PHYSICALLY ABUSED WOMEN
AND THEIR FAMILIES:
THE NEED FOR
COMMUNITY SERVICES

PROGRAM DEVELOPMENT GUIDE

HELP PREVENT FAMILY VIOLENCE

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF YOUTH AND FAMILY SERVICES
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The Purchase of Service Unit and Bureau of Research of the Division of Youth and Family Services have jointly prepared this preliminary guide for community program development for abused women and their children. There has been little research in this area and as a consequence the available literature is sparse. Most of the information provided in this protocol, as well as in the available literature, is based upon anecdotal accounts. As more documented information becomes available, this guide will be revised and redistributed to the community.

This guide is the second in a series of program development manuals addressing family violence. The first report, *Child Abuse and Neglect in New Jersey: A Guide for Communities and Provider Agencies*, is available through the Division of Youth and Family Services.

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PHYSICALLY ABUSED WOMEN AND THEIR FAMILIES: 
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INTRODUCTION
The physical abuse of women is a major social problem.* Statistics indicate that the situation of abused women is often life threatening and fatal. It is estimated that about 100,000 couples in New Jersey engage in serious violent acts each year. There are many reasons cited as causes of this violence including cultural norms, the structure of family life, sex roles and economic frustration. In addition, wife abuse is seen as a reflection of societal violence. This violence affects all family members and has both immediate and long term consequences: disabling injuries to

*A number of recent studies indicate that men may be the targets and victims of family violence as frequently as women (Straus, 1977a, Time, 1978:69). However, one study by Murray Straus (1977a) cautions that, for several reasons, these findings should not be allowed to detract from the growing effort to eliminate wife abuse. Violent attacks by women may be initiated by abuse from their husbands or companions; existing data indicates that husbands are more likely than wives to commit the most dangerous and injurious acts, and to repeat such acts more often. The greater average strength of men over women makes it more likely that a man will be able to injure a woman than a woman injure a man. In addition, a large proportion of attacks by husbands occurs when the wife is pregnant, and thus the attack poses a threat to the unborn child as well as to the woman. Finally, women are more often dependent on a marriage than are men. Due to a variety of economic and social constraints, they often feel they have no alternative to accepting physical abuse from their husbands (Straus 1977a:11). In short, women appear to be victimized by familial violence to a much greater extent than are men, and therefore may be in greater need of immediate attention.
women, the breakup of families and the abuse of children. The most serious long term effect of spousal assault is the potential perpetuation of the cycle of abuse as the home becomes a training ground for violence. The children who observe violence, frequently become future abusers.

Often, the women cannot end the abusive cycle on their own. In many instances, the women remain in the abusive home because they are economically dependent, fear reprisals and are uncertain whether they can care for their children on their own. Very few communities provide social services for these women and their families. The services that do exist are fragmented, inaccessible and incapable of responding on an emergency basis. The police and courts historically have not supported women in filing and pursuing complaints; family and friends are often either fearful or ashamed and do not become involved. The abused women find from these encounters that they have very few options.

Experience, however, has indicated that by providing supportive and protective services and by increasing access to resources, the community can help the battered woman to create and identify alternatives to the abusive situation. Analyses of the problem of battered women indicate that the primary immediate service needs of these women are for safety and protection, emergency housing, medical assistance,
legal assistance, transportation, referral, advocacy, supportive counseling, and economic support. Feminist organizations and other concerned individuals and groups have taken the lead in documenting the needs of battered women and their children and in advocating program development. Federal, state and local governments are now beginning to recognize spousal abuse as a social problem rather than a personal problem, and to allocate resources to make services available.

The purpose of this document is to summarize what is known about the problems of battered women and their children and to identify programs and services for community development to meet their needs.

This report is organized into three major sections:

I. Scope of the Problem;

II. Current Program Development Activity; and

III. Recommendations for Program Development.
I. SCOPE OF THE PROBLEM

A. Available Statistics

Two principal sources of statistics are available: criminal justice data and survey data. Family violence is far more prevalent than official statistics alone are able to estimate because only a small proportion of the incidents result in law enforcement or human service intervention.

Research based on police and court records indicates that violent crimes in which both the victim and perpetrator are members of the same family account for a substantial proportion of all reported violent crimes. "Spouse killings in 1972 accounted for 12.5 percent of all murders [in the United States]. In nearly 3 percent of all homicide offenses parents killed their children. And 9 percent of murder incidents involved other kinds of in-family killings" (Scanzoni and Scanzoni, 1976:339). The 1975 figures for spousal murders nationwide were similar. These 1975 figures indicated that the wife was the victim in 52 percent of the known murder incidents and the husband was the victim in the remaining 48 percent (International Association of Chiefs of Police Inc., 1976a:1). A study of homicides and assaults in Detroit over a 43-year period, 1926 through 1968,
revealed that one-third of the homicides and about one-half of the assaults involved family relationships (Boudouris, 1971 as cited in Elliott et al., 1976:2).

Statistics compiled for 1975 by the New Jersey Division of State Police support the national data. They reveal that "28 percent of the murders were perpetrated by a member of the immediate family group, and more specifically, 14 percent of the murders involved spouse killing spouse...child abuse was responsible for 6 percent of all murders during the year" (Uniform Crime Reporting Unit, 1975).

Non-fatal assaults are, of course, much more frequent than murders in violent homes. In Washtenaw County, Michigan, 35 percent of assault and battery and felonious assault cases were wife assault cases (Fojtik, 1976c:20). The police in Morristown, New Jersey, reported that "35 percent of all criminal complaints filed with their agency were filed by women against their male companionship" (Terpak and Hoskins, 1976:4). A study of 600 divorce applicants conducted in Cleveland in 1966 showed that 36.8 percent of the wives indicated "physical abuse" as one of their complaints (Levinger, 1966, as cited by Eisenberg, 1977:141).
An exploratory study of divorce clients conducted in Essex County, New Jersey, reported that 68 percent of the 97 clients stated that they had been "victims of a violent attack on at least one occasion during the course of their marriage" (Elliott et al., 1976:11). This same study indicated that where violence between spouses was evident, it was likely to occur frequently.

"Forty percent of the women reported more than ten violent incidents during the past year and an additional 24 percent reported between two and ten such incidents" (Elliott et al., 1976:11).

According to Elliott et al., (1976:3), an in-house memorandum of the New Jersey Legal Services Family Law Task Force reported that many of their clients were victims of wife abuse. A study conducted in Bergen County, New Jersey, estimated that the unreported incidence of battery was higher in Bergen County than that reported for all other violent crimes combined (Fassberg et al., 1977:10). It also estimated that "631 women were beaten enough to seek medical care from physicians... over the 12-month study period"(Fassberg et al., 1977; 12).
The Milwaukee Task Force on Battered Women (Geist, et al., 1977) gathered these additional facts on domestic violence:

In a Michigan study of 20 abused wives, 6 were beaten severely enough to require hospitalization. In that study alone there were four concussions, four miscarriages, one fractured jaw, one dislocated shoulder, one broken and one set of cracked ribs. One woman was burned on her breasts by a lighted cigarette and another received first degree burns from a hot iron. None of the wives reported that the beatings were of the one punch variety. The beatings lasted anywhere from five or ten minutes to over an hour. The cases reported in this study reflect a pattern of severity that is repeated in virtually all literature on wife abuse (Feminist Alliance Against Rape Newsletter, Vol. III, Issue 2, Spring, 1976).

Of 95 women surveyed by the Milwaukee Task Force on Battered Women, 73% reported physical assault without a weapon, 18% reported assault with a weapon, 4% reported sexual assault by a husband or boyfriend. Of these, 8% reported daily violence, 37% weekly violence, 20% monthly violence, 35% reported violence occurred several times during the relationship/marriage. At least 15 women required hospitalization (10/75).

At Boston City Hospital 70% of the assault victims received at the emergency room are women who have been attacked in the home. Where the assailant is specified in these cases, it's usually the husband or lover (Betsy Warrior, "Wife Beating," April, 1976).

The crime of rape rose by 96% in the 1960's and cases of wife beating outnumbered rape by three to one (FBI statistics).

Legal experts think that wife abuse is one of the most underreported crimes in the country—even more underreported than rape, which the FBI estimates is ten times more frequent than statistics indicate. (Ladies Home Journal, "Wife Beating," June 1974).
Wherever attempts to count women who have been battered are reported, the picture which emerges is a serious problem for which there is no effective community response. In many families, violence is a chronic problem which becomes a public matter when the seriousness of the assault demands intervention by the police.

