated with sibling violence. Participants were screened for household size and age of siblings, sociodemographic characteristics, quality of parental relationship, exposure to domestic violence, child maltreatment, parent-child hostility, maternal bonding, sibling relationship, and peer bullying. The strongest predictor of sibling conflict were family characteristics (first born being victimized by older brothers), and being male, which was consistent with the evolutionary perspective of sibling aggression (Dantchev & Wolke, 2019). Verbal abuse was reported to be the most common form of sibling abuse among the sample (Dantchev & Wolke, 2019). Children from low-income households were at risk for sibling victimization and perpetration (Dantchev & Wolke, 2019). Conflicting parental relationships and domestic violence placed children at increased risk for sibling violence, and higher levels of maternal bonding decreased chances for sibling violence (Dantchev & Wolke, 2019).

Phillips et al. (2018) reviewed psychiatric medical records of a sample of 135 children to identify patterns and trends of sibling violence. All participants experienced sibling violence perpetration or victimization and lived with a sibling. One hundred three participants (76%) perpetrated violence against a sibling, and 30 participants (22%) were victims of sibling violence (Phillips et al., 2018). The perpetrators were violent toward themselves, towards peers, mothers, and teachers (Phillips et al., 2018). The most common adverse childhood experiences reported that contributed to the occurrence of

sibling violence was living with a parent diagnosed with mental illness (60%), chemical

dependency (55%), physical abuse by an adult (42% male and 45% female), and sexual

abuse by an adult (16% male and 29% female; Phillips et al., 2018).

Tippet and Wolke (2015) surveyed 4,237 adolescent participants on the rates of

physical and verbal aggression committed by a sibling, and familial issues that influenced

sibling violence. Forty-six percent of participants reported being victimized and 36% of

participants perpetrated the violence (Tippet & Wolke, 2015). Large family size, male

siblings, and financial problems were associated with sibling aggression (Tippet &

Wolke, 2015). Harsh parenting increased the risk for sibling violence (Tippet & Wolke,

2015). To further explain the role that sibling violence has on relationships outside of the

family context, sibling aggression was associated with peer bullying, and sibling violence

victimization was associated with revictimization by peers (Tippet & Wolke, 2015).

Siblings play an important role in children's adjustment and wellbeing

(Piotrowski et al., 2014). When there is parental violence in the home, this may affect the

quality of the sibling relationship. Younger versus older siblings may react differently

regarding externalizing and internalizing problems from exposure to intimate partner

violence (Piotrowski et al., 2014). In a study conducted by Piotrowski et al. (2014), 47

sibling pairs and their mothers described the relationship quality between siblings. The

purpose of the study was to compare adjustment of older and younger siblings exposed to

domestic violence, describe the quality of the sibling relationship from multiple

perspectives, and how sibling adjustment and relationship quality may influence a child's

adjustment (Piotrowski et al., 2014). Older siblings reported more internalizing

symptoms than younger siblings, while younger siblings reported more externalizing

symptoms (Piotrowski et al., 2014). Mothers reported the sibling relationship to be less

positive than siblings themselves (Piotrowski et al., 2014). Higher levels of hostility,

lower levels of warmth, and higher levels of disengagement predicted child adjustment

(Piotrowski et al., 2014). Children who are exposed to intimate partner violence influence

how siblings feel about, and interact with each other (Piotrowski et al., 2014). Comparing

the internalizing and externalizing symptoms between the younger and older siblings has

shed light into how the older sibling's behaviors can influence the younger sibling's

behaviors.

King (2014) administered the Violent Experiences Questionnaire on a sample of

171 college students, assessing histories of exposure to extreme forms of violence (parent

physical abuse, domestic violence, sibling abuse, peer bullying, and relational

aggression). The cycle of violence can be explained by learned helplessness after

exposure to familial violence, which is why women remain in abusive relationships, and

how victims can be later shaped into perpetrators (King, 2014). Parental physical abuse

was associated with physical fighting, violence-related trouble, inflicting violent injury

on another, and threats to kill someone (King, 2014). One quarter of the sample were

exposed to childhood parental and sibling abuse, and were arrested at least once (King,

2014). Corporal punishment was associated with physical fighting and inflicting violent

injury on another (King, 2014). Sibling abuse and threats to kill someone were among the

highest recorded (King, 2014). General aggression and criminality were strongly linked

to physical abuse in childhood into adolescence (King, 2014). This study examined

multiple forms of violence and criminal history, linking exposure to violence in childhood and adolescence, and perpetration in adulthood.

Frewen et al. (2015) administered the Childhood Attachment and Relational Trauma Screening (CARTS) on 1,782 participants to explore how family interactions contributed to attachment and mental health outcomes. Sibling ratings had shown that older brothers were either more or as frequently abusive as parents (Frewen et al., 2015). Childhood emotional, physical, and sexual abuse were more often perpetrated by family members than by non-family members (Frewen et al., 2015). Using an attachment theory perspective, researchers were able to assess family dynamics and childhood attachment to later emotional and behavioral problems. Sibling violence had doubled the prevalence of physical violence committed by parents and increased the risk for delinquency, substance abuse, and aggressive behavior (Frewen et al., 2015). There is a connection between interparental conflict and inter-sibling conflict (Frewen et al., 2015), which may explain the occurrence of revictimization in the family home and cycle of violence throughout adulthood.

Marackova et al. (2016) conducted a meta-analysis using the MEDLINE database, searching articles relating to childhood adversity and mental health outcomes in adulthood. This search confirmed that the findings support the notion that childhood adversity such as negative family atmosphere, abuse, loss of a loved one, social difficulties, academic problems and victimization by peers are factors associated with anxiety and depressive disorders in adulthood (Marackova et al., 2016). Furthermore,

negative and problematic sibling relationships are a predictor for major depressive

disorder in adulthood (Marackova et al., 2016).

Espelage et al. (2014) explored the issue of family conflict and sibling violence

and its relationship to bully perpetration and dating violence using a sample of 1,162 high

school students. The participants were screened for bully perpetration, harassment and

dating violence perpetration, exposure to domestic violence, family violence, sibling

violence, self-reports of victimization, delinquency, and delinquent peer association.

Individuals who were exposed to domestic violence endorsed the use of violence as a

way to troubleshoot conflict in their interpersonal relationships (Espelage et al., 2014).

Sibling violence has been linked to dating violence among males (Espelage et al., 2014).

Males reported more bully perpetration than females, and females reported more family

conflict and sibling violence (Espelage et al., 2014). Sibling abuse was associated with

bully perpetration and delinquency for males (Espelage et al., 2014). Family conflict and

sibling violence predicted sexual harassment and teen dating violence (Espelage et al.,

2014). Researchers included an important factor associated with sexual violence, which

was teen sexual harassment giving this study an advantage and could be useful to help

explain adult sexual violence.

Childhood maltreatment increases the risk for adult sexual aggression among men

(King et al., 2019). King et al. (2019) surveyed 489 men, approximately 34 years of age

from the general population. The participants were surveyed on history of abuse and/or

sexual aggression and forms of childhood maltreatment. The forms of maltreatment

included parental and sibling abuse, exposure to domestic violence, peer bullying, and

family emotional abuse. Childhood maltreatment was strongly associated with adult sexual aggression (King et al., 2019). Eighty-nine (18.2%) reported histories of childhood sexual abuse, 47 participants (9.6%) reported parental physical abuse, 76 participants (15.5%) reported family emotional abuse, 36 participants (7.4%) reported exposure to domestic violence, 78 participants (15.9%) reported sibling physical abuse, and 80 participants (16.2%) reported peer bullying (King et al., 2019). As was shown in the study's findings, childhood sexual abuse and sibling physical abuse was among the highest reported forms of childhood maltreatment. A total of 133 participants (27.2%) reported sexual aggression in adulthood (King et al., 2019). The study used multiple forms of abuse from the family home to understand aggression perpetration in adulthood. This shows how exposure or victimization of child abuse strongly effects individuals in their relationships in adulthood.

Sibling bullying has been reported to be more common than peer bullying (Plamondon et al., 2018). Sibling bullying has been linked to poorer mental and physical health, poor academic performance, and social incompetence (Plamondon et al., 2018). Adults who endured sibling bullying were twice as more likely to have depression, commit self-injurious behaviors, low self-esteem, feelings of inferiority and worthlessness (Plamondon et al., 2018). Plamondon et al. (2018) focused on family dynamics and its influence on sibling relationships by exploring sibling bullying during childhood and adolescence, and its relationship between negative family dynamics (sibling to sibling aggression, interparental hostility, and parental hostility), sense of competence, psychological symptoms, self-esteem, and life satisfaction in adulthood

(Plamondon et al., 2018). Adults who had reported sibling rivalry and interparental hostility were more likely to be victims of sibling bullying (Plamondon et al., 2018). Sibling bullying was associated with lower sense of competence, low self-esteem, internalized problems, and lower satisfaction with life in adulthood (Plamondon et al., 2018). Parent to child hostility was not associated with sibling bullying but was associated with poor wellbeing in adulthood (Plamondon et al., 2018). Researchers considered demographics and family dynamics (parental and sibling aggression) as variables that may influence a destructive sibling relationship.

The sibling relationship is affected during times of family stress (Kozlowska & Elliot, 2017). When there are stressors or dangers within the family system, and sibling relationships become unhealthy or volatile, children develop self-protective attachment strategies, which evolves from infancy and endures across the lifespan (Kozlowska & Elliott, 2017). These protective attachment strategies are utilized in adulthood and serve to maximize feelings of safety and comfort in intimate relationships (Kozlowska & Elliott, 2017). Sibling relationships affect individual development, and may contribute to level of resilience, or may cause distress or psychopathology (Kozlowska & Elliott, 2017).

Psycho-Behavioral Consequences Associated with Sibling Violence

Sibling relationships shape development regarding self-esteem, relating to others intimately, socialization, learning, skills, social competence, coping strategies, and risk-related behaviors (Meyers, 2017). Meyers (2017) conducted a study on 19 participants on their lived experiences with sibling violence in childhood through adolescence, and how

this experience led to psychological symptoms. Participants were asked through semistructured telephone interviews on their experiences with emotional and/or physical violence with a sibling. Thirteen of the 19 participants reported cases of severe physical abuse, and 6 cases of emotional abuse (Meyers, 2017). Participants reported that the abuse lasted for at least 5 years, and with an onset of abuse starting from 6 years of age (Meyers, 2017). Some had endured abuse for 16 years, beginning in childhood through adolescence, and some reported the abuse was still occurring in adulthood (Meyers, 2017). The participants reported feelings of helplessness, isolation, and conforming to their abuser's needs (Meyers, 2017). In cases where the physical abuse was severe, participants reported abuse amnesia as a defense against emotional pain (Meyers, 2017).

Early experiences with siblings may influence adult bonds and adult interpersonal relationships (Robertson et al., 2014). Siblings influence individual development in skills required to function in adult life, particularly social and cognitive development (Robertson et al., 2014). Robertson et al. (2014) was interested in understanding sibling relationships using an attachment theoretical framework on a population of adults. Attachment systems remain active throughout the lifespan, and adults use their attachment style as a way to distinguish persons that are willing to provide a secure base in their romantic relationships (Robertson et al., 2014). Based on the quality of the sibling relationship, adults may rehearse these same positions in their later adult relationships (Robertson et al., 2014). Robertson et al. (2014) studied a sample of 189 university students in New Zealand, with the purpose of finding a possible link between quality of sibling relationships and adult romantic relationship quality. Participants were

administered the Sibling Relationship Questionnaire and the Relationship Assessment

Scale. Findings revealed that there was not a direct link between warmth/closeness in the

sibling relationship and relationship satisfaction in adulthood (Robertson et al., 2014).

The findings did reveal an association between sibling placement and length of adult

romantic relationships (Robertson et al., 2014). Younger siblings reported longer lasting

relationships, while older siblings did not (Robertson et al., 2014). It is possible this may

be because older siblings usually play the more powerful role than their younger siblings

(Robertson et al., 2014).

Children who are exposed to many forms of violence may experience

revictimization (Howell & Miller-Graff, 2014). These children are at increased risk for

psychological and emotional difficulties in adulthood (Howell & Miller-Graff, 2014).

Howell and Miller-Graff (2014) studied a sample of 321 American college students who

had experienced childhood violence, community violence, interpersonal aggression,

childhood maltreatment, peer and sibling victimization, and/or sexual assault. Participants

were administered a series of questionnaires regarding demographics, juvenile

victimization, resilience, depression, anxiety, stress, life events and trauma, emotional

intelligence, spirituality, and social networks. On average, participants endured 9 violent

experiences during childhood (Howell & Miller-Graff, 2014). The most reported form of

violence experienced by participants was sibling and peer victimization (Howell &

Miller-Graff, 2014). Resiliency was associated with spirituality, emotional intelligence,

and support from friends (but not family; Howell & Miller-Graff, 2014). The strength of

the study was the use of a large sample of young adults that enabled researchers to

identify how childhood victimization had impacted functioning at the beginning stages of adulthood.

Siblings are the most important among an individual's peers (Meyers, 2015). When an individual commits acts of violence against their sibling, this is seen as a betrayal of their closest peer and creates feelings of worthlessness and low self-esteem (Meyers, 2015). When the sibling relationship is physically violent, the victim of the abuse will lack assertiveness, social skills, inability to resolve relationship conflict, and is susceptible to either revictimization or perpetration of violent behaviors (Meyers, 2015). Victims of sibling violence have difficulty in interpersonal relationships for example they are overly sensitive, often engage in self-blame, repeat the victim role, feeling distrustful of others, fearful, and suspicious (Meyers, 2015). Victims of abuse may tend to repeat attachments to new dating partners, ones that have familiar characteristics to that of the abusive sibling (Meyers, 2015). By attaching themselves to emotionally unavailable dating partners, this feeds into their low self-esteem and becomes a cyclical process (Meyers, 2015).

Child maltreatment, peer victimization, and exposure to family violence (parent and/or sibling violence) and community violence has been connected to developmental difficulties, problematic behaviors, and physical and mental health problems across the lifespan (Finkelhor et al., 2015). Family and other significant others play an important role during an individual's developmental stage, particularly siblings because they grow together and share the same family environment (Kumar et al., 2015). Both positive and negative sibling relationships have an impact on an adolescent's coping skills and overall

emotional development (Kumar et al., 2015). Sibling rivalry such as bullying, and physical and sexual abuse has life-long consequences such as shame, aggression, severe anxiety, depression, and other mental and physical health concerns (Kumar et al., 2015). The sibling relationship will reflect an individual's personality traits, socialization, and interpersonal skills (Kumar et al., 2015). Sibling violence has also been linked to later antisocial behavior, posttraumatic stress disorder, hyperactivity, and dissociative disorders (Kumar et al., 2015).

