

## CHAPTER 4

### FINDINGS AND DISCUSSION

The purpose of this chapter is to present the experiences of Northeastern Thai women who had been abused by male partners and how the women disclosed their abuse experiences to others. The findings in this chapter are organized into three parts: (a) information about the participants, (b) the qualitative findings, and (c) discussion of the findings.

#### Part 1 Information about the Participants

In this part, the personal or background information, i.e. demographic information, marital information, and information related to wife abuse are described.

#### *Demographic Information of Participants*

The participants in this study were 16 Northeastern Thai women who had experienced abuse from a husband and who volunteered to discuss their experiences of disclosing wife abuse to others. Demographic information about those who participated in this study is shown in Table 1. Age of the participants at interviews ranged from 28 to 56 years with a mean age of 40.5 (SD = 6.7). The participants were predominantly Thais (87.4%, n =14) and Buddhists (93.7%, n=15). Five participants (31.2%) completed primary school and six (37.5%) completed high school education. Most of the participants (87.5%, n =14) were employed. Participants' incomes varied widely from

2,000 to 100,000 Baht/ month (mean= 10,566 Baht/month). Most women indicated that their incomes were enough for their living expenses.

Table 1

*Demographic Characteristics of the Participants (N= 16)*

Demographic Characteristics	Frequency	Percentage
Age (Years)		
25-29	1	6.3
30-34	2	12.5
35-39	5	31.2
40-44	5	31.2
45-49	2	12.5
50 or more	1	6.3
Ethnicity		
Thai	14	87.4
Chinese-Thai	1	6.3
Vietnamese-Thai	1	6.3
Religion		
Buddhism	15	93.7
Islam	1	6.3
Education		
Primary school	5	31.2
High school	6	37.5
Diploma	3	18.8
University	2	12.5
Employment Status		
Housewife	2	12.5
Employee	7	43.7
Government officer	4	25.0
Own business/work	3	18.8
Personal Income (Baht/month)		
Less than 5,000	2	12.5
5,000 – 10,000	7	43.7
10,001 – 20,000	5	31.2
20,001 – 30,000	1	6.3
More than 30,000	1	6.3

*Marital Information of Participants*

Information regarding marriages was obtained from in-depth interviews. The details are showed in Table 2. The majority of the participants (78%, n= 12) had their

first marriages at the age of twenty years or older. Fifteen participants (93.7%) had been married only once. Ten participants (62.5%) had already left the husbands, including one woman who was staying in a women's shelter at the time of interview. The other six participants (37.5%) remained living with their husbands. One participant remarried, had been abused by her ex-husband but the current relationship was not abusive. One participant had no children. One participant was expecting her second child. Eleven participants (68.8%) had 2 or more children. Most of the participants (87.4 %, n =14) lived in a nuclear family with their husband and children.

Table 2

*Marital Information of Participants*

Marital Information	Frequency	Percentage
Current Marital Status		
Living with husband	6	37.5
Left husband	10	62.5
Age at the First Marriage (years)		
15-19	4	25.0
20-24	8	50.0
25-29	4	25.0
Number of Marriages		
One	15	93.7
Two	1	6.3
Number of Children		
None	1	6.3
1	3	18.6
1 with a current pregnancy	1	6.3
2	9	56.2
3	1	6.3
4	1	6.3
Type of Family Structure in the 16 Abusive Marriages		
Nuclear family	14	87.4
Stay with husband's mother	1	6.3
Stay with husband's siblings	1	6.3

### *Information about Abuse*

Abuse information includes the type of abuse, abusive behaviors experienced by the participants, perceived frequency and severity of abuse, and length of time in marital and abusive relationships. Information about abuse primarily was collected from the interview data and supplemented by asking the participants at the end of the interview.

#### *Type of Abuse*

Abuse was categorized into 3 types: physical abuse, psycho-emotional abuse, and sexual abuse. The details are shown in Table 3. All participants in this study experienced psycho-emotional abuse. Twelve participants (75.0%) reported experiencing physical abuse and three participants (18.8%) reported experiencing sexual abuse. Two-thirds of participants (62.5%, n=10) experienced physical abuse concurrently with psycho-emotional abuse, whereas the other two participants (12.5%) experienced all types of abuse.

Table 3

*Types of Abuse (N = 16)*

Types of Abuse	Frequency	Percentage
<b>Type of Abuse Experienced by all Participants *</b>		
Physical Abuse	12	75.0
Psycho-emotional Abuse	16	100.0
Sexual Abuse	3	18.8
<b>Type of Abused Experienced by each Participant</b>		
One type: Psycho-emotional abuse	3	18.8
Two types: Physical and psycho-emotional abuse	10	62.5
: Psycho-emotional and sexual abuse	1	6.2
Three types: Physical, psycho-emotional and sexual abuse	2	12.5

\* One participant might experience more than 1 type.

### *Abusive Behaviors*

Abusive behaviors of the participants' husbands are summarized in Table 4. Physical attack without the use of a weapon was the most common abusive behavior. Among psycho-emotional abuse behaviors, verbal abuse was commonly found. Approximately half of the women reported their husbands' adultery and financial irresponsibility. Three participants in this study (18.7%) experienced sexual abuse by being forced to have sex with their husbands.

Table 4

#### *Abusive Behaviors Experienced by Participants (N= 16)*

Abusive Behaviors	Frequency	Percentage
<b>Physical Abuse</b>		
Pulled, pushed or shoved, dragged, hit, slapped, punched, knocked, kicked, stamped, or choked	10	62.5
Threw objects towards the participants	6	37.5
Assaulted with objects (stick, pan, broom, slipper, handcuffs)	5	31.2
Threatened with weapons (knife)	2	12.5
Burned a mosquito net	1	6.3
<b>Psycho-emotional Abuse</b>		
Verbal abuse (yelling, scolding, swearing, criticizing, and putting down)	11	68.7
Having an affair	9	56.2
Financial irresponsibility	8	50.0
Threatening or frightening	5	31.2
Destroying personal belongings	3	18.7
Not coming home or coming home late	3	18.7
Acting possessively	2	12.5
Isolating from others	2	12.5
Verbally abusing children	2	12.5
Not treating as a wife	2	12.5
Being angry or irritable	2	12.5
Neglecting wife and children	2	12.5
Monitoring wife's actions	2	12.5
Humiliating in front of others	2	12.5
Physically abusing children	1	6.3
Spending money gambling	1	6.3
Interrupting sleep	1	6.3
<b>Sexual Abuse</b>		
Forced sex	3	18.8

*Perceived Frequency and Severity of Abuse*

Perceptions of frequency and severity of abuse were obtained by asking participants to quantify their experiences based on their perception. The details are shown in Table 5. Perceived frequency of abuse was characterized as seldom, sometimes, often, and very often. Two-thirds of the participants (62.5%, n=10) characterized the frequency of abuse as occurring ‘very often’. Perceived severity of abuse was characterized as mild, moderate, severe, or extremely severe. Ten participants (62.5%, n=10) reported the severity of abuse as ‘extremely severe’.

Table 5

*Perceived Frequency and Severity of Abuse (N=16)*

Perceived Frequency and Severity of Abuse	Frequency	Percentage
Perceived Frequency of Abuse		
Seldom	-	-
Sometimes	-	-
Often	6	37.5
Very often	10	62.5
Perceived Severity of Abuse		
Mild	-	-
Moderate	3	18.7
Severe	3	18.7
Extremely severe	10	62.6

*Duration of Stay in Marital Relationship and Abusive Relationship*

The duration of time that participants remained in the marital relationship ranged from 5 to 36 years (mean = 16.7, S.D. = 6.9). The duration of stay in the abusive relationship ranged from one to 36 years (mean = 12.1, S.D. = 8.1). Ten participants (62.6 %) stayed in the abusive relationship for ten years or longer. The details are shown in Table 6.

Table 6

*Duration of Stay in Marital Relationship and Abusive Relationship (N = 16)*

Number of Years	Marital Relationship	Abusive Relationship
4 or less	-	2 (12.5 %)
5-9	2 (12.5 %)	4 (25.0 %)
10-14	4 (25.0 %)	5 (31.3 %)
15-19	5 (31.3 %)	4 (25.0 %)
20-24	4 (25.0 %)	-
25 or more	1 (6.2 %)	1 (6.2 %)

*Confidants of Abuse Disclosure*

All participants disclosed the abuse to lay persons and family members before having contact with professionals. Most women tended to disclose the abuse to female family members (mothers = 9, sisters = 7). Eight participants (49.6%) had talked to co-workers about their experiences while seven participants (43.4%) talked to neighbors. Ten participants had contact with professionals (62.5%), including policemen, physicians, and nurses because of their abuse while one participant had called a telephone hotline for counseling. Half of the participants had talked about being abused to more than one group of confidants. Six women (37.5%) had talked to family members, lay persons, and professionals while two of them (12.5%) had talked to family members and lay persons. The other half of the participants had talked about the abuse to either their family members (6.2%, n = 1) or lay persons (43.4%, n= 7). The details are shown in Table 7.



Table 7

*Confidants of Abuse Disclosure (N = 16)*

Confidant of Abuse Disclosure	Frequency	Percentage
Family members *	9	55.8
Mother	9	55.8
Father	3	18.6
Sister	7	43.4
Brother	-	-
Female cousin	1	6.2
Mother in law	1	6.2
Lay Persons *	15	93.7
Friend	4	24.8
Husband's friends	1	6.2
Neighbor	7	43.4
Close acquaintance	1	6.2
Acquaintance (abused women)	3	18.6
House maid	1	6.2
Co-worker	8	49.6
Boss	4	24.8
Professionals *	6	37.5
Police	4	24.8
Health providers		
Nurse	3	18.6
Doctor	3	18.6
Hotline counselor	1	6.2
Confidants Disclosed by Each Participant		
Only family members	1	6.2
Only lay persons	7	43.8
Family members and lay persons	2	12.5
Family members, lay persons, and professionals	6	37.5

\* One participant might disclose the abuse to more than one confidant.

## Part 2 Qualitative Findings

The purpose of this study was to understand the process by which Northeastern Thai women disclosed their experiences of wife abuse. The interviews from this study were transcribed verbatim and analyzed using coding, constant comparison, and memo



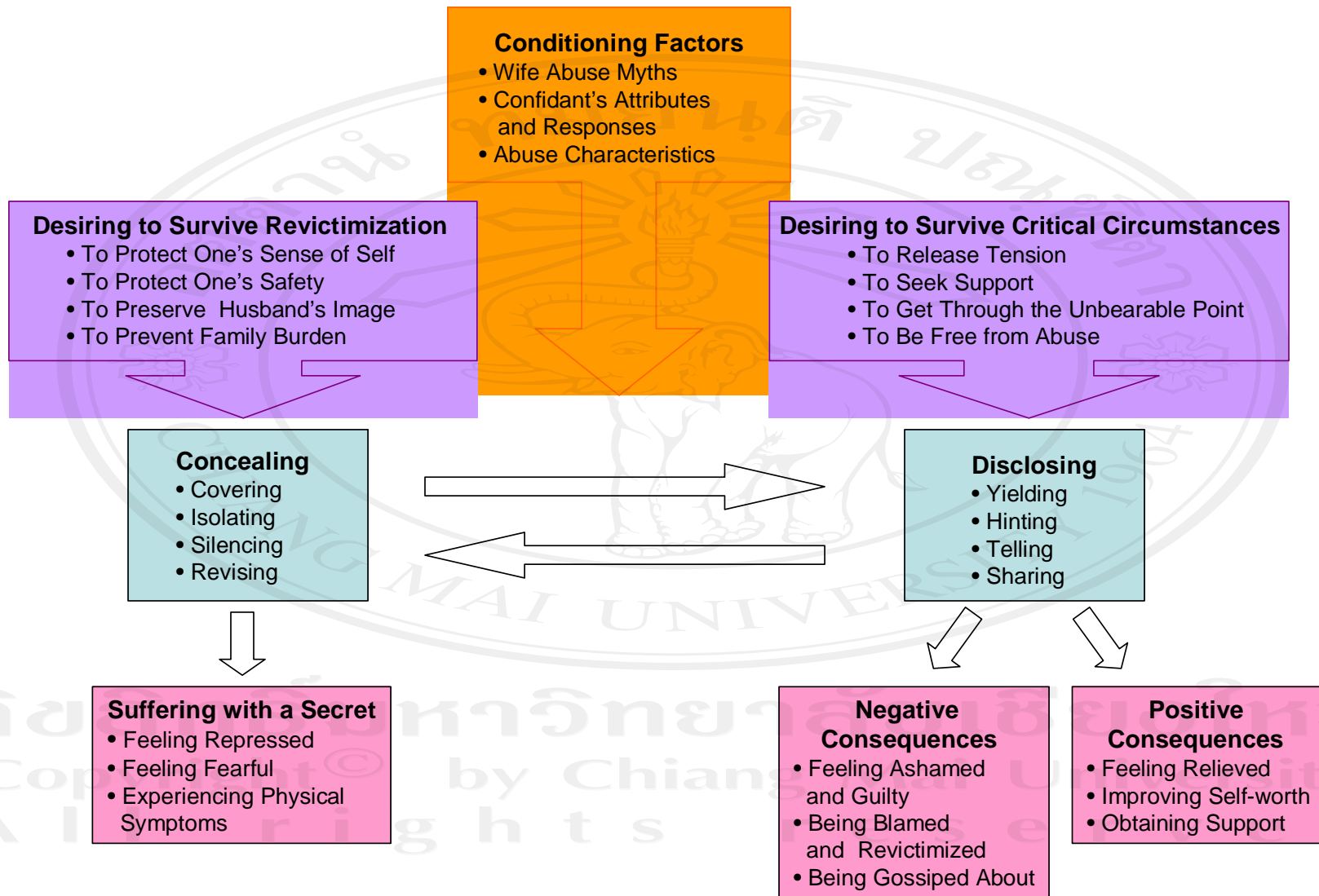
writing (Glaser, 1978). The core category which emerged in this study was labeled “Moving to disclosure for survival” because it was a central concept connected with other emerging categories that described the basic social process. This part will give a detailed description of this basic social process and provide excerpts from the data to support the analysis.

#### *Overview of the Process of Moving to Disclosure for Survival*

Data analysis from the women’s stories reflected the basic social process of abuse disclosure, called “Moving to disclosure for survival”. An illustration and definition of emerging categories and concepts is portrayed in Figure 2 and Table 8. Two major strategies employed in this process were identified as “concealing” and “disclosing”. Throughout the course of abusive relationships, each strategy was implemented by the participants in an effort to achieve their desire to survive revictimization or to survive critical circumstances. Initially, most of the women attempted to conceal their stories by covering, isolating, silencing, or revising the abuse experiences in order not to be humiliated or dehumanized. These strategies were used to protect their sense of self from being victimized repeatedly by anyone who heard their stories and to prevent repeated abuse by their husbands. Concealing was also chosen to preserve their husbands’ image and to prevent their family from burdens. In spite of saving the women’s lives as desired, hiding their secret led the women to suffer from living with emotional repression, fear, and physical symptoms.