Silent Victims
Women who acknowledge their status as victims of beatings in divorce proceedings (O'Brien, 1971) or in police complaints are not the total population of abused women. An Essex County (N.J.) Study revealed that 63.6 percent of the women who had experienced violent incidents had never filed a criminal charge and that 57.6 percent had never called the police (Elliott et al., 1976:17). Many of these women fail to seek assistance and endure abuse for many years for a number of reasons including, among others, fear and economic dependence.

Erin Pizzey, however, reports on a phenomenon that occurs when any type of deviant behavior is exposed to public discussion: people begin to realize that they are not alone in their suffering and begin to seek help. Pizzey in her book *Scream Quietly or the Neighbours Will Hear* reproduces
letters she received and reports on women who came forward with their stories of being battered by their husbands (1974:Chap. 2).

Most of the programs that have been set up are immediately faced with large numbers of applicants (Pizzey, 1974, 43-46). One shelter program in Pennsylvania was filled to capacity after only two days of operation (Vernick, 1977). Programs are overcrowded because facilities are not large enough to meet the existing needs. "...Those who have sought to provide shelter for women who are in danger or abused have found their facilities overtaxed." (LEAA, as quoted in Fassberg et al., 1977:28). The organizer of "crises housing" in St. Paul, Minnesota, said on the basis of her experience that "the problem is so widespread ... a crisis house could be filled in every other block in America" (Ozzanna as quoted in Elliott et al., 1976:5).

The need to reach out to the silent victims is apparent, but the extent to which the problem is hidden will only be known when these women become aware of people concerned enough to help them.
B. Occurrence of Incidents Across Socio-Economic Groups

Studies indicate that spousal abuse cuts across all socio-economic groups (Martin, 1976:19-20; Elliott et al., 1976:13; Fassberg et al., 1977:13, 14; Fojtik, 1976:31). Women in Transition, a Philadelphia-based program, reported that of the 5,000 women it served last year, more than half had been physically abused and of these, 40 percent were from middle class families (Elliott et al., 1977:7).

Straus found that the use of violence to resolve conflicts is high in both blue collar and white collar families. In blue collar families, 18.4 percent reported engaging in violent acts against the spouse and 12.5 percent of the white collar families reported such behavior (Straus, 1977a:13).

C. Estimated Incidence of Spousal Violence in New Jersey

The Division of Youth and Family Services (DYFS) estimates that approximately 100,000 couples engage in serious violent acts and potentially would utilize the services of comprehensive programs for abused spouses. This estimate is based on the results of a national survey reported by Straus (1977a:8), who found that 6.1 percent of all couples interviewed engaged in one serious violent
act within one year (1975). Using 1970 U.S. Census statistics, there are about 1,750,000 couples in New Jersey. If the national proportion of violent couples is applied to New Jersey's population, the result is an estimated 106,750 couples who engage yearly in serious violence. Many more families are expected to be involved in less serious violent acts.

D. Prevailing Causal Theories and the Potential Effects of Spousal Violence

1. Causes of Spousal Violence

Little research exists concerning family violence and that which is available is limited. Much of the research is based on convenient populations, such as divorce cases, police reports or participants in existing programs. The literature does, however, present a wide variety of causal factors to explain the violence. Unfortunately, few enjoy universal acceptance. The most comprehensive and useful research findings have been produced by Murray Straus, Richard Gelles and Suzanne Steinmetz. Some of the theories they and others propose are discussed below.
Straus identifies six (6) factors which potentially lead to wife beating (1977b:2-23). However, he contends that the combinations of these factors, not the factors alone, lead to abuse. These factors include:

(a) Cultural norms that legitimate wife beating.

Some of these norms are:

- violence is permissible within a marriage;
- this violence is a private matter when it occurs between family members; and
- the privacy of the home must not be violated.

These assertions are supported by surveys of the American population. According to a Harris poll conducted for the National Commission on the Causes and Prevention of Violence, one of every four Americans approved of "slapping their spouse on appropriate occasions" (Stark and McEvoy, 1970). This finding is also confirmed by a study conducted by Howard Erlanger which found that 25 percent of the adult Americans he polled approved of husband-wife battles (as cited in Martin, 1976:19). Many of
the men and women interviewed by Gelles expressed similar attitudes, as represented by such phrases as "I asked for it," "I deserved it," or "she needed to be brought to her senses" (1974:58).

Straus contends that these norms not only support the husband's "right" to use physical coercion to control his wife, but also account for the indifference of society, as reflected by its agencies, to the problem of abuse.

(b) Familial violence as a reflection of societal violence.

Governmental violence, as illustrated by imposition of the "death penalty," "police toughness" and a "world wide military establishment" (Straus, 1977b:7), violence portrayed in the media, and the propensity of Americans to bear arms all reinforce a climate of legitimacy for the use of violence to achieve desirable ends (Haskell et al., 1974:417-445).

(c) The family as the training ground for violence.

The family is the first setting in which most people experience physical violence.
Physical punishment has many consequences. Children learn that those who love the child are also "those who hit and have the right to hit," and "that when something is really important, it justifies the use of physical force" (Straus 1977b:9). These values become a part of the child's personality and world view and are generalized to other social relationships, including that of spouse to spouse and parent to child. Gelles (1976) supports this theory. He found that women who were abused as children tolerate the violence of their husbands more than other women (Gelles 1976:7-9, 15). Hanks and Rosenbaum (1977) also found strong parallels between the relationships of women and their violent alcohol-abusing husbands, and the patterns of child rearing experienced by the husband and wife as children. Physical abuse appears to be a life-long experience for some and is a continuation of the violent patterns of control and discipline they themselves learned at home as children.
(d) The structure of family life leads inevitably to conflict.

Family members are involved in intimate and often stressful relationships. The opportunities for conflict are frequent; in most families, there are only two adults to absorb the strains and frustrations of daily life. Family members with a limited repertory of responses to threats and stress most often resort to violence.

(e) Sex roles within the family which force men into the position of head of the household and women into housework and child care can lead to violence.

Gelles (1972:123) found that women with more education than their husbands were more likely to be abused than were women with less education. Several researchers report that the abusive men are often characterized as "losers" who cannot respond to more competent wives (Martin, 1976). Frequently men who fail as providers or are inadequate as husbands and who have low self-esteem may become violent alcoholics.
(f) Economic frustration such as unemployment can lead to lower self-esteem and violent consequences. This is related to the previous factor which assigns the husband the role of "breadwinner." American society places a high value on success, especially for men, and male failure in this area is a major source of frustration and family conflict.

The frequency of alcohol use prior to violent incidents is reported by all of the researchers. Elliott, Glazer, and O'Connell (1976:13) found that in Essex County, New Jersey, 51.5 percent of the abusive husbands had been drinking prior to an abuse incident. Gelles (1972) found that alcohol abuse was common in the families he interviewed, but cautions that the alcohol might be only a means of disavowing the assaultive behavior. It is important to note, however, that others have found that the elimination of the alcohol abuse does not necessarily eliminate the abusive behavior (Hanks and Rosenbaum, 1977). Thus while spouse abuse is not solely caused by alcohol abuse, the latter often serves as a contributing factor.
In summary, the research on the causes of spousal assaults provides only a guide to the types of problems that might be encountered by a service program. Some of the factors contributing to marital violence such as cultural norms appear to be beyond individual control and would require changes in cultural prescriptions and social policies. The specific individual family problems generally evolved slowly (such as inappropriate responses to frustration and conflict, alcohol abuse, and patterns of family violence learned as a child). These also are not usually subject to rapid changes. Because many of the familial problems are interrelated, programs should be designed to work with people who have several problems in addition to that of being the victims of assault.

2. **Effects of Spousal Violence**

The available literature and anecdotal accounts discuss certain immediate effects and speculate on some long-term effects of abuse in the home.
Some specific immediate effects of familial violence that can occur include:

- disabling injuries for the woman;
- death of the woman, or in some cases of her spouse;
- breakup of the family unit;
- abuse of the child(ren) by either partner;
- dislocation of children from friends and school and the emotional trauma to the children due to family separation; and
- financial stress for women who lack job skills but now must maintain a separate household for themselves and their children.

The most serious potential long-term effect is that of the perpetuation of the cycle of abuse. Gelles reports that:

The empirical data...on homicide, assault, child abuse, violent crimes, and violence between family members definitely tend to indicate that violent individuals grew up in violent families and were frequent victims of familial violence as children... In our own research we found that many of the respondents who had committed acts of violence towards their spouses had been exposed to conjugal violence as children and had been frequent victims of parental violence. (1972: 169).

The home becomes a "training ground" for future intergenerational violence (Gelles, 1972:Chap. 6; Pizzey, 1974:74, 76, 79, 90; Straus, 1977b:8). Erin Pizzey, who has run a program for battered women since 1971, states:
Violence goes on from generation to generation. All the men who persistently batter come from homes where they watched violence or experienced it themselves. They saw their fathers beating their mothers or were themselves beaten as children. Violence is part of their normal behavior. They learned as all children do, from copying what they saw, and what they experienced (1974:74).