Dantchev et al. (2018) explored sibling bullying victimization or perpetration in middle childhood and risk for psychotic disorder in early adulthood on a sample of 6,988 participants at 12 years of age and again at 18 years of age. Sibling abuse was a risk factor for depression and self-injurious behaviors, which escalates to more serious mental health problems such as psychosis (Dantchev et al., 2018). Victimized participants were four times more likely to exhibit symptoms of a psychotic disorder in early adulthood (Dantchev et al., 2018). Using a longitudinal design allowed researchers to link childhood sibling abuse to violent behaviors in adulthood.

Källström et al. (2017) were interested in studying the different types of victimization, the victim's relationship to the perpetrator, and its connection to current mental health. Out of a sample of 2,500 adults, 49% reported victimization by a peer, 19.4% reported victimization by a parent, 11.2% reported victimization by a sibling, and 11% reported dating violence victimization (Källström et al., 2017). Parents are more likely to use physical aggression, siblings were more likely to commit property offenses, and partners were more likely to commit sexually based offenses (Källström et al., 2017).

Victimization by parents and partners had shown higher levels of mental health problems (Källström et al., 2017). Dysfunctional family relations are more detrimental to the female victims (Källström et al., 2017). Females reported higher levels of physical abuse victimization from parents, siblings, and partners (Källström et al., 2017). Twenty-eight percent of sibling abuse victims reported property crimes, 26.5% reported physical abuse by a sibling, and 12.2% reported verbal abuse by a sibling (Källström et al., 2017). There was a significant association between sibling abuse and later onset for posttraumatic stress symptoms for females (Källström et al., 2017). This study explored the importance between victim-perpetrator relationships and established patterns and its link to mental health outcomes.

Tener (2019) interviewed 15 participants, each were survivors of sibling sexual abuse in childhood and adulthood. Sibling sexual abuse is least reported to authorities and victims received a lack of support from family members who had minimized the abuse (Tener, 2019). The purpose of the study was to learn of their experiences with perpetrating siblings during childhood and adulthood, and the effects of long-term sibling sexual abuse. Participants had distanced themselves from their perpetrators in adulthood (Tener, 2019). Survivors of sibling sexual abuse reported later drug abuse, anxiety, depression, hypersexuality, risky sexual behaviors, revictimization, hostility, and distorted beliefs about child sexual abuse and adult victimization (Tener, 2019). Distorted beliefs about child sexual abuse and adult victimization may explain the likelihood of victims having multiple abusive romantic relationships in adulthood. A strength to this

study was the use of participants who experienced sibling sexual violence over a long period of time and were able to explain the long-term effects of their victimization.

Sibling Violence and Peer Attachment

Sibling perpetration of violence may be as detrimental to adolescent development and attachment as peer victimization (Walters et al., 2019). Walters et al. (2019) conducted a study on 355 adolescents on their sibling relationships and social consequences in adolescence. The purpose of the study was to connect parental monitoring to sibling victimization and the outcomes of the violence. Parental monitoring was associated with sibling victimization for girls (Walters et al., 2019). Sibling victimization was associated with parent and peer attachment (Walters et al., 2019). There was also an association between sibling victimization, self-perceptions, and attachment to parents and peers (Walters et al., 2019). Social competence mediated the relationship between sibling victimization and peer-adolescent attachment, and self-worth mediated the relationship between sibling victimization and parent-adolescent attachment (Walters et al., 2019).

Doughty et al. (2015) conducted in-home interviews on 125 Caucasian working and middle-class adolescents in relation to sibling intimacy and conflict, and the quality of their romantic relationships 2 years later. Sibling intimacy was a positive predictor for romantic intimacy, while sibling conflict was a negative predictor for romantic intimacy for females, connecting the sibling relationship to romantic relationship skills (Doughty et al., 2015).

Sommantico et al. (2018) surveyed 350 Italian university students to explore the possible connection between attitudes toward sibling relationships, adult attachment styles, and romantic relationship quality. Sister-pairs reported more positive attitudes toward siblings (Sommantico et al., 2018). Findings indicated an association among attitudes toward siblings, and avoidant attachment style in adulthood, suggesting that siblings play an important role as an attachment figure, possibly influencing adult attachments in future romantic relationships (Sommantico et al., 2018). In addition, there was also an association between attitudes toward sibling relationships and romantic relationship quality (Sommantico et al., 2018).

Perception of Sibling Violence

Khan and Rogers (2015) studied how the perceptions of sibling violence may differ among genders, and from other types of interpersonal violence. Participants completed a series of questionnaires that consisted of hypothetical assault scenarios, rating the seriousness of the violence, consequences, the trauma associated with the assault, culpability, and the need for police to intervene. Respondents also completed surveys on their experiences with sibling violence and other forms of interpersonal violence and demographic information. Males reported assault as less severe than female respondents (Khan & Rogers, 2015). Sibling violence assault was perceived as less severe than dating violence and stranger-perpetrated violence, and the victim was perceived as culpable (Khan & Rogers, 2015). Physical assault by a brother was perceived as less severe than assault by a male dating partner or male stranger (Khan & Rogers, 2015). Those who experienced sibling violence victimization in childhood

perceived adult sibling violence as less severe and blamed the victim than those who did

not have experiences with childhood sibling violence (Khan & Rogers, 2015). For those

who endured childhood sibling violence and did not perceive the adult sibling violence to

be a severe form of abuse had normalized the behavior. By normalizing the behavior,

respondents were better able to cope with the maltreatment, and had seen the violence as

a normal phenomenon between siblings. The perception that sibling abuse was a normal

occurrence was more prominent among male respondents (Khan & Rogers, 2015).

McDonald and Martinez (2016) conducted a qualitative study on narrative

accounts of those who experienced sibling violence victimization and the responses of the

parents. Participants were asked to complete an open-ended questionnaire, reflecting on

the extent of the abuse, and the responses of parents, other family members, and

professionals who had knowledge of the abuse. Twenty participants completed the

survey. Twelve of those participants reported being a victim of sibling violence, and the

parents had acknowledged the behaviors as problematic (McDonald & Martinez, 2016).

The parents labeled the violence as "bullying" and not "abuse." Although sibling

violence has become rampant among American families, it has not achieved the status of

a serious social problem (McDonald & Martinez, 2016). Researchers have concluded that

it has received little attention because parents tend to minimize their children's violent

behavior (McDonald & Martinez, 2016).

Perkins and Shadik (2018) interviewed one participant on her experience with

sibling violence as a child, and the violent interactions among her three children. The

purpose of the study was to explore the intersection of sibling violence, parental/family

stress, normalization of sibling violence, community violence, sibling versus peer fighting, and to address/prevent sibling violence through intervention programs (Perkins & Shadik, 2018). Marie is a college graduate, unmarried, living below the poverty line, and does not have custody of all children. Marie lives in a violent neighborhood. The results of the interview had shown that there was emotional and physical violence among siblings, and Marie had normalized the behavior because of her own experiences with sibling violence (Perkins & Shadik, 2018). Marie's children engaged in sibling rivalry as well as fought with their peers (Perkins & Shadik, 2018). Marie had expressed during the interview that the sibling rivalry was due to the children not living together and having a different set of household rules, attention-seeking, and jealousy, as well as exposure to community violence (Perkins & Shadik, 2018). Family context and dynamics may lead to sibling violence such as added stress, and parent-child abuse and neglect (Perkins & Shadik, 2018).

Sibling Sexual Violence and Motivation of the Perpetrator

Sibling violence does not only consist of physical and emotional abuse, but sexual abuse as well. The motivating factors associated with sibling sexual abuse may help to explain how aggressive behavior is learned by environmental forces for both the victim and the perpetrator of the violence, the characteristics of the victim-perpetrator relationship, the seriousness of this form of abuse, and its powerful impact on the victim's behaviors and relationships in adulthood. Sibling sexual abuse is more common than parental sexual abuse (Yates, 2018). In a study conducted by McDonald and Martinez (2017), the lived experiences of sibling sexual abuse were explored through

qualitative methods, using grounded theory coding. Sibling violence may be the most common form of sexual abuse within the family environment (McDonald & Martinez, 2017). Thirty-three participants completed an online survey on the experiences of sibling sexual violence, and the motivations of the perpetrator. Participants reported the reasons for the abuse was (a) learned behavior by either witnessing parental violence or tolerance for violence in the household, (b) exposure to pornography, (c) prior victimization, (d) the need to establish power and dominance over the sibling, (e) and mental illness (McDonald & Martinez, 2017). Common forms of sibling sexual abuse consisted of older brothers perpetrating abuse onto younger sisters (McDonald & Martinez, 2017). The reason for this was to exert control and masculinity (McDonald & Martinez, 2017).

Women who have been victims of sibling sexual abuse have difficulty in maintaining healthy adult intimate relationships because of their abusive experiences with brothers, which produced feelings of distrust, fear, and low self-esteem (McDonald & Martinez, 2017). On average, participants experienced sibling sexual abuse for 4.4 years (McDonald & Martinez, 2017). Twenty-four participants reported it happened at least 10 times, and some had estimated the abuse happened hundreds of times (McDonald & Martinez, 2017). Most participants reported that there was family violence in the home, and siblings had learned the behavior (McDonald & Martinez, 2017). Older siblings who were abused, victimized younger siblings as a way to cope with their abusive experiences (McDonald & Martinez, 2017). There is a need to conduct further studies on how adverse childhood experiences, mental illness, and behavioral problems influence sibling-to-sibling sexual abuse (McDonald & Martinez, 2017).

The natal home is where youth learn the script of violence (Sharangpani, 2018). Sibling relationships and the wounds they inflict from physical and sexual violence have life-long effects on emotional development in adulthood (Sharangpani, 2018). In India, Sharangpani (2018) interviewed 2 women who had endured sexual violence perpetrated by their adolescent brothers. In India, such violence is overlooked. Males are viewed as physically stronger and emotionally weaker than females, and problem solve through acts of violence (Sharangpani, 2018). The sibling relationship is expected to become stronger as siblings get older (Sharangpani, 2018), whereas in the United States, it is normal for siblings to become distant as they age. According to the accounts of the participants, sexual violence perpetrated by adolescent brothers is minimized because of their young age (Sharangpani, 2018). The motivations of the perpetrators were to establish dominance and masculinity (Sharangpani, 2018). Acts of violence between siblings is usually the result of a lack of parental supervision and minimization of sibling-directed aggression (Sharangpani, 2018).

Summary and Conclusions

Sibling interactions play an important role in individual emotional and cognitive development and identity formation through adolescence into adulthood. Exposure to violence becomes much like a conditioned response overtime, in which individuals become tolerant of or expect abuse in life as an adult, particularly when violence is used to resolve conflict in the family home. Siblings are known to be model figures, similarly to parents and caregivers because siblings share an environment, and siblings are the closest among peers.

Males with an avoidant attachment style are at increased risk for dating violence perpetration (Lee et al., 2014). When there is the occurrence of parent-child victimization and sibling-to-sibling violence, individuals may develop an anxious attachment style, increasing the risk for dating violence perpetration for women (Lee et al., 2014). Future research is needed to explore the inconsistencies between genders in relation to sibling violence, attachment style, and risk for intimate partner violence in adulthood (Lee et al., 2014).

More children are victimized by a sibling than by a caregiver (Tucker et al., 2018). Family adversity places children at risk for aggression, impulsivity, and violent behaviors toward siblings (Tucker et al., 2018). Females are more vulnerable to sibling violence victimization than males (Tucker et al., 2018). Patterns of escalation of sibling violence perpetration and victimization need to be explored using a longitudinal design. It is common for older male siblings to become the aggressor in sibling relationships (Dantchev & Wolke, 2019). Exposure to domestic violence places children at greater risk for sibling violence (Dantchev & Wolke, 2019). Sibling violence perpetrators often engage in peer violence, exhibit antisocial tendencies, and conduct problems (Dantchev & Wolke, 2019). Future studies are needed to examine family dynamics, exposure to violence in childhood, abusive sibling relationships, and outcomes as adults. Siblings that are abusive are likely to become abusive toward themselves, peers, mothers, and teachers (Phillips et al., 2018). Future research is needed to explore the psychological effects of all forms of sibling violence (physical, sexual, and emotional), and compare future outcomes.

Maltreated children are likely to use or experience intimate partner violence in adulthood (Devries et al., 2016). An insecure attachment in early childhood is associated with difficulties in adulthood such as the inability to self-regulate emotions, poor interpersonal relationships, and disrupts cognitive learning (Devries et al., 2016). Sibling violence victimization is associated with revictimization by peers (Tippet & Wolke, 2015), further supporting the notion that sibling violence may contribute to the cycle of violence outside of the family environment, through adolescence into adulthood. Siblings also influence a child's adjustment and wellbeing (Desir & Karatekin, 2018). Older siblings model behaviors for their younger siblings (Piotrowski et al., 2014). Future research is needed to explore the influence that older siblings have on younger sibling's aggressive behaviors when exposed to intimate partner violence (Piotrowski et al., 2014).

The cycle of violence can be explained by learned helplessness and exposure to family violence, which is why individuals remain in abusive relationships, become re-victimized, and how victims may be later shaped into perpetrators of violence (King, 2014). Sibling violence has doubled the prevalence of physical violence committed by parents, and increases the risk for delinquency, substance abuse, and aggressive behaviors (Frewen et al., 2015). If fathers use violence against a wife or child, and results are successful, children are more likely to imitate these behaviors toward siblings (Rakovec-Felser, 2014). Children are influenced by those of a higher social power, and will not only imitate these behaviors toward siblings, but with peers and dating partners as well (Rakovec-Felser, 2014). Problematic peer relationships are associated with major depressive disorder in adulthood (Marackova et al., 2016). In addition, family conflict

and sibling violence are associated with sexual harassment and teen dating violence (Espelage et al., 2014).