Once the women began to be hurt continuously by their abusive husbands, their lives were put into a critical circumstance and this was threatening to all aspects of their lives. At this point, the women stood up and employed several strategies to survive,

including disclosing their stories. The women's abusive experiences were addressed through the strategies of yielding, hinting, telling to, or sharing with others. Disclosure assisted a woman in releasing tension, seeking support, going through the unbearable point, and living free from the abuse. The women were not passive but capable of taking care of their lives. When the disclosure was implemented, the consequences were noted as negative or positive, which influenced further disclosure. Being treated badly by confidants resulted in the feelings of shame and guilt, being blamed and revictimized, or being gossiped about. Consequently, the women turned to the strategies of concealment to prevent revictimization. In contrast, some women were responded positively to by their confidants, leading them to feel relieved, to feel self-worth, or to obtain support. In addition to desiring to survive revictimization or to survive critical circumstances, the movement from concealing to disclosing was influenced by: (a) wife abuse myths, (b) confidant's attributes and responses, and (c) abuse characteristics. These conditioning factors were not independent of one another, and each participant might experience any or all of them as a determinant whether to disclose wife abuse.



**Figure 1: The Process of Moving to Disclosure for Survival**

Table 8

*The Definitions of the Categories and Concepts in the Developed Process*

Core Category		Definitions
Moving to Disclosure for Survival		The process by which an abused woman moves from concealing the abuse to survive revictimization, to disclosing to survive critical circumstances, shaped by wife abuse myths, confidants' attributes and responses, and abuse characteristics, leading the woman to experience suffering with a secret and negative or positive consequences of disclosure
Categories	Concepts	Definitions
Desiring to survive revictimization		An abused woman's desire to manage the anticipated consequences of abuse disclosure as threatening her sense of self and safety, her husband's image, and her family's well-being, leading to concealing the abuse
	To protect one's sense of self	An abused woman's desire to keep one's sense of self from being destructed and degraded
	To protect one's safety	An abused woman's desire to keep one's safety from physical harm or abuse escalation
	To preserve husband's image	An abused woman's desire to maintain her husband's image as a "good person", "good husband", or "good father"
	To prevent family burden	An abused woman's desire to prevent her parents, children, or entire family from emotional difficulties or conflicts
Desiring to survive critical circumstances		An abused woman's desire to manage a crucial situation of escalated abuse, leading the women to intentionally disclose their experiences
	To release tension	An abused woman's desire to release her feelings of repression, distress, sadness, anger, or furiousness from being abused and from keeping the abuse secret
	To seek support	An abused woman's desire to get support for herself, including financial support, safe accommodation, working retention, and medical treatment
	To get through the unbearable point	An abused woman's desire to get assistance for managing the unbearable situations of the abuse
	To be free from abuse	An abused woman's desire to get assistance for leaving her abusive husband

(table continues)

Table 8 (continued)

Categories	Concepts	Definitions
Conditioning factors		The conditions influencing an abused woman's decision on concealing or disclosing
	Wife abuse myths	An abused woman's beliefs as reflected from societal belief about wife abuse as; 1) a private/personal matter, family matter, or spouse matter, 2) woman's responsibility for causes and solutions of the abuse problem, 3) being useless and helpless for disclosure
	Confidants' attributes and responses	A confidant's characteristics and responses perceived by an abused woman, including trust, compassion, having similar experiences, as well as availability and accessibility
	Abuse characteristics	The abuse characteristics in terms of visibility, type, severity and frequency
Strategies of concealing and disclosing		An abused woman's practice of preventing the abuse from being known through concealing or making the abuse known through disclosing
	Concealing	A strategy implemented by an abused woman to prevent others from knowing about her abuse experience through covering, isolating, silencing, or revising
	Disclosing	A strategy implemented by an abused woman to make others know about her abuse experience through yielding, hinting, telling, or sharing
Consequences of concealing and disclosing		The conditions experienced by an abused woman following the implementation of concealing and disclosing strategies
	Suffering with a secret	The devastating emotional and physical conditions of an abused woman who bears the feelings of repression, fear, and physical symptoms due to the effort to hide her secret
	Negative consequences	The negative experiences of an abused woman following disclosure as feeling ashamed and guilty, being blamed and revictimized, and being gossiped about
	Positive consequences	The positive experiences of an abused woman following disclosure as feeling relieved, improving self-worth, or obtaining support

*Desiring to Survive Revictimization*

Desiring to survive revictimization was a major cause that directed the women to engage in concealing to protect themselves from being blamed, stigmatized, and humiliated by the confidants or being hurt by their husbands. The women anticipated the confidants' negative reactions in terms of, “*Som Nam Naa* (สมน้ำหน้า)” [serve one's right] or “laugh at (หัวเราะเยาะ)”. They also discussed the anticipated undesirable consequences of disclosing as it would draw attention to the husbands' behavior and impart him with a bad reputation as well as family burden. Therefore, the women indicated that concealment of the abuse was the prudent choice to protect themselves, their husbands, and their significant others in order to survive revictimization, as illustrated in this statement:

*I didn't tell anyone about my family problems. It was probably because I still live in the society. I feel ashamed and I want to protect my husband and my family. Talking about the matter (wife abuse) is like “Sao Sai Hai Gaa Gin (สาวใส่ให้กาน)” [washing your dirty linen in public]. It could be a topic for others to gossip about... (07-2/21-31)*\*

*To Protect One's Sense of Self*

All participants in this study indicated the anticipated and actual feelings of shame and embarrassment if their stories were found out by others. The feelings of shame reflected that the sense of self was destroyed. Therefore, the women initially chose to protect their sense of self by concealing their stories from others. One

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\* (07-2/21-31) indicates that this excerpt was quoted from line number 21 to 31 in a second interview of case 7. The symbol ... indicates that the irrelevant content is omitted. This format is employed for quotations throughout this paper



participant felt intensely ashamed for being devalued and dehumanized although her story was hidden, as she said:

*I had been hiding from everyone... I felt ashamed when meeting others and people who know me. I dared not show my face. I was beaten up- like devalued. I felt as if I were not a human-being but a beaten dog. (02-2/598-601, 755-8)*

In addition to feelings of shame and humiliation, a derogated sense of self was illustrated in terms of feelings of self-worthlessness and self-blame in causing wife abuse, as illustrated in the following excerpts:

*They might think “Som Nam Naa (สมน้ำหน้า)” [it serves me right]. I feel ashamed that I’m so worthless that my husband dumps me. It makes me think I’m not good or worthy at all. They might view that I’m so bad that he left me. (11-1/418-25)*

*My husband said he treated me badly because I scolded him and I was defiant. He beat me as a punishment. It took me a long time to understand and get an answer that it’s because I behave badly. So he beat me. (02-1/ 765-9)*

Women’s accounts demonstrated that the derogatory view of self was not demolished by only women’s own understanding but it was also threatened by the responses of confidants in a form of “Som Nam Naa (สมน้ำหน้า)” [serve one’s right], “blame (ตำหนิ)”, “laugh at, (หัวเราะเยาะ)” and “gossip about (ติลลีนินทา)”. These words reflected women’s personal value and worth, as was evident in the following excerpts:

*I don’t dare tell her (co-worker) because I’m afraid that she would say “Som Nam Naa (สมน้ำหน้า)” [serves you right]... I’m afraid she’s going to blame me so I don’t dare talk. (10-1/401-5)*

*I tell nobody. I think they would laugh at me as I still stay with my husband even as I just disclosed his bad behaviors. (02-2/677-80)*

*My neighbors could exaggerate my story and gossip badly about me. They could step on me even if I told them a bit. So it’s better if I tell no one. (04-1/363-4)*



The feelings of a destructive sense of self in relation to disclosure were brought out because the women linked being abused with the negative views of self in many aspects. The negative views of self commonly found in this study were the feelings that they were “bad women”, “having a bad husband”, or “enduring with bad husbands”, as illustrated in these statements:

*They (co-workers) might say I didn't take good care of my husband or I behaved badly. I'm afraid they think that I didn't take care of my family well, so my husband has to find a new woman. And if I'm good, he won't dump me. (05-2/268-281)*

*Others might see me badly. It seemed so embarrassing that my husband was so bad. That made me embarrassed even though it was not my fault at all. I was so embarrassed and scared that they might condemn my husband for being bad, and why I got a bad husband. (11-1/437-54)*

*In fact, it was him, my bad husband, who made people gossip about me and it shamed me. (08-1/422-3)*

*I don't want anybody to know that my husband is bad... I wanted them to know only the good things. The things they don't know are embarrassing. When they knew my husband's nature, they must wonder why I still want to stay with him. (09-1/583-2)*

For some of the women, their feelings of humiliation were linked to the admission that they did something “wrong”. One participant, for example, admitted that she had made a mistake in her choice of partner and that she had ignored the advice of her parents. She then did not dare tell her parents about being abused. She said, “*I concealed the abuse from my parents. They didn't want me to marry him, but I did. I'd never reveal this to my parents.*” (04-1/269-30)

The women also linked their demoralized sense of self resulting from being abused to “an inability to protect themselves from the constant and repetitive abuse”, “*I was ashamed and afraid that my neighbors would know. I was ashamed for being hurt frequently and for being abused.*” (09-1/1135-9) This demoralization also reflected the

sense of inability to solve the abuse problem but still remain in the abusive relationship, as one participant said, “*We are ashamed. We quarreled everyday when we’re back home ... When they know my husband’s nature, (they questioned) why I still think to live with him.*” (09-1/583-92) Additionally, the women saw themselves as “silly” or “failed” because they had no way out or no choice for their lives and had to endure the abusive husbands. The effect of this demoralized view of self was to silence women and to reduce the likelihood that they would disclose the abuse to others, as some of the women pointed out:

*I don’t disclose. I feel embarrassed and worried that people would say “Som-Nam-Naa (สมน้ำหน้า)” [think it serves me right]. Even though my husband nearly beat me to death, I still endure living with him. Don’t you have anywhere to go? They must think I deserve it, no matter how severely he beat me I still stay with him, still be ignorant (จรรยา).* (10-1/194-200)

*I kept it silent from my parents. I was afraid that they might look at me negatively like I was so silly. Why do you put up with him if he doesn’t love you anymore? It’s so silly! He is not the only guy in the world. They might think like this.* (11-1/137-9)

*Am I ashamed? Possibly I don’t want others to think that my life is a failure.* (07-2/411-2)

Some of the women drew social comparisons, whereby they compared their experiences to other women who were not in abusive relationships. They had labeled themselves “deviant” from those women. “*I felt embarrassed in society. I dared not to show my face. Is there anyone else being beaten like me?*”(02-2/755-8) a question from one participant. The sense of deviance reflected the demoralized sense of self leading to a feeling of shame and an effort to conceal their stories. Another woman compared herself with her neighbors as having a higher socioeconomic status but being abused.

*It's shameful that a civil servant like me was often assaulted by her husband. Very often, very embarrassing, very painful (sobbing)... In my neighborhood, there're only my husband and I who are salary earners whereas others lived from hand to mouth. But it's me who was beaten rather than others. They must certainly talk about me as being assaulted whereas they've never fought. (08-1/203-15, 436-58)*

In addition to the negative views of self, the women also felt that their sense of self was threatened through the link between being abused as having a “bad family” and their sense of responsibility for this situation. One participant said, “*I feel embarrassed. My neighbors think my family life sucks (the husband is bad while the wife is fussy and querulous.)*” (08-1/221-3) Another participant decided not to go outside because of the feeling of shame and embarrassment of having a family problem.

*It's embarrassing. I don't want my neighbors to see that my family has problems, fighting again and again. They won't know if I don't go out... I'm afraid they might think this family can't live together. I'm ashamed that my family often quarrels. (09-1/1189-99)*

The topic of sex still remains a sensitive issue and people are less likely to discuss it in general. Therefore the women who were sexually abused, disclosing the experience of sexual abuse must result in a feeling of shame and a derogatory sense of self. A sexually abused participant made this point clearly when she said:

*I don't see any need to tell. And it's embarrassing to talk about my sexual affairs and sex relations. It's strange (วิปริตวิถการ), very embarrassing. (07-1/903-14)*

In brief, experiences from the women in this study indicated that the women's sense of self was threatened and even destroyed in the sense of feeling dehumanized if the abuse was anticipated to be disclosed or actually disclosed. These derogatory views of self developed from the women's understanding and also from observing the confidants' reactions like “*Som Nam Naa (สมน้ำหน้า)*” [serve one's right], “*laugh at (หัวเราะ*

เยาะ)”, “gossip about (ตลึงนินทา)”, and “blame (ตำหนิ)”. Consequently, most of the women felt ashamed and embarrassed while some of them demonstrated feelings of self-worthlessness and self-blame. The sense of self was perceived as being destroyed because wife abuse was connected with negative views of the women as “bad woman”, “having a bad husband”, “enduring a bad husband”, “being wrong”, “being unable to protect herself from abuse”, “being unable to solve abuse problems”, “being unable to leave an abusive relationship”, “being silly and a failure”, and “being different from other women”. As well, the occurrence of abuse reflected a “bad family” and women were held responsible. As a result, concealing the abuse experiences was considered as the preferred strategy to protect women’s sense of self, leading to survival from revictimization.

#### *To Protect One’s Safety*

All of the women initially concealed their stories to protect their sense of self. Some women chose to keep their secret for fear of physical harm or abuse escalation. The abusive partners used threats of further violence as a way to ensure that the women would remain silent, as one participant recounted:

*My husband took me to the doctor but he ordered me before going to see the doctor not to tell that he himself hit me. I was afraid that he might hit me again after getting back home, so I told the doctor I fell down the stairs... I must survive first as he could beat me again when I get home. (09-1/508-14, 551-5)*

Fear of harm could develop from the husband’s threatening actions. In some cases, however, harm was anticipated without explicit threats, as this participant said:

*My superiors called us to clear up the issue. I didn’t tell them much as my husband already told them all that he had done to me. And I was afraid if I revealed everything, he would kill me. I didn’t tell because I didn’t want him to hurt me. If people see him as a bad guy, he would get stressed and feel pressured, but the bad outcome could fall on me and my kids. (07-1/510-21)*

According to the above statement, a husband would abuse a woman repeatedly or severely if he felt blamed, stressed, or pressured from others for the abuse. Thus, disclosing the abuse to others would increase the risk of harm and the escalation of the abuse toward the women.

In summary, the participants shared the concern about undesirable and harmful outcomes for themselves if they disclosed the abuse experiences. To survive, they needed to protect their physical safety through keeping the abuse hidden from others.