Thus, spousal assaults represent serious problems for the community and the family beyond the cessation of the immediate violence.

E. The Condition and Problems Battered Women Face

The literature dealing with family violence, and especially with battered women, their needs and available resources, is primarily anecdotal. In addition to the sources cited for this section and the following section, the descriptions were confirmed repeatedly in regional conferences held in New Jersey, Pennsylvania, and New York, and in individual meetings with service providers and battered women. Much rigorous work needs to be done, however, through needs assessments and the development of resource profiles in New Jersey as well as in other states, before we have a fuller picture of the problem. Nonetheless, the existing literature does indicate a pattern of serious problems.
As described previously, women who suffer abuse come from all socio-economic groups. They are subjected to injuries that can result in disabling conditions and even death. They are burned, tortured, choked, kicked, beaten and thrown against things; they are threatened with guns, knives, and other weapons. In some instances these women are pregnant when the abuse occurs. (Gelles, 1975; Pizzey, 1974:22, 77; Eisenberg, 1977:144; Martin, 1976:60). Some of the injuries that result require medical attention. For instance, in one study, 45.5 percent of the women sought medical attention on at least one occasion for injuries (Elliott et al., 1976:12). The abuse can be provoked by minor disagreements, such as dinner, the length of a skirt, misplaced cigarettes, or by major disagreements over money or jealousy (Eisenberg, 1977:144; Martin, 1976:49; Pizzey, 1974:34). Sometimes the woman is asleep when the abuse occurs and she awakens to find herself being choked. The abuse can have a pattern and tends to increase in frequency over time. Some of these women endure this abuse for many years. Studies and anecdotal accounts present a variety of reasons explaining why these women continue to stay in abusive situations. These reasons indicate social, psychological, and economic needs:
emotional ties/duty: Despite the abuse, some women are filled with love and/or loyalty for their men (Martin, 1976:73; Pizzey, 1974:31; Langley, 1977:93; McCormick, 1976:5). Others feel responsible for the man and believe that he needs them (Martin, 1976:82). They often enjoy the relationship during the period when the abuse does not occur (Martin, 1976:80, 82; Leitner, as quoted in Patterson, 1977c; Langley, 1977:94). During this period, the man can be an adequate father and an affectionate husband. Other women believe that the man will reform (Gayford, as cited in Martin, 1976:79; Fleming, as cited by Pennsylvania Commission for Women, 1976:3; Truninger, 1970, as cited in Gelles, 1976:2).

cultural and societal expectations and values: Some women will not admit that abuse is occurring or seek help because of their shame and embarrassment (Pizzey, 1974:31; Martin, 1976:5, 80; Gelles, 1972:108; Fassberg et al., 1977:136; Langley, 1977:94). They feel they are responsible for what is happening and fear that they might have provoked the abuse (Langley, 1977:94; Straus, 1976; Fields as cited in Gingold 1976:52). They
may also feel that they deserve the abuse (Martin, 1976:83; Gelles, 1972; Straus as cited in Langley, 1977:94). Furthermore, some women feel that to admit the abuse is to admit that they cannot adequately meet the needs of their husbands and that they are responsible for an "unsuccessful" marriage (Martin, 1976:81-83; Fields, as cited in Gingold, 1976:52; Langley, 1977:93). Because women have traditionally been forced to depend on the wife role for a respectable status, they often find it difficult to end even a bad marriage (Straus, 1977b:17-18).

feelings of powerlessness/fear: Some of these women have faced years of personal degradation to the extent that they begin to believe that they cannot manage on their own. They lack self confidence and have poor self images. They have been dependent on their mates both economically and emotionally. Furthermore, the constant terror of the unexpected assault can actually emotionally immobilize the woman. She becomes obsessed with her fears and cannot move beyond them to develop alternative plans for herself or her children (Martin, 1976:76-79; Transition
Fear of retaliation prevents wives from reporting abuse and seeking services (Eisenberg 1977:144-145; Fassberg et al., 1977:13; Lowenberg 1976:3). Sometimes the wife gets another beating after the police leave (Martin, 1976:76; McCormick, 1976:8). In a case reported by Pizzey, which could represent many more women, a woman decided to return home for this was a familiar setting from which she could escape quickly and where she could anticipate attacks more realistically (1974:39). Thus, in settings away from the home where there is inadequate support and security, and where the husbands/companions are aware of the location, the women can still be terrorized and drained by fear (Martin, 1976:77; Pizzey, 1974).

previous history of abuse: At least one study shows, and is confirmed by anecdotal accounts, that women who come from a parental home where battering occurred often had more tolerance than did nonabused individuals for the violent situation in their marital home (Gelles, 1976:7-9, 15; Langley, 1977:94).
isolation: Abused women can be socially isolated. Some of the isolation is self-imposed because the women fear that their friends will learn about the abuse. In other cases, the isolation is imposed by the husband. Some women are not permitted to perform normal activities such as leaving the house, going shopping, or having friends (Martin, 1976:83-84; Anderson, 1976:9; Pizzey, 1974:27). This, coupled with their own feelings of shame, embarrassment, powerlessness and rejection from friends and relatives, can make the women feel totally alone.

economic dependence and lack of resources:
These women frequently lack money and resources, regardless of the economic position of their husband/companion (Martin, 1976:83; Eisenberg, 1977:143-144; Fleming, as cited in Pennsylvania Commission on Women, 1976:2; Pizzey, 1974:30). Some men control all the money even when the women work (Martin, 1976:85). In a number of instances, men harass the women so that they lose their jobs (Lynch, as cited in Straus, 1977b:44). Women often cannot provide adequately for themselves or their children if
they leave the home to live on their own. (Martin, 1976:84-95; Straus, 1977b:15-17). According to Gelles, "...the fewer resources a woman has, the less power she has, the more 'entrapped' she is in her marriage, the more she suffers at the hand of the husband without calling for help outside the family" (1976:15). In a number of cases these women never finished high school (Gayford as cited in Martin, 1976:74, 75; Gelles, 1976:15). They might lack sufficient educational experiences and marketable job skills to become self-sufficient even when they have the opportunity (Martin 1976:84; Pizzey, 1974:43; Gelles, 1976:15; Lowenberg, 1976:3).

the role of children: Some women stay in an abusive situation because they feel they cannot financially care for their children on their own. They also are afraid to leave the children in the care of the abuser (Pizzey, 1974:21). Furthermore, it is difficult for a woman with a large number of children to find and afford another living place. Some women feel that they cannot adequately care for the children and that the children will experience emotional instability without the presence of
their fathers (Lowenberg, 1976:3). In addition, many women stay to avoid charges of desertion and the possible loss of custody of their children. Because there remains an insufficient supply of adequate child care services, many mothers cannot go to work, go to school or take other necessary actions (Straus, 1976:553). In some cases, mothers finally leave or call for assistance, but only after the children also have been abused (Martin, 1976:22, 73; Pizzey, 1974:20; Gelles, 1976:11).

knowledge of rights/resources: Women are frequently unaware of their legal rights (Former Bergen County Prosecutor Woodcock, as cited in Fassberg et al., 1977:6), or of available helping resources; they do not know where to go or how to apply for services (Martin, 1976:120, 122).

previous experiences with services: Many women who do seek legal and social services help find that the agency response is often fragmented and misdirected. Existing programs frequently send the women back to the abusive homes with little or no relief or assistance
fear of the unknown: Some women find it difficult to consider a change. "There exists a certain amount of security in the known and the familiar, and accepting or even acknowledging a situation change can be perceived as threatening" (Steinmetz and Straus, 1974:5). Battered women, like other individuals who have low self-esteem and tremendous feelings of inadequacy, will view any change as risk taking. This can evoke enormous amounts of anxiety.

A crisis situation can occur at any time of day or night, during the week or on a weekend. The victimized woman might need assistance on the spot to stop an assault in progress. She might wish to leave for protective purposes or for emergency medical treatment for herself or her children. Some women may be seriously injured.

Frequently when a woman leaves to escape an ongoing assault, she does not have time to take along money, food, clothing or documents. Not all women drive or have access to transportation, and without
funds they cannot obtain transportation or secure an apartment or motel room. Without documents, the woman might not be able to apply for public assistance to obtain emergency funds and the office itself may be closed (Martin, 1976:126, 130). Furthermore, while she may be able to find a place to stay for herself, it is unlikely that she can find accommodations for both herself and her children (Fassberg et al., 1976:16-17). She can impose on friends and relatives, but they are not always available, able or willing to help (Pizzey, 1974:30, 32, 33; Martin, 1976:119-120; Lowenberg, 1976:3). It is very difficult for someone to take her and her children in for an indefinite period to provide the total support and protection needed. (Martin, 1976:119-120; Gelles, 1972).

