

1-21-2026

Black Educated Women's Experience With Relationship Formation After Intimate Partner Violence

Jeannette Aris Thompson-Beckford
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Walden University

College of Psychology and Community Services

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Jeannette Thompson-Beckford

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Walden University
2026

Abstract

Black Educated Women's Experience With Relationship Formation After Intimate

Partner Violence

by

Jeannette Thompson-Beckford

MS, Walden University, 2024

MA, Indiana Wesleyan University, 2021

BS, College of Biblical Studies, 2019

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Psychology

Walden University

February 2026

Abstract

Black women experience intimate partner violence (IPV) at disproportionately high rates, yet most research has focused on those from lower socioeconomic backgrounds, overlooking how educated Black women navigate relationships after IPV. While extensive studies have examined the health consequences of IPV among Black women, less attention has been given to their experiences with intimacy, trust, and partner selection post-IPV. Additionally, existing research on relationship formation after IPV has largely centered on other racial groups, leaving the unique challenges faced by Black educated women underexplored. The purpose of this phenomenological study was to explore how Black, educated women describe their experiences of forming relationships after experiencing IPV. Betrayal trauma theory and Black feminist thought served as the theoretical foundation. Ten semi-structured interviews with Black college-educated women who experienced IPV provided the data, which were analyzed using interpretative phenomenological analysis. Results showed that Black educated women describe forming relationships after IPV as a reflective and non-linear process shaped by trauma, cultural expectations, and personal growth. Rebuilding trust was central, with many women adopting heightened vigilance or choosing singlehood to protect their emotional well-being. Participants emphasized the importance of mutual respect, friendship, and spiritual guidance in future relationships. These results can have implications for positive social change by fostering greater awareness, advocacy, and support for Black educated women, ultimately shaping policies and interventions that promote healing, empowerment, and healthier relationship outcomes.

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Dedication

This research study is dedicated to Black women who have experienced intimate partner violence (IPV), will unfortunately suffer the abuse, and have tragically lost their lives at the hands of their intimate partner's violent behavior. This dedication is extended to my dear friend, Michelle Keaton who lost her life at the hands of her child's father over two decades ago. The findings were sought that change would take place, the hope that lives are saved and restored from the abuse of the hands of those we love and trust. Also, this dedication is extended to my mother, Patricia Ann Thompson, who is no longer with us but has always believed in any of my life endeavors.

Acknowledgments

My initial acknowledgement would like to be placed with my Lord and Savior, Jesus Christ, unwavering faith in such a purpose is what kept me on this journey when I wanted to give up. My anchor was in the word of God, “O taste and see that the Lord is good: Blessed is the man (woman) that trusteth in him. Psalm 34:8. I would love to acknowledge all those that believed in this happening, the support and prayers solicited and encouragement when it seemed unbearable. I would like to thank my advisor, Jacqueline Cook-Jones, who was always available, professional, and helpful. I extend gratitude to my chair, Dr. Susana Verdinelli, committee member, Dr. Sally Zengaro, and faculty this entire educational journey. They never wavered in staying the course with offering their assistance, professionalism, expertise, and compassion. Last, though not least by any means, the sacrifice that both my husband, Fitzroy and son, Joshua encountered the duration of this journey acknowledges their love and patience that was unwavering will not go unnoticed.

A special thanks to each participant that became vulnerable in sharing their experience to contribute to such a needed topic. Their eagerness was felt where prayers of their continual healing will take place and their voices be heard.

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Chapter 1: Introduction to the Study

Introduction

Intimate partner violence (IPV) encompasses various forms of abuse—including emotional, verbal, psychological, physical, and sexual—committed by one partner against another (Centers for Disease Control and Prevention [CDC], 2023). The CDC (2023) reported that approximately 41% of women have experienced sexual violence, physical violence, or stalking by an intimate partner. Women from racial minority groups faced IPV at higher rates than their Caucasian counterparts, with contributing factors including patriarchal norms, religious influences, economic hardship, social stigma, discrimination, racism, limited engagement in health-seeking behaviors, restricted access to mental health services, and pervasive stereotypes (Gillum, 2019). While much of the research on IPV and Black women had focused on those from lower socioeconomic backgrounds, studies indicated that IPV remains a pressing issue among highly educated Black women as well (Hall et al., 2023; Lacey et al., 2021; Whitfield et al., 2021). Black women who experience IPV are also at greater risk for adverse health outcomes, including pregnancy complications, chronic illnesses, substance use disorders, and infectious diseases (Stubbs & Szoeki, 2022).

Extensive research had examined the consequences of IPV among Black women, particularly its impact on health, including increased risks of chronic illnesses, pregnancy complications, substance use, and infectious diseases (Stubbs & Szoeki, 2022). However, less attention had been given to how Black women form relationships after experiencing IPV. Studies suggested that survivors of IPV often emotionally detach as a self-protective

measure, which may lead them to avoid long-term relationships (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021) and refrain from marriage or cohabitation (St. Vil et al., 2018). The purpose of the study was to explore how Black educated women describe their experiences forming relationships after IPV. Results of the study had the potential to inform targeted interventions and support services for Black educated women after IPV, equipping mental health providers with insights to enhance awareness, psychoeducation, and treatment, ultimately fostering positive social change.

This chapter outlined the study's background, research problem, purpose, and research question. It presents the conceptual framework, explains the study's nature, and defines key terms. Additionally, it clarified critical assumptions, population boundaries, and study limitations, including potential biases and their mitigation. Finally, it highlighted contributions to the field and potential implications for positive social change.

Background

IPV is a global health crisis that has persisted for many years, affecting individuals across all genders, races, ethnicities, and socioeconomic statuses (SES) (CDC, 2023). While IPV is not exclusive to any one group, it disproportionately impacts women, particularly women of color. Black educated women, in particular, remain both underrepresented and underreported in IPV research. Rennison and Welchans (2000) highlight Black women, a vulnerable population facing numerous disparities, who experience IPV at high rates, often suffering severe mental and physical consequences, including loss of life (Powell Sears, 2021).

Religious and spiritual beliefs also play a role in IPV experiences. Black American women who strongly identify with religion, particularly those affiliated with the Black Church, often endure IPV for extended periods and in greater secrecy than those who do not practice religious beliefs (Davis et al., 2021). Nearly two-thirds of students attending historically Black colleges and universities (HBCUs) have encountered IPV (Barrick et al., 2013; Bremond et al., 2013; Hall et al., 2022). However, these students frequently interpret IPV through a cultural lens, sometimes viewing it as a justified consequence of certain behaviors. Many have been raised in environments where corporal punishment and physical discipline are normalized, leading to a perception that only severe physical violence constitutes IPV, while psychological, emotional, and verbal abuse may go unrecognized (Hall et al., 2022).

Black women from lower SES backgrounds experience IPV at even higher rates, with many cases going unreported due to factors such as fear of jeopardizing their financial stability and overall livelihood (Burse et al., 2022). Historically, cultural norms within Black families, including the emphasis on privacy and enduring adversity, have contributed to the perpetuation of IPV (Burse et al., 2022). Additionally, Haynes-Thoby et al. (2023) note that married Black women, who often face oppression both within and outside the home, are particularly vulnerable to the long-term consequences of IPV.

Another factor influencing IPV experiences among Black women is the gender-ratio imbalance between Black men and women. Due to various factors—including high incarceration rates, violent deaths, non-heterosexual sexual orientations, and increased interracial marriages—Black men are less available as potential partners (Adeyinka-

Skold, 2020). This scarcity often led Black women, including those who are highly educated, to remain in toxic and unhealthy relationships, increasing their exposure to IPV and its associated risks.

Problem Statement

Women from racial minority groups face IPV at higher rates than Caucasian women, with contributing factors including patriarchal norms, religious beliefs, poverty, social stigma, discrimination, racism, limited health-seeking behaviors, restricted access to mental health services, and cultural stereotypes (Gillum, 2019). Most research on IPV and Black women had focused on those from lower SES backgrounds; however, IPV remains a significant issue among more educated Black women as well (Hall et al., 2023; Lacey et al., 2021; Whitfield et al., 2021).

Black women who experience IPV are at higher risk for various health complications, including chronic diseases, pregnancy complications, substance abuse, and infectious diseases (Stubbs & Szoek, 2022). While extensive research had examined the health-related consequences of IPV among Black women, less attention had been given to how they experience relationship formation after experiencing IPV. Studies indicate that women who have experienced IPV often emotionally disconnect as a self-protective measure, leading them to avoid entering long-term relationships (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021) or engaging in marriage or cohabitation (St. Vil et al., 2018). However, research on relationship formation after IPV had primarily focused on other racial groups rather than exclusively on Black women (St. Vil et al., 2018; Tarzia, 2021).

For Black women, relationship formation would be further complicated by the issue of partner availability. They often face significant challenges in finding suitable partners, particularly when seeking to establish relationships within the same racial group (Harawa et al., 2014; Romano, 2018). The scarcity of available partners affects Black women across all socioeconomic backgrounds and poses additional risks, including increased engagement in non-exclusive relationships, reduced condom usage, and heightened susceptibility to sexually transmitted infections (Boyd et al., 2021). While some research has explored relationship formation following IPV (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021), little is known about how educated Black women specifically experience relationships after IPV.

Purpose of the Study

The purpose of the phenomenological study was to explore how Black educated women describe their experiences forming relationships after IPV. By exploring their lived experiences, the research aimed to uncover the emotional, psychological, and social factors that shape their approach to intimacy and trust after surviving IPV. The study employed semi-structured interviews with Black women aged 25 to 65 who hold a college degree and had previously experienced IPV. Initial participant recruitment was conducted via social media platforms, followed using snowball sampling. To be eligible, participants had to be free from IPV for at least 6 months prior to the interview.

Results of the study were expected to shed light on how cultural expectations, societal pressures, and personal histories shape Black educated women's decisions to engage in or avoid new relationships after IPV. The findings may also provide insight

into the barriers they face, including lingering trauma, fear of repeating past experiences, and challenges in finding suitable partners. By capturing these narratives, the research has the potential to inform mental health professionals, counselors, and support organizations, ensuring that interventions and resources are more attuned to the specific needs of Black educated women as they navigate post-IPV relationships.

Research Question

The following research question guided this study:

RQ: How do Black educated women describe their experiences forming relationships after IPV?

Conceptual Framework for the Study

The study employed a conceptual framework grounded in betrayal trauma theory (Freyd, 1996, 2009; Freyd & Birrell, 2013) and Black feminist thought (Hill Collins, 1990, 2000). By integrating these perspectives, the framework emphasized an intersectional lens through which betrayal experiences were examined. It acknowledged the unique challenges Black women face, highlighting the interplay of race, gender, and class in their experiences of betrayal. The approach recognized that betrayal trauma not only deepens personal psychological distress but also reinforces existing societal inequalities, further compounding its impact on Black women. Moreover, it underscored the necessity of addressing both the psychological consequences of betrayal and the systemic factors that contribute to their vulnerability.

Freyd's (1996) betrayal trauma theory provided a framework for understanding potential psychological impact of IPV. Betrayal trauma occurs when a trusted individual,

such as a parent, intimate partner, or institutional figure, inflicts harm, often leaving the victim unable to fully process the abuse (Gomez & Freyd, 2019). In intimate relationships, where trust is fundamental, IPV constitutes a profound violation, aligning with the betrayal trauma theory (St. Vil et al., 2021). Betrayal in relationships—whether through infidelity, abandonment, or emotional neglect—can lead to significant psychological distress, including post-traumatic stress disorder (PTSD), attachment disorders, and adjustment disorders (Lonergan et al., 2021).

St. Vil et al. (2021) emphasized the betrayal trauma theory as it relates to a lack of trust, leading to a distorted perception of what constitutes a healthy relationship. Among Black educated women, it is common to remain in cohabitating relationships for years while refusing to marry (Lloyd et al., 2021). Freyd et al. (2005) highlighted that survivors of IPV or betrayal trauma may associate love with experiencing abuse, leading them to perceive the absence of abuse as a sign of being “unloved” in future relationships (St. Vil et al., 2021). Betrayal trauma theory suggested that when an individual experiences betrayal from a trusted figure—such as a family member, friend, or intimate partner—the resulting trauma can be particularly profound. The study applied betrayal trauma theory to examine the erosion of trust within intimate partnerships when one partner becomes abusive, ultimately creating an unsafe relationship.

Hill Collins’s (1990, 2000) Black feminist thought provided insight into the historical oppression embedded in culture, shedding light on Black women’s experiences and their resilience. The theory emphasizes the intersection of race, class, and gender, forming what she terms the matrix of domination (Hill Collins, 2000). It also

encapsulated the social determinants that affect Black women culturally, economically, and environmentally. Centered on Black women in the United States, the theory sought to empower them by giving voice to their lived experiences.

Black women in the United States often strongly identify with religion and spirituality, particularly within the Black Church. Davis et al. (2021) emphasized that religious affiliation can contribute to some Black women enduring IPV for longer periods and in greater secrecy than those who do not practice religious beliefs. Among these women, more than one-third of IPV cases involve physical abuse. Additionally, Rennison and Welchans (2000) highlight that Black women, as a vulnerable population facing significant disparities, experience IPV in ways that deeply impact their mental and physical well-being, sometimes even leading to loss of life (Powell Sears, 2021).

Nature of the Study

The nature of the study was qualitative using a phenomenological research approach (Pietkiewicz & Smith, 2012; Smith & Nizza, 2022). Qualitative research differs from quantitative research in that it follows an inductive approach, focusing on developing a deeper understanding of events or phenomena (Queirós et al., 2017). The phenomenological study aligned well with qualitative research, as it enabled a thorough exploration of how Black educated women describe their experiences of forming relationships after IPV. A qualitative design was well-suited for the study as it facilitated a comprehensive and in-depth exploration of the phenomenon, especially given the limited existing research in this area. The approach was chosen because it aimed to understand social phenomena by examining individuals' lived experiences, their

emotional responses, and the meanings they ascribe to those experiences. Agazu et al. (2022) highlight that qualitative research prioritizes interpreting experiences from the participants' perspectives. In contrast, while quantitative research also seeks to understand social phenomena, it primarily focuses on measuring data, often collected through surveys to generate statistical insights (Lim, 2024).

Phenomenology is a qualitative research approach that seeks to understand the meaning individuals assign to their experiences. Researchers employing this method aim to explore how participants perceive, interpret, and navigate a particular phenomenon (Smith & Nizza, 2022; Pietkiewicz & Smith, 2012). To ensure trustworthiness, phenomenological researchers strive to manage biases, maintain neutrality, and acknowledge that their personal assumptions should not influence the study. The central objective was to gain an in-depth understanding of participants' lived experiences, with their voices highlighted through direct quotations, reflections, and detailed descriptions (Miller & Barrio Minton, 2016).

The approach was particularly well-suited for the study, as it prioritized understanding individuals' experiences through their own perspectives, offering deeper insight into their interpretations (Rudestam & Newton, 2015). Phenomenological research primarily relies on interviews as the main method of data collection. Although questions were designed to explore the specific phenomenon under investigation, the interview process remained flexible, allowing for the emergence of additional questions as participants reflect on and articulate how the phenomenon had shaped their lives (Rudestam & Newton, 2015).

The participants in the study were Black college-educated women between the ages of 25 and 65 who had experienced IPV, had been out of the abusive relationship for at least six months, and had engaged in some form of reflection or decision-making regarding relationship formation post-IPV. This was to include entering a new relationship, choosing to remain single, or reflecting on their feelings and perspectives about future relationships. These criteria were intentionally structured to ensure that participants align with the study's focus. By selecting individuals with shared demographic and experiential characteristics, the research aimed to gain rich, in-depth insights into how this specific population navigates forming relationships post-IPV. Additionally, the approach strengthened the study's ability to identify key themes related to the intersection of race, education, and IPV recovery. Convenience and snowball sampling methods were used for participant recruitment. The data collected was in the form of semi-structured interviews, posing open-ended questions with follow-up questions. An interview guide was used as the data collection instrument. The interview guide allowed for capturing concepts derived from the literature and the conceptual framework. Interpretative phenomenological analysis (IPA; Smith et al., 2022) was used to analyze participants' interviews.

Definitions

Abusive relationship: An abusive relationship is a dynamic and ongoing situation characterized by emotional, physical, and psychological harm. Rather than being a single, easily identifiable event, abuse is understood as a process that unfolds over time, often involving cycles of control, manipulation, fear, and emotional dependency (Storer et al.,

2021). Such relationships frequently create significant barriers for survivors, including financial hardship, housing instability, and, for immigrants, the threat of deportation. Additionally, cultural beliefs and traditional family roles may be compromised or diminished. Due to the perceived unavailability of partners, some women may enter into or remain in abusive relationships (Hall et al., 2022).

Assortative mating: According to Sarah Adeyinka-Skold (2020), Black women prefer to choose partners within their own race due to societal racism, barriers, and stigmas. This preference is driven by the desire for cultural understanding and shared experiences.

Betrayal trauma: It occurs when harm is inflicted by a trusted individual or institution, such as a caretaker, parent, spouse, or organization, resulting in a violation of trust (Freyd, 1996).

Betrayal trauma theory: This theory posits that when individuals are harmed by someone they depend on for survival—such as a caregiver, intimate partner, or trusted institution—they may unconsciously block awareness of the trauma in order to preserve the attachment necessary for their safety and well-being. Unlike traditional trauma responses centered on fear, betrayal trauma is rooted in the violation of trust, leading to dissociation, memory impairment, and unawareness as adaptive strategies to maintain critical social bonds despite the harm (Freyd, 1996).

Black feminist thought: This theory, centered on Black women in the United States, examines social injustice and oppression—such as race, class, gender, and sexuality—with the goal of promoting both empowerment and social justice (Hill Collins,

2000). Black feminist thought enhances Black women's empowerment and awareness of the oppression they face, including race, gender, and class, fostering self-awareness and agency for social change (Hill Collins, 1990). It comprises three levels of domination: personal biography, group/community, and systemic social institutions, all varied among Black women (Hill Collins, 1990). *Personal biography* refers to individual lived experiences shaped by race, gender, and class. *Group/community* involves shared cultural and collective experiences among Black women. *Systemic social institutions* encompass broader structures like education, media, and law that perpetuate inequality and oppression.

Domestic abuse/partner abuse: A pattern of abusive behaviors, including emotional, physical, psychological, or sexual acts, perpetrated by one partner against another in current or former intimate relationships (Gupta, 2023).

IPV: According to the Centers for Disease Control and Prevention (2020), IPV manifests as physical, sexual, emotional, or mental violence against women worldwide (Pachner et al., 2022).

Romantic relationship: A romantic relationship involves healthy emotional and intimate exchanges characterized by affection, care, empowerment, and acceptance (Collins et al., 2009).

Assumptions

Some assumptions must be accounted for to uphold the study's integrity. Several philosophical assumptions underline the choice of qualitative inquiry and were particularly relevant to the research. These assumptions include ontology (the nature of

reality) and axiology (the role of values in research; Creswell & Poth, 2017).

Ontologically, the study operated on the assumption that multiple realities exist, meaning that participants offered diverse and unique perspectives on their experiences with IPV and relationship formation. It was assumed that college-educated women who had experienced IPV held varying views on forming new relationships, shaped by their personal histories, cultural backgrounds, and emotional resilience. Some had approached new relationships with caution or skepticism, while others had exhibited a renewed sense of agency and empowerment. Given the multiplicity of realities, it was also assumed that participants' perspectives differed significantly based on their individual experiences of IPV and their subsequent approaches to relationship formation.

Additionally, it was assumed that participants provided honest and authentic accounts of their experiences rather than deliberately fabricating or distorting information. This was a fundamental assumption in qualitative research, as the credibility of the study depended largely on the accuracy and sincerity of participants' narratives. However, given the sensitive nature of IPV and relationship formation, it was important to acknowledge that participants may withhold information, alter details, or unintentionally misrepresent aspects of their experiences due to discomfort, trauma, or social desirability. To address this, the study incorporated strategies to enhance trust and authenticity, such as building rapport during interviews, ensuring confidentiality, and creating a nonjudgmental environment. In addition, member checking was used to strengthen the study's credibility—participants were invited to review and verify their transcribed responses to ensure their perspectives were accurately represented. These

efforts aimed to support transparency and minimize the risk of misinterpretation or incomplete disclosure.

Axiologically, the role of values in research must be acknowledged (Creswell & Poth, 2017). As the primary researcher, I recognized that my own values, perspectives, and potential biases would influence the research process. To mitigate this, I implemented reflexivity strategies and maintain a neutral and nonjudgmental stance throughout data collection and analysis. The trustworthiness section of the study outlined the steps taken to minimize researcher bias and ensure that participants' narratives remained the central focus. Furthermore, it was assumed that participants may experience varying levels of discomfort, hesitation, or even shame when discussing their past abusive relationships and their approach to forming new ones. To address this, I fostered a safe and supportive interview environment by assuring participants that their experiences would be treated with confidentiality, empathy, and respect. In the event that a participant experienced discomfort during or after the interview, appropriate support resources were outlined and made available through the consent form. These assumptions were fundamental to maintaining the integrity of the study. Recognizing the existence of multiple perspectives and remaining aware of personal values were essential to conducting meaningful and unbiased research.