#### *To Preserve Husband's Image*

All women had entered their intimate relationships with the idea that their prospective partners were “good persons”. When their husbands became abusive, most participants still wanted others to view their husbands in positive ways; even though the husbands were really bad. A sexually abused participant realized that her husband hurt her very badly. However, she insisted on preserving his image by concealing the story. She recounted:

*I don't think to say that my husband hurts me. It's probably that I want to protect him. Even these days, I still protect him even though he's been treating me badly. (07-1/1097-101)*

In this study, the most common reason for maintaining the husbands' image was the emotional attachment to their husbands. Some women indicated that they kept the dark side of their husbands hidden from others because they still loved them, as explained by one participant, “*Do I love him and have a bond with him? Yes, I do. I don't want any damage done to him.*” (07-1/692-3) For other women, in addition to love, respect and their desire for others to love their husbands inspired them to preserve the husbands' good images by keeping their stories secret, as one participant stated:



*My husband is the type of man people generally dislike. If I tell them that he hits and scolds me, it might worsen the situation. I want everyone to like my husband like me. If people don't know how he treats me, he still looks good, meaning that I still care about and respect him. (02-2/89-92)*

The image of husbands that the study women wanted to preserve was described as a “good person” who was not cruel or brutal, but respectful. For example, one participant minimized her physical abuse situation in response to questions because she did not want to reveal her husband’s brutality and cruelty. She said:

*I told only the not brutal stuff. Those who are assaulted and handcuffed are only prisoners, aren't they? So, I didn't tell my coworkers much. I think if I did it's probably too cruel for him, the one whom I live with. I mean people might see him as cruel. He handcuffed me, beat me up. Think about it. So I understated the story for fear that my coworkers would see my husband as not a good person. (01-2/198-219)*

Another participant wanted others to treat her husband in a respectful manner without hatred or insults, as she stated:

*At first, I didn't want anyone to know as to protect my husband because he's a part of my family. I thought he'd leave his minor wife and return to me someday, I don't want my relatives to loathe, hate, look down, and disrespect my husband. (11-1/329-43)*

The second image of a husband was the picture of a “good husband” who took good responsibility in the husband role. For example, one participant whose husband was financially irresponsible stated:

*I never told it even to my relatives. People often said that you're so happy. I didn't want to talk about the truth because he was my husband. So I had to respect him. I lied that he gave me 12,000 baht per month though in fact he never did. (13-1/55-7)*

A participant, who expected a normal sexual relationship but was forced to have unusual sexual practice with her husband, concealed her experience because she did not want her husband being seen as a pervert. She stated:

*I didn't tell my supervisor that I was forced to have sex with my husband because I didn't want him to view my husband as a pervert. (07-1/688-91)*

Being a “good father” was the third image of a husband that lead the women to conceal their abuse experience even though their husbands failed to be a good father, as these women said:

*At least, he is the father of my kids. I don't want him to be criticized. (07-1/1082-97)*

*He is both my kid's father and my husband. I have to respect him, haven't I? (13-1/105-7)*

*I wanted others to see my kids' father as a good guy. But when they (neighbors) witnessed that he wasn't good, I still wanted him to be seen as a good person in others' eyes because he is still the father of my kids. (04-1/220-3)*

In summary, the women in this study realized that their husbands' abusive behaviors would receive social disapproval. Although the women's lives were in jeopardy, they still wished others to see their husbands as “a good person”, “a good husband”, or “a good father.” The main reasons given by the women included love and respect for their husbands. To preserve their husbands' image, the women employed the strategy of concealing their abuse experiences.

#### *To Prevent Family Burden*

Most women in this study indicated that they kept their stories hidden from their family members to prevent them from the emotional burden of knowing their abuse experience. Women were concerned that their stories would cause their parents to feel “uncomfortable (ไม่สบายใจ)”, “worried”, or “think too much (คิดมาก)”. Two participants explained:

*I won't tell my parents and relatives as I don't want to worry them. My dad isn't healthy and I don't want to concern him. I try to hide from them as much as possible. I rarely tell it to my parents. (06-1/199-203)*



*When my mom visited me at home, my neighbors told her that they saw my husband treated me badly. So my mom asked me directly, but I told her that it's okay and my husband did it because he was drunk. I just said that as I didn't want her to worry about me. (07-1/121-4)*

As well, another woman who had concealed her abuse experience from her mother, expressed her fear that her mother would be worried and think too much (คิดมาก) about further abuse.

*If my mom knows, she will be worried and afraid that I'll continue quarreling with my husband. There could be more impact in the long run. So I decided to tell her that I was injured because I fell down from the bike. The elderly like my mom might think that there will be more abuse in the future. (01-2/562-5, 574-5)*

For some participants, preventing the burden is a concern about the negative consequences that abuse disclosure would have on their children. Thus, the women kept the abuse silent to prevent their children from having problems, especially in mental aspects.

*I didn't tell my daughter. I didn't want her to know because she's a girl and becoming a teenager. I didn't want her having any problems from her parents' quarreling. (05-1/571-3)*

*I don't tell and will never tell. I don't want anyone to judge who should be blamed because my husband and I must share the responsibility, our kid. I don't want anyone to talk about us. The priority is our kid. I don't like it if people blame the father of my kid as it only worsens my kid's mental health. For him, seeing his father beating me is already too much. (07-1/1116-24)*

The family burden also included family conflict among family members. One participant noted that if her mother knew about the abuse, she would have to pass this story to other family members, and they would get in trouble with the abuser.

*If my mom knew she would have to tell others in the family and I don't want them to hate my husband... It makes me feel bad. I think if my family dislikes my husband, everyone may feel uncomfortable. I want to protect the feelings of my beloved. (01-2/601-19)*

Another woman clearly illustrated the fear of negative consequence on family harmony by disclosing the abuse. She said:

*I don't tell my mom as she must certainly blame my husband and quarrel with him. If the problem escalates, everyone will feel uncomfortable. So it's better for me to keep quiet. (05-1/545-6)*

In brief, the women tried to conceal their abuse experiences in order to prevent their family including individual parents, children, or the entire family, from the burden.

#### *Desiring to Survive Critical Circumstances*

The abused women in this study engaged in concealing to enable them to survive revictimization associated with revealing the abuse. That is, they desired to protect their sense of self and their safety, to maintain their husbands' image, and to prevent family burden. However, once the abuse situation deteriorated and presented critical circumstances, women found it difficult to deal with it by themselves. Disclosure would likely be the chosen strategy to ensure the participants' survival. Data analysis in this study revealed that the participants disclosed the abuse for the following purposes: to release tension, to seek support, to get through the unbearable point, or to free themselves from the abuse.

#### *To Release Tension*

In a variety of stressful circumstances during the abusive relationships, most participants chose to release their stress, or to “get it off their chest” through telling someone, this is evident through comments such as “I needed someone listen to me”, “I had to tell someone”, and “I was about to explode.” These statements reflected the

necessity of sharing the burden. Disclosing the abuse was most commonly used to help them feel soothed and relieved. Some women felt utterly repressed due to concealing the abuse. Thus, telling someone was a strategy used to feel relieved and comfortable. One participant, for example, who had kept silent about her experience of being abused for 8 years, could not keep the abuse silent any longer and told her stories to her best friend.

*It's like I want to find someone to release this to. It's too much for me. Talking with my best friend makes me feel better. I've recently talked with her more often. Previously, she hadn't known anything about my problem, but now I told her about every event. (07-1/276, 321-4)*

Some women expressed such feelings as sadness, anger, or fury resulting from being abused for a long time. Thus, they wanted to release these feelings in order to feel comfortable, as illustrated by two participants:

*I usually like to talk to release my problem. I don't mind if there's someone to listen to me. I revealed all how he had hurt me from the beginning and how that event happened. He didn't only bruise me physically, but also hurt me mentally (sobbing). (08-1/506-13)*

*I feel sad and want to release my feelings and reveal to others that my husband is that type of man. I sometimes get angry about why he hurts me. I want everyone to know. (10-1/172-80)*

Some participants also described their feelings of distress. They expressed their desire to confide their stories and to have someone side with them. For example, a fifty-six-year-old woman who stayed in the abusive relationship for more than thirty years with limited sources of support described the reason why she disclosed her story to her neighbor. She stated:

*She's the neighbor I trust. So I decided to tell her at her house because I didn't have any place to go. She always sides with me... She's the consultant whom I can confide in. (04-1/151-2, 209)*

Other time, the need to have someone to console and consult them on the abuse situation encouraged the women to disclose their stories, as was a case of one participant:

*I only want to feel better although my colleagues, I thought, can't help me much. It makes me feel good when I release my feelings. Saying something is better than nothing. I might be ill at ease if I don't tell it. Like a broken heart girl, if she has nobody to console her, she will be muddled and may hurt herself. Someone who can comfort her or someone to consult could help her get better and keep her from hurting herself. (14-1/548-52)*

For some women, revealing the abuse lead them to not only feel relieved but it also lead them to obtain counseling, as one participant recounted:

*I want to confide in someone who I could talk to and who would help me. I thought the hotline could help me, tell me what I should do. I was in a panic. I feared he would kill me. (07-1/747-9)*

In brief, emotional tension resulting from both being abused and keeping the abuse secret encouraged the women to reveal their stories to others for many purposes, including feeling relieved and comfortable, having someone on their side, having someone console them, and receiving counseling.

#### *To Seek Support*

All participants in this study needed support from outsiders at some point in the abusive relationship. Usually, their need for such support and assistance were associated with increased frequency and severity of the violence. Outside helpers were essential for women living in abusive relationships otherwise they could not survive. The support commonly mentioned by the women included financial support, safe accommodation, working retention, and medical treatment. The women reached out

for others' support through explanation of their situations in order to obtain information or advice that would help them be able to deal with the problems themselves.

*I told him (supervisor) just to ask for his help to find a solution to make things better and to seek a way to save our family. (07-1/653-6)*

*I talked with my male friend in order to seek his advice and suggestion. I want to understand men's habits so that I can solve the problem ... What should I do or how to deal with a man of this type (being unfaithful)? I want him to help analyze my situation. (06-2/417-22, 428-30)*

*I want someone to listen to me and give me some advice or something that makes me see the light. It was as if I was sinking into the water and needed help. I want my coworkers to advise me of what to do. (05-1/421-2, 449-51)*

Many participants disclosed their abuse experiences to others who could intervene in the abuse by admonishing the abusers, as one participant noted, "I told my cousins because I wanted them to help me by asking my husband to stop beating me up." (10-1/302-3) Another woman also shared a similar experience:

*I told my husband to end his relationship with his mistress, but he didn't. I then told his cousin to warn him, but he just ignored them. So I decided to tell the problem to his mother as I wanted her to warn him. (05-1/154-5, 246-7)*

Some participants identified the need for financial support as one of the underlying reasons for disclosing their abuse. One participant, whose husband was irresponsible about household expenses and spent large amounts of money on drinking and gambling, talked about her situation in order to receive financial assistance from her co-worker. She said:

*I had a tough time for several days. While I was thinking about how I could find money for living expenses, my husband instead nagged at me and we quarreled. So when I had a bad day, I went to tell her and borrowed some money. I told her that I was really short and I had to give money to my husband and my kids. (12-1/446-8)*

Also, another participant, whose husband had an affair, chose to end the relationship with her husband. She then disclosed her story in order to get financial support for legal proceedings to deal with the couple's properties:

*I told my mom and sister just to ask for their financial support. I didn't want them to help solve the problem. I didn't tell because I wanted release or I needed to tell. I did because I wanted them to give me some money. (11-1/202-3, 785-6)*

Acquiring a safe place to stay away from the abuse sometimes acted as a motivation for participants moving to disclose their situation. One participant, who was physically attacked by her husband almost every night, revealed the abuse to her neighbor who provided her not only a safe place but also financial and emotional support. She explained:

*She knew because I have nowhere to go and live. So I went to her house and knocked the door and said "Help! I have had a fight with my husband and he's going to beat me. My little kids are crying and sleepy. Please help us or he will find and hurt us"... I told her from the first day and we've been close since then. Sometimes she bought me something or I borrowed some money. She also took me several times to make merits at the temple and that made me feel better. (03-1/131-6, 148-50,187-96)*

Another participant who initially kept the abuse quiet admitted that she was abused and told more details to her parents as she sought housing for a separation. She said:

*I thought I couldn't bear it any longer. I had no way out and no place to live. I then thought of my parents. They still had a place for me. So I sought their help and told them. Even though my mom scolded me, she still allowed me to stay. (06-1/230-7)*

If abuse interfered with the women's employment in relation to a poor performance or an absence from work, the women chose to tell their supervisors or colleagues in order to obtain their co-workers' understanding and further to maintain the stable working situation. Several participants explained:



*I told my supervisor. She wondered why such a problem occurred. She noticed that I didn't have any concentration on my work, causing me to make a mistake. She could observe my irregularities. I decided to tell her so she could help me. (05-1/116-8)*

*My supervisor called me to talk with her because I took days off very often. Though I felt a bit uncomfortable telling her, I had to. If I didn't tell what happened, it must be my fault. I must concern about the civil regulation first. (01-2/350, 370-5)*

*I need someone to understand me, why I'm absent from work... If I don't tell him (supervisor) and it happens that a problem occurs, I will be under pressure from both abuse and work problems. (07-1/561-2, 570-1)*

In addition, wife abuse was disclosed to health care providers in order to obtain medical treatment for the women or their husbands. For example, one participant recounted why she disclosed about being assaulted by her husband to a doctor, “*I didn't intend to lie to the doctor. He must know the truth so that he can make a correct diagnosis.*” (08-1/100-1) Another participant also revealed the abuse to a psychiatrist who was helping her address problems related to being abused. She explained:

*After the event happened for a few months, I couldn't sleep a wink or concentrate on my work. The only thought was that I wanted to kill my husband. At the workplace, I couldn't work. I then decided to see a psychiatrist. While I was revealing my feelings to her, I cried a lot. (05-1/293-8)*

Other times, women revealed the abuse in order to obtain medical treatment for the abusive husband, as was the case of one woman:

*When taking my kid to see the doctor, I used that chance to consult the doctor and told about my husband's behaviors. The doctor said my husband had mental health problems. So I lured him to see a psychiatrist. I want my husband to be cured because he himself thought he had no problem with mental health. I need the psychiatrist to treat him to avoid divorce. (07-2/232-51, 280-4)*

In summary, when the abuse continued and deteriorated, the abused women's lives were in danger and needed outside support. To survive, the women revealed their abuse experiences to seek assistance for financial support, a safe place to live, employment retention, or medical treatment.



*To Get Through the Unbearable Point*

For women in this study, moving to disclose the abuse experiences sometimes occurred when they could no longer bear the abuse, as reflected in such statements as “It felt unbearable”, “I can’t stand it anymore”, or “My tolerance reached its peak.” At this point, women felt that if they still kept the secret, they would continue to be unable to access needed assistance, or they risked having the abuse drive them crazy (to insanity) or perhaps ending in death to the woman or her husband. Thus, the women disclosed and sought outside help to get through the unbearable point.

*I can't stand it anymore. I want to tell and want to release. I don't want to keep it to myself. It makes me crazy and I get a heavy headache like a migraine. (12-1/600-3)*

The unbearable point could occur when the abuse escalates, sometimes they are concerned about fatal consequence. One participant said:

*My husband beat me so heavily that I couldn't endure it anymore. I thought what I could do to deal with him. Sometimes, I thought of killing him. But if he's dead, it won't benefit me at all and my kid was still young. I was under great pressure and my patience was limited. So I decided to tell someone and asked my neighbor, hoping that she might give me some advice. (09-1/259-60, 326-7,343)*

Other times, the repetitive and severe assaults led the women to the unbearable point by which she thought about killing herself or her husband in order to end the abusive relationship. Fortunately, disclosing saved their lives, as explained by one participant:

*I decided to separate from him because I couldn't bear it anymore. If I stayed with him, I would have killed myself or him (laughing). I didn't know how to say. It was hard to explain. (07-1/814-9)*

*I knew in the last second that I couldn't bear it any longer. So I went to consult my best friend... I've faced a lot of pressure in that if I didn't kill him, I must kill myself. I wanted revenge. I hate him. I'm angry at him. I wonder why he didn't love me and why he hurt me. It was too much for me, it's me has been harmed. I*

*can't take it anymore... If I didn't tell my friend, I could have committed suicide or killed him. (07-1/252-5, 462-74, 07-2/68-76)*

In summary, disclosure was the women's choice to survive the unbearable points that might lead the women to develop insanity, attempt suicide, or revenge by killing a husband.