Childhood sexual abuse and sibling physical violence were among the highest reported for childhood maltreatment (King et al., 2019). Childhood maltreatment is associated with increased risk for sexual aggression among men (King et al., 2019). Future research is needed to explore this phenomenon using forensic and clinical samples (King et al., 2019). Sibling interactions contribute to a child's process of socialization. Siblings are relied on in times of family conflict and threats in the family environment (Katz & Hamama, 2018). Physical aggression and hostility between siblings are associated with behavioral and mental health problems in adulthood, as well as the inability to control temperament and engages in physical aggressive behaviors over the lifespan (Katz & Hamama, 2018). Sibling relationships may influence interactions with dating partners and how one parents their children (Magagna, 2014). Future research is needed to examine sibling relationships and its impact on adult romantic relationships across cultures (Wheeler et al., 2016).

Sibling violence victims may suffer from alcohol and/or substance abuse, eating disorders, and posttraumatic stress disorder (Khan & Rogers, 2015). Siblings also shape development regarding how an individual relates to others, learning skills, and social competence (Meyers, 2017). Victims of sibling violence often feel hopelessness, isolate themselves, and conform to their abuser's needs (Meyers, 2017), further substantiating how childhood victimization can lead to revictimization in adult relationships. Victims of sibling violence have reported lower satisfaction with life in adulthood compared to those

who were not victimized by a sibling (Plamondon et al., 2018). Future studies are needed to focus on parental warmth, intervention style, and risk for sibling violence.

Sibling violence was found to be a direct correlate for parent and peer attachment (Walters et al., 2019). When children grow up in volatile sibling relationships, they develop self-protective attachment strategies (Kozlowska & Elliott, 2017). These self-protective attachment strategies produce feelings of safety and comfort in romantic relationships (Kozlowska & Elliott, 2017). Early experiences with siblings do influence adult bonds and intimate relationships (Robertson et al., 2014). Siblings rehearse their positions in adult intimate relationships (Robertson et al., 2014). Victims of sibling violence lose their assertiveness, are lacking in social skills, and have an inability to resolve relationship issues, maximizing their risk for revictimization or perpetration of violent behaviors later (Meyers, 2015). Victims of abuse tend to repeat their attachments to new dating partners, ones that will feed into their low self-esteem (Meyers, 2015). Future research needs to focus on the effects of both parent-child and sibling violence compared to sibling abuse alone (Meyers, 2015). Sibling violence has been linked to hyperactivity and dissociative disorders (Kumar et al., 2015). Victims of sibling violence are four times more likely to exhibit symptoms of a psychotic disorder in adulthood (Dantchev et al., 2018).

Much of the research on sibling violence was done through surveying, using quantitative measures. This study was conducted through qualitative analysis, using Moustakas's (1994) phenomenological process and steps to data analysis to learn the participant's experiences with sibling violence in childhood, and intimate partner

violence as an adult. This study addressed the gap in the literature by exploring adult

relationship difficulties to better understand these behaviors in adults who also

experienced sibling violence in childhood. Social cognitive theory helped to explain this

phenomenon in terms of learned behavior by observing violence by model figures.

Research on sibling violence and adult intimate partner violence promotes positive social

change by raising awareness of this problem, and perhaps contribute to intervention and

prevention programs needed to help restore the lives of those who have experienced

sibling violence and adult intimate partner violence. In Chapter 3, I will discuss the

research design and procedures taken to ethically obtain data, and efforts to minimize

harm to participants.

Chapter 3: Research Method

Sibling violence is among the most common form of violence in the family home, and the emotional and behavioral outcomes have not received much attention from researchers (McDonald & Martinez, 2016). The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. An exploration of participants' experiences with both forms of interpersonal violence may lead to strategies that parents can use to protect their children from sibling violence victimization and help design intervention programs that can be accessible to those who suffered from childhood sibling violence and continued violence in adulthood (McDonald & Martinez, 2016). In this chapter, I will provide information on the research design for the study as well as the rationale behind the chosen research design. I will provide information on my role as the researcher, the population that was used for this study, the sample strategy and participant inclusion, recruitment of participants, instruments for data collection, steps that were used for data analysis, issues of trustworthiness, and ethical procedures that were put in place to ensure participant safety.

Research Design and Rationale

In this study, I used a transcendental phenomenological approach to explore the experiences of individuals who had endured childhood sibling violence and intimate partner violence as adults. The focus of a transcendental phenomenological study is to explore the participants' experiences—the data that can be discovered through reflection—in order to understand human behaviors (Moustakas, 1994). In

phenomenological research, the wholeness of the experience is crucial as well as the meanings and significance that participants attach to these events through first person accounts (Moustakas, 1994). Phenomenological research allows participants to provide rich, in-depth descriptions about their experience and their perception of these events through semistructured interviews (Moustakas, 1994). The transcendental phenomenological approach was applicable to this study because the participants' experiences and accounts of those events were essential to address the research question and the social issue that was being investigated. The research question that guided this study was "How do individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults?" The central phenomenon of this study was the potential impact in adulthood after experiencing childhood sibling violence and the likelihood for revictimization in other interpersonal relationships such as adult intimate partner violence. Interview transcripts were analyzed to find and categorize themes that were a representation of the participants' experiences.

Role of the Researcher

In qualitative research, the researcher is the primary instrument (Ravitch & Carl, 2016). As a researcher, my role involved collecting, analyzing, and interpreting data collected from interviews. A qualitative researcher will (a) locate and select participants who meet the criteria, (b) collect data through interviews and observation, (c) transcribe and code data, (d) combine and cluster themes into categories that represent important concepts in the data, (e) connect themes to the research question and conceptual

framework, (f) find common features across dataset, and (g) interpret and report the findings (Moustakas, 1994; Ravitch & Carl, 2016). My role as a researcher in this study was to be an observer, interviewer, data collector, and data analyst while suspending all preconceived notions about the phenomenon. As an observer, I gave close and thoughtful attention to the way interviewees expressed themselves while describing their experiences as well as their tone. As an interviewer, I asked open-ended questions that pertained to the research question, and I asked probing questions when clarification was needed. As a data collector and analyst, I was responsible for collecting the data from interview notes and transcripts and analyzed the data by identifying and finding relationships between key passages and concepts that were a representation of the participants' experiences.

Because the researcher is the primary instrument and shapes the process, methods, data, and findings, there is an ethical obligation to set aside any preconceptions, biases, and prejudice (Ravitch & Carl, 2016), and focus solely on the participant's description of events. I have studied criminal psychology for 9 years and have a bachelor's and master's degree in forensic psychology. Additionally, I worked as a teacher, performing assessments on children's development and observing negative sibling relationships. My interest in program planning that may assist crime victims led me to the topic of childhood sibling violence and intimate partner violence in adulthood. The goals of this study were to contribute to the scientific community by raising awareness of this specific form of family violence in hopes of assisting other professionals with the knowledge on this issue and contribute to the development of effective intervention programs for this

population of victims. I was aware that my experience could have influenced the way that I explored the phenomena. I also acknowledged the potential influence that my experience and bias could have on the interpretation of the results therefore, I took steps to minimize any researcher bias.

Moustakas's (1994) epoché process was utilized to conduct this study without preconceptions, beliefs, and knowledge obtained prior to the study. Moustakas's epoché strategy is the first step of the transcendental phenomenological reduction process so that I could have the opportunity to disclose experiences or feelings that could present researcher bias. I journaled personal biases throughout the research process, and steps that were taken to set aside those biases. Lastly, I adhered to ethical guidelines to minimize harm to participants by briefing participants about the nature and purpose of the study, maintaining confidentiality and took steps to secure their private information, obtained informed consent, and I did not select participants that I knew and had a relationship with.

Methodology

Participant Selection Logic

The targeted population for this study included individuals who had experienced both sibling violence as a child and intimate partner violence in adulthood. Purposeful sampling allowed me to deliberately recruit participants from a specific population of individuals who were able to provide context-rich and detailed accounts about the phenomena under study (Ravitch & Carl, 2016). The inclusion criteria for participants were (a) must have experienced childhood sibling violence, (b) must have experienced

intimate partner violence in adulthood, (c) must be removed from the intimate partner violence relationship, (d) individuals may be from any socioeconomic class, education level, race, culture and gender, (e) must be fluent in English, (f) must be between 18–64 years of age, and (g) must be willing to consent to an audio recorded interview.

To recruit participants, I posted a flyer about the nature and purpose of the study, and my contact information for prospective participants. When potential participants contacted me about the study, I asked a series of screening questions to determine if they met the criteria to participate in the study. The screening questions were:

1. Have you experienced childhood sibling violence?

2. Have you experienced intimate partner violence as an adult?

3. Are you still involved in the intimate partner violence relationship?

4. Are you between 18–64 years of age?

5. Do you speak English fluently?

6. Would you be willing to participate in an audio recorded interview with me to discuss your experiences with childhood sibling violence and adult intimate partner violence relationships?

If a participant met the criteria, I provided them with information about the nature and the purpose of the study as well as protocols to maintain confidentiality, and I told them the informed consent form would be emailed or mailed to them prior to the interview. Each participant needed to sign two copies of the informed consent form so that both the participant and I had copies. The sample size for this study was 8–10 participants. The rationale for this number of participants was to have a small sample size

yet enough participants to provide detailed descriptions of the phenomena that was being discussed. In qualitative research, sample size is less important compared to quantitative research (Ravitch & Carl, 2016). A sample size of 8–10 participants is ideal for data saturation when the participants have similar characteristics or experiences, and the focus of the study is to identify common themes (Ravitch & Carl, 2016). Data saturation occurs when no new information, interactions, or consequences appear during the coding process (Saldaṅa, 2016).

I recruited participants from a nonprofit organization in the northeast area of Vermont. The center provides services to disadvantaged populations that are at risk for revictimization such as intervention and ongoing prevention programs, consultation, and therapeutic services for troubled youth, adults, and families that are impacted by mental health, alcohol and/or drug addiction, domestic violence, and other trauma-related situations. I contacted this organization prior to posting the flyers. I then posted flyers that described the nature and the purpose of the study and contact information for those interested in participating. Since I could not recruit enough participants at the center, I posted flyers at other nonprofit organizations, social media, and online support groups for women who have experienced abuse. After each interview, I provided the participant with resources that could assist them in trauma-related services in the event talking about their past experiences brings up uncomfortable memories and causes the participant distress.

Instrumentation

The instruments that I used for this study were a list of interview questions (Appendix A) and a reliable audio and recording device such as Skype. The main source for data collection for this study was a virtual face-to-face semistructured interview with participants who met inclusion criteria. The interview questions were open-ended to provide the participants with the opportunity to elaborate on their experiences that would address the research question. I asked probing questions during the interview as needed for clarification or to obtain additional details pertaining to a participant's response.

Procedures for Recruitment, Participation, and Data Collection

The procedure for participant recruitment included posting a flyer at nonprofit organizations, social media, and online support groups that serve at-risk populations such as those who suffer from mental health problems, domestic violence, and addiction. Participants were screened to determine if they met the criteria for participant inclusion. All participants were between the ages of 18–64. Adulthood is an important transition that links development and experience in childhood and adolescence with the development in later years (Institute of Medicine & National Research Council, 2013). Adults tend to reinforce the developmental and behavioral patterns that were already established in childhood and adolescence (Institute of Medicine & National Research Council, 2013). The participants experienced both childhood sibling violence and adult intimate partner violence and were removed from the intimate partner violence relationship. Based on a consultation with the University's Institutional Review Board (IRB), I would not have a vulnerable population as participants; therefore, participants

could not currently be in a relationship with violence. Participants spoke English fluently and were willing to consent to an audio recorded virtual interview. I scheduled interviews with participants to be conducted virtually through Skype.

The location in which the interview took place was free from distractions to ensure privacy and protect participant's right to confidentiality. I anticipated that each interview would last approximately 1 hour. Before the interview was started, I discussed how I would maintain confidentiality and privacy, and details about the informed consent form. I informed each participant that their involvement was voluntary, and they could disengage from the study at any time. For additional guidance and questions, participants were given my contact information and a Walden Research Participant Advocate's contact information. Participants signed two copies of the informed consent form either electronically or by returning the form to me by email, prior to the start of the interview.

Any preconceptions or biases were set aside in order to listen and review the information with an open mind (Moustakas, 1994). A follow-up phone call was conducted when I needed a participant to clarify any information from the interview. Data was recorded using the record feature on the Skype software. I also took notes during each interview on concepts, tone, and body language. To ensure confidentiality, participants were labeled Participant 1, Participant 2, and so on. In the event that I was unable to recruit enough participants for the study, I had planned to use snowball sampling until there were enough participants to achieve data saturation. In snowball sampling, participants were asked if they knew any additional contacts that may be

relevant to the study (Ravitch & Carl, 2016), and if they were willing to give my contact information to them.

Participants were debriefed by completion of the interview to address questions or concerns that the participant may have had. I thanked each participant for their time and participation in the study. At the end of each interview, participants were provided with a list of support services for both short-term and long-term intervention and prevention therapies. Participants received a summary of their interviews for member-checking to confirm that my interpretation is an accurate depiction of their experiences. Lastly, participants were informed that they can receive a copy of the study's findings, if they wish.

Data Analysis Plan

In this study, I used semistructured interviews to obtain data specific for the following research question: How do individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults? I transcribed each interview to identify themes that represented the meanings and significance of the participants' experiences and perceptions of the phenomena. Data software was not needed for this study due to the small sample size. I employed Moustakas's (1994) steps for data organization and analysis.

The first step in using Moustakas's (1994) steps for data analysis is to utilize the epoché strategy, which is the process where the researcher brackets preconceptions or beliefs about the phenomena and make efforts to minimize researcher bias. The second step is phenomenological reduction, which includes bracketing and horizonalization

(Moustakas, 1994). Bracketing consists of placing the focus of the research into brackets, while suspending all preconceptions or feelings about the phenomena, and focus solely on the participants' experiences (Moustakas, 1994). Horizonalization refers to all statements being treated as having equal value in the initial stages of coding the data (Moustakas, 1994). As the research progressed, statements that were deemed irrelevant to the phenomena or those that were repetitive were deleted, leaving only statements that truly represent the experience and answer the research question (Moustakas, 1994). Then I clustered the horizons into themes. The clustered themes were used to create textural descriptions of the participants' experiences (Moustakas, 1994). The textural descriptions are used to reveal the meaning of each theme (Moustakas, 1994).