Scope and Delimitations

The research focused on understanding how Black educated women describe their experiences with forming relationships after IPV. Participants for the study were Black college-educated women between the ages of 25 and 65 who had experienced IPV and

had been out of those abusive relationships for a minimum of 6 months. The specific criteria for participation were: (a) identifying as Black women, (b) holding a college degree, (c) aged between 25 and 65 years, (d) not currently in an abusive relationship, with a minimum of six months since the end of such a relationship, and (e) having engaged in some form of reflection or decision-making regarding relationship formation after experiencing IPV, which may include entering a new relationship, choosing to remain single, or reflecting on feelings and perspectives about future relationships.

These criteria were intentionally selected to align with the study's purpose and to ensure the collection of rich, reflective data. The decision to focus on women aged 25 and older—rather than starting at age 18—recognizes that it takes, at least, 2 to 4 years to obtain a college degree. The requirement of being out of the abusive relationship for at least six months was established to ensure participants have had adequate time and emotional distance from the abusive situation. This buffer allowed for greater psychological safety during the interview process and increased the likelihood that participants had begun some form of emotional or cognitive processing regarding their relational experiences. While the 6-month period is somewhat arbitrary, it is commonly used in trauma-related research to distinguish between immediate crisis and post-crisis reflection (Hunt et al., 2018).

The inclusion of college-educated women stemmed from the identified gap in the literature. Most IPV research involving Black women had centered on those from lower socioeconomic backgrounds, leaving the experiences of more educated Black women underexplored. By focusing on college-educated participants, the study aimed to shed

light on how IPV and relationship formation are experienced by a group often overlooked in both academic literature and support services, despite facing unique cultural, societal, and interpersonal pressures.

The transferability of the study may be limited due to its specific participant criteria and contextual focus. The study was designed to explore the lived experiences of Black college-educated women who had experienced IPV and had been out of these relationships for at least six months. Because the findings were shaped by the unique socio-cultural, educational, and experiential backgrounds of this population, they may not be directly transferable to other groups, such as women from different racial, educational, or socioeconomic backgrounds, or those still in abusive relationships.

However, transferability in qualitative research was not about broad generalization but rather about providing rich, detailed descriptions that allow readers to determine whether the findings are applicable to similar contexts (Lincoln & Guba, 1985). The study's thick description of participants' experiences enhanced transferability by offering in-depth insights into how Black college-educated women navigate relationship formation post-IPV. Researchers or practitioners working with populations that share comparable social and cultural dynamics may find the findings relevant to their work. Ultimately, the study results may contribute to broader discussions on IPV recovery, relationship dynamics, and intersectionality, providing a foundation for future research in related but distinct populations.

Limitations

Potential limitations in the study may arise from participants' reluctance to share their experiences, particularly when speaking with someone outside their cultural background or due to concerns about potential repercussions from former partners. Several factors could influence participants' responses, such as their current level of emotional resolution and healing, or whether they remain in contact with their previous partner. Continued involvement with a former partner—such as through shared parental responsibilities—may complicate their emotional boundaries and influence the narratives they share.

These are limitations that are inherent to the qualitative nature of the study and its phenomenological design. Because the approach seeks to understand the depth and meaning of participants' lived experiences, findings would not be generalizable to the broader population. Instead, the focus was on capturing rich, individual perspectives. As such, the insights gained would be context-specific and shaped by the unique cultural, emotional, and relational positions of each participant.

Another potential limitation involved the presence of bias, which may influence the study's outcomes. My professional background as a behavioral health therapist could introduce countertransference, while participant transference may occur—particularly due to my shared cultural background and lived experience with the phenomenon under study. To mitigate these potential biases, I clearly defined my role to participants and intentionally maintained a research-focused approach, ensuring that the study was

conducted within a scholarly framework rather than through a therapeutic or counseling lens.

Additionally, while I had personal experience with IPV, it is important to acknowledge that the experience occurred over 30 years ago, and the researcher has been in a healthy marriage for over 21 years. To maintain neutrality and ethical integrity, I disclosed this background to the committee and implement strategies to prevent personal experiences from influencing data collection and analysis.

Significance

The study was significant in that examining how Black educated women describe how they navigate forming relationships after experiencing IPV can inform targeted interventions and support services. Understanding the specific needs and experiences of this group enables policymakers, healthcare providers, and support organizations to develop more tailored and effective strategies to assist them in rebuilding their lives and forming healthy relationships (Gillium, 2019).

The findings of the study could help mental health providers better understand the challenges survivors of IPV face in therapy, enabling them to raise awareness, provide psychoeducation, deliver more effective treatment, and support clients in their recovery. Additionally, working professionally with diverse populations affected by IPV further strengthens providers' ability to offer tailored support, enhance treatment approaches, and guide potential clients toward healing and resilience. Moreover, the study is expected to contribute to positive social change by equipping mental health professionals with a

deeper understanding of these survivors' experiences, ultimately improving therapeutic practices and support systems.

Beyond its contributions to mental health practice, the study holds broader societal implications by addressing the intersection of race, education, and IPV recovery. Black educated women often navigate unique challenges in their personal and professional lives, and their experiences with IPV could compound these complexities. By examining how they approach relationship formation after IPV, the research would shed light on the cultural, economic, and psychological factors that influence their decision-making. Additionally, the findings can inform culturally responsive policies and community-based initiatives aimed at fostering supportive environments for Black educated women in their healing journeys. Increased awareness and tailored interventions could help dismantle stigmas surrounding IPV, encourage open conversations within communities, and empower survivors to access the resources they need to rebuild their lives and establish healthy, fulfilling relationships.

Summary

The chapter provided an overview of the study, which explored how Black educated women described their experiences with forming relationships after IPV. It established the prevalence of IPV among women, particularly those from racial minority groups, and highlighted the unique challenges Black women face due to systemic barriers, cultural norms, and social stigmas. While much of the existing research focuses on IPV among women from lower socioeconomic backgrounds, the study aimed to address the gap in literature regarding highly educated Black women and their post-IPV

relationship experiences. The chapter also discussed the potential health consequences of IPV, including chronic illnesses, mental health struggles, and relational challenges, underscoring the importance of studying this issue in depth.

The chapter outlined the research problem, emphasizing the limited attention given to how Black educated women describe their experiences with forming relationships after experiencing IPV. It introduced the study's conceptual framework, which integrated betrayal trauma theory and Black feminist thought to examine the psychological and societal factors shaping survivors' experiences. The phenomenological research design was presented as the most appropriate approach to capturing the lived experiences of participants. The study used semi-structured interviews with Black educated women aged 25 to 65 who had been free from IPV for at least six months. The methodology was designed to ensure a comprehensive and culturally relevant exploration of their perspectives on intimacy, trust, and partner selection following IPV.

Finally, the chapter discussed the study's significance, highlighting its contributions to mental health practice, policy, and social change. By providing insights into the relational challenges faced by Black educated women post-IPV, the research could help mental health providers develop targeted interventions, improve psychoeducation, and enhance treatment approaches. Additionally, the findings had broader societal implications, informing culturally responsive support systems and dismantling stigmas associated with IPV recovery. The chapter concluded by addressing key assumptions, scope, delimitations, and potential limitations, ensuring transparency in the study's design and execution.

Chapter 2 presents the literature review for the study, including the search strategy employed and the conceptual framework that guided the research. The conceptual framework will be discussed in detail and will incorporate both betrayal trauma theory and Black feminist thought to help interpret the study's findings. Key topics and concepts addressed in Chapter 2 include IPV among African American women in the United States; the impact of IPV on Black women's health and well-being; romantic relationships among college-educated Black women; relationship formation after IPV; betrayal trauma and its role in shaping barriers to new relationships; the impact of partner scarcity on Black educated women; navigating new intimate relationships post-IPV; and the process of transitioning from new relationships to personal healing.

Chapter 2: Literature Review

Introduction

IPV is a global public health issue that affects individuals across all races, ethnicities, and SES. It is often a recurring traumatic experience within intimate relationships, manifesting in psychological, physiological, and sexual forms (Ko & Park, 2020). IPV has also been a driving force for social change, as efforts to address this widespread issue have led to increased awareness and intervention strategies across diverse populations, including various racial, ethnic, cultural, gender, and socioeconomic groups. The existing literature underscored the complex interplay between betrayal trauma, cultural identity, and IPV among Black educated women. Freyd's betrayal trauma theory (1996, 2020) provides a foundation for understanding how victims process trauma when it involves a trusted figure, highlighting dissociation and memory impairment as protective mechanisms. The theory was particularly relevant to IPV survivors who remain in abusive relationships due to emotional dependency, social pressure, or systemic barriers.

The literature further revealed that Black women's experiences with IPV were uniquely shaped by societal and cultural norms, including the strong Black woman stereotype, normative privacy, and religious influences, which often discourage them from seeking help (Hill Collins, 2000; Morrow, 2024). Studies had indicated that Black women, particularly those who are educated, face additional challenges in forming new relationships due to partner scarcity, gender ratio imbalances, and deeply ingrained beliefs about resilience and self-sacrifice (Adeyinka-Skold, 2020; Boyd et al., 2021).

Research also highlighted the long-term psychological and relational consequences of IPV, including difficulty establishing new intimate relationships, compromised self-worth, and the need for boundary renegotiation (Czerny et al., 2018; St. Vil et al., 2021). Many survivors enter new relationships still burdened by fear, mistrust, and unresolved trauma, which often results in patterns of avoidance, hypervigilance, or acceptance of unhealthy dynamics. Despite leaving abusive relationships, many survivors remain psychologically entrapped by their past experiences, necessitating targeted interventions that promote self-reclamation, boundary-setting, and emotional healing.

Black women who experience IPV face elevated risks for a range of health complications, including chronic illness, pregnancy complications, substance use, and infectious diseases (Stubbs & Szoeki, 2022). Although much of the existing research focuses on the health-related consequences of IPV, there is limited understanding of how Black women navigate relationship formation after such experiences. Current studies on relationship formation after IPV had largely centered on other racial groups, leaving a gap in the literature regarding the specific experiences of Black women (St. Vil et al., 2018; Tarzia, 2021). The study sought to bridge the gap in the literature by exploring how Black educated women describe their experiences with forming relationships post-IPV. Therefore, the purpose of the phenomenological study was to explore how Black educated women describe their experiences forming relationships after IPV. By exploring their lived experiences, the research aimed to uncover the emotional, psychological, and social factors that shape their approach to intimacy and trust after surviving IPV.

In this chapter, the literature review search strategy that was used to examine the existing literature was introduced followed by the conceptual framework used in the study. Finally, a synopsis of the current literature related to the intersection of Black culture and IPV, with a particular focus on the unique barriers, stigmatization, and cultural disparities faced by Black women. It also examined the consequences of IPV—such as violence, fear, mental health challenges, substance abuse, and betrayal—before analyzing how Black educated women describe their experiences with forming relationships after IPV.

Literature Search Strategy

I used various search engines to gather literature relevant to the identified research topic. The sources retrieved were aligned with the focus of the study and provided valuable support for the research. The literature search strategy focused on research related to Black women who experience IPV and domestic abuse, with a particular emphasis on those who are college-educated. My search strategy involved using Walden's library search engine to explore various databases, including EBSCO, PsycINFO, PsycArticles, CINAHL, JSTOR, Social Work Abstracts, and Dissertations & Theses. Additionally, I used Google Scholar to supplement my search. The search focused on peer-reviewed articles, prioritizing the most recent studies from the past 5 to 10 years. The search strategy incorporated multiple approaches using Boolean operators (e.g., AND, OR), resulting in the following key terms: *women, OR black woman OR African American OR U.S. born women; intimate partner violence OR domestic violence OR partner abuse; educated, working class, college educated; romantic relationship,*

dating, betrayal trauma, relationship formation, assortative mating, barriers to dating after domestic abuse, IPV, betrayal trauma, Black feminist thought, and Black feminist theory. Over 150 articles and 18 books were identified. Narrowing the search allowed the focus to center on relationships, IPV, and the barriers to forming new intimate relationships. To ensure alignment with the study's focus, I reviewed abstracts and full texts to determine the relevance of each source. Articles were evaluated based on their emphasis on Black women's post-IPV experiences, particularly among those who are college-educated. Through this screening process, I narrowed the selection to 68 articles and 14 books that directly supported the research questions and conceptual framework. This targeted approach allowed for a literature review grounded in the most relevant and current scholarship addressing the intersection of IPV, identity, and relationship formation among educated Black women.

Conceptual Framework

The study employed a conceptual framework grounded in betrayal trauma theory (Freyd, 1996, 2020; Freyd & Birrell, 2013) and Black feminist thought (Hill Collins, 1990, 2000). The conceptual framework integrated Black feminist thought and betrayal trauma theory, offering an intersectional perspective on betrayal experiences. It acknowledged the unique challenges Black women face by considering the interconnected influences of race, gender, and class. The framework highlighted how betrayal trauma could intensify existing societal inequalities, further compounding its impact on Black women. It emphasized the need to address both the psychological effects of betrayal and the systemic factors that contribute to their vulnerability.

Betrayal Trauma Theory

Jennifer J. Freyd (2009) introduced betrayal trauma theory, which explains how individuals process and remember traumatic experiences, particularly when the perpetrator is someone they depend on for survival, such as a caregiver or close authority figure. Betrayal trauma theory explained how trauma affects memory and awareness when it is inflicted by someone the victim depends on for survival, trust, or care (Freyd, 1996). The core concept of the theory was that the closer the relationship between the victim and the perpetrator, the more likely it was that the trauma will be minimized, forgotten, or dissociated to maintain that essential attachment. This adaptive unawareness serves a survival function: if recognizing the betrayal would threaten the individual's safety, emotional connection, or access to care, the mind may block or distort that awareness.

Although the theory was originally developed to explain childhood abuse, it is increasingly applied to adult experiences of interpersonal trauma, particularly IPV. In IPV situations, especially when there is emotional or financial dependence, betrayal trauma could occur because the abuser was not only a source of harm but also someone the victim had emotionally invested in and may rely on for basic needs or emotional support. This creates a conflict between self-protection and the need for connection, which may result in memory fragmentation, denial, or emotional disconnection from the abuse.

In the context of the study, betrayal trauma theory offered a valuable lens to understand how college-educated Black women experience and process IPV. Despite

their educational attainment, these women may still be deeply affected by societal expectations, partner scarcity, and the emotional bonds that make leaving or fully acknowledging abuse difficult. As a result, some participants would describe ongoing struggles with trust, dissociation, or self-doubt in forming new relationships. Applying betrayal trauma theory allowed the study to explore how these women navigate the tension between attachment needs and self-preservation in the aftermath of IPV, particularly in their reflections on relationship formation, emotional vulnerability, and healing.

Freyd distinguished between betrayal trauma—a form of trauma that involves a profound violation of trust—and betrayal trauma theory, which explores how the mind adapts to such experiences by suppressing awareness to maintain necessary social bonds (Freyd & Birrell, 2013). Freyd traced the origins of the concept to her early research, where she theorized that detecting betrayal is an evolved survival mechanism. However, when a victim is dependent on the perpetrator (e.g., a child and a caregiver), acknowledging the betrayal could threaten the relationship, making it necessary for the mind to suppress awareness. This dissociation served as a protective mechanism, allowing the victim to maintain attachment while minimizing conscious distress. Freyd discussed how this process contributes to memory repression, dissociative symptoms, and psychological distress, distinguishing betrayal trauma from fear-based trauma. Freyd underscores the broader implications of betrayal trauma in contexts beyond child abuse, including domestic violence, workplace harassment, and systemic oppression. (Gomez & Freyd, 2019). The research suggested that the severity of psychological harm is often

linked to the level of betrayal, rather than just the degree of physical or emotional abuse experienced.

Freyd reviewed empirical studies supporting betrayal trauma theory, highlighting research that demonstrated how victims of caregiver-perpetrated abuse show higher rates of dissociation and impaired memory for traumatic events compared to victims of non-caregiver abuse. Freyd also introduced the concepts of betrayal blindness—the tendency to remain unaware of betrayal to preserve relationships—and institutional betrayal, which occurs when organizations fail to protect or even actively harm victims of abuse. Freyd developed this theory based on extensive research demonstrating the link between betrayal, dissociation, and memory impairment. Chu and Dill (1990) found that childhood abuse by family members was significantly associated with dissociative symptoms, supporting Freyd’s argument that victims may suppress awareness of trauma to maintain attachment to caregivers. Freyd (1996) further proposed that this psychological adaptation makes traumatic experiences less accessible to conscious awareness. Empirical studies by Freyd et al. (2001) confirmed that individuals abused by caregivers reported greater memory impairment than those abused by non-caregivers. Additionally, DePrince (2001) showed that self-reported betrayal was a stronger predictor of PTSD and dissociation than fear alone. Research also highlights the broader health consequences of betrayal trauma, with Freyd et al. (2005) linking it to both physical and mental health issues. Furthermore, DePrince and Freyd (2002) found that women are more likely than men to experience betrayal trauma, potentially contributing to gender differences in trauma-related outcomes.

In healthy intimate relationships, a significant other is expected to be a source of trust and security. However, when one partner experiences abuse, mistrust arises, exemplifying betrayal trauma theory (St. Vil et al., 2021). According to Lonergan et al. (2021), betrayal within romantic relationships constitutes a form of trauma, often manifesting through infidelity or abandonment, particularly during periods of relationship stress. These experiences can lead to feelings of instability, insecurity, and a lack of safety and love. Lonergan et al. (2021) further explained that such feelings contribute to trauma-related conditions, including PTSD, attachment disorders, and adjustment disorders.

Betrayal trauma occurs in relationships where trust is fundamental and one individual is expected to protect the other. While commonly associated with intimate partners, betrayal trauma also extends to relationships involving children, institutions, and broader societal structures. Recent research has explored betrayal trauma through a cultural lens, particularly regarding Black women and girls. Gomez (2023) emphasized the concept of cultural betrayal, highlighting violence within the Black community as a form of internalized harm among marginalized groups.

Black Feminist Thought

Patricia Hill Collins, an esteemed Black feminist scholar, introduced Black feminist thought in her 1990 work, providing a theoretical framework that articulates the lived experiences of Black women through the lens of race, gender, and class oppression. Hill Collins explores how educated Black women navigate social injustices, including racism, sexism, and economic inequality, within the matrix of domination (Hill Collins,

2000). Central to Black feminist thought are three levels of domination: personal biography, group/community, and systemic social institutions, though these experiences vary among Black women (Hill Collins, 1990). The theory amplifies the voices of both intellectual and everyday Black women in the United States, emphasizing empowerment through the recognition of their lived realities. Hill Collins conceptualizes both an objective and subjective consciousness, arguing that Black women develop a self-awareness that fosters liberation and a deeper understanding of systemic change (Hill Collins, 2000). Intellectuals play a critical role in articulating these struggles, helping Black women cultivate a collective consciousness of freedom and resistance. At its core, Black feminist thought seeks to empower Black women and contribute to broader social justice efforts (Hill Collins, 2000).

Hill Collins (2000) identified six distinguishing features that define Black feminist thought: self-definition, self-valuation, intersectional analysis, social transformation, everyday experiences, and critique of institutions. These features shape this critical framework and center the lived experiences of Black women. At its core is the principle of self-definition, which emphasizes Black women's right to define their own identities and realities, countering controlling images and stereotypes imposed by dominant groups. Closely linked is self-valuation, the affirmation of Black women's cultural knowledge, values, and expressions, challenging societal narratives that devalue their contributions and identities. Black feminist thought is also grounded in intersectional analysis, recognizing that the interconnected nature of racism, sexism, classism, and other forms of oppression must be understood as overlapping forces

shaping Black women's lives. Beyond theory, this body of knowledge is rooted in social transformation—it is a politicized project aimed at dismantling oppression and promoting equity and justice for marginalized communities. Central to this perspective is the value placed on everyday experiences; Black women's daily realities are seen as valid and vital sources of knowledge, standing in contrast to traditional academic approaches that often privilege elite or detached perspectives. Finally, Black feminist thought includes a critical analysis of institutions, interrogating how systems like education, healthcare, and media reinforce structural inequality and calling for institutional change that reflects the complexity of Black women's experiences. Together, these features form a powerful, dynamic framework for understanding and challenging the multifaceted nature of Black women's oppression and resilience. However, many Black women lack access to these elements when experiencing IPV. Within the context of IPV, oppression manifests uniquely for Black women due to deeply ingrained stereotypes. Hill Collins (1999) argues that violence serves as both a mechanism of power and social control over Black women (Morrow, 2024).

Help-seeking behaviors among survivors depend on the availability of support and resources (Goodson & Hayes, 2018; Stork, 2008; Waller et al., 2022). However, Black women experiencing IPV are often denied adequate support and are expected to endure hardship with resilience. Hill Collins (2002) asserted that harmful societal images of Black women contribute to the barriers they face in receiving assistance, further perpetuating oppression, exploitation, and violence (Waller et al., 2022). Additionally, Hill Collins (2004) highlighted how the strong Black woman stereotype discourages

many Black women from seeking help, fearing they will be perceived as weak (Monterrosa, 2021).

Black feminist thought was well-suited for the study, as it provided a framework for understanding the challenges Black women face, the stigma they endure, and their continuous struggle for empowerment. The theory also offered insight for helping professionals to better understand IPV survivors from a cultural and social perspective. Black women experience oppression both externally and internally, often shaped by Eurocentric gender ideologies that undermine self-confidence and self-worth (Hill Collins, 1990). These internalized beliefs contribute to the normalization of abuse within the Black community, as cultural narratives frame IPV as a private or tolerable issue. Morrow (2024) emphasizes that many Black women remain in abusive relationships due to financial oppression and a lack of resources. Bent-Goodley (2004) further suggested that Black women are often reluctant to seek help, as reliance on the welfare system may increase the risk of losing custody of their children (Morrow, 2024).