#### *To Be Free from Abuse*

Moving to disclosure could occur when considering leaving the abusive relationship. The women gave up hope of change and were no longer willing to tolerate the violence. Once leaving the relationship was initially considered, all of the participants moved to disclose so that they could consult others about whether to leave or not. For example, one participant who was physically abused during the second pregnancy chose to consult her mother:

*He still used force with me... I thought I can't stand him any more, but don't have a way-out. So I consulted my mom and told her that I couldn't live with him any longer. I thought of separating from him at that time as I didn't register the marriage with him. (06-1/119-31)*

A sexually and emotionally abused woman decided to consult her co-workers about leaving her partner. She recounted:

*I felt so uncomfortable that I needed someone to talk to. I just wanted to seek advice and didn't want to tell. I just wanted to consult if I should separate from my husband. If I do, I will feel sorry for my kids. My co-workers asked me why I wanted to leave him, so I told them. (14-1/474-6)*

One woman contacted with formal networks to get confirmation that her partner's behavior was abusive and her decision to leave him was right.

*Before separation, I went to consult the nurses at the psychiatric department. The nurse at the psychiatric clinic suggested that I leave him as soon as possible. There weren't ways to solve the problem. I decided to separate from him soon after telling the nurse. (07-1/814-9, 841-4, 884)*

This participant also called up the hotline of the Mental Health Department as she needed other opinions to confirm her decision. She explained:

*I wanted to know how severe my husband's abnormality was and if my decision was right. They (the hotline) also suggested that I separate from my husband, viewing that there was no way to solve it. (07-1/975-8)*

In brief, when leaving the abusive relationship was considered, women disclosed their experiences to their informal or formal networks to reassure them about their decision and to obtain suggestions. To sum up the category of desiring to survive critical circumstances, the circumstances which led the women to reveal their abusive relationship encompassed needing emotional release, seeking support, getting through the unbearable point, and attempting to leave the abusive relationship.

#### *Conditioning Factors of Concealing and Disclosing*

The main contributing conditions that determined whether the women concealed or disclosed the abuse were women's desire to survive revictimization and to survive critical circumstance. However, three interacting conditions were identified from the women's stories as conditions that influenced women's concealing and disclosing. These are wife abuse myths, confidants' attributes and responses, and abuse characteristics.

#### *Wife Abuse Myths*

Women's decisions about disclosure were influenced by their adherence to societal beliefs as reflected in forms of wife abuse myths. The influences of wife abuse myths embedded in Thai society were reflected in women's talk about their personal beliefs regarding wife abuse. From their accounts, all participants in this study viewed

wife abuse as a “private matter” “family matter”, or “spouse matter” and placed it within the secret realm that should not be discussed with others. The metaphor mentioned by the women as “*Finai ya nam ok, Finok ya nam kao* (ไฟในอย่านำออก ไฟนอกอย่านำเข้า)” [the fire in the family belongs inside the family, the fire outside the family stays outside] asserted their adherence to this traditional societal belief. Because of this belief, many participants tried to conceal their suffering and abuse within their family, as two participants commented:

*It's a family affair, so I don't consult anyone... I feel like I can't talk to anyone. It's like (pause for a while) an ancient saying 'Finai ya nam ok, Finok ya nam kao' (ไฟในอย่านำออก ไฟนอกอย่านำเข้า). (01-1/573-7)*

*I feel ashamed to talk about it. It's like the proverb 'Finai ya nam ok, Finok ya nam kao' (ไฟในอย่านำออก ไฟนอกอย่านำเข้า). When I got married to him, my mom told me not to tell others about the family problems and not to tell my husband what people gossip about him. I kept her words in mind, so I didn't tell anyone. (02-2/643-6)*

Believing abuse as a private matter implied that abuse is a problem within an intimate relationship which no one should get involved with and that the abused women should not disclose even though they wanted to, as indicated in the following excerpts:

*A spouse matter should be solved by both of them. A third person could not help. (04-1/434-5)*

*I want to tell others but they won't help me anyway. They don't want to get involved in spousal matters, saying it's just a quarrel between a husband and wife who can get on with each other again without others' help...though they're aware of it, they said it's the family problem that no one else can help and he (my husband) won't kill me. (10-1/109-19, 497-8)*

In addition, abuse was believed to be the abused women's responsibility in terms of finding the causes and solutions to these family and marital matters. This belief discouraged the women from disclosing their experiences or seeking help, and

effectively forced them to solve the problem alone. This belief was emphasized in the following excerpts:

*I already had my own family. I made the trouble then I had to solve it myself. (09-1/1055-7)*

*It's my private matter that I must cope with myself. If I tell my problem to others, could they help me solve it? And I must select the person well who I confide in. I can't tell just anyone to release my sufferings. (07-2/41-4)*

*I never think of telling... for whatever I did, I must be responsible. What I made must be solved by myself. No one else knows. I myself decided to marry this man even my parents disagreed with our marriage. What I make I must cope with by myself, so I must conceal this from my parents. (04-1/786-90, 1201-8)*

In addition, negative attitudes toward abuse disclosure were commonly shown in the women's use of words such as "useless" or "helpless" that strongly influenced the women to conceal their stories even if they were facing critical circumstances. For example, one participant who experienced emotional abuse for over a decade never disclosed her experience, she stated:

*I didn't tell anyone that my husband has taken advantage of me. I feel it's useless to talk about it with others as they can't help me. I weighed the benefits of telling others against the consequences I may get. Telling them, they can't help me, so that it's better not to tell. (01-1/585-91)*

Some women believed that abuse disclosure would not change anything for them. Two participants stated clearly, "*I didn't tell others as I didn't see the need to let them know. Telling does not bring me any good things. It's useless. Everything depends on my husband.*" (11-1/222-5, 859-60) and "*Telling others doesn't cause any benefits as they don't know how to help me.*" (09-1/1085-7) Two participants stated that disclosure was not only useless but it also made their situation worse in terms of revictimization. They said:

*I won't tell anyone. Telling my colleagues is considered useless, just like 'Sao-Sai-Hai- Gaa-Gin' (สาวไส้ให้กาบิน)" [to tell outsider is to show a bad thing in the family or to wash dirty linen in public]. (07-1/928-30)*

*Even if I told them, they couldn't help me. I don't see a reason to tell as doing so can't make me feel better anyway. Moreover, they might retell my story and gossip. So I opted not to tell. (01-2/662-4)*

In summary, the abused women held strong beliefs about wife abuse as a private matter or family matter, as her responsibility for causing and finding a solution to wife abuse, and being useless or helpless for disclosing. These beliefs, evolved from socio-cultural norms, encouraged the women to conceal their abuse experience and to deal with it alone.

#### *Confidant's Attributes and Responses*

In addition to wife abuse myths, the decisions about abuse disclosure were influenced by the potential confidants' characteristics. As disclosure took place, the confidants' responses also determined further disclosure. The women initially determined to whom they were likely to reveal the abuse experience from the following attributes and responses: (a) trust, (b) compassion, (c) helpfulness, (d) similar experiences, and (e) availability and accessibility.

*Trust.* Trust was a firm belief in the reliability of a person. All women in this study mentioned about their trust that the confidants would maintain confidentiality. That is, the women wished that their personal information be kept in confidence or not passed to others in negative ways. Trust was appraised based on close relationships, as well as previous experiences in which the confidants could keep her story confidential, as one participant mentioned:

*If someone asks about it, I'd see if she is close enough to me to share the problem. I choose the person who I can trust. That person must not retell my*



*story and must be the person I've known before ...When I have problems, I can consult her as she won't gossip badly about me. For this person, I've known her for many years...I have close contacted with her, its like we're relatives. When I tell her, she'd keep it secret. Her behavior is appropriate as she knows what can be said and what can't. She's that type of person, so I decided to tell her. (01-2/32-6,122-9)*

For some women, trust in confidentiality could be accomplished if the women and the confidants did not know each other.

*I phoned the Mental Health Department hotline. It's good. It gives consultation to anonymous callers. It's something I can trust. When I tell them my problems, they'd analyze it. They didn't say I'm like this and that. They didn't know who I was or where I work, they knew only the problems I've had and then analyze it for me as well as gave me the mental health solution. I can trust that they won't retell my story and run me down. (07-1/ 1350-6, 1366-78)*

*I went to that hospital because people there didn't know me...I just told the nurses that my husband beat me. I didn't feel shy as I didn't know them and I think they must have dealt with this kind of problem many times before. They didn't know me or pay any attention to me. I'm just a woman who was assaulted by her husband. I don't care if they gossip about me or not. I'm not ashamed because I don't know them. (08-1/1003-26)*

*Compassion.* For one participant, friendliness and sympathy were the important attributes that encouraged disclosure, as she stated, “*Friendliness and sympathy are the most important. If there was sympathy, I would dare to tell.*” (02-2/503-4) Another woman noted that disclosing the abuse should occur with individuals who were willing to listen and understand her experience, “*You can't tell it around. You must tell to someone who is willing to listen to and understand you. If they don't, you can't tell.*” (03-2/612, 1176)

The attribute of being sympathetic was linked with women's perception that their disclosure was not being brushed off by the confidant just as the disclosure began. Instead, attentive listening, reasonableness, and calm were other characteristics and



responses that encouraged abuse disclosure, as one participant who disclosed her abuse experience to her sisters said:

*My eldest sister knows a lot about my problem as when I have problems, I'll call her. She's the one who heeds my words and doesn't bluster about it. But I don't tell my problems to my other sister who stays with me as she always rants about it and doesn't listen to me, so I don't want to tell her...but my eldest sister is quite reasonable and discreet. (06-1/433-43)*

In addition, one participant explained that disclosing the abuse to a non-sympathetic person would result in harsh responses after disclosure, as she said:

*I chose only those I can consult and understand what I said. Some didn't understand me and thought I was crazy...they said why did I tell them my personal matters, saying it was boring and they didn't want to listen to my story which is old and dull. I can't talk with people who don't understand me. If they say like that only once, I don't want to talk with them anymore. (16-1/272-3, 317-9)*

*Helpfulness.* The women disclosed to individuals who they anticipated would be helpful in providing advice and support as needed. Women's anticipation was based on their previous experiences with those to whom they wanted to disclose. For example, one participant disclosed her experience to a close acquaintance who had previously given her good advice. She described her reasons in telling him about the abuse:

*He's experienced and a senior friend I respect. He's reasonable. Talking with him and asking him advice several times let me think that he's a sensible person who can give good advice. So I decided to talk with him. When I have any problem, I mostly tell him and he understands. (06-2/466-71)*

Some participants disclosed the abuse to religious people who were able to give them ideas for consideration. One participant pointed out, "I chose a calm person like her. She is a devout person. She kept teaching me and taught me only good things." (16-1/323-4)

In addition to informal confidants, the women were also willing to disclose the abuse to helping professions such as health care providers, policemen, or shelter personnel because those helping professions could provide assistance, information, and advice that was specific to their abusive conditions.

*It's their profession and they have dealt with matters like this. It's their duty, their profession. They're psychiatric nurses...I need to talk with a specialist in the area as she can help me and give me advice. She tells what I don't know and is able to analyze what type of problem my husband has...It means I know what I need. (07-1/896-8, 938-42, 955-6)*

*The police now accept the instances of domestic violence. There are some agencies taking charge of this issue. I think women should speak out. (01-2/1052-8)*

*I'd rather tell my problem to the authorities than others. I'll talk to those who can help me and give me advice. I should tell the authorities or specialists who're able to solve the family problems. (02-2/486-94)*

*Similar experiences.* More than a half of the women in this study mentioned that abuse disclosure occurred in response to someone else who already told a similar experience, thereby creating a close relationship in which both individuals understood and related their feelings or experiences to one another. This was reflected in the metaphor “*Hua- Oak- Deaw- Kan* (หัวอกเดียวกัน)” [Being in the same boat or feeling the same way] as evident in some women’s statements. These women described their experience when they disclosed the abuse to persons who had similar experiences:

*A friend whom I met since she worked around my house told me about her husband who was drunk and often hit her. I wondered that we were ‘Hua Oak Deaw Kan’, and then I shared my story with her. I expressed it all. Previously, I had never told anyone. I kept silent. (02-2/334-40)*

*She has been married. Her husband had a mistress and had an affair with other women. She had a similar experience as her ex-husband was not good. Then I told her because I felt like I could talk and get along with her. (14-1/255-7)*

*It's good to talk to those who have the same problem as me. It's like we're 'Hua Oak Deaw Kan'. We can give comments and advice to each other...it's better than discussing with people who never face the problem like this as they can't figure out what would happen to them. Those who have never had the problem like me won't know. (13-1/449-52)*

In addition to the shared feelings, one participant emphasized that a person who had similar experiences could give profoundly appropriate advice, as stated:

*She can give me good advice and that makes me feel better. Because of her experience, she could give more profound suggestions. My colleagues didn't give me much advice. They may not see the necessity or have no idea about how I feel. It's because of a lack of experience. But those with the same experiences could share their problems well and matched up my feeling. (05-1/697-708)*

*Availability and accessibility.* Most of the women were likely to disclose to individuals who were easily accessible and available to talk to. These people might live in the same house or nearby. For example, one participant who stayed in a city chose to reveal the abuse to her neighbors rather than reveal to her mother who lived in a rural district:

*I'm familiar with my neighbors. It's because I do not go back to stay in my own house. I go to talk with my neighbors. We have familiarity and spend time together everyday, not just for a few days. I stay there, but only my neighbors can help me. (03-1/603-5)*

One woman determined the constraints against disclosing the abuse as being isolated because her husband restricted her contact with others. She described the reasons why she decided to talk to her housemaid:

*I didn't want to go out at that time. I rarely went out to chat with my neighbors or have close friends. I only knew that I must stay home to take care of the family. I was like a frog in a coconut shell (Kob Nai Kala, กบในกะลา). I couldn't go out...I thought of telling my sister and mother, but I couldn't. The housekeeper is familiar to me. I know her and she seems to understand me most because we spend time together everyday. Sometimes, she witnessed the incident...I'll discuss my problem with her. (06-1/182-5, 287-305, 309-14)*

For the women who had disclosed their experience of abuse to formal resources such as health care professionals or policemen, availability and accessibility of these formal resources partly encouraged them to seek help and further disclose the experience. Many participants were unaware that there were helping agencies for abused women. One participant had never known about a shelter available in her home areas until she was informed by the one stop crisis center, as she indicated, *“I never knew there was an agency like this here. I used to see it on TV that there are homes for elderly people, orphaned children and abused women. But I had no idea there was an emergency home for women around here.”* (02-1/515-20) These women also indicated that they would seek help and disclose their experiences to policemen but only after they knew about the availability of this service, as two participants mentioned:

*We can now inform the police if the husband brutally beats his wife. When I had an argument with my husband, I spoke to him “If you bruise me too much, I’ll tell the police to arrest you!” I thought women now have an opportunity and the right to inform the police if they are going to be beaten or killed. Previously, we can’t as the police didn’t accept this case of domestic abuse. Women are now given rights to report the instances of woman abuse including rape and beatings.* (10-1/222-31)

*Now there are agencies taking care of this matter. I think we should tell them. In the past, the police didn’t accept the complaint of domestic abuse, but they do now. I know this from TV.* (01-2/1048-68)

Another participant was moving to voice her experience by making a call to a hotline service provided for abused women because the phone number of this hotline had been displayed in a television program.

*There is a hotline. I learned this from a TV program showing the information. In that program, it was about a woman who had the same problem as me. So I called the hotline to tell them what I had encountered.* (07-1/746-88)

Although this participant felt satisfied with counseling received from the hotline, she was still cautious about the accessibility of this service. She explained:

*The Mental Health Department should set up more hotlines for people to contact them easily. It's very difficult and takes long time to get through to people on this line even though there're many numbers, but all of them are always busy. If I'm was having a severe crisis, I could have killed myself before getting through to it...when I had problems, I tried to call the hotline but it was busy, so I turned and sought help from the nurses.*

In brief, the decision to conceal or disclose the abuse was influenced by the potential confidants' attributes and the actual responses of the confidants. Women were more likely to disclose their experience to confidants with the attributes of trust, compassion, helpfulness, similar experiences, and availability and accessibility.

