

TRAPPED WITHIN THE COUPLE: THE COMPLEX, DISSOCIATIVE, AND DISSONANT EXPERIENCE OF INTIMATE PARTNER SEXUAL VIOLENCE

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Keywords:

Intimate partner sexual violence, Trauma-informed care, Sexual coercion, Interpretative phenomenological analysis, Polyvictimization

Abstract

Sexual violence (SV) and intimate partner violence (IPV) are widely recognized as major public health and societal concerns. Yet, although sexual violence is often examined within broader IPV frameworks, the specific experiential features of intimate partner sexual violence (IPSV) remain underexplored. This study aimed to examine women's lived experiences of IPSV and the meaning-making processes through which coerced sexuality is understood and (sometimes) acknowledged as violence. Using interpretative phenomenological analysis, in-depth interviews were conducted with two women who experienced IPSV within heterosexual marriages. An idiographic, case-based analytic approach was used to examine microprocesses and relational dynamics as they unfolded within the couple. Five experiential themes were identified: (1) the erosion of intimacy, (2) psychological violence as a relational infrastructure shaping sexual coercion, (3) IPSV as an embodied and alienating experience, (4) acknowledging IPSV as an evolving process, and (5) the mark of violence. Findings depict IPSV as elusive and invasive, occurring within a context of attachment and expected safety, and shaped by embodied ambivalence, relational constraint, and cognitive dissonance. Clinically and institutionally, the analysis highlights the risk of misreading performed sexual participation as consent and underscores the relevance of survivor-centered, trauma-informed responses that attend to embodied safety, sexual agency, and the longer-term relational sequelae of IPSV. Future research should further explore IPSV within diverse populations, including sexual minorities and individuals facing intersecting vulnerabilities due to polyvictimization.

Introduction

Since feminist movements of the 1970s brought attention to intimate partner violence (IPV), the issue has garnered increasing recognition as a major societal and public health concern and is acknowledged as one of the most prevalent forms of violence against women worldwide (World Health

Organization, 2021). However, the specific study of sexual violence within intimate partnerships (IPSV) is much more recent and has often been treated as a secondary issue subsumed under broader IPV frameworks, despite significant prevalence rates and the unique relational contexts in which it occurs (Bagwell-Gray et al., 2015; Barker et al., 2019; Garrido-Macías et al., 2020; Livingston et al., 2004; Tarzia, 2021a).

IPSV generally refers to unwanted, coerced, or forced sexual acts occurring within an intimate or romantic relationship. Yet, as highlighted by Bagwell-Gray et al. (2015), the field is characterized by definitional inconsistency and limited consensus, likely due to the relatively recent acknowledgment of IPSV as a distinct area of inquiry. Definitions range from partner rape to more subtle forms such as coerced sex, unwanted sexual contact, with physically or psychologically controlling behaviors.

IPSV occupies a complex position at the intersection of sexual violence and IPV, sharing some characteristics with both but also constituting a phenomenon in its own right. As Tarzia (2021b) argues, IPSV is neither simply sexual violence nor merely a form of IPV, but a phenomenon whose meaning and impact emerge from the specific context of romantic involvement and ongoing emotional entanglement. Several studies have highlighted that IPSV may lead to unique patterns of adverse outcomes that differ from those associated with other forms of sexual or partner violence, suggesting that IPSV should be considered as a distinct—though related—construct. A clearer understanding of its specific outcome patterns is crucial for informing assessment protocols and tailoring clinical and therapeutic interventions (Barker et al., 2019; Wright et al., 2021).

However, despite its clinical and social significance, research specifically addressing IPSV remains limited (Tarzia & Tyler, 2021). Existing studies are predominantly quantitative and provide little insight into how women subjectively experience, interpret, or cope with IPSV (Barker et al., 2019). Few qualitative studies have examined IPSV in depth from the victim's perspective (Tarzia, 2021a, 2021b).

The present study sought to address this gap by exploring how women construct meaning around their experiences of IPSV through an interpretative phenomenological analysis (IPA). Rather than applying predetermined conceptual categories, the study examined how women (1) made sense of the subjective experience of IPSV, (2) situated it within the relational dynamics in which it unfolded, and (3) experienced its psychological and relational consequences, including the processes through which violence was—or was not—acknowledged as such. Through this idiographic exploration, the study aimed to contribute to a deeper understanding of the experiential mechanisms involved in IPSV and to inform clinical, therapeutic, and social interventions by shedding light on how sexual violence can become normalized, internalized, and potentially recognized within intimate relationships.

CONCEPTUALIZING INTIMATE PARTNER SEXUAL VIOLENCE

IPSV has been conceptualized in multiple ways within the literature. Some have situated it squarely within the broader framework of IPV, emphasizing its links to coercive control, gendered power, and cumulative forms of abuse (BagwellGray, 2021; Johnson, 2008; Stark, 2007; Stark & Hester, 2019). From this perspective, IPSV is understood as one expression of a wider system of domination in

which psychological, physical, and sexual violence co-occur and reinforce one another (Glowacz et al., 2018).

However, other scholars have argued that IPSV should also be considered a phenomenon in its own right, with distinct relational and psychological characteristics that cannot be fully reduced to general IPV frameworks (Barker et al., 2019; Tarzia, 2021a, 2021b). This approach highlights that IPSV can occur in a wide diversity of relational contexts, including relationships that do not fit traditional patterns of coercive control. In this expanded view, IPSV encompasses not only severe forms such as partner rape, but also more subtle, repeated, and situational forms of unwanted sexual activity. This means moving beyond a narrow focus on physically forced rape and attending to a wider range of coercive tactics.

Research on sexual violence has conceptualized sexual coercion as a continuum of tactics used to obtain sexual activity without free and informed consent (Farris et al., 2008; Glowacz et al., 2018; Mitchell & Raghavan, 2021). These tactics extend beyond physical force to include verbal pressure, manipulation, intimidation, or the use of substances to reduce resistance (Abbey et al., 2014; French et al., 2015). Importantly, studies have shown that sexual coercion is not limited to relationships characterized by coercive control: it is highly prevalent among young adults and within seemingly “nonviolent” relationships, reflecting everyday sexual scripts and gender expectations (Benbouriche & Parent, 2018; Depireux & Glowacz, 2024).

Prevalence data have supported this expanded understanding. Black et al. (2011) reported that approximately one in ten women experience(d) partner rape in their lifetime, with substantially higher rates when nonpenetrative or nonphysical forms of IPSV are included. Among women reporting sexual coercion, 75% identified their intimate partner as the perpetrator. In Belgium, Pieters et al. (2010) found that partners accounted for 48% of sexual touching and forced sex among women and 13% among men. More recently, Depireux and Glowacz (2024) reported that nearly half of young adults experienced at least one form of partner sexual coercion in the past six months. Together, these figures underscore the widespread nature of IPSV, particularly in its more subtle forms that are often normalized (Jeffrey, 2019; Johnstone, 2016). Yet despite its prevalence, the phenomenology and specific impacts of IPSV remain insufficiently understood.

WHAT DO WE KNOW ABOUT WOMEN’S EXPERIENCES OF INTIMATE PARTNER SEXUAL VIOLENCE?

While the impacts of general sexual violence and IPV are well documented, far less is known about the specific outcomes and lived experiences of IPSV. These areas have been challenging to study within the predominantly quantitative research that has characterized the field thus far (Bagwell-Gray, 2021; Bagwell-Gray et al., 2015; Laskey et al., 2019). Most research on the outcomes of sexual victimization has centered on types of sexual acts, particularly physically forced rape, which has often been regarded as the most severe form of sexual coercion and has been closely associated with adverse physical and psychological outcomes (Classen et al., 2005; French et al., 2015; Ullman et al., 2007). However, other studies have underscored the harmful consequences of nonpenetrative forms of sexual victimization (French et al., 2015; Resnick et al., 1993). Regarding the impact of any form of IPV, including IPSV, Laskey et al. (2019) highlighted diverse psychological and relational consequences

that such violence can inflict on individuals. The limited research specifically addressing IPSV has identified a significant risk of psychological, social, and somatic disorders (Barker et al., 2019; Tutty & Nixon, 2021), including depressive, anxiety, and suicidal symptoms associated with partner-perpetrated sexual coercion (Depireux & Glowacz, 2024).

Few authors have explored these impacts using qualitative approaches that emphasize victims' subjective experiences. Naghavi et al. (2019) identified several emotional consequences, including distress, feelings of humiliation and degradation, low self-esteem, diminished sense of control over one's life, guilt, loss of hope, and suicidal ideation. Livingston et al. (2004) reported similar findings and observed that victims of partner-perpetrated sexual coercion often experienced anger, betrayal, and bitterness toward their partner; an inability to trust; and feelings of disgust, sadness, and guilt—emotions that frequently contributed to a broader sense of relational insecurity. Even in the absence of physical force or pain, research has suggested that sexual coercion can have profound effects on victims, who often grapple with complex feelings of responsibility and guilt (Jeffrey & Barata, 2017). Such experiences are frequently internalized, leading to self-doubt, fear of the partner, and the adoption of emotional coping strategies (Tarzia, 2021b).

WHAT SHAPES WOMEN'S ACKNOWLEDGMENT OF INTIMATE PARTNER SEXUAL VIOLENCE?

