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Cultural Issues Affecting Domestic Violence Service Utilization in Ethnic and Hard to Reach Populations

Project number 98-WT-VX-0025

Final Project Report

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Public Health – Seattle & King County

Sharyne Shiu-Thornton, MA, University of Washington

Participating Agencies
Consejo Counseling Services
East Cherry YWCA
Northwest Network of Bisexual, Trans and Lesbian Survivors of Abuse (formerly Advocates for Abused and Battered Lesbians)
Refugee Women’s Alliance
Seattle Indian Health Board
City of Seattle Human Services Department, Office of Domestic Violence and Sexual Assault Prevention

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Acknowledgments:

We would like to extend our gratitude to a number of people without whom this research would not have been possible:

To the women who participated in interviews and focus groups, your stories are the most powerful tool we have to make changes for future survivors. Thank you for being candid and honest and for opening yourselves up so that we could learn.

To our partners at Consejo, East Cherry YWCA, Northwest Network, ReWA and SIHB, thank you for all of your time and hard work. This project would not have existed without your contributions of time and energy.

To the members of our Project Advisory Group, thank you for participating in designing the project, and thank you in advance for working and struggling to implement these findings so that we can protect and support future survivors who need help.

To Alison Eisinger, Sandy Ciske, Ellie Rose, Scott Jones, Evelyn Chapman and Connie Burke we are extremely thankful for your careful readings of this manuscript and for your support throughout the project.
# TABLE OF CONTENTS

INTRODUCTION ...................................................................................................... 2  
METHODS ............................................................................................................. 10  
RESEARCH FINDINGS BY CULTURAL GROUP ..................................................... 19  
AFRICAN AMERICAN ............................................................................................ 21  
AMHARIC-SPEAKING ............................................................................................ 37  
CAMBODIAN ........................................................................................................ 49  
FILIPINA ............................................................................................................... 62  
LATINA .................................................................................................................. 72  
LESBIAN, BISEXUAL AND TRANS ....................................................................... 81  
NATIVE AMERICAN .............................................................................................. 98  
RUSSIAN-SPEAKING ............................................................................................ 118  
VIETNAMESE ....................................................................................................... 137  
DEVELOPMENT OF THE PARTNERSHIP: FINDINGS FROM THE PROCESS EVALUATION ........................................................................................................... 152  
IMPLICATIONS FOR THE JUSTICE SYSTEM ....................................................... 162  
LIMITATIONS OF THE RESEARCH ..................................................................... 167  
RECOMMENDATIONS ........................................................................................... 169  
REFERENCES ....................................................................................................... 179  
APPENDICES ....................................................................................................... 183
INTRODUCTION

Background

This project gathered information on 1) access to and satisfaction with domestic violence (DV) services for certain women who are experiencing DV in Seattle (King County), Washington, and 2) the cultural experience of DV for specific ethnic groups and the lesbian/bisexual/trans (LBT) community in Seattle. The research was conducted in close partnership with the following community-based agencies: Consejo Counseling Services, East Cherry YWCA, the Northwest Network of Bisexual, Trans and Lesbian Survivors of Abuse (formerly AABL), Refugee Women’s Alliance (ReWA), and the Seattle Indian Health Board. All provide services to victims/survivors of DV. Partnership among the Health Department and University researchers, advocates and agencies was essential to the success of this project and has ensured that the findings are relevant and usable.

Qualitative data were collected through focus groups and one-on-one interviews with women either currently or formerly in DV situations from the following communities: African American, Native American Amharic-speaking (Ethiopian), Cambodian, Filipina, Latina, LBT community, Russian-speaking (former Soviet bloc nationals), and Vietnamese.

This report describes our project, the process for developing and maintaining the research partnership, our methods, findings, and recommendations as well as some of the strengths and challenges of the model we followed. We also address lessons learned about conducting culturally appropriate research on DV.

Origin of the Project

The City’s Domestic Violence Council (DVC) has had an interest in understanding the prevalence of domestic violence in Seattle and also the context in which violence takes place. A priority raised through a community stakeholder process was to gain a better understanding of the experiences of ethnic minority communities with domestic violence. The Health Department, as a member of the DVC, was asked to take the lead role in identifying potential sources of funding to support this work. In 1998, NIJ solicited proposals for researchers to partner with community-based agencies to advance our knowledge of domestic violence issues. Representatives from the Health Department attended the July 1998 Domestic Violence Coalition meeting to ask members if they were interested in partnering with the Health Department. Several

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1 We use trans as a term that encompasses a wide range of gender and sexual identities. A person who is trans chooses ways of presenting themselves that are different from what is expected of the gender they have been assigned. For example, a person who is assigned a role of "boy" by a doctor at birth but experiences herself as a woman may identify as trans whether or not she uses medical procedures to change her body.
agencies volunteered to participate in a qualitative research project that would advance our understanding of DV in Seattle's ethnic communities and among lesbians. They are our partners in this project. Since January of 1999, agency staff have worked with the Health Department/University of Washington researchers to design the research, collect the data, analyze and write the findings.

**Literature Review**

For the last decade, DV has been regarded as a leading threat to the health and well-being of adult women in the U.S. (U.S.).\(^1\) Violence by intimate partners accounts for 29% of all violence against women. It is estimated that 39% of female emergency department visits are due to DV and more than 30% of female murder victims are killed by their partners.\(^2\) Increased public attention has been accompanied by an expansion of research on the prevalence, predictors, dynamics, and consequences of intimate partner violence.\(^3\) DV has been documented in diverse populations and settings, suggesting that it is a pervasive problem affecting all ethnic and economic groups worldwide.\(^4,5\)

Local law enforcement data\(^6\) demonstrate that assaultive DV is a significant problem in Seattle and King County. In 1996 18 homicides, 82 rapes, 56 robberies, and 1,072 aggravated assaults were identified as DV offenses. These represent 26% of all homicides, 9% of all rapes, 2% of all robberies, and 27% of all aggravated assaults reported. Other DV offenses in Seattle and King County include 8,603 simple assaults and 1,528 violations of Protection/No Contact Orders. In 1997, violations of Protection/No Contact Orders almost doubled, to 3,025.

While there is debate in the literature over the relative importance of ethnicity, socioeconomic status, and culture as risk factors for experiencing DV,\(^4,7,8,9,10\) there is agreement that ethnicity and culture are significant influences on how women respond to abuse.\(^11,13,22,26,39\) Cultural factors such as language, degree of acculturation, religious beliefs and traditional help-seeking behavior substantially influence the way in which a woman who is abused by her partner will respond to the event. Additionally, financial resources, social support, availability of culturally appropriate help, and, for immigrant women, legal status and knowledge of their rights may all play a role. Despite assertions that ethnicity and culture influence women's response to DV, little is known about the experiences of DV in ethnic and LBT communities.\(^11,12,13,14,15\)

In recent years, federal health agencies such as the National Institutes of Health and the U.S. Public Health Service have called attention to the lack of understanding of the unique issues facing women of color who are victims of DV. There is growing recognition that understanding how various cultural communities perceive and respond to DV is essential for designing effective, culturally appropriate interventions.\(^5,13,16\)

In the following paragraphs, we review relevant literature concerning the unique circumstances and issues women of color and LBT people face when confronted with DV. Aside from a few notable exceptions\(^17,18,19,20\) there are few published studies that use a qualitative and in-depth approach to capture the particular experiences of women.
of color and LBT people with DV, and factors that influence their response. The research we reviewed relies on a variety of methods for understanding DV in these populations, including provider perceptions and experience, rigorous qualitative or quantitative assessment, and reviews that synthesize and extrapolate from literature across disciplines. Here we review the current literature relating to factors that influence response to DV for each cultural group included in the study.

**African Americans**

Several factors have been identified that limit the ability of African American women to seek services for DV or leave violent intimate relationships. These include racism, lack of economic resources, lack of availability of services, the perception that services are for white women, reluctance to involve police or others outside of the community, as well as fear of being regarded as disloyal to the African American community or of reinforcing stereotypes about race and violence.\(^{18,21,22,23,24}\)

Some researchers who have examined the cultural context of African American family violence have noted that social and environmental strains to which African American men are subjected have historically prevented them from fulfilling traditional male “provider and protector” roles. This role conflict may be a contributing factor to family violence. Furthermore, relationships in which status differences exist between men and women (for example, in educational level or in employment) have been related to risk for interpersonal violence; such differences often are found in African American pairings.\(^{24}\)

A potent tradition of relying on personal resources or inner strength among African American women may contribute to decisions regarding how and from whom women seek assistance. Neville and Pugh\(^{25}\) suggest that this cultural value is double-edged, emphasizing women’s personal capacity to cope with the effects of violence, but also deterring some women from disclosing abuse or seeking assistance. The significance of extended family among African Americans is an important potential resource for women experiencing DV, as such support may be more readily accessible than institutional resources such as shelters.\(^{24}\) At the same time, reluctance to threaten family cohesion might lead some women to avoid seeking outside help.

Both Campbell\(^{24}\) and Sleutel\(^{18}\) observe that African American women are more likely to resist physically against their batterers, which may be related both to greater lethality and less sympathetic responses from the police and legal systems. African immigrant women may also be unfamiliar with services and have limited social support networks.\(^{26}\) However, there is little published literature that specifically relates to African immigrant experiences with DV.

**Latinas**

Among Latinas, the ability to respond to a battering relationship may be influenced by language, economic status, cultural norms regarding male and female roles, stress and lack of social support among recent immigrants.\(^{27,28}\) The Catholic Church emphasizes that married couples should stay together, a strong religious value which influences
women's decision-making. The importance of family, and cultural expectations around women's roles as mothers and wives may make responding to abuse difficult. Additionally, the lack of culturally appropriate services for Latinas is a significant barrier. An analysis of help-seeking behavior in a sample of Latinas derived from a national probability sample found that the most significant predictor of seeking help was comfort with English language, referred to by the authors as "degree of acculturation.

Asians

Though diverse in country of origin, language, timing of immigration, history, and religion, many of the Asian populations living in the U.S. share similar cultural values that influence their response to DV. Several authors stress the value placed on family and cohesion of the family unit as an inhibitor to leaving an abusive relationship. Community and family disapproval of divorce may also be a significant factor. According to Rimonte, there is also a reluctance on the part of the Pacific Asian community to discuss publicly the issue. Other inhibitors include stigma associated with emotional problems and mental illness, and a belief that domestic problems are best addressed in the context of the family. However, cultural factors are only one aspect of woman’s response. Economic status and the ability to provide for children, English language ability, and immigration status are all significant factors. Bui and Morash discuss findings from an exploratory study of DV among Vietnamese immigrant women which found that response to abuse is influenced by economic and immigration status, traditional Vietnamese family values, and fear of discrimination. In a qualitative study of factors affecting communication with medical care providers regarding DV, Asian immigrant women said that they would feel comfortable disclosing abuse if providers asked in a sensitive manner.

American Indians/Alaska Natives

Little research exists that describes the issues American Indian women face in responding to DV. Some factors that have been identified as barriers to seeking service include lack of confidentiality due to small community size, loyalty to the tribe, a view of using outside providers as disloyal, and fear of desertion, social isolation and stigma. Of the few articles that address DV among American Indian women, the majority focus on reservation-based populations and do not consider the unique circumstances of those living in urban areas. Lack of culturally appropriate services may keep urban American Indian women from seeking help; Norton and Manson describe the difficulty of counseling urban Indian women in an office setting but found that home visits and a DV group attentive to cultural preferences were more successful.

Lesbian/Bisexual/Trans

Although there is a paucity of research on DV in LBT relationships, existing studies suggest that a primary barrier to seeking services is the heterosexual orientation – and homophobia – of mainstream DV shelters and law enforcement. In a convenience
sample, only slightly more than one-third of abused lesbians said they used a crisis line or police in response to physical violence. The most common reaction was to “tell someone she trusts” or “do nothing”\textsuperscript{42} Some have hypothesized that a significant barrier may be a reluctance on the part of a lesbian victim to acknowledge DV and seek help for fear that it challenges core beliefs that lesbian relationships are violence-free and egalitarian.\textsuperscript{43,44} Farley\textsuperscript{45} notes that same-sex DV may not be recognized by counselors and therapists which in turn may keep victims from recognizing their experiences as abuse. Further, he states that there is a lack of information and resources on same sex battering and the issue has been “ignored and unrecognized” both within the affected communities and without. Additionally, lesbian victims of DV may also fear losing the support of the community if they leave their abusive partners.\textsuperscript{46}

**Local Context**

**Purpose of the Project**

The goals of this research project were to:

- Assess access to and satisfaction with DV services among ethnic minority and LBT victims of DV in Seattle in a culturally competent manner that assures the quality and accuracy of our findings.

- Utilize a Participatory Action Research (PAR) approach to research by partnering with DV service providers, advocates and victims of DV to ensure that project findings inform service delivery for victim/survivors and that partners benefit from participating in the research project.

- Use findings to inform a coordinated, culturally relevant response to victim/survivors who are experiencing DV, and to improve Seattle’s DV system.

The following were specific objectives for achieving these goals:

- Conduct focus groups and semi-structured interviews with African American, Asian American, Latina, Native American women and LBT people who are experiencing DV in Seattle. Topics covered in focus groups and interviews included the following:
  - The cultural context of DV including community definitions of DV and abuse
  - Awareness of services
  - Cultural factors affecting service utilization
  - Service needs and use
  - Cultural appropriateness of services
  - Problems with service delivery
  - Recommendations for helping victim/survivors experiencing DV.
Introduction

- Enhance effectiveness of the existing partnership between the Seattle-King County Department of Public Health (SKCDPH), the Domestic Violence Council and DV provider community through collaboration on research.
- Ensure meaningful involvement of service providers, advocates and survivors in all phases of the research process.

Structure of the Project

Public Health – Seattle & King County’s (PHSKC) Epidemiology, Planning and Evaluation Unit was the lead agency for this grant. The Principal Investigator is a Medical Anthropologist at PHSKC and affiliate clinical faculty at the University of Washington School of Public Health and Community Medicine (SPHCM). The co-Principal Investigator is a faculty member at the University of Washington, SPHCM. Our partner agencies are the following:

- Refugee Women’s Alliance
- Consejo
- The Seattle Indian Health Board
- The Northwest Network of Bisexual, Trans and Lesbian survivors of Abuse (formerly Advocates for Abused and Battered Lesbians (AABL))
- The East Cherry YWCA
- Cross-Cultural Health Care Program
- City of Seattle Office for Prevention of DV and Sexual Assault

The Qualitative Research Team (QRT) is composed of the Health Department/University researchers and bicultural, bilingual representatives from each of the victim service partner agencies. The QRT has worked together to plan and conduct all aspects of the research, including clarifying overall research questions, developing recruitment strategies and research protocols, recruiting participants, conducting focus groups and interviews and analyzing the data. QRT members will also work with others in the community to jointly develop recommendations based on our findings.

Partner agencies were given a choice of level of involvement with the project. Choices ranged from assisting with recruitment only, to participating on the QRT and helping to plan and conduct the research, to all of the aforementioned tasks plus assisting with analysis and writing. None of the agencies chose to help only with recruitment. Three chose the second level of involvement and two agencies are working with the researchers through data analysis and writing final reports. Agencies were subcontractors to the Health Department and were reimbursed for the time their employees spent on the project.

In order to further facilitate community participation we convened a Project Advisory Group (PAG) that gives overall advice and guidance to the project. Evelyn Chapman of Seattle’s Office for Prevention of DV and Sexual Assault facilitates the PAG.
PAG includes representatives from the Domestic Violence Coalition, the Domestic Violence Council, victim services agencies, legal services, law enforcement, and health and social services agencies. To date, the PAG has advised the project on the communities on which to focus, recruitment and ensuring safety.

The PAG will continue to be involved in the project by playing a lead role in identifying systems-level needs and implementing changes based on the research findings. In February the QRT presented preliminary findings to this group. Their first recommendation was to make certain that the findings from the research are presented within each of the communities who participated in the research. We are currently working on implementing this recommendation. Additionally, over the next few months we will make presentations to various audiences throughout the DV service response including police, courts, and local funders of DV services. We will be working with these groups on developing further recommendations.
The following diagram illustrates the project structure:

![Diagram of project structure]

**DV PROJECT**

**Project Advisory Group**
- DV Coalition
- DV Council
- Victim's Services
- Legal
- Law Enforcement
- Health & Social Services

**Qualitative Research Team**

**Project Staff**
- Investigators
- Research Assistant

**Partners**
East Cherry YWCA
- African American
ReWA
- Amharic
- Cambodian
- Filipina
- Russian
- Vietnamese
Consejo
- Latina
NW Network/AABL
- LBT

Cross Cultural Health Care Program (Translation/Facilitation)
METHODS

Because little is known about the issues that ethnic minorities and LBT people face in accessing DV services, a qualitative approach that seeks to understand these issues inductively is appropriate. Qualitative methods are useful for gaining depth of knowledge and illuminating the context of a problem. Grounded Theory, as described by Glaser and Strauss, provides the theoretical basis for using qualitative methods to generate theory based on the lived experiences of people. Grounded Theory describes an approach to understanding people's experiences in context and is often applied in situations where little formal knowledge exists.

In qualitative open-ended interviewing, response categories are not proscribed, allowing informants flexibility to describe their experiences in rich detail. Additionally, qualitative interviewing emphasizes non-judgmental understanding of individual experiences in their cultural context, an important consideration in this study since much of the focus of this project concerns cross-cultural understanding of sensitive issues.