#### *Abuse Characteristics*

The nature of abuse experienced by the women influenced the women's decisions about abuse disclosure. With respect to the visibility of abuse, it was possible for women to conceal the abuse from others when the abuse was invisible such as with psycho-emotional abuse or physical abuse without injury. In contrast, women with visible signs of physical abuse such as cuts or bruises had less choice about disclosure compared to women whose abuse was invisible. For example, one participant who was physically and emotionally abused by her ex-husband disclosed the occurrence of physical abuse to co-workers because the signs of injuries were evident to them. She stated, *"The reason why I had to speak out his assault is this evidence (ruptured eardrum). If I don't have any evidence, I wont' tell."* (01-2/715-6)

In addition to the visible signs of injury, visibility of abuse was evident when the abuse took place in public where others could witness the abuse. Thus, the women



had less choice about concealment because of questions from those who witnessed the abuse incident, as was the case of one participant:

*My co-workers knew all about it from me. My husband came here to show me up. If I didn't tell them, they'd have known what type of man my husband was anyway. He came up to see me here (at the office) with a very scary look to ask for my money. When I refused, he got mad at me and blustered. (08-1/471-81)*

The type of abuse also determined whether the women would disclose the abuse experiences to others. The women had more difficulty in disclosing sexual abuse than physical and emotional abuse because sexual issues are generally not discussed in public. More specifically, sexual abuse, mentioned like “*Rueng Nai Muung*” (เรื่องในมุ้ง) [an inside-mosquito net matter], was perceived as much more stigmatized and embarrassing than other types of abuse. This sensitivity led the women to conceal sexual abuse. The women disclosed the physical and emotional abuse but still concealed the sexual abuse, as these women indicated:

*I told my supervisor in detail from the beginning. I told him both the past and current situations. But I didn't mention “Rueng Nai Muung”. It's embarrassing and I don't think it's necessary to talk about it. (07-1/529-34)*

*I told my sister it all from the first time he beat me. I told her every time he hit me, whether it was violent or not. I told her every story except “Rueng Nai Muung”. (08-1/165, 182-5)*

*I briefly talked about his assault on me. Other matters like forced sex with him was not mentioned. I thought it was not necessary to tell others about this issue (stresses her voice). (04-1/191-204)*

In addition to the visibility and types of abuse, severity and frequency of abuse also influenced the women's decision, encouraging women to disclose their stories to obtain outside help. One participant recounted, “*If my husband hits me only once because he is drunk, that isn't serious. I won't tell. But for this case, he's been slapping me around. It's so frightening. He has beaten me repeatedly.*” (08-1/296-8) Another participant also disclosed to her friend as the abuse continued and deteriorated:



*The problem has not been solved. The situation got worse in the eighth year. The cruelty seemed to be more intense. I had thought that when he got older, the problem could be solved somewhat. But in fact, he doesn't change. (07-1/462-4)*

In summary, the abused women's choice about concealing or disclosing was mainly determined from the women's priority to survive revictimization or to survive critical circumstances. In addition, wife abuse myths, confidants' attributes and responses, and abuse characteristics influenced the women's decision. Once the women made their decision to disclose, several strategies were employed to meet their goals.

### *The Strategies of Concealing and Disclosing*

Both the anticipated revictimization and the critical circumstances in relation to wife abuse led the women to develop a number of strategies to survive. Two major strategies emerged related to the amount of detail given and the women's initiative in disclosing the abuse: "concealing" and "disclosing". Description of the two major strategies and all single strategies under each major strategy is provided in detail separately.

#### *Concealing*

All participants in this study discussed their initial tendency to keep the abuse inside the family in order to survive revictimization and keep their relationships intact. The participants described "strategies" in which they developed in an attempt to keep the abuse hidden from others, including covering any suspicion of abuse (e.g., bruises or cuts), isolation, silencing, and revising their stories.

*Covering.* To protect herself and her partner from others' suspecting the abuse, a woman tried to conceal any signs of physical injuries. Clothing was commonly used

to cover up the signs of bruises or cuts. This form of concealing was deliberate, but partners might enforce concealing as well. One participant recounted:

*How could I go out selling looking like this after my husband beat me up? I felt ashamed as my arms were full of bruises. The neighbors must have heard our fighting. I didn't dare to go out. My husband said they couldn't see my bruises as I wore a long-sleeved blouse. (02-2/75-7)*

*Isolating.* Social isolation was a strategy used to avoid situations where the public might find out about the abuse. Some women isolated themselves from society through hiding inside the home. Isolating themselves could happen temporarily until the residual injuries disappeared. One participant, for example, explained:

*When I was beaten so much that I got dark black and blue bruises all over my body and my face had pink bruises, I dared not leave the house. I feared that the neighbors would come to ask what happened to me, forcing me to tell them a lie which wasn't good. I tried to stay home until I got well. I didn't want others to know. If I had to buy something, I'd ask my husband to do so. He himself didn't want me to go out. He thought I must be ashamed. (09-1/713-4, 724-5, 739-41, 749-50)*

Not only hiding inside the home but also avoiding social contact was used to prevent women from being asked about the abuse incidents. These women said:

*I've kept my mouth shut. It was like I was afraid that others already knew it because my neighbors could hear our fighting. I'd keep a low profile or if I went to the market, I wouldn't talk to anybody for fear that others may ask me. (02-2/344-6)*

*I'll close up the house to hide when my husband is going to abuse me. The neighbors might be aware of it. And when I was being abused, I didn't cry out for help. I felt ashamed even when going to the market. I dared not to show my face. (08-1/211-3, 456-8, 650-1)*

*It was quite frustrating. I must hide from others knowing that my husband behaved badly (has a minor wife). I kept a low profile during that time. I only went to take my kid to school and then come home, kept myself in the room and watched TV. I didn't go out to meet my friends or others. I was afraid they'll know. (11-1/151-8)*

*Silencing.* This strategy refers to the women's deliberate acts of not telling anyone about being abused. Some participants did not say anything even though they were asked about the abuse. One participant, for example, noted how she responded to her father's questions about the bruises on her face.

*I rarely told my dad. When visiting him, he always asked how my life was and I'd say everything was fine. When my dad was sick, he asked what happened to me after seeing bruises on my face, but I didn't tell him. I thought he might be already aware of it. (06-1/203-8)*

*Revising.* To keep the abuse hidden from others, some participants chose to revise or change their stories. The women might lie about what had taken place. It was common for the participants to tell others that they fell down or had an accident. This strategy of revising was illustrated in the following excerpts:

*When my neighbor saw me, she asked what happened to my arms and face. And I usually told her that I fell down or accidentally walked into the door because it's dark. I thought she knew that was not true but she just ignored it. (09-1/1132-5)*

*I had to go to the hospital twice; first for muscle strain. At that time, I told them when I was exercising, my kid suddenly pushed me. I didn't tell them I was abused. And when I went to the hospital for the second time and again I told them a lie that I fell down, but in fact I was abused. (07-1/1079-94)*

*When we were fighting, I told her [neighbor] that we were driving away the mouse that was eating the food. I've been hiding them from the truth... Sometimes they saw my injuries and I'd say it was because I fell down the stairs or I was scratched. (02-1/688-90, 02-2/596-8,628-41)*

In addition, being the scapegoat was employed in response to a question from others. This strategy protected the husband from being blamed by presenting the abuse as her fault. One participant stated:

*I felt embarrassed to tell the truth, only saying that my husband punished me because I did something wrong... People always asked why I still stayed with him as he wasn't good. But I felt bad when others said my husband wasn't good. So I've tried to tell them about the good points of my husband. (02-2/80-84, 02-1/696-9)*

The women used various strategies to conceal the abuse from others. In deciding to conceal, the women took into consideration the possibility of negative consequences toward themselves, their husbands, and their family. The intensity and duration of concealing varied. Concealing the abuse continued until, at some point, the women could not bear the secret or the abuse alone. At this point, they moved to employ other strategies for disclosing in order to remain alive.

### *Disclosing*

Disclosure might come about through involuntarily admitting the abuse in response to a question when the participants felt forced to do so under certain situations. Moreover, disclosure would occur through giving hints to sound out whether they could continue their disclosing or not. However, voluntary disclosure could occur when the participants intended to reveal their abuse experiences to anyone whom they trusted or counted on in some ways to survive. At some point, all participants in this study initiated disclosure by directly telling others about their abuse experiences or by sharing the abuse with someone who had similar experiences.

*Yielding.* According to the participants' accounts, disclosure could occur as a form of involuntary admission of the existence of abuse in response to questions, suspicions, or compelling from anyone who already knew or did not know about the abuse. The women had to yield to those people because they were in an unavoidable situation. One physically abused participant described the situation that led her to unavoidably admit the abuse to her co-worker:

*It was because I took several days off and I didn't know how to lie to my colleagues. I at first told them that I had an accident falling off the motorcycle, but they didn't believe me and kept asking me. Actually, I didn't want to tell*

*them, but I couldn't resist their pressure (laughing), so I told them that I had a ruptured eardrum after my husband slapped me. (02-1/191-6, 859-61)*

*Hinting.* Few participants in this study described this strategy to initiate disclosure to a person they wished to disclose. These women provided clues indicating their abuse experience to draw that person's attention. The aim of doing so was to test the confidants' responses. If the person picked up the cues and asked, but in an unpleasant manner, the woman still had an option to retreat to concealment. For example, one participant who was financially exploited by her husband's cousin gave verbal hints to her neighbor. She appraised her neighbor's responses to determine if she would tell more, as she described in her account:

*I didn't intend to tell, only mentioning that a relative of my husband wanted to borrow some money from me but I didn't have any. So my neighbor said "you don't need to give him it if you don't have it." It was like a general conversation to see what she'd say if I told. I chose this person to tell my story, but she couldn't help me. So I felt that I couldn't tell her further and she couldn't give me advice. (01-2/686-97)*

Another woman's account also illustrated her initial attempt to get her mother's attention by complaining. When her mother gave her dissatisfying advice and failed to pay enough attention, she then retreated to silence again, as she described:

*My mom never knew. I only complained to her that my husband wasn't good. And she suggested that I scold my husband if he behaved badly. Then I didn't tell my mom anymore because she didn't pay attention to what I'd said. (14-1/154-6)*

Sometimes, a woman asked someone to give some clues for her. One participant, for example, asked her son to provide clues hoping that her mother would decipher what she wanted to tell. She said, "I told my youngest son to imply to his grandmother that his father has affairs with several women while working there and he told her that." (03-2/837-8, 846)



*Telling.* All participants had moved from concealing to telling because they expected support or help from outsiders. However, their disclosure varied in the amount of detail they provided to the confidants. Some women told their stories in order to give information to others; however, they might omit some detail of the situations they experienced. For example, one participant described the little amount of detail she gave another woman in order to offer emotional support but at the same time avoid upsetting her:

*I only said that I had a quarrel with my husband and he beat me. I didn't go into details ... I just told her that my husband was jealous. I didn't tell all because she has her own problem. (01-2/97-110)*

According to this participant, she also disclosed the abuse to her co-workers in response to questions about her injuries. However, she minimized the violence by withholding the extent and seriousness of the violence, as she explained:

*I decided to tell a colleague about my problem but I only said that my husband hit me as I went out without his permission. I hid from her the fact that I was handcuffed and beaten up. I didn't tell her the extent of the violent scene because I thought only prisoners are handcuffed, right? I thought if I told her it all, it could be too mean for the person whom I stay. (01-2/195-219)*

As mentioned before in the category of surviving critical circumstances, telling in detail was likely employed for emotional release and support seeking, as the statement of one participant, “*I told her all the details and all aspects. If you wanted release, you had to do it just like you are confessing a sin (การสารภาพบาป). I told in the hope that I could get advice to relieve the feeling.*” (01-2/979-88) To receive emotional support, full detail was also given to the confidants. For example, instead of telling only a few details, one participant chose to tell all the details to her neighbors who then provided her with emotional support through taking her along for religious practice or entertainment:



*I've told my neighbor everything since I entered into her room. Every time I had a quarrel with my husband, I'd go to the neighbor's room to tell her. I cried a lot. She took to make merit at the temple and that made me feel better... Sometimes, she took me to sing a song, to dine out, I enjoyed that. She's really good and helps me a lot. (03-1/194-6, 03-2/673-8)*

However, one participant indicated that even though she wanted to release the emotional burden, she still had to omit some details for fear of being blamed or gossiped about, as she said:

*I told some parts of my problem to release my feelings. There's something that can be shared with my neighbors and something I must keep secret. Telling them too much is sometimes not good. I should suppress my feelings and problems. They might think how shameful I am for disclosing the family matter. And some people could retell my story. (12-1/264-5, 502-3, 586-90)*

Full detail was willingly given to the confidants to promote the confidants' accurate understanding of the women's situations. For example, a participant with a 10 year experience of abuse decided to tell her supervisor in detail because of the abuse escalation and its impact on her work.

*I told my problem in detail to my supervisor, what I've encountered from the beginning, what the situation is now and how I've been treated for many years. I showed him the evidence of pieces of paper on which my husband insulted me and stuck those pieces of paper around the house. (07-1/529-34)*

In addition, full detail was likely given in a therapeutic and supportive environment. A few participants in this study revealed their entire experiences to mental health providers during the counseling sessions, as stated by this participant:

*I went to ... [the hospital's name] to seek advice. I told them how I've been abused and how cruel and sadistic my husband was. I wanted them to examine what type of a man my husband was and how violent he was. The nurses suggested that I divorce him right away. I told them everything because I wanted an answer and a right solution for my own problem. (07-1/847-68)*

Similarly, another participant provided full details to a psychiatrist, as she described:

*A few months after the abuse, I didn't sleep a wink, so I decided to see a psychiatrist. He told me to express my feelings and then when I told him, I cried a lot. I told him everything. (05-1/293-308)*

However, fully disclosing could occur without the women's initiation but when presented with a situation that provided opportunity to disclose. An example of such opportunity is one woman's experience of investigative interviews about family problems, as in the following case:

*When I was four-months pregnant, I went to seek prenatal care and took my son to treat for wounds. The nurse asked my son when seeing his injuries and then asked me what happened to him. I just lied to her that he fell down from the motorcycle, but she said the injuries looked a lot like a footprint. (paused for a while and cried.) Hearing that made me cry and release everything to that nurse (sobbed). I told her about my son first and then my own problem. (02-1/518-29, 02-2/405-7)*

*Sharing.* Sharing could occur when individuals were telling personal life experiences in a reciprocal manner. It created a climate in which both individuals could support each other. Sharing could occur even with persons who had different experiences. For example, one participant attended a conference on domestic violence and told her abuse experience with non-abused people in a group:

*When I joined a seminar about how to reduce family violence, and there was an activity that let everyone tell their worst ever experience. And when it was my turn to share my own problem, others in that activity were stunned and didn't want to tell theirs as nobody faced the problem like me. My story is seen as an example for them. (07-2/494-99, 519-23)*

In addition, sharing was likely to be facilitated if the confidants disclosed a similar experience in return. To illustrate, one participant who kept silent for a few years shared her experience following her acquaintance's disclosure:

*At first, an acquaintance said to me that she was beaten like a dog. So I asked her if she had the same problem as me. Then we talked with each other. She told her story and I told mine to release everything. I initially dared not to tell, but now I tell everything. (02-1/720-34)*

One participant said about her experience in sharing the abuse with her friend:

*I shared my problem with my best friend because she came to consult me first. I gave her some advice that made her trust me. So I decided to tell her my problem. We shared our problems with each other. We soothed each other. (04-1/1071, 1120-1, 1126-9)*

According to the previous statement, sharing could bring about mutual support and assistance among the women reciprocating similar experience in abuse. In addition, sharing could occur for altruistic reasons. For example, a physically abused participant who was referred to the shelter shared her worse situation in order to emotionally comfort other women in that shelter:

*I told my story briefly and then they told theirs. They'd feel that their problems are so serious. I then told them about my severe situations as an example. I shared my own experience to relieve them and encourage them to be patient as my problem is much worse. (02-2/472-79)*

In brief, disclosure could occur involuntarily by which the women yielded to someone who kept asking, felt suspicious, or persisted until the women admitted the abuse incidents. The women might move to reveal their experience by initiating disclosure with hinting, telling, or sharing the abuse with others.

