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Women's strategies for coping with the impacts of domestic violence in Kyrgyzstan: A grounded theory study

Saltanat Childress ^a, Deborah Gioia^b, and Jacquelyn C. Campbell^c

^aUniversity of Wisconsin-Madison, Madison, WI; ^bSchool of Social Work, University of Maryland, Baltimore, MD, USA; ^cSchool of Nursing, Johns Hopkins University, Baltimore, MD, USA

ABSTRACT

This paper provides an account of the adverse impacts of domestic violence on women in Kyrgyzstan and develops a grounded theory of coping among survivors of abuse. The results indicate that women adopt a range of strategies to prevent, avert, and minimize anticipated violence. Two key aspects of coping appeared in the narratives: 1) maintaining the status quo and 2) developing agency to resist the abuse. The results suggest that Government and nongovernmental organizations must take additional action to draw women to formal violence prevention services. Providing professional help at several levels (e.g., clinical, community, and societal) and promoting problem-focused strategies as part of therapeutic intervention are essential.

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Background

Domestic violence against women,¹ which includes beatings, rape, and other forms of abuse (Krug, Dahlberg, Mercy, Jwi, & Lozano, 2002), is a major source of morbidity (Campbell, 2002) and mortality (Stöckl et al., 2013); such violence affects, on average, 30–60% of women in regions across the globe (Garcia-Moreno, Jansen, Ellsberg, Heise, & Watts, 2005). Although domestic violence is common among Kyrgyz women from Central Asia, neither the experiences, attitudes, and beliefs of abused women in this country (Joshi & Childress, 2017; National Statistical Committee, Ministry of Health, & ICF International, 2013; National Statistical Committee and UNICEF, 2014) nor the most promising social services and healthcare approaches are well understood. This study adds to the limited knowledge on domestic violence in Kyrgyzstan by exploring the strategies Kyrgyz women use to cope with domestic violence.

The lifetime prevalence of intimate partner violence among Kyrgyz women is 23% (National Statistical Committee of the Kyrgyz Republic (NSC), Ministry of Health [Kyrgyz Republic], and ICF International, 2013),

CONTACT Saltanat Childress  schildress@wisc.edu  University of Wisconsin-Madison, 2458 Sewell Social Sciences, 1180 Observatory Drive, Madison, WI 53706-1393

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although this is likely a low estimate.² Domestic violence victims in Kyrgyzstan rarely seek systemic help because of cultural (Childress, 2017), legal, and institutional barriers (Childress & Hanusa, 2017). A recent study found that only 39% of women who have experienced domestic violence sought help, while 40% never sought help and never told anyone (National Statistical Committee of the Kyrgyz Republic (NSC), Ministry of Health [Kyrgyz Republic], and ICF International, 2013). Most victims who eventually seek help first try to change their behaviors to stop the violence.

Responses to domestic violence from the Kyrgyz government and nongovernmental organizations

As a result of worldwide efforts to eliminate violence against women, Kyrgyzstan ratified many of the key international instruments guaranteeing women's equality and right to live free of violence. Thus, the government of Kyrgyzstan is obligated under international treaties, including the *International Covenant on Civil and Political Rights*, the *Convention on the Rights of the Child*, and the *International Covenant on Economic, Social and Cultural Rights* (all ratified by Kyrgyzstan in 1994), to protect women from violence perpetrated by state agents and private actors (Human Rights Watch, 2006). These treaties include provisions on the rights to life, health, physical integrity, nondiscrimination, an adequate standard of living (including housing), and freedom from cruel, inhuman, or degrading treatment—all of which can be violated in domestic violence. Under the Article 2 of the *Convention on the Elimination of All Forms of Discrimination against Women* (ratified by Kyrgyzstan in 1997), the government of Kyrgyzstan is obligated to “provide remedy for violation of women's rights and to exercise due diligence in investigating and prosecuting such abuses” (Human Rights Watch, 2006, p.14). Under the *Law on Protection from Family Violence*³ (2017), domestic violence is prohibited and addressed through protection measures such as restraining orders and referral mechanisms (Childress & Hanusa, 2017).

Although there have been many efforts from both the governmental and nongovernmental sectors to address domestic violence, there remains much to be done to ensure that: 1) the existing laws on domestic violence are enforced, 2) a coordinated community response to domestic violence is promoted, and 3) the need for direct services for female survivors of domestic abuse is met. Kyrgyzstan has developed progressive national laws on the protection of women from domestic violence, but has been ineffective in enforcing them. First, there is lack of awareness of the existing laws, particularly in rural areas (Asian Development Bank, 2011). Women are isolated from sources of information and thus lack awareness of their legal rights and access to services, of which there are few in Kyrgyzstan.⁴ These services rely

primarily on charitable and donor funds, and lack evidence-driven bases and resources for the development of approaches to respond to domestic violence at the societal level (Alternative Report Kyrgyzstan, 2015; Asian Development Bank, 2005).

In addition to these limitations, women face tremendous socio-cultural barriers to obtaining help (Childress, 2017), including the shame and stigma associated with help-seeking or divorce, cultural beliefs, and social sanctions that play a powerful role in discouraging women from seeking help, and the extremely low status of the daughter-in-law in the Kyrgyz family. Even in the context of well-intentioned and thoughtfully designed institutions and laws, the institutional responses (criminal justice, public health, and social service) tend to fall short because of the country's prevailing patriarchal values and attitudes that influence the discretion of individual responders (Childress & Hanusa, 2017). Women endure the abuse by relying on their own internal strength and problem-solving skills in the face of minimal support from family, community, and societal institutions.

Conceptual underpinnings of coping with domestic violence

Over the years, the literature on coping with domestic violence has defined coping in many ways. Lazarus and Folkman (1984) defined coping as the sum of cognitive and behavioral efforts, which are constantly changing, that aim to handle particular demands, whether internal or external, that are viewed as taxing or demanding. Central to this view is the role of cognitive appraisal, a constantly occurring process whereby a person evaluates an encounter in terms of its implications for well-being (Lazarus & Folkman, 1984). This process of applying solutions to stressful situations recognizes the subjective meaning attached to an event in terms of an individual's response to it (Carlson, 1997). This addresses the internal cognitive elements that must be used to identify the problem, gain insight, develop coping strategies, and cognitively challenge or reframe the problem to understand the abusive experience and one's responses to it (Pinnewala, 2009).