These women and children require safe emergency housing that provides protection and services to meet their basic needs (Pizzey, 1974:1-143; Martin, 1976:8, 1976; Straus, 1977b:30-31; Lowenberg, 1976:3). The woman needs a setting where she can regain her emotional and physical strength and where she can calmly analyze her situation and plan for her future, whether this involves independent living or reconciliation. The woman needs
support and encouragement to help her overcome her fear and to regain her self-confidence.

Even when the woman has made the decision to leave her husband/companion, she still faces the problems of adjusting to living on her own as well as the possibility of the legal problems of separation and divorce. She also has to deal with potential reprisals from her husband/companion. These women need both support and follow-up services to help them meet the plans they establish for themselves.

Children in these families also suffer. They are sometimes the objects of abuse and neglect (Martin, 1976:22; Anderson, 1976a:73; Fojtik, 1976c:31; Patterson, 1977a; Fassberg et al., 1977:13; Pizzy, 1974:52, 55). Gayford, who studied 100 battered women, found that 57 percent of the women reported abusing their children and 54 percent claimed that the husband also hit the children (as cited in Martin, 1976:22).

The anecdotes that Pizzey cites show women who are abused and men who abuse also expressing their frustration by abusing the children (1974:52-70). Children might be terrorized and traumatized if they see abuse repeatedly, as they frequently do
(Martin:22; Fojtik 1976:31). In a New Jersey study of 97 divorce clients, women were asked whether the children had ever witnessed a violent incident during a ten-year period. About 57 percent of the women answered affirmatively (Elliott et al., 1976:12). A study conducted by Bard of the 30th Police Precinct in New York City found that children were present during 41 percent of the domestic disturbance calls (as cited in Martin, 1976:22).

The young child might be "separated suddenly from his/her mother, often after having witnessed an assault upon her, and may conclude that his mother is dead or that the mother has abandoned him/her," especially if these children are placed in foster homes (Metzger, 1977a).

As is evident from these descriptions, violent families have many emergency and continuing needs which must be met.

F. The Inadequate Response of the Existing Resources

The resources which are now available for battered women in local communities include informal systems, such as friends and the family, and the more formal legal and social service systems. As
described by battered women, these resources are limited and fraught with many problems. Some of the needed resources do not exist at all. The resources that do exist are fragmented, misdirected and sometimes detrimental to the welfare of the women. Part of the dilemma women face is that the resources that are supposed to help them are often caught up in the cultural and societal myths and values that condone wife abuse (Straus, 1976:547-548).

Individuals and agencies fail to intervene because they regard domestic violence as a private matter. The victim of abuse is often blamed for becoming a victim. "What did she do to provoke him?" is the question commonly asked. Because of the lack of viable immediate alternatives, reconciliation and saving the marriage is often encouraged at the expense of the safety and well-being of the woman and her children.

1. Family and Friends
Families and friends offer limited assistance. With the decline of the extended family, women have fewer relatives to call upon for help. Family and friends are either fearful or ashamed and do not want to become involved (Martin, 1976:16; Pizzey, 1974:30, 32, 33; Lynch as cited in Straus, 1977b:44).
Battered women become further isolated and fail to seek help because of the anticipated rejection from these potential supporting relationships. Sometimes the battering situation is merely accepted by family members since this was a normal occurrence in the extended family home. In other cases, friends and neighbors ignore the abuse (Pizzey, 1974:30, 32, 33). When help is given, however, it is often focused on having the women return home to reconcile with their husbands. In some cases, they are ignored or have been rejected by friends or relatives when they have exposed their problems, or they are pressured into preserving the conjugal relationship (Lowenberg, 1976:3; Pizzey, 1974:30, 32, 33; Langley, 1977:90). Women are afraid to involve their friends or neighbors because they might also be abused, for the abusers often find and beat or threaten them as well (Pizzey, 1974; Martin, 1976:77).

2. Legal System
   a. Laws

   The battered woman can seek assistance from the legal system. However, the law itself presents barriers to women
seeking help. For example, in tort actions in at least six states, "interspousal immunity" prevents the woman from being able to sue her husband for damages (Martin, 1976:103; Straus, 1976:547). In New Jersey, a woman can sue her husband in a tort action in cases arising from automobile accidents. This has not yet been extended to other areas.

Also, a husband cannot generally be convicted in a rape case if the victim is his wife (Bienen, 1977:96-137; Martin 1976:89). In New Jersey, a husband can be convicted of rape only if there was a divorce or a legal separation. However, few individuals seek orders for separate maintenance. Legislation covering assistance to victims of crimes specifically excludes spouses (Warren, 1977:18; Straus, 1976:549).

b. Police

Often the police are the first resource in the legal system that the women call for help.
Many incidents occur in the evening and on weekends, and the police are available on a 24-hour basis. The police, however, hesitate to become involved in domestic disputes (Bannon, 1975:3, 5, 6; Straus, 1976:548). Domestic disputes are described as the most dangerous type of case for they result in the largest number of deaths and injuries to police. In 1974, 23 percent of the police officers killed and 28 percent of those assaulted were responding to domestic disturbance calls (FBI statistics, as quoted in Fassberg et al., 1977:4). The response of the police is varied. Many practices and legal restrictions limit the aid they can or do provide. For instance, calls for aid in some departments are screened and domestic violence calls are not given priority unless a weapon is involved (Bannon, 1975:6; Eisenberg, 1977:157). It may take hours before the police arrive, if they arrive at all (Warren, 1977:14; Martin, 1976:92). When they do arrive, they sometimes cannot or will not make an arrest (Eisenberg, 1975:156-157; Straus, 1977b:27;
Patterson, 1977b; Martin, 1976:99). In some cases, the officer must observe the felony or misdemeanor before he can make an arrest (Martin, 1976:90; Eisenberg, 1977:149). In other cases, the victim has to be willing to testify that she is a victim before an arrest can be made (Fassberg et al., 1977:18). Police are generally encouraged to counsel the couple to work things out, and they do not necessarily offer the woman protection or discuss alternatives (Straus, 1977b:20, 32; Eisenberg, 1977:156; Bannon, 1975:1-9).

Police say that they fear bringing false charges, for a number of women eventually do deny the charges (Martin, 1976:94). Sometimes police will not arrest a man unless a complaint is signed. It is not easy to press charges because this usually has to be done at the court and the court is not open evenings or weekends. Some of the difficulty in pressing charges can be seen by the number of cases where the objective is finally secured. For instance, in 1966, in Washington, D.C., 7,500 attempts were
made to press charges; of these, less than 200 were eventually secured (Field and Field, 1973:232). Police do not always advise women of their legal rights in marriage, divorce, custody, property, criminal and civil proceedings (Warren, 1977:15). Sometimes the police are prevented from helping victims because there is a lack of resources (Fassberg et al., 1977:20). Recently, new training materials were developed for the police which discuss more realistically the problems of wife abuse and the procedures police are to use. These materials instruct the officer to assist the victim, to inform her of legal alternatives she can pursue, and to refer her to available programs (International Association of Chiefs of Police Inc. 1976a:1-5).

c. Prosecutors and the Courts

Court proceedings take time but during the wait for the trial the woman might have to remain in the same home with the abusing man. The woman can be further confused by the jurisdictions of courts and their proceedings. Apparently,
actions can be taken in both the criminal and civil court (Eisenberg, 1975:146-147). Standards set by prosecutors for acceptance of a case for trial can be so restrictive that wife abuse cases rarely qualify (Martin, 1976:110, 114; Eisenberg, 1975:158; Field and Field, 1973:225).

The attrition rate in domestic violence cases is unbelievable. In 1972, for instance, there were 4,900 assaults of this kind . . . [in Detroit] which had survived the screening process long enough to at least have a request for a warrant prepared and the complainant referred to the assault and battery squad. Through the process of conciliation, complaint, harassment and prosecutor discretion fewer than 300 of these cases were ultimately tried by a court of law. In most of those the courts used the judicial process to attempt to conciliate rather than adjudicate (Bannon, 1975:3).

Judges sometimes fail to decree temporary restraining orders (Warren, 1977:15; Fassberg et al., 1977:21) and fail to impose severe penalties (Eisenberg, 1975:159; Fleming as cited by Pennsylvania Commission for Women, 1976:13; Goldstein, in Gingold, 1976:52; Martin, 1976:115, 116). The judges might not want to send a man supporting a family to jail (Murray, as cited by Gingold, 1976:94). Even when the home or apartment is owned by
the woman alone, some judges still refuse to issue restraining orders keeping the husband away from the premises (Warren, 1977:15).