In summary, the findings indicated the dynamic of strategies employed to avoid revictimization or to deal with the critical circumstances. The process of disclosure can move forward or backward between concealing and disclosing. Concealing through covering, isolating, silencing, and revising was rooted in the participants' desire to protect their sense of self and safety, to preserve a husband's image, or to prevent family burden. Disclosing was an option when the abuse was unbearable and the women needed assistance. Wife abuse myths as reflected through women's personal beliefs, confidants' attributes and responses, and abuse characteristics also influenced the women's decisions about concealing or disclosing. For the women who disclosed

their stories, there was variation in the degree of revelation which ranged on a continuum from yielding to hinting to telling a little detail about the entire story, to sharing the story with other abused women.

### *Consequences of Concealment and Disclosure*

The consequences of concealing and disclosing the abuse were perceived in the outcomes toward an abused woman following their abuse disclosure and concealment. A consequence of concealment that emerged from women's stories was identified as "suffering with a secret". In addition, data analysis in this study indicated that when disclosure did take place, its consequences felt by the women could be categorized into two groups: (a) negative consequences and (b) positive consequences.

#### *Suffering with a Secret*

All women in this study tried to conceal their abuse experiences, at least for a period of time, to protect themselves from hurtful responses from others. Doing that resulted in devastating emotional or physical conditions to the women in terms of feelings of repression, fear, and undesirable physical symptoms.

*Feeling repressed.* From the women accounts, women emotionally suffered in terms of the feelings of repression in keeping the abuse secret, as reflected in such words as "udd-un (อึดอั้น)", "ud-udd (อึดอึด)", or "keb-kod (เก็บกด)." One participant mentioned, "I felt utterly repressed when I was with others. I did not dare to tell them or to let them know." (02-1/739) The women talked about their feelings of repression to varying degrees. For example, one woman mentioned her intense feelings of repression due to an effort to hide her secret, "It was so repressed and uncomfortable. Not only

was I trying to deal with my troubles, but I was also uncomfortable since I had to conceal others from the truth, the truth that my husband is a man of this type.” (11-1/149-50) Others participants illustrated that their emotions were repressed until they exploded and became uncontrollable:

*I resented how he's treated me. I wanted to reveal it. When I didn't tell someone, I felt so much hurt. It was like a pustule. The more I keep things to myself, the more frustration I'll get. Like a pustule, it could swell bigger and bigger and burst. (03-2/1093-6)*

*If I don't tell anyone, my brain will explode. There are many things irritating my mind. That makes me think that if I can tell it to someone or have someone to comfort me, I'd feel a lot better. (14-1/357-61)*

*I probably felt that my emotions were almost out of control. But after speaking, it was okay. It was like a whirlpool of thoughts. When you release it, that could make you feel better. Conversely, if you still keep thinking about it, it could explode one day and only disadvantages will occur. (06-2/339-42, 930-7)*

*Feeling fearful.* For some of the study participants, not only had they felt repressed but they also feared that their secret would be disclosed. They attempted to be vigilant by hiding inside their home, particularly in cases of physical abuse which left a residual effect, as two physically abused women stated:

*I felt utterly repressed. When I was assaulted by my husband, I kept it silent. It was like I was anxious that my neighbors could hear our fighting. I kept staying at home or if I went outside, I wouldn't talk to anybody for fear that others may ask me. (02-2/342-6)*

*When I was beaten so much that I got dark black and blue bruises all over my body and my face had pink bruises, I dared not leave the house. I feared that the neighbors would come to ask what happened to me, forcing me to tell them a lie which wasn't good. (09-1/713-4)*

One emotionally abused woman feared that she would be asked about the abuse incident. She then avoided contact with the people who might ask her. She recounted, “I felt ashamed. I didn't dare drive my motorbike the way I'd usually did. I feared that people around there would ask me about my husband.” (03-2/1048-9)



*Experiencing physical symptoms.* Some of the women mentioned that emotional repression led them to develop some undesired physical symptoms, as these women mentioned, “*I’d feel very repressed if I don’t tell. Keeping it to myself is so heavy for me and that could cause me to get a sudden headache.*” (10-1/260-1, 469-70) and “*Suppressing my problems caused me to get a headache, making me repressed and dull. If I can tell it, I’d feel relieved.*” (12-1/896-900,922-3) For one woman, keeping the abuse to herself led her to develop an eating problem, as she stated:

*Sometimes, I felt uncomfortable but I didn’t tell my co-worker even though she kept asking me. I felt depressed and was not hungry. I ate nothing and was so gaunt, I’d never been like this before.* (03-2/750-1)

Beside physical symptoms, another participant who felt uncomfortable due to concealment of abuse exemplified the negative effects on her children, “*I felt uncomfortable. Thus, when I went back home, I was so moody and then would explode bad emotions onto my kids. So I felt pity for them as they don’t know anything about this matter.*” (14-1/371-3)

In brief, hiding a secret led the women to suffer from the feeling of repression that interfered with their physical well-being. In addition, the women feared that their secret might become known and so they attempted to be vigilant.

#### *Negative Consequences*

The women were likely to conceal the abuse because of the fear of being revictimized as discussed earlier in the category of desiring to survive revictimization. However, when the abuse was finally disclosed, all of the study participants talked about the actual negative consequences toward them which evoked hurtful feelings and



also influenced the women's subsequent disclosure. The negative consequences experienced by the women included feeling ashamed and guilty, being blamed and revictimized, as well as being gossiped about.

*Feeling ashamed and guilty.* Most of the women described their feelings of shame and guilt following disclosure. One woman associated a sense of shame with both telling others about the abuse and telling them that she was not leaving her abusive partner, as she stated, *"I felt ashamed when I told my problem to others and felt ashamed again that I couldn't separate from my husband."* (10-1/327-8) Some of the women expressed their feelings of shame in relation to disclosure because it revealed negative aspects of herself or her family. Two participants stated:

*With my husband's friends and colleagues I felt ashamed. They might think that I am bad, so my husband has to behave like that (having extramarital affair)...And I wonder if my husband felt ashamed for what he'd done. (05-407-14)*

*Sometimes, I talked to others about it, the bad things in my family. I felt ashamed, so I thought not to talk about it again. (02-2/326-8)*

Other times, disclosure of the abuse brought out the woman's sense of shame as she compared her situation with others whom she shared her experience with. She recounted, *"I felt better that there were other abused women like me. But I still felt ashamed that my situation seemed more severely than theirs did."* (02-2/323-5) In addition, a woman's sense of shame was brought out because her hurtful experience was treated as a joke, as she described:

*People in my office viewed it (being assaulted) as a joke. I told my co-worker. She passed my story to others and made it a joke. My story then was the topic that people made fun of... I felt really ashamed when people teased me about this. (01-2/255-7, 291-2)*

Beside the feelings of shame, the women in this study mentioned about a sense of guilt following abuse, as evident in the following excerpt:

*Disclosing the bad thing he did causes the feelings of guilt. He always talks about me to the public in a positive way... With living together, I feel that there are good things we share. But I tell only the dark side of our relationship, why do I have to do that? So I promised not to talk about it again. (02-1/737-8,751-4)*

*Being blamed and revictimized.* The women in this study talked about negotiating issues of blame and responsibility for the abuse in relation to their decisions to leave or remain with their abusive partners. When disclosing the abuse to family members or friends, the women were often told to leave their partners. They would feel blamed by others when they failed to act and leave the relationship, as evident in two participants' accounts:

*My parents told me not to tell others if I could not do anything. They blamed me because even though I told about the abuse, I remained with my husband... They asked me to leave my husband more than ten times but I couldn't. (08-1/288-300)*

*Somebody whom I told about the abuse blamed me and asked why I did not leave my husband. They said to me 'Why do I have to endure living with him?' That made me felt uncomfortable. (12-1/932-8)*

Some of the women felt they were being blamed because of the judgmental opinions of the confidants, which blamed women as the cause of abuse. One participant whose husband had an extramarital affair noted:

*My neighbor's husband told me not to follow my husband. My husband would be annoyed. He only thought that my husband acted violently toward me because I was fussy and made him get annoyed. That was not true. (03-2/599-603)*

One participant reported that her disclosure was disbelieved and she was blamed for the abuse:

*The people whom I told my story did not listen to me, but also retold the story. When I said my husband is licentious, they don't believe me, saying that I am this type of person. It sounds like they blame me. They had the wrong interpretation of my story. Instead, they propagated that I'm so lustful. So I dare not tell anyone. (14-1/19-28, 290, 642-50)*

In addition to being blamed, some women experienced harsh judgments and responses from their confidants which left the women feeling revictimized following disclosure. These harsh responses were conveyed in various ways. One participant noted about being “*Som Nam Naa*” (สมน้ำหน้า) [serves one's right]:

*I told my neighbors. Some of them said to me it served my right (สมน้ำหน้า) as I chose to married him, even my parents didn't want me to do it but I didn't believe them. They said that if I hadn't married him, I wouldn't be suffering. They didn't experience this themselves, and then they don't understand. (04-1376-81)*

Two other women talked about being “*Sum Term*” (ซ้ำเติม) [re-victimized] and “ridiculed” as responses from others, “*When I told my neighbor, she felt exasperated. When I told my parents, my dad only made me feel worse. So when I'm abused again, I won't tell my neighbor or parents.*” (04-1402-3, 554) and “*People around here are aware of my problem and they don't give me any advice, but they sneer and comment that my life as part of a couple will come to an end.*” (02-2/494-5)

Another revictimized response often from family members was the issue of women's responsibility for the abuse in relation to their decisions to leave or remain with their abusive partners. When disclosing the abuse to family members, women were told or pressured to leave their partners. One participant, for example, was given an ultimatum to either leave her husband or to break up the relationship when her mother knew about the abuse by the neighbors. She said, “*My mom asked me how tolerant I must be and later gave me an ultimatum that I must divorce him; otherwise,*

*she'd end the relationship with me. She said she can't take it."* (07-1/108-10) Another participant, on the other hand, wanted to leave her husband and disclosed the abuse to her parents who ignored her demand and asked her to endure the abusive situation. She explained:

*I wanted to let my parents know how bad my husband was. Will they approve if I leave him? They didn't listen to me, so I had no chance to tell. I told them a bit but they kept saying that I had to endure it. I then realized that they didn't listen to me. So I didn't tell them anymore.* (14-1/601-10)

In this study, there were only a small number of women who disclosed the abuse to helping professionals. However, 3 out of 4 women who reported the abuse incidents to policemen noted that their disclosure were disregarded and ignored. Two participants said:

*I notified the policemen. It seemed they felt bored to deal with spouse's quarrel. They just said that what they thought I wanted.* (02-2/245-6)

*During the argument (her husband held a knife to stab her), I went to the police station. But the police thought it was a family matter. They only listened to it and didn't accept my complaint. They also gave me a telephone number and said if something bad happened and it was an emergency, just call them then.* (06-2/1012-4)

Being revictimized from abuse disclosure influenced the potential for further disclosure by shaping how the women thought and felt about continuing to disclose with the same persons and/or with others. All except one participant retreated to silence with the ones who responded to them negatively. One participant who continued disclosing the abuse to the same persons explained how she coped with those negative responses that she received:

*I told my colleagues. I don't care if they ridicule me. It's normal and what I told them is fact. But I have to accept what others said about my husband that he's really a bad guy...after then, when I have problems again, I talk with them.* (08-1/702-23)

*Being gossiped about.* Confidants violating confidentiality was commonly experienced among the women who disclosed the abuse to their co-workers or neighbors, leading the women to retreat to silence. Most participants reported that they were gossiped about as their stories were spoken of or exaggerated to others in negative ways, as was illustrated in the following excerpts:

*I told them a bit. My neighbors then overstated my story and gossip badly about me. They could step on me. Afterward I tell no one. (04-1/359-64)*

*After telling my colleagues, they retold my story to others in a negative way...I don't want them to spread it because this doesn't help my life at all. They only aggravated it. When I told them and got the feedback like this, I stopped telling them. (07-1/362-384)*

*Some overstated my story...I just told them a bit, but they retold it to others...even when they already knew how I was treated. Instead, they exaggerated my story, so I decided not to tell anyone. (14-1/274-83)*

In summary, the women mentioned about the negative consequences following abuse disclosure. Feeling ashamed and guilty was commonly mentioned. In addition, the sense of being blamed and revictimized was also reported as resulted from the confidants' harsh responses. Being gossiped about was mentioned as the consequence of disclosure when the confidants violated the confidentiality of her stories. The women were likely to retract back to silence when they received negative consequences after their abuse disclosure.

#### *Positive Consequences*

Positive consequences of disclosing wife abuse perceived by the women in this study included feeling relieved, improving self-worth, and obtaining support from the confidants.



*Feeling relieved.* Commonly positive consequences noticed from the informal networks were described as feeling relieved following disclosure, as was evident in such statements as “*It eased when I told. I felt comfortable.*” (03-2/1074-6), “*It’s unbearable to be repressed. I must tell my neighbor because it helped me feel relieved.*” (04-1/225), and “*When I talk to my friend, I felt it eased and better.*” (02-1/323-4) Confidants’ supportive responses through listening and compassion were mentioned as the most desirable for the women, which helped them feel relieved, as described by one woman:

*I feel better after releasing my problem to my friends. They still listen to me and accept me...They always support me and don’t exacerbate me. But there were some who made me feel worse after hearing my story. (12-1/909-33)*

One participant reflected that the response of her friend in a sympathetic manner and her soothing words helped her to feel a sense of release and to reclaim her self-confidence:

*When telling my friend, I felt relieved...And she said that rich people could have a fight and argument as well. She found an example to console me. When I get some comfort, I feel better...with this person, when I have any trouble, she’d come and soothe me, making me feel more confident. (02-2/346-56)*

Disclosing the abuse helped a woman get through the point in which she felt extremely pressured and thought about killing herself or her husband because her emotional tension was released, as she explained:

*I was so sorrowful. I faced a lot of pressure. I want to get revenge. I hate him. I’m angry at him. I told my best friend. Her words made me feel comfortable. When I felt bad, talking to her made me feel better like getting something tough off my chest...If I didn’t tell my friend, I could have committed suicide or killed him. (07-1/254-5, 467-72, 584; 07-2/77-8)*

*Improving self-worth.* The women reflected that disclosing to someone who responded in a supportive way could help improve their self-worth that had been damaged as results of the abuse. For some participants, disclosing strengthened their



desire to help people with similar experiences, and doing that led them to feel good about themselves and gain a sense that their voices were valued.