Hill Collins (2000) argued that empowerment begins when Black women critically engage with their everyday lives and consciously enact change. The study would explore how educated Black women navigate race and gender disparities while sharing their lived experiences. Black feminist thought would be instrumental in analyzing the systemic oppression Black women face, the cultural beliefs that shape their experiences, and the stigma within the Black community. Black women's tolerance for abuse is deeply rooted in cultural identity. Smith (2016) suggested that many Black women perceive abuse as a common experience, leading to underreporting (Powell Sears,

2021). Additionally, spirituality plays a significant role in shaping their responses to IPV. Boyd-Franklin (2010) argued that because many Black women believe in supernatural problem-solving, they often remain in abusive relationships without disclosing their experiences (Powell Sears, 2021). The cultural norm of normative privacy, derived from traditional African beliefs, also reinforces secrecy, making it less likely for Black women to seek external support (Belgrave & Allison, 2006; Powell Sears, 2021). Stigmatization further contributed to the silence surrounding IPV, as many Black women fear judgment and marginalization. As an oppressed group, Black women exist at the intersection of race, gender, and class disparities, facing systemic barriers at the societal, institutional, and legal levels. Even among educated Black women, these challenges persist, underscoring the need for a deeper understanding of IPV within this population.

Literature Review Related to Key Concepts

The study focused on how Black educated women describe their experiences with forming relationships following IPV. The literature review was organized to first examine Black culture and IPV, with a particular focus on Black women, their barriers, stigmatization, and cultural disparities. It then explored the consequences of IPV, including violence, fear, mental health challenges, substance abuse, and betrayal. The review concluded with an analysis of how Black educated women navigate relationship formation after experiencing IPV.

IPV Among African American Women in the United States

Some U.S.-born women are likely to experience IPV during their lifetime. According to the CDC (2013), one in three women will face some form of IPV (Powell

Sears, 2021). Among Black women, more than a third of IPV cases involve physical abuse. As a vulnerable population, Black women face significant disparities that impact their mental and physical well-being, with some IPV cases even resulting in loss of life (Rennison & Welchans, 2000; Powell Sears, 2021).

Religious and cultural factors played a critical role in how Black American women experience and respond to IPV. Davis et al. (2021) noted that Black women who strongly identify with religion, spirituality, and the Black church often endure IPV longer and in greater secrecy compared to those who do not practice religious beliefs. Additionally, research by Barrick et al. (2013) and Bremond et al. (2013) indicated that nearly two-thirds of educated students attending HBCUs have experienced IPV (Hall et al., 2022). However, these students frequently interpret IPV through a cultural lens in which physical punishment is viewed as an acceptable consequence of behavior that warranted discipline. Many of these students were raised in environments where corporal punishment and physical discipline were normalized, shaping their perceptions of IPV. As a result, psychological, emotional, and verbal abuse were often not recognized as violence (Hall et al., 2022). Despite their education, some Black women do not perceive IPV through a societal framework but rather through deeply ingrained cultural beliefs. For those raised to accept corporal punishment as a deserved response to inappropriate behavior, IPV may not be seen as an act of violence unless it is both severe and physical (Hall et al., 2023). These core beliefs influenced whether individuals acknowledge IPV as abuse or dismiss it as a normalized aspect of relationships. Cauffman et al. (2000) suggested that many college students exposed to abuse were subjected to it long before

their college years, leading to a desensitized and reciprocal acceptance of IPV as part of their lived experience (Hall et al., 2023).

Black women born and residing in the United States experience high rates of intimate IPV. Many who encounter domestic abuse may either accept it as a normalized aspect of their lives, downplay its severity if it is not physical, or remain silent due to cultural norms surrounding privacy. Within the Black community, the notion that “what happens in this house stays in this house” reinforces a culture of silence around abuse. When a Black woman does speak up, her disclosure is often confined to close family, friends, or the church. Many victims seek support from spiritual leaders such as clergy, ministers, or pastors, who provide comfort and guidance. However, these religious figures often lack the professional expertise necessary to offer adequate intervention (Shaw et al., 2022).

Beyond cultural and religious factors, the gender-ratio imbalance between Black men and women further influences why some Black women, even those who are highly educated, remain in toxic and unhealthy relationships, often subjecting themselves to risky situations. The availability of suitable partners, particularly for educated Black women, poses a significant challenge. Boyd et al. (2021) found that Black women are disproportionately affected by gender ratio disparities, limiting their opportunities to form intimate relationships with Black men. This issue is even more pronounced among Black women who are both educationally and economically advantaged. The scarcity of Black men is linked to factors such as high incarceration rates, premature death, substance abuse, and life-threatening illnesses (Boyd et al., 2021). Additionally, Adeyinka-Skold

(2020) found that the limited availability of Black men has contributed to shifts in sexual preferences, increased openness to interracial relationships, and alternative partnership arrangements. However, many Black women prefer to date within their race due to shared experiences with societal racism, barriers, and stigmatization, and they are often perceived as less desirable by men outside of their racial group (Adeyinka-Skold, 2020).

For Black women pursuing higher education, finding partners who match their educational and SES has become increasingly difficult. While college-educated Black women often move to areas that align with their socioeconomic standing, Black men tend to reside in lower-income urban areas, leading to a geographical and social disconnect (Adeyinka-Skold, 2020). The gender-ratio imbalance is further exacerbated as more Black women return to college to further their education, creating a widening gap between Black women and potential partners within their own race. Assortative mating—where individuals seek partners with similar educational and financial backgrounds—presents an additional challenge, as educated Black women often marry Black men who earn less and have lower levels of education (Choi & Denice, 2023). The limited availability of Black men means that many Black women either choose to cohabitate or remain single (Choi & Denice, 2023).

Despite these barriers, Black educated women often prefer to form relationships with partners who share their racial identity, SES, educational background, and career aspirations. However, these preferences are met with significant challenges, including a limited dating pool and structural inequalities that continue to shape their relationship dynamics (Adeyinka-Skold, 2020). As a result, relationship formation among Black

educated women is influenced by the need to find partners who align with their values, educational level, and economic standing while navigating the complexities of race and social structures.

The Impact of IPV on Black Women's Health and Well-Being

According to the CDC (2017), IPV is a global public health crisis that affects individuals who are currently or were previously involved in intimate relationships. IPV manifests in various forms, including physical, sexual, psychological, and emotional abuse (St. Vil et al., 2021). Armstrong and colleagues emphasize that IPV has not only devastated the lives of its victims but has also contributed to fatalities among those subjected to intimate abuse. Within the Black community, particularly among those of lower SES, IPV occurs at disproportionately higher rates and frequently goes unreported due to multiple contributing factors, including fear of its impact on one's livelihood (Burse et al., 2022).

Black women in abusive relationships often remain due to fear of retaliation and further physical harm. The consequences of IPV are frequently misinterpreted, with survivors being viewed as instigators rather than victims (Finfgeld-Connett, 2015). Many victims endure abuse in an effort to maintain safety and avoid retribution. This fear is exacerbated by a lack of external support from family, law enforcement, and the child welfare system. Within Black communities, family members often avoid intervening in IPV situations, fearing disloyalty to either party, which allows the cycle of abuse to persist. Cultural beliefs, spirituality, and norms that emphasize family unity and secrecy further contribute to the silencing of victims. Black women who seek help risk being

blamed for disrupting their families, despite facing continued abuse alongside their children (Burse et al., 2022). Historically, IPV against Black women has been perpetuated by cultural norms rooted in normative privacy and broader cultural disparities that limit external intervention.

Haynes-Thoby et al. (2023) highlighted that married Black women, who experience oppression both inside and outside the home, are particularly vulnerable to the lasting effects of IPV. Many survivors develop mental health conditions such as posttraumatic stress disorder (PTSD), depression, and anxiety, which in severe cases may result in death. To cope with the trauma, some survivors turn to recreational drug use, often engaging in substance use with their abusers as a means of numbing the effects of violence (Finfgeld-Connett, 2015). Over time, this coping mechanism may lead to dependency and substance abuse, further exacerbating their mental health struggles. IPV survivors are at heightened risk for PTSD, anxiety, and depression, particularly when psychological abuse is involved (Forth et al., 2022; Gutner et al., 2006; Spencer et al., 2019; Temple et al., 2007).

Victims of IPV are exposed to both immediate and long-term trauma resulting from violence. While some effects may appear temporary, IPV often leads to chronic health disparities affecting mental, emotional, and physical well-being (Klest et al., 2019). Among the health risks associated with IPV is the high prevalence of sexually transmitted infections (STIs) and low condom use, largely influenced by the gender imbalance within Black communities (Boyd et al., 2021). Hennekens et al. (2013) attributed this imbalance to factors such as high incarceration rates among Black men,

exposure to violent deaths, and disparities related to conditions such as human immunodeficiency virus (HIV/AIDS) and substance use disorders (Boyd et al., 2021).

Another critical health risk within IPV dynamics is reproductive coercion (RC). RC occurs even in relationships absent of physical violence, where a partner forces unprotected sex to achieve pregnancy against the woman's wishes (Basile et al., 2021; Miller et al., 2010, 2014). This form of abuse is a method of control that not only strips autonomy from the victim but also increases vulnerability to sexually transmitted infections, including HIV/AIDS. By eliminating protection, perpetrators exert dominance over their partners, further exacerbating the health risks associated with IPV.

Black women remain underrepresented in IPV research, particularly educated Black women navigating intimate relationships and associated risks. The reluctance to seek help within this population further limits understanding and intervention within the health and mental health professions. The lack of engagement with therapeutic services presents a cultural disadvantage, as professionals remain inadequately informed on how to effectively support these victims. It is essential for those in helping professions to recognize the unique barriers Black women face in seeking support. Talk therapy can serve as a valuable tool, allowing survivors to share their experiences, process the effects of past abuse, and develop healthier approaches to future relationships. By integrating culturally responsive therapeutic practices, mental health professionals can better assist Black women in breaking the cycle of IPV and fostering emotional well-being (St. Vil et al., 2021).

Romantic Relationships for Black Educated Women

As Black women pursue higher education and career opportunities, relocation often becomes necessary, reducing their chances of meeting potential partners within their racial and cultural background. The neighborhoods where they live and work present new challenges in forming romantic connections. Adeyinka-Skold (2020) conducted a study examining the romantic relationship experiences of self-identified Asian, Black, Latina, and White women between the ages of 25 and 35 who were heterosexual, child-free, single, or had been in a romantic relationship for less than a year. The study was part of a larger project exploring intimate relationship formation among college-educated women from diverse backgrounds, particularly in the digital age, and examining how racial differences impact dating. Though the study had limitations, it raised concerns about how race, education, and location continue to influence romantic partnerships (Adeyinka-Skold, 2020).

Through interviews with 111 college-educated women, the study sought to answer the question, “How does the intersection of race and place influence college-educated women’s search for romantic partners?” The findings revealed that both White and non-White women encountered barriers in finding romantic relationships based on where they lived, worked, and socialized. For Black college-educated women, relocation often meant moving from lower-income urban areas to communities where the Black population was significantly smaller. The study employed semi-structured interviews lasting one to two hours, exploring participants' methods of searching for relationships,

frustrations they experienced, encounters with online dating, and expectations for long-term romantic partnerships (Adeyinka-Skold, 2020).

While the study found that location was a barrier across racial groups, Black women faced additional challenges beyond geography, including racial dynamics, assortative mating, and educational disparities (Adeyinka-Skold, 2020). Many Black women expressed a strong desire to date within their race, citing shared experiences with societal racism, racial barriers, and stigmatization as key reasons for this preference. However, even when presented with dating opportunities in their new locations, they found that many men did not share their dating norms or long-term relationship expectations, making compatibility difficult (Adeyinka-Skold, 2020). Black women who relocate to cities with a larger population of individuals pursuing higher education may have more opportunities for compatible partnerships. Additionally, those open to interracial dating may increase their chances of forming relationships, though this still requires mutual interest from potential White partners.

Relationship Formation Among Black Educated Women After IPV

Surviving an intimate relationship marked by violence can significantly influence how one approaches future relationships. An IPV survivor may either enter a healthy relationship, choose to avoid relationships altogether, or compromise in ongoing relationships. Among Black women, particularly within the African American community, such compromises are often viewed as inevitable. However, relationship formation has become increasingly challenging for Black educated women, particularly when seeking partners of the same educational level, salary range, and shared interests

who also reside in similar areas. These challenges are compounded by limited partner availability, deeply rooted cultural beliefs and values, and negative relationship outcomes.

Cultural beliefs and values play a crucial role in shaping Black women's preferences in partners, often leading them to seek relationships with those who share similar racial and cultural experiences. Historically, Black men and women have found common ground in their shared struggles, fostering empathy and understanding. Additionally, cultural norms surrounding normative privacy, resilience, and religious affiliation are instilled in Black women from an early age. Goodson and Hayes (2018) noted that, culturally, personal affairs were traditionally kept private, with help being sought within the family or religious community, if at all (Powell Sears, 2021). Black women are often portrayed as strong and resilient, a perception rooted in religious affiliations and upbringing. Powell Sears (2021) emphasized that the church played a central role in providing counsel and prayer, reinforcing the belief that endurance through hardship was a sign of faith and strength. Consequently, many Black women tolerated abuse, influenced by false social beliefs and adherence to religious or cultural expectations.

Murphy et al. (2023) highlighted barriers that exacerbate IPV experiences among Black women, including trauma, limited access to culturally tailored resources, and insufficient law enforcement support. For Black educated women, additional barriers such as gender ratio imbalances, cultural beliefs, and social stigma have further contributed to their vulnerability to IPV. These women, often blinded by betrayal within

intimate relationships, find themselves navigating a complex intersection of cultural expectations and systemic disadvantages that shape their experiences with relationship formation.

Betrayal Trauma and Barriers to Forming New Relationships After IPV

Black educated women often experience betrayal in their intimate relationships, leaving them vulnerable and struggling to rebuild trust. After experiencing IPV, Black women take different paths in leaving abusive relationships and navigating new ones. St. Vil et al. (2021) conducted a qualitative study on the barriers to forming new intimate relationships among IPV survivors. The study included nine survivors recruited from a domestic violence organization in Western New York that provided free services to victims and their families.

Data collection involved semi-structured interviews focusing on four key areas: experiences of IPV, feelings about relationships, entering new relationships, and the healing process. Survivors were also encouraged to share additional insights beyond the structured questions. At the conclusion of each interview, participants completed a 10-item questionnaire that gathered sociodemographic information, including race/ethnicity, education, income, relationship status, number of children, and the number of years since leaving their abusive relationships. Additional questions assessed the types of abuse experienced, participants' knowledge of healthy relationships, and their agreement with the statement, *“I am currently in a healthy relationship.”*

Thematic analysis was used to analyze the data, guided by the theory-driven code “barriers to forming new relationships” after IPV. Four major themes emerged:

vulnerability and fear, relationship expectations, shame and low self-esteem, and communication issues. All nine survivors reported experiencing both physical and emotional/psychological abuse. Additionally, four had experienced sexual abuse, and four reported stalking. Five of the participants had been married at the time of their abuse, and five had endured IPV for more than 13 years.

Though these women survived the betrayal trauma of their intimate relationships, the psychological and emotional abuse they experienced often manifested later in life. Burton et al. (2011) noted that survivors of IPV often remain psychologically trapped in victimhood, with their behaviors mirroring past abuse, making it difficult to enter or maintain healthy relationships. The deep betrayal and violation of trust experienced in IPV can affect survivors in various ways, leading them to either seek and establish a healthy relationship, remain single, or compromise in future relationships (St. Vil et al., 2021).

The Impact of Partner Scarcity on Black Educated Women

Black women often face significant challenges in finding suitable partners, a difficulty that is even more pronounced for Black educated women. The limited availability of highly educated Black men further exacerbates this issue. Boyd et al. (2021) conducted a study exploring how perceptions of partner scarcity influence highly educated Black women's dating experiences, particularly after experiencing IPV. The study included 22 highly educated, single, heterosexual Black women, three of whom were in non-marital and non-cohabitating relationships. The participants, aged 22–35, were predominantly seeking long-term relationships. Among them, six held or were

pursuing a PhD, while the remaining participants were pursuing or had obtained a master's degree.

All recruited participants completed the study, which employed a mixed-methods approach combining both quantitative and qualitative data analysis. Participants completed a Black women and dating survey that examined perceptions of partner scarcity and associated health concerns. The small sample size limited the findings, as no new themes emerged after 20 interviews. Saunders et al. (2018) emphasized that saturation had been reached in the study's findings (Boyd et al., 2021). The qualitative research component utilized a content analysis approach to guide open-ended interview questions, while a closed-ended follow-up question—"Looking back on past relationships, have you had to compromise on certain values and beliefs to be in a relationship?"—was also included. Thematic analysis was applied to code the findings.

The study revealed that Black educated women's perception of partner scarcity led to various negative outcomes, including experiences of IPV, lack of condom use, partner sharing, the assumption of financial responsibilities in relationships (reverse gender roles), and the compromise of personal values. As an underrepresented group, Black individuals in graduate programs warrant further research, particularly in understanding how perceived partner scarcity contributes to vulnerability and compromise in relationships (Boyd et al., 2021). The belief that suitable partners are scarce has led many women to compromise their physical, emotional, and psychological well-being, resulting in increased health risks.

Navigating New Intimate Relationships After IPV

Koi et al. (2020) conducted a qualitative phenomenological study to explore the lived experiences of South Korean women, ages 19–34, who had survived IPV and were in the process of building new relationships. The participants were unmarried, child-free, and had voluntarily agreed to participate in the study. To protect their identities, they were given the option of a face-to-face or phone interview. The interviews, lasting one to two hours, began with an open-ended question, “What inspired you to participate in this study?” followed by guided questions that explored their IPV experiences, the process of leaving or escaping their abusive relationships, their post-IPV experiences, and their perceptions of new relationships.

Participants were recruited through flyers distributed at two universities and online. The flyer specified nine criteria of violent behaviors based on the Korean version of the Conflict Tactics Scale-2, which included:

1. Consistently insulting and blaming
2. Consistently ordering the partner to do something
3. Checking personal call and text histories
4. Consistently degrading the partner sexually
5. Hitting or threatening to hit
6. Swearing
7. Forcing sex
8. Restricting freedom and excessive surveillance
9. Repeatedly engaging in the above behaviors and apologizing before returning

A total of 25 participants were recruited, including 11 men and 14 women. However, only 13 female participants were included in the final analysis, as the 14th female participant was still in an abusive relationship and unwilling to leave.

Thematic analysis identified five key themes: difficulty meeting new people, building relationships based on trauma, struggling to escape the psychological boundaries of the abuser, learning about healthy intimate relationships, and sensing that something is wrong again. Koi et al. (2020) found that, although these women had physically escaped their abusive relationships, they still required significant emotional support and care. Many survivors entered new romantic relationships that, while not abusive, displayed unhealthy patterns (Koi et al., 2020). These women struggled with lingering trauma, often ruminating on their past abuse and reacting negatively to behaviors in new partners that resembled those of their abusers. Fear, mistrust, bias, and low self-esteem remained prevalent, even in new relationships (Koi et al., 2020).

The study highlights the importance of emotional healing for survivors of IPV. While escaping the physical environment of abuse is a critical step, unresolved trauma can continue to affect survivors' ability to form and maintain healthy relationships. Support systems and trauma-informed care are essential in helping these individuals rebuild trust and engage in meaningful, fulfilling partnerships.

Bridging the Journey From New Relationships to Personal Healing

While forming new intimate relationships after IPV presents challenges related to trauma, trust, and self-esteem, survivors must also engage in deeper personal healing to rebuild their sense of self. As Koi et al. (2020) demonstrated, many survivors enter new

relationships while still struggling with unresolved emotional wounds, often reacting to past abuse in ways that hinder their ability to establish healthy connections. However, beyond relationship formation, the process of regaining selfhood and setting personal boundaries is a crucial aspect of long-term healing.

Czerny et al. (2018) extended this discussion by exploring how IPV survivors reclaim their identities and renegotiate boundaries as part of their recovery journey. Establishing boundaries—both physical and emotional—is essential for breaking the cycle of abuse and fostering self-empowerment. Understanding the progression from forming relationships to setting personal boundaries highlights the need for comprehensive support systems that address both external and internal aspects of healing.

Czerny et al. (2018) conducted a qualitative study exploring the experiences of individuals who had endured IPV, focusing on their journey toward reclaiming selfhood, developing boundaries, and renegotiating relationships. The study applied both feminist theory and grounded theory, frameworks that emphasize the role of cultural history and truth in shaping personal experiences (Glaser & Strauss, 1967; Wuest, 1995). These theories seek to understand how individuals make sense of their experiences and navigate the process of healing. The research aimed to explore how female IPV survivors renegotiate boundaries as part of their recovery process.

The study included 10 participants, ages 26–66, all heterosexual. Six self-identified as Black or African American, while four identified as White or European. Among them, eight were employed, four had some college education, two held advanced degrees, and three did not disclose their educational background. All participants had

experienced IPV, with six reporting multiple abusive relationships—one participant had endured as many as four. At the time of the study, none of the participants were in an abusive relationship (Czerny et al., 2018).