To dramatize the problems with the police and the court, a coalition of New York-based legal organizations filed a class action lawsuit in the Manhattan Supreme Court on December 8, 1976 to enforce the legal obligations of the Police and Family Court. The complaint charged that the New York police "unlawfully refuse to arrest men who beat their wives..." It further alleged that "...administrative employees of the Family Court unlawfully refuse to allow battered women to see judges to ask for Orders of Protection" (Lawsuit to Protect Battered Wives, 1976:1).

The complaint states:

Despite the widespread existence of this problem [wife assault], defendant police officers and court officials either deny the existence, prevalence and seriousness of violence against married women, or they treat it as a private privilege of marital discipline, rooted in the view that women are the property
of their husbands and that the state should not interfere. The police refuse to arrest violent husbands or give other needed aid and protection to plaintiff victims. While the Family Court was enacted to give practical advice to battered wives (who do not have lawyers to assist them) the Court personnel in fact deny women access to Court. Each agency sends women to the other. Neither agency enforces the law. Plaintiffs are left remediless. The result is increased fear, injury or even death at the hands of their violent husbands (Response, 1977:6).

In other words, women have some legal options but so far the system appears to be dysfunctional.

3. Social Services

Battered women also turn to hospitals, social service agencies and mental health clinics for services. In some cases, these facilities fail to see or to deal with the problem (Martin 1976:117-147; Pizzey 1974:91-110; Nichols 1976:27-32; Gelles 1976:13). Some physicians are only concerned with the medical problem (Martin primarily quotes Eisenberg 1976:128; Eisenberg, 1977:155) and women can be treated repeatedly only to be sent home to the same situation (Pizzey, 1974:10, 102, 106, 113; Martin, 1976:128).
Social service agencies may not address the protection needs of the women. Nichols contends that while physical abuse was a common complaint in many cases involving marital counseling, this was overlooked or ignored by the counselors (1976:27). The caseworkers often supported the belief that the wife encouraged or provoked the abusive treatment (Nichols, 1976:27). The services offered by some counseling agencies generally consist of reconciliation counseling: sending the women home to work things out (Nichols, 1976:27-32; Martin, 1976:119-147; Pizzey, 1974:91-110; Patterson, 1977d).

Sometimes obtaining necessary help is delayed by regulations. For instance, women are eligible for emergency financial assistance under welfare regulations but this assistance is not always readily available (Martin, 1976:130; Pizzey, 1974:100). In some cases, certain county welfare agencies may have specified time periods within which eligible persons must contact them in order to receive crisis assistance. Furthermore, women may be disqualified for continuing assistance if they do not give their address, have a separate
residence or if the husband has a source of income (Straus, 1977b:31, Fassberg et al., 1977:20; Martin, 1976:130). It is usually required that the husband be contacted when aid is given, and consequently the woman's county of residence is disclosed (Warren, 1977:17). According to provisions of the Social Security Act, however, a welfare board can honor a request from a woman to forego seeking support from her husband if to seek the support would be harmful to the interests or the physical well-being of the family or children (Warren, 1977:17). However, regulations have not been issued by the U.S. Department of Health, Education and Welfare for implementation of these provisions and currently Welfare Boards are not enforcing this provision (Warren, 1977).

To qualify for legal services, women must again meet the same income qualifications for welfare assistance and, therefore, might have the same problems discussed above. Another problem with free legal services is that the agencies are overloaded with clients (Fassberg et al., 1977:20). The Bergen County (New Jersey) Legal Aid reports that it receives an
average of 20 calls per month from battered women that it cannot handle (Fassberg et al., 1977:20).

Women are also sometimes ineligible for public housing if their husbands reside in the same area (Transition House, 1977).

Alternative services to those described above do not exist in many communities. Other than the police, there are few places a woman can call at any time of day to receive crisis intervention or information and referral services. Despite the need for protective housing, little is available. Existing shelters are often limited to victims of natural disasters or fires. Some can accommodate a family for a few days; others can only accommodate either the mother or the child but not both. Much of the existing emergency housing is filled to capacity and some programs have been facing zoning difficulties because of overcrowding.

The existing resources are fragmented and are not able to respond quickly to meet the emergency and protective needs of these women.
and their children. The services are not comprehensive, are not available on a 24-hour basis, and do not necessarily provide follow-up. In some cases, staffing is insufficient to provide for immediate aid. The staffs of the existing agencies are frequently not trained to deal with the problems of abused women and their children, and sometimes misinform the women as they pass through the maze of systems. Specific eligibility criteria often prevent agencies from being able to deliver services to the entire family.

The inadequacies of the existing resources help to create a barrier to women who wish to leave their abusive situations. In some cases, the women end the abuse on their own by committing their own acts of violence; (Martin, 1976:107, 114; McCormick, 1976:1-12). "Faced with a violent husband and no alternatives, the victim may attempt to equalize the situation herself by using a deadly weapon such as a gun or knife" (Robert Sage, as cited by Eisenberg, 1977:159).
II. CURRENT PROGRAM DEVELOPMENT ACTIVITY

Within the past few years, programs for battered women have been developed and many others are now in the planning stages. These vary from informal systems, which have emergency housing available at individual homes and some advocacy and information and referral services, to more comprehensive women's shelters and centers that provide the above services as well as crisis intervention, hotlines, supportive group and individual counseling, peer self-help groups, transportation, food, clothing, legal advocacy, and specialized drug and alcohol counseling. Coordination of community resources is an integral part of these programs. There are now about 20 battered women's centers nationwide.

Most of the centers have been established by feminist groups and are supported by voluntary contributions of money, labor and equipment. A few receive public money from federal, state or local grants, and from private foundations. The more established centers utilize paid staff and a building that serves as a shelter and a meeting place. The "How To" booklet written by the Women's Transitional Living Center of Orange, California (no date), Erin Pizzey's Scream Quietly or the Neighbours Will Hear (1974) and Del Martin's Battered Wives (1976) document the problems and process of establishing a women's center.
Typical of the philosophy and purpose of such centers is the statement made by the Women's Center South of Pittsburgh, Pennsylvania:

We have a place where a woman can come or call to find out what options and resources are available to her, a caring person to listen and to help sort out the issues in her life, a place where she can stay for a week while she works to find a new home or resolve her situation in the fashion she judges to be the best. Besides promoting these services for abused women we have classes, spontaneous celebrations, a 24-hour phone line, bulletin boards full of information and a caring environment. We have found that having a women's center rather than just a women's shelter has been very productive for the women who have come to us in crisis (Womens Center South, 1977:2).

Some programs have extended their services beyond the women's center. The Chiswick Women's Aid Project in London, England not only has a crisis women's shelter/center facility but now also has "community houses." These are long-term living arrangements beyond the crisis situation. It was found that some families needed to live together in a communal type situation before they could live on their own. About 20 such houses exist in London and elsewhere in England. In addition, the program has developed a "refuge for men." The house offers a "sanctuary" and meeting place for men who have problems with violence. Therapy sessions are available to both residents and non-residents. Finally, a "boys' house" has been created. These boys were frequently beaten and were disturbed. It was noted that "living with their mothers in the refuge meant the adoption of unnatural roles which impeded the normal growth of their awareness as
adults" (Chiswick Women's Aid, undated). At the home, the boys are taught various skills and experience a one-to-one therapy setting.

Other programs have more aggressively pursued advocacy within the legal system. For example, in addition to coordinating services (including counseling, transportation, shelter, emergency food, legal aid, public relief and employment), the Victim Witness Advocate (VWA) Program of Pima County, Arizona, participates in a "unique judicial process," the Pre-Trial Release Program (Lowenberg, 1976:3). In this program, every criminal defendant eligible for release must be interviewed and the findings and recommendations are shared with the initial appearance judge. After interviewing the defendant in cases of wife abuse, a VWA counselor is contacted. This counselor then contacts the complainant to verify certain socioeconomic information and asks her what conditions of release she would want ordered for the defendant. This information is given to the judge. "Judges have been receptive to the wishes of battered women and usually complied with the suggested conditions of release" (Lowenberg, 1976:3). This program keeps the woman appraised of the status of her case, informs her of the date, time and place of the trial, and can escort her to court as well as arrange for day care for her children if this is needed.
Another program in Milwaukee made use of an "ordered in" conference with the perpetrator, the woman and the District Attorney (Schudson, 1977:1). The "order in" was generally used for first offenders. The men were advised of their Miranda rights. Because of personal reasons, such as concern for job, family and/or reputation, most men agreed not to commit further abuse. This agreement was enforced in several ways. For instance, if the abuse involved alcoholism, the man would be required to participate in a treatment program or face prosecution. The incident was kept confidential but also was "held open." A recurrence could result in "charges of two counts of battery, arrest at home or work, and advice to the court that the man already had been given an opportunity at informal probation" (Schudson, 1977:1). The District Attorney remains in contact with the woman during this time. Contact and coordination with other community groups and the court was maintained. The woman was provided assistance throughout the trial period and was provided 24-hour protection while waiting for the trial if this was needed.