Another pressing issue in the study of IPSV concerns the factors that influence victims' acknowledgment or identification of the violence they have experienced. Prior research has indicated that more than 50% of women who have experienced rape do not perceive themselves as victims, a phenomenon referred to as "hidden rape" (Bondurant, 2001; Kahn & Mathie, 2000; Kahn et al., 1994, 2003; Koss, 1985). Estimates have reached as high as 83% in studies using broader definitions of sexual victimization (Johnstone, 2016). It is crucial for victims to identify the violence they have endured in order to access compensation, specialized assistance, and general support and to report their abuser, thereby helping to prevent further abuse (Kahn & Mathie, 2000). Although acknowledgment of general sexual violence has been studied extensively using quantitative methods, qualitative research examining this process from victims' own perspectives remains scarce. This gap is particularly evident in studies of violence between intimate partners (Clements et al., 2021; Dziewa & Glowacz, 2021a).

FACTORS ASSOCIATED WITH (INTIMATE PARTNER) SEXUAL VIOLENCE ACKNOWLEDGMENT

Quantitative studies, grounded in the positivist paradigm, have examined personal and situational factors that differentiate victims who acknowledge sexual violence from those who do not, with the aim of predicting when acknowledgment occurs. Bondurant (2001) identified several predictors of rape acknowledgment. Women who were more likely to identify as victims typically reported more violent assaults, including greater force used by the perpetrator, higher levels of resistance, and more noticeable injuries. They also tended to endorse an "acquaintance rape" script (characterized by physical coercion, minor injuries, and substance use) rather than a "blitz rape" script

(involving severe physical violence, threats, and significant injuries).¹ In Bondurant's study, proximity to perpetrator did not appear to affect acknowledgment. However, other research has suggested that victims in closer relationships with perpetrators are less likely to identify as victims (e.g., Koss, 1985; Littleton & Henderson, 2009; Littleton et al., 2008). Kahn et al. (1994) found that non-acknowledging victims often endorsed the brutal assault script and reported less force, and these victims struggled to reconcile their experiences with preconceived notions of rape. Across studies, perpetrators have often been described as obtaining nonconsensual sex by ignoring verbal protests rather than using physical force (Muehlenhard & Linton, 1987), and nonpenetrative assaults have been less likely to be acknowledged (Kahn et al., 2003; Peterson & Muehlenhard, 2007). Emotional reactions also appear to play a role: victims who recognize an assault as rape often report more intense negative emotions (Mathie & Kahn, 1995, in Kahn & Mathie, 2000). These emotional responses may drive them to seek help from specialized services, thereby reinforcing a victim identity. Peer reactions (Pitts & Schwartz, 1993) and victims' substance use during the assault (Mathie & Kahn, 1995, in Kahn & Mathie, 2000) also have been linked to acknowledgment; those who discuss the event with supportive peers are more likely to identify as victims, while those who were intoxicated at the time are less likely to do so, possibly due to self-blame.

Further research on IPSV has suggested that victims tend to attribute more responsibility to the perpetrator when coercive tactics are perceived as severe or explicit, rather than subtle. Affective dependence also has been described as a barrier to ending the relationship and has been associated with lower attribution of responsibility to the partner (Garrido-Macías et al., 2020). Although findings are mixed, victims are often less likely to label rape as such when the perpetrator is an intimate partner, regardless of coercion severity (Jaffe et al., 2017).

MAKING SENSE OF VICTIMIZATION EXPERIENCES

Beyond individual and situational factors, acknowledgment is also shaped by the interpretive frameworks victims use to make sense of what happened. Recurring themes in victims' narratives have included gendered representations that significantly shape the acknowledgment process (Phillips, 2000; Walker et al., 1996). These representations often include beliefs in men's biologically driven and irresistible sexual needs, as well as the stereotypical image of victims as virtuous individuals who must consciously avoid danger and strongly resist their assailants. Faced with a perceived obligation to satisfy men's needs and the conflict with a victim identity, women may see themselves as fulfilling a gender role rather than recognizing themselves as victims of sexual assault. Persistent sexual advances by men are often viewed as a natural progression of events rather than a violation of women's rights and desires. As a result, instances of sexual coercion are frequently minimized, justified, or even interpreted positively (e.g., feeling charmed or flattered), especially when compared to more severe forms of sexual abuse (Jeffrey & Barata, 2017).

Initially, acknowledgment was considered a binary variable. However, qualitative research has revealed a continuum of uncertainty regarding the awareness of sexual victimization experiences

¹ A script is a cognitive structure that organizes our expectations about how an event typically unfolds in a given situation and is influenced by cultural tendencies (Johnstone, 2016; Kahn & Mathie, 2000). The rape script, therefore, refers to the general (and culturally transmitted and internalized) representation of what constitutes rape for an individual.

(Lipinski et al., 2021). Some researchers have identified a spectrum of victims for whom the identification of violence is marked by ambivalence (Johnstone, 2016; Koss, 2011; Peterson & Muehlenhard, 2011). Gavey (2005) introduced the concept of “rape culture,” in which sexual coercion is normalized within sexualized relationships. In this cultural context, rape is not perceived as a distinct act of violence but rather as the extreme end of a continuum of coercive behaviors. Consequently, victims often struggle to distinguish between socially accepted coercion and sexual assault (Johnstone, 2016). Acknowledgment of violence along this continuum is closely linked to the legitimization of sexual coercion and the desire to avoid stigma associated with being labeled a victim. However, even without explicitly identifying as victims, individuals may recognize emotional distress, lack of consent, and problematic behavior from their partners. Building on these findings, Peterson and Muehlenhard (2011) proposed the match-and-motivation model to explain the acknowledgment of sexual violence among women who have experienced such violence. In their study, participant narratives revealed two themes influencing this process: (1) the match between the abusive incident and the rape script each participant endorsed and (2) motivation, including perceived costs of labeling the incident as rape (e.g., heightened negative emotions, loss of control, and a potential need to file a formal complaint).

In general, the acknowledgment of IPV involves complex and ambivalent processes that are both emotional and cognitive in nature (Reisenhofer & Taft, 2013). These processes have been examined particularly within the framework of IPV exit (Dziewa & Glowacz, 2021a), which has highlighted perceptual shifts at personal relational levels. Within this framework, identifying violence as a key stage in the exit process typically requires a reassessment of the situation, including reinterpreting a partner’s behaviors as violent—sometimes facilitated by episodes of severe violence. However, to date, these microprocesses have not been investigated specifically with respect to identifying IPSV. Given this gap, an idiographic approach is needed to trace how women make sense of IPSV experiences over time and how (non)recognition emerges within the relational context.

Method

PARTICIPANTS

This study adopted an exploratory qualitative approach grounded in the epistemological framework of interpretative phenomenological analysis (IPA; Smith & Osborn, 2008; Smith et al., 2009, 2022), which focuses on how individuals construct meaning around complex lived experiences. The aim of IPA is not to represent a population but to explore in depth how individuals make sense of particular phenomena. Its idiographic orientation privileges detailed understanding of singular and complex cases, an approach particularly suited to studying phenomena that are both sensitive and underexplored, and when the goal is to demonstrate the existence of an experience as a phenomenon in its own right, worthy of inclusion in scientific knowledge.

Grounded in a phenomenological stance, the study sought to remain as close as possible to participants’ lived experiences, approaching them in their own terms and in all their complexity. IPA has been recognized as a robust and valid qualitative approach in psychology, capable of producing meaningful findings even with very small samples (1–3 participants), provided that quality criteria are

met (Bramley & Eatough, 2005; Pringle et al., 2011; Nizza et al., 2021; Smith, 2011). Such criteria include the richness of the data allowing for a coherent interpretative narrative, a narrow and specific focus enabling in-depth analysis, the integration of verbatim excerpts to ground interpretations, and interpretative depth that extends beyond description.

The inclusion criteria required participants to be at least 18 years old, to have been in a romantic relationship for at least one month, and to have engaged in sexual activity with their intimate partner without really wanting to. The minimum relationship duration of one month was selected to focus on committed partnerships rather than short-term encounters, casual relationships, or early-stage flirts. The wording “without really wanting to” was intentionally chosen Archives of Sexual Behavior to capture experiences of IPSV without imposing predefined labels such as “rape” or “sexual assault,” acknowledging that many victims do not self-identify as such, particularly within intimate partner contexts (Bagwell-Gray et al., 2015). This phrasing closely reflects the everyday Belgian French expression “sans le vouloir vraiment,” commonly used to describe (un)willingness or consent in non-clinical language.

Ultimately, two women meeting these criteria participated (see Table 1). Both shared a broadly similar profile as they identified as Caucasian, cisgender, heterosexual women and were mothers who had been involved in heterosexual marital relationships, though their life trajectories and contexts differed markedly: one grew up in a traditional, patriarchal, religious, upper-middle-class family, while the other experienced early trauma, family instability, and a history of polyvictimization since childhood. These contrasts allowed exploration of how different life histories and contexts shape the experience and meaning-making of IPSV. Arianne and Alison are pseudonyms used to preserve anonymity.

Table 1 Participant characteristics

Pseudonym	Age	Children	Marital status at time of the interview	Types of violence experienced
Arianne	55	4	Divorced since 2011	Sexual, psychological, and physical violence
Alison	33	3	Separated since 2021, not yet divorced, but maintains emotional and sexual ties	Sexual and psychological violence

Including two participants represented a methodological compromise to preserve idiographic depth while enabling a cross-case exploration of meaning-making processes. This approach aligns with what we consider an “ethics of the singular,” committed to foregrounding the complexity of individual narratives without diluting them within a larger corpus. The study therefore employed what we call an IPA “case-study type” design, based on the cross-case exploration of two complex and information-rich individual cases. The seven-hour corpus of rich, detailed, and emotionally engaged interviews provided substantial interpretative material consistent with the study’s narrow and focused aim, which allowed us to assess the adequacy of the sample in terms of analytic depth rather than size alone.