While coping mechanisms can take many forms, the literature seems to dichotomize these forms as proactive and reactive pairs, such as private versus public coping (Mitchell et al., 2006); engagement versus disengagement (Kemp, Green, Horowitz, & Rawlings, 1995); problem-focused coping, social support/approach and avoidance coping (Amirkhan, 1990; Hayati, Eriksson, Hakimi, Hogberg, & Emmelin, 2013); and passive or emotion-focused coping versus active coping (Meyer, Wagner, & Dutton, 2010). In some studies, using proactive forms of coping is associated with a lower level of psychological distress and is considered superior to more passive or reactive strategies (Kemp et al., 1995; Mitchell & Hodson, 1983; Smith, Murray, & Coker, 2010). In other studies, focused on areas where women

cannot effectively resist violence while living under a harshly patriarchal regime and where violence is embedded in the social, political, and legal structures of society, a carefully tailored combination of active and passive strategies is considered to be more effective in resisting or reducing violence and avoiding the counterproductive consequences of challenging the status quo (Abeya, Afework, & Yalew, 2012; Zakar, Zakar, & Krämer, 2012). Studies involving older women who have experienced a lifetime of intimate partner violence and have made a life-long commitment to keep the home intact, women reported employing both emotion-centered and problem-solving strategies that evolved into a “philosophy of life and survival” (Zink, Jacobson, Pabst, Regan, & Fisher, 2006, p.648), whereas studies that examined coping mechanisms among women in different geographical areas (e.g., rural versus urban) found that problem-focused coping becomes more action and task-oriented by using more formalized help-seeking resources due to service accessibility, community, and sociocultural factors within the environment (Carver, Scheier, & Weintraub, 1989; Shannon, Logan, Cole, & Medley, 2006).

Given the prevalence of domestic violence in Kyrgyzstan and the need for culturally sensitive prevention programs, it is important to understand how domestic violence could be addressed in the culturally specific context of Kyrgyzstan. In an effort to contribute to the body of knowledge about addressing domestic violence in Central Asia, this paper provides an account of the impact of abuse on women and children in Kyrgyzstan, and examines women’s coping mechanisms to understand how survivors’ interpretations of the abusive situation influence their decisions to take action to resist the abuse. The findings will help healthcare and social service practitioners to understand the conflicted feelings and emotional burdens relating to the abusive situation, and provide useful insights on how to manage cases involving domestic violence to be more responsive to their needs.

Methods

The study was conducted at a domestic violence shelter in Bishkek, Kyrgyzstan. The shelter is a nongovernmental organization that implements legal, consultative, informational, and educational programs related to women’s rights, domestic violence and human trafficking. The NGO provides a variety of services including a shelter for women and children suffering from domestic violence and human trafficking, transitional housing, re-integration and rehabilitation programs linking survivors to employment and housing opportunities, and a 24-hour crisis hot-line to provide individual consultations by psychologists, psychiatrists, and lawyers to victims of violence.

This study used a grounded theory approach developed by Glaser and Strauss (1967) because of its focus on the context, complexity, and situational analysis of social phenomena (Clarke, 2005). The approach is suitable for exploring basic social processes (both psychological and structural) and understanding the multiplicity of interactions that produces variation in those processes (Benoliel, 1996).

Procedure and data collection

In-depth interviews with 16 women survivors of domestic violence⁵ were conducted by first author in Kyrgyz and Russian between November 2012 and December 2013. Approval for the study was obtained from the Institutional Review Board of the University of Maryland in the United States and the Ministry of Health of the Kyrgyz Republic. Women residing at the shelter were asked by the shelter staff if they wanted to participate in a study about domestic violence. Before obtaining informed consent, the researcher explained the purpose of the project, answered participants' questions, and asked permission to audio-record the interview. Theoretical sampling was used to select participants (Oktay, 2014). Interviews were audio-recorded; transcribed verbatim; translated into English; and checked for data accuracy, confirmability, and dependability. The data included field notes, interviews, and the researcher's reflective journal. Pseudonyms were used to identify participants.

Data analysis

We analyzed the data via constant comparative analysis throughout the data collection stage (Glaser & Strauss, 1967). We coded and analyzed all interview transcripts using NVivo10 Qualitative data analysis Software. Analysis involved a multi-stage grounded theory process of open, axial, and theoretical coding (Oktay, 2014). During the "open coding" stage, categories were identified and developed (in terms of their properties and dimensions) via multiple techniques involving 1) word-by-word analysis of the data and generation of basic categories describing the features of the data, and 2) constant comparison between cases, instances, and categories that were grouped together based on similar incidents or events (Glaser, 1978; Strauss & Corbin, 1994). Table 1 (Illustration of Developing Categories from Concepts and Codes) demonstrates this "funneling" process, in which "codes" first become "concepts," and then become a core category and construct.

During the "axial coding" stage, the researchers gradually identified connections between the categories through an iterative and abductive process (Strubing, 2007) involving 1) making connections between a category and its subcategories (Strauss & Corbin, 1994) and 2) organizing the data using the

Table 1. Profile of study participants (N = 16).

Variable	Value
Age in years	20–49 (33.4)
Range (<i>M</i>)	
Ethnicity	
Kyrgyz	14
Russian	1
Kazakh	1
Children	
Yes	16
Number of children, range	1–4
Ages of children	1 month–18 years old
Marital characteristics	
Legally registered marriages	9
Common-law marriage (no legal registration)	7
Kidnapped or forced into marriage	5
Sold into arranged marriage	2
Victims of human trafficking	2

6C paradigm (Charmaz, 2006; Glaser, 1978), in which the categories were studied in terms of their Context, Consequences, Causes, Conditions, Covariance, and Contingents (a more detailed description of the study methodology is provided in Childress & Hanusa, 2017).

Based on this iterative process, a substantive grounded theory of coping was constructed. The theory allows the reader to understand the multitude of effects of violence on women's lives and examine the process of coping and endurance in the context of cultural resistance to problem-solving, lack of resources, and the underlying societal beliefs that no solution or other exit options exist. To ensure the trustworthiness of the findings, data analysis was enhanced through analytic triangulation, prolonged engagement in the field, and the use of the "inquiry audit" technique (Lincoln & Guba, 1985, p. 316). To ensure credibility, "thick description" (Geertz, 1973) was used; confirmability of the findings was ensured by conducting an external audit (Bowen, 2005), which confirmed the trustworthiness of the results.