Participants underwent in-depth interviews, and analysis revealed five distinct stages of boundary renegotiation:

1. Prior self: Lack of boundary awareness
2. Experiencing abuse: Losing boundaries and selfhood
3. Leaving: Establishing clear physical boundaries
4. Implementing firm boundaries: Prioritizing safety
5. Demonstrating flexibility and openness: Allowing for vulnerability

The study's data collection and analysis were conducted concurrently using an iterative process, ensuring depth and alignment between the research findings and theoretical framework. Charmaz (2006) emphasized that grounded theory research relies on three core components: theoretical sampling strategy, constant comparative methods, and alignment between data collection and analysis—all of which were incorporated into this study (Czerny et al., 2018).

Findings revealed that many participants had little to no awareness of personal boundaries, often stemming from childhood experiences. Some had attempted to set boundaries, but when these were ignored or dismissed, they conformed to minimize abuse. Leaving abusive relationships was often influenced by external factors, such as legal involvement or observing others model healthy boundaries. Establishing firm boundaries was essential, particularly for physical safety, though emotional boundaries

remained a struggle for many. While some participants eventually embraced vulnerability as a form of empowerment, two had not yet reached that stage (Czerny et al., 2018).

The study underscores the importance of boundaries in relationships, highlighting how they are often absent, unrecognized, or distorted. When relationships become toxic or unhealthy, individuals may begin seeking to establish boundaries—although this process is not universal. The two participants who had not yet reached the stage of vulnerability illustrate the complexities of boundary-setting and self-exploration after trauma.

Existing research on IPV often focuses on relationship formation, including the barriers that prevent survivors from entering or sustaining new relationships. However, few studies thoroughly explore the process of true healing. Comprehensive treatment interventions are necessary to ensure safety precautions, provide psychological support, and develop culturally tailored resources for IPV survivors. Addressing these needs is crucial to fostering empowerment and long-term recovery.

Summary and Conclusions

The chapter introduced the literature review, outlined the search strategy employed, and established the conceptual framework addressing key concepts relevant to the study. The literature explored cultural disparities related to IPV, focusing on the experiences of Black educated women and their process of forming relationships after IPV. The conceptual frameworks guiding the study—Black feminist thought and betrayal trauma theory—provide critical insight into these experiences. Black women in the United States, distinct from both Black men and White women, often face compounded

discrimination based on race and gender (Wade et al., 2022). Hill Collins' Black feminist thought sheds light on the historical oppression embedded in Black culture, helping to contextualize Black women's resilience and lived experiences. The theory encapsulates the social determinants affecting Black women across cultural, economic, and environmental dimensions. Hill Collins emphasizes how race, class, and gender intersect, forming what she calls the matrix of domination—a system in which Black women often experience oppression within both broader society and their intimate relationships.

Betrayal trauma theory, proposed by psychologist Jennifer J. Freyd, explores how trauma occurs within close relationships where trust is violated. This theory suggests that when individuals experience betrayal by a trusted figure, such as a family member or intimate partner, the resulting trauma can be particularly profound. Betrayal trauma theory is especially relevant to IPV survivors, as it highlights the erosion of trust in intimate relationships, leading to emotional distress and feelings of insecurity (St. Vil et al., 2021). The literature also examined how Black educated women navigate forming relationships after IPV, offering insights for targeted interventions and support services. A deeper understanding of their specific needs and experiences could help policymakers, healthcare providers, and support organizations develop more effective strategies to assist survivors in rebuilding their lives and forming healthy relationships (Gillum, 2019). Additionally, the study had the potential to inform mental health providers, enhancing their ability to raise awareness, provide psychoeducation, and offer culturally responsive care for Black women who have experienced IPV.

A gap remains in the literature, as researchers had examined IPV and its consequences for Black women, but forming relationships post-IPV had not been explored in-depth. While existing studies focused on health-related consequences, such as pregnancy complications, chronic diseases, substance abuse, and infectious diseases (Stubbs & Szoebe, 2022), fewer studies examined how Black women navigate new relationships after IPV. Research suggested that IPV survivors often emotionally disconnect to protect themselves, leading to avoidance of long-term relationships, marriage, or cohabitation (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021). However, much of the research had focused on other racial groups, leaving Black women's unique experiences underexplored (St. Vil et al., 2018; Tarzia, 2021). Moreover, partner scarcity was a well-documented issue for Black women, as they often struggle to find compatible partners within their racial group, particularly when seeking partners of similar educational and SES (Harawa et al., 2014; Romano, 2018). The scarcity could lead to compromised relationship decisions, such as engaging in non-exclusive relationships, forgoing condom use, and increased susceptibility to sexually transmitted infections (Boyd et al., 2021). While some studies have investigated relationship formation post-IPV (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021), little is known about how Black educated women, specifically, navigate this process. The next chapter will discuss the research design and rationale for the study.

Chapter 3: Research Method

Introduction

The purpose of the qualitative phenomenological study was to explore how Black educated women describe their experiences with forming relationships after IPV. IPV is a pressing public health issue that affects individuals worldwide, regardless of gender. However, it is a particularly significant concern for women and is even more pronounced within Black communities. Research highlights alarming disparities: Gillum (2019) notes that while IPV affects multi-racial, Native American, and African American women, Black women in the United States experience it at disproportionately higher rates. Moreover, abuse among Black women often proved to be more lethal (Powell Sears, 2021).

In this chapter, I discuss the research design and rationale, restated the research question, and defined the central concepts. The research design, including the use of phenomenology, are identified along with its rationale for the study. The role of the researcher is examined, with attention given to strategies for managing research bias. The methodology section addresses the participant selection logic, instrumentation, and procedures for recruitment, participation, and data collection, as well as the data analysis plan. The chapter concludes with a discussion of trustworthiness and ethical considerations, followed by a summary of how the data were handled and an overview of the chapter's contents.

Research Design and Rationale

The research question that guided the phenomenological qualitative study was:

RQ: How do Black educated women describe their experiences with forming relationships after IPV?

The phenomenon of relationship formation was explored by examining the lived experiences of Black college-educated women who had navigated intimate relationships after experiencing IPV. This included their perceptions, emotions, and decision-making processes related to trust, vulnerability, and intimacy, as shaped by their personal histories, cultural and societal expectations, and the availability of suitable partners. According to the CDC (2020), IPV manifests through physical, sexual, emotional, and mental violence against women globally (Pachner et al., 2022). Storer et al. (2021) emphasize that leaving an abusive relationship often creates significant barriers for victims, such as financial hardship, housing instability, and, in the case of immigrants, deportation. These challenges were further compounded by cultural beliefs and family dynamics, which can become tarnished or diminished. As a result, perceived limitations in available options often lead women to enter or remain in abusive relationships (Hall et al., 2022).

Studies suggested that women who had endured IPV often emotionally disconnect as a form of self-protection, which could lead to avoiding long-term relationships (Cherlin et al., 2004; St. Vil et al., 2018; Tarzia, 2021), marriage, or cohabitation (St. Vil et al., 2018). For Black women, the challenges associated with relationship formation were further exacerbated by a lack of partner availability. This scarcity of suitable partners, particularly when seeking to maintain relationships within their racial group, is a well-documented issue and one that affects Black women across all socioeconomic levels

(Harawa et al., 2014; Romano, 2018). The limited availability of partners can lead to compromises, such as participating in non-exclusive relationships, inconsistent condom use, and increased susceptibility to sexually transmitted infections (Boyd et al., 2021). The study addressed an underexplored aspect of IPV research, specifically the process of relationship formation following experiences of IPV.

A qualitative design was well-suited for the study as it allowed for a detailed and in-depth understanding of the phenomenon, particularly given the limited existing research in this field. Qualitative research was chosen because it sought to understand social phenomena through individuals' lived experiences, their emotional responses to those experiences, and the meaning they derive from them. Agazu et al. (2022) emphasized that qualitative research interprets experiences through the participants' own perspectives. In contrast, quantitative research also seeks to understand social phenomena but focuses on measuring data, typically collected through surveys to generate statistical insights (Lim, 2024).

Qualitative research encompassed several designs, including basic qualitative research, ethnography, and grounded theory. Basic qualitative research focuses on interpreting participants' experience and how they understand such experience (Merriam & Tisdell, 2016). Ethnographic research examines phenomena through societal and cultural perspectives (Merriam & Tisdell, 2016). The ethnographic researcher becomes involved with the culture studied and not much so with the phenomena (Patton, 2020). Grounded theory, on the other hand, is driven by the development of theoretical frameworks (Patton, 2020). However, phenomenology was selected over other

qualitative approaches because of its focus on exploring and interpreting lived experiences. Phenomenology is a qualitative approach that focuses on understanding meaning. Researchers aim to explore how participants perceive, comprehend, and navigate the phenomenon they have experienced (Pietkiewicz & Smith, 2012).

Phenomenological researchers strive to maintain neutrality, manage potential biases, and recognize that their personal feelings or assumptions are irrelevant. The primary goal was to gain an in-depth understanding of participants' lived experiences. The voices of participants, expressed through quotations, reflections, and descriptions of their experiences, were central to this type of study and were given significant importance (Miller & Barrio Minton, 2016).

The approach was deemed appropriate for the study due to its emphasis on gaining insight into individuals' experiences through their own interpretations, allowing for a deeper understanding of those experiences from their unique perspectives (Rudestam & Newton, 2015). Phenomenological studies primarily rely on interviews as the main method of data collection. While the questions were tailored to the specific phenomenon being studied, there is flexibility in how the interview progresses, with no strict order to follow. The approach allowed for additional questions to emerge, enabling participants to reflect on and describe how the phenomenon affects their lives (Rudestam & Newton, 2015).

Phenomenology, developed by Edmund Husserl, emphasizes the researcher's active engagement with participants to understand how they perceive and make meaning of their experiences (Pietkiewicz & Smith, 2012). The approach allowed participants to

share their stories and interpretations while researchers strive to comprehend their perspectives. The study used phenomenology to explore the complex experiences of Black college-educated women navigating relationship formation after IPV, offering valuable insights for professionals supporting this population.

Role of the Researcher

In the study, I assumed the role of an observer, with no prior personal or professional relationships with the individuals in the sample. My interaction with participants was limited to observing and recording their responses to interview questions; I did not share personal experiences or engage in any part of the interviews beyond facilitation. I acted as an observer who remained outside the participant experience. Participants were informed that I was a doctoral student and were provided with a clear explanation of how the study's findings contributed to the field. All interviews were conducted remotely, and I was not physically present with any participant during data collection.

As part of this role, I conducted semi-structured interviews, fully engaged and empathetic in building rapport with participants. Semi-structured interviews were designed to obtain specific information from participants while allowing flexibility in questioning (Merriam & Tisdell, 2016). The approach created a space for participants to share their stories openly, knowing there are no right or wrong answers to the questions asked (Shenton, 2004).

Before beginning the study, I obtained Institutional Review Board (IRB) approval, identified and recruited eligible participants, analyzed the findings, and

presented those findings in the final report. I had no personal or professional relationships with the participants that could have created a power dynamic or bias, especially considering the vulnerable nature of the phenomenon being studied. I ensured that biases were managed by preventing transference or countertransference from interrupting the study, thereby avoiding harm to participants. I managed potential bias by maintaining a neutral demeanor during interviews and by avoiding verbal or nonverbal cues, such as sighs or affirmations, that could have influenced participants' responses. I refrained from self-disclosure, ensured consistent facilitation of interview questions, and engaged in reflexive journaling to monitor and bracket personal assumptions throughout the data collection and analysis process. Ethical considerations were strictly observed, and participants did not include any current or former clients from my counseling practice. Additionally, all participants had been out of violent relationships for at least six months.

Potential biases that could have influenced the study outcomes stemmed from my professional position as a behavioral health therapist, the possibility of countertransference, and shared cultural backgrounds with participants. I addressed these biases by being transparent with participants about my role and ensuring that the study was conducted through a research lens rather than a therapeutic counseling perspective. I accomplished this by using the interview protocol to guide all interactions, which helped maintain consistency, minimize interpretive bias, and ensure that the focus remained on data collection rather than therapeutic intervention. I prioritized participant safety and disclosed to the committee my personal history with IPV. However, I had not

experienced IPV in over 30 years and had been in a healthy marriage for more than 21 years.

Methodology

The methodology section outlined the logic behind participant selection, including convenience and snowball sampling, as well as the inclusion and exclusion criteria, sample size, specific recruitment procedures, and data collection instruments. The section concluded with a detailed discussion of the IPA data analysis plan.

Participant Selection Logic

The general population was Black college educated women from the ages of 25-65 years who experienced IPV and engaged in some form of reflection or decision-making regarding relationship formation after IPV. The target population consisted of individuals from the broader population who met the defined criteria established for inclusion in the study (Patton, 2015). The study sample consisted of individuals from this group who voluntarily chose to participate in the research. The specific criteria for participation were: (a) identifying as Black women, (b) holding a college degree, (c) aged between 25 and 65 years, (d) not currently in an abusive relationship, with a minimum of six months since the end of such a relationship, and (e) having engaged in some form of reflection or decision-making regarding relationship formation after experiencing IPV, which may include entering a new relationship, choosing to remain single, or reflecting on feelings and perspectives about future relationships.

The inclusion criteria were carefully designed to align with the study's purpose and to support the collection of meaningful, in-depth data. The decision to include

women aged 25 and older—rather than beginning at age 18—acknowledged the time typically required to complete a college degree, which generally spans two to four years. Requiring participants to have been out of the abusive relationship for at least six months helps ensure that they have had sufficient time and emotional distance from the experience. This period promotes psychological readiness for participation and increases the chances that individuals have begun reflecting on their past relationships in meaningful ways. Although the six-month timeframe is somewhat arbitrary, it is widely adopted in trauma research to distinguish between acute crisis and a more stable phase of post-crisis reflection (Hunt et al., 2018).

Focusing on college-educated Black women responded to the gap in the current research. Much of the existing IPV literature on Black women centered on those from lower socioeconomic backgrounds, resulting in limited understanding of the experiences of more educated individuals within this population. By concentrating on this underrepresented group, the study sought to explore how IPV and subsequent relationship formation would unfold for women who would encounter distinct cultural, social, and relational challenges, yet were often overlooked in both research and support systems.

The criteria were carefully designed to ensure participants were well-suited to the study's focus. By narrowing the participant pool to individuals with shared demographic and experiential characteristics, the research could explore rich, in-depth perspectives on how the specific population navigated relationship formation post-IPV. In the study, collecting demographic information played a role in the analytical process by helping to contextualize participants' lived experiences within the broader sociocultural and

educational landscape of Black college-educated women who had survived IPV. By gathering data on variables such as age, educational attainment, relationship status, and time since the abusive relationship ended, the research was able to explore how those factors intersect with race and gender to shape participants' reflections, decisions, and behaviors regarding forming future relationships.

These demographic characteristics were not collected simply for description, but rather to inform the interpretation of narratives. Demographic information supported the transferability of findings by allowing readers and practitioners to determine the relevance of the study to other populations or settings. This transparency strengthened the study's credibility and practical utility. However, in line with Randall and Koppenhaver's (2004) cautioned, the analysis will avoid treating demographic categories as deterministic. Instead, these variables served as analytic lenses through which to understand individualized experiences, rather than as fixed predictors of behavior. Ultimately, the integration of demographic data in the analysis would enrich the thematic development and contribute to a more layered, inclusive understanding of how Black college-educated women navigate relationship formation after IPV.

Convenience and snowball sampling were used. Convenience sampling in qualitative research was a non-probability sampling method in which participants were selected based on their availability, accessibility, and willingness to participate in the study (Patton, 2015). Snowball sampling enabled participants to recruit additional potential participants, facilitating the development of a rich, in-depth study (Patton, 2015). The number of participants should fall between 10-12. Miller and Barrio Minton

(2016) emphasized that the sample size in qualitative research depends on the type of study. For phenomenological studies, a small sample size of 5 to 10 participants is typically recommended. However, data collection continued until saturation was achieved. Saturation occurs when the data begins to reveal consistent patterns and themes, with no new significant insights emerging (Merriam & Tisdell, 2016).

Potential participants were recruited through advertisements posted on social media platforms such as Facebook and LinkedIn. Organizations and networks that support Black women and survivors of IPV were contacted and asked to distribute the study flyer within their networks. Once potential participants responded to the advertisement, I interviewed everyone who met the inclusion criteria and volunteered to participate, either through email or by phone. Participants who met the criteria were invited to an interview via Zoom. Those participants signed up for an interview time through email. After a date and time were agreed upon, a Zoom link was sent to their email for the interview.

Data were collected through 1:1 semi-structured interview conducted via Zoom. The interviews were recorded using Zoom's recording feature, which included automatic audio transcription to the Cloud for analysis. Zoom audio recordings captured both verbal and nonverbal behaviors, as noted by Merriam and Tisdell (2016). Each interview lasted about 60 minutes. Handwritten notes were taken during the interviews and were transferred to Microsoft Word, and the original notes were destroyed immediately afterward. All electronic data were securely stored on a thumb drive, backed to the cloud, encrypted, password-protected, and locked in a file cabinet to ensure confidentiality.

Email was used to pre-screen potential participants, present informed consent forms, and schedule interviews.

Instrumentation

An interview protocol was developed to explore participants' experiences with relationship formation after having experienced IPV (Appendix). The guide consisted of open-ended questions, allowing for responses that go beyond simple “yes” or “no” answers and do not have right or wrong responses (Shenton, 2004). The open-ended questions were supported by several follow-up questions that tied directly back to the main research question. The guide ensured that the interviews are systematic, comprehensive, and conducted effectively within the allotted timeframe (Patton, 2015). It also helped me stay focused on questions relevant to the study (Patton, 2015). To ensure content validity, I weighed in with both my chair and committee members, making revisions as necessary to ensure the questions aligned with the study’s objectives. I conducted two field test interviews with colleagues using my interview protocol to ensure that the questions elicited responses beyond simple “yes” or “no” answers. The field test also helped to estimate the duration of the interview and ensure it aligned with the one-hour timeframe promised to participants. Revisions to the protocol were made as needed based on the results of the field test.

Each participant took part in an interview lasting approximately an hour. Prior to the main interview, a few demographic questions were asked to gather contextual information about the participants. After completing the demographic section, the interview proceeded with topic-specific questions guided by a semi-structured interview

protocol (Appendix). The guide facilitated real-time, meaningful dialogue with participants (Smith et al., 2022). The individual interview setting was designed to provide a space where personal experiences could be shared freely. While a predetermined set of questions were used, the method allowed for flexibility to ask follow-up questions as needed during the conversation. The semi-structured interview guide had been shaped by the theoretical framework (Adeyinka-Skold, 2020; Hill Collins, 1990; Hill Collins, 2000; Powell Sears, 2021) and the information was gathered from peer reviewed literature review sources (Freyd, 1996; Gillum, 2019; Gupta, 2023; Hall et al., 2022; Pachner et al., 2022; Pietkiewicz et al., 2012; St. Vil et al., 2021; Storer et al., 2021). Upon completing two field tests with colleagues, their feedback helped ensure that the interview questions aligned with the study's research question.

Procedures for Recruitment, Participation, and Data Collection

The following steps were taken for the identification and recruitment of potential participants:

1. Committee Approval: I obtained approval from my chair and second committee member regarding the steps for conducting the study including how to identify and recruit potential participants.
2. IRB Approval: I submitted an online application to Walden University's IRB to seek permission to conduct the study. Recruitment begun once approval was obtained.
3. Recruitment Process: Recruitment started with a flyer that outlined the purpose of the study and what participation would entail. The flyer was shared

on various social media platforms, including Facebook and LinkedIn.

Potential participants had met the inclusion criteria, which required them to be Black women aged 25-65 years, hold a college degree, and had experienced IPV. Additionally, participants must no longer be in an abusive relationship, ensuring their safety during the study.

4. Interested participants were instructed to contact me via email for further details. Those who met the eligibility criteria was invited to participate in a 60-minute interview conducted via Zoom. The interviews were recorded and transcribed using approved Zoom software and reviewed for accuracy.
5. Snowball Sampling: To enhance the recruitment process, a snowball sampling technique was also employed, where participants were encouraged to refer others who met the study's inclusion criteria.
6. Recruitment did not fall short; therefore, additional means of data collection were not needed. A follow-up plan had been in place to expand efforts to additional listservs if necessary. As Merriam and Tisdell (2016) explain, snowball sampling grows as participants recommend others, allowing researchers to identify information-rich cases.
7. After the interviews, any questions the participants had were addressed. Participants were thanked for their time and contributions.

Data Analysis Plan

Using IPA as the analytical framework, both the researcher and participants aim to gain a deep understanding of the phenomenon. IPA involves an iterative, reflective,

and flexible engagement between the researcher and the participant to make meaning of the participant's lived experiences, with the researcher further interpreting those experiences (Smith et al., 2022). Key concepts of IPA, including ideography and hermeneutics, focus on a particular experience and how it is perceived, with the researcher striving to interpret its meaning (Smith et al., 2022). The data analysis process followed the seven-step framework outlined by Smith et al. (2022).

I began by reading and re-reading the first participant's transcript. This process of immersion would allow for deep engagement with the data and ensured that the participant remained the central focus of the analysis. I listened to the audio recording while reviewing the transcript helped capture tone, emotion, and context, laying the groundwork for a richer interpretation.

I then conducted exploratory noting. These notes focused on descriptive content (what the participant says), linguistic features (how it is said), and conceptual insights (potential meanings). This stage encouraged open-mindedness and curiosity while examining the participant's language and the significance of their experiences, resulting in a comprehensive set of detailed comments.