Recent qualitative literature has questioned the universal applicability of data saturation as a standard of rigor, particularly in phenomenological and idiographic research (Saunders et al., 2018; see also Dworkin, 2024, for a review). In line with this perspective, the present study prioritized interpretative sufficiency—an analytic depth sufficient to illuminate the complexity of lived experience—over saturation. To further support this decision, we applied the framework of information power (Malterud et al., 2016), which emphasizes the relationship between the richness

and relevance of information provided by participants and the study's aim. From this standpoint, the sufficiency of the dataset depends less on sample size than on the specificity of the research question, the quality of dialog, and the analytic depth achieved.

MEASURES AND PROCEDURE

Participants were recruited through newsletters targeting professionals working in institutions specializing in the management of intimate partner violence and/or sexual violence. Most institutions declined participation due to ethical concerns related to the traumatic nature of sexual victimization and the potential impact of this research on victims. Ultimately, only one institution agreed to collaborate. Posters were displayed, and professionals were asked to inform their beneficiaries about the study. Communications did not provide a specific definition of IPSV to ensure inclusion of testimonies from all individuals identifying as victims or having experienced at least one unwanted sexual episode.

Data collection followed the principles outlined in the Helsinki Declaration. Ethical standards were upheld by providing detailed project information, obtaining informed consent, and ensuring that participants had access to adequate support services. Although both women were recruited through a specialized institution for domestic and gender-based violence, and a referral therapist from the institution was available before, during, and after the interviews, we also provided a list of external resources. These included anonymous helplines, specialized services for sexual violence and IPV, and psychological support centers, in line with ethical committee requirements to offer support options beyond the participants' current care setting.

In-depth interviews were conducted face-to-face in private, quiet rooms in June 2022. Two interviews were conducted with Arianne (totaling 4 h) and one with Alison (3 h). The researcher provided contact information for any questions or concerns. Interviews followed a semi-structured guide adapted from Dziewa and Glowacz (2021a). In line with the phenomenological foundations of IPA, the aim was to bracket predefined theoretical assumptions in order to approach the phenomenon as it is lived, narrated, and made meaningful by participants themselves (Smith et al., 2022). Accordingly, the interview guide was organized around broad experiential domains rather than predefined theoretical constructs. These domains included relationship history and relational dynamics, experiences of sexuality and violence within the relationship, perceived impacts, and processes of identification or non-identification of violence. Open-ended, narrative-eliciting questions were used to allow participants to structure their accounts in their own terms. Examples of guiding questions included: "If you were to tell me about your life journey and what led you here today, what would you say?"; "Can you tell me about your relationship and the dynamics that characterized it?"; and "Has it ever happened that you engaged in sexual activity with your partner without really wanting to? Could you describe how you experienced these situations?"

Non-leading prompts were used throughout the interview to deepen participants' meaning-making while avoiding the imposition of predefined categories. As is consistent with phenomenological interviewing, each question was reformulated during the conversation to anchor it in participants' own vocabulary and unfolding narratives.

DATA ANALYSIS

The IPA method (Smith et al., 2009, 2022) was employed to analyze participants' narratives. This method aims to achieve an in-depth understanding of their lived experiences and/or subjective perceptions (e.g., representations, point of view) regarding a particular phenomenon. IPA is grounded in three core theoretical foundations: phenomenology, hermeneutics, and the idiographic approach. IPA is phenomenological in its focus on the detailed exploration of lived experience, seeking to allow the experience to be expressed on its own terms rather than through predefined categories. It is also idiographic, as it situates participants in their unique contexts, explores their individual perspectives, and begins with an in-depth analysis of each case before drawing broader conclusions. Finally, IPA is interpretative, recognizing that both the researcher and participant engage in a process of meaning-making. This dual interpretation, also known as double hermeneutics, reflects the researcher's effort to make sense of how the participant makes sense of their own experiences.

This approach requires the researcher to temporarily set aside their analytical stance during interviews, immersing themselves in the participant's world to grasp the meaning and representations of their lived experience. Interviews were transcribed verbatim to capture verbal and non-verbal elements. Transcripts were carefully reread, and exploratory notes were produced to develop a detailed, coherent set of observations. We did not rely on a formal codebook, but instead used an ongoing, iterative process of thematization that allowed for a more fine-grained and richly contextualized analysis of the discourse (Paillé & Mucchielli, 2016). This approach was more consistent with the deeply idiographic orientation of the method employed, which prioritizes close engagement with each individual case and the progressive development of meaning rather than the application of predefined coding schemes.

In line with most recent guidelines of IPA (Smith et al., 2022), the analytic process used the updated terminology distinguishing between experiential statements, personal experiential themes (PETs), and group experiential themes (GETs). What were previously referred to as emergent themes in earlier editions of IPA (Smith et al., 2009), are now conceptualized as experiential statements, a shift meant to better capture the analytic nature of this stage. Experiential statements represent concise analytic formulations that synthesize key aspects of a participant's experience or sense-making, while incorporating the researcher's interpretative engagement, yet remaining grounded in the transcript. Clusters of related experiential statements were then brought together to form PETs. The term "personal" emphasizes that these themes operate at the level of the individual, and "experiential" underlines their grounding in lived experience and meaning-making. PETs may include subthemes that further specify nuances within a participant's experiential world. They represent interpretative entities that transcend specific moments in the transcript to capture recurrent patterns across the participant's narrative as a whole. In the cross-case phase, patterns of convergence and divergence were examined to construct GETs, which may likewise comprise subthemes. GETs represent higher-order experiential structures capturing both the shared and unique dimensions of the phenomenon across cases. The analytic process was systematically documented in a thematic table linking PETs to illustrative verbatim excerpts. The GETs and their subthemes form the basis of the interpretative narrative presented in the Results section.

The analytic process, anchored in IPA principles, also aligns with key qualitative research quality criteria: rigor (transparent and systematic procedure), credibility (triangulated interpretations and close authors' collaboration), transferability (thick, contextualized descriptions), and ethical integrity (reflexivity and careful handling of sensitive narratives) (Drapeau, 2004; Yadav, 2022).

Results

SYNTHESIS OF INDIVIDUAL CASE ANALYSES

ARIANNE'S CASE SYNTHESIS

Arianne is a 55-year-old cisgender heterosexual woman and mother of four. She comes from an upper-middle-class Catholic family, a background she considers highly significant in her life trajectory. She grew up with her younger sister and brother in an extended family environment centered around her maternal grandfather, who represented an important anchor in her upbringing. From an early age, family life held a central place in her identity, and she came to view building and nurturing her own family as a core existential purpose.

Professionally, Arianne studied agronomy at university with the initial goal of becoming an engineer. At age 23, she met her husband, with whom she quickly began cohabiting in a student residence during her final year of studies. After completing her degree, she worked as a science and mathematics teacher before devoting herself fully to raising her children. She described this withdrawal from paid employment as both a necessity and a relief, given the difficulty of managing children, professional responsibilities, and household work within the traditional family model she and her husband had adopted. During this period, she was responsible for renovating the farmhouse where the family lived, while her husband—who had initially worked in a café—began establishing himself as an entrepreneur.

The analysis of Arianne is based on her experience of IPSV within her 20-year marriage and reveals a context of poly-violence marked by coercive control, within which sexual violence was embedded and took on specific nuances. Arianne described this violence as invasive and characterized by profound ambivalence and dissociation between the mechanical nature of sexual interactions and her internal experience of suffering. Her difficulty in recognizing the abusive nature of the relationship, reinforced by traditional norms that valorized marital submission, contributed to a process of legitimizing the violence. A turning point occurred when an act of physical violence took place—an event she experienced as such, even though she did not explicitly identify herself as a victim of physical IPV. This moment acted as a catalyst for recognizing the abuse and initiating the willingness to leave.

At the time of the interview, Arianne continued to experience lasting psychological and physical repercussions, including difficulties with letting go, experiencing pleasure, and forming emotional bonds. Her recovery process—supported by various therapeutic interventions—remained complex and ongoing, involving the reconstruction of her identity outside this alienating relationship and the gradual restoration of emotional and bodily autonomy.

ALISON'S CASE SYNTHESIS

Alison is a 33-year-old cisgender heterosexual woman and mother of three. She grew up without knowing her father and spent her childhood alternating between her mother's and grandmother's homes until age 12, when she returned to live exclusively with her mother. She is the eldest of four siblings, each born to a different father. Alison describes her developmental history as chaotic, violent, and deeply destabilizing. She reports having experienced physical and psychological abuse within her family environment, marked by fluctuating dynamics of fusion and rejection. She also disclosed multiple instances of intra- and extrafamilial sexual abuse beginning around age five or six, perpetrated both by adult men and by an early boyfriend.

In response to these early traumatic experiences—and those that followed—Alison developed a range of psychiatric difficulties, including chronic depressive and anxious symptoms as well as borderline features. She explains that she has always perceived herself as lacking a stable identity, describing a sense of being “an object for men,” expected to remain silent, compliant, and accommodating. Throughout her life, she has received psychiatric care on multiple occasions and has been hospitalized several times. Alison reports being unable to work due to the severity and chronicity of her psychological difficulties.

At age 15, Alison became pregnant by her first romantic partner. She explains that this pregnancy gave her a reason to live and someone to love at a time when she struggled with self-harm and suicidal thoughts. The father, who was 14, was unable to assume parenting responsibilities, leaving Alison largely alone during pregnancy and leading to the end of the relationship. When she was 16, Alison was introduced by her mother to Eric, who would later become her husband. Eric, then 22 and working as a welder, was not someone she initially found appealing, and she did not wish to begin a romantic relationship with him. However, her mother regularly invited him to their home, and over time Alison came to view him as a source of stability and a potential escape from what she experienced as a “toxic” family environment. She describes their relationship, cohabitation, and eventual marriage as circumstances she accepted rather than actively desired, though she also perceived in Eric a paternal attitude that filled longstanding emotional gaps.