The third component in phenomenological research is imaginative variation. Imaginative variation consists of a review of the data from different perspectives, positions, or roles (Moustakas, 1994). The goal of imaginative variation is to develop structural descriptions of the experiences and the factors that may have caused the phenomena to occur (Moustakas, 1994). Lastly, the final step in the phenomenological research process is to synthesize the meanings and essences (Moustakas, 1994). This involves integrating the textural and structural descriptions derived from the data and create a unified statement about the participants' experiences with the phenomena (Moustakas, 1994). While coding the data, it is important to search for any discrepant cases. Discrepant cases are those that do not fit the pattern or understanding of the data (Ravitch & Carl, 2016). This may occur when a participant has a significantly different opinion or attitude about the phenomena from the other participants in the study (Ravitch

& Carl, 2016). Discrepant cases were analyzed and compared to other cases, and the findings were included in the study results.

Issues of Trustworthiness

There are four components to establish trustworthiness in qualitative research such as credibility, transferability, dependability, and confirmability (Ravitch & Carl, 2016). To establish credibility, I implemented validity strategies such as triangulation, member checks, prolonged contact with the participants and the data, and reflexivity. Triangulation refers to taking multiple perspectives and sources to form themes in the data (Ravitch & Carl, 2016). These sources include interviews, demographic information, and notes taken during the interviews with participants. Member checking was utilized so that each participant could confirm the accuracy of their statements and my interpretation of their experiences (Ravitch & Carl, 2016). When clarification was needed, I asked probing questions during the interview to further prevent misinterpretation. Participants were also given the option to correct statements or provide additional details through the member checking process. Prolonged contact of participants and the data included the interview with participants and familiarizing myself with the data, a follow-up phone interview as needed for clarification purposes, and reviewing and transcribing the interviews. Reflexivity refers to monitoring and engaging with researcher biases and preconceptions (Ravitch & Carl, 2016). Throughout the research process, I used a journal to disclose my personal biases or experiences that could influence results.

Transferability is another key component to establishing quality and trustworthy data. Transferability refers to applying results to other populations or settings (Ravitch &

Carl, 2016). In qualitative research, the goal is not to apply findings or make

generalizations to other contexts (Ravitch & Carl, 2016). To achieve transferability, I

provided thick descriptions of data and the context (Ravitch & Carl, 2016). The readers

of the study can make comparisons and consider contextual factors, rather than replicate

the findings (Ravitch & Carl, 2016). Dependability is important to show stability and

consistency in the data and answer the research question (Ravitch & Carl, 2016). I

provided detailed information on the applicability and relevance of the research process

in relation to the research question such as the conceptual framework, research design,

methods for recruitment, data collection and analysis. Audit trails were used to minimize

personal biases and to ensure my experiences and beliefs did not influence my

interpretation of the data (Ravitch & Carl, 2016). This can be done by creating records of

the steps taken throughout all aspects of the research study that will substantiate

trustworthiness and confirmability of the findings. Lastly, to establish confirmability, I

provided an explanation on how I employed Moustakas's (1994) epoché process by

documenting my personal biases, how researcher reflexivity was utilized throughout the

study, member checks, and searching for discrepant cases.

Ethical Procedures

The American Psychological Association [APA] (2017), set forth specific ethical

procedures for practicing psychology professionals and researchers. I adhered to the APA

Ethical Guidelines by obtaining institutional approval prior to conducting the study; and

obtained informed consent from each participant including the consent to an audio

recorded interview, informed participants of the nature and purpose of the study and that

their participation was voluntary, and they may disengage at any time. The participants'

private information was kept confidential, and I secured their information by using

password protected software on my computer. The participants' data was not labeled by

their name. Participants were labeled Participant 1, Participant 2, Participant 3, and so

forth. Participants were informed on the safeguards to protect their identity and

information. Additionally, I took precautions to minimize the potential for psychological

harm for all participants. The participants were asked to discuss issues of childhood abuse

and intimate partner violence as an adult. Walden University's IRB conducted an ethics

review to ensure that there were ethical procedures in place to prevent harm to all

participants in the study. Participant recruitment and data collection could not begin until

the IRB granted approval to proceed with the research. The IRB approval number is: 11-

09-20-0330995 and it expires on 11/08/2021. The participants could have experienced

feelings of discomfort or distress while describing past experiences of abuse. Upon the

completion of the interview, participants were provided with referrals (Appendix B) for

intervention resources designed to assist trauma victims.

To gain access to participants for this study, I posted a flyer at nonprofit

organizations in Vermont that serve at-risk populations such as individuals with mental

health problems, alcohol and/or substance abuse and domestic violence. I also posted

flyers on social media and online support groups for women who have experienced

abuse. The flyer contained information about the nature and purpose of the study,

participant criteria, and confidentiality. Additionally, my phone number and email

address were provided in the flyer so individuals who were interested in participating could contact me.

To maintain privacy and confidentiality for participants, data such as informed consent forms, recordings, interview transcripts, and interview notes were saved on my computer. My computer is password protected and all materials were saved in a password protected file. I was the only one conducting the interviews. I was also the only person who could access the files. The interview transcripts and other data did not include the participant's name, but instead participants were labeled with a number to protect their identity. All research materials will be kept for a period of 5 years, which is Walden University protocol. After 5 years, all materials will be destroyed. Those who participated in the study had no previous history with me professionally or personally.

Summary

In this chapter, I discussed the purpose of the study, the research question, the phenomenon under study, the research design and rationale, the role of the researcher, methodology for participant recruitment and sampling strategy, data collection procedures, issues of trustworthiness, and ethical guidelines. The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. I used a transcendental phenomenological research design to explore this issue. The focus of transcendental phenomenological research is to explore the participant's lived experiences and perception of events (Moustakas, 1994). Participants were given the opportunity to

engage in rich and in-depth discussion about their experiences with childhood sibling
violence and intimate partner violence in adulthood.

My role as the researcher was to observe and interview participants, collect and
analyze the data. I utilized Moustakas's (1994) epoché process by documenting
preconceptions and personal experiences about the phenomena to minimize risk for
researcher bias. Bracketing was used by placing important concepts about the research
into brackets, while suspending biases that existed prior to conducting the study
(Moustakas, 1994). Purposeful sampling was the strategy that I used for participant
recruitment so that I could deliberately select participants that experienced the
phenomena under study (Ravitch & Carl, 2016). The instruments that were used for the
study were a list of interview questions and a reliable source for audio recording such as
Skype. The interviews were semistructured and guided by the research question: How do
individuals perceive and describe the effect of sibling violence in childhood as this relates
to the experience of intimate partner violence as adults?

The issues of trustworthiness and the importance in establishing credibility,
transferability, dependability, and confirmability were also discussed. Triangulation,
prolonged contact with participants and data, reflexivity, and member checks were
employed to establish credibility. Transferability is limited in qualitative research
because the goal is to achieve rich descriptions of the data and the context, not to
generalize findings across other contexts (Ravitch & Carl, 2016). Dependability was
achieved through stability and consistency in the data and aligns with the research
question. To establish confirmability, I provided an explanation on how Moustakas's

(1994) epoché process was utilized by documenting personal biases, reflexivity was used

throughout the research study, member checks, and searching and resolving discrepant

cases. I adhered to the APA's (2017) Ethical Guidelines and Walden's IRB requirements

to ensure that the research was conducted without exposing participants to psychological

harm by obtaining institutional approval, gathered informed consent from all participants,

provided resources that were designed for trauma victims, and secured participant

information and research materials to maintain confidentiality. In Chapter 4, I will

discuss participant demographic and characteristics, methods for data collection and

analysis, evidence of trustworthiness, and the results of the study.

Chapter 4: Results

The purpose of this phenomenological study was to explore the effects of

childhood sibling violence with adults who later experienced intimate partner violence.

The main research question for this study was "How do individuals perceive and describe

the effect of sibling violence in childhood as this relates to the experience of intimate

partner violence as adults?" I explored the perceptions and experiences with five

individuals who endured both childhood sibling violence and adult intimate partner

violence. In this chapter, I will provide information on participant demographics and

characteristics, methods for data collection and data analysis, evidence of trustworthiness,

and results of the study.

Demographics

This study consisted of five participants between the ages of 30–63 years. All

participants experienced childhood sibling violence and intimate partner violence in

adulthood and volunteered to share their stories and participate in the study. All

participants were from the United States and were fluent in English. Two participants

were male, and three participants were female. All participants were removed from their

intimate partner violence relationship at the time of this study.

Participant Characteristics

Participant 1 was a 30-year-old, female. She experienced sibling violence for 6

years, and she experienced intimate partner violence relationships throughout her teen

years and early adulthood. Participant 2 was a 63-year-old, male. He experienced sibling

violence for 3 years, and he had one intimate partner violence relationship that lasted for

4 years. Participant 3 was a 33-year-old, male. He experienced sibling violence for 16 years, and he was in two intimate partner violence relationships. Participant 4 was a 31-year-old, female. She experienced sibling violence for 10 years, and she was in three intimate partner violence relationships. Participant 5 was a 59-year-old, female. She experienced sibling violence from early childhood and throughout adolescence. She was in one intimate partner violence relationship that lasted for 23 years.

Data Collection

For this study, I collected data from five individuals who volunteered to tell their stories about their experiences with childhood sibling violence and intimate partner violence in adulthood. Flyers were distributed through email and social media to different nonprofit organizations, support groups, and individuals who work with survivors of sibling violence and intimate partner violence. Administrators from some of these organizations helped to post the flyer on their social media sites and in their buildings where support groups and services are held. Participants expressed interest in the study by calling me, sending a text, or sending a Facebook message. Those who contacted me through social media were directed to correspond with me via email.

I conducted individual, semistructured, face-to-face interviews using Skype for three participants, and two participants were interviewed over the phone because they did not have access to a computer or Skype. Interviews lasted between 60–180 minutes. Participants were asked 19 open-ended questions to help guide the interview and prompt the participant to provide detailed descriptions about their lived experiences with childhood sibling violence and intimate partner violence in adulthood. Additionally,

follow-up phone calls were needed for clarification for two of the participants. The virtual interviews were recorded using the recording feature on Skype, and phone calls were recorded using a voice recorder. I transcribed each recording, and I was the only one with access to the data. The recordings, signed informed consent forms, interview transcripts, interview summaries, and all other correspondence and research materials were kept in a locked filing cabinet in my office, located at my home residence. Electronic copies of recordings, interview transcripts, interview summaries were kept on my personal computer that is password protected.

There were revisions made to the initial plan for data collection and interview format due to challenges with locating and recruiting participants, all of which were approved by the Walden University IRB. I had initially planned to interview and collect data from 8–10 participants. But I stopped data collection at five participants because I had reached data saturation, meaning no new information emerged from the data. Additionally, two participants did not have a computer and Skype software; therefore, I completed their interviews over the phone. Further, the age range for participants was initially 18–34 years and was later expanded to 18–64 years of age to help recruit more participants. Lastly, instead of using one nonprofit organization, I distributed flyers through social media support groups and private practices that specialize in counseling for abuse survivors.

I utilized member checking to allow participants to modify or approve their statements and my interpretation of their experiences. Each participant was given their interview summary and was asked to call or email me to confirm accuracy or to make

corrections if necessary. Four participants were notified via email, and one participant had their interview summary sent through postal mail to their home address. The participants reported their statements and interview summaries were an accurate depiction of their experiences.

Data Analysis

For this study, I completed the data analysis by using Moustakas's (1994) transcendental phenomenological steps to data organization and analysis. Throughout the research process, I engaged in bracketing, a process in which I journaled my thoughts, ideas, and prejudgments about the research topic as a way to suspend all preconceived notions about the phenomena and to focus solely on the participants' perceptions and experiences. Then I engaged in a process referred to as horizonalization. Horizons were created through each interview transcript, highlighted in a separate color, and categorized into topics that were found across all participant interviews to create themes. After the horizons were created for each interview transcript, I eliminated any statements that were not connected to the study. Once the horizons were complete, I included a heading that represented each group. Horizonal groups that contained similar content were grouped together to form invariant constituents. Seven themes emerged from these invariant constituents: (a) family environmental factors that increase risk for sibling violence, (b) the cycle of violence, (c) participants' lived experiences with childhood sibling violence, (d) participants' lived experiences with intimate partner violence, (e) the effects of sibling violence, (f) the effects of intimate partner violence, and (g) and perceptions of sibling violence and intimate partner violence relationships.

Next, textural descriptions were created using verbatim examples from the

participant's transcribed interviews and used to support each theme (Moustakas, 1994).

After the textural descriptions were developed, I engaged in the process called

imaginative variation that consisted of a careful review of the data from different

perspectives and causal factors that could have influenced the phenomena to take place.

After reflecting on these different viewpoints, I was able to establish the structural

descriptions of the participants' experiences with the phenomena. By combining both the

textural and structural descriptions that evolved from the data, I created a unified

statement to represent the participants' experiences (Moustakas, 1994). While coding the

data, I noted any discrepant cases and presented this data at the end of the Themes

section.

Themes

In this phenomenological study, I explored the effects of childhood sibling

violence with adults who later experienced intimate partner violence. All participants

took part in a semistructured virtual interview about their lived experiences with

childhood sibling violence and intimate partner violence in adulthood. I identified the

following themes from their responses.

Theme 1: Family Environmental Factors That Increase Risk for Sibling Violence

Family environmental factors that increase risk for sibling violence include lack

of family support and parental supervision, parent–child abuse, parents who are addicted

to drugs and/or alcohol, and mental illness. All participants did not have parental support,

or proper supervision, which may have prevented conflict between siblings. Three

participants endured emotional, verbal, and physical abuse from their parents. Three participants had parents who were engaged in drug use and suffered from untreated mental health issues. All participants were reared in environments where violence was condoned and used as a tool to resolve conflict:

P1: My dad wasn't there to support me. My stepmom wasn't there to support me. I have suffered all abuse even a lot of mental abuse, verbal abuse from my dad. My stepmom would whip me a lot. She was battling mental illness she didn't even know she was going through. I was like a child in a two-parent home that had to raise myself.

P2: My mother was always gone. Like I said, we were a large family. My mom was just kind of out of the way, so we tried to not let her know too much about it, anyway.

P3: I should say that my father was abusive toward all of us. She [mother] was also, as I know now, was an active addict.

P4: My stepmother was really abusive to me. For instance, things like, there was physical abuse. For instance, from poking me to picking me up and putting me in the corner, hit me with things or throw things at me or, lots of different things. She was a drug addict.

P5: My brother was very violent towards people. He wasn't so much violent towards me because I was a baby and he was quite older than me and my sister, like 8 years older, but I remember at a young age sitting in front of the school because I guess my brother got the opportunity to take me home after

kindergarten. And he would go get in a fight and hit people with chains. My mother one time back in St. Louis, the principal there, I guess was singling out my brother or something and my mother brought me and my sister up there to talk to her. My mother knocked the shit out of her in front of me and my sister, knocked her glasses off and then went and hid in my uncle's house for a week or two. It's probably how the violence came through.