The third step, experiential statements, involved constructing experiential statements. Drawing from the exploratory notes, I developed concise, interpretive phrases that capture essential aspects of the participant's meaning-making. These statements balanced grounding in the transcript with a level of abstraction that allowed for conceptual analysis.

Next, I searched for connections across experiential statements. This phase involved organizing the statements into meaningful clusters that reflect patterns in the participant's account. These clusters were reviewed and revised iteratively, ensuring that the structure remained true to the participant's narrative while also capturing deeper psychological insights.

In the fifth step, clustered statements were developed into personal experiential themes (PETs). Each PET was named and organized into a table, often accompanied by subthemes, to clearly represent the analytical structure. This process allowed for the consolidation of key ideas and provided an audit trail linking themes back to the original data.

In Step 6, continuing the individual analysis of other cases, I repeated the entire analytic process with the next participant's data. Each transcript was treated as a separate case, allowed for detailed idiographic analysis. By honoring the uniqueness of each participant's experience, this step preserved the integrity of the IPA approach.

Finally, I conducted a cross-case analysis. Themes were examined across all participants to identify points of convergence and divergence. This process revealed shared patterns of meaning as well as unique perspectives, deepening the overall understanding of how Black college-educated women navigate relationship formation after IPV.

Throughout the analysis, attention was paid to the double hermeneutic at the heart of IPA. I made sense of the participant, who were themselves making sense of their experience. Reflexivity was maintained to acknowledge my interpretative role, and all

steps were carefully documented to ensure transparency and rigor. Discrepant cases were analyzed through comparison to better understand any complexities of the phenomenon (Morrow, 2005).

Issues of Trustworthiness

Qualitative research was grounded in a researcher's assumptions and interpretations of how people make sense of their experiences (Agazu et al., 2022). The extent to which confidence could be placed in the study's findings depended on the concept of trustworthiness, which was used to evaluate validity in qualitative research. Trustworthiness was established through credibility, transferability, dependability, and confirmability (Shenton, 2004). I adhered to these guidelines for the study.

Credibility

Credibility was a critical component of trustworthiness, ensuring that the study's findings accurately reflected the participants' realities (Shenton, 2004). Spending time with participants provided a deeper understanding of the phenomenon being studied. Establishing rapport was essential to creating an environment in which participants felt comfortable sharing their experiences openly and honestly. To support this, participants were fully informed about their involvement in the study and reminded that they could withdraw at any time without providing an explanation.

Thorough interviews also contributed to credibility by fostering rapport and eliciting meaningful data about participants' experiences. These semi-structured interviews were designed to encourage honest responses and gather rich insights into the phenomenon under investigation.

Lastly, reflective commentary played a crucial role in maintaining rigor. I kept a reflective journal to document my impressions after each data collection session, identified emerging patterns, captured key insights, and recorded personal reflections. This practice supported the overall integrity of the study and ensured that the findings remain rooted in participants' realities.

Transferability

Transferability refers to the extent to which the findings of a study can be applied to other contexts (Morrow, 2005). To facilitate transferability, I provided a thick description of the phenomenon being studied. This included outlining the study's boundaries, participant inclusion criteria, the number of participants, data collection methods, the length of data collection sessions, and the timeframe for data collection (Shenton, 2004). A thick description also involved presenting the participants and their contexts using their own words, allowing readers to assess whether the findings would be transferable to others within the target population.

Dependability

Dependability ensures the stability and consistency of the study's findings by implementing internal controls to minimize researcher bias and promote methodological transparency. This was achieved by providing a clear explanation of the research design and its execution, ensuring transparency in how the study was conducted. Additionally, detailed records of the data collected were meticulously maintained, creating a comprehensive account of the research process. A reflective review of the study was also

conducted to evaluate its rigor and integrity, allowing for continuous assessment and refinement throughout the research process (Shenton, 2004).

In the study, dependability was supported through the development and maintenance of an audit trail. The audit trail provided a detailed account of each stage of the research process, including the design, data collection, and analysis procedures. By documenting methodological decisions and changes over time, the audit trail allowed for a clear explanation of how the study was executed and how the categories and themes were identified. The analysis method was described in precise and transparent language, enabling readers to follow the interpretive process and assess the consistency of the findings. In addition to thorough recordkeeping, a reflective review of the research process was conducted to evaluate the study's rigor and integrity, allowing for ongoing assessment and refinement throughout the project (Shenton, 2004). As part of the data analysis process, a codebook was developed and maintained to document the evolving codes and themes, thereby enhancing the study's dependability and supporting the consistency and transparency of interpretations.

Confirmability

Confirmability ensures that the findings of the study were rooted in the participants' experiences rather than being influenced by the researcher's biases. To achieve this, I maintained an audit trail, consisting of detailed documentation of the research process. This documentation was periodically reviewed by my research committee to ensure accountability and adherence to methodological rigor (Morrow, 2005). Additionally, I used a reflective journal to record my impressions, identify

emerging patterns, and capture observations throughout the study, providing a record of my engagement with the data and promoting transparency in the research process.

Methodological transparency was also prioritized by offering a detailed description of the research approach, enabling readers to evaluate the adequacy of the data and verify the credibility of the findings (Morrow, 2005). By implementing these strategies, the study was conducted with rigor and integrity, ensuring trustworthy and meaningful insights into the phenomenon being explored.

Ethical Procedures

Ethical integrity qualitative research lies with the researcher. Basic ethical principles referred to the foundational judgments that justify ethical integrity in research involving human subjects (U.S. Department of Health and Human Services, n.d.). According to the Belmont Report, ethical integrity is guided by three core principles that help researchers navigate ethical issues related to the involvement of human participants: respect for persons, beneficence, and justice. The principle of respect for people included two fundamental aspects: recognizing individuals' autonomy and protecting those with diminished autonomy. This means participants must be fully informed that their involvement in the study is voluntary and that they were free to withdraw at any time without coercion or penalty. The second principle, beneficence, emphasized the obligation to do no harm and to maximize possible benefits while minimizing potential risks, thereby safeguarding participants' well-being. The third principle, justice, required fairness in participant selection and the equitable distribution of research benefits and burdens, particularly when involving vulnerable populations. Upholding both situational

and relational ethical practices were essential for honoring these principles throughout the research process.

Situational ethics were addressed prior to recruiting participants by obtaining approval from the IRB. This process included gaining access to participants and securing informed consent, with a commitment to “cause no harm.” Participants were guaranteed confidentiality and their right to privacy. According to the Belmont Report, informed consent was further examined through the principles of information, comprehension, and voluntariness (U.S. Department of Health and Human Services, n.d.). The information component ensured that participants were fully aware of the study’s purpose, the procedures involved, and any potential risks and benefits. In the study, risks were expected to be minimal but could include psychological or emotional distress resulting from participants sharing their personal experiences. Participants were given the opportunity to decide whether they wish to continue or withdraw from the study at any point. The benefits of the study included a small token of appreciation for participants and the broader societal benefit of contributing to knowledge that would inform professionals in the helping fields. This gained insight could aid in raising awareness and improving psychoeducational resources for survivors of IPV.

With regard to comprehension, all study-related information was presented in clear and accessible language to ensure participants understand what was being asked of them. This approach allowed individuals to make an informed and thoughtful decision, with the option to ask questions and seek clarification before providing consent. Lastly, voluntariness means that participation was entirely the individual’s choice, free from

coercion or undue influence. Incentives were modest and appropriate, ensuring they did not compromise the participant's ability to make a voluntary decision to participate in the research (U.S. Department of Health and Human Services, n.d.).

The treatment of data also adhered to strict confidentiality standards. In the dissertation, participants' names and any identifying references to people or places were replaced with generic terms or pseudonyms to protect their identities. All data was securely stored on an encrypted, password-protected thumb drive, which was locked in a desk drawer when not in use.

I secured the data in my home office, where I was the only person with access to it. Handwritten notes were transferred to a Microsoft Word document as soon as possible, after which the handwritten notes were destroyed. The electronic data would be retained for a minimum of 5 years before being permanently destroyed. Access to the raw data was strictly limited to me, an internal auditor, and the Walden University dissertation committee. All identifying information, including participants' emails and phone numbers, was kept secure and destroyed after use. By implementing these measures, the study maintained the highest ethical standards, safeguarding participants' rights and the integrity of the research process.

Following IRB review and approval to proceed with the study, informed consent was obtained from each participant. Participants were contacted via email and asked to reply with the statement "I consent" to indicate their agreement to participate. Upon receiving consent, a mutually agreed-upon interview date and time were confirmed. Participants were also informed that their participation was entirely voluntary and that

they could withdraw from the study at any time. As a token of appreciation, participants received a \$25 Amazon gift card.

Summary

This chapter provided an overview of the research design and methodology for the qualitative phenomenological study exploring how Black college-educated women describe their experiences with forming relationships after IPV. The introduction highlighted the prevalence and unique challenges of IPV among Black women, emphasizing the importance of understanding their lived experiences. Phenomenology was selected as the methodological approach due to its focus on interpreting participants' perceptions and the meaning they ascribe to their experiences. The study was guided by the research question: How do Black educated women describe their experiences with forming relationships after experiencing IPV? The approach offered valuable insights into the interplay of race, education, and IPV recovery.

The methodology section detailed the participant selection logic, which involves convenience and snowball sampling methods. Participants included ten Black women aged 25-65 years who had experienced IPV and had been out of abusive relationships for at least six months and had engaged in some form of reflection or decision-making regarding relationship formation after experiencing IPV, which included entering a new relationship, choosing to remain single, or reflecting on feelings and perspectives about future relationships. Recruitment was conducted through social media advertisements, and data was collected using semi-structured interviews via Zoom. These interviews allowed for flexibility in questioning, capturing both verbal and nonverbal

communication. An interview guide, shaped by theoretical frameworks and peer-reviewed literature, ensured comprehensive and systematic data collection. Ethical procedures, including confidentiality, informed consent, and secure data storage, safeguarded participants' rights and privacy.

The chapter also addressed the data analysis plan, which employed IPA to identify themes and patterns in participants' narratives. IPA's reflective and iterative process ensured an in-depth understanding of participants' lived experiences, incorporating strategies like abstraction and the hermeneutic cycle to interpret data meaningfully. Trustworthiness was established through credibility, transferability, dependability, and confirmability. Methods such as prolonged engagement, reflective journaling, and detailed methodological transparency enhanced the study's rigor. Ethical considerations included IRB approval, ensuring participant safety, and maintaining data confidentiality. These measures collectively ensured that the study was conducted with integrity, providing meaningful insights into how Black women navigate relationship formation after IPV. Chapter 4 includes the results of the study, the demographics, data collection, data analysis, evidence of trustworthiness, and the results.

Chapter 4: Results

Introduction

The purpose of this phenomenological study was to explore how Black educated women describe their experiences forming relationships after IPV. By exploring their lived experiences, this research aimed to uncover the emotional, psychological, and social factors that shaped their approach to intimacy and trust after surviving IPV. IPV is a pressing public health issue that affects individuals worldwide, regardless of gender. However, it is a particularly significant concern for women and is even more pronounced within Black communities. Research highlights alarming disparities: Gillum (2019) notes that while IPV affects multiracial, Native American, and African American women, Black women in the United States experience it at disproportionately higher rates. Moreover, abuse among Black women is often more lethal (Powell Sears, 2021).

The research question that guided this study was: How do Black educated women describe their experiences forming relationships after IPV? This qualitative study explored the lived experiences of ten participants who met the inclusion criteria and provided rich, detailed accounts of their relationship formation following IPV. Chapter 4 presents the research setting, participant demographics, data collection procedures, data analysis, evidence of trustworthiness, and the results of the study. The chapter concludes with a summary of the findings as they relate to the research question and provides a preview of Chapter 5.

Setting

Participants were recruited through advertisements posted on social media platforms such as Facebook and LinkedIn. Four organizations were also contacted to post a flyer about the study and solicit participation. Once participants responded to the advertisement, pre-screening surveys were sent via email, with the option to complete the survey by phone if preferred, to ensure eligibility. The informed consent form was then sent via email to eligible participants. Those who met the inclusion criteria and expressed interest were invited to participate in a Zoom interview. After a date and time were agreed upon, a Zoom link was sent to each participant's email. Interviews were conducted and recorded via Zoom and lasted between 45 and 60 minutes. All interviews were semi-structured and included open-ended questions. Participants were English-speaking, Black, educated women between the ages of 25 and 65 who had been out of an abusive relationship for a minimum of six months.

Participants were informed that they could stop the interview at any time if they experienced psychological or emotional distress, without any consequences. In addition, participants were provided with resources in case psychological or emotional distress occurred after the interviews. However, no participant requested to stop the interview due to potential psychological or emotional distress. All participants' private information was kept confidential to ensure privacy and protection of their identities. Once all interviews and transcriptions were completed, each participant received a \$25.00 digital Amazon gift card via email. The interviews were audio-recorded through Zoom. At the time of the

study, participants were not influenced by any personal or organizational conditions that could have predisposed them to a subjective interpretation of the study's results.

Demographics

Data were used to explore how Black educated women experience relationship formation after experiencing IPV. There were 10 participants identified as Black women. All participants were educated: one held a trade school certification, two held associate degrees, six held bachelor's degrees, and one had earned a master's degree and was a current doctoral candidate. Participants ranged in age from 25 to 51 years, with most between 25 and 35 years of age, one participant aged 51, and a mean age of 30.8 years ($SD = 7.71$). All participants had been out of an abusive relationship for a minimum of six months. Six participants were single, three were in new romantic relationships, and one was newly dating. Of the ten participants, six had no children, three had one child, and one had four children, one of whom was deceased. Participants' demographics are presented in Table 1.

Table 1*Participants' Demographics*

Participant	Age	Highest educational degree	Relationship status	Time out relationship	# of children
Donna	28	Bachelor	In relationship	1 year	None
Lynette	27	Associate	In relationship	Over 2 years	None
Patience	26	Bachelor	Single	1 year	None
Raven	25	Trade School	In relationship	3 years	1
Pinkie	32	Bachelor	Single	8 months	None
May	27	Bachelor	Single	1 year	None
Miracle	35	Bachelor	Single	9 months	1
Trinity	51	Doctoral candidate	Single	2 years	4, 1 deceased
Evelyn	30	Bachelor	Dating	8 months	1
Bonnie	27	Associate	Single	6 months	None

Data Collection

Data collection occurred over a 3-week period, after approval to conduct the data was obtained from Walden University IRB. Data were collected from ten participants, following the recruitment and data collection procedures outlined in Chapter 3.

Recruitment began with flyers posted on social media platforms such as Facebook and LinkedIn. In addition, family and friends were asked to share the invitation flyer on their own social media pages. Four organizational administrators were also contacted. The researcher introduced the study, explained its purpose, and requested permission for the flyer to be posted on organizational social sites and bulletin boards. The flyer was reposted weekly on Facebook and LinkedIn to increase visibility and engagement through the comment sections.

The reposting of the study allowed for the recruitment and interviewing of 16 participants. However, six participants were disqualified because their interviews

appeared questionable. Each of these participants accepted their Amazon gift card simultaneously after the interviews, and several irregularities were observed. Specifically, their voices sounded very similar, and their responses were nearly identical. These unusual circumstances were documented as part of the data collection process.

Data were collected successfully from ten participants who met the study's inclusion criteria. All interviews were conducted via Zoom, which provided participants with comfort and convenience. Each virtual interview was scheduled at a date and time selected by the participant. Participants joined the session by clicking the Zoom link that had been emailed to them prior to the interview. Before each interview began, participants were reminded of the voluntary nature of the study, their right to refuse participation or withdraw at any time without consequences, and their option to stop the interview if they experienced any psychological or emotional distress. Participants were also reminded, both before and after the interview, of the resources available should they experience distress. Once the participant confirmed their readiness to begin, the recording process was explained, and the audio recording was initiated. Each interview followed a semi-structured format with open-ended questions.

Each participant was identified using a pseudonym, allowing them the opportunity to choose their own name to maintain confidentiality and protect their personal information from disclosure in the study. A pseudonym represented each research participant (e.g., Donna, Trinity, Pinkie, etc.). The length of the interviews ranged from 45 to 60 minutes; however, one participant shared more than others, exceeding the 60-minute timeframe. Once the interviews were completed, the recordings

were stopped, marking the end of the data collection process. The audio recordings from Zoom were stored in a secure, password-protected file to preserve participants' privacy.

Data Analysis

IPA was used as the analytical framework to gain a deep understanding of participants' lived experiences. IPA involves an iterative, reflective, and flexible engagement between the participant and the analyst to make meaning of lived experiences, followed by an interpretative process that deepens understanding (Smith et al., 2022). Key concepts of IPA, including idiography and hermeneutics, emphasize a detailed exploration of individual experiences and how they are perceived. The goal is to interpret and illuminate the meanings participants assign to their experiences (Smith et al., 2022). The data analysis process followed the seven-step framework outlined by Smith et al. (2022). After all interviews were completed, data analysis began. IPA emphasizes an iterative, idiographic, and interpretive engagement with participants' lived experiences; therefore, I analyzed each transcript case-by-case before examining patterns across participants.

Step 1: Reading and Re-Reading

I began by reading and re-reading each participant's transcript to become deeply familiar with their narrative. Each transcript was reviewed a minimum of three times, and two additional times after the professional transcription was returned. I also listened to the audio recordings while reviewing the transcripts to capture tone, pauses, and emotional nuance. This immersion ensured that each participant's voice remained central to the analysis and provided a foundation for richer interpretation.

Step 2: Exploratory Noting

Next, I conducted exploratory noting. I made detailed notes focusing on descriptive content (what was said), linguistic features (how it was said), and conceptual insights (what meanings underpinned the experience). These notes encouraged openness and curiosity rather than premature interpretation. For example, when Trinity stated, “Honey, he was a whole narcissist,” the statement was initially noted descriptively as “Trinity identifies abuser as a ‘whole narcissist’.” It later became a focused code under the broader cluster of “Abuser Characteristics.” This demonstrated how initial observations evolved toward conceptual meaning-making.

Step 3: Experiential Statements

Drawing from exploratory notes, I then developed experiential statements. These concise interpretive phrases reflected the participant’s meaning-making while remaining grounded in their exact words. This step allowed me to capture the psychological essence of their experiences without losing connection to the transcript itself.

Step 4: Searching for Connections Across Experiential Statements

I then examined connections across experiential statements, organizing them into meaningful clusters that represented patterns within each participant’s narrative. These clusters were revised iteratively to ensure that they accurately reflected participants’ lived experiences. To support accuracy, I sought an external review of clustered statements to confirm that interpretations remained faithful to the original accounts.

Step 5: Developing Personal Experiential Themes (PETs)

From these clusters, I developed PETs for each participant. Each PET was named, defined, and documented in a table that included supporting extracts from the transcript. Some participants also had subthemes to reflect nuance. This process created a clear audit trail linking raw data to interpretive conclusions and enhanced transparency and credibility.

Step 6: Repeating the Analysis for Each Case

The full analytic process was repeated for all ten participants. Consistent with IPA's idiographic commitment, each transcript was treated as an individual case, honoring the uniqueness of each woman's story. This ensured that each participant's meaning-making was interpreted on its own terms before any cross-case patterns were considered.

Step 7: Developing Group Experiential Themes Across Cases

Once all individual analyses were complete, I conducted a cross-case analysis. I compared PETs across participants to identify convergence and divergence. This synthesis revealed shared themes, such as trust, stigma, relationship expectations, and the role of faith, as well as unique contextual differences. These group experiential themes deepened the understanding of how Black educated women described their experiences forming relationships after IPV.

Throughout the analytic process, careful attention was given to the double hermeneutic central to IPA, the understanding that I was interpreting how participants made sense of their own experiences. To ensure that interpretations remained grounded in

participants' voices rather than my own assumptions, I engaged in consistent reflexive practices. Reflexivity was maintained through the use of a reflective journal kept throughout data collection and analysis. After each interview, I recorded immediate impressions, emotional responses, and any assumptions or biases that surfaced. This allowed me to bracket personal reactions and prevent them from influencing subsequent interviews or coding decisions.

The reflective journal also served as a space to document emerging patterns, key insights, and questions that arose during analysis. After reviewing each transcript, I returned to the journal to evaluate whether any interpretations appeared influenced by prior knowledge, either as a behavioral health professional or as someone with lived experience of IPV many years ago. Doing so helped minimize interpretive bias and preserved the integrity of participants' meaning-making. Additionally, reflexivity supported transparency, offering a clear audit trail of how I navigated personal subjectivity during data interpretation. These practices ensured that the analysis remained consistent with IPA principles, where interpretation is necessary but must remain closely tethered to the data. By bracketing assumptions, keeping detailed reflective notes, and documenting analytic decisions, I upheld methodological rigor and reinforced that the final themes emerged from participants' voices rather than researcher preconceptions.

Reflexivity was maintained to acknowledge the interpretative role of the analyst, and all steps were carefully documented to ensure transparency and rigor. All data were reviewed to identify any potential discrepant cases that could provide additional insight into the complexity of the phenomenon (Morrow, 2005). Discrepant cases refer to

perspectives or experiences that differ from the dominant patterns identified in the data.

No discrepant cases were found in this study.

Evidence of Trustworthiness

My goal as the researcher was to maintain quality and integrity throughout the data collection and analysis processes. Qualitative research is grounded in the understanding that a researcher's assumptions and interpretations influence how meaning is constructed from people's experiences (Agazu et al., 2022). To ensure rigor, I followed Shenton's (2004) guidelines and recommendations for establishing trustworthiness, which include credibility, transferability, dependability, and confirmability. These principles were consistently applied throughout the study to uphold its quality and integrity.