Together, Alison and Eric had several children, though the circumstances surrounding each birth were complex. Her eldest child, now 17, and her second child, age nine, are both fathered by her first boyfriend. Her third child, age 3, is Eric's biological daughter. A fourth pregnancy ended with the loss of the fetus.

The analysis of Alison is also grounded in her experience of IPSV within her 16-year marriage. Throughout this period, she was embedded in a coercive relational dynamic in which she was progressively isolated from her social network. She reports being confined at home, responsible for domestic tasks and childcare, while experiencing escalating psychological and sexual violence. This pattern persisted until March 2021, when she was finally able to leave the relationship and find temporary refuge with her sister. Despite the separation, she continues to struggle to maintain distance from Eric, whom she still sees regularly. Alison attributes this difficulty to the strength of his psychological hold over her, her lifelong exposure to abusive relationships, and the powerful emotional dependence she developed—described metaphorically as an addiction.

At the time of the interview, Alison continued to experience significant psychological and physical repercussions: frequent dissociation, aversion to touch, a negative body image, and difficulty in forming new intimate relationships. Her process of rebuilding involves intensive support, including care from her psychiatrist, a specialized domestic violence service, and hypnotherapy. These interventions have gradually contributed to restoring a sense of stability and emotional safety.

The cross-case analysis of qualitative data highlighted five key group experiential themes addressing our research question: (1) the erosion of intimacy: the complex experience of sexual violence in intimate partner relationships, (2) psychological violence as a relational infrastructure shaping sexual coercion, (3) intimate partner sexual violence as an embodied and alienating experience, (4) acknowledging intimate partner sexual violence as an evolving process, and (5) the mark of violence: when intimacy remains a threatened territory.

THE EROSION OF INTIMACY: THE COMPLEX EXPERIENCE OF SEXUAL VIOLENCE IN INTIMATE PARTNER RELATIONSHIPS

AN INVASIVE SEXUALITY

Arianne's and Alison's narratives converged around the experience of sexuality as invasive in the sense of being constantly present and permeating the relationship. Sexuality was described not as a bounded domain of intimacy, but as an ever-looming dimension of daily life, shaping interactions, emotions, and behavior even outside explicit sexual encounters. Both women described living under the continuous anticipation of sexual demands, creating a climate in which their bodies were experienced as permanently available and exposed. This sense of omnipresence was fueled by repeated sexual solicitations and physical advances that disregarded their desire or consent, fostering a profound feeling of bodily appropriation. Sexuality thus occupied a disproportionate place within the relationship, leaving little room for emotional intimacy or personal boundaries. However, the way this invasive presence was managed differed between the two cases. For Arianne, sexual interactions were confined to a rigid and repetitive routine, which offered a fragile sense of containment and predictability. Yet refusals increasingly triggered irritation or aggression, reinforcing the perception that sexuality remained a constant underlying pressure. Alison, by contrast, described a progressive escalation of sexual violence, marked by both an increase in frequency and a diversification of imposed practices, intensifying the sense that sexuality had become an inescapable and overwhelming force over time.

AR: “[in response to the question about the place that sexuality occupied within the relationship] If I had to put it in percentage: ninety percent. Ninety percent, because we were both frustrated. Our whole life together, we were frustrated. He was constantly waiting and demanding a lot, and he got nothing. And I, being constantly raped [...].”

AL: “He would say to me, ‘It’ll be fine, just let it happen’, and he was very intrusive physically, he would touch me, uh [sigh]... In a way I’ve always hated, actually. He was taking possession of my body.”

SEXUALITY UNDER PRESSURE

Beyond invasiveness, sexuality was experienced as occurring under constant pressure, progressively stripping both women of any possibility of genuine consent. Sexual encounters were typically initiated through direct physical advances, while refusals were anticipated as dangerous or costly. This pressure did not operate solely through overt coercion, but was also sustained by a profound distortion of relational perception, in which the partner was experienced as overwhelmingly powerful and the self as deeply weak, leaving little perceived capacity for resistance. Both women described having internalized a position of submission rooted in their life trajectories and reinforced within the relationship. They came to prioritize their partner's sexual needs over their own boundaries, perceiving resistance not as a viable option but as an act likely to worsen the situation. In this context, sexual compliance emerged not as consent, but as a strategy of self-protection. For Arianne, this pressure was primarily implicit. She explains that force was rarely necessary, as she had learned to anticipate the repercussions of refusal—danger, tension, and relational deterioration—and to submit preemptively. Sexuality could thus take the form of what she described as “voluntary compliance,” aimed at preserving domestic peace and regulating her partner's emotional state. For Alison, whose history included early sexual abuse, compliance had long functioned as a survival strategy. Her account also includes explicit acts of sexual coercion, in which her ex-husband used physical force to compel her into sexual activity, reinforcing her sense of powerlessness and confirming that resistance was both futile and dangerous.

AR: “No, he didn't use force because there was no need to use force [...] because when he did that, I knew very well that if I didn't go along with it, there would be consequences for me, so I would submit automatically [...].”

AL: “[...] I might have been able to resist longer, maybe I could have done it, but since it was... familiar, I thought to myself, it's fine, it'll be over soon. I was so afraid of the consequences it could have afterward if, uh... in the end, I stopped resisting [...].”

DISSOCIATING MECHANICAL SEXUAL INTERACTION FROM LIVED EXPERIENCE

A central dimension of both narratives concerns the dissociation between the mechanical execution of sexual acts and the subjective experience of sexuality, giving rise to marked cognitive and emotional tension. While sexual interactions appeared externally active and reciprocal, they were internally experienced as passive, endured, and profoundly alienating. Both women participated in sexual acts while emotionally disengaging, focusing on strategies to “get it over with” as quickly as possible. Arianne described herself as a sexual “machine” or “robot,” mechanically performing expected actions without desire, agency, or emotional involvement. Alison similarly reported faking responses in order to hasten the end of the encounter, deliberately disconnecting from her bodily sensations and surroundings. Their accounts convey a radical form of objectification as they depicted themselves as inert, lifeless entity, reduced to a purely functional body upon which sexual acts were imposed. This experience was marked by a sense of being emptied of subjectivity. Internally, these encounters were lived as distressing and interminable, often described as “nightmares” that stretched far beyond their actual duration.

AR: “I am a machine, sexually I am a machine, I am a robot. [...] for me, it's really like being a prostitute, really.”

AL: “It lasted a long time, it lasted SO long [in a pained tone], so long... And uh... in my head, I was torn, wondering, ‘Should I start moaning, maybe it will end faster?’ [...] so I just kept my mind busy... I didn’t even see him anymore, really, that’s why it felt like hours, because there were so many thoughts [...] I was just trying to fill the time [...]”

Despite this shared external-internal disconnected experience, both women reported profound ambivalence toward their bodily reactions during sexual violence. Arianne expressed confusion over the fact that she could reach orgasm despite not wanting the sexual encounter. This paradox intensified her sense of violation, by making her feel she was “being made to climax by her tormentor,” leading her to self-stimulate during sex in an attempt to legitimize the sexual arousal she felt, reclaim control over her body and render the experience more tolerable.

AR: “He didn’t understand, he’d say to me, ‘I make you climax, and you don’t want it anymore’, but for me, it was like I was being made to climax by a tormentor, almost like... well, like I was being raped. And so I didn’t understand; I’d think, ‘How can I climax when this is the person who, an hour before, was completely turning my life upside down, in a negative way’. So I think I would even stimulate myself, telling myself, at least I’m not wasting my time.”

Alison, in contrast, described intense sensations during the assaults that she later interpreted as addictive, likening them to the effects of a drug. At times, this ambivalence led her to seek sexual contact with her ex-husband, even after their separation, which she understood as reflecting a form of emotional and bodily dependence rather than desire. Despite employing different coping strategies, both women appeared engaged in efforts to make sense of a profoundly ambivalent cognitive, emotional, and embodied experience.

AL: “I think that somehow... well, it still takes effort to admit it and say it... but I think that somehow, when you’re raped, you feel a kind of adrenaline, something so intense that... it’s sad to say, but uh... it becomes addictive, that feeling.”

PSYCHOLOGICAL VIOLENCE AS A RELATIONAL INFRASTRUCTURE SHAPING SEXUAL COERCION

“HAVING ME ALL TO HIMSELF”

Although sexual violence was described as “taking up all the space” in participants’ narratives, it was consistently situated within a broader system of psychological violence and coercive control that actively shaped sexual availability, the capacity to refuse, and the meaning of consent. Sexual violence did not occur in isolation but was embedded within a dynamic of submission to an idealized partner perceived as all-powerful. This dynamic reinforced an implicit expectation of sexual availability, in which refusal became incompatible with loyalty, love, or safety. Both women described their ex-husbands as figures exerting pervasive influence and control, whom they themselves referred to as “narcissistic abusers.” For Arianne, her partner embodied a foundational figure of emotional and existential security, occupying both parental and spousal roles. For Alison, he was experienced as a guru-like, protective figure who filled profound emotional voids. Although the early phase of each

relationship was initially experienced as reassuring, it was gradually replaced by increasing control and multiple forms of violence that structured their sexual lives.

AL: “[...] so you have to understand that I saw him as a god, truly. [...] Yes. I realize that when I say it so plainly, people might not understand, but uh... really like a god. Like someone... a cult guru, it was really like that. [...] And I often felt like a dog at the end of a leash, and whenever I went too far, he would pull on the leash, and I would be brought back.”