Findings

The demographic information for the 16 women, including age, ethnicity, number of children, and marital characteristics are presented in Table 2. A more detailed description of participants' characteristics is provided in Childress (2017).

Impact of abuse on mental and physical health

Analysis of the interviews showed that the abuse had several negative consequences for the women's mental and physical health. These consequences fall into three categories: the loss of identity, powerlessness, and existential

Table 2. Illustration of developing categories from concepts and codes.

CODES	CONCEPTS	CATEGORIES	CONSTRUCT
<p><u>Keeping silent:</u></p> <ul style="list-style-type: none"> • “Even if he says painful things that are not true, I can’t say anything, because it’s not going to be in my favor. I just keep silent and listen.” 	<i>Maintaining the status quo</i>	Emotion-focused coping	COPING & RESILIENCE
<p><u>Placating:</u></p> <ul style="list-style-type: none"> • “I know his character, what he wants and expects, and in order to neutralize the situation, I prepare to answer correctly and ask for forgiveness.” 			
<p><u>Negotiating & making peace:</u></p> <ul style="list-style-type: none"> • “When he stops beating, I would try to start the conversation and make peace... promise that everything would be in order, that children would listen from then on, or that I would wake up early to clean.” 			
<p><u>Diverting attention:</u></p> <ul style="list-style-type: none"> • “It’s like changing a movie disk, I wanted to change the atmosphere at home; I start lying and praising him, telling his good sides while I attempt to move kids towards the door so they could get away.” 			
<p><u>Praying:</u></p> <ul style="list-style-type: none"> • “I just cried a lot and blamed myself for everything... the only measure to protect myself was being quiet, crying and praying.” 	<i>Religiosity and spirituality</i>		
<p><u>Keeping hope:</u></p> <ul style="list-style-type: none"> • “There is God: if someone doesn’t help, someone else will [equivalent to the saying “When God closes the door, He opens window”]. I should have my own good faith, I need to put my own effort. God helps those who help themselves. If I keep making efforts, I will succeed.” 			
<p><u>Suppression of thoughts using substances/alcohol:</u></p> <ul style="list-style-type: none"> • “When he would start kicking me, I would drink, and rest through it. I just tried to suppress everything with alcohol.” 	<i>Denial</i>		
<p><u>Self-harm:</u></p> <ul style="list-style-type: none"> • “I would have preferred to face no hardships and just leave this world. I suffered a lot. I just want to die... (crying). Why would I need such a life, there is no need to live with him for me, right?” 			
<p><u>Family/Friends:</u></p> <ul style="list-style-type: none"> • “My family knew about beatings; this wasn’t just once. They refused to help me, ‘Sort it out on your own.’ I didn’t want to ask for help from the family again... I was ashamed and afraid.” • “People will create rumors about me, accusing me of getting divorced, and that I am a bad person. I will not be able to walk in the streets because of the rumors. It will be difficult for my daughters as well. I do not want to go to my parents and tell them everything.... It is so hard for me.” 	<i>Informal help-seeking</i>	Problem-focused coping	

(Continued)

Table 2. (Continued).

CODES	CONCEPTS	CATEGORIES	CONSTRUCT
<u>Criminal justice</u>	<i>Formal help-seeking</i>		
<ul style="list-style-type: none"> • The police didn't help, absolutely, no help! Three times I wrote a complaint explaining everything to them. They told me to keep silent and reconcile with my husband... so we would go back to the same apartment, to the same shop... the same old life 			
<u>Public health</u>			
<ul style="list-style-type: none"> • "The doctors did nothing to stop the violence. I went to the hospital, received medical treatment, and came home again. At the hospital my doctor took me to the other room and said that if such things [violence] continued, I would get crazy. That was my fourth concussion. 			
<u>Shelter/Social services</u>			
<ul style="list-style-type: none"> • "After I came here [shelter], I felt more protected, as if I entered a fort. When I'm outside, I am afraid where he [the husband] will show up, what he will do. • "I am grateful to God that they founded this organization... I don't know who is supporting this organization; no matter who runs this place I am extremely grateful... Women who find themselves in this situation, I would like to refer here [the shelter]. I just did not think that there are such people. We do not hear about that [violence and social services] in ordinary life." 			
<u>Active planning</u>	<i>Strengths & Resilience</i>		
<ul style="list-style-type: none"> • "I should only count on myself, work for myself, and build my own life... I want to fight till the end to become a different person, dress differently, walk differently, with my head up and not humiliated by men. I would like to work, bring my kids up and have my own house and life." 			
<u>Asserting voice/standing one's ground</u>			
<ul style="list-style-type: none"> • "Women need to appreciate and respect themselves in the first place... We are not born to endure someone's beating but to give happiness and joy. Our role is to give birth, bring children up, and give warmth and comfort... We are not a piece of meat or a punching bag, right?" 			
<u>Working toward future goal</u>			
<ul style="list-style-type: none"> • "Endure-and-it'll-be-fine,' judgments like that are wrong. Pull yourself together if you can take no more. Never ever give up. Make an effort, set a goal, and go towards that goal no matter what... take everything into your hands... For that [what is needed] is decisiveness and strength." 			

distress; fear, uncertainty, and psychological distress; and physical health effects.

Loss of identity, powerlessness, and existential distress

The loss of identity left the women feeling helpless and insecure. Women found themselves being treated in an impersonal and demeaning manner. Asem described the degrading treatment she received from her husband and in-laws:

I was almost like some non-existent person. I did all the house work and laundry, cooked, and ironed.... He would ask for chalap,⁶ I would bring it; for food—I would bring it.... If he yells, I would listen to his screams. If he beat me, I would take that too.... I was like a toy, so to speak.

Natasha also described a diminishment of her own identity and desires: “He crushed the personality in me. He crushed my identity, destroyed it.” The women were left with almost no control over their own lives. Gulbara described the ways her husband’s abuse constrained her choices: “I had to bind to his will... eat what he brought, wash his clothes, cook, and keep living like that.” Gulbara confessed that years of abuse left her at the complete mercy of her husband’s whims: “I obeyed him without consulting my own brains; I would never think for myself; he would never let me live on my own free will.”