Participatory action research

Participatory Action Research (PAR) provides the over-arching framework under which the project was carried out. PAR is an approach to research that values participation throughout the research process by those affected by the study. PAR emphasizes the importance of the involvement of those affected by the study for putting research findings into action. Through PAR, participants in the research project benefit both from participating and from the results. In order for such benefits to occur, community partners must be involved in the earliest stages of conceiving and shaping the research project as well as carrying out the research, analyzing findings, and making recommendations for action. This project involved service providers in all stages of the research process, and survivors to the fullest extent possible. We believe that following a PAR approach has assured that this research is meaningful and usable to providers, as well as culturally relevant and sensitive.

Design

The specific data collection techniques we used were focus groups and semi-structured interviews. Each technique has strengths and limitations; combining techniques, therefore, allows the researcher to address the limitations of one strategy with the detail offered by the other. Focus groups have the potential to yield rich data as participants interact and compare their experiences. This process of interaction helps to elucidate the range of opinions among participants. Focus groups can also be useful for exploring complex social phenomena that may be difficult for an individual to explore in isolation but more easily clarified in group discussion. In this project, focus groups help describe community definitions and responses to DV.
Data from semi-structured interviews (in which interviewers ask specific questions to focus the interview but responses are open-ended) complement information gained through focus groups by providing in-depth individual accounts of people's experiences. Since in-depth sharing can be limited in a focus group setting, interviews that are rich in detail are an important additional data source. The use of both focus groups and interviews allows for validation of findings across methods. Additionally, since we used both focus groups and interviews, the method used with a particular group was tailored to individual and cultural communication preferences (women were offered the choice between focus groups and individual interviews; allowing the informant to choose represents both PAR and culturally competent research). Homogeneity of groups is thought to enhance the quality of the focus group discussion since participants are more likely to identify with one another’s experiences.

We conducted focus groups and interviews with the various cultural groups included in the study. Please see the table below for the number of focus groups and interviews conducted with each group.

<table>
<thead>
<tr>
<th>Cultural Group</th>
<th>Focus groups</th>
<th>Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Amharic speaking</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Cambodian</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Filipina</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Latina</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Lesbian/ Bisexual/Trans</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Native American</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Russian speaking</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38</strong></td>
<td><strong>16</strong></td>
</tr>
</tbody>
</table>

Qualitative data collection typically ends when the data are saturated, that is, no new information about main themes is being collected. We determined the total number of focus groups and interviews with each community in this project by two criteria: data saturation and recruitment possibilities. In the cases of African American, Native American, Cambodian, Vietnamese and Russian speaking, the data were saturated and we were able to end data collection based on that methodological principle. In the cases of Amharic-speaking, Filipina, Latina and LBT, we were limited more by recruitment and, though we have a strong body of data, would have preferred to continue data collection in order to confirm saturation.

We used interviews to supplement and cross-check information gathered in focus groups. These two methods allowed us to be attentive to cultural communication styles that may affect participants' comfort level with sharing information in individual or
group settings. Chrisman and Strickland found that when conducting focus groups with American Indian women living on a reservation, it was important to work with women in small groups before conducting a larger focus group interview. We worked closely with our partners to identify potential cultural communication styles that may have affected participants’ comfort level with research procedures. A focus group was also conducted with DV advocates from our partner agencies in order to inform research approaches and to understand provider perspectives on serving culturally diverse populations.

Focus groups and interviews were conducted in the first language of the participants. The only exception to this was with Russian speakers who may have had a different first language (Latvian, Moravian, etc.) but chose Russian over English because they felt more comfortable in Russian than in any other option provided. Focus group facilitators and interviewers were bicultural and bilingual and matched to the participants’ ethnic/cultural background whenever possible (the only exception was in the case of Amharic-speaking and Russian-speaking facilitators who may not have matched ethnicity of participants because groups were formed based on language rather than ethnicity). Additionally, LBT facilitators were matched to participants on the basis of sexual minority status but they were not necessarily matched on ethnicity or specific gender or sexual identity. Facilitators were recruited from collaborating agencies and trained in focus group facilitation and interviewing techniques. Care was taken to ensure that facilitators and interviewers worked with research participants who were unknown to them and not accessing services at the facilitator’s agency (exceptions noted in next paragraph). Attention to the safety of participants and a culturally appropriate approach were key factors in planning. Training facilitators and interviewers from the provider/advocate community allowed for development and enhancement of research skills in community based organizations and ensured that interviewers were sensitive to safety and privacy issues.

Our original protocol was to have groups formed only of participants who had not ever received services from the facilitator’s agency. In almost all cases we were able to follow this protocol. However, in several groups, we were essentially unable to recruit because of women’s reluctance to speak with anyone with whom they were unfamiliar. In these groups (with NIJ program officer approval) we altered the protocol to allow facilitation by service providers of their own clients when necessary. These exceptions included: Amharic speaking, Cambodian, Filipina (one interview only) and Latina (one interview only). This protocol change was considered during analysis and will be reported accordingly in the findings section.

Focus group moderators and interviewers provided information on resources to participants who requested it as a result of participating in this research project. Clients were provided with written outreach materials from agencies appropriate to serve them. In addition, in three cases, a research staff member (and former DV advocate) met individually with participants to provide networking and advocacy services.

At each focus group at least two research staff were present. The facilitator conducted the focus groups in a private room. A crisis counselor attended each group and was
available to counsel participants during or afterwards and to also make necessary
referrals. The crisis counselor had access to a phone or cell phone and was able to
monitor the safety of the group. Other staff provided childcare. (See Appendix A).

Another logistical issue was simply coordinating all of the focus groups in all of the
different cultural groups. We decided early on that it would not be possible to wait to
see if we recruited enough participants to hold a group. Because it would not be
possible to call many prospective participants back, we would need to know times,
dates and locations of groups up front so that this information could be provided to
participants after they completed the screening and agreed to participate. For this
reason we had variation in the size of focus groups.

**Human subjects**

We obtained approval for the study from the Institutional Review Board of the
University of Washington before beginning the research phase of the project.

**Instrument development**

The focus group/interview guide was designed in close collaboration with community
partners and adapted for in-depth interviews. The steps to developing the guide
included: 1) Initial topics prepared by research staff; 2) Review and brainstorming for
additional topics by entire research team, including partners; 3) First draft of language
prepared by research staff; 4) Review, editing and approval by research team; 5)
Translation by contract agency; 6) Back-translation to English to check translation; 6)
Distribution of instrument. The general, open-ended questions we used provided a
framework for participants to share their experiences that is in alignment with our
overall research questions, but also allowed for significant flexibility in shaping
responses. The final version of the guide can be found in Appendix B.

**Sampling and recruitment**

Information on the demographic characteristics of women using DV services in Seattle
is available through the County’s Community Services Division. An examination of
program statistics for 1997 DV incidents demonstrates there is considerable diversity
among those using services. In 1997, there were 2,047 clients accessing services in
person. Of those, 44% were between 26 and 35 years of age. Approximately 20%
identified as African American, 8% as Asian or Pacific Islander, 8% as
Hispanic/Latina, 5% as Mixed Race and 4% as Native American. 56

Focus groups and semi-structured interviews were conducted with women who have
*experienced* DV. Purposive sampling, 57 in which informants are recruited because they
meet specific criteria (e.g., experienced DV/have or have not used victim services),
was used to ensure that we interviewed informants who were both using and not using
DV services. See Appendix C for recruitment protocol. Each focus group included
four to twelve participants who were recruited in part through collaborating DV service
providers.
Several partner agencies provide a range of services in addition to those specific to DV and were able to assist with recruiting participants who were not currently receiving DV services. For example, Consejo provides various forms of support to Latinos who need assistance, and the Seattle Indian Health Board is a federally-funded clinic that provides health services to Seattle's urban Native American population. Additionally, ReWA has a range of programs for immigrant and refugee women including English as a Second Language classes. All of these organizations were able to help identify women who had been or were being battered but not seeking DV services. We also actively recruited participants not already in the service system through flyers, advertisements in ethnic newspapers, and postings at community centers.

Focus group participants were specifically chosen to participate according to their cultural group. Screening interviews with potential participants determined eligibility for the study for African Americans, Native Americans and LBT people. The LBT advocate conducted the screening with the LBT community since she has extensive training on accurately identifying victims and batterers. This was particularly important to ensure that batterers were not included in LBT focus groups. For the non-English speaking groups, our agency partners conducted the screening both over the phone and in person. Screening for all groups covered whether or not prospective participants had experienced DV, ethnic or sexual minority identification, and whether or not women had received services from the agency (for the purpose of assigning women to groups facilitated by appropriate advocates or alternates), and finally instructions on ensuring group and individual safety. The screening interview was translated into all languages for ease of administration (Appendix D and E (LBT protocol)).

Participants at risk of violence due to their participation in the research project were not included. Screening of potential participants was used to identify those whose particular situations might have put them at risk. Close collaboration with providers who were well acquainted with safety issues faced by victims/survivors assured that the research was conducted in a way that maintained the safety of participants. The Project Advisory Group, described in the Management Plan, and the QRT helped develop safety protocols and guidelines for providing service referrals to participants who asked for help in the context of the research.

We were very concerned about possible breaches of confidentiality in small communities where members may know one another. We addressed this by informing each potential participant of the risk during the screening and then giving her the opportunity to participate in a one-on-one interview if she felt that participation in a group could compromise her confidentiality.

Participants in focus groups and interviews were compensated for their time ($35.00) and were provided with free childcare and transportation vouchers.

The table below shows the exact number of participants recruited from each cultural group:
<table>
<thead>
<tr>
<th>Group</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>39</td>
</tr>
<tr>
<td>Amharic</td>
<td>18</td>
</tr>
<tr>
<td>Cambodian</td>
<td>39</td>
</tr>
<tr>
<td>Filipina</td>
<td>13</td>
</tr>
<tr>
<td>Latina</td>
<td>9</td>
</tr>
<tr>
<td>LBT</td>
<td>22</td>
</tr>
<tr>
<td>Native American</td>
<td>47</td>
</tr>
<tr>
<td>Russian</td>
<td>24</td>
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<tr>
<td>Vietnamese</td>
<td>43</td>
</tr>
<tr>
<td>Total participating</td>
<td>254</td>
</tr>
</tbody>
</table>
At each focus group, participants were asked to fill out a short demographic survey before the group began. The following table summarizes the characteristics of participants for each cultural group.

<table>
<thead>
<tr>
<th>Cultural Group</th>
<th>African American</th>
<th>Amharic</th>
<th>Cambodian</th>
<th>Filipina</th>
<th>Latina</th>
<th>LBT</th>
<th>Native American</th>
<th>Russian</th>
<th>Vietnamese</th>
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<tbody>
<tr>
<td>Age (years)</td>
<td>37.2</td>
<td>31</td>
<td>44</td>
<td>41</td>
<td>33.2</td>
<td>34</td>
<td>39</td>
<td>38</td>
<td>44</td>
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<tr>
<td>Median</td>
<td>39</td>
<td>31</td>
<td>43</td>
<td>32</td>
<td>30</td>
<td>39</td>
<td>38</td>
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<tr>
<td>Time (years)</td>
<td>Average</td>
<td>5.8</td>
<td>4.25</td>
<td>10.75</td>
<td>2</td>
<td>8.5</td>
<td>3.5</td>
<td>8.8</td>
<td>2</td>
</tr>
<tr>
<td>Median</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>5</td>
<td>2</td>
<td>3.5</td>
<td>1.75</td>
<td>4</td>
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<tr>
<td>Range</td>
<td>0.2-20</td>
<td>0.5-20</td>
<td>1-33</td>
<td>0-20</td>
<td>2-28</td>
<td>.2-20</td>
<td>0-39</td>
<td>0-8</td>
<td>0-50</td>
</tr>
<tr>
<td>Income % under $10,000</td>
<td>37.5</td>
<td>78</td>
<td>65</td>
<td>44.4</td>
<td>66.7</td>
<td>23.8</td>
<td>71</td>
<td>50</td>
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<tr>
<td>Income % under $20,000</td>
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<td>95</td>
<td>95</td>
<td>66.6</td>
<td>88.9</td>
<td>47.6</td>
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<td>61</td>
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<td>Services % not</td>
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<td>11</td>
<td>18</td>
<td>34</td>
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<tr>
<td>Relation to abuser</td>
<td>Husband/Ex-husband/Partner</td>
<td>43</td>
<td>55</td>
<td>58</td>
<td>70</td>
<td>66.7</td>
<td>37.5</td>
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<td>70</td>
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<tr>
<td></td>
<td>Boyfriend/Girlfriend</td>
<td>37</td>
<td>6</td>
<td>30</td>
<td>11.1</td>
<td>33.3</td>
<td>37.5</td>
<td>50</td>
<td>7</td>
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<tr>
<td></td>
<td>Friend</td>
<td>7</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>10</td>
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<td>9</td>
<td>22</td>
<td>44</td>
<td>23</td>
<td>42</td>
</tr>
</tbody>
</table>

Note: Not all participants responded to every question. As a result, percentage totals do not always reach 100 for each category.

Data management and analysis

With permission of participants, all focus group and interviews were audio-taped and then transcribed. Focus groups and interviews conducted in languages other than English were translated into English and transcribed. The Cross-Cultural Health Care Program did most of the translations. Paper copies of transcripts are stored in locked files with access only by project staff. Electronic transcripts are stored on a password-protected drive that is accessible only by project staff.

This project required significant translation since we worked with six non-English speaking cultural groups. We translated all of the documents that participants had to read and sign as well as all of the documents that our interviewers used for screening and interviewing. Translation of the research instrument was particularly important and
difficult. We took great care working with the translators and with our QRT bilingual partners to ensure that the instrument translation was both linguistically correct and culturally comprehensible. Despite this attention to detail, we realize that the concepts in the instrument are complex and that the translated instrument was not completely accessible to all participants. This is a reality for all cross-cultural work.

The most extensive translation work was translating the tapes from the focus groups from first languages to English. Translation was costly, time consuming and of variable quality. We instituted procedures to ensure quality control of translations. For each language group we had a sample of the transcripts checked by independent translators. They provided feed-back about the quality of the translation and whether or not transcripts were being translated in the word-for-word format we had requested. Checking the accuracy in this way resulted in sending some transcripts back to the original translators for further work.

Analysis of qualitative data began toward the end of data collection and continued until all transcripts had been reviewed and coded. As focus groups and interviews were transcribed, researchers intensively reviewed transcripts to identify main themes and concepts. Main themes and concepts were organized into “codes” that gave structure to analyzing and compiling the data. See Appendix F for the codebook used on this project. In order to organize and retrieve coded data, transcripts were entered into NUD*IST, a software package for analyzing text-based data. NUD*IST assists the researcher in organizing, searching, and retrieving text-based data and is indispensable for analyzing the large amounts of data generated by this type of project. The analysis steps were as follows:

1. Initial codebook was developed by research staff from the question guide and report outline.
2. QRT members each reviewed several transcripts and expanded the codebook.
3. QRT members each coded two transcripts (the same two for each coder) and edited the codebook as appropriate.
4. QRT members coded sets of transcripts; periodically all QRT members coded the same transcript to check for consistency.
5. Computer entry was conducted by research staff who reviewed all coding before entry and adjusted as necessary.

Initial write-up was done by research staff and several QRT members. The findings were shared with the full QRT as a validity check. In addition, participants in focus groups were asked to participate in this review of the results of our analysis. The reactions and comments of these participants were incorporated into the final report. Reviewing our findings with this diverse group served as a further step in validating our findings. For the Urban Indian groups, preliminary findings were shared with participants in the Health Board’s Native women’s support group. By including survivors in the process of reviewing and discussing early findings, we were able to acknowledge their contributions to the project and to solicit feedback from them.
Generalizability of findings is limited to populations similar to the study sample. This means that it would be inappropriate to assume that the findings exactly represent every survivor’s experience regardless of culture. However, we expect that many of the themes which emerged across the nine cultural groups studied here would also apply to other cultural groups which have yet to be studied. It is our hope that providers and advocates serving diverse populations would be able to use our findings to craft appropriate interventions for numerous cultural groups beyond those included in this study.

Written reports will be prepared for several audiences, including community-based organizations, and law enforcement and governmental agencies. Findings will also be submitted for publication in peer-reviewed academic journals. Oral presentations are being made in both community and professional settings. We plan to work with agencies which participated in this project as well as with other interested parties who would like to see the findings moved into action.
RESEARCH FINDINGS BY CULTURAL GROUP

In this section, you will see specific reporting for each cultural group. Within each group, the same general headings are included for clarity. When no data were available for a certain heading within a particular cultural group, the heading was deleted.

The sub-sections you will see include:

Community awareness and attitude toward domestic violence
Here we discuss how aware the community is or is not regarding DV in general and DV specifically as a crime. We also discuss prevailing attitudes toward DV as expressed in the community and in survivors’ families.

What abuse looks like
In this section, we present participants’ descriptions of abuse within their communities, as well as their own experiences of abuse.

Responding to abuse
This section addresses the ways in which survivors respond to abuse—both their feelings and actions they take.

Survivor needs
In this section, we present survivors’ needs, including descriptions of needs, followed by responses to those needs provided by friends, family and community members, and experiences with more formalized services and systems.