Credibility

To ensure credibility in this study, an extensive interview process was conducted with ten participants. Prolonged engagement, thorough interviews, frequent debriefing sessions, and reflective commentary were used to strengthen the credibility of the findings. Each in-depth interview lasted between 45 and 60 minutes to ensure that participants' responses contained rich and detailed information. Participants were given ample time to express themselves fully. Prolonged engagement during data collection allowed for the development of trusting relationships and rapport, which were essential to creating an environment in which participants felt comfortable sharing their experiences openly and honestly. Data saturation was determined to have been achieved.

Thorough interviews also contributed to the study's credibility by fostering rapport and eliciting meaningful data about participants' experiences. The semi-structured interview format encouraged honest responses and generated rich insights into the phenomenon under investigation. Frequent debriefing sessions with the research committee further enhanced credibility by providing opportunities for feedback, alternative perspectives, and the identification of potential biases or methodological concerns. Conducted throughout the data collection and analysis phases, these debriefings ensured continuous reflection, improvement, and oversight of the research process.

Lastly, reflective commentary played a crucial role in maintaining rigor. A reflective journal was kept to document impressions after each data collection session, identify emerging patterns, capture key insights, and record personal reflections. This practice supported the overall integrity of the study and ensured that the findings remained grounded in participants' lived experiences.

Transferability

Transferability refers to the extent to which the findings of a study can be applied to other contexts (Morrow, 2005). To support transferability, a thick description of the phenomenon under investigation was provided. This included outlining the study's boundaries, participant inclusion criteria, number of participants, data collection methods, duration of the interview sessions, and the overall timeframe for data collection (Shenton, 2004). These details enable readers to assess whether the findings may be applicable to their own contexts.

Dependability

Dependability ensures the stability and consistency of a study's findings by implementing internal controls to minimize researcher bias. This was achieved through a clear explanation of the research design and its execution, ensuring transparency in how the study was conducted. Additionally, detailed records of the data collected were meticulously maintained, creating a comprehensive account of the research process. A reflective review of the study was also conducted to evaluate its rigor and integrity, allowing for continuous assessment and refinement throughout the research process (Shenton, 2004).

Confirmability

Confirmability ensures that the findings of this study are grounded in participants' experiences rather than influenced by the researcher's bias. To achieve this, an audit trail was maintained, consisting of detailed documentation of the research process. This documentation was periodically reviewed by the research committee to ensure accountability and adherence to methodological rigor (Morrow, 2005). A reflective journal was also used to record impressions, identify emerging patterns, and capture observations throughout the study, providing a record of engagement with the data and promoting transparency in the research process. Methodological transparency was further supported by providing a detailed description of the research approach, enabling readers to assess the adequacy of the data and verify the credibility of the findings (Morrow, 2005). Through these strategies, the study was conducted with rigor and integrity, ensuring trustworthy and meaningful insights into the phenomenon under investigation.

Results

Three major themes were generated from the data analysis. The themes were organized chronologically due to participants' descriptions of how the experience of forming relationships after IPV evolved from before experiencing abuse to after experiencing abuse. Thus, the participant's experiences were better told by indicating the chronological evolution of before, during, and after the abuse. The first theme addressed participants' experiences before IPV. The theme contains three subthemes, including beliefs about love and commitment, cultural and familial pressures, and formation of self and aspirations. The second theme focused on participants' experiences with IPV, which included four subthemes: disruption of self, control, fear, and isolation; participants' awareness/red flags; and the weight of stigma and the healing power of connection. The last theme addressed relationship formation. This theme had three subthemes: struggles with forming new romantic relationships, relationship expectations, and religious outlook. While the three superordinate themes are presented sequentially, several participants described how the effects of abuse, such as diminished self-worth, hypervigilance, and challenges with trust, continued to shape their perspectives and relationships years later. As a result, certain insights naturally intersect across thematic boundaries, reflecting the fluid and evolving nature of participants' lived experiences rather than a strictly linear progression.

The following table presents the personal experiential themes developed during the analysis. The clusters column shows the experiential statements that were grouped together. The subthemes column indicates categories that emerged from these clusters.

The personal experiential theme column reflects the higher-level interpretation that integrates the subthemes. The participant identifiers column shows the individuals for whom each theme was especially salient, providing an evidence trail across cases. As shown in Table 2, these themes provide a framework for understanding how participants made sense of their experiences and will be further illustrated with narrative descriptions and supporting quotations in the sections that follow. In the first section of the results, the cross-case analysis is presented, followed by the participants' individual experiences.

Table 2

Personal Experiential Themes and Subthemes

Personal experiential themes	Subthemes	Theme clusters	Participant identifier
Life before abuse	Beliefs about love and commitment	Idealized expectations of long-term relationships; desire for marriage and stability; companionship; love as validation; cultural approval; falling in love with potential	Trinity, May, Evelyn, Bonnie, Raven, Donna, Lynette, Patience, Pinkie, Miracle
	Cultural and familial pressures	Expectations to marry early; pressure to stay even in difficulty; stigma of leaving; gendered norms framing partnership as a woman's duty; endurance as obligation	Evelyn, Lynette, May, Miracle, Patience, Pinkie, Trinity, Bonnie
	Formation of self and aspirations	Emphasis on education, careers, and independence; professional success (e.g., government service, social work,	Trinity, Donna, Raven, Evelyn, Patience, Pinkie, Lynette, Miracle, Bonnie

		advocacy); passion for teaching/literature; creativity and intellectual identity; drive to help others; early family influences shaping relationship openness	
Experience of abuse	Disruption of self	Erosion of self-esteem; questioning worth; gaslighting; internalizing negative messages; feeling “not pretty,” “not worthy”; loss of identity; need for self-reminders of worth; often faulted self and apologize to the abuser; doubted decision with living abusive relationship	Donna, Evelyn, May, Lynette, Patience, Raven, Pinkie, Miracle, Trinity, Bonnie
	Control, fear, and isolation	Physical abuse (e.g., smacked before work); gaslighting; confusion over staying/leaving; “falling in love with potential”; cycles of compassion and cruelty; intimidation; isolation from family/friends; excusing behavior (stress, work pressure); difficulty detaching due to investment; afraid of being alone, abuse was traumatizing	Trinity, Raven, Pinkie, Bonnie, Donna, Lynette, Patience, Miracle, Evelyn
	Awareness (red flags)	Early recognition of abuse but rationalized; “falling in love with potential”; dismissive attitudes toward women; abuser with	Trinity, May, Raven, Patience, Donna, Lynette, Pinkie, Miracle, Evelyn, Bonnie

		social life but participant restricted; making excuses for abuser's anger; firearm threats; calling law enforcement; self-blame; lack of financial independence; loss of social connections; staying in hope abuser would change	
	The weight of stigma and the healing power of connection	Stigma and shame; silence and secrecy; cultural expectations to "fix" relationship; dissociation (emotional and relational withdrawal); loss of social life; isolation by abuser; choosing not to date; desire for support and encouragement; moments of support (therapy, sharing as healing); disclosure as reclaiming agency	Evelyn, May, Patience, Miracle, Donna, Lynette, Pinkie, Trinity, Bonnie
Relationship formation	Struggles with forming relationships	Struggles with trust; comparison of partners; not having enough energy to split w/another person; difficulty with self-advocacy; deterred of future relationships; afraid with starting over; recovery process	Patience, Pinkie, Trinity, Bonnie, May, Miracle, Donna, Lynette, Evelyn
	Relationship expectations	Spend time together in knowing one another; identifies red flags (personality and character flaws); trust being earned, healthy boundaries; respect;	Lynette, Evelyn, Donna, Raven, Trinity, Miracle, Patience, May, Bonnie

	consistency; emotionally intelligent; friendship; a future; shared values; adventurous partner; more children	
Religious outlook	Belief in God; relationship with God; prayer life; reconnect with her faith; relied on bible scriptures; marriage	May, Miracle, Raven, Lynette, Bonnie

Personal Experiential Theme 1: Life Before Abuse

Life before abuse was defined by the interplay of personal ideals, cultural expectations, and formative experiences. Participants entered relationships with strong hopes for love and stability, shaped both by their family dynamics and societal norms that emphasized partnership. At the same time, they were accomplished, educated women with personal aspirations, balancing independence with deeply ingrained beliefs about the centrality of marriage. These pre-abuse narratives frame how participants later interpreted their experiences of IPV and their subsequent choices about intimacy and trust.

Subtheme 1.1. Beliefs About Love and Commitment

Participants often carried idealized expectations of long-term relationships. Many imagined marriage or stable cohabitation as the natural progression of adulthood, influenced by both personal desires and cultural messages about love. For some, the desire for stability and companionship overrode early red flags. Trinity described how she had “always been with somebody all my life” and did not recognize the signs of potential harm when entering her adult relationship. Similarly, May connected her

openness to commitment with an emotional longing that stemmed from her childhood, “I didn’t really know what it felt like to be loved by parents, so maybe that’s why I settled, I just wanted to feel love.” These expectations positioned relationships as both a source of validation and a pathway to stability, even when participants sensed misalignments between their ideals and their realities.

Subtheme 1.2. Cultural and Familial Pressures

Cultural and family norms strongly influenced relationship choices. Several women described being raised in contexts where marriage was not just expected but demanded, and where leaving a relationship carried stigma. Evelyn explained that “as a Black woman, you are expected to stay in a relationship, not just walk away. You are expected to fix it.” This belief kept her in a harmful partnership longer than she wanted, because she feared what family and friends would say. Lynette described similar expectations within her African cultural background, noting that once a young woman had basic education, “the next thing is just for you to get married and start having children as early as possible.” These cultural and familial pressures often complicated women’s ability to assess or exit harmful relationships, making endurance appear as duty and silence appear as protection.

Subtheme 1.3. Formation of Self and Aspirations

Despite these constraints, participants also described themselves as ambitious and independent women, with strong educational and career identities. Many entered relationships while pursuing advanced education or meaningful work, which became important anchors of identity and later resources for resilience.

Trinity, for example, holds a master's degree in social work and has served for over 20 years as a facility director with the U.S. Government, overseeing before- and after-school programs. She explained, "I'm a big advocate, for you know, treating people kind and with dignity and respect," adding that she has always felt called to advocate for those who could not advocate for themselves.

Raven also carried a deep sense of purpose into her relationships, shaped by surviving child trafficking and domestic violence. She expressed her passion for "helping other people that has been through some of the things that I've been through." Her advocacy extended to serving on an action board conducting research on intergenerational justice, and she was later invited to present grand rounds, positioning her lived experience as expertise.

Other participants described how early family dynamics shaped their openness to relationships. May linked her willingness to tolerate mistreatment in adulthood to early experiences of neglect. She reflected that, because she had not known what it felt like to be genuinely loved by her parents, she may have been more likely to accept unhealthy relationships later on in her search for affection. Patience highlighted her passion for literature and teaching as part of her identity before abuse, noting that she "also have this niche for trying to get people to also understand what I know, trying to share the knowledge I have with other people."

Taken together, these narratives reveal that participants entered relationships with strong personal aspirations and professional identities, yet also carried vulnerabilities shaped by family histories and a longing for love. Their drive for education, advocacy,

and creativity provided inner resources that later became central to their recovery, but these aspirations coexisted with cultural expectations that framed partnership as essential to womanhood.

Personal Experiential Theme 2: Experience of Abuse

The experience of abuse was marked by disruption of self, loss of autonomy, and deep psychological, physical, and spiritual consequences. Participants described how partners exerted control through intimidation and isolation, while simultaneously eroding their sense of identity and worth. Stigma and cultural expectations made disclosure difficult, often prolonging the violence. Yet within these narratives, turning points of recognition and support began to emerge, laying the groundwork for eventual recovery.

Subtheme 2.1. Disruption of Self

Participants consistently spoke about how abuse eroded their self-esteem, confidence, and sense of identity. Psychological manipulation and gaslighting led them to question their worth, often internalizing their abusers' negative messages. Donna explained that her partner constantly told her she was "not pretty" and "not worthy," until she began to believe it. Evelyn similarly reflected that years of emotional abuse left her feeling "like I was no one, like I was nothing." May described the same erosion of identity: "I had to remind myself that I wasn't the problem, and that I am worthy of the love that I give out." These accounts reveal how abuse was not only physical or verbal, but also an attack on the very core of selfhood.

Subtheme 2.2. Control, Fear, and Isolation

A defining feature of participants' experiences was the control exerted by their abusers, which fostered fear, confusion, and deep ambivalence about whether to stay or leave. All participants acknowledged that the abuse they endured was significant, difficult, and often began early in their relationships. Gaslighting was a common tactic, leaving them questioning their own perceptions and holding on to the hope that their partners might change. Several women admitted being initially driven by the abuser's potential or by glimpses of compassion that temporarily masked abusive patterns.

Raven recalled that her abuser would not allow her to leave the house freely, using intimidation to keep her isolated. Trinity recalled enduring both emotional and physical abuse, including being smacked by her partner just before leaving for work. Looking back, she reflected, "I knew probably three months in, but we as women and I well, I can only speak for myself. We fall in love with potential." She described her abuser as a "whole narcissist" who both gaslit her and exploited her vulnerabilities. At times, he showed great compassion, such as calling her on the anniversary of her son's death, yet he would later weaponize the same memory by accusing her of being a bad parent. This cycle of tenderness and cruelty kept her entangled and disoriented.

Pinkie similarly described how she did not realize the depth of the abuse until after the relationship ended. During the relationship, she excused her partner's behavior as the product of stress or workplace pressures. "There were lots of excuses," she admitted, noting the difficulty of detaching after investing three years of time and finances. Like others, she held onto the possibility of change, reflecting that "this person

is good to you, at other times they are terrible.” It was only after leaving that she recognized the full toxicity of the relationship and her own responsibility to act for her well-being.

Bonnie described the abuse she endured as deeply traumatizing. She acknowledged feeling afraid to start a new relationship and expressed mixed emotions, often believing that all men are the same because of her past abusive experience. She recalled that whenever she confronted her abuser about cheating, “the whole hellbust happened,” and he would become violent. For both Trinity and Pinkie, as for other participants, the combination of control, gaslighting, and intermittent “good moments” created a confusing cycle that prolonged the abuse. The oscillation between care and cruelty reinforced feelings of dependence, intensified fear of leaving, and isolated them from external sources of support.

Subtheme 2.3. Awareness (Red Flags)

A prominent dimension of women’s experiences of abuse was their awareness of warning signs, often noticed early but rationalized, minimized, or reinterpreted in ways that prolonged the relationship. Participants described excusing troubling behaviors, internalizing blame, or holding on to the hope that their partners would eventually change. For some, these red flags were subtle, rooted in attitudes or controlling tendencies; for others, they were overt threats to safety.

Trinity recalled that within just a few months she realized her relationship was not a good fit, yet she stayed because she believed in change. Looking back, she identified specific red flags, including her abuser’s dismissive attitude toward women and how he

treated his own mother. She later reflected that missing or ignoring these warning signs left her vulnerable, “I struggled with having missed red flags in the beginning of the relationship.” May similarly described excusing her abuser’s conduct because she longed for love and stability. “I just kept making excuses, and that was so bad,” she explained. Out of seven days, she said, only one might be peaceful, but she convinced herself that her partner was merely angry. Another red flag was that while her abuser maintained a social life, she was not permitted to have one, leaving her increasingly isolated. Raven recounted more dangerous red flags. Her abuser threatened her with a firearm, forcing her to call law enforcement. Despite the severity of this violence, she described moments of self-blame, feeling responsible for his outbursts.

This confusion between danger and guilt illustrates how survivors can internalize threats rather than interpret them as clear signals to leave. Patience acknowledged that lack of financial independence and the resulting loss of social connections made it harder to act on warning signs. She admitted staying in part because she believed “the longer she stayed in [the] abusive relationship she would learn to cope,” and she hoped her partner would eventually change. Across these accounts, participants recognized patterns, from controlling behaviors and gendered attitudes to overt violence, yet each found ways to rationalize or downplay the red flags. Emotional investment, cultural beliefs, and the desire for love and stability shaped how they interpreted abuse, reinforcing the cycle of endurance.

Subtheme 2.4. The Weight of Stigma and the Healing Power of Connection

Participants described how stigma and shame surrounding abuse often led to silence, self-blame, and withdrawal from social connections. Cultural expectations to endure relationships, combined with fear of judgment from friends, family, or community members, created an environment where women felt they could not disclose what they were experiencing. For some, this silence deepened into dissociation, a way of disconnecting from emotions or relationships to cope with the abuse.

Silence often felt like the only option, even when abuse became unbearable. Shame, fear of disbelief, and pressure to endure relationships left participants feeling isolated and unsupported. May explained that women “just bottle up the whole feelings, the whole experience. We don’t get to talk about it with other people” because of stigma and shame. Evelyn echoed this point, describing how community expectations made her feel she had to stay and “fix” the relationship rather than expose the abuse.

For some, this silence was reinforced by dissociation, both emotional and relational. Participants described emotionally withdrawing to cope with the pain of abuse and isolating themselves from others to avoid questions or judgment. Evelyn recalled that her friends not only failed to support her but even advised her to stay: “I feel like if they actually did care about me, you know they would advise me or do something about it.” After one friend told her she was overreacting, Evelyn now dissociates by not allowing people into her personal life.

May similarly acknowledged that the abusive experience caused her to dissociate from her emotions and from others. She explained that intimacy is no longer an option,

stating she has chosen not to date and prefers to be alone. During her relationship, her partner isolated her to the point of having “no social life” and “no support because he chased everyone away from me, and it was just me.” Looking back, she reflected that if she had not been so isolated, she might have confided in others about the abuse. In that environment, she began to disconnect emotionally and chose not to pursue intimacy after leaving. She acknowledged, however, that words of encouragement and support could have helped: “Had I not been isolated, I would have confided about the abuse endured.”

These accounts reveal how stigma not only silenced participants but also contributed to patterns of dissociation that furthered isolation. Dissociation became both a self-protective strategy and a painful reminder of how deeply abuse undermined their sense of connection to others. While stigma often silenced them, participants also described moments when support disrupted this pattern. For Patience, therapy became a critical turning point after encouragement from family: “I had to start seeing a therapist, and that was the first step I took for my healing.” Miracle also reflected on the importance of sharing, noting that telling her story felt like therapy for herself and potentially for others who might learn from her experience.

Together, these accounts illustrate how stigma and shame constrained participants’ voices, sometimes leading to dissociation and deeper isolation. Yet the same narratives reveal that disclosure, whether to a trusted professional, family member, or through participation in the study, became a vital step in reclaiming agency. This subtheme captures both the silencing power of stigma and the transformative potential of supportive responses that made healing possible.

The theme of experience of abuse illustrates how IPV profoundly disrupted women's lives by undermining identity, enforcing isolation, and silencing their voices. Participants' accounts revealed a pattern of psychological manipulation, fear, and stigma that prolonged the violence and deepened its impact. At the same time, the narratives point to moments of resilience and recognition, when family, therapy, or opportunities to share stories created openings for support. These experiences highlight both the enduring harm of abuse and the seeds of resistance that later informed recovery and redefinition of self.

Personal Experiential Theme 3: Relationship Formation

The third personal experiential theme prevalent among all participants was relationship formation. This theme captures how survivors described their experiences navigating intimacy and trust after enduring IPV. Participants negotiated their recovery journeys, approached intimacy with new levels of caution, and redefined both their sense of self and their expectations for relationships. The accounts reveal that healing was not linear but deeply personal, shaped by therapy, creative outlets, spirituality, and family support. Participants described balancing a desire for love and companionship with a profound fear of repeating the cycle of abuse. In this process, many emphasized self-love, independence, and education as foundations for future relationships.

Relationship formation was central across the sample, encompassing women who had started new romantic relationships, those who deliberately chose to remain single, and those who cautiously re-entered dating while hoping for healthier outcomes. Among

the ten participants, three had entered new relationships, six had chosen to remain single, and one had begun dating with hope that the relationship would succeed.

Subtheme 3.1. Struggles With Forming Romantic Relationships

A prominent topic was the struggle to form romantic relationships after experiencing IPV. Whether participants had started a new relationship or chosen to remain single, many found it difficult to reengage in romantic partnerships. All participants reported developing trust issues that continued to affect them in various ways. Several discussed avoiding vulnerability to protect themselves from being hurt again. Some participants also reported that their abusive relationships had damaged their overall sense of trust, affecting not only romantic relationships but other relationships as well.

Trust was a pervasive concern in post-abuse relationships. Participants spoke about becoming hypervigilant, carefully monitoring for “red flags” and often defaulting to suspicion to protect themselves from harm. This heightened awareness shaped their relational choices: some avoided intimacy entirely, while others maintained strict boundaries as they cautiously explored new partnerships. For many, remaining single was itself a protective strategy, reflecting both fear of repetition and empowerment through self-preservation.

Across narratives, women conveyed ambivalence, torn between a desire for intimacy and a fear of being harmed again. Some longed for companionship but hesitated to fully trust; others engaged in dating slowly and cautiously, testing partners’ respect for boundaries and emotional safety. For those who remained single, the choice was not

framed as failure but as self-care. Ambivalence revealed both the enduring imprint of trauma and the agency participants exercised in deciding what forms of intimacy felt safe.