*My neighbor had a problem with her husband and came to talk with me. So I shared my own problems with her as an example in order to console her to feel better and to show that everyone can have problems. I feel glad that I can help her. (01-2/94-5)*

*I want them (women at the shelter) to know that my situation is much worse than theirs. I don't want them to feel depressed but want to encourage them to be patient and realize that others' problems are worse. I used my problem as an example for them. (02-2/470-9)*

*Obtaining support.* Most of the women received support from informal networks in terms of advice about how they should live their life in abusive situations. For example, one participant who was in an abusive relationship for a decade disclosed her experience to her supervisor. She explained what he advised her to do:

*My supervisor is a good guy who can give me good teachings like a father...He teaches me when I encounter problems and tells me to compose myself to fight against the problem, not escape from it... If I still keep thinking about it what I've encountered only tortures me. If I face the problem, let it go and forgive, the suffering will go away. (07-1/492-3, 551-3)*

Many participants pointed out that they preferred the advice that provided them with respect and autonomy about their decisions rather than controlling or directing, as illustrated in one participant's account:

*My friend's words can make me feel better. She didn't tell me to take actions like suing my husband or informing the police as my mom always suggested, but she gave me encouragement, supported me to fight for my kids and told me to be patient. When this friend says this, it would ease my mind. (07-1/284-295)*

Tangible support that women wanted as a result of disclosing included safe places to stay, money, or immediate intervention. Two participants reported about safe places provided to them after disclosure:

*When I got into trouble, I called my younger sister and she told me to stay at her farm. I have stayed there anywhere from 10 days to probably several*

*months sometimes. I have been there almost twenty times. When my husband abused me, I'd pack my belongings and go there. (04-1/442-4)*

*Every time we had arguments, my husband beat me. So I escaped to stay in my neighbor's room. When I told her what happened, she let me stay with her and go home in the morning. (03-1/156-8)*

Two participants illustrated receiving financial support, “*I told my mom and my sister. My mom said nothing. She cried, and then gave money to me.*” (11-1/191-3) and “*I told my neighbor. She sympathized with me. Sometimes I borrowed some money from her and she brought some foods to my kids.*” (03-1/187-8) In addition, some of the women noted that their family members had attempted to intervene by verbally admonishing their abusive husbands, as illustrated by one study participant, “*My older sister came to take care of me when I was assaulted. She admonished my husband but he ignored her. Whenever I had a problem, she called up to admonish him.*” (08-1/138-9, 381-2)

Among professionals, their support tended to be information that helped the women make good choices. For example, one participant who disclosed her experience to a mental health nurse stated that she was given confirmation of the seriousness of the situation and of her decision to leave her husband, as she recounted:

*I decided to separate from him because I couldn't bear it anymore. I went to consult the nurses at the psychiatric department. She told me that if I endured it further, he would only abuse me more severely...She suggested that I leave him as soon as possible. There weren't ways to heal. (07-1/804-9)*

As well, one participant who was threatened with a knife by her husband disclosed her abuse situation to a volunteer lawyer in OSCC and was given information that helped her to look at her own safety:

*I talked to a lawyer at the Women and Child Center in a hospital. He said to me that he's concerned about the abuse because almost abused women ended up with either injuries or death. When I listened to him, I felt that I must protect*

*myself...This was what I learnt, and then I had to analyzed how to deal with the problem with the least impact on me. (06-2/1026-38)*

In brief, feeling relieved was the most common positive consequence of abuse disclosure when the women received supportive responses from the confidants. Disclosing strengthened women's desire to help people with similar experiences and led them to improve their self-worth. The women also mentioned that they received advice and tangible support in terms of safe places to stay, money, or immediate intervention, from people in informal networks. Information support was mentioned by the women who disclosed the abuse to helping professions.

In conclusion, the women' accounts revealed that concealing a secret led them to suffer from a feeling of repression that affected their physical well-being. Concealing also led them to fear that their secret would be discovered. For the women who disclosed the abuse, some women experienced negative consequences, including shame and guilty as well as being blamed and revictimized, or gossiped about. Positive consequences were mentioned as feeling relieved, improving self-worth, or obtaining support.

### Part 3 Discussion of Findings

The process of moving to disclosure for survival emerged in the findings by using a feminist grounded theory to answer the question: How do Northeastern Thai women disclose their experience of wife abuse? The findings of this study are discussed for the purpose of identifying specific contributions of the present study.

The process of moving to disclosure for survival included two causal conditions that determined whether a disclosure was made, the conditioning factors that influenced

the likelihood of disclosure, the disclosure and concealment strategies, as well as the consequences of the concealment and disclosure. The responses of the confidants also influenced the likelihood of further disclosures. Each element in the process is discussed separately.

### *Survival as a Primary Cause of Concealing and Disclosing*

The process of moving to disclosure for survival reflected the women's attempt to deal with or to live through threatening experiences either from the abuse itself or social responses to the abuse and their disclosure. Similar to the findings of Fiene (1995) and Landenburger (1989), all women in this study tried to conceal their abuse experiences, at least for a period of time, and they were likely to reveal the abuse when they faced situations in which they could not manage alone and therefore the assistance or help from others was needed.

In this study, the process of moving to disclosure framed women's decisions and behaviors in relation to abuse disclosure as rational according to their goals of surviving revictimization or surviving critical circumstances. For many of the women, concealing was a strategy for survival when revictimizing responses were anticipated.

The women then were encouraged to reveal their stories to potentially receive or secure help to survive critical events resulting from the abuse. The women's decision about disclosure, identified in this study, is similar to those in the literature on disclosure.

The disclosure decision model proposed by Omarzu (2000) stresses that an individual's decision to disclose is based on an evaluation of the possible benefits or desired outcomes versus the possible risks of disclosing in any specific social situation. The woman's decision about abuse disclosure in the present study, although different terms

were used, supports Lutz's (2005) qualitative grounded theory with 12 abused pregnant women. In her study, woman's assessment of the perceived risks and benefits of disclosure influenced the woman's disclosure decisions.

#### *Concealing for Surviving Revictimization*

*Protecting one's sense of self.* In the present study, concealing was a strategy for surviving revictimization. The abused women reported the destructive impact of the abuse on their sense of self because the abuse was connected with negative views of self. Therefore, keeping the abuse hidden from others was the best choice for the women to prevent destruction of their sense of self. The term "protecting one's sense of self" in the present study is similar to "face-saving" described by Lempert (1996). Lempert conducted a grounded theory study with 36 abused women and they used "face-saving" as a strategy to avoid being discredited by maintaining the invisibility of the abuse.

The women in this study linked abuse disclosure with a negative impact on their sense of self as the feelings of shame and embarrassment which could be intensified when they anticipated others' blaming, laughing at, or gossiping. Consequently, concealing is employed by all abused women for a while. The women expressed awareness of the negative stereotypes and stigma that can be associated with women who are in abusive relationships. Adherence to the notion of being a good woman in Thai culture, a woman is expected to be a good wife who has to satisfy their husband and be obedient. In the past, a traditional law called "*Kod Mai Tra Sam Doung*" stated that husbands have the right to beat their wives in order to discipline them (Lomratanachai, 2007). At present, therefore, many men still believe that they have the

right to punish wives if need be. Violence can be legitimately used as a form of punishment when women are seen as disobeying their husbands (Sawangchareon, 2002). As wife abuse occurs, they might blame themselves, feel ashamed, embarrassed, and guilty for failing in their role as being good wives, mothers, or persons.

When deciding to disclose, the women in this study feared that others blamed them for failing in being a good wife, causing partner's violence, and deserving to be abused. Also, others would discredit them as being "silly" and "a failure." The women did not want others to see them from the vantage point of the stereotypes that characterize abused women as crazy, poor, unemployed, uneducated, unable to protect themselves from abuse, and unable to cope and leave an abusive relationship. Disclosing to others opened the possibility that the woman could be stigmatized, with focusing on her behavior rather than the partner's violence. Therefore, women may decide not to disclose violence in their relationship to avoid the stigma of being identified as an abused woman and the negative opinions of others (Fiene, 1995).

This finding is comparable to those in other studies. For example, during the time of data collection, 71 of 251 (28%) abused pregnant women in Northeastern Thailand did not disclose the abuse to others. Of those who did not reveal the abuse, 7% (n= 5) identified their reason as feelings of shame to let others know about the abuse (Sricamsuk, 2006). Similarly, a descriptive study among the general population in Northern Thailand (Sripichyakan & Parisunyakul, 2005), found traditional beliefs regarding wife abuse as an embarrassing issue for women and the family. Given a sense of shame, it is not surprising that Northern Thai women implied abuse disclosure as "open up cloth to show one's back" (Sripichyakan & Parisunyakul, 2005) while Northeastern women implied it as "lifting up cloth to show tinea infection"



(Rujiraprasert, course paper, 2004). Both metaphors reflect that disclosing abuse is revealing a bad family matter to the public, which could bring shame to not only the woman but also a whole family. Abused women may choose concealing the abuse as a strategy to cope with the feeling of shame associated with being abused as was evident in Vorasetakarnkul's (2001) qualitative study.

The negative impact of abuse and disclosure on women's sense of self is also evident in Western cultures. A review of 42 studies by Montalvo-Liendo (2009) to identify factors influencing disclosing intimate partner violence indicates that shame and embarrassment are the most common factors. In addition to feelings of shame, the destruction of sense of self in relation to abuse disclosure was identified as feelings of low self-esteem (Hanley, 2004; Rodriguez, Quiroga, & Bauer, 1996). The destruction of sense of self could be intense in abused pregnant women because of the violation of socio-cultural norms. A pregnant woman is expected to be cared for and loved by her husband, which is contradictory to her own experience. This contradiction can lead an abused pregnant woman to feel ashamed and embarrassed about the violence. In Lutz's study (2005), by guarding through hiding or covering up the abuse, a woman could maintain a positive impression of herself as a capable pregnant woman.

*Protecting one's safety.* In addition to the psychological vulnerability, the women in this study identified fear of physical harm and abuse escalation as barriers that led them to conceal the abuse. This finding is in line with those found in other Thai studies. Fear of further violence and abuse escalation was perceived by abused women in central Thailand as a barrier of abuse disclosure (Archavanitkul, Kanchanachitra, Imem, & Lertsrisuntas, 2003), and also perceived in the general population of both males and females in Northern Thailand as a barrier to seeking health care services

(Sripichyakan & Parisunyakul, 2005). This finding corroborates previous qualitative research in Western cultures (Gerbert, Abercrombie, Caspers, Love, & Bronstone, 1999; Lempert, 1996; Peckover, 2003; Petersen, Moracco, Goldstein, & Clark, 2004; Postmus, 2004) that reported the fear of repeated violence by abusive partners as a reason for not disclosing the violence. Lempert (1996) supported these findings, suggesting that men used various strategies including bodily harm and abuse escalation to control any potential disclosure of the violence.

*Preserving husbands' image.* In the present study, the women indicated the desire to preserve their husbands' good image as a "good person", a "good husband", or a "good father" even though their husbands were abusive. This desire may be influenced by gender roles and expectations received and learned from their family and Thai culture. Disparities in power and prestige between men and women still characterize modern Thai society (Nontapattamadul, 2003). Women have little presence and power in the productive realm, while the patriarchal or domestic mode of production is structure by male dominance and female subordination. Although developments such as women entering to the public economic and labor market exist, customs rooted in beliefs about women's proper role in the household remain strong (Nontapattamadul, 2003). In Northeastern Thai culture, therefore, a woman is socialized to accept the superior social standing of men in that a woman's self-worth and honor are dependent upon her husband (Saratassananan, 1979 cited in Phaokuntarakorn, 2005). A woman is expected to be a good wife who is faithful and honors her husband through expressing love and respect. In this study, the emotional attachment and honoring to a husband was the condition that brought difficulties to woman in relation to whether to disclose the abuse to others. This emotion led a

woman to suppress her resentment toward her husband's abuse and keep her abusive situation hidden in order to keep a good image of her husband. In other studies, an abused woman mentioned her desire to protect her husband but in terms of not wanting their husbands to get into trouble (Rodriguez et al., 1996) and to be stigmatized (Landenburger, 1989).

*Preventing family burden.* The women in this study also discussed wanting to prevent others from emotional burden associated with knowing about the abuse. A shared cultural belief and gender role expectation contributed to the women feeling responsible for nurturing others, maintaining harmonious family relationship and caring for all relatives including their family of origin. This finding is comparable to a survey study conducted in the central region of Thailand that reported many abused women did not seek help for fear of discrediting their family (Archavanitkul et al., 2003). Similarly, in a telephone survey by Rodriguez and colleagues (2001), 29% of women who did not disclose the abuse (n=216) identified fear of shaming family as the underlying reason for not disclosing violence to a physician. In a grounded theory study of child sexual abuse disclosure, Iturrioz (2000) revealed that the women tried to keep the abuse secret because they wanted to protect their family members, especially their parents from the pain and shame associated with knowing about the abuse.

In Thailand, a woman remains emotionally attached and close to her parents even after marriage. Femininity includes socialization to be considerate and grateful to parents. It is common for Thai women to emphasize their concerns for their parents over personal concerns. This cultural belief and gender role expectation that hinders disclosure has also been observed in other Thai women with HIV/AIDS. For example, in a grounded theory by Klunklin and Greenwood (2006), Thai HIV-positive women

hid their HIV status to protect themselves, their children, and their husbands from discrimination. Thampanichawat (1999) also reported in her study that Thai mothers who were HIV-positive tried to keep their HIV status secret when they perceived threats against themselves, their loved ones, and their significant others in family.

*Negative consequences of disclosing.* Consistent with other research, the women reported that disclosure resulted in both positive and negative consequences, which had a direct effect on whether they continued, or stopped disclosing (Goodkind, Gillum, Bybee, & Sullivan, 2003; Hanley, 2004; Merritt-Gray & Wuest, 1995). In this study, the women reported negative consequences from others following disclosure that usually led them move back to conceal. The most common negative consequence experienced from members of informal support groups (friends, family members, neighbors, co-workers) was the confidants' breaching confidentiality that resulted in being gossiped about. Further, disclosure of the abuse brought out the woman's sense of shame and guilt because of the stigma of being identified as an abused woman who was unable to leave an abusive partner. The issues of blame and revictimized [*Sum-term* (ซ้ำเติม)] were also experienced by the women in the present study, which was found in the study of abused women by Sripichyakan (1999). Brown (1991) stressed that negative responses, especially from those sought out by victims as a source of trust and help, could inflict the sense of revictimization or secondary victimization on victims. Such responses as victim-blaming commonly experienced following abuse disclosure were reported to be more painful and traumatic than the violence itself, further distancing the women from others they once trusted.

*Disclosing for Surviving Critical Circumstances*

*Suffering with a secret and tension releasing.* Given the traumatic and stigmatizing nature of wife abuse, keeping the abuse secret can result in emotional burden or distress, leading to feeling repressed, uncomfortable, or insane; and to develop psychosomatic symptoms such as headache, eating disorder. According to Kelly and McKillop (1996), there is some evidence indicating that the greater the resource one employs to keep a secret, the greater the possibility of stress-related physical and psychological problems. Therefore people who keep a secret about themselves are frequently advised to “let it out” and “get it off your chest” (Kelly & McKillop, 1996, p. 450). In this study, the most common motivation for abuse disclosure was a desire to release emotional tension from being abused and from keeping a secret. This motivation supports the notion in the disclosure decision model of Omarzu (2000) in that the disclosure is employed to achieve goals including relief of distress. In a descriptive study with the general population in Northern Thailand, abused women were so emotionally stressed that the most common need from nurses was encouragement and opportunity to express feelings despite the unsolved problems (Sripichyakan & Parisunyakul, 2005). In a qualitative study by Smith (2005), women revealed their experiences of sexual abuse to others in order to “get it off her chest” or to feel a sense of release. Similarly, Thampanichawat’s (1999) grounded theory study revealed the need for releasing emotional tension as a reason for some Thai HIV-positive women to disclose their secret.