Theme 2: The Cycle of Violence

The cycle of violence refers to repeated and dangerous acts of violence that can be viewed as a cyclical pattern. The cycle repeats and happens numerous times throughout a relationship, and some experience the cycle of violence in multiple relationships. All participants reported experiencing abuse from childhood throughout adulthood. The participants explained that violence became accepted once they were repeatedly exposed to it in the family home:

P1: My whole life was like a crisis. I was raised on survival, not love, so I didn't know what love was. I didn't know that, and thought you had to stick around and keep accepting the abuse. I didn't process anything like when people use or beat, I would think it was normal and I would just move on. I thought being yelled at, being hit, verbally abused, emotionally abused, I thought that's what love was, so that's what I searched for. Black eyes were normal to me.

P2: I grew up being mad at everybody and that was all I knew at that point.

P3: I feel like they [siblings] absorbed that [parental abuse], then continued to project that onto me not only onto me, but now their spouses, their wives and husbands. I now acknowledge that it is generational trauma, continuing onward. It was my norm, you know. My life was my norm, I was obviously doing something wrong, in my mind at that time. Everything was normalized so they are all obviously right, and I'm the one that is wrong. I pushed the good ones away [romantic relationships] and kept them away before I would get too close to them. And, then the ones that were more toxic, I was drawn to them. I was used to that, those kinds of character traits, a lot of traits like my siblings or my father, like they were aggressive or were demanding verbally, or dominant. I was just attracted to that, and I would let it happen, especially in college. If they were verbally abusive, it was just what I was used to. It would be similar to what I heard growing up. They became like miniature versions of my father or my siblings, but not as bad, and justified it, like it's not as bad.

P4: I did not have a very good perception of what love was in every way around. I didn't ever feel like I was worth it or deserving. And it was normal to be in a certain environment. I've always been in very abusive relationships, always.

P5: When you're used to growing up that way, you just think that is the way it is with her [sister]. You know, putting my cosmetology pictures on the mirror and throwing them off. That wasn't that, like that big of a deal to me. Maybe it is to other people, see I'm used to that kind of behavior. This is normal.

Theme 3: Participants' Lived Experiences with Childhood Sibling Violence

All the participants experienced emotional and verbal abuse from their siblings such as alienation, degradation, name calling, and lack of support. Two participants reported they endured physical violence from their sibling.

P1: My stepsisters were very mean to me. My stepbrother didn't even like me. When my mom passed away, he did not allow me to get in the family limo. He told me I wasn't family. And I didn't have the audacity to get in the limo. I had to find a ride to my mom's funeral. With my stepsisters and my real sister and brother, it was kind of like this verbal abuse from them that I suffered, kind of like resentment, hate, envy. I dealt with colorism.

P2: My brothers hurt me. It was kind of like a competition most of my life. When it happened, they kind of ganged up, type of thing. We were always competing for something. We were isolated. All we had to deal with was each other. Call each other names. Almost everything, idiot, I mean, all kinds. I've always been a loner and I would go fishing by myself to get my head together. And I would take off all the time. I would be gone for the whole day and then come back. I would get away from them and let it die down before I would go back.

P3: He would say mean things about me, uh … like put me down, things around my physical appearance. So, verbally, he was constant, just mean, degrading things, along those lines. And then also, him and my brother, my middle brother, they would both team up and call me "stupid," say horrible things like, "piece of shit," "it would be better if you were not in this world." And my sister, um … my sister would just team up

with my brothers. They were all treating me this way verbally, also there was physical violence. I mean it would be punching me in the arm, or pulling my ear, pulling my hair, um … back when I had hair and situations like that. It was mostly punching the arm until I was on the floor crying, or my ear, they would just pull my ears um … and the hair was a big thing and drag me like with me on the floor.

P4: Being as I was being abused, and my siblings weren't, I'm sure they recognized those behaviors. So, basically, my sister, my brother didn't do this, but my sister would find moments where she could go tell on me and the purpose was to get me in trouble with my stepmom because she knew no matter how ridiculous it was, my stepmom would be upset. I was isolated a lot for punishment and physical abuse as well. They would also let me know verbally, that we did not have the same mother. She would kind of hold it over my head that I was abused, and she wasn't. So, when I was isolated, I guess you could say, she would purposely do things to make it worse. She would tell on my sister, and she would watch my mom beat her. It was so sadistic and messed up.

P5: I think she had an only child type of attitude looking back on it. My sister was cruel to me in certain ways, overbearing. My sister broke all, well, four of my fingers when I was sitting on the porch for no reason. She definitely tried to keep me in the shadows. My sister, I guess wanted to punish me, but she couldn't come out and admit that maybe I may be worthy of something where I had a good personality, or I was pretty, you know what I mean? She just couldn't do that, couldn't accept the fact that she wasn't an only child. One time, I opened the bathroom door and didn't know she was in there.

She slammed it on my foot. To this day, one of my toenails is screwed up and just hit my

foot. She would bloody my lip.

Alerting the Attention of Others to Intervene

Three participants tried to get a parent involved to intervene, and nothing

happened as a result. Parents tended to minimize their children's behavior, and often

times perceived the sibling violence as bullying, rather than rivalry and violence. The

lack of support and intervention can also be due to parents being abusive themselves, or

engaging in drugs and/or alcohol, as well as mental health issues.

P3: She [mother] never did anything about it. Yes, and what she would do is she

would yell, and she would say, you know, during the times she would scream, "stop it" so

he wouldn't get too aggressive. One time it got really bad, I think it was in junior high,

and she was like screaming "stop it! You're gonna kill him!"

P4: My mom reported it because I would tell my mom things before. I definitely

reached out to people.

P5: Oh yeah, we would get into it and my mom would go, whoop her ass, you

know like fight back in other words. But I guess my mom didn't have the parenting skills

or the time, or the skills is all I can think about to tell her it's not right to solve your

problems this way and there are consequences for your actions.

Onset of Sibling Violence

The participants experienced sibling abuse at a young age, through adolescence,

some up until adulthood:

P1: I'm gonna say about 8. It was on and off at least until I got 14. I didn't speak up about it. I held it in.

P2: probably 9 or 10.

P3: Verbal stuff when I was in 1st grade, 2nd grade. Yeah, that was as young as 1st grade, probably and then the physical stuff probably didn't start until I was a little older, maybe the end of elementary school, junior high. It just continued into adulthood and even now, they are still toxic, and um…and mean, but I separated from my family when I was 22 years old. Um…you know, with love and kindness, just went on my own journey. I couldn't be involved in their continued abuse.

P4: Four. Well, it ended for periods of time when I was in foster care. I was there two times. And I was adopted by my grandparents so when we got to my grandparents, it was a different environment, no exceptions. And so that was when I was about 14.

P5: between 14 and 16, when it really kind of escalated.

Theme 4: Participants' Lived Experiences with Intimate Partner Violence

All participants experienced intimate partner violence relationships. Three participants experienced multiple intimate partner violence relationships. Two participants experienced one intimate partner violence relationship. Four participants had experienced physical, emotional, and verbal abuse. Three participants experienced sexual abuse in addition to physical, emotional, and verbal abuse.

P1: Seventy-Five percent of my relationships were physically abusive. Most of them were physical, so I suffered a lot of physical abuse to my body multiple times, from different men. I was a rape victim a lot. I was dating a narcissistic and he put methamphetamine in my drink and a date rape drug, and I almost died.

P2: That went on for three or four years. A lot of it was name calling. She made me feel like I was inadequate and worthless.

P3: There were several men that I dated throughout my early, mid, and late twenties that were verbally abusive. I've also dated mostly alcoholics. Verbally, they would just put me down, call me stupid. I was still a little heavier then, which they would say they love my body, but then when they got angry at me, use it against me. So, my weight was always just a thing and then also since I started balding, my hair started balding in my late 20s. That became a thing for my last boyfriend. He would just make fun of that, which I was very insecure about then. Controlling, you know, they would be verbally controlling and accuse me of things. They were just really, all of them, were really jealous and would just be very verbal, if I didn't fulfil their requests. It did get violent, especially if under the influence. They would lose their temper and push me, smash things around me, they would take plates and silverware and whatever, and not hit me with it, but throw it next to me or against the wall. He also would have intercourse with me without my consent you know, whenever he was in the mood or whenever he wanted it. He would just hold me down, choke me, and do what he wanted and then go, leave, shower, go watch TV or whatever. So, with my boyfriend before that, he would do stuff like that, especially things that I didn't like, drugs or alcohol since I grew up with it.

So, he would force me to do things, like force me to drink, and one time he dropped like ecstasy in my drink without telling me and did other things like date rape to get me high and what not, so stuff would happen then when I fight back. There was a few of them and slapping, a lot of slapping throughout my life.

P4: He woke me up by grabbing me and dragging me down the hallway and he opened the trailer door where there was no stairs and it was raining outside, and there was just a puddle of mud. He picked me up, threw me in the puddle of mud and locked the door. I don't have any shoes on. I'm in my pajamas and he opened the door, spit on me, he slapped me across the face. And he locked the door back up and he packs all my stuff in like this tote bag and he gives it to me and doesn't give me my shoes and that's a pattern, like when he does stuff like that, he doesn't give me my shoes so, I'll just be walking, trying to find help with no shoes on. He never had anything to say about me. He was always telling me super negative things. I remember looking at me and thinking like, I couldn't see one good thing that I liked about myself, and I hated myself. I just thought I was never good enough. We got back home, and I was very upset, and I was soaking wet and sobbing, crying. He wants to have sex, and I wasn't in a condition or state to do that, you know. Um…and so, I'm crying and saying no, no, and he's just continuing, and I'm crying. Um…and so, he does, he has sex with me. So, then you know, there was hitting at this point, there's physical abuse, and there is like verbal abuse, manipulation, mental games, and isolation and now there's sexual abuse. Making me have sex with him three, four times a day. He is condescending all the time. I was kind of becoming isolated more. Threw me up against the stove, he's pushing me, he hit me in the face, and I had

called the police. Every time I would try to leave him, he would take the kids. He will

take them. 100 percent. At this point, he had the house, and the three kids.

P5: This guy was at the point where he was cutting up my clothes, locking me in

rooms, screaming at me for 4 or 5 hours at a time. He had threatened to kill me quite a

few times. He smashed a Pepsi can on my head because my sixteen-year-old's alarm

went off on a Saturday, he had to go to work. And the put downs. He was so cruel to me.

He would take my shoes, and keys, and kick me out in front of my kids. He would leave

me out in the rain all night long. He was physically abusive. He kicked me. I know it was

more than 3 times. I don't know how many times, but he ended up crushing my tailbone,

and the two vertebrae, I think 4 or 5, right above your tailbone and a fracture. He had a

shot gun and chased me around the street with it. He's chasing me with a shot gun

because he perceived that I was cheating on him because it took me 45 minutes at the

grocery store. This was straight out cruelty. Who actually drives to a Taco Bell when you

are going to Frisco with kids, and says, come on kids, your mom don't need to eat? He

was torturing me.

Theme 5: The Effects of Sibling Violence

The psychological effects of sibling violence that the participants experienced

include rebelliousness, bitterness and resentment, searching for love in dangerous

situations, low self-esteem, anxiety, depression and suicidal ideation, posttraumatic

stress, aggression, lack of self-awareness and boundaries, emotionally detached, and

socially withdrawn.

P1: I began to have rebellious resentment. I was actually giving love to people, and I couldn't love myself. I became this angry, bitter woman. I didn't know what respect was. I didn't know what self-awareness was, boundaries, self-standards. I was battling a lot of depression, thinking I didn't even know my own beauty. That's why I started thinking maybe, I deserve that and maybe that's what love is. And that's when I started wanting attention and my low self-esteem caused me to get the wrong attention.

P2: I used to think thoughts that I shouldn't have thought of. Death was the main one. Killing myself.

P3: All these things made me think I was doing something wrong and maybe believed them. So low self-esteem, sure. I mean, I was made fun of, not only kids being mean in high school, but like having your family unit… coming home to it, not having a safe space at school, or at home. I really started to believe that fat, or overweight was bad. The last two years, I've been working out, I lost 70 pounds because I am striving to be accepted by them. Even though we are separated, I want to feel validated in their eyes because they would continue even as an adult, call me overweight, and all these things. It still affects me as an adult. And I'm trying to work towards releasing that power from them. It effected my learning. I realize now, once I got out of the household, I started to do really well and excel in college and graduate school. So, you know, I know that I'm decent intellectually. I just feel, I have a lot of like, I would say PTSD around him [brother]. I didn't date until I was 19. I was told I was worthless and ugly, so I just didn't go for anything. I think that I had a lot of defense mechanisms put up. I would never open up and be vulnerable with them [romantic partners]. I was closed off. I think that when I

was in it, I wasn't aware I was in it, so I was unable to make those changes and get the help I needed. I grew up in a dysfunctional thunderstorm that just continued from the family unit as a child, to romantic partners into my 20s and so, it's sad that I continued that cycle without knowing. But it's been helpful now that I'm learning to open up, speak about it, share my story, and release a lot of that power that my siblings still have over me. They still do, and I can't deny that at 33. It's just the family dynamic, unfortunately.

P4: I always felt alienated from other children, like I always felt different. There was also very like um…strange behaviors…my siblings. There were red flags behavior. So, it was hard being around others who didn't have that. Very socially awkward. I was constantly on my guard. Also, I was very very quiet. It definitely made me feel that isolation feeling, that feeling of being alone. It also has prevented me from reaching out, in terms of things going on because it was that idea of like, my siblings knew what was going on, and they used it against me. I always have that idea like by telling people my weaknesses whenever I need help or not, it's this way for them to abuse me. I was diagnosed with PTSD, depression, anxiety.

P5: I never felt real close to my sister. It was instilled in me that I wasn't good enough. I don't think the physical violence affected me as much as the emotional because as a child, as a young girl, I didn't have the confidence that I should've had and looking back, you know, I was, people would say, you are beautiful, you have a great personality. I never felt that, and she cheated me of it and to this day, I still tend to stand back. And to this day, I can still feel some of that.

Theme 6: The Effects of Intimate Partner Violence

The participants experienced lifelong physical ailments, such as chronic health conditions and fatigue. The participants also described various psychological conditions they have experienced as a result of intimate partner violence.