Continual exposure to battering diminished women’s self-esteem and led to “learned helplessness” with regard to their coping mechanisms. Asem revealed, “I feel like I am abandoned in a deserted field. I am now so powerless that I have a sense of fear that I fell in life and now am unable to rise up again.” Ainura explained: “He humiliated me... I couldn’t do anything. I didn’t even understand that I could protect myself verbally; I just didn’t have the backbone to do that.” Asem, for example, felt confused because her husband’s family consistently denied her perception of things: “My husband’s family wouldn’t call white as white, they would call it black. And it didn’t matter; I had to call it black too, after all. I obeyed, yes, I called it black, and that is why you can go mad after that.” In the case of Gulnura, she experienced control and abuse at the hands of her in-laws as punishment for speaking up. She explained:

His parents never showed me respect; they always told me to live by their rules. According to their rules, I should not talk, but only be deaf-mute, must do whatever his mother orders me [to do], obey and listen. My word is nothing to them; their word should be a law to me. All these things create so many scandals...

Several women experienced suicidal feelings, but thoughts of suicide were accompanied by an awareness of the consequences for their children. Natasha described, “There were moments when I gave up and wanted to commit suicide. Seeing that no one can help me brought despair to me. I

even wanted to burn myself, but I need to live for the child.” After years of abuse, Damira had attempted suicide; however, she had recently experienced a renewed sense of self-worth and no longer believed that she was powerless to change her life: “I poisoned myself and was in the hospital for a month. Now I understand it’s not worth dying because of a man. I have a daughter, and it is time to take decisions, work, and raise children by myself.”

Fear, uncertainty, and psychological distress

Fear and uncertainty were central themes of the women’s narratives. Gulbara reported: “I am scared he might emerge in some place and stab me with a knife, he threatened to kill me.” Other fears were financial. Sabina acknowledged, “I’m scared. I was thinking to rent an apartment, but I don’t work. Who will feed children and pay rent? I don’t know what to do, to be honest.” Anxiety was another result of constant beatings. Gulbara explained: “I suffer from a nervous disorder. I cannot stand if someone says bad things to me; I will just start yelling, become easily irritable and annoyed with my own child.” Natasha experienced insomnia: “At first I thought I was going nuts: I stopped sleeping, I only kept thinking who would be able to help us. Even if I fell asleep for fifteen minutes, I would wake up and think, and think, and think.”

Physical health effects

The direct physical health impacts were severe. The women suffered a wide range of injuries including concussions, broken bones, swelling in their joints and body, impaired vision and hearing, abortions, and STDs. Salamat listed a series of injuries: “I have had many concussions now, broken teeth, jaw. . . Half of my nose and mouth don’t work; it hurts a lot.” Repeated abuse led to various chronic symptoms, including headaches, pains in the back and limbs, and difficulties with functioning in internal organs. Further, the women’s husbands and in-laws expected them to work while sick. Asem reported, “They think that I must be like a robot: I shouldn’t be sick, nothing should happen to me.” Salamat recounted similar expectations on the part of her husband’s family: “I am telling them [in-laws], ‘I am a human being, I’m not a robot. I’m not made of iron, I get sick.’ Even the iron gets rusty, and they clean and process it, but I am a human, yes?”

Impact on children

All the women asserted that their children experienced long-lasting negative mental and physical health effects. Almadan explained, “He beats my children up so badly that they are all bruised. When he comes, the children cannot speak normally out of fear.” Gulbara sobbed, “My child cries, chatters his teeth, and trembles with fear when my husband beats me in front of him.”

The women described the ways in which their partners and in-laws turned their children against them. Ainura explained:

They [the in-laws] set my son completely against me. My child would run away from me and hide, not from me, but from the situation. My heart was in pain, and I would feel bad for the child and stopped visiting him.⁷

The women also described fears that their children would perpetuate the violence. They expressed a desire to break the cycle of abuse. Gulzhan said: “I don’t wish my children to repeat my experience and have a life like mine. . . Now I am thinking about my children’s future.” For some women, concerns for the safety and wellbeing of children served as a reason for leaving abusive relationship. Salamat explained, “I made the decision to divorce; I don’t want my children to repeat my mistakes.” Natasha echoed this sentiment, “The worst thing is that children suffer. In what kind of circumstances are they growing? They are in constant fear and stress. This is the scariest, actually this is the main reason I left.”

Resilience in the face of abuse

Women also exhibited an ability to develop insights and make meaning from their painful experiences. For many, the difficulties they had lived through were understood as motivators rather than impossible barriers. Many of the women described wanting to help others in similar situations, for example by helping with or opening a shelter like the one in which they were staying. Salamat explained, “There are millions of women repeating exactly my fate. I want to support them so they do not follow my path.” In addition, the women described revising their identities. Damira recounted, “I realized I was pulling myself down to the bottom. I put myself last in line. It turns out, we must first learn to love and respect ourselves in order for others to respect us.”

Women reported that the experience of domestic violence led them to look beyond superficial appearances and look for warning signs. Salamat reported feeling empowered by approaching people more critically, “I used to look at things through rose-colored glasses, looking for a prince on a white horse. It turns out real life is not like that. . . I started looking at life soberly.” They asserted that this experience taught them to be self-reliant, resourceful, and less naïve. Gulzinat explained, “My experience taught me that I should trust no one, only myself, and that I need to somehow survive in these situations.” Mairash expressed, “I don’t regret what I’ve done. I suffered and was abused, but my sufferings taught me a lesson. I learned to do the work.”

Some women became less concerned with other people’s opinions and more straightforward in advocating on their own behalf. Ainura summarized this shift: “I live my private life. It is *my* life. If someone talks about me, it

doesn't bother me; my own self-appraisal is most important to me." Gulzinat chronicled a similar transition: "I tried to please everyone and hide my feelings so to not hurt others. I am completely changed now... I've acquired straightforwardness... My character became very strong." These experiences led the women to realize that they could survive without a male figure in their lives. Salamat said, "I had the idea that a female needs a male to survive... My most important lesson is that... it turns out I am a worthy woman and can live perfectly without a husband."

This section has gone into detail to provide an account of multitude of effects of domestic violence on women survivors. This account provides the basis for understanding what women have to cope with in these situations. Before turning to women's specific coping strategies, the next section provides information about the sociocultural and economic constraints which limit and condition women's coping mechanisms.

Socioeconomic and cultural constraints on women's coping mechanisms

The selection of coping strategies used by women reflected prevailing cultural norms and the status of women in Kyrgyz society. As women assessed the level of threat and the lack of available options to deal with their abusive situations, they carefully and strategically found a way, within the cultural and structural constraints, to confront the violence they experienced. Women described how the larger societal context, including social norms, traditional values and attitudes, contributed to domestic violence and prevented women from seeking external help.