Patience has chosen to remain single after briefly starting a new relationship, as her struggle with trust made her realize she was not ready. The participant discussed that her new romantic partner would cancel appointments for various reasons, and she acknowledged that she often felt he was making excuses. She allowed her past experience to shape her expectations in the new relationship, where she found herself making comparisons: “I expected the person to be dishonest, just because I had experienced that in the past.”

Pinkie, who has also decided to remain single, choosing to “concentrate on my well-being,” acknowledged that she has taken the right path, as positive results are now evident. She reflected that she lost a great deal during the abusive relationship, though this realization only became clear after leaving it. While in the relationship, she wished for change, convincing herself that her abuser would change. She later realized that it was she who needed to change. It was by taking “that 1st step” that she began her journey of healing. This marks the beginning of her healing process; she has no plans to form a new relationship, feeling that she does not have “enough energy to split between myself and somebody else.” She acknowledged that she still needs more time to focus on caring for herself.

Trinity has chosen to “absolutely not” become involved in a new romantic relationship. This participant, an older woman with a prominent professional career advocating for those without a voice, described how difficult it was to advocate for

herself. She discussed how hard it was to acknowledge that she was being manipulated by her abuser, often second-guessing what she already knew to be true. The abusive relationship has deterred her from pursuing future romantic relationships. She stated, “I haven’t even given anybody else the opportunity to look fool me once you will, that that will never happen to me again.” Trinity has firmly determined not to give up her autonomy again.

Bonnie acknowledged that she is afraid of starting a new romantic relationship. She discussed how the abusive relationship affected her physically, socially, emotionally, and psychologically, at times making her want to give up. She stated that she had stayed in the house for two months after her IPV experience. Bonnie recalled that she entered the abusive relationship when she was 22 years old, and leaving it behind after five years was not easy. She reflected on the theory that starting a new relationship can help heal from a past one, though she expressed doubt about it. She stated, “I’m just scared like I don’t know what would happen,” believing that it is too soon to start again. She acknowledged that trust remains a major concern and that she is giving herself time and space to recover.

The narratives within this subtheme illustrate the complex and often painful process of navigating intimacy after abuse. For many participants, trust emerged as both a barrier and a site of healing, shaping how they approached or avoided new romantic relationships. While some women cautiously explored new partnerships, most chose to remain single as an act of self-protection and empowerment. Their reflections reveal a deep awareness of vulnerability, a redefinition of emotional boundaries, and a

commitment to self-preservation over societal expectations of partnership. Collectively, these experiences demonstrate that the struggle to form new relationships after IPV is not solely rooted in fear but also reflects a conscious effort to rebuild safety, autonomy, and self-worth.

Subtheme 3.2. Relationship Expectations

Relationship expectations were often not carefully considered prior to entering romantic relationships. However, most participants reported that their experiences with IPV reshaped their understanding of what healthy relationships should look like moving forward. Their new expectations now center on emotional safety, trust, love, companionship, and shared values. Many expressed a desire for romantic relationships that begin with genuine friendship, allowing emotional intimacy and trust to develop gradually. They also emphasized the importance of acknowledging red flags early and determining whether a relationship is worth pursuing.

Along with the new relationship expectations, participants described their redefinition of intimacy and selfhood. Participants emphasized self-love, independence, education, and careers as priorities, often placing these above traditional expectations of partnership. By centering their own growth, they shifted from dependence to autonomy, reimagining what it meant to be fulfilled outside of or alongside relationships. Several women described participation in this study as itself healing and empowering, providing a platform to voice experiences that had long been silenced. Participants articulated new definitions of healthy love, relationships grounded in respect, equality, and care rather than endurance or obligation.

Lynette described her new relationship as one that naturally evolved from friendship. She and her partner spent considerable time together before becoming romantically involved, which made the transition feel smooth. She identified her ability to recognize red flags, such as personality and character flaws, as one of the most valuable lessons gained from her abusive experience. This awareness has helped her feel more confident in her current relationship, which she characterized as stable and grounded in trust. Knowing her partner for over a year before dating, she believes, has made all the difference.

Similarly, Donna described how friendship laid the foundation for her new romantic relationship, which she began a year after leaving her abusive partner. She expressed a renewed belief that men can respect and not abuse women. Reflecting on her new relationship, she stated that it is awesome. Donna acknowledged that, at times, she has tested her new partner to see whether he would react like her abuser, saying she was seeking reactions of becoming abusive. To her relief, those fears were not realized. She now envisions a future with her partner, something she could not imagine in her previous relationship.

Evelyn also shared that she is happy in her new romantic relationship, though she admits she has not found complete peace. She described finding reassurance in the ways her new partner demonstrates care for her and attention toward her son, acts that reinforce her sense of being deserving of love. Evelyn articulated clear expectations for her relationship: trust must be earned, emotional safety is essential, and her partner must

demonstrate emotional intelligence. She added that intimacy, respect, and consistency are also vital components of a healthy partnership.

Raven reflected on how she initially entered relationships without clear expectations but now recognizes the importance of defining them. She reported feeling safe in her current relationship, something entirely absent from her past. For Raven, mutual understanding and communication are critical, saying there is nothing that you can't get through. For Raven, mutual understanding and communication are critical, as she stated, "There's nothing that you can't get through." She explained that how a partner responds when "I don't act the way you want me to act" will be something she considers carefully, recalling how she had been in survival mode during the abusive relationship. Her expectations now include a long-lasting and loving relationship, marriage, well-defined roles with respected boundaries, an adventurous partner, and more children.

Trinity, on the other hand, has chosen not to enter a new romantic relationship but shared her vision for what she expects when she does. Emotional intelligence, she emphasized, is nonnegotiable. She explained that her future partner's response to conflict will be a key indicator of compatibility, noting that when I don't act the way you want me to act, that's going to tell me everything. Reflecting on her past, she recalled being in survival mode during the abusive relationship, constantly managing her reactions to avoid conflict. Her new standard is emotional safety through maturity and self-regulation.

Miracle expressed both fear and hope about future romantic relationships. Although she hopes to marry again, she admitted that her recent attempt at a new relationship ended early because she felt emotionally unprepared. She reflected on how

much she compromised in her previous relationship, driven by love, the hope her abuser would change, and concern for their child. She stated firmly, I can't compromise like that again. For now, she chooses to lean on her faith for guidance, saying I've decided to lean on God in directing me in a new relationship. Miracle also emphasized the importance of appearing strong and confident, believing that weakness gives off being taken advantage of.

Across these narratives, participants demonstrated a shared awareness of how their experiences with IPV redefined their expectations for love and partnership. Lynette, Evelyn, Donna, and Raven each described relationships that began as friendships, underscoring the value of trust and familiarity before romantic commitment. Evelyn and Trinity both emphasized emotional intelligence as a key expectation, while Miracle and Donna highlighted the balance between vulnerability and self-protection. Collectively, their stories reflect a process of healing through self-awareness, one that replaces fear and tolerance with intentionality, emotional safety, and higher standards for love.

Subtheme 3.3. Religious Outlook

This overarching subtheme reflects how participants were influenced both by expectations of marriage, settling into romantic relationships and starting a family, and by the incorporation of faith and religious beliefs into their relationships and daily lives. Marriages grounded in religion were viewed as God-favored, with the belief that such unions would withstand both good and difficult times. Participants described being raised in contexts where marriage was expected, and where being in a romantic relationship without marriage carried stigma.

Bonnie believed that “successful marriages” occurred when both partners shared the same faith. She further acknowledged “a place of religion or belief whereby if you like, you can’t divorce, you can’t, you know, quit from relationship.” However, she has now determined that such beliefs will not leave her trapped in toxicity or silence her to the point of risking her life. Several participants acknowledged that they had disconnected from their faith while in abusive relationships but later realized that their belief systems have helped or are helping them navigate life after experiencing IPV.

May has determined that she will pray for the spirit of discernment before starting a new romantic relationship. She believes that the spirit of discernment will allow her to “know when someone is actually real and someone who wouldn’t hurt me like that anymore.” Her belief system previously included the idea that one should be married by age 30 and have “2.3 kids,” though this view has since changed. May now believes that God wants her to focus on herself, “do the things that we love to do, build ourselves, grow,” and no longer revolve her life around others.

Raven recalled relying on Bible scriptures and positive energy to keep herself from giving up. She explained that her faith was what helped her endure the abusive relationship. A scripture she holds close states that “the Bible says you need to have faith of the size of a you know mustard seed,” which she interprets as an energy that “never lies.” Raven expressed a desire for her romantic partner to share similar beliefs and to “believe in God,” noting that she herself has grown closer to God.

Miracle also described experiencing spiritual changes, acknowledging that her spirituality was affected during the relationship. Because she loved her abuser and shared

a child with him, she did not want “nothing to end.” She stated, “you end up forgiving that person, compromising too much,” but eventually realized that beyond her religious beliefs, she needed to leave the violent relationship. She explained that her renewed spiritual growth has helped her as she considers entering or building a new romantic relationship. She stated, “I will try to involve God,” emphasizing that she does not want to repeat the same mistakes of her past. She explained that she will be prayerful in entering a new relationship and will seek discernment and revelation to ensure that “the next person [is] right for her.”

This subtheme highlights how faith and spirituality served as a foundation for healing and guidance as participants rebuilt their lives and redefined their relationships after IPV. Reconnecting with their religious beliefs provided strength, clarity, and a renewed sense of purpose. For many, faith became both a coping mechanism and a moral compass, shaping their expectations for future relationships and reinforcing self-worth. Participants described prayer, scripture, and discernment as essential tools for emotional recovery and for safeguarding against repeating past patterns. Participants’ narratives illustrate how spiritual renewal functioned not only as a source of resilience but also as a means of reclaiming agency, guiding them toward self-growth and more intentional expressions of love and trust.

Individual Experiences

Donna is a social worker who is passionate about working with the elderly population. She hopes to advocate for other women who have experienced IPV and to ensure they have someone to talk to “without being nervous or being scared” as they seek

to leave abusive situations. Donna recalled that her mother was a strong source of support in helping her escape her abusive relationship. She was in the relationship for two years and deeply in love with her abuser, with whom she lived, although she gradually lost many of her friendships. Her abuser “restricted” her interactions with friends and even went as far as locking her inside the home. Donna is now in a new relationship; however, she initially felt hesitant, believing that all men were the same. Over time, she has come to recognize that her current partner is not like her abuser. Eight personal experiential themes were identified for Donna: (a) beliefs about love and commitment, (b) formation of self and aspirations, (c) disruption of self, (d) control, fear, and isolation, (e) awareness/red flags, (f) stigma, silence, and support, (g) struggles with forming relationships, and (h) relationship expectations.

Lynette spent five years in an abusive relationship. She did not marry or have children, and her fear of being alone made it difficult to leave. As she explained, “You just have the fear that when you move out nobody is going to come to you anymore, like you’re not going to find someone else.” She was raised with the cultural and familial belief that her life’s purpose was to marry and have children. Lynette often blamed herself for the relationship not working, believing that she had become too vulnerable. After leaving the abusive relationship, she experienced significant psychological and social changes, becoming more self-aware and independent. Analysis of Lynette’s data revealed ten themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of

connection, (h) struggles with forming relationships, (i) relationship expectations, and (j) religious outlook.

Patience identifies as a “carefree, vibrant person,” though she acknowledges that the abusive relationship changed her. After leaving the relationship, she described feeling diminished, stating, “It felt like I had shrunk.” She became depressed and experienced recurring flashbacks of the abuse, recalling the difficulty she had sleeping and the distress of feeling, “I’m reliving the experience over again.” Patience noted that therapy has been helpful, allowing her to develop effective coping skills. Her parents encouraged her to seek therapy and have been a significant source of support. Although she has attempted to start a new romantic relationship, she discontinued it, feeling that she was not ready. She explained, “Another factor that actually influenced my decision was the fact that I still wasn’t able to completely trust the person.” Patience admitted that she continues to struggle with trust, something she has not yet fully rebuilt. Analysis of Patience’s data revealed nine themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, (h) struggles with forming relationships, and (i) relationship expectations.

Raven, a survivor of childhood trafficking, has developed a strong passion for helping others who have experienced similar forms of abuse. She has become an advocate across several platforms, including serving on an action team board, participating in a research study addressing intergenerational justice, and presenting in grand rounds with another organization. Raven has also been employed with Planned

Parenthood and is working toward certification as a doula. She views childbirth as sacred and, as a young mother herself, wants other young mothers to have the privilege of a positive birthing experience. Raven acknowledged that her recovery remains an ongoing process. She recalled a particularly violent episode during her abusive relationship, sharing that her abuser “had his gun, spit in my face and my son’s face when I had him, holding me, fighting me constantly.” Law enforcement was called multiple times during the relationship. She stated that she was not an active parent during that period and often blamed herself, questioning what she had done to cause the abuse. Now in a new romantic relationship, Raven reports feeling happy and notes that it is much healthier than her previous experiences. She expressed appreciation for open communication, stating that she is “able to talk to my partner,” something that was absent in her past abusive relationships. Currently in therapy, Raven has become increasingly aware that mutual understanding and communication are essential for healthy relationships. Analysis of Raven’s data revealed seven themes: (a) beliefs about love and commitment, (b) formation of self and aspirations, (c) disruption of self, (d) control, fear, and isolation, (e) awareness/red flags, (f) relationship expectations, and (g) religious outlook.

Pinkie identifies as a social and outgoing person who, coming from a large family, is very family-oriented. She remained in her abusive relationship for some time, hoping that her abuser would change. Reflecting on that period, she shared, “Maybe I would still be thinking that things will get better with time.” She acknowledged that she made excuses for her abuser, attributing his behavior to “stress on him,” though she eventually realized that she was the one who needed to make a change. Pinkie admitted

that she once doubted her decision to leave but is now confident that she made the right choice and wishes she had done it sooner. She recognizes that leaving the abusive relationship has been a difficult journey but has since dedicated her time to focusing on herself. Pinkie is learning to put herself first and is becoming increasingly aware of her self-worth and value. She hopes to inspire other women to prioritize self-love and healing, encouraging them to rebuild their lives. As she expressed, “Don’t be afraid to begin, you know. Go back to the scratch, rewrite your story again,” reminding others not to focus on how many times they have to start over. Analysis of Pinkie’s data revealed eight themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, and (h) struggles with forming relationships.

May is single and experienced an abusive relationship that lasted two years. She takes pride in her work as a talented braider and shared that she finds joy in “seeing women smile after getting a new hairstyle.” May described enduring the abuse without involving law enforcement out of fear that she would be perceived as the aggressor and risk being arrested. She is adamant that she will never allow herself to become involved in such a situation again. Refusing to succumb to societal and religious pressures to be in a relationship because of her age, marital status, or lack of children, May emphasized her independence and self-worth. She reflected on the cultural expectation that Black women must remain strong, noting that “you can’t break down,” even when “you’re losing your mind behind closed doors.” May described having a strong faith in God but

acknowledged that she had walked away from her faith while in the abusive relationship. During that time, she stopped praying and attending church as her life began to revolve entirely around her abuser. He isolated her from friends and family while maintaining his own social life. Now, May exemplifies patience and trust in God as she awaits the right time for a new romantic relationship. She believes that love will come when it is meant to and shared her faith-driven perspective: “Sometimes we have to let God do His thing, and while we’re waiting on God, we have to work on ourselves to do the things that we love to do, build ourselves, grow.” Analysis of May’s data revealed eight themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) disruption of self, (d) awareness/red flags, (e) the weight of stigma and the healing power of connection, (f) struggles with forming relationships, (g) relationship expectations, and (h) religious outlook.

Miracle presents as a committed and creative person who enjoys contributing to others’ lives, particularly those of Black women. She is independent, driven, and passionate about personal growth and helping others. Miracle was in an abusive relationship for five years and has been out of that relationship for nine months. She attested that “love is blind,” recalling how she would forgive and forget the abuse she endured. Miracle shared that she loved her abuser and did not want the relationship to end, reflecting, “I was compromising too much, but it reaches a point that you cannot absorb it anymore.” A month ago, Miracle considered starting a new romantic relationship but acknowledged that she “isn’t ready.” She admitted struggling with being single, especially when around colleagues who talk about their spouses and family

activities, which sometimes triggers feelings of dissociation. Miracle recognized that she had begun to dissociate during the relationship about a year before it ended, and that this emotional distancing helped her realize that the relationship was unhealthy. She explained that dissociation ultimately allowed her to disengage and see the truth more clearly: “Just accept the reality as much as I was trying to protect it.” Miracle identified her most difficult challenge as co-parenting with her abuser, explaining that having a child together forces her to maintain communication for the child’s sake. Since leaving the abusive relationship, she has chosen to include God in every aspect of her life and relies on her faith for guidance and strength. Analysis of Miracle’s data revealed ten themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, (h) struggles with forming relationships, (i) relationship expectations, and (j) religious outlook.

Trinity, a social worker in the helping profession and an advocate for individuals who have endured trauma, found that her professional role and advocacy work sometimes conflicted with her personal life and romantic relationships. Currently pursuing a doctorate degree, she described how her academic and professional identity contributed to her silence about the abuse. Fear that her reputation could be tarnished or that her professional image could be scorned led her to conceal her experiences. Trinity described her abuser as “a whole narcissist.” Before the abusive relationship, Trinity was vibrant, strong-willed, and a social extrovert. However, the isolation during the COVID pandemic

left her longing for companionship and human connection, which made her more vulnerable. She acknowledged that she realized within three months that the relationship was not a good fit. As a divorcee and an empty nester, she was ready for new opportunities and adventures, believing that starting over romantically was an experience she deserved at this stage in her life. Cultural expectations that stemmed from her upbringing also influenced her decision to keep the abuse secret. Although she has since moved forward, the experience continues to affect her willingness to enter a new romantic relationship. Despite this, Trinity demonstrates resilience and strength, having regained her self-confidence and a renewed sense of self-worth. As she expressed, “Oh, I am valuable, right? Very valuable, and it took me a minute to get there.” Trinity now has a clear sense of what she expects in any future relationship. Her foremost expectation is emotional intelligence, which she described as the most essential quality for any form of romantic involvement. Analysis of Trinity’s data revealed nine themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, (h) struggles with forming relationships, and (i) relationship expectations.

Evelyn is a mother of one son who endured IPV in her first romantic relationship. She was in the abusive relationship for three years, beginning to experience abuse approximately two years into it. Evelyn initially believed she could change her partner by contributing positively to his life. After meeting him, the attention and affection he provided, something she deeply desired, made her remain in the relationship despite the

emerging abuse. She admitted that she fell in love with her abuser's potential and the repeated promises that he would change, which further prolonged the relationship. Evelyn is now in a new romantic relationship of two months, which she has chosen to keep private. However, she continues to struggle with trust and expresses doubt about the new relationship. Despite her hesitations, she shared, "I just have to do it because I want to feel loved," acknowledging both her longing for connection and her internal conflict. Evelyn is drawn to her new partner largely because of the affection and care he shows toward her son. She noted that he adores her son and treats him well, which has influenced her decision to remain in the relationship. Analysis of Evelyn's data revealed nine themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, (h) struggles with forming relationships, and (i) relationship expectations.

Bonnie experienced a healthy romantic relationship during high school, which ended a few years later due to the challenges of maintaining a long-distance relationship. When she entered a new romantic relationship, she did not anticipate becoming a victim of domestic abuse. She recalled noticing that her abuser smoked at the beginning of the relationship but did not consider it a problem at the time, as several of her loved ones also smoked. Reflecting on the experience, she stated, "I think I wouldn't date a smoker again."

Bonnie remained in the abusive relationship for 5 years, with the abuse beginning to surface halfway through. Culturally, she felt the expectation to manage personal

struggles independently and to embody the strength associated with being a strong Black woman. This belief contributed to her decision to conceal the abuse. She described feeling embarrassed about her situation and suffering in silence for a significant period. Bonnie lacked trust and feared that her experience would not be taken seriously. It was not until the abuse became physical that she remembered she had a family who loved her, which prompted her to reach out for help. She shared, “And you know I had to, you know, reach out to my mom and tell her everything I was going through.” Her mother became a crucial source of support and encouraged her to leave the relationship. Now, Bonnie remains cautious about entering a new romantic relationship and is giving herself time to recover. She has developed clear expectations for any future partner, emphasizing the importance of shared faith and values. She stated that her new partner must “share the same religious background, the one I coincide with, which is Christianity,” and abstain from drug use. Analysis of Bonnie’s data revealed ten themes: (a) beliefs about love and commitment, (b) cultural and familial pressures, (c) formation of self and aspirations, (d) disruption of self, (e) control, fear, and isolation, (f) awareness/red flags, (g) the weight of stigma and the healing power of connection, (h) struggles with forming relationships, (i) relationship expectations, and (j) religious outlook.

Summary

This chapter presented the context of the study, the data collection methods, and the data analysis procedures used to develop themes from participants’ interviews describing how Black educated women experience relationship formation after IPV. It also outlined the steps taken to ensure quality and trustworthiness and introduced the

results of the study. Semi-structured interviews were conducted via Zoom with 10 participants who met the study's criteria. All interviews were audio recorded, transcribed verbatim, manually coded, and organized into major themes.

The findings of this study reveal that Black educated women describe their experiences forming relationships after IPV as a process of rebuilding trust, redefining intimacy, and reclaiming selfhood. Their narratives reflect an ongoing negotiation between vulnerability and self-protection, shaped by trauma, cultural expectations, and personal growth. Relationship formation after IPV was not a linear process but rather a deeply reflective journey grounded in healing, faith, and empowerment.