FROM ISOLATION TO DEPENDENCE: A CAGE WITHOUT BARS

Both women reported progressive isolation that deprived them of external support and personal resources, further constraining their capacity to resist sexual demands. This isolation confined them within the intimate sphere of the couple, where any form of closeness, affection, or dependence carried the risk of being sexualized. Arianne described avoiding physical or emotional proximity altogether, as any sign of closeness systematically triggered sexual advances. Alison, by contrast, experienced constant surveillance and control, including restrictions on movement, communication, and emotional expression.

Beyond social isolation, both narratives convey a broader dispossession of individual resources—social, emotional, and psychological—that undermined their ability to position themselves as sexual subjects capable of self-determination.

AR: “[...] He tried to isolate me from everything that was too close to me, um... Anyone who could have influenced me.”

AN ERASED (SEXUAL) SELF

In addition to control and isolation, both women reported sustained psychological attacks, including humiliation, manipulation, and the systematic erosion of self-worth. Over time, this violence contributed to a profound loss of agency and identity. Arianne described merging entirely into her partner, losing the capacity to think or feel independently. Alison similarly portrayed herself as reduced to an object, deprived of decision-making power or personal desire. This erosion of selfhood had direct implications for sexual experience. As agency diminished, sexuality was no longer experienced as an expression of desire, but as a duty attached to the partner's needs. The loss of a sense of self thus functioned as a critical mechanism through which sexual coercion was made possible and sustained.

AR: “There are two things: the first is losing the ability to think for yourself. You think like the other person, you are like the other person [...] So really, you no longer... Your brain has become their brain. You've completely merged into the other, you've become the other. For me, that's an enormous form of violence. Um... The second thing, which is maybe linked to the first, is that you lose all self-worth, and that's probably why you become the other. They focus so much on your flaws that you lose all confidence in yourself. I had no confidence left. The only confidence I had was in him.”

INTIMATE PARTNER SEXUAL VIOLENCE AS AN EMBODIED AND ALIENATING EXPERIENCE

BETWEEN PAIN AND THE DISEMBODIMENT: A BODY UNDER THREAT

Sexual violence was consistently described as an embodied experience in which the body was perceived as being under constant threat. Because this violence unfolded within an intimate partnership marked by physical proximity and emotional entanglement, the body was lived as being possessed by the partner, constantly at their mercy, exposed to intrusion, and permanently at risk. Both women described bodily states characterized by tension, pain, hypervigilance, and aversion to touch.

AL: "In my body, it was like a kind of alert, 'danger, danger, danger', uh..."

This chronic bodily threat was closely linked to dissociative processes. Both women described a sense of disconnection from their sensations and emotions, as if recounting experiences that did not fully belong to their bodies. Sexual violence was narrated in a detached, almost clinical manner, suggesting dissociation as a means of psychological survival in the face of repeated violation.

AR: "I was cut off from my body, from all emotions, you know. I didn't feel anything except for suffering [...] So, I could speak very coldly without feeling anything."

Beyond sexual encounters, this embodied distress extended to everyday life. Both reported profound exhaustion and depleted energy, embedded in a daily existence structured around managing household tasks, childcare, their partner's demands, and their own suffering. Intimacy and physical closeness were largely avoided, as touch itself had become associated with danger rather than comfort.

To compare women and men on sexual consent attitudes, independent samples *t*-tests were performed for each subscales. No statistically significant differences were observed for perceived behavioral control ($t(427) = -0.27, p = .8018$), positive attitudes ($t(427) = 0.98, p = .3298$), indirect behavioral approach ($t(427) = 0.67, p = .5014$), sexual consent norms ($t(427) = -0.74, p = .4575$), and awareness ($t(427) = -1.48, p = .1408$). Table 5 displays the means and standard deviations for each subscale.

LIVING A DISCONNECTED BODY: BETWEEN MESSENGER AND WASTE

While the body was mentioned by both, as though it were a kind of entity separate from themselves, it did not occupy the same place in their narratives. For Arianne, the body played a central role in her experience of violence, but especially in the period afterward. Arianne perceived her body as her savior, an allied messenger that constantly conveyed signals to her, and with which she experienced a series of events after the breakup that allowed her to reconnect immediately with her bodily sensations. She described a constant need to shower multiple times a day, to uplift herself in the shower, to express herself through her body, to dance.

AR: "[...] and then afterward, the awareness came, but it was after, it was overwhelming, it was wonderful, really. Because when I left him, after that, I had only bodily experiences. [...] Later, I was in the shower, I needed to wash myself three times a day, for example. Then, in

the shower, I felt the need to lift myself up, so I would stand on my tiptoes, as high as possible [...]"

While Arianne marvels at her body and its richness, Alison described a persistent experience of bodily disgust and rejection. Her body was perceived as contaminated, hateful, and irreparably marked by men's control since adolescence. Although she too reported frequent showering, this behavior was associated not with reconnection but with attempts to erase a sense of defilement, accompanied by nausea and the urge to vomit.

AL: "I gradually began to hate my body; I felt like I was trash. [...] I constantly felt the urge to vomit. I always had this need to... I constantly wanted to go wash myself, I wanted to go into the shower, let the water run and... scrub..."

Together, these accounts illustrated how IPSV profoundly disrupts embodiment, not only during the violent relationship but also in its aftermath. While sexual violence imposed dissociation and bodily alienation, post-violence trajectories revealed divergent processes of either bodily reclamation or persistent bodily rejection, underscoring the deeply embodied nature of IPSV.

ACKNOWLEDGING INTIMATE PARTNER SEXUAL VIOLENCE AS AN EVOLVING PROCESS

TURNING POINTS AND RETROSPECTIVE REAPPRAISAL OF COERCED SEXUALITY

The acknowledgment of IPSV was not described as a binary shift from unawareness to awareness, but as a gradual and evolving process. In both narratives, moments of rupture emerged retrospectively as distinct triggers, sharply defined in time, allowing earlier experiences to be reinterpreted through a new lens. Coerced sexuality played a central role in this process: although not immediately labeled as such, its invasive and distressing nature progressively facilitated its recognition as abusive and nonconsensual.

AL: "The December 2020 rape. It was the hardest to endure but, at the same time, also the most liberating, because that's when I had the realization to tell myself 'this is rape, you were raped'."

For Arianne, this process involved what she described as "small seeds," subtle signs, or messages from the universe, which only gained significance during and after her separation. Although she had recognized some dysfunctions in her ex-husband, relational discomfort, personal distress, or even parallels in the stories of women on television, it was only when her ex-husband physically threw her to the ground that she realized she had been a victim of violence. Even this pivotal moment, however, did not fully encapsulate the breadth of her experiences. Her interactions with the police later revealed the criminal nature of the sexual abuse, and a day spent by the sea with her daughter led to the profound realization that her existence had been entirely subsumed within her family devotion.

AR: "[...] and so you attract things to yourself [...] it's like little sparks... little seeds that start to... that get planted, and at some point, poof [mimics a sudden sprouting]!"

Alison described a similar process but placed greater emphasis on the emotional and experiential acknowledgment of violence, including the need to “feel” and internalize the nonconsent as real beyond an intellectual appraisal. For her, the turning point came during a specific and particularly violent rape, which triggered a retrospective identification of the sexual abuse she had endured throughout the relationship. She linked this shift to consent cues within the interaction: this time, she had clearly demonstrated, through her will, attitude, and behavior, that she did not consent. She had attempted to resist, expressed verbal refusal, and refrained from faking compliance, instead remaining completely still.

AL: “For me, I wasn’t emotionally certain about what I had experienced, whether it was really there and all that, so I felt like an impostor. But that day, my attitude showed that I did not agree, my words said I did not agree [...] That’s when I realized.”

BELIEVING IT IS NORMAL BECAUSE “YOU’VE NEVER KNOWN ANYTHING ELSE”

In both cases, the acknowledgment of IPSV arose through an accumulation of signs, supported by external elements that facilitated reflection, and was suddenly catalyzed by significant events disrupting the violent normality of their lives. These pivotal moments were marked by acts or experiences that were extraordinary, unfamiliar, and often characterized by intensity (such as the well-being experienced during a seaside trip without the partner, the raw violence of a physically forced rape, or explicit physical violence...). These events stood in contrast to ongoing relational dynamic of submission, in which both women had been constantly at the service of their family unit and ex-husbands, shaped by childhoods and upbringings that legitimized such a model.

AL: “I thought it was normal. I always believed it was normal because I had experienced the same as a child [restrictions on freedom], so I told myself, well [shrugs]...”

FROM DOMESTIC CONFINEMENT TO EXTERNAL FRAMES FOR NAMING COERCED SEX

External perspectives played a facilitating role in the acknowledgment process by disrupting the perceived normality of the relationship. Encounters with professionals, relatives, or media representations offered alternative interpretative frameworks, particularly regarding coerced sexuality, allowing participants to question what had previously been understood as marital duty or personal failure. For Alison, this included returning to her mother’s house, where she felt safer than with her ex-husband, discussions with her psychiatrist about her coerced sexuality, her sister-in-law’s encouragement to observe other couples, and insights gained from social media. For Arianne, external supports were fewer but significant: a sympathetic police officer who explained the legal consequences her ex-husband could face, a television program on domestic violence where women shared similar accounts of energy depletion, and her lawyer’s suggestion to learn more about narcissistic abusers. Both women also noted that recounting their stories during the interview facilitated moments of clarity and connection.

AR: “[regarding a discussion with a police inspector] But everything I thought was trivial, everything I believed was just part of married life, well, it wasn’t trivial at all. It was something... something actionable, actually, and I saw it as something ridiculous.”