These norms dictated that women be subordinate and silent regardless of circumstances. This was reflected in the proverbs that the women used in their stories. For example, Sabina explained, "Kyrgyz people have a saying, 'Plates and dishes smash; married couples clash.' If people live in the same house, quarrelling is possible. It is normal and can't be helped." Gulzinat offered the following explanation of family conflict and why women endure and do not leave, "Parents always say, 'Don't wash your dirty linen in public. A woman has to endure.' So I was enduring, I was afraid of the people's judgment... I didn't tell my parents, because I didn't want to upset them." Keremet also listed several proverbs and also emphasized the shame and stigma of divorce, "Most women, mothers leave this pattern to us, 'Patience and labor will win everything.' You must stay even if you have difficulties, you may die but stay, because divorce is a shame." Gulnura also constrained her efforts to leave and seek help because of the fear of judgment and stigma of divorce. She explained that this type of judgment affected not only her, but also her children:

People will create rumors about me, accusing me of getting divorced, and that I am a bad person. I will not be able to walk in the streets because of the rumors. It will

be difficult for my daughters as well. I do not want to go to my parents and tell them everything. . . . It is so hard for me.

Some women explained that their birth families blamed them for being in abusive situations because they grew tired of the abuse and were frustrated by the women's inability to stop it. Gulnura's family blamed her for her husband's violence, and penalized her by withdrawing their support: "I keep rescuing you from being thrown into a trash can, but you yourself keep choosing a trash can instead of a normal life,' my mother says to me. I have no respect for myself." Mehriqul had a similar experience; she explained that her family urged her to deal with the problem by herself and refused to provide any help: "They knew about beatings; this wasn't just once. They refused to help me, 'Sort it out on your own. He will come back and beat you, you'll forgive, and it will be the same story all over again.'" Mehriqul's in-laws also justified violence and advised to endure the abuse, "'Just endure and keep silent,' my mother-in-law said, 'If you leave, then what?' I kept enduring and kept everything to myself, but in five years there would be nothing left of me. My body already shakes, and I feel sick." After this refusal, Mehriqul chose to come to the shelter because the shelter provided her with structure, support, and protection that her family members could not. She explained, "I didn't want to ask for help from the family. If such thing happened again, I knew where to go. . . . I didn't want to go to my parents or brother again." Natasha described institutional barriers to seeking external help: "And what do women do? They come to the police; police would tell her, 'We can't do anything.' And what is the solution for her? Her only way is to go back, that's all."

Interviews with the women suggested that the social economic crisis that followed the breakup of the Soviet Union in 1991 also contributed to family conflict and limited exit options for the Kyrgyz women. The women considered domestic violence from the perspective of experiencing economic instability that created stress in their daily lives and the inability of men to fulfill cultural assumptions related to their role as a breadwinner in the family. Keremet divulged that the inability to make money caused a great deal of conflict in her marriage, "Because of poverty quarrels rise. . . . Mostly, we quarrel because of deprivation." Sabina echoed this sentiment and offered an explanation of how poverty and unemployment leads to abuse, "This is because of complete unemployment that everyone is laying hands on each other and boiling with anger. If both husband and wife stay at home [jobless], chances are that they will quarrel, and dishes will clash." She continued her description, focusing on the exacerbating role of alcohol in this scenario, "Because of unemployment, the husbands come drunk now. . . . to forget their troubles. . . . not to listen to their wife's long tongue

[nagging for money]... They come drunk and don't give a moment of peace.”

Up to this point, the paper has provided an account of the adverse impacts of domestic violence in women's own words and introduced the main socio-cultural constraints which limit women's options. With these in mind, the paper now turns to examine coping strategies which women deployed in this constrained context.

Women's strategies for coping with domestic violence

Because socio-cultural norms stifled explicit resistance or voice in the Kyrgyz context, the majority of women adopted implicit and less confrontational strategies to cope with abuse. Using the terms of the conceptual model of coping with domestic violence (Figure 1), two key coping strategies appeared in the narratives: (1) maintaining the status quo (emotion-focused strategies) and (2) developing agency to resist the abuse (problem-solving strategies). In

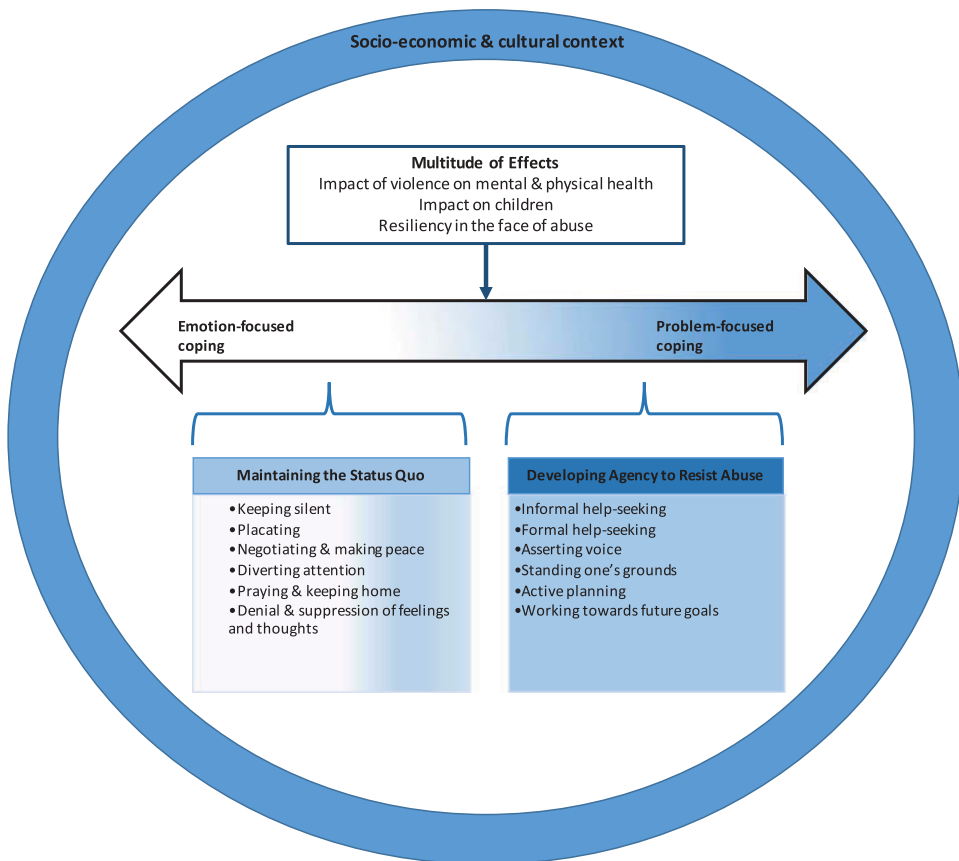


Figure 1. Conceptual model of coping with impacts of domestic violence in Kyrgyzstan.