Use of services
This section presents participants’ experiences accessing services related to domestic violence. We discuss: participants’ awareness of DV services; services used by participants; experiences with access to services; feelings about which services did or did not work well; participants’ feelings about the importance of working with service providers from their own community; and finally, where appropriate, specific discussion of needs of women with children and teens.

Survivors’ ideas for helping other survivors
Survivors spoke candidly about innovative ways in which communities and providers could structure outreach and prevention. In this section, we describe their ideas for helping each other and for helping other survivors.
Our intention here is to describe in detail what we learned from each cultural group about the experience of DV in specific cultural contexts and the barriers to service faced by each group. There are many similarities across groups. There are also significant differences. Quotes are included to illustrate the main themes and to aid the reader in understanding the issues from participants’ perspectives.

Note: We have transcribed focus group and interview recordings word-for-word. In addition, translators were asked to translate word-for-word rather than to translate in summary. Although this means that the grammar and usage in some quotes may be awkward to the reader, we believe it is true to the intentions of the speakers and honors their words exactly as they were spoken.
AFRICAN AMERICAN

Community awareness and attitude toward domestic violence

Community

African American women generally agreed that their community is aware of domestic violence (DV). However, many felt that the issue is not talked about openly, is often not taken seriously, and for some who have experienced violence in their families of origin, violence against women can be seen as normal or expected in a marriage or relationship. Women also said that they believe physical abuse is more likely to be viewed by the community as DV, while emotional abuse may not. Women discussed what they believe are the many reasons for what they see as a reluctance to discuss DV in the community. The main themes are listed below:

➢ Do not let other people in your business; concern about the reaction of the community and family.

Keep it in the home. Don’t let anybody else know your business. Shut it down. It didn’t happen. It didn’t exist. That’s just a part of our culture.

I think it’s bad within the African American community. The thing about it is a lot of women don’t report it. A lot of women don’t get away from it. So that’s like a main fact. Me, myself, I got away from it and I’m happy. My abuser’s in jail. But, as an African American woman I don’t think that many African American women speak out about it. It might be a pride thing, or you know, it might be that they don’t want no women to know their business that he hurts me.

Right, I mean you could have best friends and be a union, they could be your best friend and you could talk to them everyday on the phone and don’t know they getting the hell beat out of them. Cause that’s just how they come across. I’ve done it, for years. I did it for years, I’m not doing it now, but I did it. Because, like she said, you’re embarrassed, or you know, we was raised up people that are in their 30s and 40s now, you mind your business.

➢ Embarrassment, stigma

...For a long time our folks didn’t have anything. You know? We didn’t have many real professional people. We didn’t have people who lived on that side of the town. And it was an embarrassment to them. But when I started talking about it, it was an embarrassment to people who believed in that upper middle class that we’re supposed to have, we supposed to be perfect.

➢ Fear

I think that a lot of folks are aware but it’s been blocked out of fear because people won’t talk up because of what they fear. And I think that a lot of peoples are aware that it ain’t like it used to be. But they afraid of the repercussion of what can happen if you do something about it.

➢ In several focus groups the notion that DV is considered a normal part of a relationship was discussed. Women cited experiences of seeing DV happen in their parents’ relationships and this influencing their beliefs.

R: Some people are in abusive relationships just because that’s what they’re used to, that’s what they’ve seen and so they don’t know how to solve their problems any other way but to get verbal or physical.

R: For some women that’s all they know
Several participants said that they think the church does not support women in talking about DV.

I'm just thinking back during my first marriage—I was married twice—ah—I was in the church but the man that I married wasn't and I can remember when the abuse started, it was the church sisters that said, hang in there, pray, it's your responsibility, and so it's like, I was doing everything I could to satisfy my husband because that was my responsibility and I think that tore me more apart than anything else because I was in the situation where I wanted to get out but it was like no you can't because this is like—marriage is honorable. It's ordained by God. You can't leave and you know, here he is, you know, acting the fool and living, you know, like the devil. And here I am trying to hold up the marriage and it was tearing me apart. So I think the thing for me, what we talked about, it was more or less. You got to pray, you got to put your family first and forget about how you feel because God's going to take care of you. And that's very confusing. Even as I think about it, I was very confused at that time. You know, it was like he could do whatever he wants but you've got to stay right there and take it.

A few women mentioned the O.J. Simpson case as having increased awareness of DV in the African American community. One woman expressed frustration about the media attention that the case garnered.

Black women have been dying for years and it was not sensationalized. It was not on the news daily. You know, you did not hear about the family, how they felt. It was just another black woman who got killed.

Some thought that DV is more openly discussed now than it was years ago. They pointed to services for women as well as public service advertisements that help to make people aware of DV. Several older women reported that when they experienced DV there was no where for them to turn, since no help was available.

But they had no help like they do now. They have... shelters you can go to. You can call the police and get him put away to give you a couple of days to do something else or be someplace else. ...What they have now they didn't then. And the way society felt about DV, it was a family problem. 'What did you do, burn his dinner tonight? Be a better wife and he won't hit you.' So they had none of them, none whatsoever.

What abuse looks like

Descriptions

Although we asked women to describe examples of abuse they had seen in their communities many talked about abuse they themselves had experienced in their relationships. While most women talked about abuse in intimate relationships, a few noted that abuse came from other family members like brothers and sons.
Findings: African American

Women in focus groups reported experiencing physical and verbal abuse in roughly equal numbers. Often women who had experienced verbal abuse characterized it as “only verbal or emotional” while women who experienced physical abuse often reported both. Other women described extremely controlling behavior on the part of their partners and a few reported sexual abuse, stalking, harassment and fear that their children would be harmed or killed. Several women reported feeling as though they were being tortured and were prisoners in their own home.

Examples of verbal abuse included degrading comments, being called names and cursed, yelling and screaming, embarrassment in front of family and friends, being told they’re not good enough, no one would want them, and disparaging comments about their bodies. For some women, verbal abuse included death threats.

Just continual put down, put down, put down. You’re ugly, you’re fat, you’re too skinny, you look—I mean there’s nothing that’s good enough for him.

R: anything you do, it’s wrong.
R: It’s no good.
R: You cook, you put too much salt in it, it’s like done, you overcooked it, you undercooked it. You wash dishes, it’s always something.
R: It’s always something. You didn’t sweep the floor clean enough. You left something over there. You on your feet all the time when they around. And nothing, they never satisfied. And you constantly being nervous. Nervous, scared like just get up and just snap. And he would call me and he still has a way of just like making me feel like I’m nothing.

I’m telling you, one time I thought my name was bitch. If somebody was talking and they said bitch, I would like, you talking to me? I even told my mom that, I say I really forgot what my name was because not being around my family at that time, that was my name.

Examples of physical abuse included hitting, burning, beating, being threatened with a knife, locked in a closet and beaten, and being pistol whipped.

See I was very scared. When he put that knife to my throat...

I couldn’t understand, like after I got beaten up, why he would like come in to the bathroom and just sit and just watch, you know as you washed.

He was drugging me and beating me in my sleep. And that’s what was happening.

Previous abuse in family of origin

In six of the seven focus groups, African American women talked about previous abuse in their family of origin, most as witnesses to DV in their parents’ relationship and a few as victims of child abuse. Often participants talked about previous abuse as related to or as a factor in responding to abuse in their adult relationships. For those who reported they had witnessed their fathers abusing their mothers they felt that these childhood experiences had contributed to their belief that abuse is normal in family relationships.

I thought it was normal. I mean, even when I seen it before I just think that, I just thought that it was just the way that relationships was supposed to be. Because, it was like that in my family.

My mother was abused by my dad and with that happening she’s been very weak and ah—I’ve grown up to be like her, pretty much, because that’s what I saw and she doesn’t have anything to teach me because she didn’t know any better.
The few women who talked about their own child abuse said that it affected their relationship with their parents, made violence seem normal and has had long lasting effects on them.

*When I was growing up 'cause my mom, she started hitting on me like this, hitting me kind of digging and I think that just made me madder and—I basically grown up around all violence, you know. I just watched my mom and dad fight and when my dad left she started fighting with me. And I moved out with my dad and my dad started fighting with me.*

*Mom burned me right here on the shoulder with a skillet when I was three and a half. I couldn't deal with it. I'm still crying on the inside. Now I'm trying to cry on the outside and find out what it is.*

**Alcohol and drug use**

While we did not specifically ask participants about alcohol and drug use in the context of DV several women while describing abusive incidents mentioned the involvement of alcohol and or drugs. This was a theme that emerged across ethnic groups. Some women reported their own or their partner’s alcohol or drug use in association with abuse that had happened to them. A few associated parental alcohol or drug use with their own abuse or neglect as children. Others talked about those they know for whom substance abuse and DV go together. A few women mentioned that drunkenness or substance abuse is sometimes used as a rationalization for abusive or assaultive behavior.

*My last experience was with an individual who harmed, who quite devastated me. I wasn't in a right thinking mind anyway. I was using controlled substances at the time and he was too and he almost beat me to death.*

*I [was] thinking about a situation of really, really really bad DV and they're both using crack and she, me and my mom were talking about this, every relationship that she's had has been an abusive relationship. It's almost like she goes out and interviews these guys and they say 'No, I'd never touch a woman.' She leaves them alone. Then she finds one that has a history of beating women and this is the man she goes for. Sometimes when you use drugs for so long and you've been in those kind of brain washing situations you have psychological problems. He almost literally killed her, twice now.*

*One day we were over at his house and he ah—we were in the bedroom talking and he wanted some. And I'm like no and he pushed me and I'm like now this is where it stops. And from this point, I was like you're just not ever seeing me again. If he hadn't told me that he had a past beating women and whatever I would have just put it on his drunk...I'd say, 'He was drunk, he was trippin'.*

**Responding to abuse**

**How women feel**

Women in the focus groups talked very openly about the kinds of feelings they had towards their abusers and about themselves while they were in the abusive situation. The feelings women described included the following:

- Fear of being hurt or killed, too scared to get help

*R: But you know some of us be so scared too. We be scared.*

*R: I don't understand. Me, myself, a black woman, I can't understand a woman being that scared. I just can't get with that one.*
R: Some of them would’ve killed us.

I was scared of him. I mean, he would tell me, he would grab me around my throat and tell me I’m gonna take you and slit your throat and cut and throw you in the alley. And that would just stay in my mind.

I would feel threatened just to see him in court, you know. Or the fact that he was going to get out of jail, you know. I didn’t feel safe that he could come to my home and whip me.

 Desire to kill the abuser

I was seeing the doctor twice a week and the counselor three times a week. I mean it was serious because I had told her if I saw him on the street I was going to bring him down.

 Feeling that she might snap or reach a breaking point

You on your feet all the time when they around. And nothing, they never satisfied. And you constantly being nervous. Nervous, scared like just get up and just snap.

 Low self-esteem [which led to acceptance of abuse]

It’s like she was saying with the self-respect, self-esteem, when you’re in a relationship like that, you don’t have a lot of self-esteem and self-respect or respect for yourself. You may have it going into the relationship but after a while, they knock that down.

You know, it’s just on a continual basis and your self-esteem is so low.

 Loneliness, depression

It’s hard, you know, to take that first step. It’s really hard. You never know when you go outside in your front yard...how big this world is, until you are by yourself. It hurts! It’s big!

I mean, it’s just always good to have someone to talk to because I know I went through a lot of lonely kind of stages and I was really depressed and all I wanted was somebody to talk to but there wasn’t anyone to talk to.

 Feeling that scars from the emotional abuse will always be there

And that stuck with me from that day, I mean I probably thought about that every single week since he said it and I just cannot believe thinking back on it that I even married him ...And those things hurt. Those are scars that never go away...

Actions women take

There were a variety of strategies that women used to cope with being in or having been in an abusive relationship. Women in the focus groups were in various stages of leaving their relationships or healing from them, which is reflected in their answers.

 Some women said they coped with abuse by trying to avoid fights with their partners. Others said that they responded to abuse by fighting back.

I had been very aggressive, I had been a person that could take care of myself and let people know, you know, that you were stepping on my territory, but I had stopped all that! And I had gotten very quiet. And very, you know, just took care, very good care of my children. And had gotten to a point where I almost didn’t, if he said something I didn’t you know give a retort to him. I just kind of let it flow.

And I would say, during the things that I’ve been through I think it kind of making me backwards, you know, I’m not gonna take no whipping.
Another response was to leave and go to a friend or family member's house temporarily.

I think for me it was when I saw it coming in the beginning I'd leave and go to my mom's but since he had the phone number there, you know, they could always talk a good game, after the fact.

Still others needed to leave the state to get away from the abuser.

Some sought help from the police or community based DV services.

Some women talked about keeping abuse a secret, not telling friends or family, and avoiding them when bruises were visible.

I didn't tell my mother, I didn't tell my sisters and we're like a very close-knit family. And I didn't tell anybody. I did not want anybody to know that my ex-husband was beating me...So I kept getting beat, kept getting mentally abused, physically abused and I never told them until one day, it was just enough, it was the end of it, I'm sick of this and I can't go through this anymore.

Seeking strength in God, religion or the church was another common strategy.

My religion gives me self-esteem to say, I'm a human being, I'm a servant of my God. My God wouldn't do this to me. Why would a human being do this? You know, so that's really helped me to get out of this situation. I'm not an animal.

Several women said they are now aware of warning signs when dating other men.

He wanted to marry me right off. Have kids. He wanted me to stay home. Tell me what I should and shouldn't wear. I just thought again, well, he cares about me. He never got mad at me. But I know now these are signs of abuse. Now every man I meet has to go through a screening.

Staying in the relationship

Although we did not specifically ask women why they stayed in abusive relationships, many volunteered this information in the course of telling their stories. Some women stayed because they thought their children would be better off with a father. Others had no place to go and feared that the abuser would kill or hurt them if they left. A few women mentioned that the abuse lowered their self-esteem to the point where they had difficulty making decisions about staying or leaving. Some said that their love for the abuser kept them tied to the relationship. Others cited community and church pressure to stay married.

I always had a close friend and I was able to talk to them and my mother. She was a very strong woman, much stronger than I am, they'd tell me to leave, you know, and I'd say no, because of my children. And I did, I hung in there for a long time, 25 years.

You don't have the interest that you could do this or you can do that and you do just cause you got such low self esteem; so low, to you just feel like you just nothing.

It was the church sisters that said hang in there, pray, it's your responsibility and so it's like I was doing everything I could to satisfy my husband because that was my responsibility and I think that tore me more apart than anything else because I was in the situation where I wanted to get out but it was like no you can't because this is like marriage is honorable. It's ordained by God.

Well, this society makes you think that you're nothing if you're without a man. You have to have that. He's the provider.
Leaving the relationship/seeking help

Many factors came into play for women in deciding whether or not to leave the relationship or seek help for abuse. For those who did seek help, a desire to protect their children from abuse was one of the main reasons. Additionally, escalating abuse or death threats caused some women to seek help. Some said when it reached the point where they felt like they might kill the abuser or themselves, they knew it was time to leave. Many women described reaching a “breaking point” and becoming fed up with the abuse and at this point leaving the relationship. A few said that they were encouraged by counselors or other professionals to seek help. For a few women, incarceration of the abuser provided an opportunity to seek help.

I got out of there because I was pregnant and I figured he did this to me while I was pregnant, what’s going to stop him from doing it to my child...

I just let it go and I didn’t start looking for help until I got pregnant.

My counselor, if it wasn’t for my counselor, I wouldn’t have probably looked into anything.

So I kept getting beat, kept getting mentally abused, physically abused and I never told them until one day, it just was enough, it was the end of it, I’m sick of this and I can’t go through this anymore.

So, I was able to get away from him only because he went to jail.

Not seeking help

Some women in the groups had not sought help for the abuse they have suffered. Several women said that they were reluctant to bring others into the family’s business, particularly police and Child Protective Services. Reasons for not wanting to involve the police included lack of trust that police help black people in the community, a concern that black men are scared of the police, and a belief that the police do not help much anyway. One woman was not certain that the police could accurately determine who was the abuser. A few women whose abusive experiences had happened years or decades earlier said that in the past police didn’t arrest men for DV, they would just have the man go away for a few hours. A few women were concerned that seeking help would result in increased scrutiny from Child Protective Services which could jeopardize their parental rights.

Me, personally, myself as a black woman, I don’t want to call the police. Black men are scared of the police...It’s like if you call the police, the police are either going to come and beat you or him. One or the other. Whoever has no scratches or bruises on them, that’s the one they’re taking to jail for the abuse. I’ve lived in Seattle my whole life and I know that...Even though they may not of did that abuse or whatever to the person. They’ve gotten really strict here about DV. Really strict.

Other factors that impeded access to help or to services included survivors’ feelings of shame and embarrassment, and not wanting to let other people know what was happening in the relationship. One woman reported being so scared that she could not get help. Another said that since no one around her intervened and no one seemed to care, she did not get help.

R: A lot of us live it so even if they’re programs out there, right behind our closed doors where we actually experience it

R: Not only aware but you experience it.
R: A lot of people don't use the facilities they could use. A lot of people hide it—
R: The shame.
R: They're ashamed of it and they don't want people to know it.
R: That's right.

Survivor needs

Description

Women were asked to describe the kind of help they needed when they were experiencing DV. A wide range of needs was reported but most participants agreed that someone to talk with and a safe place to go, or resources to leave the situation were the most pressing. Other needs were for someone to notice that something was wrong and ask about the situation, assistance with obtaining protection orders, and help getting the perpetrator arrested or jailed. Medical attention was also mentioned by some women.