P1: Now, I'm batting health issues because I held it in for so long. I battle with fibromyalgia. That's chronic pain due to emotional and trauma abuse.

P2: miserable, angry, violent.

P3: I think I relate well. Before, I came into support groups and started healing, I think before I was definitely more closed off. Definitely psychologically. I realize now I have a lot of character traits that um…like keeping my wall up with people, especially new people that I meet because I don't want to be hurt again.

P4: I started drinking heavily. I have isolated. My kidneys, like when they tested my kidneys, they were not processing acids correctly, so it took me a really long time to recuperate, but now, like I'm losing hair. I have a huge bald spot. I'm constantly like, I don't know how to explain it, my body, my body has a hard time, energy wise, I guess you could say. I have PTSD. I think more of it is emotional.

P5: Because so many people blame the victim, and you start blaming yourself. My hair was falling out in clumps. I had posttraumatic stress syndrome, lifelong and it has affected me physically, to this day because I have RA and I noticed that I was swelling up and hurting more than usual. It was always like doom was out there, and it was so sad. It took me about 6, 7 months to get out of that with the help of, this is what happens to you then the doctor said that my adrenaline glands were about to fail because

of constantly going even when I'm sleeping, that fight or flight. I couldn't go to a shelter. It was terrible. I think I was killing myself by not eating, by just, I didn't want to be there so bad, and I thought at that time that I had exhausted all type leads of getting out, that I started running, work obviously, but the thing was I think I had more leads. I think the embarrassment of thinking that it was my fault, like somehow, I must be broken or people, I knew I wasn't broken, but people would perceive me that way.

Theme 7: Perceptions of Sibling Violence and Intimate Partner Violence Relationships

The participants were able to look back and reflect on their abusive sibling and intimate relationships, and perceive it to be what it was, which was abuse. When individuals are young and grow up around violence, they see it as normal. Youth are dependent, and have to rely on adults to provide shelter, necessities, and resources, making it difficult to escape because they do not have anywhere else to go. The participants perceive the ongoing violence as a cycle, some see it as generational trauma.

Perception of Sibling Violence

All participants reported that they did not condone any form of familial violence. Each participant reflected on their sibling relationships and acknowledged these as abusive. Two participants reported they would intervene if it were someone else.

P1: I don't go for it. I nip it in the butt if I see it automatically. Now that I'm woke to it, I nip that stuff in the butt because words actually do hurt people. Being mean to people. Your power is your tongue. You can hurt someone with your mouth.

P2: Because of what I went through, I was violent myself. But now, I would avoid it if I came into contact with it or try to stop it if it was somebody else. There is no need for it. We have enough problems without fighting with each other. I don't condone it.

P3: I think that hurt people hurt other people. So, I think because we were all hurt, we projected it onto each other and didn't know how to heal or release the anger, sadness, and fear within ourselves. We were enduring what was happening from our parents so, I think that is why we projected it amongst all of us. I think I got into the situation that I got into because of how I grew up and how what I was used to, um…because I think it was normalized, you know.

P4: They find themselves in this cycle, and it doesn't stop. So, like, from childhood, they are forced into this cycle of being abused, and every which way, try to get out of this cycle, but they can't. There is no way out, and it consumes. It doesn't stop until they get the help that they need or deserve.

P5: Well, I have 3 sons and they never fought. They didn't abuse each other. It didn't happen in my family because I'm not a hitter.

Perception of Intimate Partner Violence

All the participants reported that they do not condone intimate partner violence, and each had escaped the abuse after many years of being in them. All of the participants were able to reflect on their experiences with intimate partner violence and acknowledged the wrongfulness of their partner's actions, and shared their views on these relationships, today as survivors of abuse.

P1: All's I want to say is, I don't pressure people to lead themselves to Christ. The way to life is the bible. A lot of females need to go and understand and actually saving themselves for marriage because that will cut out a lot on how you get to intimate physical relationships, getting assaulted. You learning your self-worth, actually loving you. It is better to be single than to be married. You need to find yourself. I really want to say you can change your mind. You can take your mind back. You can take your power back.

P2: I feel it is unnecessary. It is a shame that people have to resort to that now.

P3: I realized that I am attracted to traits that my father and siblings had, narcissism, dominance, so I think I ended up, I just sensed their energy I guess in a weird way. I was attracted to those traits and so, that's why I think I ended up in the situations and because of low self-esteem, I wasn't able to end them.

P4: Basically, my views on it now, I'm just so disappointed. I think there are a lot more abusive situations that people don't talk about, and my basic view on domestic violence relationships is something needs to change.

P5: I never ever doubted how wrong it was. I never sat there, and said, well maybe I deserve it, maybe I should polish his boots. I was never like that.

Discrepant Cases

Discrepant data were provided by Participant 2 regarding family environmental factors that increased risk for sibling violence. Four participants reported family dysfunction in the home, describing issues such as witnessing or being the victim of family violence, growing up with parents with mental illness, and drug addiction and/or

alcoholism. Participant 2 did not report family violence other than the abuse between he and his siblings. Participant 2 did not report that he grew up in a home where the parents suffered from untreated mental illness, or drugs and alcoholism. Participant 2 and his siblings were left unsupervised, and he and siblings fought over resources, in which he described this as a factor that initially caused the sibling aggression to take place. P2 explained, "my mother was always gone. We were always competing for something. Almost everything, food, anything. We were isolated. I grew up on farms, and nobody ever around. And all we had to deal with was each other."

Evidence of Trustworthiness

In this study, I employed multiple techniques to establish credibility such as, triangulation, member checks, prolonged contact with participants and the data, and reflexivity. I engaged in triangulation by considering multiple perspectives to help form themes derived from the data (Ravitch & Carl, 2016). The sources that were used to consider different perspectives included interviews, demographic information, and notes taken during the interviews. Participants were asked to engage in a process called member checking. While I was approaching the conclusion of data analysis, I asked the participants to verify statements and my interpretation of their experiences and allowed each of them to make adjustments or corrections, if necessary (Ravitch & Carl, 2016). The participants confirmed their interview summaries were accurate, and correctly described their experiences with the phenomena.

Additionally, I asked participants probing questions during their interviews when elaboration was needed to obtain rich and in-depth responses as a way to collect as much

data as possible, and to avoid misinterpretation. I also engaged in prolonged contact with participants and the data by carefully reviewing the interview transcripts to gain familiarity, conducted follow-up phone calls when more information and clarification was needed, and transcribed the interviews myself. Reflexivity was another technique that I used to establish credibility in the data, an ongoing process that consists of monitoring researcher biases (Ravitch & Carl, 2016). Throughout the research process, I journaled my personal biases about the subject to avoid misinterpreting the data.

Transferability refers to applying the study findings to other contexts and populations (Ravitch & Carl, 2016). The goal of qualitative research is not to make generalizations, but to provide rich and in-depth data about the phenomena under study from the participant's perspectives (Ravitch & Carl, 2016). The readers of this study may make comparisons, while considering contextual factors, rather than replicate the findings. Dependability was achieved by answering the research question with stable and consistent data (Ravitch & Carl, 2016). I used an audit trail to document research procedures, establishing trustworthiness and confirmability of the findings. An audit trail consists of detailed steps taken throughout the research such as journaling my ideas and preconceptions about the phenomena, when, how, and where research flyers were posted, and details on screening, interviews, participant information, and transcription. To establish confirmability, I employed Moustakas's (1994) epoché process. Throughout the study, I was conscious of personal biases that may influence how I interpret data. To prevent misinterpretation, I documented my personal biases, experiences, and

preconceptions about the phenomena and focused solely on the participants' perspectives and lived experiences.

Results

The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. The main research question for this study was: How do individuals perceive and describe the effect of sibling violence in childhood as this relates to the experience of intimate partner violence as adults? The participants were between the ages of 30 to 63 years of age and were removed from their intimate partner violence relationship.

Composite Depiction of the Participants' Experience

Family environmental factors that increased risk for sibling violence included lack of family support and parental supervision, parental abuse, growing up with parents who were addicted to drugs and/or alcohol, and untreated mental health issues. All participants reported lack of parental support and proper supervision. Participant 4 explained, "I didn't have any support. She [mother] wouldn't interfere as things were happening." Three participants (60%) experienced emotional, verbal, and physical abuse from their parents. Three of the participants (60%) were raised by parents who were addicted to drugs and suffered from mental illness. P3 explained, "she [mother] just fell more into her addiction, just continued to let it happen. I think it was bothering her and she wanted it to stop. She wanted all of us to get better, but she never did anything about it." All the participants were raised in environments where violence was condoned and often used as a way to resolve problems. Participant 5 reported, "my sister was quite violent. And my

brother was the same way. But not the bullying type. He was more of the type of, if somebody ripped him off, he was going to go whoop their ass."

All participants were involved in intimate partner violence in adulthood. Two participants (40%) were in one long-term intimate partner violence relationship. For example Participant 2 was in a relationship with violence for 5 years and Participant 5 was in an abusive marriage for 23 years. Three participants (60%) were in multiple intimate partner violence relationships in adulthood. Participant 3 disclosed, "I think I ended up in these relationships because I did not heal from what happened to me as a child and so, I continued those cycles of abuse." Two of the participants (40%) reported they became aggressive themselves. Participant 1 explained, "I was becoming narcissistic. I was becoming the emotional abuser. I was becoming the physical abuser. I was becoming the person that abused me." Four of the participants (80%) reported the violence was normalized in the home, which is why they connected to partners with familiar characteristics such as "demanding," "dominant," "aggressive," and "manipulative" behaviors.

Participants entered into these violent relationships because they "did not have a very good perception of what love was." All participants experienced low self-esteem and did not believe in their competencies enough to escape their situations until they came to the realization that danger was inevitable. Low self-esteem caused the participants to feel as if they are blameworthy and deserve the abuse. Participant 1 divulged, "your brain begins to think I am alone. I am not enough. I deserve this, and you go into depression." Participants exhibited low self-efficacy, which explained why it was

difficult for them to seek resources and support to escape the abuse. P4 explained, "I was unable to make those changes and get the help I needed." All participants experienced sibling abuse as young as 4 years old, through adolescence, some into adulthood. Participant 3 had to disconnect entirely from his siblings because they were still "toxic" and "mean" as adults.

All participants experienced emotional and verbal abuse from their siblings such as alienation, degradation, name calling, and lack of emotional support. Participant 1 explained, "my sisters always called me ugly because of my skin color." Participant 2 reported the sibling abuse was initially due to lack of parental supervision, always competing over resources. P2 stated, "all we had was each other. My mom worked nights." Two participants (40%) reported physical abuse from their siblings such as, broken bones, hitting, pulling ears, dragging them by their hair, and throwing objects at them. Participant 4 divulged her sibling assisted her stepmother in abusing her and her biological sister. Participant 1 did not report her abusive sibling to a parent, friend, teacher, or other professional. Three participants (60%) reached out to a parent to intervene, and nothing took place as a result, and the abuse continued. The lack of parental support was due to parents being abusive themselves therefore, minimizing the violence. Parents also engaged in drug abuse and suffered from untreated mental health conditions.

All participants experienced intimate partner violence in adulthood. All participants experienced mental and verbal abuse from their romantic partners. Emotional abuse experienced by the participants included degradation, isolation from friends and

family, death threats to instill fear and compliance, food deprivation, ripping up clothing, and forcing them to sleep outside in the rain without shoes. Four participants (80%) experienced physical abuse from their partners such as hitting, kicking, and broken bones. Three participants (60%) experienced sexual abuse from multiple romantic partners. Participants described the abuse as a "gradual experience," escalating to more dangerous behaviors.

Participants reported the effects of sibling violence as rebelliousness, bitterness and resentment, searching for love in dangerous situations, low self-esteem, low self-efficacy, anxious and depressive symptomatology, suicidal ideation, posttraumatic stress, aggression, lack of self-awareness and boundaries, emotionally void, and poor socialization. Two participants enjoyed academics, viewing school as a safe place to escape abuse and one participant reported truancy. Two participants did not enjoy school due to difficulties relating to their peers. Although Participant 3 did not enjoy school as a child and teenager, once he separated from his siblings, he did well academically in college and graduate school. Participant 3 explained he still engages in behaviors that his siblings would approve of such as, maintaining his physical appearance and exercise because he "still wants to be validated in their eyes."

The participants reported the effects of intimate partner violence as physical health problems such as fatigue, kidney damage, hair loss, fibromyalgia, and rheumatoid arthritis. Participant 1 reported, "chronic pain due to emotional and trauma abuse." Participant 5 explained, "recently, I've noticed more physical than I have mental because mentally we can lie to ourselves, and tell ourselves a lot of things, reason with ourselves,

but our bodies don't do that." Psychological effects experienced by the participants included difficulty relating to peers, negative thinking, constant fight or flight mode, hypervigilance, posttraumatic stress, in need of reassurance from others to feel whole, emotionally unavailable, depression, and anxiety. The participants experienced hopelessness due to lack of support and resources for battered women with children. Participant 5 said,

> I would sit up all night and walk the floors and try to think of some blessing in my life. Unfortunately, I couldn't think of one then. I was grieving myself to death. I thought at that time that I had exhausted all type leads of getting out.

> Lastly, the participants were able to look back and reflect on their experiences with sibling abuse and intimate partner violence, and each perceived the interactions to be abuse. The participants were raised with abusive siblings and viewed violence as an acceptable trait in their future relationships because that is what they were "used to," and "it was normalized." The participants perceived the ongoing violence as a cycle, some viewed it as "generational trauma, continuing onward." The participants reported their abusive siblings as damaged themselves, and so "projected it onto each other." The participants reported they do not condone any form of violence and would intervene if it were someone else.

Discrepant data regarding family environmental factors that contributed to the onset of sibling violence were included in the final results of the study. Four participants reported similar environmental factors that they feel have caused their siblings to become abusive such as, exposure to violence, parental abuse, being reared in environments

where the parent(s) is addicted to drugs and/or suffers from mental illness. Contrary to other participants, Participant 2 explained his siblings became hostile because they were always competing over resources because he had a large family and lived in an isolated area so all they had to deal with was each other. Discrepant data was noted and considered as a difference in perception and lived experience and included in the final analyses.

Summary

In this chapter, I provided the study results, which explored the effects of childhood sibling violence with adults who later experienced intimate partner violence. This study addressed the gap in the literature by exploring adult relationship difficulties to better understand these behaviors in adults who also experienced sibling violence in childhood. The goal of this study was to explore the victim's accounts about their emotional capacities and relationship patterns following childhood sibling violence. Data organization and analysis was completed by transcribing interviews, and hand coding using Moustakas's (1994) transcendental phenomenology.