bringing these categories together to formulate a grounded theory of coping with domestic violence, this conceptual model proposes a continuum for conceptualizing the notion of coping rather than a dichotomous understanding, such as emotion versus problem-focused or passive versus active coping strategies. The continuum allows for a more fluid understanding of the construct as women used them interchangeably and sometimes with less clear boundaries in the context of cultural constraints.

Emotion-focused coping strategies

Most women reported that they did not fight back because they feared provoking their husbands. Instead, they used several emotion-focused strategies to keep themselves and their children safe. A dominant coping response to abuse was *keeping quiet*. Kukush explained: “One of the strategies was to just keep silent and listen. . . If he gets angry he hits me with something or kicks me. . . I knew about consequences and didn’t say anything.” Mehri gul adopted a similar strategy: “I started adjusting to his character. . . Silently I would walk away and act as if nothing happened.” Salamat described keeping silent in this way: “I would just close my mouth at that moment and say nothing to provoke him, and he would give up. . . I protected myself like this.”

Over time the women learned to recognize the signs of approaching violence and neutralize the situation by *placating and negotiating with their partners*. Often, this meant employing manipulative behaviors. For example, they denied or downplayed the violent behavior, yielded and apologized, cajoled or avoided contact with the husband, and blamed themselves. Gulzinat described placating her husband: “When I see him getting angry, I already start preparing. I smile, agree with him, or apologize even if I know I am right. . . Then he would let me alone.” Asem explained, “I would just hug him tightly and say, ‘You are so great and amazing. . . Please just come and go to bed without a fuss,’ I would be doing everything to somehow free myself from him.”

Another common strategy that women used to avoid violence was *diverting their partner’s attention*. Damira explained, “I am a good cook. I learned in the restaurant to make so many salads in order to please him, just so he doesn’t complain.” Keremet adopted the same strategy: “Or I’d say, ‘What kind of food would you like?’ I can easily deceive him with a meal, because he loves “manty.”⁸ Kukush employed a variety of methods to distract her abuser, although she ultimately realized her attempts were futile: “When he got drunk, I tried to wash him in cold water, feed him, and take walks to sober him up. But then I realized it was useless. He gets drunk and follows me everywhere. He is such a despot.”

Some participants reported using a strategy of *temporarily abstaining from communication and sex* with their husbands. Women mentioned that

they used the no-talk strategy or refrained from sleeping in a bed with their husband anywhere from a few days to a few weeks. Natasha explained, “I would shut within myself and not talk to him or went to [a] different bed for two-three weeks. This enraged him. He blamed me for everything.”

Spirituality and religious beliefs played an important role in participants’ recovery. Salamat reported using strategies such as praying, attending religious services, and seeking help from religious leaders. She said, “My strength is spirituality. Through prayer I understand many things and fight with these barriers.” Some participants viewed God as a source of hope and a guiding force. Kukush relied on prayer: “I don’t want to return to him... I ask God for strength to live through this difficult period and start living independently.”

Some women coped with the violence by *using alcohol or other substances*. For example, Salamat recounted: “When he humiliated me, I couldn’t bear it, I would start drinking in bouts. I just tried to suppress everything with alcohol.”

Problem-focused coping strategies

While emotion-focused strategies predominated in the women’s accounts, some women also described using problem-focused strategies to cope with abuse. *Developing strength and resilience* was an important strategy. Women described their need for courage, strength of will, and persistence to withstand the abuse and not give up. Natasha observed, “Patience, strong will, stubbornness, you need so much of it. There were moments when I gave up, when I had nothing left. You know, I was like that phoenix bird that rises from the ashes⁹... over and over again.” For many women, their children were a source of strength. Sabina shared: “The source of my willpower is my children. I will never give up for my children!” Gulzinat described how planning and goal setting helped her: “My source of strength is setting a goal for myself, planning everything ahead, and achieving that goal. I teach my daughter to manage everything, too.”

Some women engaged in more explicit forms of resistance by *asserting their rights and expressing their opinions*. For example, Ainura expressed indignation when her in-laws, rather than welcoming her, complained that she was not wearing a headscarf:¹⁰

I made a pose, “Oh, a head scarf? You need a headscarf?! Wait now,” I entered the house, packed every one of the headscarves and piled them all in front of them on the table, “Here you are!” and turned around and left. I treated them like that to protect myself.

Ainura also asserted her rights when she insisted on choosing her son’s name, rather than using the name her in-laws had chosen¹¹:

My husband said his parents wanted to name our son differently. I told him, “No, I want to name him B. If someone wants to call him differently, let them lie down here under a knife [referring to the baby’s birth via C-section] and then name their sons the way they wish.” And again, who was the bad, the disobedient, and in general spit on all the elders’ authorities? I’d rather be straight than any other way. I have the right to express my voice; this is who I am.

Another strategy the women reported was *hiding, planning for safety, and escaping*. Some women resisted violence by hiding weapons or by hiding themselves and their children in the house. Zarina hid knives and prepared bags of clothes and food for escape. She explained, “I learned to defend myself during violence. I know the usual time of his arrival home and hide our bags of food and clothes outside to run away. We tie his hands and legs up tight when he is drunk.” Women also earned and hid money of their own; for example, Mairash secretly made food products: “I would make some food and sell in the market without showing it to my in-laws.”

Women described *looking to a better future and prospects* as a way of coping. For example, some women discussed working toward a future goal that would enable them to break from the abusive relationship and pursue their dreams. Strategies included taking educational courses, gaining employment, seeking assistance from family members and social networks, and turning to social service organizations. The women often planned a series of actions that would gradually lead to independence. Gulbara discussed a set of goals: “We need a stable life... I have five years before my son goes to school. If I have an apartment... a babysitter... then I will find a job, work eagerly with my honest labor... then retire with the pension.” Gulzinat also described a multi-step process of moving toward independence. She explained, “I am studying right now... I’d like to finish my studies in three years, receive my diploma and manage everything. And then I will find a good job... I see myself as a prospering woman.”