Many women said that they had no one to talk to about their situations and that was their most pressing need. Often women needed someone outside of their family, and outside of the situation who could help them understand the relationship, give objective advice and help them with the loneliness and depression they were experiencing. Some said that the person could be a counselor, others said that they wanted to talk with other women who had been through domestic abuse.

I have been abused once before and I didn't have anybody to talk to. I can't go to my mom because she didn't— I mean, she was in an abusive relationship for years. Still, she knew what was going on but she didn't encourage me to leave or anything like that...

I definitely would have like somebody to talk to or somebody that like, I don't know, like outsiders kind of. You see things differently when you're actually in the situation.

And you know, I wasn't able to name that experience, though, until I left him and went to a shelter. To me it was just like you know, hey, he's my husband and I'm supposed to please him and be subservient, but you know it took me going to that shelter and for them explaining to me, that it had indeed been rape.

I think it helps to form your own support groups...people don't always have to talk to a professional.

I needed, um and I'll just state it, and I never said this to anyone, but I was with this guy and he beat me half that day and he locked me in a closet. So I spent that whole day there, my face was like out to here. I got beat! I mean I needed medical attention, I needed to see a psychiatrist, I needed the help and it was none available.

But I want him arrested. I don't know if that can be happened right now. If he can be arrested for doing what he did to me, almost killed me. I want him arrested. He needs help. He needs something.

The other overriding need that women expressed was for a place to go, to get away from the situation and find safety.

R: What help? What could be some help? When cheese toast has been hit to my face? Where is my support system? What? What? You can't fix it. Only help is getting away from that fool. Which I did do. But it took me another hit after that. Don't you know that man first pushed that cheese toast in my face I was supposed to of been gone charges set against him! OK, but I was worried about...

R: The jury down the street and what they going to think.
R: No, no. exactly to be true with you all, worried about where I'm going to go the next morning.
R: That's the biggest thing!
Findings: African American NU Final Report

R: That's why a lot of us take domestic abuse. Because we have no place to go.

Availability of help for meeting needs

Many women reported not having anywhere to go and being forced to stay in the abusive situation. Several women recounted calling DV shelters only to be told that they were full.

Well it was late at night and things had happened and I needed to get out of there. He had left and I knew he'd be back soon and I was trying to get out of there before he did and I called some shelters and there was nothing available at that time. And they all said call back every day, but like I need you now you know.

Most women described using informal support systems like family and friends, in particular, female friends, their mothers and sisters and sometimes children, often for immediate support and shelter. Most often, women describe turning to friends and family for a place to stay for a few days after a battering incident or when leaving the relationship. There are a few stories of family and friends reaching out to victims and encouraging them to seek help.

Many other women describe using formal mechanisms for support, staying in DV shelters, accessing counselors through community-based services, and using community crisis lines.

Use of services

Awareness of domestic violence services

Some participants had a great deal of awareness of services for DV in the community. Others had little or no knowledge of available help. In several of the focus groups women asked questions of the more knowledgeable participants about specifics of accessing services.

There are a lot of services available for a family that is being abused. For example, New Beginnings, through their community advocacy program, they have several support groups. East Cherry Y has a support group for African American women who have been abused.

Let's say you get out of that environment, that abusive environment in to your own apartment and so forth. Do you really have to go to a shelter first? To get, to maybe get involved like with Seattle Mental Health or some other kinds of agency that helps, if there is other ones out there, do you have to go into the shelter first to get it?

It's only been a couple of months since I've known about the YWCA. I think, like, just this year that I found out about it. I don't think I knew about it last year either.

I guess one of my biggest concerns, it's kind of a catch-22, is that in theory we know there's services out there but because it's DV, because it's confidential, how do you know where to find those services at?

Women found out about DV services in a number of ways including calling the crisis line, and referrals from community-based agencies and clinics. Some women said that compared to the past, there is a lot of help these days. However others said they were unsure or afraid to access this help.

R: But nowadays you have help. Opposed to fifteen, ten, fifteen years ago.
Findings: African American NU Final

R: Yeah, it is a lot better.
R: It is more prevalent now. Whereas...
R: This class right here is an example of it.
R: A big step up.

Use of services

African American women reported using a variety of services to help them with DV. These include:

- Shelters
- Police
- Support groups
- Crisis lines
- Courts and restraining orders
- Child Protective Services
- Mental Health services and counseling
- Other community agency services like Central Youth and Family Services

Access issues

Women identified a number of barriers to accessing services for DV. A significant issue was shame for having been abused and not wanting others to know her situation.

And I didn’t want to go to the shelter because there was a lot of stigma attached to that you know. I thought that, well, if I go there maybe they’ll label me as being abuse and I’m not weak! I don’t like getting beat up! And I thought that people would, it sort of was an issue of shame and trying to break through that issue and not to just go and so I talked myself into it and convinced myself that I’ll go and see what and if I don’t like things there, if they start telling me that I have been abused, I’m going to get up and walk out of that place.

When people knew that I was staying in a shelter, the first thing that came to mind is oh, street person.

Another significant issue was fear that her abuser would kill her if she tried to leave.

But also, even with resources, you’re living in fear, so what good is the resources? If you’re afraid that, OK, I’m going to call the police on this man and they come and get him and he get out and he see you somewhere on the street or come to the house, before you can get to the telephone, what if he comes, break out a window, comes through the house, while you in bed?

Women were also worried about where they might end up after they left their abusers. For those who are economically dependent on their partners, this is a major concern.

If he’s out hustling or if he has a good job and you’re pretty much dependent upon him then you’ll stick in it and he can do pretty much what he wants to because you’re dependent upon him. If you call the police, he’s going to jail. What are you going to do? So you’re going to stick with that relationship until you pretty much decide that you’re going to get up and go to work and leave him alone.

Some women thought that services for DV cost money and they would not be able to pay. The cost of therapy and counseling is a barrier for some women wanting these services.
I was seeing her three times a week so that was $21 a week right there and I only had a part-time job.

Knowledge of services continues to be a barrier for some women.

I mean you want the help, but you don't know where to go and you don't know who.

Not wanting others in your business was another barrier mentioned by participants.

And there's still a lot of Black people that don't want you in their business period!

How services work

Women reported that when they accessed services, many worked well. Shelters provided safety, needed housing, made women feel comfortable, helped them access other resources, provided childcare and assisted with food and living expenses.

For Tara [name changed], it was a big help because they put her in a shelter and provided her with food and living expenses. I don't know which one she was in but they did her justice. They did her good.

You know one of the reasons I wanted to go [to shelter] was to get away from him and his violence and he had threatened my life and he had threatened my kids and he had beat us up. And I was afraid for our lives, and so we needed that, we needed that, a safe place, a confidential place.

The issue was, how are you? How is your son? And I needed that. You know, I needed to know that somebody else cared, after I got socked in the eye! They didn't say did it hurt, they asked me how are you? And let me take you her, let me get you there. I'm being looked at and then once I got ice for my eye and my son got his diaper changed, now this is the next step.

Several women mentioned that the YWCA helped them to learn about DV and that the support groups were helpful. Other women said that the Salvation Army had been particularly helpful and assisted with restraining orders, supplementing rent and provided other supportive services.

Women singled out individual service providers for praise. These were people who women felt treated them well, were genuinely concerned, understood their situation and took good care of their children.

I had a good counselor, she was really good. She seemed like she was very interested in what I had to say. And this was very helpful. And while I was seeing her ongoing, I was starting to develop more self-esteem and I was starting to have more courage, you know.

They, before I even went to bed that night they have to set me up, where we talked about everything and they told me about different services that they could offer me and you know, they had support groups and they made it feel like a family. Like, you know, I could trust them. And the good thing about it, some of them had been through the same thing I had been through.

Others did not work well

There were several aspects of the service system that participants said did not work well for them. Shelters were singled out as problematic, particularly when there were many rules and there was little privacy. Additionally, there were some women who needed to access shelter but were not able to do so. Some felt that staff at shelters were not helpful or knowledgeable and one participant expressed concerns about confidentiality of information she gave to shelter staff.
Currently right now I’m in [X shelter], they have a lot of counselors there but they act like they don’t know what we’re going through. It’s like they hire anybody off the street.

Well, I never accessed the police but I did use the shelter and it was terrible. I couldn’t stand it. Just to live with other women, a big house, you live with other women with their children and their problems and they expect you to uh, well of course there’s house rules you have to follow.

The counselors that are there are abusive too in a certain sense. The children’s advocates say I don’t know how to take care of my kids. Women’s advocates don’t know how to talk to women.

The confidentiality for me is the main part. When I say something to you privately and I open up to you like I’ve never opened up to anyone else... And I’m telling you all this and you’re going around leaving paperwork... on the desk.

For some, counseling and support groups were not helpful. A specific criticism had to do with continually focusing on the abuse. Others said they did not feel supported by counselors.

We were going there to talk about our problems but not going there to talk about how to build yourself back up.

And for some women, talking it out can help, but not me. For me that’s all I did was talk. I talked and talked and talked and it doesn’t help. You know, I need to read or do something, get away.

Other services that did not work well included police and courts. Women’s concerns about these services mostly had to do with issues of safety. Several women reported that when they used these services they did not feel safe. Protection Orders were not seen as particularly effective and one woman reported that the police did not arrest her abuser who was in violation of her protection order.

Well, for me, I’ll say it was two years ago, I didn’t feel safe even when he did go to jail. I didn’t feel like I was safe... I would feel threatened to see him in court, you know. Or just the fact that he was going to get out of jail, you know, I didn’t feel safe that he could come to my home and whip me. The police tell you to call the shelter everyday, every day, you know. He knows where you are, he knows where the children are... So even with going to jail, going to court, as a result of that I don’t think the safety issue is there at all.

I thought about going to get the protection order. I probably wouldn’t do that again. Because, I mean, it just seems like it just didn’t—if something was going to happen to me it’s going to happen. I know it was my first time ever calling police and stuff like that. Because I had to go and get the protection order and when I did, they took so long that if he attacked me, that would be that.

I’ve only had to call the police like one time. I don’t really understand. I mean, because they say that if he just harasses you or something like that then call the police and they’re going to automatically go pick him up but when he was harassing me and saying he was going to come over and do stuff to me but I called the police and it took them a long time to get there. You know, when they came then nothing happened or he didn’t go to jail or anything like that.

**Importance of same culture/language provider**

Some women said that they prefer receiving services from African American providers. They said that African American providers have a better understanding of black families and they more easily trust and feel more comfortable with them. They also said that black staff can relate to black women better.
You know there are certain things that you may want to talk about or that you would feel more comfortable talking to another African American about. And so that is one of the things that was missing then and that is one of the things that is still, today, missing is that we don't have enough.

I don't want to go to no white person telling them my business. First of all, I got to build up some trust anyway to even talk to you about what's going on with me.

Others said that when you are in need, the ethnicity of the provider does not matter; that it is more important that providers have been through DV themselves and can relate to women's experiences, and that they treat them well.

It wouldn't make a difference to me. Because if you need help, it doesn't matter where you get it.

It's not important to me, you know, being Caucasian, or Black, African American. It doesn't really matter. Really, what matters, [is] if they know what you are talking about, have that background.

We also asked about the importance of support group members sharing the same culture. Most thought that being in a group with other African American women was very important. Participants thought that people of color tend to connect and feel more comfortable with each other and that it can be a healing, strengthening experience to be with other black women.

I agree with both of what you're saying, but then, to me it's important to be with Black women. There is something about us that when we can get together, it's so healing.

I only did it then [went to support group] because it was a requirement for staying in the shelter and I was the only Black person there. Outside of the house there were not, every support group I ever went to there were no black folks there at all. Not even from other shelters, I was the only one. And so I had a hard time.

**Children and teens: needs and issues**

Women were very concerned about the impact on their children of witnessing abuse. They gave several reasons for their concerns. Some worried that boys who witness abuse may adopt the behavior and that girls may think it is acceptable or normal to be hit in an intimate relationship. In addition, women were very concerned about the distress and pain that witnessing abuse causes children and were afraid that the experience may have a long-term negative impact on their relationship with them.

I realized my daughters had really been impacted by this, they had been virtually untreated for the psychological damage. And so we for years, we had to talk through this. Because my second daughter literally hated me. You know because she blamed me for everything.

Some women reported getting their children into counseling for help. Others said that they would like to access counseling but more affordable options are needed, as are more African American counselors.

Women appreciated the childcare they received at shelters, and were thankful when their children were treated well and given extra attention. Some women suggested that there should be more attention to children at shelters. In the context of discussing children's needs participants again raised the concern about providers turning them in to Child Protective Services.
Women's ideas for helping other women

Participants had many ideas for how women in DV situations might best be helped. Most frequently mentioned was housing, including temporary shelter, transitional housing and long-term housing. They said that housing should above all be safe, comfortable, provide stability for children and have supportive services associated with it like support groups and counseling.

Well, I like the idea of the house because some women aren't going to live in shelters. I probably wouldn't go to one. I wouldn't go to a family type—a family shelter. But a house to get away so he won't be able to get you and a house where there were people to talk to—counselors, support groups—maybe daily support groups. Ah—cause, like me, I need support not just once a week. I need it like every five hours.

I probably would want to open up a shelter where people could actually stay in there for however long they needed it; and in providing this shelter, I would want it to be like a hotel. I would want it build like a hotel room and everything and have the lil shower in there with the dressers, make it comfortable, make it a comfortable environment. Then I would have, I would want counselors working there that are able to relate to the things that they're going through to be able to talk to 'em for them to lean on them and to just comfort them in their time of um I guess I would call it distress, cause I was distressed. And one of the major focus I would include in it, maybe no one else would, I would have um group studies where we're talking about the Bible, as in a mate in particular, in the choices of mates that we end up with.

Speaking about my money, I would open many more shelters. You know, there are not, like I said, when I called the first time and I needed to get away, I needed get away right then and there was no space available. So, I would open several more; I would definitely have something in the Black community for sure.

Women also felt that more assistance for their children including counseling and education would be helpful.

I would like to ah—I have a couple of older grandchildren that are unstable through this situation and I would like the setup that they would be able to go to the school where they should probably and give them a nice home where they're stable and take care of all my grandchildren and make it possible to, you know, live a better life and that kind of thing. Make sure they get a good education.

Participants said that women need help with self-esteem and could get this through support groups and activities that help them feel better about themselves. Several women mentioned that it would be nice if women could get their hair or nails done to help them “feel like women.”

And then I would let them come and maybe have a big open house, and let everybody come, and like you say get themselves together, to build up their self-esteem, and just have a meeting like we having right now. And have them talking about how to keep themselves up, not to let themselves go down no matter what. My mom always told me, don't let yourself go down, just look bad just because you feel bad. And I have done that, you know, look bad because I felt, well I said, well, I'm looking like I feel! But that's not good! A lot of times, you know, when you get your nails done, and or you know, get your hair fixed, and then teach your children, so that they can help, you know, lift self-esteem up themselves, they see momma being like that, then that makes them be like that, you know.

A few participants said that more African American providers are needed both for women and children.

I would definitely make an attempt to get more African American counselors within those systems that are already in place, if that just means you know saying here here's a little bit of money, let's hire somebody
Findings: African American NU Final Report

at this site, let's hire somebody at this site, let's hire somebody at this site and make sure that there's at least one African American person at each site that can help us!

Several women mentioned that a multi-service center located in the African American community that provided housing, clinical services, and other social services would be very useful.

Well, what I would do is I would plant a just like the Safeco, Starbucks, the Fig Marsh area like that, the whole block. I would have, I'd build something for where we could go for the partially shelter, partially social services, partially you know employment, partially you know, where could go look for a place to live and every just all the kind of resources in one place, you know and just really focus on resources, and it needs to be in the city.

Outreach

Women said that outreach to other women could happen through flyers and brochures posted at churches and community centers. They also said that it's important to publicize DV through the media and talk about it with others.

But also what I would like to do is to have someone just go around, a public spokesperson, on the national level to go into schools, churches, communities, hospitals, just anywhere that people are particularly targeted African American women, African American children, and I would have them talk about DV and it would have to be somebody like a Les Brown or somebody that would get people really really motivated.

Some said that it is important for survivors to help others in their community who are going through DV.

Prevention

Women emphasized focusing on kids for prevention to try to “break the cycle.” Ideas included:

➢ Teaching boys how to respect girls and women, and teaching girls to be strong

R: And you know, when they are five, six, seven years old, and teaching them to dream. And teaching them that they have to be satisfied within themselves and provide what they need for themselves. If they have this other person in their life, that’s wonderful. But they can do it! And not, I think a lot of times people have, feel that they have to depend on a man, so that’s why they’ll take what they have [AGREEMENT]

R: And but to teach little girls, how to be strong. I would like to see a lot more of that, having some books written… or even a little drill team! We’re going to get strong, they’re strong! [LAUGHTER]

R: Whatever it takes to get them little girls to feel good.

➢ Education about DV in schools, churches and community centers

Well, I feel like we need to break the cycle and to begin breaking the cycle, we need to make our kids aware that domestic violence is there and let them be aware of all types of domestic violence. And that’s where I would start, I would put programming in the schools. Um, and I would do peer type education and things like that.