FROM SELF-BLAME TO LEGITIMIZING COERCED SEXUALITY

A major barrier to acknowledging IPSV was the persistent internalization of responsibility. Both women described feeling accountable for sexual encounters they did not desire, interpreting refusal as selfish, dangerous, or illegitimate. This internal attribution of blame contributed to the normalization and legitimization of coerced sexuality, delaying its recognition as violence. This pervasive sense of guilt operated across individual, marital, and familial levels. Arianne highlights a Cartesian and scientific upbringing that stifled personal development, indoctrination by her ex-husband, relentless guilt-tripping, and ingrained beliefs legitimizing coerced sexuality and marital duty. Alison, by contrast, points to an abusive environment that consistently blamed her and encouraged submission to men. Both women describe being driven to doubt their victimhood throughout the process of awareness, even after identifying episodes of sexual violence, suggesting that this process extends beyond initial recognition. For both, responsibility always rested on their shoulders, and they felt they had to accept it and live with it. In this context, what happened during sex (e.g., compliance, “going along,” or attempts to avoid escalation) could be misread by the self as complicity rather than coercion, reinforcing self-blame.

AR: “Maybe I chose them that way, so perhaps I have to take responsibility for that. [...] I was responsible for what was happening to me. If I didn’t have sex with him, I was responsible. If I didn’t make the dinner he wanted, well, I was responsible.”

AL: “I wasn’t feeling well, and uh... I kept telling myself that I was the problem and that I needed to find solutions.”

Due to these numerous barriers, as well as the necessary accumulation of signs underpinning the acknowledgment process, Arianne and Alison emphasized the need for sufficient time to achieve awareness. Indeed, it is a complex process that can only begin through fundamental questioning of individual beliefs. In this regard, Arianne highlighted the need for more assertive and explicit external interventions to force the process. Alison’s account, however, explained that overly direct interventions aimed at fostering awareness would not have worked for her, as she was not yet ready. Rather than initiating a process of awareness, such attempts have led to a categorical rejection of the offered help and an intensified legitimization of her relationship.

AL: “Often, you think, ‘if only someone had told me’, but actually, that’s not true, you’re just not ready. Over time, there were, uh... three different women in my life who told me. I completely rejected it. I thought they’re all crazy. That’s not true. He’s a good man.”

AR: “I had absolutely no idea how he worked, not at all. And some people tried to open my eyes, but, uh... you’re so brainwashed that you just don’t see it; you don’t want to see it.”

AWARENESS AS A CATALYST FOR CHANGE IN EMBODIED BOUNDARIES

While IPSV was not the initial trigger for leaving the relationship in either case, its acknowledgment played a decisive role in enabling change. In Alison’s case, recognizing rape as such constituted a point of no return. This shift occurred when she was able to act in ways consistent with her own felt nonconsent (fighting back, saying no) and when her partner was clearly perceived as a sexual aggressor (using physical force and engaging in nonconsensual penetration). For Arianne,

although sexual violence had long been normalized as a marital duty, its reclassification as abuse occurred retrospectively and contributed to the broader dismantling of coercive control. Like other forms of violence, IPSV thus played a role in the process of exiting the relationship; however, given its entanglement with the intimate sphere of the couple, it may require particularly severe or explicit transgressions to become recognizable as such. In both accounts, naming IPSV was closely tied to bodily boundaries (e.g., no longer tolerating touch, refusing, becoming still), making the violence experientially undeniable.

AL: “I just stopped, and my libido didn’t come back; there was nothing. I didn’t want anything, I just wanted my body to be left alone, not touched. Then, I got this burst of energy, and when he wanted it, I really started standing up to him, even physically sometimes. I think that changed everything.”

THE MARK OF VIOLENCE: WHEN INTIMACY REMAINS A THREATENED TERRITORY

A BODY ON DISPLAY: BETWEEN FEAR AND PERFORMANCE

The narratives reveal how sexual violence left a lasting imprint that does not simply fade with the end of the relationship. For Arianne and Alison, the experience of violence remains inscribed in both body and mind, persistently shaping their relationship to intimacy, desire, and their sense of self. Arianne described a sexuality that no longer feels like her own: she is able to give pleasure but struggles to receive it, trapped in a dynamic that resembles performance more than intimacy. Letting go—through touch, caress, or orgasm—appears distant and almost unreachable, as if fear had become lodged within her body.

AR: “I feel like I’m in a porno. They’re just in it for their own pleasure, and since I’m the one giving, they’re happy, but it’s just made me more and more disgusted. Sex is just terrible now. There’s no letting go, no relaxing.”

Alison faced similar challenges as she has developed a pronounced fear of intimacy and struggled with being touched or seen naked, particularly due to a deterioration in her body image. For her, the fear of falling into another abusive relationship can lead to self-sabotage in new connections.

AL: “I just can’t... build closer connections, because I’m too scared of... I overthink it, really. Too scared of getting hurt. [...] Recently, there was this guy who was interested in me. Uh... I found the FIRST opportunity to self-sabotage.”

MARKED IN THE MIND: THE IMPRINT OF PSYCHOLOGICAL VIOLENCE

Beyond the sexual violence they endured, it was psychological violence and coercive control that both women described as the most profoundly shattering. They spoke of a slow erosion of self—of being worn down in their sense of worth, confidence, and identity, until they no longer recognized themselves. This loss of identity was experienced as a form of violence in its own right. Arianne conveyed the feeling of having been entirely dispossessed of her own existence, as if she had ceased to exist outside of her ex-husband. Alison, in turn, described an inner voice that relentlessly echoed self-doubt and degradation, a cycle of internalized violence that became inescapable. Sexual violence,

far from being separate from this process, deepened it—stripping them further of autonomy over their own bodies, their own intimacy, leaving them with the unsettling sense that even their most private spaces had been taken from them.

AR: “A hit, it goes away. Once it’s over, it’s gone. I read that somewhere once, and it’s true. But everything that’s psychological, that doesn’t go away at all. It stays. So for me, the worst kind of violence is psychological violence.”

AL: “When I think about both psychological violence and, uh... rapes and all that, what really stands out to me is that we suffered so much more from the psychological than the physical in the end. [...] It’s the phrases that kept repeating in your head, like, ‘you’re nothing’.”

TRAPPED IN THE PAST: DISSOCIATION AND RE-EXPERIENCING

Survival took shape in ways that were not always chosen but emerged instinctively, shaped by past experiences and unfolding throughout the relationship—and sometimes long after it ended. The narratives revealed an automatic mode of endurance, in which awareness of the violence was pushed aside, emotions and bodily sensations became distant, and thought itself seemed to shut down. In those moments, there was no space for reflection, only the need to keep going. Even after the breakup, echoes of this state persisted. Both Arianne and Alison described sudden, overwhelming memories that pulled them back into the past, leaving them momentarily disoriented, as if time had folded in on itself. These embodied reactions were particularly reactivated in situations involving intimacy, touch, or sexual proximity. These experiences reminded them that the past was not entirely behind them—that the body, in its own way, still remembered.

AR: “And then, at some point, I ran away automatically, because I think it was a matter of survival. Otherwise, I think I would’ve ended up taking my own life.”

Discussion

This study contributes to IPSV research by providing an in-depth analysis of women’s lived experiences and the interpretive processes through which they understand and acknowledge violence. Drawing on qualitative case studies, our analysis highlights the multifaceted and intertwined dimensions of IPSV. In the sections that follow, we discuss two interrelated dimensions: (1) women’s embodied and ambivalent experiences of IPSV, and (2) the processes through which IPSV is acknowledged over time.

WHEN INTIMACY BECOMES HARM: EMBODIED AND AMBIVALENT EXPERIENCES OF INTIMATE PARTNER SEXUAL VIOLENCE

Arianne and Alison’s narratives portrayed sexuality as elusive and invasive and were marked by a profound sense of bodily dispossession. They reported bodily alienation, suggesting an extreme estrangement from physical sensation, emotional attunement, and sexual subjectivity. Crucially, this experience unfolded within a committed relationship—a relational space typically expected to provide

trust and safety (Jesslyn & Dewi, 2020; Tavakol et al., 2017)—yet it was experienced here as one of fear, control, and ambivalence. Beyond discrete episodes, participants described sexuality as an organizing force that extended beyond sexual encounters, shaping daily life through anticipation, dread, and a sense of being continually requisitioned for a partner's needs. These accounts suggest that IPSV has a distinctive experiential texture insofar as it is lived through attachment, intimacy, and the social meaning of couplehood. The body appeared central in this dynamic, serving both as a site of suffering and the medium through which dominance was enacted. This process was sustained by coercive control and internalized gendered norms (e.g., marital duty) that can normalize coercion (Dziewa & Glowacz, 2021b; Kwiatkowski, 2018; Stark, 2007). Consistent with literature on complex trauma and dissociation, such conditions can disrupt the integration of bodily sensations, affect, and self-experience, contributing to posttraumatic symptoms and disconnection from embodied awareness (Barker et al., 2019; Brokke et al., 2022; Fung et al., 2022; Hébert et al., 2018; Newton et al., 2024). This erosion of intimate security illustrates how IPSV can blur boundaries between love and violence, reinforcing coercive control as a useful framework for understanding its pervasive and insidious nature (Stark, 2007). Clinically, these findings support trauma-informed, holistic, and integrated approaches for survivors of IPSV, rather than exclusively mind-focused care (Fernet et al., 2023). In particular, interventions that target stabilization, embodied agency (e.g., reconnecting with bodily cues, boundaries, and consent as lived), and the rebuilding of safe intimacy may help address survivors' needs and facilitate help-seeking. While promising practice guidelines have been proposed, further work is needed to clarify what is most effective across clinical presentations (Fuller, 2019; Machorrinho, 2022). Beyond the acute phase and even post-separation, our findings also point to clinical targets that may persist over time, including disrupted bodily safety, difficulties with touch and intimacy, and challenges in rebuilding sexual agency and desire. Attending to these relational and embodied sequelae may be important for recovery.