Education was emphasized as a way to improve future prospects. The women recognized the need for training to find stable jobs. Gulbara said, “I’ve got to take some courses to learn something... computer lessons or sewing, doing haircuts, or learn the cooking skills or some other profession...” Natasha also focused on the importance of education: “I plan to enter a university and receive higher education. I see myself working in government service... I will achieve everything if I have the support.”

This section has presented evidence from women’s narratives that demonstrate how both emotion-based and problem-solving strategies are employed. It is clear, however, that none of the respondents are able to fully resolve the adverse impacts and were most successful in reducing the severity and frequency of violence.

Discussion

Within strong cultural and structural constraints, the women responded to violence by finding ways to resist or confront domestic violence. They made calculated assessments of ways to maximize their safety and minimize the anticipated abuse. The findings of this study add to the results in the existing literature, which emphasizes the role of emotion-based or avoidant coping strategies in a range of cultural contexts where fear of social implications, rejection (Feiring, Taska, & Chen, 2002; Gibson & Leitenberg, 2001; Negroa, Bonanno, Noll, Putnam, & Trickett, 2005; Sayem & Khan, 2012), and negative self-image inhibit the use of active strategies to cope with abuse (Phanichrat & Townshend, 2010). The strategies and endurance mechanisms adopted by respondents resemble the coping strategies used by women in other studies (Haeseler, 2013; Hayati et al., 2013; Kanagaratnam et al., 2012; Swart, 2013; Zakar et al., 2012) and lend support to the literature that highlights sociocultural factors (Liang, Goodman, Tummala-Narra, & Weintraub, 2005) that inhibit women's coping mechanisms because of traditional gender roles, expectations around unfulfilled household duties, and strong cultural norms such as family privacy, fear and shame of divorce, and fear of losing children that subordinate women and perpetuate the abuse. These cultural norms emphasize endurance and emotional coping mechanisms and limit women's options for resisting the abuse.

These findings support prior research suggesting that a framework of two polarized strategies is an oversimplification and examining the construct of "choice" as "choice within entrapment" and "entrapment within choice" (Ben-Ari, Winstok, & Eisikovits, 2003). This literature asserts that women can create choice in their daily experiences through the manipulation of psychological and physical boundaries vis-à-vis their violent partners. This understanding of battered women as having a certain degree of autonomy may help liberate these women from the stereotyped image of a victim (Ben-Ari et al., 2003). The Kyrgyz findings provide support for both a more complex view of women's coping strategies and a multi-dimensional view of these women as both victims and resourceful agents.

In the present study, women used a combination of strategies to mobilize their personal and social resources, but emphasized strategies that were considered less risky or confrontational in the Kyrgyz cultural context. These findings suggest that the conceptual distinction between emotion-based and problem-focused strategies may not be as useful as in other contexts. In the Kyrgyz context, in which options for problem-solving through the existing institutions (family, healthcare, the legal system) are highly constrained (Childress, 2017; Childress & Hanusa, 2017), emotion-focused strategies may be carefully planned and goal-oriented (i.e., there is a problem-solving dimension to emotion-focused strategies). Kyrgyz women

viewed seemingly passive strategies (e.g., placating their husband) as an active strategy of waiting for the appropriate opportunity or developing their own agency in the absence of other alternatives. This view of women's continual, opportunistic adoption of a complex set of coping strategies is especially pertinent in areas such as Kyrgyzstan, where women experience the intersection of gender-based violence, extreme poverty, and social disapproval of marital separation. In these contexts, women make choices, exhibit agency, and construct their own strategies within their complicated daily lives (Swart, 2013). They use a strategy of "doing gender" (or "gendered interaction rituals") in which they avoid violence by playing the role of the "good and patient" woman (Swart, 2013). By choosing endurance and faith, these women gain social capital in the form of support from families and faith-based communities (Swart, 2013). Thus, behavior that on the surface appears acquiescent and fatalistic may actually be calculated and intentional.

From a service perspective, this understanding of a continuum has implications for interventions aimed at facilitating the termination of the abusive relationship or providing counseling and support for women who chose to stay and endure. The study shows that the provision of social support is an important step in enhancing coping skills, and underscores the need for cognitive engagement, such as positive self-reflection, positive adaptive functioning, determination, and belief in self-worth, in reframing the meaning of abusive events (Brewin & Holmes, 2003). In these circumstances, service provision must acknowledge that leaving the situation may not be feasible for many women. This study highlights the importance of creating options for women and helping them acquire decision-making skills to weigh the costs and benefits associated with these options (Ben-Ari et al., 2003).

The study also emphasizes the importance of addressing detrimental effects on women's physical and mental health surrounding the domestic violence (Shannon et al., 2006). The study suggests that the interventions for clinical practice focused on recovery and models of psychological empowerment and mutual help can help women redefine and reflect on their experiences, and acquire active adaptive strategies to overcome the sense of powerlessness, shame, and guilt. Providing women with the opportunity to break their silence and express their feelings in an atmosphere in which they feel accepted, safe, and cared for may help them in the process of healing, recovery, and regaining their power and self (Ligiero, Fassinger, McCauley, Moore, & Lyytinen, 2009). The study also exhibits the importance of both societal level and community level sanctions against abuse and sanctuary for abused women including sanctuary with family and/or friends or in women's work groups or other places where women can gather and provide support to each other, in decreasing intimate partner violence (Counts, Brown, & Campbell, 1999).

From a community and institutional perspective, addressing domestic violence requires developing secure public funding mechanisms that can be used to create a more comprehensive, systems-based response framework of prevention and intervention. In conjunction with nongovernmental organizations, it is necessary to develop and implement multi-sector referral systems that facilitate survivors' rapid and confidential access to health, psychosocial, shelter, and legal services, particularly in rural areas. Further, policies that provide a meaningful way out of poverty and bolster women's economic empowerment and career opportunities are important to address violence as a structurally embedded phenomenon. Such policies could support the provision of vocational and educational initiatives as well as concrete resources in the form of transitional housing, childcare, finances, and employment opportunities in order to maintain women's independence from abuse. From a societal perspective, there is a need for awareness-raising to increase public understanding of domestic violence; combat the normalization of domestic violence, victim-blaming, and stigmatization of survivors; and increase public knowledge of available services, including services for husbands to seek help. It is important to train responders according to World Health Organization (2013) clinical and policy guidelines and promote survivor-centered approaches that ensure self-determination, safety, confidentiality, and informed consent.