*Seeking support.* As evidenced in previous research, Sripichyakan and Parisunyakul (2005) reported that two of the common needs of abused women when seeking help were a safe place to live and financial assistance. Another study reported

that the needs of and support for abused women for seeking help in Northern Thailand included safety, financial support, legal assistance, and consultation on health related violence (Chaisetsampun, 2000). Therefore, social support including emotional, instrumental and information support has been found to be a critical factor for women attempting to resolve wife abuse (Grauwiler, 2008; Rose, Campbell, & Kub, 2000). Likewise, the women in the present study reported the need for assistance as the reason behind abuse disclosure. Usually, their need for such assistance was related to increased frequency and severity of violence. The women tended to disclose to members of informal networks who were expected to provide assistance to them as needed. Only a few women disclosed to helping professions. These women deliberately disclose the abuse to health care providers to obtain medical treatments for themselves or their husbands.

*Getting through the unbearable point.* Women who continued keeping their stories secret could develop intrusive thoughts or violent acts including insanity and killing themselves or their husbands, described by the women as “the unbearable point”. The unbearable point was observed in the literature (Liang, Goodman, Tummala-Narra, & Weintraub, 2005) in that Asian abused women tended to report abuse incidents and to seek help only when the violence reached a severe or crisis level. This finding is consistent with those reported in other Thai studies. Voraseetakarnkul (2001) reported the findings of a qualitative study with abused women in Northern Thailand that most abused women tried to solve the abuse problems on their own and to keep the abuse hidden. Their attempts to keep the abuse secret resulted in negative outcomes such as ideation about self-inflicted harm or suicide and about killing their husbands or children. Seeking outside help and disclosing the abuse were reported as



occurring when women could neither bear nor deal with the abuse by themselves any longer (Chaisetsampun, 2000; Vorasetakarnkul, 2001). Archavanitkul and colleagues (2003) also reported in a survey study with Thai women in central Thailand that abused women identified reasons for seeking help including unbearable feelings, and fear of severe injuries, and threats of death.

The unbearable point was also reported in other qualitative studies using other terms. In Grauwiler's (2008) study, abused women would disclose the abuse when they faced the "turning point", the critical events or moments in which the problem of violence had gotten out of hand. Hathaway, Willis, and Zimmer (2002) described the "turning point" as a point where the abused women "could not take it anymore" and felt they needed to talk to someone about the abuse to get help. A "breaking point" in Landenburger's study (1989) was reached when a woman began to fear killing herself and her husband. Lastly, Harrison (1998) reported the "critical juncture" as the factor that encouraged psychologically abused women to disclose the abuse to health care providers. She defined the critical juncture as the meeting point of escalating abuse and the women's self ascribed limit for the abuse.

*Attempting to be free from abuse.* The unbearable point as aforementioned could lead some women to feel ready to leave the abusive husband. Women in the present study reported that abuse disclosure was employed to consult others about whether to leave or not. The findings were consistent with abuse disclosure literature in that the women disclosed or sought outside help to leave the abusive husband. However, findings from previous studies (Landenburger, 1989; O' Campo, Mc Donnell, Gielen, Burke, & Chen, 2002; Wuest, Merritt-Gray, & Ford-Gilboe, 2004) reported

help from others went beyond the confirmation of leaving idea, and included actions such as accommodation, financial support, or legal assistance.

*Positive consequences of disclosing.* Women in the present study identified positive consequences of disclosure involving feeling relieved, improving self-worth, as well as obtaining support from members of informal and formal support networks that helped them survived the urgent situations they encountered. Feeling relieved was the emotional well-being that improved after disclosure in that the women were released from the burden associated to the obligation of keeping the abuse secret (Dodgson, 1996). Similar to Taylor's (2004) ethnographic study of the process of recovery from domestic violence, women began the healing process by sharing the secret of abuse with family members or friends. Women usually felt relieved, calmed, and satisfied when they had a chance to talk to others and did not have to hide things anymore (Wong et al., 2008). According to a qualitative study by Dodgson (1996), women with a history of child sexual abuse considered disclosure to be healing as they experienced relief from secrecy and isolation.

Along with feeling relieved, the women in the current study indicated that their self-worth was improved following disclosure. This finding supports the literature related to the effects of disclosure of abuse. For instance, Smith (2005) examined the role of disclosure in women's coping and recovery from abuse and found that disclosing helped abused women repaired their self-esteem. The women in this study described that disclosing strengthened their desire to help people with similar experiences called "altruistic motivation for disclosing" by Smith (2005), and doing that led them to feel good about themselves and gain a sense that their voices was valued.

In addition, obtaining support was indicated as a consequence of disclosing in this in this study. This finding was consistent with other Thai studies (Sungsiri, 2002; Voraseetakarnkul, 2001) which reported the receiving of emotional support, advice and instrumental supports (safe place to go, first aid for injuries) when they disclosed the abuse to family members or friends. In this study, women reported emotional relief as a result of both disclosing the abuse and receiving supportive responses. Also, the information obtained from discussing the abuse problem with health care providers enabled the women to solve the problems effectively. These notions support the existing literature regarding social support in that informal and formal support have been shown to improve battered women's mental health, willingness and ability to seek help from formal sources (Liang, Goodman, Tummala-Narra, & Weintraub, 2005). Importantly, it could improve the women's perception of their own efforts and success in dealing with abuse (Rose et al., 2000).

*Confidants' attributes and responses.* Confidants' attributes and responses were determined before disclosing and then observed following the disclosure. Similar to Bacchus (2003) and Gerbert and colleagues (1999), trusting in keeping the confidentiality was the most common attribute required by abused women in the persons they wanted to disclose to. In addition, abused women would choose to reveal their stories with members of formal or informal support networks whom they perceived to be compassionate, supportive, understanding, and concerned. These confidants' attributes and responses were expected to be helpful in providing emotional support, tangible support, advice, and information or, at least, in listening to abused women when they wanted to release emotional tension.

Similar to Smith's (2005) study, the women in the current study also indicated their preference to talk to others who have had similar experiences because they felt that they could relate to one's emotions and could support as well as provide relevant advice to each other. This is also consistent with the findings of Archavanitkul and colleagues (2003) in that if the abuse escalated and women could not endure it anymore, they were likely to disclose to close friends or someone who had similar experiences because they could understand and provide support. Limandri (1989) also reported in her grounded theory study that disclosure in persons with stigmatizing conditions including family violence was likely to be facilitated if the confidants had similar experiences.

#### *Wife Abuse Myths and Abuse Characteristics*

In addition to the aim of surviving, three conditions were identified as influencing whether women would disclose the abuse or not. As confidants' attributes were already discussed, here wife abuse myths and abuse characteristics are discussed in relation to their influence on abuse disclosure.

#### *Wife Abuse Myths*

Wife abuse myths reflected through women's beliefs provide evidence that Thai societal beliefs about wife abuse still strongly influence women's decisions in abuse disclosure. Belief in the myth of wife abuse as a private matter is evident among the general population in Thai society which is construed as male dominant culture (Archavanitkul et al., 2003; Lomratanachai, 2007; K. Sripichyakan & S. Parisunyakul, 2005). Not surprisingly, even police personnel as well as some other professions share

the myth that abuse is a relationship problem and should be handled privately within the family (Nontapattamadul, 2003). A study in a health care setting in Songkhla province Thailand by Sukhum (1999) also found that some health care providers avoided asking directly to woman regarding abuse experience because wife abuse is perceived as private matter and asking might be offensive. More importantly, the mass media, particularly today's newspapers, have presented and regarded domestic violence including wife abuse as private or family matter. Wife abuse incidences were reported in newspapers just as an event without emphasizing it as a crime which offense the human rights (Phiphitkul, no date).

The women's personal beliefs identified in this study reflected their acceptance and embodiment of Thai cultural norms that discourage women revealing wife abuse experience in the public sphere. The acceptance of wife abuse myths which internally influence women's decision in concealing the abuse were similar to findings in other studies about these private matters. For example, in the descriptive study in Northeastern Thailand by Sricamsuk (2006), 60.5% of pregnant women concealed the abuse (n = 71) because they regarded the abuse as a family affair or a private matter. Similarly, in the descriptive study of the general population in Northern Thailand, Sripichyakan and Parisunyakul (2005) found that 73.1% of the sample believed wife abuse was a private matter discouraging abused women from going to the hospital. The view of wife abuse as a family issue is reinforced in the Thai proverb "*Finai ya nam ok, Finok ya nam kao*" (ไฟในอย่าออก ไฟนอกอย่าเข้า) [the fire in the family belongs inside the family, the fire outside the family stays outside]. This Thai proverb suggests that family problems should remain within the family. Exposing such family problems may result in "*loss of face*" and should be avoided at all costs (Costa & Matzner, 2002).

As a private matter, many women in the present study tried to solve the problems by themselves and endured the violence in order to keep the family intact. The sense was that other people should not get involved as “it’s not outsider’s business” otherwise they would be called “the third person”. This finding is consistent with qualitative studies with abused women in Northern Thailand by Chaisetsampun (2000) and Voraseetakarnkul (2001). The belief of a private matter in which others should not intervene brings out another mistaken belief of disclosure as “useless” or “helpless”. This finding was supported by Sripichyakan and Parisunyakul (2005). In that study, wife abuse was not seen by some participants as a health problem and health care providers were unable to help. Likewise, in a qualitative research of Iturrioz (2000) with Latina women with a history of child sexual abuse, some women believed that disclosure would not be helpful. Smith (2005), in a study of sexual assault disclosure, also found that there was no reason to talk about the abuse if disclosure did not improve matters,

#### *Abuse Characteristics*

The women in the present study discussed their abuse disclosure based on the visibility of abuse. Psycho-emotional abuse or sexual abuse could possibly be concealed because of the unobservable signs whereas physical abuse left such residuals as bruise or cuts for others to notice. Joachim and Acorn (2000) described the visibility of health conditions as an influencing factor for health problem disclosure. Hathaway and colleagues (2002) also found that some abused women disclosed the abuse to health care providers because the outward signs were impossible to deny or lie about. Types of abuse also influenced abuse disclosure. In this study, the women faced



difficulty in talking about sexual abuse, even with their family members. Sexual abuse is more stigmatizing by nature than physical and psycho-emotional abuse. Thus, disclosing sexual abuse to others would lead to intense shame. Moreover, Thai culture still regards sexual issues as taboo that should not be discussed in private or public. This finding is consistent with other studies in sexual abuse disclosure (Harrison, 1998; Smith, 2005).

### *The Strategies of Concealing and Disclosing*

Generally, disclosure is conceptualized as a dichotomous variable composed of disclosure and concealment. According to research and literature on disclosure, however, there are various aspects used for describing and identifying disclosure behaviors. For example, disclosure can be described as indirect and direct strategies (Gerbert et al., 1999), intentionally and unintentionally oriented (Alaggia, 2004; Sorensen & Snowman, 1991), or dependent upon the detail given and methods used in disclosing (Sandelowski, Lambe, & Barraso, 2004). In this study, concealing and disclosing were identified and basically varied in respect to the detail given to others and the methods used. There was a range of detail given in disclosures, from concealing through covering, isolating, silencing, and revising to disclosing the abuse ranged from yielding, hinting, telling a little detail to the entire story, and sharing the story with other abuse women.

The strategies for concealing the abuse in the current study are similar to those described in other studies. In the studies on abuse disclosure (Alaggia, 2004; Fiene, 1995; Gerbert et al., 1999; Landenburger, 1989; Sorensen & Snowman, 1991), concealing behaviors were described as found in this study, including covering,

isolating, silencing, and revising. Silencing in this study was explained as concealing behavior involving not telling about the abuse. However, consistent with a feminist perspective, revising was a term used in this study for lying or changing the story to avoid using language which depicted women in a negative way. Instead, revising was used to acknowledge a woman's capability in using other strategies for survival. These concealing strategies have also been found among women with other stigmatizing conditions such as HIV or chronic conditions (Joachim & Acorn, 2000; Kittikorn, Steet, & Blackford, 2006; Sandelowski et al., 2004; Thampanichawat, 1999). However, passing as normal was noted by Joachim and Acorn (2000) as one strategy to conceal an invisible stigmatizing condition that was not identified in this study.

Regardless of aspects of disclosure, the strategies of disclosure in this study, although differently described, are similar to other studies. Hinting and telling were strategies identified among victims of violence when disclosing to both members of informal networks and professions. Telling encompassed minimizing as well as partial and full detail disclosing. Sharing information was only mentioned in disclosing to lay people. Yielding or admitting was noted in this study but not identified in other studies (Alaggia, 2004; Dunham & Senn, 2000; Fiene, 1995; Gerbert et al., 1999; Limandri, 1989; McCauley, Yurk, Jenckes, & Ford, 1998; Merritt-Gray & Wuest, 1995; Smith, 2005).

Considering the aspect of timing, most women initially concealed for awhile and then disclosed (Limandri, 1989). However, disclosure does not progress in a linear direction moving forward from concealing to disclosure. Instead, it is dynamic and runs along a continuum in which any strategy can be employed across situations depending on which aspect of survival was the priority, other conditioning factors, and confidants'

responses as discussed earlier. Women would continue disclosing if they received supportive responses. On the other hand, they would retreat to concealing after receiving revictimized responses.

### Summary

This chapter presents findings from the integration of a grounded theory study and a feminist research in studying wife abuse disclosure among Northeastern Thai women. Sixteen women were interviewed. The average age of the women was 40 (range 28 to 56 years). The women were predominantly Thais (87.4%), Buddhists (93.7%), employed (87.4%), and high school educated or higher (68.8%). Ten women (62.5%) had already left their husbands and the other six remained living with husbands. All participants in this study experienced psycho-emotional abuse. Twelve participants (75.0%) reported experiencing physical abuse and three participants (18.8%) reported experiencing sexual abuse.

The basic social process that conceptually explained how the women concealed or disclosed their abuse experience to others was entitled as “Moving to Disclosure for Survival”. There were two causal conditions or goals determining whether the women disclosed the abuse or not: (a) Desiring to survive revictimization and (b) Desiring to survive critical circumstances. Moving to disclosure for survival was also influenced by three conditioning factors: (a) wife abuse myths, (b) confidant’s attributes and responses, and (c) characteristics of abuse. Two general strategies of “concealing” and “disclosing” were employed by the abused women. Suffering with a secret was identified as the consequence of concealment. The consequences of abuse disclosure perceived by the women were negative or positive consequences.

Findings in this study extend the understanding of abuse disclosure as a complex phenomenon related to socio-cultural contexts, particularly gender issues in Thai culture. The process of moving to disclosure framed women's decisions and behaviors in relation to abuse disclosure as rational according to their goal of surviving wife abuse. Concealing or disclosing the abuse experiences are the strategies employed to ensure survival in Thai social context where disparities in power and prestige between men and women still exist. Conclusions of the study, implication and recommendations, as well as the strengths and limitations of the study are presented in the next chapter.