Closely tied to this embodied experience, Arianne and Alison's narratives revealed a tension between the "mechanical" nature of sexual interactions and their internal emotional states. Although submission strategies are well documented (see, for example, Martin et al., 2007), their accounts suggested a pattern that went beyond passive compliance: they reported actively performing participation (e.g., feigning pleasure, "giving him what he wants") while feeling distressed, and physiological arousal sometimes further complicated their interpretation of what was happening. They also described pragmatic attempts to regulate or contain coerced sexuality (e.g., negotiating limits, restricting frequency, withdrawing into one's thoughts during the act), highlighting how sexual compliance could become routinized as relational labor rather than experienced as desire or mutuality.

Cognitive dissonance theory offers a useful lens for this discordance: when outward behavior conflicts with internal appraisal, individuals may reduce discomfort by reinterpreting the situation rather than changing behavior (Festinger, 1957). In our cases, this dissonance generated psychological strain and sustained ambivalence, obstructing sense-making and delaying the ability to label the experience as IPSV. Importantly, ambivalence was sometimes intensified by bodily pleasure: participants described using self-stimulation to legitimate felt arousal or experiencing a powerful pull despite violation, further blurring consent appraisals and intensifying self-doubt. This dynamic appeared particularly likely when the experience did not fit dominant rape scripts that emphasize physical force and active resistance (Bondurant, 2001). As survivors struggled to reconcile these

contradictions, they may have relied on cognitive distortions and constructed narratives that minimized, justified, or normalized coercion (Badenes-Sastre et al., 2025; Goodfriend & Arriaga, 2018; Nicholson & Lutz, 2017). This pattern underscores the value of helping survivors identify, differentiate, and reintegrate key components of IPSV (e.g., physiological arousal, attachment feelings, and sexual consent), which may reduce self-blame and promote clearer appraisal of coercive experiences.

Enander (2010) also emphasized that this tension and its resolution are not solely cognitive but also involve an emotional process. Alison's narrative was particularly revealing in underscoring the need to consider emotional, cognitive, and behavioral components jointly in victimization experiences. It was only when she perceived alignment across these levels that she was suddenly able to label her partner's behavior as rape. More broadly, normalization may be sustained when interpretations are adjusted to accommodate behavior, whereas acknowledgment may become possible when behavioral positioning shifts such that interpretations realign with the survivor's lived suffering and resistance (see Fig. 1).

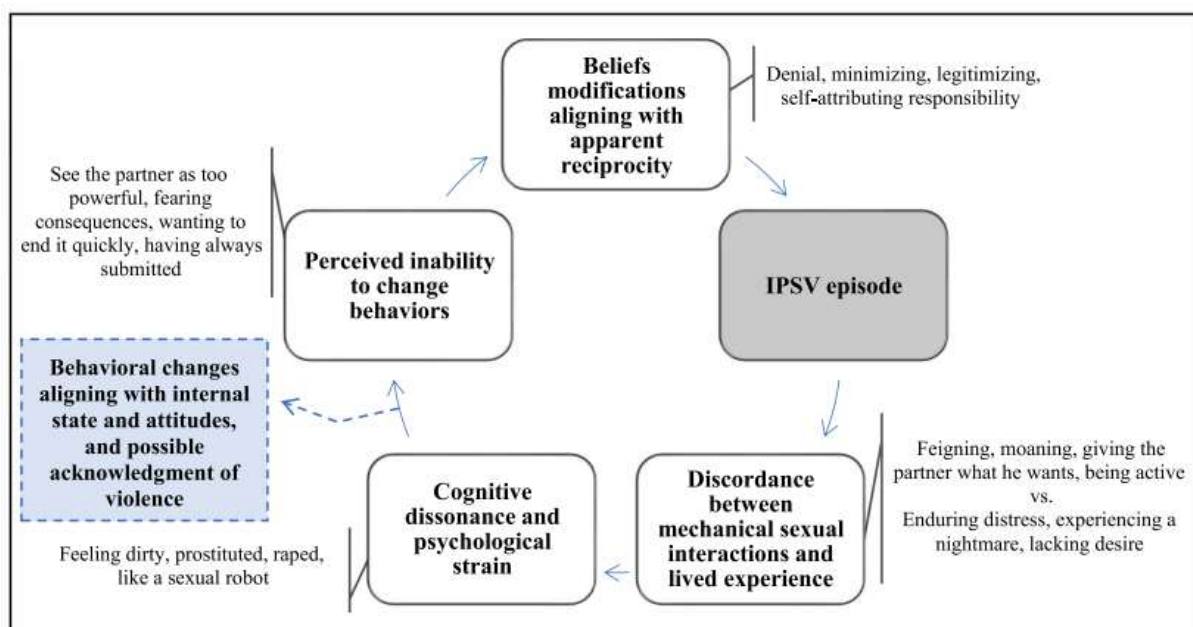


Fig. 1 Conceptual model of cognitive dissonance in the lived experience of intimate partner sexual violence

Across clinical and institutional contexts, these findings have direct implications for how IPSV is assessed and responded to (e.g., police and judicial settings). In particular, our cases highlight that active sexual behavior, such as simulation or “performing” participation, should not be equated with sexual consent. When such protective strategies are misunderstood as willing engagement, victims may be disbelieved and coercion minimized, underscoring the need for professional training that distinguishes behavioral performance from freely given consent. Assessment should also include systematic attention to the relational infrastructure of sexual coercion (e.g., coercive control, psychological abuse, dependency), which can shape both behavior during sexual interactions and disclosure.

Beyond assessment contexts, our analysis also points to psychological processes that can be targeted in prevention and intervention. Survivors may rely on cognitive distortions and

rationalizations (e.g., self-blame, minimization, or beliefs of powerlessness) that maintain coercion and delay acknowledgment; addressing these processes may therefore be clinically relevant. These findings also underscore the importance of situating IPSV within survivors' life trajectories. Clinical work may benefit from helping survivors develop a coherent narrative that integrates coercive experiences into their personal history and the relational meanings through which sexuality and partnership have been learned and lived (e.g., family duty, early sexual objectification), making acknowledgment and agency psychologically viable. Prevention efforts should also challenge rape myths and sexual scripts that frame rape as rare, perpetrated by a violent stranger, and recognizable through force and resistance (Garcia, 2023), as such scripts can obscure coercion within couples. Given the high prevalence of sexual coercion in intimate relationships, educational programs should more explicitly address coercive tactics and consent as an ongoing, relational process.

In addition, our findings support focusing on perceived behavioral control and self-efficacy, factors linked to both vulnerability to coercion and capacity to assert boundaries within coercive relational dynamics (Depireux & Glowacz, 2024). Sexual assertiveness provides a useful prevention and clinical framework, encompassing the ability to communicate desires and limits, refuse unwanted activity, and discuss consent openly (Loshek & Terrell, 2015). Empirical work suggests that greater sexual assertiveness is associated with lower sexual compliance and more active consent communication (Darden et al., 2019; McKenna et al., 2021a, 2021b). This may be especially important in established relationships, where explicit consent norms can be less salient than in casual contexts (Depireux & Glowacz, 2024).

FROM NORMALIZATION TO NAMING: HOW INTIMATE PARTNER SEXUAL VIOLENCE ACKNOWLEDGEMENT UNFOLDS OVER TIME

Identifying sexual violence is a pivotal step in disrupting and exiting violent relational dynamics. Yet acknowledgment processes remain understudied when sexual violence occurs within the broader context of intimate partner relationships and IPV (Clements et al., 2021). In our cases, IPSV acknowledgment unfolded as a gradual meaning-making process rather than a dichotomous realization, and was complicated by the intimate and relational infrastructure in which it unfolded. Both women described internalized submission and an absence of resistance to what they understood as a marital obligation (Phillips, 2000), alongside a pronounced sense of powerlessness consistent with learned helplessness (Seligman, 1972) and related IPV conceptualizations (e.g., battered woman syndrome; Walker, 2006). Our analysis also identified minimization, legitimization, and normalization as mechanisms that delayed acknowledgment (Dziewa & Glowacz, 2021b; Jeffrey & Barata, 2017), underscoring how beliefs about sexuality and intimacy shape interpretation and labeling (Jeffrey & Barata, 2017; Johnstone, 2016; Lipinski et al., 2021).

Importantly, IPSV acknowledgment did not develop in isolation. In our cases, it was interwoven with progressive recognition of other abusive dynamics (e.g., coercive control, psychological violence, physical violence), with each recognition feeding into a broader process of re-reading the relationship, deconstructing prior narratives about the partner, the couple, and the lived experience, thereby making a violence-based interpretation increasingly psychologically viable. This re-reading included a reappraisal of coerced sexuality—shifting from marital duty or “getting it over with” to recognizing

nonconsent and violation within sex itself. This reinterpetive work was shaped by internal cues (e.g., feeling dirty or sexually objectified) as well as external inputs, including social and familial responses that either legitimized or challenged the violence, exposure to informational sources, and significant life events.