The results show that women are largely on their own in contemporary Kyrgyzstan. Women receive little or no help from families, health systems and law enforcement, and there are only a few civil society actors (like the shelter) that provide help. This absence creates significant social costs for the country now and in the future. To truly make headway on reducing family violence in Kyrgyzstan, all these levels of help and social service must be addressed and improved.

Notes

1. Domestic violence and intimate partner violence (IPV) often are used interchangeably in the literature to refer to violence between intimate partners (Krantz & Garcia-Moreno, 2005). However, operationally, these terms are different. Domestic violence is a broader concept than IPV and refers to various forms of violence involving members of the same household (e.g., spouses, partners, in laws, parents, children, siblings). The term commonly also includes violence between individuals who formerly shared a household, such as ex-boyfriends or ex-spouses (World Bank, 2009). The most common type of domestic violence is violence against women (VAW) committed by an intimate partner. This study acknowledges multiple explanations for violence and assumes that violence against women may be perpetrated not only by an intimate partner, but also by other family members within the household (e.g., in laws). It recognizes that across different cultural settings, women live in a wide variety of family structure arrangements (Hyder, Noor, & Tsui, 2007), and that within a particular

cultural context, structural factors (such as family dynamics with in laws) can contribute to domestic violence in the home (Heise & Kotsadam, 2015; Panchanadeswaran & Kovarola, 2005). In this study, the terms “domestic violence,” “family conflict,” and “abuse” were used. When individual studies were cited, the terms used by the authors were retained.

2. Official government data on violence against women is limited, and often refers to registered cases rather than estimates of broader prevalence (Human Rights Watch, 2015). In many countries, including Kyrgyzstan, health surveys such as the Demographic Health Survey provide the first national-level estimates and acceptance of intimate partner violence. However, evidence from local nongovernmental organizations suggests that the numbers are much higher and that most abused women prefer to stay silent and not seek help because of social sanctions and societal acceptance of violence, fear of retribution and jeopardizing their children’s future, and lack of an alternative place to stay or exit options for women.
3. The law (previously called *Law on Social-Legal Protection from Domestic Violence*) was originally adopted by the government in 2003 and then revised in April 2017 to include more detailed measures to address the gaps in the enforcement mechanisms in the previous legislation (UN Women, 2017).
4. In 2017, there were an estimated 14 crisis centers in Kyrgyzstan, two of which had facilities for overnight stays (up to 12 beds) (McCormack & Djaparkulova, 2017). Both were in the country’s capital and provided very limited assistance in terms of both the quality and the amount of direct services.
5. The initial criteria for inclusion in the study were set as: 1) married women aged 18–49, 2) having history of domestic violence, and 3) residing at the shelter. The process of memoing, theoretical sampling, and constant comparative analysis (Oktay, 2014) suggested that the researcher look for: 1) women from different socio-economic backgrounds to examine economic influences on coping mechanisms, 2) women who lived jointly with their husbands’ families because of the attendant role of mother-in-law in the family conflict, 3) and women who sought help from both formal and informal sources to compare their coping mechanisms.
6. The national drink, which is made of cultured milk and is used to alleviate symptoms of alcohol withdrawal or a hangover.
7. In cases when the couple does not live with the husband’s family, the husband’s parents often take the first child to live with them (<https://www.caravan.kz/articles/apashkinydeti-373806/>). This tradition came about as a result of early marriages in pre-soviet Kyrgyzstan (12–14 years old girls), where women had several children in their early teens and were not prepared to care for them by themselves (<https://pandaland.kz/blogs/dom-i-semya-3/otnosheniya-nuzhno-li-otdavot-pervogo-rebenka-roditelyam-muzha>). As a result of progressive Soviet era laws, women gained equal access to education, health, and economic opportunities, and the minimum age for marriage stipulated by the Family Code of the Kyrgyz Republic was 18 years old (National Statistical Committee, 2017).
8. A Kyrgyz dish resembling dumplings, which typically consist of a spiced meat mixture, usually lamb or ground beef, in a dough wrapper, usually steamed.
9. In Greek mythology, the phoenix is a mythical bird that after a life of five or six centuries immolates itself on a pyre and then rises from the ashes to begin a new cycle of years. The phoenix is often a symbol of immortality, reborn idealism, or hope.
10. According to Kyrgyz tradition, a woman must wear a scarf on her head in front of her husband and her in laws as a sign of respect for her “new” family (<http://kyrgyzculture.wordpress.com/tag/kyrgyzstan>).

11. According to Kyrgyz tradition, the first child is named by the husband's parents.

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Notes on contributors

Saltanat Childress, MSW, PhD, is a research fellow at the Department of Sociology, Center for Demography and Ecology, University of Wisconsin–Madison. Dr. Childress has extensive experience in coordinating community-based programs and conducting intervention research for international development programs in Central Asia on issues of land tenure rights, community-based public health, and socio-economic empowerment of women. Her research interests include prevention of violence against women and children, intersection of reproductive health and gender-based violence, and socioeconomic determinants of women's empowerment and health.

Deborah Gioia, MSW, PhD, is an Associate Professor at the University of Maryland, Baltimore, School of Social Work. Dr. Gioia has over 30 years of experience working as a researcher and practitioner in the field of mental health and family issues. Her clinical experience includes individual and group treatment of children and families involved in child sexual abuse, substance use, suicide counseling, and other acute mental health issues. Her research interests include schizophrenia and vocational identity, evidence-based practice adoption by mental health practitioners, adolescence and emerging adulthood, and veteran's mental health.

Jacquelyn Campbell, PhD, RN, FAAN, is a Professor and Anna D. Wolf Chair at Johns Hopkins University School of Nursing. Dr. Campbell is a national leader in research and advocacy in the field of domestic violence or intimate partner violence (IPV). She has authored or co-authored more than 230 publications and seven books on violence and health outcomes. Her areas of scholarly expertise and interest include intimate partner violence and health outcomes, abuse during pregnancy, IPV-related health inequities, dating violence, workplace violence, and intimate partner homicide.

ORCID

Saltanat Childress  <http://orcid.org/0000-0002-2864-2780>

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