➢ Teaching children about healthy relationships

...we need to start addressing these issues in the schools, and in the churches, at the kids' level, in their classes. To help the kids to understand that any time you are abused, that it’s wrong. And that, we need to address that behavior. And we need to teach the children about how to have healthy relationships, too. How to build more of those skills.
Help young people to feel good about themselves
AMHARIC-SPEAKING

Community awareness and attitude toward domestic violence

Community

Amharic-speaking women in the study spoke about a general lack of community awareness regarding domestic violence (DV). Women who are victims are reluctant to talk about abuse except to close friends and family. Even then, they will talk only when the situation is obvious because there are clear signs of physical abuse or separation of a woman from her husband.

The only people who know about this problem are our close friends. If you were my close friend, you would want to know why I do not get along with my husband. I tell my problem to my friend.

Most Ethiopian women do not tell anyone when they are abused. They would hold it to themselves for a long time. They won’t talk about the abuse unless they are injured or have bruises on their face.

After we are separated they beg us to get back together again. He comes with his friends and say, “I will never do this again please give me another chance” it is not easy to turn your back when you lived with a person and experience a lot of things together. Our community does not understand what DV is.

One respondent made reference to the fact that in the home country, elders help solve marital problems. But, that resource is not available here. Thus women are now isolated from a support network which might have intervened were they in their native country.

It is better back home. The pressure is less. The old people get the solution for our problems.

The women felt that men talk about DV with other men to cover up their responsibility. Men blame the U.S. system, which they believe has westernized women, for problems in the family, rather than taking responsibility for both relationship problems and for not having other ways to solve the problems rather than abusing their wives.

Men might not like you because they don’t want anybody to solve their women’s problems. They think women cannot do anything. If their women have a baby they think women should stay home. Ethiopian women are shy. She never told about her abusive relationship. Even if you tell about the abuse no one will solve your problem. The only place you can talk about your problem is here at ReWA. They don’t like this. They don’t want ReWA. They think the only purpose you come to ReWA is to put them in trouble. They do not think we come here for help. So ReWA is very important.

Men are the ones who talk about DV to cover up their abuse. They do not tell about their abusive characters. What they do is going to friend’s house and tell them “our women are on welfare. They live in low-income housing. They kicked us out from the house, if you do not be careful, this will happen to you.” They are teaching them not to respect and love their wives. Not only their relationship with their family is messed up, but also they are brain washing other men not to have a good life with their families. They are pretending as if their wives are abusing them. They tell friends lies that never happened. In our community, men have supported each other. When women divorce them because of abusive relationship, they warn their friends not to trust their wives. We are suffering everyday with our kids and yet they are the ones who get support from the community. Men are the ones who talk about their abusive relationship to cover up their act. They say “this is America; it is only for women. We have to pack our cloth and leave the house for women.”
Our men think they could do anything with power. They always think they can do anything they want like back home. They should be given some kind of education. They took it as part of our culture. Our friends are supporting the men and think we are wrong. Thanks God my neighbors are not all from Ethiopia. My friends from America understand what I am going through. I am thankful I live in America. I know what privileges I have.

There is a great need for community education about what DV is. The women felt that other women are used to experiencing abuse, even in the home country, but not used to labeling it as abuse and acting accordingly. They felt that in order to change the situation, women must recognize that being treated poorly is DV and is not acceptable. Women called for education of both other women and of the men.

In this country, we do not see them but, in our country, women get abused all the time. There is an Ethiopian saying that goes like this “Women love to be abused.” We are their wives. We should love and help each other. We should not be abused. Our men believe they are superiors and, women are inferiors. That is not right. Ethiopian men treat women like objects. We have no right. This is not right. The men should be educated.

Family

Unfortunately, children are well aware of abuse in the home. Women recognized that children see and hear abuse by their fathers and that they then become accustomed to a pattern of abuse between men and women. In fact, children may be the only individuals beside the victim and her abuser who really know what is happening behind closed doors, especially in those cases where women are isolated from the outside world.

Our kids are the only ones who know what actually goes on in the house.

In some cases, the husband’s family may support his mistreatment or divorce of the wife. This was not universally stated, but was a particular challenge for some women.

His families would tell him why don’t you divorce her? She doesn’t have education. She doesn’t know anything. They want to push you out from your house.

What abuse looks like

Descriptions

The Amharic-speaking women, who are mostly recent immigrants to this country, spoke of a problem not mentioned in many of the other cultural groups. This is something called “false divorces.” In these cases, men divorce their wives (many of whom have come to the country on a fiancee visa), in order to access the welfare system. Sometimes women are aware of what is happening. For other women, they are tricked into signing divorce papers because they are unable to read. A woman may be told she is signing insurance papers or some other official document. Husbands then expel wives from the home, or leave themselves, in order to bring another young wife from the home country.

These men change from one woman to another.

Here we are in government housing being baby sitters. But their friends giving them an advice to go back home and get married. When it is time for her to come, leave the house and rent an apartment.
They are so cruel. Some men have their wife sign a divorce paper by saying that it is an insurance paper that needs to be filled out. Or they would say they got into an accident and that we are going to get money from the insurance company. Most refugee women do not read and write [English] they trust their husbands and sign the paper. At last they go back home and get married to very young girls.

Economic deprivation is another hallmark of an abusive relationship; women must exist on welfare while husbands make money but do not contribute to the family economy. This occurs in both current marriages and those which have ended in separation or divorce. Women are then forced to provide the entire family sustenance through their welfare checks.

My husband works and makes money for himself. He never gave me a penny.

He never cares for his own kids. Men are free. Some of them buy two town cars [taxis] and make a lot of money while we are suffering with little income. They are living a good life.

If I had a job, I would not have been out of my house. He knows that. I don’t have a job so I can’t afford paying my rent.

In these relationships, often only the women care for the children. Men, busy with work and other priorities either never take on or abandon responsibility for children. This includes economic responsibility, training, and daily care of children of all ages. Women spoke of how this increases their stress and burden, but also of how the children suffer without a father in the home to provide a role model. Furthermore, this can begin even before the woman delivers her first child and take the form of abandonment when women become pregnant.

Isolation from friends, neighbors, and others is both a form of abuse in itself and a means by which other forms of abuse are perpetuated. Women spoke about being locked up in their houses without access to the outside world. For some this begins as soon as they arrive in the U.S. Women may have been told that it is unsafe for them to leave the house without their husbands. Thus, playing into their fears of an unknown place, the men manage to keep them isolated from social support and resources.

We Ethiopian women do not get enough information like the men do. The reason is because our husbands do not let us socialize with our neighbors. They are the one who get more information and have more friends. They know the law very well. We stay in the house with our kids and cook food for them. We are hopeless. They beat and use the system. They hurt their women.

When those women came to the U.S., they lock the door on them. The women do not know what to do all day locked in the house by themselves. The newcomer women do not know whom to talk to because they have never been allowed to do anything.

When they bring their new wives what they do is they hide them not to meet their old friends.

Our men have the ability to get along anywhere they go so they learn the system right away.

I was afraid of his group. He has a lot of friends to support him. They lied for him but the police saw blood on my face, when that incident happened. His friends tried everything to let him free. My only friends were my kids. All our friends were turning their back on me.

In keeping with the principle of isolation, many women are forbidden to attend school or get a job. Without a chance to develop skills, the isolation perpetuates itself and getting off of welfare is nearly impossible.

They do not let the women to go to school. They make them stay home.
Since you have language, education and car problem, all you can do is gather your kids and live on welfare.

For immigrant women the threat of deportation is a powerful tool of abuse. Many women do not fully understand the immigration system and have little knowledge against which to compare their husbands’ threats. Because the women have not learned enough about this issue prior to arrival, they are at their husbands’ mercy when threatened with deportation.

They threaten their wives that they will get deported because they do not have a green card. When she came to this country, before she knows the city they threaten her that she will get deported. They do not let her know anybody.

They bring the women as a maid and used them for two years. If you tell them you are going to enslave they threaten you they will send you back home. There are a lot of problems.

The most obvious form of DV mentioned was physical abuse. As in the other cultural groups, many kinds of physical abuse were mentioned.

When we come home if we sit down together and ask them to do something or help us with housework they get mad and hit us.

Yes, my ex-husband abused me. He hit me quite often. Once I got my eye and lip injured and was hospitalized. When I got out of the hospital, I did not know where to go. The hospital sent me a big bill. I could not afford to pay the bill. I did not know how to speak English. I was in the middle of nowhere.

Women spoke about being expelled from their homes and how incredibly frightening this was. For Amharic-speaking women who have no support system in the U.S., few experiences or skills, little money and little ability to speak English, one of the most scary threats is to be sent out of her own home with nowhere to turn.

When I was abused, and kicked out of the house by my husband, it felt like the end of the world. For us it is like living in the dark. When they abused us, it is really living in hell.

**Characteristics of Batterers**

Certainly there is no one batterer profile for Amharic men. However, women mentioned a number of behaviors exhibited by abusive men. These behavioral traits included: being unwilling to share money with wife and kids, lying about their abusive behavior to friends and bad-mouthing wives to friends, a pattern of changing wives multiple times, manipulation of the system which allows them to take advantage of their wives’ illiteracy, and unwillingness to pay child support.

They do not even remember where we came from. I mean before we came together to America, we suffered together. We worked hard together. They don’t care for their wife sister. Once America is a free country all they do is making them happy. When men complain about their relationship to their friends, they would tell them to get a divorce and get another woman from back home.

Men have the privilege to relax in the house. They can humiliate us.

**Responding to abuse**

Women respond to abuse in various ways depending on their backgrounds and resources. Their responses may be feelings or actions.
How women feel

In general, Amharic women spoke only about negative feelings in response to the abuse. Although in some other cultural groups, a few women eventually became empowered and found inner strength in response to abuse, Amharic women spoke only of their fears and self-doubts as a result of being in the abusive relationships.

The women cited a number of fears including being afraid to use the law to address abuse both because they did not understand the law and because they had accepted and internalized their husbands’ threats regarding deportation. They also mentioned fear of their husbands’ friends and networks. Whereas the women were isolated and had no support system of friends or family, the men had well-established ones they could call upon to retaliate and pressure the women.

I was afraid to appear for the hearing. I was afraid of his group. He has a lot of friends to support him.

Women also described feelings of depression and despondency “as if you are at the end of the earth or in a living hell.” Again, the fact that they had been isolated and had no support system like what they left behind in the home country meant that they had no means with which to manage their feelings or pull out of the depression.

It felt like the end of the world. For us it is like living in the dark. When they abused us, it is really living in hell. I don’t know what I have been through. It is bad.

Staying in the relationship

A long history together (sometimes dating back to before emigration) is hard to ignore and throw away. For those women who came to this country already married to their husbands or who had been here married to him a long time, it was very difficult to give up on the relationship. This was compounded by men’s promises that they would change, and pressure from men’s friends or family.

After we are separated they beg us to get back together again. He comes with his friends and says, “I will never do this again please give me another chance” It is not easy to turn your back when you lived with a person and experienced a lot of things together.

Seeking help-deciding to or not

For those women who sought help, it was a long process which included reaching a breaking point and then becoming educated about resources and options. Women told of learning their rights and refusing to be abused further. Finding out about available services made seeking help possible. Reasons for finally escaping the abuse varied; one woman said that it was the physical abuse to herself and her son which was finally the last straw.

Now I know my rights so nobody will abuse me like before.

If I knew about the service before I would not sit there and be abused for a long time.

As mentioned above, there appears to be a general lack of community awareness among Amharic-speakers regarding domestic violence. Furthermore, the small size of the community means that women are concerned that even friends tell everyone about their family business. This can be a barrier to seeking outside help.
Survivor needs

Women outlined diverse needs which correlated directly with the forms of abuse mentioned above. These needs were consistent across focus groups and reflect the fact that they are cut off from any kind of cultural or familial support system.

Description

Many women mentioned basic economic needs. They often lack money to cover expenses because welfare and child support payments are not enough and because their husbands refuse to share any personal income with the family.

He never gave me a penny. When I received welfare money, I have to pay rent and cover other expenses.

When you get injured, you need to go to the hospital. After that, the bill will follow. When you get injured, you have to stop working. You cannot pay your bills.

In keeping with the theme of isolation, women spoke about needing transportation for themselves and their children. Women had neither driver’s licenses nor cars and without adequate English skills or money had no opportunity to change this.

When I got divorced, no one offered me a ride. . . . I rode a bus all this time.

It is like being homeless. The American government has been helping me with a lot of things. I do not want to complain because I do not have a car. When a person has kids, he should have money or a car in order to survive. I am a refugee. I do not have all this but it taught me how to survive because I have no choice.

Ignorance of the legal system means that women were incapacitated because their husbands were able to manipulate the system and they were not. In other words, men were able to divorce their wives, re-marry and keep their money because women lacked basic education about rights and how to work within the American legal system.

Beyond education about rights and the legal system, women mentioned the need for legal assistance to obtain restraining orders and/or divorce proceedings.

It is better to educate [us about] the law. We don’t know the country’s law so if someone leads us what to do, how to follow the rules, it will be very helpful.

If it was in our country, all this wouldn’t happen. All this happens, because we live in America. They say, “this is America.” With this system we are crying everyday.

My main problem was to get a lawyer to get divorced.

As the primary child care providers, women are limited by the burden of taking care of children when seeking help. They noted that a great need is for safe and adequate child care so that mothers can get help. Other basic needs such as food and shelter were also cited. This was particularly true for women who had been isolated and prohibited from keeping personal income.

Literacy and English language classes were mentioned numerous times. The fact that women cannot communicate in English here means that they are unable to seek out help, and even if help is found they are often unable to communicate their problems to agency staff. Furthermore, lack of English skills prohibits women from moving forward in terms of economic independence and housing.
If you can be able to educate us how to get different services and teach us the English language it will be easy for us.

Women cited the need for knowledge about which services are available and how to access them. This was a very important need for those women who were able and ready to leave an abusive relationship.

Availability

Women described how help is available from the U.S. government (welfare, legal assistance, police) once women find out how to access it. But, women’s isolation often prohibits them from finding available assistance.

For women with no financial resources, unfortunately help is not always available. For example, police who respond to a call are not able to force the husband to provide money to the wife. This raised frustration about what the system can do with respect to men’s refusal to share economic resources with their wives.

I had no money. I had no choice but to call the police [911]. They came and asked me what happened. I told them what he did to me and asked them to get my money from him. Unfortunately, they told me that they could not do that. They advised me to get a restraining order from court.

ReWA was mentioned repeatedly as a source of available help to provide links to food, shelter, money, legal assistance and information.

Access

A number of things serve as barriers to accessing resources to meet needs. These include: a sense of responsibility to past history with husbands acts as a barrier to seeking divorce and leaving the relationship; reluctance to talk with fellow Ethiopian women about abuse keeps women isolated from help; lack of transportation is a barrier to accessing services; peer pressure from the community limits access to services; lack of money prohibits women from accessing legal services.

The problem is we Moslems in our culture have to cover our faces. We have to wear long dresses. We cannot go out and work. We are like a slave in our own house. When we get together with different friends, they think we are flirting. Not only the husbands think that way, but the whole community talks about us. We cannot get along with our husbands. Our husbands have peer pressure from the community.

We Ethiopian women do not discuss about our abusive relationship. Even if she got injured and bleed, in our culture she cannot talk about it.

Despite these barriers, there are a number of facilitators which have helped these women access resources to address needs including: ReWA (a doorway to access numerous services and moral support provided by ReWA advocates strengthens women’s resolve to get help); welfare helps women support their children; American neighbors (not of Ethiopian origin); friends; and ESL classes.

But the government helped us. Well, they got help because they have children. . . . Because of my health problems I couldn’t work so I had to be on welfare again. Thank God I get help from the government.
Use of services

Awareness of domestic violence services

- Just as women are largely unaware of what DV is and how to deal with it, Amharic-speaking women are generally unaware of specific DV services. This is especially true for women who are new to the U.S.

I believe most Ethiopian women do not know that there is help out there. They do not even know what ReWA is. There are men who do not want their wives to go out of the house. They do not want them to go to school. If their wives know how to speak English, they think it will be a problem. They think their women could call the police. Women do not know where to go. They do not know how to speak English to communicate. Because of their husbands, they do not get any help.

- ReWA is the primary agency about which focus group participants were informed. Over and over, women cited ReWA as the place to go for help. While they rely on welfare for economic assistance and the police as a first step, they repeatedly noted that ReWA was the primary source of help. Women find out about services through friends, ReWA referrals to other services and school/ESL referrals.

The only help I knew was to call the police. When I first tried to call the police, my husband tried to take the phone away from me by force.

We go to ReWA because we have nowhere to go. Some men when they try to come back to abuse us again, ReWA is there for us.

Use of services

Participants cited the following agencies or establishments as avenues for assistance:

- ReWA: emotional support, help with divorce paperwork, help with other legal paperwork (e.g. immigration papers), referrals to other services, parenting classes, English language classes, money to pay medical bills, transportation and food.

- Courts: divorce, child custody, protection orders.

- U.S. government: welfare payments, medical coupons.


- Shelters.

- Police.

Access issues

- The primary issues limiting access to services are the same as those limiting access to other kinds of help: limited knowledge about services and isolation.

I believe most Ethiopian women do not know that there is help out there. They do not even know what ReWA is.
How services work

Women praised many services, which worked well for them once they discovered the services were available. Women were genuinely grateful and thankful that they live in a place that provides this kind of assistance to women experiencing DV:

- Women primarily reported about the help they had received from ReWA which really met their needs.

  ____ gave me a lot of support. She gave a moral support when I told her what happened to me. ... She gave me an advice to be strong. ... She helped me find a job. She gave me a moral support.