Such life events can be understood through the lens of “turning points,” a concept developed in desistance theory and more broadly within exit processes as environmental opportunities that individuals may seize to facilitate change (Giordano et al., 2002; Laub & Sampson, 2001; Maruna, 2004). Glowacz and Born (2017) define turning points as novel situations that create a rupture with the past while offering opportunities for social support, personal development, and identity transformation. In the context of IPV, several scholars have identified turning points as catalysts for shifts in how survivors perceive themselves, their partner, their relationship, and the violence itself, as well as how they respond to it (Catallo et al., 2012; Chang et al., 2010; Murray et al., 2015). Notably, the turning points described by participants were often anchored in consent cues and sexual meaning (e.g., explicit refusal, stopping the performance of compliance, or reframing coerced sex as nonconsensual). Our data suggest that turning points can operate in at least two ways: some may be sufficiently “extraordinary” to trigger a sudden cognitive shift that disrupts normalization, whereas others accumulate over time, progressively reshaping meaning and contributing to acknowledgment. In line with this, Samelius et al. (2014) suggest viewing turning points not as isolated events but as evolving processes of self-redefinition, relational reassessment, and reinterpretation of lived experience. Overall, acknowledgment appeared to unfold within a dynamic temporality, punctuated by pivotal moments that supported ongoing efforts to make sense of one’s lived reality.

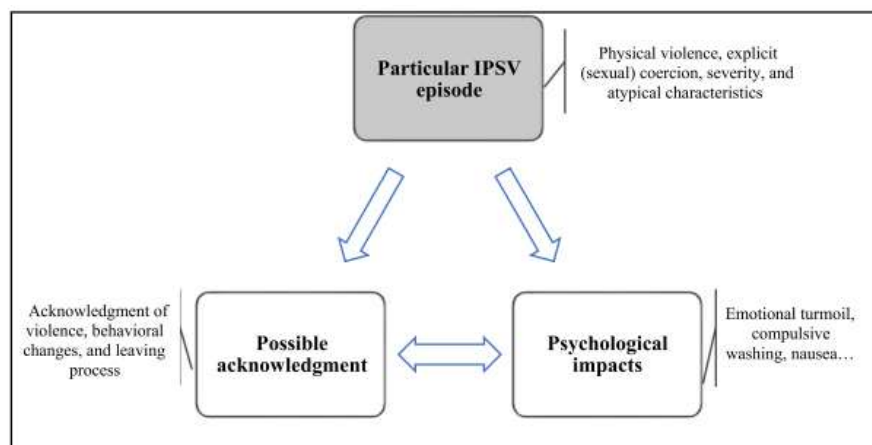
Survivors may also engage in a decision-making process regarding whether and when to label an experience as abusive, particularly given the relational and familial repercussions such labeling can entail (Peterson & Muehlenhard, 2011). In Arianne’s case, acknowledging the violence as such would have meant relinquishing an ideal of family life. Notably, the narratives suggested that this process began before explicit acknowledgment and continued well beyond initial labeling. At the time of the interviews, both women reported ongoing difficulty fully identifying themselves as victims, indicating that acknowledgment may remain partial even after it becomes thinkable.

Another critical aspect of acknowledgment involves the psychological changes that accompany it. Prior work has linked acknowledgment of sexual violence to heightened emotional responses following sexual abuse (Jeffrey & Barata, 2017; Johnstone, 2016; Kahn & Mathie, 2000; Peterson & Muehlenhard, 2011). In our cases, the narratives suggested a bidirectional dynamic between episode severity, psychological strain, and acknowledgment: more severe incidents could facilitate acknowledgment, which in turn intensified distress; conversely, escalating distress following an event could itself foster acknowledgment (see Fig. 2). This pattern underscores the complex interplay between violence severity, emotional load, and cognitive processing over time.

Both participants emphasized the role of emotional attunement in this process. They described moments of doubt— sensing that something was wrong—without fully registering the IPSV at an emotional level. This disconnection may relate to dissociation, which both women explicitly identified as central to enduring the abuse. In their accounts, dissociation appeared to serve a dual function: it provided short-term psychological protection, yet it also helped maintain the relationship and

inhibited fuller processing and acknowledgment. Consistent with this interpretation, prior research has linked dissociation to posttraumatic stress symptoms and revictimization among IPV survivors (Iverson et al., 2013), particularly when childhood abuse is also present (Webermann & Murphy, 2018), highlighting the compounding effects of polyvictimization and the clinical importance of assessing and addressing earlier victimization experiences.

Fig. 2 Intimate partner sexual violence outcomes and acknowledgment process



Finally, as illustrated in our proposed model, acknowledgment appeared to catalyze behavioral and relational change. Alison described a renewed sense of energy that enabled resistance to her ex-husband's control (e.g., refusing touch, increasing distance, disengaging from manipulation), whereas for Arianne—already in the process of leaving— acknowledgment functioned as a final trigger for separation. Together, these cases suggest a nonlinear process marked by critical thresholds after which meaningful shifts become possible. They also highlight heterogeneity in readiness and receptivity to external inputs. Overall, acknowledgment is best understood as an evolving psychological and relational process shaped by coping strategies, trauma history, and social influences; practically, this implies that support should remain available even when survivors do not (yet) adopt a violence label, and that interventions may need to be gradual and scaffolded.

LIMITATIONS AND FUTURE DIRECTIONS

While this study provides in-depth insights into the lived experiences of IPSV, several limitations should be noted. First, our sample comprised only two Caucasian, cisgender, heterosexual women in marriage, recruited from the same specialized IPV service. Although IPA prioritizes idiographic depth rather than generalizability, future research should examine whether the processes identified here replicate or vary across more diverse social positions, relationship configurations, and cultural contexts, as well as among sexual and gender minority survivors. Such work would benefit from an intersectional approach, considering how multiple social markers (e.g., gender, ethnicity, class, sexual orientation) intersect to shape individuals' experiences, acknowledgment, and needs. Our findings indicate that IPSV is both gendered and situated within particular life trajectories; studying populations outside heteronormative frameworks, including transgender survivors who face heightened victimization risks, are crucial to capture these nuances. Understanding these intersecting factors, as well as broader cultural and structural influences such as societal norms and gendered expectations, is key to tailoring clinical and preventive efforts.

Second, the retrospective nature of the interviews may have introduced recall and reconstruction biases. Because IPSV acknowledgment is an evolving process, participants' accounts likely reflect their current meaning-making and stage of acknowledgment rather than their appraisals at the time of victimization. Third, recruitment through a specialized service likely shaped the narratives: contact with clinicians, clinical framing, and therapeutic or legal support may have influenced how participants now interpret and name their experiences. Future research should more directly examine trajectories among survivors and how institutional responses (e.g., police, judiciary, medical settings, psychotherapy) facilitate or hinder acknowledgment, help-seeking, and recovery. Longitudinal studies tracking survivors' journeys over time could provide a more dynamic understanding of the acknowledgment process, although ethical and safety challenges inherent to research on ongoing victimization must be carefully considered.

Additionally, our results reflect a very singular perspective: two women with different life trajectories but broadly similar relational experiences. Examining IPSV under other relational configurations—for instance, among young adult couples, where sexual coercion is prevalent—could clarify whether coercion takes the same forms, whether it is driven by similar patterns of controlling behavior, and how these dynamics are experienced in light of contemporary relational norms that do not always fit with traditional marriage. Similarly, investigating forms of sexual violence that are less corporeal, such as pressures related to sexting, could illuminate whether the embodied experiences documented here generalize to digital contexts.

Finally, it would also be valuable to study perpetrators' experiences. Understanding relational dynamics from both partners' perspectives, without attributing blame to survivors, can inform prevention strategies and interventions aimed at reducing risk and recurrence. The deeply relational and dyadic aspects highlighted in the narratives suggest that survivors' experiences, trajectories, vulnerabilities, and needs are intertwined with those of their partners, and elucidating these interactions could enhance both clinical support and preventive efforts.

Conclusions

This study offers an idiographic, phenomenological account of IPSV that highlights how sexual violence within a committed relationship can be experienced as invasive, ambivalent, and alienating at bodily, emotional, and relational levels. The findings underscore the distinctive position of IPSV within IPV: it directly implicates the body and intimacy while unfolding within a broader relational and violent infrastructure. IPSV thus has a singular phenomenology that can profoundly and enduringly affect survivors' sense of intimacy, bodily grounding, and relational engagement. In the two cases studied, IPSV acknowledgment emerged as a complex, nonlinear, and multidimensional process embedded within the broader relational context. Recognizing one's own distress, identifying sexual behaviors as coercive, asserting nonconsent, or naming one's partner as the perpetrator are all possible outcomes of acknowledgment, which may not fully overlap and can sometimes regress. Clinical and judicial professionals should be aware of this nuanced process and support survivors in making sense of their experiences. Public awareness campaigns, including accessible online resources, may also help survivors who have limited access to external support while entrapped in the

relationship. Finally, survival mechanisms such as dissociation, self-blame, and simulation function to maintain psychological, relational, and familial homeostasis, and may obscure coercion. These findings highlight the risk that survivors' behaviors may be misinterpreted as consent in clinical or institutional contexts and emphasize the importance of trauma-informed approaches that attend to embodied safety, sexual agency, meaning-making, and longer-term difficulties with intimacy.

Acknowledgments

Our appreciation goes to the two women who courageously agreed to share their stories with us.

Author contributions

AD and FG contributed to conceptualization, formal analysis, validation, resources, writing—review and editing, and methodology. AD conducted investigation, data curation, writing—original draft preparation, visualization. FG carried out supervision. All authors have read and agreed to the published version of the manuscript.

Funding

This research received no external funding.

Data Availability

Given the sensitive nature of the narratives, the verbatim transcripts are not available. However, the corresponding author remains available for any reasonable request.

Declarations

CONFLICT OF INTEREST

The authors declare no conflict of interest.

INFORMED CONSENT

The experimental protocol complied with the Belgian guidelines for studies involving human beings. All participants provided written informed consent. The study was conducted in accordance with the Declaration of Helsinki.

ETHICAL APPROVAL

This study was approved by the Ethics Committee of the Faculty of Psychology (University of Liège) (Code: 5161, 24.03.22).

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