Through the transcription and coding process, I identified seven major themes that addressed the research question. The seven themes identified were: (a) family environmental factors that increase risk for sibling violence, (b) the cycle of violence, (c) participants' lived experiences with childhood sibling violence, (d) participants' lived experiences with intimate partner violence, (e) the effects of sibling violence, (f) the effects of intimate partner violence, (g) and perceptions of sibling violence and intimate partner violence relationships. Each theme included a description of the meanings and

essences of the participants' unique human experiences, and representation of the group as a whole (Moustakas, 1994).

In Chapter 5, I will present my interpretation of the lived experiences of the participants, validate the findings, expand the literature and understanding in the area of sibling violence, social learning and future complications. I will also discuss the limitations of the study, recommendations for future research, and positive social change implications.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. This study addressed the gap in the literature by exploring adult relationship difficulties in adults who also experienced sibling violence in childhood. A phenomenological research design allowed me to conduct interviews with participants and learn about their true experiences with childhood sibling violence and intimate partner violence in adulthood. The questions were open-ended, which gave me the opportunity to obtain rich and in-depth responses, resulting in a sufficient amount of data about the phenomena under study. I conducted three individual, semistructured interviews with participants through Skype and two over the phone. I completed data analysis using Moustakas's (1994) transcendental phenomenological steps to data organization and analysis. The key findings revealed (a) family environmental factors that increase risk for sibling violence, (b) the cycle of violence, (c) participants' lived experiences with childhood sibling violence, (d) participants' lived experiences with intimate partner violence, (e) the effects of sibling violence, (f) the effects of intimate partner violence, and (g) perceptions of sibling violence and intimate partner violence relationships.

Interpretation of the Findings

The findings of the study were consistent with the literature review in Chapter 2. The participants reported that their experiences with sibling violence included verbal, emotional, and physical abuse (Khan & Rogers, 2015). Forms of intimate partner violence reported by the participants included verbal, emotional, physical, and sexual

abuse (Patra et al., 2018), and the effects of intimate partner violence included physical health ailments, fatigue, fear of exposing vulnerabilities, self-isolation, posttraumatic stress, and hopelessness. The psychological effects of sibling violence that were reported from participants included rebelliousness, low self-esteem, anxiety, depressive symptomatology, PTSD (Khan & Rogers, 2015; Perkins et al., 2017; Plamondon et al., 2018), searching for love in dangerous situations or partners who exhibited similar characteristics to their abusive siblings, being socially withdrawn (Meyers, 2015), and aggression (Lee et al., 2014).

The participants described lack of family support and parental supervision (Sharangpani, 2018), parent–child abuse (Lee et al., 2014; Rakovec-Felser, 2014), growing up with a parent or parents who engaged in substance abuse and who suffered from mental health issues (Phillips et al., 2018) as contributing factors in the onset for sibling violence. The participants also explained that the sibling violence was minimized and was not perceived as abusive or to have a detrimental effect on the victimized sibling (McDonald & Martinez 2016); therefore, when a parent was notified of the abuse, nothing happened as a result. The participants viewed the abuse as a cyclical process, experiencing familial forms of violence in childhood and revictimization in their intimate partner violence relationships in adulthood (Devries et al., 2016; King et al., 2018; Magagna, 2014). Inconsistent with the literature, the participants perceived sibling violence as abusive and would intervene if it were someone else. However, six out of seven themes identified in this study were consistent with the literature reviewed for this

study regarding the effects of childhood sibling violence with adults who later experienced intimate partner violence.

Theme 1: Family Environmental Factors That Increase Risk for Sibling Violence

Most of the participants described a lack of parental support and supervision as a contributing factor in their abusive sibling relationships, which was consistent with previous research that revealed acts of violence between siblings are usually the result of a lack of parental supervision and minimizing sibling aggression (Sharangpani, 2018). Three of the five participants reported living with a parent who was abusive, and they had explained that this abusive behavior was imitated by their sibling or siblings. If parents use violence against a spouse or a child, children observe and later imitate those behaviors toward their siblings because children are often influenced by those of a higher social power (parental/model figure), placing these children at increased risk for using domestic violence in their adult relationships (Rakovec-Felser, 2014). Three participants also explained their parent or parents suffered from addiction and mental health problems. The likelihood for sibling violence drastically increases when the parent suffers from mental illness and chemical dependency (Phillips et al., 2018).

Theme 2: The Cycle of Violence

All participants reported experiencing abuse from childhood throughout adulthood. Participants described the violence as generational trauma, and some viewed it as a cyclical process, unable to break the cycle of abuse because it had become normalized in the family environment. The home is where children learn the script of violence (Sharangpani, 2018). Raised to believe violence is a socially acceptable tool to

resolve conflict, those who suffer from childhood maltreatment may not believe in their competencies enough to take the necessary steps to escape the cycle of violence and expect violence to be a normal occurrence in adult relationships (Devries et al., 2016). Four of the five participants explained that they stayed in these relationships and found themselves repeating the cycle because they could not see a way out. The cycle of violence can be explained by learned helplessness caused by repeated exposure to family violence, which is why the individual may remain in abusive relationships (King, 2014).

Theme 3: Participants' Lived Experiences with Childhood Sibling Violence

All participants reported that they had experienced verbal and emotional abuse from their siblings. Verbal abuse was reported to be the most common form of sibling abuse (Dantchev & Wolke, 2019). Two of the five participants experienced physical abuse from their siblings. Consistent with the literature, the most common forms of sibling violence included verbal, emotional, and physical abuse such as hitting, slapping, punching, and broken bones (Khan & Rogers, 2015). Two of the five participants experienced sibling physical abuse such as hitting their arms to the point where they were crying in pain, slapping, punching in the face, and broken fingers.

The participants experienced sibling abuse beginning in early childhood. Two participants reported the abuse started as young as 4–5 years old, and three participants reported the abuse started between 8–10 and had escalated to more severe forms of abuse around the age of 14 years. Sibling violence can begin as early as 5 years of age, with an onset of abuse starting from 6 years of age (Meyers, 2017). Some may endure sibling abuse for 16 years, beginning from childhood through adolescence, and in some cases the

abuse may continue through adulthood (Meyers, 2017). The participants disengaged from their abusive siblings entirely. Participant 3 explained that the sibling abuse continued even as an adult, forcing him to go his separate way to be free of their constant judgment and abuse. Three of the five participants were abused by an older brother, Participant 4 was abused by a younger sister, and Participant 5 was abused by an older sister. Participant 3 explained his brothers were just as violent as his father was. Older brother siblings may be either more or frequently abusive as parents (Frewen et al., 2015).

Theme 4: Participants' Lived Experiences with Intimate Partner Violence

All the participants experienced intimate partner violence relationships in adulthood. Three of the five participants were in multiple intimate partner violence relationships during their teenage years and throughout early adulthood. Two participants were in one intimate partner violence relationship, one of which lasted for 4 years, and the other lasted for 23 years. Two of the five participants were involved in an abusive marriage. Forms of intimate partner violence reported by the participants included verbal, emotional, physical, and sexual abuse (Patra et al., 2018). All participants experienced verbal and emotional abuse in their adult intimate partner violence relationships. Four of the five participants experienced physical abuse, and three participants were also sexually abused by their partners.

Theme 5: The Effects of Sibling Violence

Consistent with the literature, the participants in this study reported the following psychological effects they experienced from sibling violence: poor social skills, aggression, rebelliousness, low self-esteem, anxiety, depression, posttraumatic stress,

searching for love in dangerous situations and partners who exhibited similar characteristics to that of their abusive siblings (Khan & Rogers, 2015). All participants reported low self-esteem, anxiety, and depressive symptoms. Participant 3 reported posttraumatic stress, and Participant 1 reported rebellious behavior as a result of sibling violence victimization. Research has also indicated a link between sibling aggression and poorer mental health, academic difficulties, and social incompetence, and victims are twice as more likely to have depression and feelings of worthlessness (Plamondon et al., 2018). Three of the five participants reported academic difficulties, and four participants reported having trouble relating to their peers. Participant 4 divulged that she felt different from other children and did not know how to relate to those who did not have abusive siblings. All participants reported feeling insignificant to their family members as well as their peers. Victims of sibling abuse are often overly sensitive and are distrustful and suspicious of others (Meyers, 2015). Three participants reported being a sensitive person, two participants explained they did not trust others, and were afraid to let others get close to them. More specifically, Participant 4 explained that to become vulnerable and ask for help is a way for others to abuse you, because her siblings knew what was happening to her and instead of helping they used it against her.

Theme 6: The Effects of Intimate Partner Violence

All the participants reported that they had experienced emotional and verbal abuse in their intimate partner violence relationships. Four participants reported physical abuse in their intimate partner violence relationships. Three participants reported sexual abuse in addition to physical abuse in their intimate partner violence relationships. Intimate

partner violence is associated with worse health status and chronic pain (Rakovec-Felser, 2014). Three of the five participants reported fatigue, chronic pain, arthritis, and declining health. Battering is also associated with psychological problems such as higher levels of depression, posttraumatic stress, anxiety, alcohol, drug use, and eating disorders (Rakovec-Felser, 2014). All participants reported depression, four participants reported posttraumatic stress, and Participant 4 suffered from alcoholism and drug use. Four of the five participants reported anxiety. Participant 5 reported she had stopped eating and lost a significant amount of weight because her eating was the only part of her life that she could control.

Theme 7: Perceptions of Sibling Violence and Intimate Partner Violence Relationships

All participants explained that the sibling violence was minimized by the parent, so no intervention took place, allowing the abuse to continue and escalate. When sibling violence is reported to a parent, the abuse is often viewed as bullying or normal fighting between siblings, which is why is receives little attention (McDonald & Martinez, 2016). Sibling violence assault is also perceived as less severe than dating violence, and the victim is perceived as culpable (Khan & Rogers, 2015). Those who experienced childhood sibling violence even perceived it as less severe as a way to normalize the behavior and cope with the maltreatment they had endured (Khan & Rogers, 2015). For instance, a victim who now was a parent viewed the fighting between her children as normal sibling rivalry that stemmed from jealousy and attention-seeking rather than abus, indicating that sibling violence was normalized because of the participant's own

experiences with childhood sibling violence (Perkins & Shadik, 2018). The perception

that sibling abuse is normal is most prominent among male participants (Khan & Rogers,

2015). However, inconsistent with the literature, the participants acknowledged the

sibling violence as abusive and would intervene if it were someone else.

Conceptual Framework and Finding Interpretations

The conceptual framework that guided this study was Bandura's (1991) social

cognitive theory. Social cognitive theorists suggested that observation of model figures,

imitation, social and familial interactions, personal experiences, as well as the media are

all influential to the development of an individual's thoughts, moral reasoning, and

behavior bidirectionally. Social cognitive theory was founded on an agentic perspective,

in which the individual is a product of intrapersonal influences, behaviors that role

models participate in, and an environment that supports such standards and behaviors

(Bandura, 2018). Modeling and reinforcement are strong influences on cognitive

development, standards, self-sanctions, and self-efficacy (Bandura, 1999). During an

individual's developmental period, they observe behaviors from powerful social

influences and adopt those they have seen become successful in achieving a desired result

(Bandura, 1999).

Social cognitive theory was applicable to this research study because it addresses

both the development of human capacities and regulation of human activity, broken down

into five mutually related components: properties of self-agency, imitative learning,

personal agency and social structure, self-efficacy, and the cycle of violence (Bandura,

1991, 1999). These important aspects of social cognitive theory were evidenced

throughout the participants' interviews and descriptions regarding the effects of childhood sibling violence with adults who later experienced intimate partner violence.

Properties of Self Agency

There are three main properties to agency that are applicable to this study: forethought, self-reactiveness, and self-reflectiveness (Bandura, 2018). Forethought refers to how an individual is motivated or guides themselves through an event by creating a plan of action, adopting goals, and visualizing a likely outcome following an action (Bandura, 2018). All participants were able to take steps to finally break the cycle and flee from their abusive relationships. Participant 5 had to "run for 2 years." Four of the five participants developed a plan, adopted a goal to free themselves and their children from their abusive partners, and were successful at accomplishing this goal. If they did not set a plan in action, they visualized not making it out of their abusive relationship alive as well as inevitable danger for their children. Self-reactiveness refers to how an individual manages their own behavior, developing standards for behavior, and aligning their behavior to fit their standards (Bandura, 2018). When the participants in this study were child victims of sibling and parental abuse, violence at that time became normalized for them, and they sought partners who shared similar characteristics to that of their abuser. These violent behaviors and standards derive from the childhood environment and were supported by members of the family, and participants expected violence in their adult relationships.

Self-reflectiveness is when an individual reflects on their capabilities, thoughts, and behaviors (Bandura, 2018). All participants stayed in these abusive relationships

because that was all they knew, and thought they had to stick around and accept the abuse. Two participants believed they had exhausted all of their options of getting out. These two participants had children and did not know if they could provide stability for them, which enabled them to stay with their abusers in order to have shelter, resources, and their children in the same household.

Imitative Learning of Aggression

Children who are exposed to an aggressive authoritative model, will adopt and exhibit aggression themselves through a process referred to imitative learning of aggression (Bandura et al., 1961). The concept of imitative learning applies to both the participants and their abusers. For instance, three participants explained that their siblings learned aggression and abusive behaviors from a parental figure. Violence and manipulation were a commonly used tactic by a parent(s) to resolve conflict, or to achieve a goal. The observers (abusive siblings) then adopted this same standard and behavior and used it against a sibling. Three of the five participants became aggressive themselves later in adulthood because violence was all they knew and believed that this is a way to regain control (similar to the power and control their siblings had over them) and to maintain those relationships.