Across participants, trust emerged as the most pervasive theme, influencing every aspect of relational decision-making. Many participants reported heightened vigilance toward "red flags," emotional withdrawal, and fear of re-experiencing abuse. While some cautiously entered new relationships, others deliberately chose to remain single as an act of self-preservation and healing. This ambivalence reflected both the lingering impact of trauma and a conscious assertion of autonomy.

Participants' relationship expectations were profoundly reshaped by their past experiences. Mutual respect, honesty, and friendship were identified as essential foundations for future relationships. For several women, friendship became the gateway to romantic connection, offering emotional safety and trust-building before intimacy. Others prioritized self-love, career growth, and independence, redefining fulfillment beyond traditional expectations of marriage or partnership.

Faith and spirituality also played a central role in the women's recovery and relational outlook. Participants described prayer, discernment, and reconnection with God as guiding forces in their decision-making and healing processes. Spiritual renewal provided both strength and moral grounding, helping them navigate future relationships with greater clarity and purpose. The women in this study reframed love through the lens of self-worth and emotional safety, emphasizing that healthy relationships must be rooted in mutual respect and authenticity. Their journeys demonstrate resilience and empowerment, as each woman sought to rebuild not only her capacity to love others but also her capacity to love herself. The next chapter provides an interpretation of these findings in relation to the existing literature, discusses their implications for research and practice, and offers recommendations for future studies.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

IPV is a global health crisis that has persisted for many years, affecting individuals across all genders, races, ethnicities, and SESs (CDC, 2023). Although IPV is not exclusive to any one group, it disproportionately impacts women, particularly women of color. Black educated women remain both underrepresented and underreported in IPV research. The purpose of this qualitative phenomenological study was to explore how Black educated women describe their experiences forming relationships after experiencing IPV. Data were collected through semi-structured interviews with ten participants who self-identified as college-educated Black women and who had been out of their abusive relationships for a minimum of six months. This study sought to understand the ways these women make meaning of intimacy, trust, and selfhood in the aftermath of abuse, illuminating how past trauma and cultural expectations influence their approach to future relationships.

IPA analysis revealed three major themes: life before abuse, experience of abuse, and relationship formation. Before the abuse, participants described ideals of love, cultural and familial pressures, and personal aspirations shaped by education, independence, and a desire for companionship. During the abuse, their narratives reflected control, fear, identity disruption, and the silencing effects of stigma. In the aftermath, participants discussed struggles with forming romantic relationships, redefining expectations, and drawing on faith and spirituality as pathways to healing. These findings illustrate how Black educated women navigate the complex process of

rebuilding trust, reclaiming agency, and forming new understandings of love and self after IPV. The following sections present an interpretation and discussion of the findings, the limitations of the study, recommendations for future research, implications for positive social change, and a conclusion.

Interpretation of the Findings

The findings of this study confirm and expand existing knowledge about the experiences of Black educated women in forming relationships after IPV. Participants provided rich insight into how they describe and make sense of their relationship experiences following abuse. The themes that emerged from this study are consistent with and supported by findings in the existing literature. Furthermore, by comparing these results with prior research, this study deepens the foundational understanding of how Black educated women navigate intimacy, trust, and selfhood after experiencing IPV.

Personal Experiential Theme 1: Life Before Abuse

Life before abuse was defined by the interplay of personal ideals, cultural expectations, and formative experiences. Participants entered relationships with strong hopes for love and stability, shaped by both family dynamics and societal norms that emphasized partnership. At the same time, they were accomplished, educated women with personal aspirations, balancing independence with deeply ingrained beliefs about the centrality of marriage. These pre-abuse narratives shaped how participants later interpreted their experiences of IPV and influenced their subsequent choices about intimacy and trust.

Participants in this study conveyed that they carried idealized expectations of long-term relationships, such as marriage or stable cohabitation, often influenced by personal desires as well as cultural and familial pressures. These expectations positioned relationships as both a source of validation and a pathway to stability, even when participants sensed misalignments between their ideals and their realities.

Previous research has shown that Black women's experiences with IPV are strongly shaped by societal and cultural norms, including the strong Black woman stereotype, expectations of privacy, and religious influences, which often discourage them from seeking help (Hill Collins, 2000; Morrow, 2024).

Cultural and religious beliefs also play a significant role in shaping IPV experiences. Black American women who strongly identify with religion, particularly those affiliated with the Black Church, often endure IPV for longer periods and in greater secrecy than those who are less religious (Davis et al., 2021). Research indicates that nearly two-thirds of students attending HBCUs have experienced IPV (Barrick et al., 2013; Bremond et al., 2013; Hall et al., 2022). However, these students often interpret IPV through a cultural lens, sometimes perceiving it as a justified consequence of certain behaviors. Many have been raised in environments where corporal punishment and physical discipline are normalized, which contributes to the perception that only severe physical violence constitutes IPV, while psychological, emotional, and verbal abuse may go unrecognized (Hall et al., 2022).

Further studies have indicated that Black women—particularly those who are educated—face additional challenges in forming new relationships due to partner

scarcity, gender ratio imbalances, and deeply ingrained beliefs about resilience and self-sacrifice (Adeyinka-Skold, 2020; Boyd et al., 2021). Despite these constraints, participants described themselves as ambitious and independent women with strong educational and career identities, which served as important anchors of self and later as sources of resilience. These inner resources became central to their recovery. However, participants' personal aspirations and ambition coexisted with cultural and religious expectations that framed partnership as essential to womanhood.

Personal Experiential Theme 2: Experience of Abuse

The experience of abuse was characterized by a disruption of self, a loss of autonomy, and profound psychological, physical, and spiritual consequences. Participants described how their partners exerted control through intimidation and isolation while simultaneously eroding their sense of identity and self-worth. Stigma and cultural expectations often made disclosure difficult, thereby prolonging the violence. Yet within these narratives, turning points of recognition and support began to emerge, laying the foundation for eventual recovery.

Participants consistently spoke about how abuse eroded their self-esteem, confidence, and sense of identity. The abuse discussed was not only physical or verbal but also involved psychological manipulation and gaslighting, which led them to question their worth and internalize their abusers' negative messages. According to the Centers for Disease Control and Prevention (CDC, 2023), one in three women will experience some form of IPV. Among Black women, more than one-third of IPV cases involve physical abuse. As a vulnerable population, Black women face significant disparities that affect

their mental and physical well-being, with some IPV cases even resulting in loss of life (Powell Sears, 2021; Rennison & Welchans, 2000).

Participants conveyed that a prominent aspect of their experiences with abuse was their awareness of warning signs, often noticed early in their relationships but rationalized, minimized, or reinterpreted in ways that prolonged them. They described excusing troubling behaviors, internalizing blame, and holding on to the hope that their partners would eventually change. For some, these red flags were subtle, rooted in attitudes or controlling tendencies; for others, they manifested as overt threats to safety.

Previous research has shown that psychological, emotional, and verbal abuse are often not recognized as forms of violence (Hall et al., 2022). Despite their education, some Black women may not perceive IPV through a societal framework but rather through deeply ingrained cultural beliefs. For those raised to accept corporal punishment as a justified response to inappropriate behavior, IPV may not be viewed as an act of violence unless it is both severe and physical (Hall et al., 2023). These underlying beliefs influence whether individuals acknowledge IPV as abuse or dismiss it as a normalized aspect of relationships.

Personal Experiential Theme 3: Relationship Formation

The third personal experiential theme that emerged across all participants was relationship formation. This theme captures how survivors described their experiences navigating intimacy and trust after enduring IPV. Participants negotiated their recovery journeys, approached intimacy with new levels of caution, and redefined both their sense of self and their expectations for relationships. The findings reveal that healing was not

linear but deeply personal, shaped by therapy, creative outlets, spirituality, and family support. Participants described balancing a desire for love and companionship with a profound fear of repeating the cycle of abuse. Throughout this process, many emphasized self-love, independence, and education as essential foundations for future relationships.

Relationship formation was a central theme across the sample, encompassing women who had entered new romantic relationships, those who deliberately chose to remain single, and those who cautiously re-entered dating while hoping for healthier outcomes. Among the ten participants, three had begun new relationships, six had chosen to remain single, and one had started dating with the hope that the relationship would succeed. For Black women, relationship formation is further complicated by the issue of partner availability. Many face significant challenges in finding suitable partners, particularly when seeking to establish relationships within the same racial group (Harawa et al., 2014; Romano, 2018). Studies indicate that Black women, particularly those who are educated, face additional challenges in forming new relationships due to partner scarcity, gender ratio imbalances, and deeply ingrained beliefs about resilience and self-sacrifice (Adeyinka-Skold, 2020; Boyd et al., 2021).

Participants in this study, whether they had started a new relationship or chosen to remain single, found it difficult to engage in romantic relationships. All reported developing trust issues that continued to affect them in various ways. Several participants expressed reluctance to become vulnerable again for fear of being hurt.

Research highlights the long-term psychological and relational consequences of IPV, including difficulty establishing new intimate relationships, compromised self-worth, and

the need to renegotiate personal boundaries (Czerny et al., 2018; St. Vil et al., 2021). Many survivors enter new relationships still burdened by fear, mistrust, and unresolved trauma, which often manifests as avoidance, hypervigilance, or the acceptance of unhealthy dynamics. Despite leaving abusive relationships, many remain psychologically entrapped by past experiences, underscoring the need for interventions that promote self-reclamation, boundary-setting, and emotional healing.

Conceptual Framework

This study employed a conceptual framework grounded in betrayal trauma theory (Freyd, 1996, 2009; Freyd & Birrell, 2013) and Black feminist thought (Hill Collins, 1990, 2000). By integrating these perspectives, the framework applies an intersectional lens through which experiences of betrayal are examined. It acknowledges the unique challenges faced by Black women and highlights the interplay of race, gender, and class in shaping their experiences of betrayal. This approach recognizes that betrayal trauma not only intensifies personal psychological distress but also reinforces existing societal inequalities, thereby compounding its impact on Black women. Moreover, it underscores the importance of addressing both the psychological consequences of betrayal and the systemic factors that contribute to their continued vulnerability.

Freyd's (1996) betrayal trauma theory provided a framework for understanding the psychological impact of IPV. Betrayal trauma occurs when a trusted individual, such as a parent, intimate partner, or institutional figure, inflicts harm, often leaving the victim unable to fully process the abuse (Gomez & Freyd, 2019). In intimate relationships, where trust is foundational, IPV represents a profound violation consistent with the

principles of betrayal trauma theory (St. Vil et al., 2021). Betrayal in relationships, whether through infidelity, abandonment, or emotional neglect, can result in significant psychological distress, including posttraumatic stress disorder (PTSD), attachment disorders, and adjustment difficulties (Lonergan et al., 2021).

St. Vil et al. (2021) emphasized betrayal trauma theory as it related to the loss of trust, which led to a distorted perception of what constituted a healthy relationship. Among Black educated women, it was common to remain in cohabitating relationships for years while avoiding marriage (Lloyd et al., 2021). Freyd et al. (2005) noted that survivors of IPV or betrayal trauma often associated love with the experience of abuse, leading them to perceive the absence of abuse as a sign of being “unloved” in subsequent relationships (St. Vil et al., 2021). Betrayal trauma theory posited that when individuals experienced betrayal from a trusted figure, such as a family member, friend, or intimate partner, the resulting trauma was particularly profound. In this study, betrayal trauma theory was used to interpret the erosion of trust within intimate partnerships when one partner became abusive, ultimately resulting in unsafe and emotionally damaging relationships.

Hill Collins’s (1990, 2000) Black feminist thought provided insight into the historical oppression embedded within culture, shedding light on Black women’s experiences and resilience. The theory emphasized the intersection of race, class, and gender, forming what Hill Collins (2000) termed the matrix of domination. It also encompassed the social determinants that affected Black women culturally, economically, and environmentally. Centered on Black women in the United States, the

theory sought to empower them by amplifying their lived experiences and providing a framework through which their voices could be recognized as sources of knowledge and resistance.

Black feminist thought further explained how religion, community, and cultural expectations shaped women's endurance of IPV. Black women in the United States often strongly identified with religion and spirituality, particularly within the Black Church. Davis et al. (2021) emphasized that this religious affiliation could contribute to some Black women enduring IPV for longer periods and in greater secrecy than those who did not practice religious beliefs. As a vulnerable population facing significant disparities, Black women experienced IPV in ways that deeply affected their mental and physical well-being, sometimes leading to loss of life (Powell Sears, 2021; Rennison & Welchans, 2000). In this study, Black feminist thought helped illuminate how participants' experiences were shaped by intersecting systems of oppression, particularly cultural and religious expectations that reinforced endurance and silence, while also highlighting the resilience and empowerment that emerged as women reclaimed their autonomy and redefined their relationships.

Limitations of the Study

Some limitations were identified in this study. While rich descriptions and in-depth interviews were achieved, some participants may have been hesitant to share their full experiences due to the sensitive nature of IPV, potential emotional distress, or concerns about how their stories might be perceived. Speaking about trauma within a research setting may have caused participants to withhold or modify details, particularly

when recalling emotionally charged experiences. The degree of openness may also have been influenced by participants' current levels of healing, their emotional readiness, or whether they maintained contact with their former partners, especially in cases involving shared parenting responsibilities. These dynamics may have shaped the depth and tone of the narratives provided.

Another limitation was related to the transferability of results. The results reflected the subjective experiences of a small group of Black educated women within specific cultural and relational contexts. As such, the transferability of the findings depended on the reader's ability to relate the participants' experiences to similar contexts or populations.

Member checking had initially been planned as a strategy to enhance the study's credibility. The process would have involved emailing participants, within three weeks after their interviews, the recorded Zoom transcript of their session so they could review it for accuracy and make any additions or corrections as needed. However, this procedure was not implemented, as the IRB strongly recommended against using member checking due to confidentiality and participant protection concerns. As a result, the inability to conduct member checking limited opportunities for participants to verify their transcripts or provide clarifications, representing a potential limitation of the study.

Researcher bias also presented a potential limitation. My professional background as a behavioral health therapist and lived experience with IPV, although occurring decades prior, may have influenced data interpretation. Reflexivity and bracketing were employed throughout the research process to minimize these influences, including

maintaining a reflective journal, adhering to structured coding procedures, and consulting with the dissertation committee to ensure analytic rigor.

Finally, the use of virtual interviews conducted via Zoom may have affected the level of rapport and depth of disclosure compared to in-person interactions. Although virtual methods provided accessibility and safety, especially for participants discussing sensitive experiences, the physical distance and technological factors (e.g., connectivity issues, privacy concerns) may have limited nonverbal communication cues and emotional expression.

Recommendations

Future research should further explore the intersection of trust and resiliency among Black educated women who have experienced IPV. Participants in this study consistently described difficulties with trust that extended beyond romantic relationships, influencing their ability to form new connections and engage emotionally with others. Many also discussed the cultural expectation to remain strong and resilient, which often compelled them to suppress vulnerability and endure hardship in silence. Building on these findings, future qualitative studies could examine how cultural norms, religious beliefs, and social expectations shape both the development of trust issues and the expression of resilience among Black women post-IPV. Additionally, research should evaluate how mental health professionals, community organizations, and faith-based institutions can positively influence survivors' healing and trust restoration processes. Such studies would contribute to more culturally responsive approaches that support recovery without reinforcing harmful stereotypes of strength and endurance.

Given that this study focused on a small group of Black educated women within specific cultural and relational contexts, future research should expand the scope to include a larger and more diverse sample. Comparative studies across different regions, educational backgrounds, socioeconomic levels, and cultural contexts would provide a broader understanding of how Black women experience relationship formation after IPV. Incorporating mixed methods designs may also strengthen the exploration of both subjective experiences and measurable outcomes related to trust, resilience, and healing. Expanding the participant base would enhance the transferability of findings and deepen understanding of the cultural and social variations that shape post-abuse relationship experiences among Black women.

Finally, future research should focus on the development and evaluation of interventions aimed at supporting Black women survivors of IPV in rebuilding healthy relationships. Studies could explore therapeutic models, peer support programs, and culturally grounded healing practices that integrate spirituality, community connection, and empowerment. By examining which interventions foster emotional safety, self-worth, and trust restoration, researchers can contribute to the creation of evidence-based frameworks that promote sustainable recovery and positive relationship outcomes for Black women following IPV.

Implications

This study contributes to positive social change by equipping mental health professionals with a deeper understanding of survivors' lived experiences, ultimately strengthening counseling practices and expanding access to meaningful support systems.

Increased awareness and culturally responsive interventions can help dismantle long-standing stigma surrounding IPV, encourage open dialogue within communities, and empower survivors to seek and receive the support they need. By illuminating the barriers Black educated women face in rebuilding their lives and forming healthy, fulfilling relationships, this study underscores the importance of tailored therapeutic approaches, community resources, and policies that promote healing, safety, and long-term well-being.

This study provides insight into how Black educated women describe their experiences forming relationships after IPV, offering information that can guide targeted interventions and support services. Understanding the specific needs and lived experiences of this group enables policymakers, healthcare providers, and community organizations to develop more tailored and effective strategies to assist survivors in rebuilding their lives and forming healthy relationships (Gillum, 2019).

The findings of this study can also help mental health providers better understand the therapeutic challenges survivors of IPV face, enabling them to raise awareness, provide psychoeducation, and deliver more effective treatment to support recovery. Working professionally with diverse populations affected by IPV further strengthens providers' capacity to offer culturally attuned care, enhance therapeutic approaches, and guide clients toward healing and resilience.

Beyond its contributions to mental health practice, this study holds broader societal implications by addressing the intersection of race, education, and IPV recovery. Black educated women often navigate unique challenges in both personal and

professional spheres, and their experiences with IPV can compound these complexities. By examining how they approach relationship formation after IPV, this research sheds light on the cultural, economic, and psychological factors that influence their decision-making. The findings can also inform culturally responsive policies and community-based initiatives aimed at fostering supportive environments for Black educated women in their healing journeys.

The results of this study contribute to the growing body of knowledge on the social, psychological, and cultural factors that influence Black educated women's experiences with abusive relationships. This contribution can, in turn, guide and empower the practices of policymakers, healthcare professionals, and support organizations as they work to mitigate the consequences of IPV and promote sustainable recovery and empowerment for survivors.

Conclusion

This study explored how Black educated women describe their experiences forming relationships after experiencing IPV. The results revealed three central areas shaping their journeys: life before abuse, the experience of abuse itself, and how they subsequently navigated the process of forming new relationships or choosing to remain single. Together, these themes illuminate the profound emotional, cultural, and psychological dimensions that influence how survivors rebuild trust, reclaim self-worth, and redefine intimacy after trauma.

Understanding the lived experiences of Black educated women who have experienced IPV provides critical insight for developing targeted interventions and

culturally responsive support services. The findings underscore the importance of equipping mental health providers with the awareness, psychoeducational tools, and therapeutic strategies necessary to foster healing and empowerment among survivors. Tailoring support to address the specific cultural and gendered realities of Black women can create a stronger foundation for emotional and psychological well-being, helping survivors move toward recovery, autonomy, and renewed connection. Ultimately, this research contributes to ongoing efforts to promote positive social change by amplifying Black women's voices and informing practices that honor their resilience, complexity, and healing.

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Appendix: Interview Guide

Demographics Items

Age:

Ethnicity:

Highest Educational degree:

Current Relationship Status:

Length of time since being in an abusive relationship

If children, how many?

Semi structured Interview Guide

1. To start, can you tell me a little about yourself—whatever you'd like to share, such as your background, interests, or what you're passionate about?

2. Can you tell me what prompted you to participate in this study?

Probe. Please briefly discuss your experience with intimate partner violence sharing only what you feel comfortable with and without pressure to disclose specific details.

a. How long were you in the relationship where you experienced IPV?

b. What were some of the things that made you realize the relationship was unhealthy?

c. How did you respond to those things that seemed unhealthy, did you acknowledge or overlook them? What influenced your decision?

3. What factors influenced your decision to leave (or stay in) the abusive relationship?

4. How was the process of recovering from the relationship in which you experienced IPV?

Probe:

- a. Were there changes in you after leaving the relationship (for example, any changes at the psychological, physical, spiritual, or cultural levels)?

4. Since leaving the relationship in which you experienced IPV, have you attempted to form a new romantic relationship? If so, how has this relationship been for you?

Probe: If you have not pursued a new romantic relationship, what factors have influenced this decision?

5. What has your experience been like in forming relationships since experiencing IPV?
6. What challenges have you encountered when trying to form new romantic relationships post-IPV?
7. How has your experience with IPV shaped your feelings about trust in potential partners?

Probe:

- a. How has your IPV experience shaped your approach to dating, trust, and intimacy?

8. Did you experience any feelings of deep trust violation, dissociation, or difficulty processing the abuse? If so, in what ways?
9. What has your experience with considering new relationships been?

10. Do you feel that cultural expectations, such as the "strong Black woman" stereotype, have influenced your decisions in relationships? If so, how?
11. Have you experienced any external pressures (family, friends, society, religion) regarding dating or relationship choices after IPV?
12. Do you feel that being an educated Black woman impacts your dating experiences? In what ways?
13. How has the availability of potential partners affected your approach to dating?
14. Have you considered or engaged in interracial dating due to partner scarcity? Why or why not?

Probe

1. How do you perceive partner availability within the Black race?
 2. Can you tell me what your belief is about remaining in a same race relationship?
15. What are your expectations when seeking a partner now compared to before experiencing IPV?
 16. Do you have any final thoughts or insights you would like to contribute to this study?