All of the above programs, however, share a serious problem: lack of funding. Many of the programs are minimal because of insufficient funds. As previously stated, many of the groups depend on voluntary contributions. While some public funds have been provided through federal demonstration grants, the programs face cuts or complete dissolution as these demonstration funds expire as was the case with the
Milwaukee program described above. Fund raising, public education, and needs assessment are by necessity major activities for the sponsoring groups in each community.
III. RECOMMENDATIONS FOR PROGRAM DEVELOPMENT

The following descriptions represent illustrations of components of a comprehensive model program for abused women and their families. Most communities already have some service components, which can be integrated with new components to form a comprehensive program for battered women.

A. Purpose of Program and Objectives

Goal:
The major goal of a comprehensive program for abused women is to prevent the recurrence of family-related violence through the development of differentiated services to meet the individual needs of these women and their children.

Program Objectives:
Some of the general objectives a comprehensive program must address are:

1) to identify women suffering from physical abuse, including those who have not come to the attention of traditional mental health, social service and law enforcement agencies;

2) to provide speedy response and crisis intervention services, including protection for battered women;

3) to provide a setting for battered women away from the perpetrator, where appropriate, that allows them to regain their physical and emotional strength, to analyze their situations and to develop alternative plans for themselves and their families;

4) to provide for a variety of services available upon request to enable women to develop and carry out their long-range plans;
5) to increase the coordination among community service system components;

6) to provide case management and follow-up procedures to insure accountability;

7) to incorporate clients into the administration of the program and the provision of services as paid staff members, as representatives on boards and committees, and as volunteers;

8) to increase public awareness of the problems associated with family violence, focusing on key professional groups such as social workers, the police, medical/hospital staff, court personnel, lawyers, and so on;

9) to develop training packages and to conduct specific training sessions in the professional and lay community; and

10) to develop ongoing procedures for assessing the needs of women in crisis as well as available resources in the community, and to incorporate such findings into program planning and development.

More specific and measurable objectives should be developed depending on the particular program created.

B. General Policies

Programs which are developed should be compatible with the following policies:

1. A program for battered women must address the women's special needs. Women who are in abusive situations need a program to which they can turn at any time. Women must know they will not be turned away.
2. The program must provide a warm and supportive environment that will enable the women to feel safe and allow them to regain their emotional stability.

3. The services provided by the program must be able to help women through a crisis period, which may last a month or more, and then extend to long-term or after-care planning. Unless services are available beyond the crisis period, many women might return to the same abusive situation. There must be continuity and sufficient follow-up to ensure that the services identified actually reach the client. In some cases, this will involve directly taking the clients through each phase of the referral process.

4. Services provided to women must be based on their assessment of their individual needs. The services must address a variety of goals. Some women will want to reconcile with their spouse/companion; some may want a trial separation; others may prefer a permanent separation. Women must have input into the development of their individual service plans. The emphasis of the program is to offer viable options that meet individual needs, not prescribed predetermined needs.
5. Opportunities for self-direction and participation in decision making must be provided throughout the program. These can include but need not be limited to participation in administrative aspects of the program (the program can operate on a policy of self-governance); employment as paid staff members in specific program components; representation on boards and committees; and involvement in volunteer activities.

6. The programs must be prepared to offer services either directly or through referral to the children of the abused women. Identification and referral of any child suspected of being a victim of parental abuse is of primary importance. In New Jersey, state law requires the reporting of all suspected abused children (the Child Abuse Hot Line is 800-792-8610). In developing the service plan for each child, the maintenance of the child's regular activities and routine should be considered.

7. The program should establish an agreement with another community agency or agencies that can act as a referral resource for the men identified as being in need of services. The program should make an effort to refer the batterer to appropriate agencies as needs are recognized. Especially but
not solely when a couple decides to reconcile, those services needed to support this effort must be provided.

8. The proposed program must develop policies and procedures protecting the confidentiality of information and records. All information identifying clients and their families must be kept confidential and should only be released with written consent from the client. Any persons evaluating the program must abide by the confidentiality standards.

9. The program must provide adequate means for case review and management to ensure that women and their families are not lost in the shuffle between agencies and that the specified plan based upon the identified needs of the family is followed by the agencies involved. The program must be accountable to its clients.

10. The program components should create a comprehensive, integrated, and coordinated system which stresses immediate response, 24-hour accessibility, self-help, a variety of options, continuity and follow-up.
C. **Organizational Structure**

During the process of developing new programs, communities should identify and assess existing resources. The service system that is developed must ensure coordination of all components providing direct services as well as those units to which referrals are made. Examples of potential structures which may be developed include:

1. **Consortiums** - This structure consists of a variety of agencies that join together to create a system to meet the needs of battered women. Certain responsibilities will be identified with particular groups and/or agencies and all the participating agencies will meet periodically to discuss the needs, program operation and procedures.

2. **Center-based** - In this structure, most of the services are provided directly at the center, with the center acting as the main coordinating body with other community agencies.

3. **Combination** - Many combinations of center-based and consortium services can prove workable.
D. Service Components

Some communities already have resources providing some of the services. In these cases, the new components can be built upon these existing systems. The descriptions of services in general are broken down into five sections:

1. Crisis Intervention Services
2. On-going Services
3. Children's Services
4. Program Development Support
5. Preventive Services

Alternative delivery methods are possible and reflect a variety of issues.

1. Crisis Intervention Services

The following set of components focus on protection and easing the family through the crisis situation. These components must be available on a 24-hour basis and must be immediately accessible.

a. Twenty-Four-Hour Hot Line

Because life might be at stake, the program must provide for 24-hour, seven-day-a-week, access and response and the immediate coordination of available resources. This can be provided through a 24-hour hot line, which should perform the following functions:
. Screen all calls;
. Provide crisis counseling over the phone as needed;
. Maintain a central index of resources and refer callers to appropriate community resources as needed;
. Dispatch a crisis team or lay advocate in emergency situations;
. Provide supportive counseling;
. Maintain records on calls; and
. Collect statistics for program development and evaluation.

Hot lines can be staffed by either paid or volunteer personnel. Generally it is difficult to keep volunteer staff on for long periods; therefore, if a volunteer program is used, it must be well coordinated and have incentives to keep the volunteers.

Hot lines already exist in a number of communities. The coordination of program components with these hot lines or with the police emergency number should be considered in order to avoid confusion in the community by a proliferation of emergency numbers. Regardless of whether the hot line uses an existing or a new number, the number must receive high visibility and widespread exposure among the public at-large. This can be done through
billboards, newspaper articles and ads, restroom stickers, radio and television spot announcements, posters, and speakers' bureaus.

All staff, whether paid or volunteer, must receive training in crisis intervention, communications, family violence, and, most importantly, the problems and concerns of battered women. It would be preferable if the persons staffing the phones had had prior direct experience with the problem.

To determine the number of staff needed, some estimate of the potential number of daily calls must be made.

b. Twenty-Four-Hour Crisis Intervention Unit

Women might need to leave the home in order to obtain medical services or to go to a temporary setting. Some will request immediate assistance to halt an ongoing assault. A crisis intervention unit available on a 24-hour basis and which can respond immediately should provide:

- An evaluation of the condition of the home and family;
- Crisis counseling on the scene, which includes outlining the rights and responsibilities of both partners in the dispute.
and options they have available to them, such as legal actions and use of community resources;

- Immediate assistance to parties who want to leave the home, including transportation to a medical facility or doctor or to a requested social services agency including, among others, a shelter, women's center, welfare agency, and legal aid;

- Referral to appropriate community resources; and

- Follow-up service with the couple within 24-hours or at a mutually agreed upon time, whether or not the couple remains together.

There are a number of resources that could be drawn upon to provide this service on a 24-hour basis. Some mental health centers have units available to go out at all hours. The Division of Youth and Family Services responds where child abuse is suspected or found.

Because domestic violence is a crime and involves great danger, police intervention and protection is needed. A crisis intervention unit might consist of two-person teams of plainclothes police officers and women's advocates or social workers.