Personal Agency and Social Structure

In social cognitive theory, there is an interrelationship between personal agency and social structure (Bandura, 1999). Transformation and change are influenced by social systems. Social structures are created by powerful role models and adults within a family environment to organize, judge, and regulate values and standards (Bandura, 1999). The

role models will authorize the rules and sanctions within this social network (Bandura, 1999). Factors such as economic conditions, socioeconomic status, and familial structure will influence a set of standards and behaviors, aspirations, self-efficacy, and self-regulation (Bandura, 1999). There is an interconnection between moral reasoning and human activity (Bandura, 1999). When individuals adopt standards that derive from the family environment and childhood experiences, they will behave in accordance with their moral beliefs. Within this conceptual framework, factors such as morals, self-regulation, conduct, and environment all interact to influence cognition and behavior (Bandura, 1991). Just as importantly, individuals will develop standards based on how significant persons respond to the behaviors (Bandura, 1991). Four of the five participants grew up in home environments where violence was normalized. This includes not only sibling violence, but interparental abuse, parent-child abuse, and peer violence. All participants were attracted to traits they were familiar with, repeating the cycle of abuse in their adult intimate partner violence relationships because these traits and behaviors align with their familial and social structure, and well-developed standards as an adult.

Self-Efficacy

Social cognitive theory suggested that social interactions, past experiences, and observing model influences contribute to an individual's feelings of self-efficacy (Bandura, 1999). The participants have been exposed to violence from childhood through adulthood. They repeated the cycle of abuse, and endured violence from multiple persons familial and romantic. Two participants did not believe there was enough resources to assist them in their escape, or how to seek out help from local services for domestic

violence victims. Those who do not believe in their capabilities may not put forth effort or surrender when faced with life challenges (Bandura, 1999). Those with strong feelings of self-efficacy will give far greater effort to achieve a goal, effectively problem solve to overcome life challenges, and are more resilient when faced with adversity (Bandura, 1999). Individuals with low self-efficacy are prone to stress and depression when exposed to threatening situations (Bandura, 1999). All of the participants experienced elevated levels of stress, and various psychological disorders such as depression and anxiety. Four of the five participants experienced posttraumatic stress disorder. Self-efficacy influences how the individual with interpret and cognitively process threats or challenges (Bandura, 1999). Before the participants had become removed from their intimate partner violence relationships, they had a tolerance for violence that stemmed from their familial environment and perceived the violence as less threatening until they realized that the behaviors of their partners were escalating, becoming clearer that danger was inevitable.

The Cycle of Violence

Childhood history of abuse predisposes the survivor to violence in their later adult years, referred to as the cycle of violence hypothesis (Spatz-Widom, 1992). The dynamics of domestic violence involve repetitive behavioral patterns in interpersonal relationships, which maintain the cycle of violence (Both et al., 2019). All participants reported experiencing abuse from childhood, throughout adulthood. Four of the five participants explained that violence became accepted once they were repeatedly exposed to it in the home environment. Violence became their norm, and they searched for

relationships where their significant other possessed traits and characteristics, similar to that of their abusive sibling(s).

In most situations, individuals do not have control over the conditions of their social environment and family practices that effect their lives, especially as a child (Bandura, 1999). As adversity became normalized in the family home, the participants were at increased risk for revictimization in adulthood. The family environment is a key part of collective agency, where beliefs and standards are passed down to one another, and as a group, individuals engage in behaviors and standards of its family members (Bandura, 1999). Children repeatedly observe not only the behaviors of their parents but their siblings, for they provide a variety to what is modeled in the familial environment (Bandura, 1991). When the model figure engages in acts of violence as a way to resolve conflict and obtains their desired results, violence becomes defensible, and nonviolent behaviors are viewed to be ineffective to the observer (Bandura, 1991).

Summary

The findings of this research study are consistent with Bandura's (1991) social cognitive theory, in which an individual's cognition, moral reasoning, and behaviors are influenced by observation of model figures and family structure, imitative learning, social interactions, and past experiences. Most of the participants explained their behaviors were shaped through environmental forces. Aggression was learned through imitative learning through parental figures and siblings used force to resolve conflict or to achieve a goal. Their perception of violence stemmed from the standards and beliefs that were formed within their social and familial structure. Feelings of low self-efficacy and not

envisioning a way out of their toxic and abusive relationships, participants had found themselves repeating the cycle of abuse that began in childhood and continued until their later adult years. The results of the study revealed one or more events that pertained to properties of self-agency, imitative learning of aggression, personal agency and social structure, self-efficacy, and the cycle of violence regarding the effects of childhood sibling violence with adults who later experienced intimate partner violence.

Limitations of the Study

A limitation of the study was the small sample size. Only five participants volunteered, and self-identified as individuals who experienced childhood sibling violence and intimate partner violence in adulthood. The participants who took part in the study ranged in age from 30 to 63 years. The individual descriptions that were provided by the participants do represent their true perception and experiences about the phenomena but may not be representative of the general population of individuals who have endured childhood sibling violence and intimate partner violence in adulthood therefore, the study was limited by a small sample size, and individual perspectives. All participants were individuals who experienced childhood sibling violence and intimate partner violence as adults and provided important insight about their experiences with continued forms of familial and interpersonal abuse.

Additionally, due to my personal and professional experiences, researcher biases were acknowledged as a potential limitation of the study. To control bias, I engaged in a process referred to as bracketing where I journaled my thoughts, beliefs, and prior knowledge obtained about the phenomena to focus solely on the participants'

perspectives and experiences. I used an interview guide that consisted of 19 open-ended questions that invited the participants to provide their responses and elaborate as much they wanted to regarding their experiences with childhood sibling violence and intimate partner violence in adulthood. I used a reliable source to record the audio in order to accurately transcribe the interviews and provide participants with an interview summary so that they could each confirm its accuracy, through member checking (Ravitch & Carl, 2016). I also conducted two follow-up phone calls for clarification purposes. The interview data represented the lived experience of the phenomena from each participant's perspective. The results of the study, therefore, were a true representation of the participants' experiences and my interpretation through data analysis.

Recommendations

In this study, I explored the effects of childhood sibling violence with adults who later experienced intimate partner violence. The five participants who took part in this study were between 30 to 63 years of age. Of the five participants who took part in the study, only two participants were male. It is recommended that future research is conducted on a larger sample size that consist of both female and male participants to explore gender differences regarding childhood sibling violence and intimate partner violence in adulthood. Out of the five participants, only one participant was college educated. Therefore, there is a need to investigate the experiences of childhood sibling violence with adults who later experienced intimate partner violence using a college sample to uncover if significant differences in perception do exist compared to participants who did not attend college.

In this study, the five participants reported emotional, verbal, or physical abuse by a sibling. Future research is needed to explore the psychological effects of all forms of sibling violence such as physical, sexual, and emotional abuse, and compare future outcomes. Two of the five participants were exposed to interparental violence in childhood. More research is needed to explore the influence that older siblings have on their younger sibling's aggressive behaviors when exposed to intimate partner violence. The sample did not present the opportunity to compare cultures because all participants were from the United States. Therefore, research that examines sibling relationships and its impact on adult intimate partner violence relationships across cultures is recommended. Overall, considering the minimization of sibling violence, any additional research is needed to expand the literature to raise awareness about sibling violence, and associated consequences victims of sibling violence face in their future, and to possibly improve the lives and outcomes for this population.

Recommendations for Practice

The participants in this study described family environmental factors that contributed to the family dysfunction and lack of intervention as violence occurred among siblings. Family environmental factors that increased the risk for sibling violence were lack of parental support and supervision, parent-child abuse, growing up with a parent(s) who was addicted to drugs and/or alcohol, and suffered from untreated mental health issues. Two participants said they reported their home struggles to a counselor at school and Child Protective Services was called. In each instance when participants sought intervention, no help was offered, and the abuse continued. It is recommended that

more information be made accessible for social workers, and victim advocates about the damaging impact of sibling violence, and environmental factors that may support such abuse. Four participants also reported the violence to a parent, and nothing happened as a result. Two participants expressed their parents were suffering from their own issues such as substance abuse and mental health problems. The participants' reports about their lived experiences with childhood sibling violence and the psychosocial impact in their later adult years may help spread awareness to not only the community, but also mental health practitioners, the educational system, and those who work within the government to support abuse survivors and help identify areas in services that may be in need of improvement to help support sibling violence victims and their families.

Implications

Implications for Positive Social Change

The positive social change implications for this study include raising awareness of this type of familial abuse. The participants' experiences revealed how the effects of childhood sibling violence contributed to revictimization in their adult intimate partner violence relationships. By expanding the literature of this issue, researchers can perhaps identify critical problems with the current delivery of support services and influence public policy to aid in the improvement of prevention and intervention programs for this population. The findings of this study can provide additional information to program evaluators and advocates to perhaps contribute to the improvement of intervention and prevention programs that are needed to help restore the lives of those who have experienced childhood sibling violence and intimate partner violence in adulthood.

Increased knowledge and understanding of this issue can help tailor support and counseling programs to better fit the needs of this population, as well as design prevention programs that can help families identify when sibling relationships become problematic much sooner and inform parents on potential consequences if there is no intervention.

Methodological Implications

In a recent national sample of 4,000 children and youth 0-17 years, 21.8% reported assault by a sibling the past year (Glatz et al., 2019). Sibling violence is among the most common form of family violence, and the emotional and behavioral outcomes have not received much attention (McDonald & Martinez, 2016). Sibling violence has not achieved the status of a serious social problem nor has its long-term psychological consequences gained the attention of researchers, until recent years (Mathis & Mueller, 2015). More attention has been given to perpetrators of sibling abuse, rather than victims of sibling violence in childhood and the relationship to behavioral difficulties in adulthood (Mathis & Mueller, 2015).

The participants of the study provided rich and in-depth information about their perspectives and their experiences with childhood sibling violence and intimate partner violence in adulthood. The participants' responses helped fill the gap in the literature by exploring adult relationship difficulties to better understand these behaviors in adults who also experienced sibling violence in childhood. The methodological implication of this study is that the qualitative interviews provided an opportunity to explore the experience of childhood sibling violence and its relation to intimate partner violence in adulthood.

This was achieved from the participants of this study using Moustakas's (1994) steps for transcendental phenomenological analysis.

Theoretical Implications

Observational learning through model figures, imitation, social interactions, family structure, and past experiences are all influential factors that contribute to an individual's cognition, moral reasoning, and behavior bidirectionally (Bandura, 1999). Humans can be thought of as agents, in which they are a product of intrapersonal influences, behaviors that significant persons engage in, and an environment that supports such standards and behaviors (Bandura, 2018). Justified abuse and ascribed blame can have devastating consequences for the victims (Bandura, 1999). The cycle of violence can be understood as a coping mechanism perhaps, to justify their behaviors, or come to believe that adversity is a normal occurrence in adulthood. When victims of abuse experience continued degradation, and ascribed blame, they can come to believe that they are truly blameworthy and deserving of the abuse (Bandura, 1991). If we understand the experiences of sibling violence victims, parents can use this information to keep their children safe by intervening more quickly, as well as help design intervention programs that can be accessible to both children and adults who have been abused by their sibling, similar to the services that are designed to assist in child abuse cases (McDonald & Martinez, 2016).

The participants of this study provided valuable insight about how their experiences with childhood sibling violence has impacted them emotionally as adults, how they interpret and process violence, and how their home environment has permitted

such behaviors between siblings. The theoretical implication of this study is that sibling violence victims had learned to tolerate or accept violence and found themselves in similar situations with intimate partner violence relationships in adulthood, and unknowingly repeated the cycle of violence. Understanding their lived experiences can contribute to services that are designed to support them, to improve the outcomes for this population.

Conclusion

The purpose of this phenomenological study was to explore the effects of childhood sibling violence with adults who later experienced intimate partner violence. Exploring the participants' perceptions and lived experiences with childhood sibling violence and intimate partner violence in adulthood has provided valuable insight about the environmental forces that increase the likelihood for sibling violence to occur, the cyclical process of violence, an understanding of the various forms of sibling violence, psychological and behavioral outcomes after experiencing sibling violence, revictimization in their adult intimate partner violence relationships, and their perceptions of violence as an adult removed from their intimate partner violence relationships. Their testimonies may contribute to expanding the knowledge and the literature within the field, raise awareness in the general population and mental health professionals, and perhaps help create new or improve existing support services for childhood sibling violence and intimate partner violence survivors. Acknowledging the prevalence and psycho-behavioral consequences associated with sibling violence is critical to advocate for positive social change for children who have endured sibling violence and their

effected loved ones and individuals who have become revictimized in adulthood,

struggling to escape their intimate partner violence relationship.

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Appendix A: Interview Questions

1). Tell me about your experiences with childhood sibling violence.

2). How old were you when the violence between you and your sibling first began? When did it end?

3). How often did the violence occur between you and your sibling?

4). Did you alert the attention of your parents, friends, teachers, or other professionals about the violence?

5). Did you receive any support from adults such as intervention, or was there any accountability for your sibling?

6). How did the violence effect you in school?

7). What are your perceptions about sibling violence?

8). How did your experience with sibling violence effect you socially?

9). How did your experience with sibling violence effect you psychologically and physically?

10). How did your experience with sibling violence effect your intimate relationships?

11). Tell me about your experiences with intimate partner violence as an adult.

12). Have you been involved in more than one abusive intimate relationship?

13). How would you describe the abuse?

14). How has your intimate partner violence relationship(s) affected you socially? Are you able to relate to peers?

15). Do you think your experiences with sibling violence influences how you choose dating partners as an adult?

16). How has your experience with intimate partner violence affected you physically and psychologically?

17). What are your perceptions of intimate partner violence?

18). What programs if any, have you used for support and intervention? If you have, were the programs helpful?

19). Is there anything else you would like to share with me that could help me better understand your experiences with sibling violence and intimate partner violence?

Appendix B: Referrals to Intervention Services

Services are low cost and accepts most insurance (BlueCross BlueShield of Vermont,

CBA, Cigna, Medicare, MVP, Tricare, and Vermont Medicaid). Depending on the type

of insurance, there may be a small co-pay. Any type of Vermont state insurance should

cover all costs.

☐Howard Center Mental Health Services: Howard Center offers short-term and long-

term counseling for depression and anxiety. https://howardcenter.org/mental-health/

☐NFI Family Center: NFI Vermont provides therapeutic programs for individuals and

families, specializing in treatment for trauma, attachment disorders and mood disorders.

https://www.nfivermont.org/services/community-programs/family-center/

☐NFI Crossroads Intensive Outpatient Program: Three hours of treatment per day, 3-5

days per week that offers support counseling, coping skills training, and psychiatric

services for individuals seeking therapies designed to treat trauma-related symptoms.

https://www.nfivermont.org/services/community-programs/crossroads-intensive-

outpatient-program/

☐Vermont Steps to End Domestic Violence: Support groups for domestic violence

victims. Childcare is provided. Meetings are held every Tuesday 6:30pm-8:00pm. For

more information, visit https://www.stepsvt.org/support-group