- The service is so great. Without it, we would have been homeless and being on the street. I got every help, I needed thanks to America.

- ReWA helped me get my [immigration] records from New York.

- The only place you can talk about your problems is here at ReWA. They don't like this. They don't want ReWA. They think the only purpose you come to ReWA is to put them in trouble. They do not think we come here for help. So ReWA is very important.

- With the help of a sister I went to the neighborhood-housing program. She helped me everything was straightened out. I got what I needed.

- At that time they did a lot for me. They fulfill all my needs. I did not know what to do when I had a problem. I didn't know what to do but they helped me with everything.

- I went to ReWA and one sister helped me with interpreting. I told her what I needed and she was very helpful. It was a big help for me. I don't know the language. They helped me with everything.

- They helped me find shelter. ... I stayed in that shelter for six days and left. After that I started getting a peace of mind.

- This organization [ReWA] does miracles for us. We are fortunate to get all kinds of help. They hired an interpreter for us and also do other things. Therefore, we are blessed. Women in this country are fortunate compared to where we come from.

- My reason is that I have been in different shelters moving from one to the other. ReWA was helping me to stand up on both feet [they helped me out in many ways]. I decided to find a job and save some money and have my own place. With their help, I am now having a better life.

- Women also praised the welfare system.

  Because of my health problems I couldn't work so I had to be on welfare again. Thank God I get help from the government. We raised our kids very well. ... Even though it is not enough, it is better than being on the street.

- When I got pregnant I did not have assistance. When I applied for low income I was able to get a medical coupon. That was a big help.

- Some women found the shelters to be very helpful. For these women, shelters provided the basic needs of food and housing but also the emotional needs of companionship and support which women lacked without a network here of family or friends.

- I was at the women's shelter. People thought that shelters are only for drug addicts or homeless. Most Ethiopians think that way too. When I started living in the shelters, I found it more than I expected. It felt that I am with my immediate family. We helped each other. We also discussed our problems.

Only two services were noted for not working well including:
Findings: Amharic-Speaking NU Final Report

➤ One woman reported contact with an unethical lawyer who provided poor service.
➤ The child support system does not adequately pursue husbands who are making more money than they report. This was echoed by several women who have struggled financially while their husbands have plenty of money to support subsequent wives and families. Women felt that the American government should do more to track down husbands, research their finances and require diligence in paying child support.

Importance of same culture/language provider

Because poor English language skills are one of the ways that men isolate their wives, providers with same language skills are especially needed for this community of women. While women were grateful for any assistance they could get, they noted that access is limited by their language problems. Thus being able to speak with someone in Amharic meant being able to learn about and understand the system and thus access services. Women did not speak about needing someone with the same cultural background. Instead they focused on the need to be able to communicate clearly.

Those who are having this kind of problem are the ones who cannot speak English and do not know what to do. So it is very important to have someone who speaks your language.

Children and teens: needs and issues

Most of the women who participated in the study had children and were intimately aware of how children have additional and sometimes very closely linked needs. As mentioned above, adequate child support payments are a primary concern for women. In addition, support to raise healthy children was noted. This meant creating a healthy environment where children can be protected from gang involvement, pressures to use drugs and alcohol, and cyclic behaviors based on exposure to DV. Some of this is based on the fact that women who are no longer in abusive relationships, and some who still are, often live in neighborhoods where they feel their children are at risk. Women called for: Additional funds to support children's needs, education for children about healthy male/female relationships, and safe, affordable child care.

Our brothers are becoming gang members. They do not have father in the house; we could not control them. They are going to kill each other. The system is so hard for us to understand. The government knows that kids will be gangsters. When there is no father in the house. They will be killers.

Our kids have problems dealing with us. When we argue and fight in front of them, when they see our husbands humiliating, beating and cursing us, they will get affected. They will learn everything that they see. When they grow up, they will become aggressive. I cannot raise my children by myself like this.

Do you know why kids are getting bad behavior? We raised them in housing projects where there is no after school activities. When they hang around with troubled kids, they learn a lot from them.
Women's ideas for helping other women

Outreach

Amharic-speaking women had a number of ideas for how to provide more outreach. This was with respect both to basic education about women’s rights and to more specific outreach for women needing to access services.

- Use the media, including radio, to do outreach.

*Here in America they should be able to teach about women's rights through the media.* . . . *When women know more about it they will be able to access the service. They will also know their rights.*

*If you have a radio program and inform people your telephone number, what kind of service you are giving or what channel you are going to be on. That way she would be able to know what channel you are going to be on.*

*It will be great if we have a community radio station that will teach what DV means. Not only for women, but also especially for men in our community. I think it will be very good.*

- Put pamphlets in churches and places that women frequent including Ethiopian restaurants.

- More health clinic referrals should be made to service agencies.

- ReWA should advertise their services more. The participants did not have specific ideas for how ReWA would increase outreach, only that it needed to be done.

*ReWA should give out more information about DV for the Ethiopian community.* . . . *There is a problem among Ethiopian women to get help because we don’t know where to go. We do not know ReWA's address.*

Prevention

- Education was the primary way in which women felt that DV could be stopped and prevented. This meant education of victims and perpetrators as well as education for the community, including Ethiopian men, about women’s and children’s rights. Women thought that community meetings and church sermons should be used to educate and inform both men and women throughout the community of the problem and the need for community action to reduce DV.

As with some of the other immigrant and refugee groups, Amharic-speaking women noted the need for education of women before arrival in the U.S. regarding their rights here.

*By educating the community. The problem is the men. They should be educated not to abuse their wives.*

*There should be a way for these women, I mean for newcomers, some kind of education that there is help out there for them. Before they come to America you should be able to reach these women and teach them how they can solve these kinds of problems. It would be perfect if they can be reached before they get their visa in Ethiopia. If they come here without any knowledge their sponsors will lead them their way.*

- Marital counseling and support groups for men and women were also cited as a way to prevent DV. This ties in closely with the need for education and for
community awareness. However, women did not speak to how responsive men might be to these kinds of intervention.

*Ethiopian men should be taught how to live together with their kids. They also should get marriage counseling before going back home and getting married. They should be educated to respect their wives.*

*There should be a support group for men in so that they can learn how to respect their wives and also for women to respect their husbands, too.*

- The women also spoke strongly of the need for men to be held responsible for their actions. This reflected personal frustrations for how men had gotten away with abuse, but also the need for examples to be set in the community.

*Someone should be able to teach Ethiopian men and women how to get along with each other. If men continue to abuse their wives, they should be held responsible for their actions.*

- Prevention also includes creating a haven for women who are being abused to prevent further abuse. Steps to address that would include: governmental enforcement of child support requirements; transportation for women who have none (buy a van to provide transportation); English language classes, literacy classes and job training; day care for women who want to work or attend school; shelters; and jobs (including shift work and possible day care facilities where women could both work and raise their children).

*They are making a lot of money and they never reported their total income. This has to be stopped. They should be investigated on how much they are making. They are not paying enough child support.*

*I mean many of us speak English but cannot write. If they can write they cannot speak the language that one problem can be solved if you work there. After that you do not ask any help from the government you will be free. You can grow easily.*

*I would help all the women who are in deep problem by building more shelters because I know what my needs were [when I was abused].*
CAMBODIAN

Community awareness and attitude toward domestic violence

Community

When asked to describe Cambodian community awareness and attitudes toward DV many women reported that DV is regarded as a “normal” issue within a family. They said that it is not considered an unusual occurrence. Even though women stressed that the community thinks it is not right to have violence in the family, women felt that it is not thought to be a big problem.

*They think it’s just normal that there is this struggle between husband and wife, boyfriend and girlfriend. They consider it normal.*

*Because in Cambodia, people understand that it is a normal issue for everyone. It is not important. Because when someone in Cambodia has an argument in the family, everyone thinks it is not important, not necessary. Because this issue is so normal throughout the country and that’s how it is.*

Women said that in the Cambodian community it is often thought that discussion of DV should be kept within the family, and outsiders should not know about the family’s problems. Problems are thought to be between the husband and the wife. However, women said that they might talk to a close friend for support.

*Our family has a fight. We can’t let the outsiders know. We just want to keep it in our family.*

*We don’t like being beaten at all but we don’t let other people know. The husband gets mad then we have a fight and the outsiders don’t care to intervene with our matter.*

Participants said that women are told to be patient and endure the abuse. Additionally, DV is often viewed as the woman’s fault. There is a strong value on keeping the family together and divorce is thought to be detrimental to the family and the children. Some said that divorced women are viewed with disapproval in the community.

*R: Whereas the good people would say not to fight with one another as husband and wife. Live in harmony with one another when you have children already.*

*R: Yes, that is right.*

*R: Some people only educate the wife but not the husband who is the abuser. When the elderly leaves, the husband abuses the wife again.*

*R: If they are elders they say "endure".*

*R: Endure according to the karma [karma is fate according to Khmer custom and religion].*  
*R: Our Khmer women must endure according to their karma.*  
*R: If we endure according to our karma we will certainly die.*

*R: That is right.*

*R: For me they say if I can endure for 15 years why can I not endure for another 15 years?*  
*R: That the idea they give me.*  
*R: If take each other let take each other for life.*

*Normally our Khmer people do not want to divorce one another. If they marry one husband they want to remain with that person forever.*

Some said that the community’s attitude is based on the belief that the husband is the head of the household and women are “below them.” Many women said that in
Findings: Cambodian NU Final Report

Cambodian society men may do as they please while women must follow strict guidelines for their behavior.

For husbands and wives, our Cambodian society, the woman has to do everything for her husband, the husband does something to the wife, the woman must do the best she can for her husband. If her husband has 2 or 3 women, it is thought of as a good thing, or not as a transgression against anything. Just that. If a woman does something, like, it's not necessary to say that she has a boyfriend outside, she just wants to get together with other women, she can't do it. For a married woman, she can't. The oppression of Cambodian society is that they think that women can be victimized, whatever, that's OK. The custom is like that. But for us women, I think there's real suffering. But there is not choice, because the Cambodian custom is this way already.

If husband and wife argue, in Khmer society, they mostly put women at fault. Because men work more than women do. They earn income to feed the family, the kids and the wife. They control the household and all the works. Therefore when argument takes place, women tend to suffer emotional pain because we can't overcome men. Whatever they say, we must listen and follow them.

R: They consider it as their family matter and a normal one.
R: That is right.
R: One she is beaten she will be beaten up again. They want us to listen.
R: In our Khmer society, in our Khmer society a woman is considered to be below a man and...
R: Below a man.
R: Most of the times they think that women are wrong.
R: They want us to listen them.
R: Yes.
R: But the truth is that women are not wrong.
R: They may want to do like in the society in Cambodia. They want...
R: To remain sitting by folding the legs [proper way for a woman to sit down on the floor in the Khmer custom].

There was agreement that in Cambodia, the problem would be addressed within the family and the legal system would not be involved. Community members or the couple's parents would advise the couple.

In Cambodia elderly community members or the couple's parents might intervene to help solve the problem.

What abuse looks like

Descriptions

Most women talked about DV in terms of husbands abusing wives although some also mentioned “oppression” by mothers and fathers-in-law and other older family members. One woman said that she suffered abuse by her daughter-in-law. However, most of the descriptions of abuse were in the context of marital relationships. Women described a great deal of emotional abuse which included put-downs, swearing and calling names.

My husband has oppressed me. Emotionally, my husband often blames me. I never made any mistake and sometimes he never supports me emotionally. He just keeps putting me down and saying that I don't work, I don't do things properly. He is putting us down and continues to oppress us.

Additionally many women said that husbands try to control them and keep them from working, going to school, learning English, and developing skills for independence.
One woman described the situation of her friend who is unable to drive and needs to rely on her husband to drive her to the store to buy food for the family. Sometimes he takes her and other times she and her child have nothing to eat. Financial control was discussed by several women whose husbands do not let them participate in household financial decisions and do not allow them to have money of their own.

*My husband is similar to hers. I don't really know about other people problems. But for my own problem is quite similar. Since I have been living in the U.S., my husband feeling is not the same when he was in Cambodia. Work and money [husband] took care of that. I stayed home taking care of the kids. But we both have to work here. My husband emotionally and physically mistreats me. First emotionally, he doesn't want me to go to school. I go to work and can't speak English. He is the one who controls the amount of money we have. I don't know how much we have and what we suppose to have. I don't know just like American would say, "Control everything". I don't like living with him longer. He doesn't allow me to go to school. He doesn't allow me to have friends and he doesn't teach me how to deposit money in the bank. He doesn't let me know what the income and expenses are. When he wants to send money to his relatives, he never tells me. He never talks with me about anything. When he comes back from work, he would starts a fight. Something is slightly wrong, he would swear using bad words without understand my feeling and...*

*Everyday next to my house I see the wife is not allowed to learn how to drive. When she needs to buy food she asks him to help drive her if he is pleased he drives her. If he is not pleased she and the children just stay quietly at home.*

Husbands’ gambling was a theme in several of the focus groups. Women related it to DV in a few ways. It was seen as an issue of financial control and neglect; the husband uses the household money for gambling and neglects his wife and children. A few women said that men take their wives’ income and use it in this way. Additionally some women reported that when some men lose in gambling, they beat up their wives to get money from them.

*The husband gambles in the area of horse racing. When he runs out of the money, he starts to intimidate her to get money. Should he not get the money he would beat her up.*

*Like what you say, the husband gambles in card games. He does not give the money which is earned from his work. He goes out without returning home. He gives the money to his girlfriend. Forgetting his children and his wife. After having spent all the money he abuses his wife again.*

Several women described their husbands’ relationships with other women as a form of abuse. They said that some husbands have girlfriends on whom they spend the family’s money. Wives have little say over this type of behavior.

*I have a friend who is abused by her husband. She is not allowed to go anywhere. In the dawn she is order to cook foods and bring them on the food tray to him as well. She has to sit down by folding her legs as well [proper way for a woman to sit down on the floor in the Khmer custom]. She has to iron his clothes when he is going places. She has to finish washing and ironing all clothes. She has to call him in a polite manner. She forbid from saying harsh words. After living in the U.S. for 10 years she never knows any park. She is prohibited to go out. One day he has a girlfriend. She would not dare to say anything even he has another woman. He brings that girl to sleep in their bedroom. He lets her sleep outside. She would not dare to say anything. If she does he beat her up while she has to sit in a leg folding manner.*

Women also described various forms of physical abuse such as hitting, beating, threatening with a knife.
R: The wife stays home and the husband goes to work. Meals are not ready.... When he returns home, dinner is not ready then he gets mad. He is tired and hungry and the wife is careless about dinner.

Threats and harassment of the woman, her family and those who try to help was another common theme.

The husband goes around gambling, drinking and having a woman. The wife definitely can not say any thing, definitely can not say any thing. He steals even her necklace and sells and accuses the child for stealing it. That is one of my friends. One day she asks me to help and her husband says that if I dare to help her to get divorced he would give me, the helper, a problem. From then on she stops asking me to help. She is afraid as well.

I want you to teach me because having been in the U.S.A. I do not know their laws much at all, that is reason why I am being abused. Because he knows English and I do not. He keeps harassing me so that I cannot live peacefully.

However the woman is afraid of her husband who threatens to kill her. Like me, if you dare calling police I will kill you.

A few women described abuse involving in-laws.

Mother in-law doesn’t like the daughter in-law and daughter in-law doesn’t like mother-in-law then the problems start. This is because they don’t like us. If we do something right, then they would say it is wrong because they don’t like us. Such as hitting. They hit us and mistreat us emotionally, therefore they cause us to break up with their sons.

Now she sponsors her mother to come to live with them. He scolds the mother-in-law and says because of the old grandmother that is why he is unable to be intimate with his wife any longer. When he says that she, the mother-in-law apologizes by saying "I apologize because I interfere." In facts she is innocent. She is just arrived from Cambodia not quite one week yet. If she, the wife file a complaint he will kill her and her entire family members. Yes, yes I try to help advise her not to absolutely hide the incident any longer. He plays around with other people but for his wife he belittles her to have a face like a monkey face [derogatory words in Cambodian culture, meaning to look down on someone by comparing that person’s face with the face of an animal, a monkey].

Some participants also noted that living in the U.S., women are often working outside of the home for long hours. The traditional expectation that women will do all of the cooking and housework can be oppressive given all of her other responsibilities. Some women defined this as abuse:

After I got married I moved in with my husband’s family and I tried to do everything as best I could in order to solidify my marriage so that the love would last. Because I really loved my husband. Even though the relatives or my husband’s parents would do something, I tried to endure it patiently. I had to go out and work. But sometimes, this is what I know was oppression, sometimes it happened that I was working and my mother-in-law called and told me to prepare some food. Yes and sometimes a visitor came, one or two people and I was told to fix a meal of them. And for myself, I worked ten hours a day and come home and have to fix a meal. Sometimes I’d be preparing the meal and they’d come and ask, "Why are you taking so long?" This is something that was really the most hurtful...

Alcohol and drug use

Alcohol was mentioned by some women in connection with abuse. They said it is an important cause of family breakup. Drug use was not mentioned by any of the participants.
Characteristics of Batterers

A few batterer traits and behaviors were mentioned in the context of describing abuse. Mostly women said that batterers feel they can do anything they want, they look down on women in general, and in particular their own wives, and they think they are always right.

The American people do not understand what the Cambodian’s manners. It is easy for him because he knows English. He looks down on women. Here he looks down on his wife who is ignorant therefore this husband often thinks that he is egoistic, he can do whatever he wants. Therefore he thinks that his wife is incapable of doing anything.