Team members could go out together or the police could call the second member on the
scene after a preliminary investigation. The advocates would provide support, transportation and advocacy services through the initial stages of intervention. If this group of advocates is large enough, it might continue to carry the woman's case until the family developed long-range plans. It might also follow up on the case. It would be preferable if the woman's advocate or second member of the crisis team were women who had prior direct experience with the problem of abuse. Whether existing community resources are used or a new resource is developed, members of a crisis intervention unit must be trained to handle family disputes and must be aware of all alternative options available in the community. In developing this component it is important that program staff investigate the legal implications of their intervention, i.e., being called as an expert witness in court, and so on.

c. Crisis Intervention Housing (first stage)
Immediate crisis housing provides a protected place to stay away from the perpetrators, where the women and their children can regain their physical and emotional strength. It
also provides a supportive setting where options can be considered and family plans developed. While housing may not be the primary service of a battered women's program, it is a necessary service that can act as a catalyst or enable access to the other needed services.

The housing must be available on a 24-hour basis and must be able to accommodate families of various sizes. Housing must meet minimum state standards (safety, heat, sanitation, fire and so on). Housing can be provided through a variety of mechanisms including:

- A family shelter;
- Special apartments secured for this purpose;
- Emergency funds (given to women to use for motel or hotel accommodations); and
- Volunteer homes or paid boarding homes.

The decision on which type of delivery model a community will use must include consideration of available funds and the extent of need, the amount of security and the variety of problems the women face, and alternative sources of service delivery.
Those choosing the design should be sensitive to the fact that in many cases an abused woman feels alienated from a world which has generally been insensitive to her problems. A group living experience can help reduce this sense of isolation. Most existing shelters operate on a cooperative basis where the women living at the facility jointly decide on policies and procedures in the shelter and share all the chores involved in its operation. This process enables the women to continue to take responsibility for their lives.

Whatever type of housing is provided, a sound security system must be developed. This can include:

- confidentiality of addresses;
- specific procedures for visits;
- installation of door and window locks and burglar alarms;
- security guards;
- frequent police patrol; and
- the provision of self defense courses.

The length of time a woman spends in the first-stage housing can vary. Some programs
limit the stay to three days. Others allow residents to stay as long as six months and to come and go as needed. Because this is designed as a crisis intervention service, it should be open to women as they need it. However, a limit will have to be placed on the length of stay to prevent the facility from losing its capacity to handle new crises. An arbitrary limit can be set, such as three to five weeks, and as the program proceeds the limit can be adjusted to the realistic needs experienced by the community. Under Title XX of the Social Security Act, funding for six months is the federally determined maximum limit for shelter care as part of a larger service program. Stays beyond this period will require other sources of funding.

In each case where immediate crises housing is needed, contact should be made with the appropriate County Welfare Agency (CWA). It is the responsibility of this agency to ensure that an eligible person be provided emergency shelter where needed. It is important that coordination with the County Welfare Agency (CWA) regarding the provision of this service be established and maintained.
d. Crisis Counseling

Once a woman has secured crisis housing and medical care, she will need intensive emotional support. For the first few days, she will need rest to begin healing physically and emotionally. She will probably talk extensively about her violent experience. Skilled counseling staff should be available both day and night. Counselors/caseworkers must receive training in order to provide these families with effective assistance.

e. Crisis Financial Assistance

Because they will be leaving home in the midst of a crisis, a woman and her children might not have time to gather money, documents, clothing or food. Emergency assistance can provide immediate cash to pay for security for apartments, transportation, food, clothing, and direct financial support for a woman and her children until more permanent arrangements can be made to relieve the situation.

In each case where emergency financial assistance is needed, contact with the County Welfare Agency is important. It is the responsibility of this agency to provide such
assistance. However since the assistance may be limited and to cover those situations when there is a delay in obtaining CWA aid or for emergencies that occur on weekends or during the night, the program should also try to maintain a small cash emergency fund. This fund should not be used to replace any form of regular financial assistance or income. Since Title XX Social Security funds cannot be used for the emergency cash assistance, other sources of funding should be sought.

Arrangements can be made with families for repayment of these funds if possible.

f. Crisis Transportation

Transportation services may be needed to:

. permit a woman and her children to leave an abusive home immediately; and

. get the family either to alternative living arrangements and/or to a medical facility.

Transportation can be provided through a van that is available at all hours, through volunteers or through the provision of emergency assistance funds for taxi or bus service. Volunteers with a van would be most useful because these resources can immediately respond to calls for help.
g. **Crisis Medical Services**

Since some families will need immediate medical assistance, arrangements must be worked out with local medical facilities to provide for:

- immediate examination of women and children to avoid the additional trauma of having to wait in an emergency room after a crisis situation;
- admission for medical treatment; and
- appropriate reporting of medical findings.

The public will have to be made aware of those hospitals or doctors that are cooperating with the program so women can go there for assistance.

h. **Crisis Day Care**

A mother might need to leave her children for a few hours while she makes arrangements for housing, goes to court, seeks employment, and so on. Emergency child care should be available on a 24-hour basis. Because this child care service will be temporary and generally not last longer than a few days, child care parents must be recruited and arrangements worked out with centers or within the program itself to permit flexible scheduling. In
planning this day care program, it must be kept in mind that children of all ages may require this service. Family day care might be the preferable choice since most day care centers are not open on a 24-hour basis and might not be able to accommodate a stream of children with varied needs and short attendance periods. Drop-in day care centers - a new concept in day care - may also be appropriate when they are available and open. Child care can also be provided by child care workers who are part of a women's center project. Parents can also be utilized to provide babysitting services. However, parents who have a history of abusing their children must be appropriately supervised if they provide child care. Where appropriate, the day care programs must meet minimum state licensing standards and must comply with federal standards.

i. **Immediate Police Assistance**

Since the police play an integral part in a program for battered women a liaison mechanism must be developed which would provide:

- immediate consultation with police regarding appropriate action on the scene and referral sources;
training on the causes of abuse and on treatment methods; and

access to police alerting them to serious situations that require immediate response, frequent patrolling, and possible follow-up.

j. Crisis Legal Consultation

Women might need to know their legal options during a crisis situation, such as whether or not to press criminal charges; to request securement and enforcement of a protective order; to obtain an injunction; to file for a legal separation or a divorce; and/or to obtain emergency custody of the children. They also should be advised of the possibility that charges such as abandonment, desertion or kidnapping may be brought against them by their spouse/companion. These charges would be settled in a court of law. Legal assistance should be available whenever it is needed. Legal assistance can be provided by voluntary on-call rotating attorneys, legal aid or paid part-time legal consultants.

2. On-going Services

The following services are needed to assist the woman and her children beyond the immediate crisis.
a. **Information, Referral and Advocacy Services**

Many women lack information about resources yet their needs can involve financial issues, divorce and custody matters and health problems. Information, referral and advocacy services can enable women to make better-informed choices about their futures.

These services should include:

- developing a comprehensive resource profile of available services to battered women;
- working out referral procedures with cooperating agencies to ensure fast access by clients;
- accessibility to clients on a 24-hour basis;
- assisting women directly in obtaining services by contacting agencies, providing transportation, day care or financial assistance;
- maintaining an updated needs assessment for services for program planning;
- publishing announcements and directories available to the public and other relevant agencies; and
- gathering information from clients on their needs in order to refer the clients to the appropriate agencies.

Women should be made aware of these components at the initial intervention and should have access at all times.
Existing councils of social agencies and United Fund agencies may have county directories of services available for distribution. These should be evaluated, modified and updated to include referral systems for women in need. The list of services must be kept current and must be as comprehensive as possible. Resources located out of the community might also be included, for some women might be transient or might desire to relocate for their own protection.

b. **Self-Help Groups**

Many women feel isolated and have had negative experiences with traditional social service agencies. Experience with existing programs indicates that peer counseling helps overcome these problems more quickly and enables women to get down to the business of their problems. The group can provide:

- a forum to discuss experiences and options for action and resources; and
- support and companionship.

The membership of the group would consist of women who have experienced abuse. Other professional staff might participate during the initial organizational stages to assist the group with specific problems or issues.
c. **Counseling: Short and Long-Term, Marital**

The psychological effects of battering are frequently more devastating than the actual physical abuse. Short-term and long-term counseling and therapy should be available on a group or individual basis. Marital counseling will be needed for both women and men who decide to stay together. Referral to psychiatric and psychological counseling should be provided when requested.

These services can be provided directly or through referral to existing community resources.

d. **Transitional housing (second stage)**

Developing a plan for second stage housing is crucial to providing effective services to battered women. Some women might choose to return to their homes. Others might decide not to return. The women not returning to their homes might be facing the prospect of living on their own for the first time, which is an awesome prospect. Continuity of care and support are crucial at this point if the woman is to make a successful transition from the immediate crisis stage to a new life.
style. In some cases, two women and their families can be encouraged to pool their resources, secure an apartment and thus provide each other with the needed financial and emotional support.

The plans for housing in this transitional stage will vary with the individual. However, in each case it is important to recognize that providing immediate crisis services is a part of the overall service package. Planning for and providing the needed services which will assist a woman and her children to make a successful transition from one lifestyle to another if she desires is the other major part of the total service package.

e. Financial Planning

1. Income Maintenance:

Some women might require financial assistance beyond the crisis stage. A good working relationship must be created with the County Welfare Agency. Women need to understand clearly the procedures for obtaining assistance. The workers at the welfare board should be able to respond quickly and appropriately.
Matters of confidentiality, protection, and support need to be clarified so that women are not required to disclose their new locations in order to receive financial aid.

2. Training and Employment
As stated, some women fail to leave an abusive situation because of their economic dependence on their men. A program for battered women should provide, either directly or through referral to community groups, job training and employment opportunities. Both public agencies and private industry can be approached for assistance in this area.

f. Food/Meals
Depending upon the program design, provision of meals can be an integral part of the service. Planning and preparing nutritious meals might be an important shared experience for those programs which are center-based. Participating in this aspect of the programs' activities can heighten a sense of community, shared support, and responsibility on the
part of the women and older children. Experiencing such feelings of community and responsibility are important for the battered woman who has been isolated, alienated and made to feel inadequate.

**g. Medical Services**

Medical services may be required beyond the crisis stage. Access to doctors and hospitals should be worked out along with potential funding arrangements. Women eligible for AFDC assistance are also eligible for Medicaid services. The center should provide a means whereby those women who are neither eligible for Medicaid nor covered by insurance can receive medical care.

**h. Long-Term Child Care Services**

Child care might be needed beyond the crisis period to provide:

- a place for children to stay while the mother is actively seeking to solve her problems;
- a long-term care situation if the mother does become fully employed;
- a supportive environment for the child(ren) where he/she can have positive experiences with adults, observe different patterns of adult and child behavior, and have any emotional, educational, nutritional, health, recreational and social needs met, and
a setting where parents can learn adequate parenting skills.

Child care can be provided through day care centers, after-school care programs or family day care homes. In planning the child care services, it must be kept in mind that children of all ages might require this service. The programs must meet minimum state licensing standards where appropriate and must comply with federal standards if they are to receive federal funds. They should be able to accommodate parents working at different hours. Staffs for the programs must meet state licensing standards and, where possible, should include both men and women to expose children to positive experiences with men.

i. On-going Police Assistance

See section i under crisis services. In order to insure effective police assistance each police district could utilize an advocate (disassociated from police personnel) who will receive reports on all attempts to sign complaints. Such an advocate could bring this information to the police and to other relevant agencies and groups.
j. **On-going Legal Services**

See section j under crisis services. Arrangements will have to be made to ensure that ongoing legal assistance is provided beyond the crisis stage.

k. **Parent Education**

Often the parents in abusive families have learned to react to stress situations with violence. Many of the parents who abuse and neglect their children are unprepared for parenthood. Parents can learn better parenting skills and improve their competence through parent development activities. Through these activities parents can also receive some of the support previously provided by extended family members. Opportunities for direct parent-child interaction, with support, should be provided in the parent development activities.

The program should teach the parents about the growth of the child and should include techniques on how to show warmth and support, how to set limits for the child and how to discipline the child in a positive manner. It should try to help parents understand
familial interaction and how problems affect relationships between family members.

Parent development activities can include workshops, seminars, trips, and a lending library.

1. Alcohol and Drug Counseling
Families where both partners agree to reconciliation but suffer from chronic problems of alcohol and drug abuse will need to be referred for appropriate counseling. Referral procedures and agreements to provide services should be worked out with appropriate state, county and local community agencies.

m. Family Planning
For those women who request it, appropriate family planning services should be provided.

3. Children's Services:
Specific services which might be needed by children and which can be provided either directly or through referral to other agencies include:

   . medical diagnosis/treatment;
   . psychological/psychiatric diagnosis and treatment;
counseling;
tutoring, remedial education;
day care (see descriptions section 1 and section 2h);
foster care; and
recreation.

Parents must be included in any planning for children.

4. **Program Support Services**

In order to maintain a sound program, certain supportive elements must be created.

a. **Public Awareness: Community Education**

In order to have a successful program, the public must be alerted to the problem of wife battering and to the availability of resources. Each program must include a coordinated and timely plan for public education. This plan should include:

- the development of pamphlets, posters, and brochures;
- public speaking at community centers, schools, day care centers, churches;
- press releases; and
- training sessions with appropriate agencies including police departments, hospitals, and social service agencies.
b. Outreach, Follow-Through and Case Management

Since many women are not aware of all program options, have had negative experiences with existing programs in the past and are frightened to act, an outreach program component is needed. Outreach can be provided through aggressive public awareness campaigns and outposting of staff at convenient community locations. A mechanism will be needed to ensure that women who enter the program receive the assistance they requested. Unless this is carefully planned and carried out, women will be disillusioned with program promises and might not seek further help.

c. Training

A well-organized training plan will be needed as all staff must become familiar with specific tasks they are to perform as well as the overall context of the program. Training must include pre-service orientation and continuous training. Training manuals can be developed outlining requirements and procedures. A variety of training techniques can be used, including didactic lectures, role playing, and guest speakers in a seminar setting. Training should be provided for all groups participating in the service systems.
d. **Coordination Mechanism**

A comprehensive program for battered women must ensure that all components are functioning in an integrated manner. Internal coordination mechanisms must be developed. In addition, external coordinating mechanisms might be needed. These can include the creation of a coordinating committee. Two types of committees can be created: 1) one that includes only participating service providers, or 2) a large committee that includes citizen representatives as well as representatives from other agencies not participating directly in the system.

These committees would consider matters of overall policy, operation of the system and future planning, and would ensure that:

- all relevant agencies and persons know their responsibilities;
- all agencies and persons understand and adhere to methods, standards and procedures;
- public information campaigns are initiated; and
- treatment resources are contacted and arrangements made so that a wide variety of treatment modes are available.
e. Monitoring and Evaluation

A program for battered women must provide a system for monitoring program input and evaluating program impact. Monitoring involves a tracking system for such areas as time, services, and money which go into the program. Through such a system, the agency can be accountable to its clients for services provided.

In addition, an evaluation procedure can measure the effectiveness, quality and/or efficiency of the management and program activities against the program objectives and standards. Evaluation can involve one-time, continuing or special studies. Components should include defined and documented methodology, criteria against which actions or results are to be measured, efficient procedures for collecting data, established responsibility for conducting the evaluation and feedback to other components. A projection of how information resulting from the evaluation will be used should be specified.

Special reviews can be conducted by the child welfare agency or by an outside agency.
However, an ongoing evaluation should be administered by the agency itself with safeguards built in to assure independence of assessments.

5. Preventive Services

Some preventive and long-range measures that could be taken to decrease potential incidents of violence between intimates are listed below. The cooperation and support of the community will be needed to accomplish these measures. While the needs of those families immediately facing the problems of spousal abuse must be addressed, preventive efforts must begin simultaneously given the serious and cyclical nature of the problems of familial abuse.

a. Research and Evaluation

More efforts must be placed into studying the magnitude of this problem, specifying causal factors and identifying successful programs and their components. Some of the speculated causes might involve massive social and cultural change. These must be addressed.
b. Public Awareness Campaigns and Training

More creative methods must be developed to alert the public to the rise in domestic violence and to offer alternative methods of conflict resolution. Resources such as drop-in centers to assist families as well as other useful resources must be developed and advertised. Staff in agencies who may come into contact with battered women must be trained to assess the problem and to offer realistic assistance and referral to services. Training programs for medical students, hospital staff, police, court personnel and social workers should be expanded to include sections on family violence and the problems of battered women and their children.

c. Programs in the School System

Courses should be developed and offered to all students which focus on roles of partners in conjugal relationships, familial conflict and alternative methods of conflict resolution, parent-child relationships, and the availability and use of social services and family law. Courses dealing with alcohol and drug abuse should also be expanded.
d. **Law Revision**

New laws need to be created or old laws amended to provide protection and relief to individuals who suffer abuse in familial situations. The primary areas requiring revision or new legislation include victim assistance, rape and matrimony.

e. **Employment Opportunities and Adequate Income**

The availability of employment at adequate income levels will allow more women the opportunity to leave violent domestic situations. Training programs and more jobs, part time and full-time, must be provided through governmental and private resources.
CONCLUSION

This prepared guide is only a beginning in the process of developing programs for battered women and their children. As stated, much information is based on anecdotal accounts. More sophisticated needs assessments and resource analyses need to be conducted. Evaluations of programs which are developed must be conducted and analyzed to determine which services are truly needed and which delivery methods get these services to the clients when they are wanted. Through the programs we may also learn more about the abusive man and may be able to suggest more specific services directed at his needs. We would like to receive comments on this guide, and appreciate all the cooperation we have received in its preparation.
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