Here they think that only them are right.

Responding to abuse

How women feel

Women said that their abusive relationships left them feeling fear, pain, broken-hearted and depressed. Some women felt fear when their husbands said they would hurt or kill them, their family members or their helpers if they told others about the abuse. A few participants said that Cambodian women face difficult choices because they want to do the right thing for their families and communities. Others in the community may regard calling the police, leaving your husband or divorcing with disapproval. This places additional pressure on women who are attempting to cope with family violence.

R: Our Khmer custom doesn’t like the fight, reporting the husband to be put in jail then they will say we are not good.
R: Evil woman.
R: A woman who wants to have more than one husband. It is not like America. You can get divorce today and then get married again tomorrow in this country. We are Khmer. We only want one husband. Even though the husband hit us breaking our head bleeding, we still tolerate him.
R: What about our country?
R: If we suffer the pain, then we don’t want to stay.
R: No, in our country is not like that. The custom in our country, women only want one husband. Not 2 or 3 husbands, then people would say she is not a good woman. They don’t even like her to stay in the same village.

Actions women take

Several of the women who participated in Cambodian focus groups had sought help from ReWA for DV. Others were ReWA clients in other programs such as ESL. There were two main courses of action that women described to respond to abuse. One was to go outside of the family and seek help from a friend, professional or agency (ReWA). The other was to use personal coping skills and try to get along with her husband or other family members. For these women, seeking helping outside of the family or community was not an option. They specifically said that they would not ask for help or let outsiders help. One woman said that she would only accept help from her children. Participants said that talking about your problems with others is at odds with Khmer customs.

R: Our custom is to not have problems, so we hardly tell anybody else. That’s a custom that is not good.
R: And that custom affects me too, when I have had this problem, I've hardly [ever] looked for someone to help either. But to solve the problem I've got my own way too. I recite [Buddhist] mantras, like her too.

When I have problems I do not ask them to help me because it is one of our Khmer customs. When we talk with others they look down on us therefore... since 1974 I never talk bad about my husband but when it is time to talk I talk after I am divorced.

I never let anybody help me except my children. They saw when their mother was abused. They help me.

Staying in relationship

Women expressed a strong desire to try to work out problems with their husbands and try to avoid getting divorced. For the sake of the family and the children most participants thought that it is best to try to work problems out if possible. They do not want children to be without fathers. Another reason women said they stay in relationships is because they do not want others to know about their family problems. Some women, however, said very clearly that if they were not able to work things out with their husbands, they would seek divorce. They felt that this was an appropriate response if other methods didn't work. Another important factor that influences a woman's decision to stay in a relationship is fear that her husband will kill her if she leaves.

When I return home and I see my children I do not want them to be separated from their father. I rather try to endure to live with him if I can. If I cannot I will try to free myself accordingly.

Sometimes when the husband is mean, abusive and unbearable, divorce is the only option...If we can endure to live with the husbands then do so. If we cannot endure then we depend on people to help us, that is all.

They are very afraid [women who are being abused]. Both they and I are very afraid, "if you dare call the police I am going to kill your entire family."

For me, I am not afraid, I do it.

For me also, my husband says if I dare putting him in jail when he gets out he kills me. Then, I ask him to get divorced. He says before getting divorced plan to buy a coffin beforehand. He just says like that.

Seeking help—deciding to or not

There were several main reasons women discussed for deciding not to seek help. For many women, their belief that seeking outside help is not the Khmer custom was foremost. They do not want to risk disapproval from others in the community and do not want outsiders to know about their family’s problems. Additionally, women reported that such help was not available in Cambodia and women would rely on other family members to help. Therefore, calling police, using the court system and seeking help from community-based agencies is a new experience for many women. Again, fear of retribution from the abuser, not only against the victim but also her family and those who help her is a major consideration.

I like to be clear, I remember a person helps me find a lawyer but I stop him instead because my husband is looking for the person who helps me. He wants to kill him. I stop, yeah, because he does not want anybody to help me in that issue. I then stop and find this woman association. I then come to the place directly.
Findings: Cambodian NU Final Report

...in Cambodia, if the husband and wife fight we suffer the pain and only the parents can help resolve to get us back together. We live in American, there are centers to assist us. In Cambodia, there are no such centers to help us.

Survivor needs

Description

When describing their needs, many women said that they wanted help resolving family problems. Many hoped that helpers could assist with keeping the family together. They wanted assistance with getting their husbands to treat them better and hoped that a helper could educate their husbands so that they will treat their families better. Again some women said that if it is not possible to resolve the problem, they would need help to divorce their husbands.

According to my idea, if the husband and wife disagree then go to the center to seek help. After educating the husband and when he changes then we can resolve the problem.

Have them help us to get back together as long as they don’t mistreat us again in the future.

First, get them to help the family to get along such as going to counseling. Solve by this method.

Ask for divorce. Can’t tolerate the pain and divorce is the only route. I can’t live with him. I want a divorce.

Women also expressed the need for help to keep themselves and their children safe. For some women, this consists of help calling the police, help with doing paper work to get a protection order and help navigating the legal system in order to gain protection.

Several matters. First is safety for my children and myself. Sometimes, he is mad and come over to look for trouble, beating or shooting us. I don’t care much about myself. I most care about my children because they are young and innocent. Second, emotional help. When we are frustrated, we don’t know where to turn to for help. I have no parents or relatives and I would turn to the outsiders for help.

We want them to help such as removing the husband from the house. Preventing him from coming to squabble, harass, beat us up and interfere with the children.

That is right. We want them to help. Unless they help. We let them help to call emergency secret police and report to them if he is still remaining and violent in the house.

For example; this case has to go to court, we will go to them to have them help us with the paper work because we don’t know how for protection order we don’t know where to ask for that either. So we go to them for help then we are happy because they provide us all the help needed.

Another need was for helpers to facilitate self-help. This was a strong theme throughout the Cambodian focus groups. Women want providers to facilitate their own learning so that they can help themselves in the future. The example below describes how women envision this type of support:

We wanted to go to court. Then they drove us to court. This is just like a first lesson to learn. Now we know where the courthouse is. First we want to help ourselves. Such as we need them to help us finding a school to learn English. They take us to that school, then next time we can go there by ourselves. For example that we don’t know how to drive, they teach us how to drive. Then we will know how to drive and we will continue to learn more things.
Another area of need was help with learning the laws in the U.S. Some women thought that if they knew and understood the laws regarding DV that the abuse would stop. Women said they often feel at a disadvantage because their abusers tend to speak more English and be more knowledgeable about how things work in this country.

**Use of services**

*Awareness and use of domestic violence services*

There was little awareness of available community services for victims of DV. A few women in the focus groups were not aware that ReWA provides services to assist DV victims. Most seemed to be aware that the police are a resource and some knew that it was possible to obtain protection orders. Other community services that were mentioned included Asian Counseling and Referral Services (ACRS) and Refugee Federation. Primarily, when Cambodian women talked about services they used, they were referring to ReWA.

*When we are frustrated, we don't know where to turn to for help.*

*When I had a problem, I came to ReWA for help and then I felt some relief. I was mistreated and people listened to me then my chest feels relieved. ... They educate us and help us financially and apply for money and help apply for public housing. They provide us all the help.*

*I am used to the police place located in Kent... They help putting the husband in jail. They find the husband who runs away from this state and then they can certainly arrest and bring him back.*

Women also mentioned family doctors, counselors and social workers as potential helpers.

*Availability and access to services*

ReWA’s services are found primarily through referral. Examples of people who refer women to ReWA are neighbors, other service providers (e.g. the Khmer Association) and police. After women find ReWA they are often helped to access other DV services.

However, there are many barriers to service for Cambodian women. Some of the strongest themes were fear of the abuser, reluctance to discuss family problems with outsiders, lack of knowledge of services and pressure from others to endure the abuse.

*Some days he abuses me and I am afraid to call police in that case he abuses me again.*

*I remember a person helps me find a lawyer, but I stop him instead because my husband is looking for the person who helps me. He wants to kill him.*

*My husband, he harasses anyone who helps me. He harasses them.*

*If I want to find a lawyer, I am incapable to find one. If he beats me I do not dare to call the police. A woman like me is afraid to call the police but I want to give him the time to think if he is able to stop. Realizing what he did or not. In the U.S. I give him times since 1981 but he never admits that he was bad at all.*

*However, some days he abuses me and I am afraid to call police in that case he abuses me again.*

*S Sometimes the woman is afraid of the husband and would not dare seeking helps from others also.*
Findings: Cambodian NU Final Report

Because I don’t want others to know about my problem. It is my problem and I can’t let others know about it. I want them to help me at first, but I don’t want them to know about my family problem then I stop.

How services work

Women reported that a number of services worked well, especially those provided by ReWA. Women credited ReWA’s services with providing them with emotional support, interpretation, language skills, material support, help accessing other services and assistance with their children.

I am happy when I need help they are happy to help me and that even makes me happier. We are not despair at all. My heart feels relief. I am happy. My head feels clear.

I am all satisfied. For me I am satisfied. Satisfied and also happy. Happy also because I overcome suffering and abuses.

I am happy that they provide help. When they offer help then I don’t feel much pain in me anymore. When they provide help, I feel happy to be with my children.

They help with the paperwork. Sometimes we have to write and do paperwork, and when they finish helping then I thank them and I feel happy.

When there are problems arise, we need help to go to court, go to welfare office, to the kids’ school, make doctor appointments and sometimes they take me and my children out just to make me happy then I will be having fun with others, too.

When they listen to us and then they decide to help us and we feel relief. When we tell them our problems, they will keep it confidential. They will not go out there and talk about our problems.

When I came to ReWA for help to solve problem, I got to go to school, resolve the oppression in the family, fight and arguments and trouble kid.

They helped me with English, which I cannot speak. In my life the most difficult is the language barrier. First they can help me with the language and paperwork that need to be done. I can rely on them anytime. They help me to find this center, PIP. It is necessary to look upon them for help and they could help me. I am unemployed and broke and then they also can help support me financially and foods that I need.

One woman described a positive experience in which the police gave an appropriate referral to a local agency:

That day I called the police. I asked for their help to take him away temporarily first. We can’t live together at this moment. After that police gave me the name of this center ReWA. They gave me the address and told me that this is a women center for someone who is a victim like you. Since then I learned about ReWA from police and the address and they also told me that this center can help me out a lot.

Services that did not work well

Cambodian women did not criticize specific services that they had received. However, they did mention some problems they experienced when they tried to get help. Some said that housing was not available, another said that she used a service that charged and she was unable to pay. Another said that she wished the person who helped her could have worked more quickly.
Importance of same language/culture provider and services

Most women said that access to providers who speak Khmer and share their culture was critically important.

Very important in communication. It is important because I don't speak English and I have to find someone who speaks my language so that they can explain me certain things to get help. I can't do it myself so this is very important.

In reference to support groups, some women felt that it was imperative that they be conducted only in Khmer while others thought there could be benefit from mixed participation.

It is important because we can understand each other. Can't mix Cambodian with Vietnamese! I don't discriminate others, but same nationality and speak the same language it's easy to understand each other. We can't understand them, but we have nothing against them.

No matter how deep and shallow words we speak we understand one another. That's right, the same language is clearer. It is not the same as English language. It is different. It is difficult for us to speak.

I think that since I have been living in America I don't want to be in Khmer group because we want to learn English. We don't hate Khmer but we want to learn, want to know other things in America. We want to know because there are things that are so different.

Children and teens: needs and issues

Parents are concerned that children learn violence from observing it in the family and that exposure to DV creates additional problems for children. In addition, women said that they would like help with children who they feel are not respecting parental authority. They thought that education and counseling would be helpful and that these services must be available in Khmer.

I want to say that when we fight a lot in a family, and when our children grow up they tend to have problem with school or they learn from us.

Women ask for counseling to help children of parents who are experiencing DV.

Children who skip going to school we also ask them to help. They also help children who do not return homes. They provide counseling.

Women's ideas for helping other women

How to better help women in domestic violence situations

We asked women to imagine that they had $500,000 to help women in their community who are experiencing DV and asked how they would spend it. In several of the focus groups participants talked about creating opportunities for Cambodian women to come together to learn from each other, for social support and to help each other solve problems. They said that if women can get together they will be able to support each other, provide advice, help with each others’ children, feel less isolated, and work together to solve problems. Socializing and learning skills for independence such as driving and further education were all part of these suggestions. Throughout the
Findings: Cambodian NU Final Report

Discussion of best ways to help there was a strong theme of women helping other women, educating each other, and learning basic skills together.

When it is time, we hold a meeting. We discuss about our plans. What we want to do today or tomorrow or next week. Where do we want to go or should we have a party or picnic, and then we are all happy. And one more thing, if we have such a group then we can count on each other too. When we become quite educated about things and when we return home, those men will feel intimidated. This also causes the problem. We are women, we can't control men. Even though how big our group is we still can't do it. We just want equality. We want equality.

We need a program to support the women, to encourage each other, to alleviate all the hurt that's there. Have a program to support each other. That's why I said go out somewhere, or have a party...not with wild dancing but a party where women can get together, meet together, find a way to solve [problems] together.

Our group, we must get together to think of ways to help solve the problems.

I myself love to meet people because we are women. It is not just about eating. We discuss things, establish connection and sometimes we would like to know how others' children are doing in school and then we would go home tell our children how well other people's children doing in school in order to build their self-esteem.

We are women and we want to join force. I don't know how to drive and I want to go out with them too. I can't go unless there is a group then I can go with them.

We want to be good. We want to educate ourselves to be good first before we can educate that family to be successful in the future. If we are unable to educate ourselves do not educate others.

In addition, participants wanted to use the money to help women meet basic needs such as housing, food, clothing and transportation. A few women also said they would provide money to women to help them find a lawyer.


Help alleviate. Buy foods sometimes for the family with many children and who do not have enough and jobless.

Other thoughts on how to best help women included helping their children with basic needs such as food, clothes and school supplies.


That's right like paying for everything. They must pay for children clothes, all the foods, they must help. School, oh, there are a lot of problems in this issue.

Establishing a woman association to learn how to help woman victims from husbands and children who receive fears and threats when parents fight one another. They are heartbroken. That's what we spend it on.

Women also said that a way to help others would be to ensure that there is more protection for women who are being abused. Some proposed new laws, while others wanted help getting their husbands arrested. Several women said that men should be educated about the laws in the U.S. and also hear the woman's side of the story so that they understand what women go through.
The woman is afraid of her husband who threatens to kill her. Like me, if you dare calling police I will kill you. We should have a law that totally allow people to make proposal to the government to forbid the Asian men who oppress and abuse women from making threat to kill them. I want the government to make a law stating that if a man dares to kill his wife he will be put in jail in order for that man not to commit DV again.

We must start. I see that both men and women must learn. Because if we only educate women and men are not educated then men still mistreat us...If men are not educate then when they come home they still mistreat the wife. So we must educate them things that they should not do and the law they should obey.

I want there to be a program for men, for the older men who have used Cambodian custom so that they can change a little. So they can understand about the laws in this country and about the feelings of those women who have been victims, let them speak so that the men and older men who talk-who hold stubbornly to strict customs-to let them understand what kind of suffering is in the heart of the victims. I want them to have a workshop or a class or something to help them understand the women's side.

Several participants suggested starting a women's association that would do all of the above.

No, we start an organization. We have women organization and the organization must be complete. That would make us happy if the center is legally established. We all get together, have a party once a month, we socialize.

If we have an organization, women center and when there is a fight then we can pass the words around that the center can help resolve the problem.

Some women cautioned that men might feel intimidated by women getting together and learning about the “real world.” However, they felt that it is important for women to have this opportunity since their isolation is seen as contributing to their vulnerability.

Outreach

We asked women what the best strategies are for reaching out to other women in their communities who are being abused. Most said that outreach has to happen by word of mouth. One woman tells another who tells another and so on. Women saw themselves as those who would be doing the outreach. If they know someone who is having problems, they will tell her where she can go for help.

We just talk to each other. We communicate to each other that there is a center to help those with such problems. And later on we can resolve the problems ourselves.

If we know any women like us who were mistreated by their husbands or boyfriends, we must help contact those women, but make sure the husbands don’t know. To keep them from finding out, we must contact the women center. They will be glad to help those victims who were mistreated by the husbands or boyfriends. We must tell them because they don’t know. Since we already knew about it, we should let them know too. We can’t stand to see them fight every day. We don’t want to see that.

Women cautioned that they could tell others about help but they could not make them accept it. They said that it is sometimes difficult to get women to come for help for all of the reasons discussed previously.

The husband mistreats his wife. I want to tell her that this center helps battered women. I want to help them, but if they don’t come I don’t know what to do either. My heart wants to help. Have them get help to be a good person. I don’t want the husband to mistreat her. Being her neighbor, I don’t want to see that. I don’t like to see men mistreat women.
We can help [spread the word and] tell others that if anyone has a problem there's a place that helps us victims. Sometimes we tell them but they don't want to come. They want to keep it to themselves inside their family. They don't want anybody to know about their family.

Prevention

Education was thought of as the best way to prevent DV. Participants thought that the community in general should be educated about DV so that women will not be blamed. Education for men was stressed; participants said that if only women are educated about DV, men will still continue to perpetrate violence. Many thought that if men knew the law in the U.S. they would stop abusing their wives. In a few of the focus groups this point was debated and a few people strongly disagreed, however it was a strong theme in several of the groups.

Educate them to prevent it from happening.

To the future I want to see the center [Women’s Center] exist indefinitely because lots of Khmer women are not well educated and they need the center and it is the most important to the future. It will help Khmer next generation and only the center can do that.

R: No let us create an association to help guide them. To lead those men not to commit wicked conducts. Let them be counseled to act lawfully, to live according to the way of the foreign country.

R: Let[s] instruct them about the laws and customs.

R: Do not let them apply the Khmer’s laws in a foreign country. Let them learn to follow the laws of a foreign country- how they conduct themselves. They must obey. Let them create that community and bring people who do not know, even men who do not know, and who often are angry and fight with one another.

R: They are used to hit and that is the reason they continue to hit.

R: No, let them know what the laws say. That is the area we want them to help us with. Like teaching them not to be cruel, not to do that again. Once they know the laws, they will stop doing that. If do not stop all, at least they stop doing half. Even helping just half our women will feel relieved little bit also.
FILIPINA

Community awareness and attitude toward domestic violence

We asked women to describe their impressions of how aware the Filipino community is about domestic violence (DV). Most thought that while there is some awareness that DV exists, there is little understanding of what DV is, there is shame and stigma attached to being a victim and there are few supports within the community for victims. A few people thought that more educated community members might have more understanding of DV, but victims (of all educational levels) are the ones who understand and talk openly about the issue. Most felt that important institutions within the community do not discuss the DV openly. The Catholic Church was singled out as a powerful institution that has not been a resource for victims. The Church is seen as very influential and the strong value that married couples should stay together creates additional pressure for women who are experiencing DV.

Me, I wasn’t ashamed. The problem is with my church, it is not allowed by my church. In my religion it is not allowed [acceptable] to call the police. We cannot fight in [go to] court, it is the minister who will advise.

Several women spoke of changes in their own awareness about DV. For one woman, the Susana Blackwell murder helped her to understand her own situation and how dangerous it was. Some women said that when they experienced DV they initially blamed themselves or thought that such treatment was normal because they had seen it in their own families when they were children. Several women said that they felt uncomfortable seeking help from others within the community because they felt ashamed and feared the judgement of others. One woman said that sometimes women feel that now that they are in the U.S. their lives should be better, so it is difficult to admit that DV is occurring.

They are afraid. They are ashamed about it, that it is happening in their life because what the majority believes is that once one comes to the U.S., your life will be good. So, if it is happening to someone, they don’t want to talk about it because they are embarrassed, they are scared.

Sometimes, I feel more comfortable with Caucasians than with our fellow Filipinas because you know with our being Catholic, we are told to stick it out. We are not supposed to separate, we have some cultural thing that we have to stay together no matter what. [With Caucasians] they are more open. With Filipinos I feel that I’m being judged by my family.

For me, a lot of [victims] still will not talk to other women about it because people may say, may think, how come you’re in there [marriage/relationship] and you just let yourself be hurt, so I think that a lot of women are still ashamed of it and they don’t know that the same thing is also happening to other women...

There is a sense of embarrassment and shame and a feeling of being judged that prohibits discussion of DV within the family

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1 A high-profile murder of a Filipina woman by her estranged husband at the King County courthouse in downtown Seattle.

Page 62 of 182
Findings: Filipina

In the Philippines, my parents are there, my brothers and sisters are there... in other words, you have someone among your relatives that you can talk to. Here, you are new here and then if you have... aah in my case I have relatives here but I can't run to them because they are not close to me as family and so there is still... I think... Shame that they will know what is happening to me so... I need someone to have someone to talk to who will not condemn me... who will not blame me and who will not tell me what I am supposed to do.

What abuse looks like

Women were asked to provide descriptions of abuse that they see in their community. We wanted to understand what women within the community define as abuse for themselves. Participants talked about incidents of abuse that they experienced themselves or that had happened to friends or family members.

While many of the descriptions of abuse are similar to "mainstream" descriptions of abuse such as physical violence or financial control, Filipinas described some forms of abuse that are particular to their circumstances. Examples are verbal abuse regarding immigration status, threats of deportation, and belittling a woman's cultural background. Unlike Russian and Ethiopian groups where women spoke openly about international marriages, the circumstances of participants' marriages were not discussed in this group. However, according to our Filipina partner it is not uncommon for the women she serves to come to the U.S. on fiancée visas to marry American citizens. Some of the participants may have been speaking from this perspective.

I know someone who was abused by her husband. Like, for example, he pointed the gun at her head, he pushed her, uh, he grabbed her, he belittled her because of her background or her cultural background.

Descriptions of physical abuse included women being shoved, having things thrown at them, and being beaten up. Isolation was another strong theme; being forced to stay in the house and not be allowed to have a job or an outside life.

They beat their wives you know if she makes ah a wrong or mistakes, ah they don't want their wives to go out and have you know her own life, they want her to be there in the house, be a slave and serve for them.

One woman used the word unfairness to describe DV:

I think we view DV in a relationship when there is some unfairness happen like for example when the husband doesn't want the wife to go to work, he just want [the wife] to be in the house, being a slave, then there is DV.

Another example of DV that was given is violation of protection orders.

I have a protection order but he came to my apartment, drunk and yelling... yeah cause he was screaming and he knocked on the window of my apartment.

Previous abuse in family of origin

While women did not specifically discuss previous abuse in their families of origin, experiences were implied. Some women said that they thought DV was normal in families and that abuse sometimes is brought from the Philippines to the U.S.
**Alcohol and drug use**

Unlike other groups included in the study, there was very little discussion of alcohol and drug use and its relationship to DV. One reason for this may have been the small sample size in this cultural group.

**Characteristics of Batterers**

Women did not discuss the traits of the men who have abused them extensively. There are references to behavior patterns that are well recognized such as controlling money, isolating spouses, and behaving well in the beginning of a relationship and then becoming more and more abusive over time.

**Responding to abuse**

**How women feel**

Women talked about the difficulty they have had in coping with the abuse in their lives. Some said that initially they thought the abuse was their fault and felt ashamed and embarrassed that it was happening to them.

*The first time I thought it was my fault, I said to myself, oh, it's because I made him angry, I caused it, but, the second time I couldn't accept it that I, I thought it was the same reason. He did it. It wasn't my fault, it's his fault.*

One woman said that abuse “destroyed” her self-esteem. She said this loss of self-esteem affects her job and her relationships with people. She feels ashamed when thinking about the abuse she suffered.

*I didn’t recognize, but all the while my self-esteem was really destroyed and the harder I tried to cope with the new environment that I went to, all the more I’m having a hard time...in the sense that I, that I, that... what... that my mind says that I am able to cope with it, but, but, once that I, that my self-esteem is touched, there, everything falls apart.*

Another common theme was women feeling as if their families or community would judge them if they talked openly about abuse.

*Because of our culture I felt ashamed to talk about it, to tell them [family] and I didn’t want them to be hurt so I did not say anything to them about it.*

Several women said that they are alone in this country, without family or friends. Leaving their husbands is extremely difficult without support. Cultural values which emphasize the importance of staying together create additional pressure for women. Marriage and family are highly valued and there is stigma attached to being divorced.

*Being Catholic, we are told to stick it out. We are not supposed to separate, we have some cultural thing that we have to stay together no matter what.*

The only problem is I don’t have family here I get lonely and then in my family I am the only one divorced so even if my husband hurts me I keep going back because my marriage is important to me. I need to be patient and forgiving to him.

Additionally, a few women said that abusers try to convince them to stay and promise that they will make changes.
Then he said, 'I'll change, wait and see' and then it didn't happen after all.

More than one woman said that fear of the abuser keeps her from getting help.

I've been asking for help from my relatives but they are afraid to help me, to let me stay with them because he might take his revenge on them. That is what I can say.

A few women described how they responded to abuse despite these difficulties. Some sought help from community agencies, others talked to friends and got advice and resources. One woman whose abuse occurred twenty years ago said that at the time there were no resources to help and even if there had been, the cultural differences would have made seeking help difficult. Other barriers include being ashamed to turn to others within the community for help, while language and cultural differences make it difficult to seek help outside of the community.

**Survivor needs**

One of the foremost needs women had was for someone with whom to talk. Women described this person as a non-judgmental confidante. Particularly for the women who were new to this country and were without family members or friends, this was an urgent need. Even if a woman has family members in the U.S., talking to them can be difficult because of fear that she will be judged.

*My first need was for someone to run to. I didn't know, I was very new here, it is hard when you are new here.*

Mostly friendship, support. I don't have family here, I'm by myself.

*I needed someone to guide me, to talk to me, and especially my needs like food, because I was abruptly moved out from my home. And somebody to guide me in all of my problems.*

In addition to social and emotional support, women are in need of a variety of material supports including help with housing, food, transportation, and job training. They talked about the difficulty of supporting their children on their own and would like additional supports to help develop skills for independence. In addition, legal assistance, childcare, health insurance and mental health services were mentioned.

*If a person or a woman wants to go back to school, like me now, I am having a difficult time cause I want to improve my life, my child's life. How can I improve my life when I'm working, how else could I go back to school, my child does not have a babysitter, I need to go home right after work...I don't know how I'm going to do that.*

Training and education so they can find work. Like me for example, I didn't have any skills, I only stayed home and I didn't know about anything outside. Like computer skills or something so I can start to become independent.

*I've been thinking about a service that I needed but was not able to. In my experience I needed someone to help me get custody of my child. I have spoken to a lawyer but the lawyer turned me down cause he said "I don't think you can afford me so I'll just refer you to someone else." So we really need continuing education, housing and legal help and transportation.*

For another woman, the need for transportation was associated with safety. Waiting at bus stops can be dangerous for a woman who is being stalked by her abuser.
For women who need or would like to go to the grocery, she doesn’t need to worry about how can I go there without being followed/stalked by my ex. So it’s maybe a van which we can use if we want to go to the doctor or the grocery. That is essential to us.

Sources women turned to for help included co-workers, friends, DV agencies and support groups

The first thing I turned to was the phone book. I looked for a place where I can turn to. Finally, I have a co-worker who told me about a number to call. She is white. So I called all these numbers, some said they couldn’t help me, I kept on calling until I found a group who could help me.

Availability

While participants have gotten some help coping with DV, it is clear that all of their needs are not being met. Women said that they continue to need social support, financial assistance and help meeting material needs. Also, they expressed a desire to be able to seek support within the community. They called on community institutions to make it possible for them to get appropriate support. One woman said that the Church should facilitate this:

In church, support groups for women, I haven’t found any. I don’t think they have heard about it. I don’t want to offer information about me that I’m a victim of DV so if they are knowledgeable and informed about DV, that it’s not something to be ashamed about then I can ask them for help more freely.

In church, they don’t advertise about DV, especially in the Catholic Church, they don’t want us to separate. They tell us that the father and the mother should stay together but if there is abuse...I think it should come from the Church.

Use of services

Awareness of domestic violence services

Participants did not have extensive knowledge of community-based DV services. Most had accessed services and knew about the services they used but didn’t appear to have thorough knowledge of the system. Places within the community that could be expected to provide this information such as community centers and churches, do not appear to be useful resources for women at this point. Nonetheless, some women are finding out about services, primarily through referrals by social workers or other professionals and through friends or co-workers. One woman reported thinking that she might not be eligible for such services because she had a job that paid well.

I had a difficult time deciding where I was going to for help...I don’t know...I wasn’t very familiar with government services. I thought that government services were only available to the unemployed or those with minimum wages. I didn’t realize there were those services.

I only know about ReWA.

Actually I don’t know of any now, none really but I’m hoping there are some. For me this is the only time I found this group, this group whom I can relate what is happening to me, it is only now that I met a group such as this [referring to the focus group].

Description

Participants accessed a range of services for assistance in meeting their needs. Specific services that were mentioned included:
Shelters
Support groups
Victim advocacy
Crisis phone line
Emergency funds
Child care
Emergency food
Legal assistance: immigration and divorce
Police
Courts: protection orders
Assistance with housing and getting Section 8
Transportation

The specific agencies women told us they used were the following: ReWA, Eastside Domestic Violence Agency, and New Beginnings.

Access issues

Women talked about the difficulties they have had accessing services to meet their needs. On the one hand, some women are not comfortable seeking services within their own community, but on the other, mainstream services may not meet their cultural and language needs. One woman said she didn’t access services because she was afraid that those providing them would not understand her culture, another said that it was difficult for her to take the step of joining a support group because she did not know how she would be received by non-Asians.

I was hesitant to go there because I thought, now this New Beginnings, this would be, if not all white, all black there, what if there are no Asians there? How will they understand me, we have different ways, our lifestyles are different, our culture, way different? They recognize and accept divorce. To us it is not accepted, so how will we understand each other? That’s what I was thinking in the beginning.

A few women said that since they speak English they were able to access mainstream services. They pointed out that for those who are unable to read or lack English skills mainstream services are not an option. Lack of money kept one woman from accessing legal services. Inadequate public transportation made accessing a shelter very difficult:

It was a long walk and the bus schedule was limited. There were no buses during the weekend. The area was hidden.

Fear of problems with Child Protective Services and the foster family system is another issue that may keep women from accessing services.

‘Cause now what is happening with programs is they focus on, they divide parents, children. I think what is needed is to talk about what are need by both at the same time instead of group by group. . . . What is happening is that CPS comes in and so instead of helping the family, they separate them. That is what is not right because in our culture it is not like that so the problem gets more serious.
We don't want the children to be placed in foster care. That is more of a burden to the mother because we don't know who they will put our kids with, so it is better to provide for childcare instead of foster care.

**How services work**

Some women spoke highly of the services they received. Support groups were cited as providing education and emotional support for women that helps build confidence and strength. One woman said that she felt comfortable opening up to the group and appreciated that the participants were not judgmental.

But I find the group very supportive, really and that I found that I could really open up all my feelings, my heartaches and they would still support you. They won't condemn you. [Nobody would say] “why did you do that, if that was what was happening to you, how come you just stayed and didn't leave?” None, no one. It was really nice.

My sessions are supposed to be over but I go back, I keep going back because as I told my group, this is the only place where I can get strength, and I know that when I backslide and I know that is not right. I regress because I think, oh my, my husband, I’m a wife, my marriage, I really give importance to my marriage but at the same time when I think about the things that he did to me, I say, unfair, it’s unfair. I don’t deserve the way he treated me so I have to go back to the group just to listen.

It was only when I started going to the support group. It was after attending the support group several times that I understand DV, not just on the first time I attended. It was going many times, now I understand. I think education is important and women's support groups.

ReWA’s services were praised as helping women connect with the range of other services that they need and for providing help with divorce and immigration.

She [ReWA advocate] brought me to New Beginnings, a place where I can stay. She helped me with my divorce and immigration and until we finally separated. She’s been helping me. It is good that she is here cause if she wasn’t here I wouldn’t know where to turn to. I don’t have family here even if I have relatives or friends here they are afraid because he might get back at them.

One woman said that she found the crisis line to be very helpful, as it provides support when no one else is available.

I also want to add that this support group that I go to, they have a crisis line. It is available 24 hours meaning to say even on Saturdays or Sundays. Especially now that I’m by myself, Mondays through Fridays I am okay because I go to work so I forget about it, what happened to me. But at nights and weekends there are times that I don’t want to go out and I want to be alone, these are the times that I remember what happened to me. When I need to talk to someone right at those moments, they have an available line where you can talk to someone and it has really helped me a lot. Because it’s like a volcano waiting to erupt, it’s all inside you. I hope we can have that [24-hour crisis line] too.

Despite the positive experiences with some services it is clear that current services are not adequate to meet all of the needs the women have. While there were few specific criticisms of services, the prevailing opinion was that there was not enough help offered.

I didn’t get everything I needed, but I’d say I got more than I expected.

I appreciated everything that people helped me with, anything is a big help for me. So even if I thought that what they gave me was not enough, I still appreciate it.
I would say it was OK but not great. I had a difficult time cause I had to walk a few miles and I was pregnant then and I had to carry my older child. It was difficult, really difficult but it was better than nothing.

Additionally while several people said that ReWA's services are very useful, they felt that one advocate serving Filipinas is not sufficient to meet the needs.

**Importance of same culture/language provider**

Participants thought it is very important to have services provided by Filipinos in Tagalog and other dialects. For women with limited English, it is essential. Women felt that they would be more comfortable sharing their experiences, would be better understood, and interactions with providers would be clearer if providers speak their language and share their culture.

"Of course that is important because first of all, it is clearer if you both speak Tagalog. What if you're new and you can't understand, so it is difficult."

"Yes it would be better in Tagalog because it feels like you are at home and you are more comfortable in talking about your feelings."

We also asked about the importance of culture- and language-specific support groups. While most women said they would feel more comfortable participating in a support group with other Filipinas, others said that this was not essential since women from all cultures share similar problems and can benefit from supporting one another. In addition, the issue of feeling judged within the community was a concern for one woman but she added that since her understanding of DV has increased she would like to work with Filipinas. The following quotes describe the range of opinion on this issue:

"I was thinking that there was somewhere for me to go like a group of Filipinos who would understand me, me in my situation, in my culture, in my language, to whom I can be comfortable telling my experience of what happened to me, but, but there was none, I mean none, there was none I could find."

"Because we got the same culture so we can understand the values, the morals and everything and it could be easier to express using your own language."

"It would be really good if all Filipinos also because we can talk alike we are in the Philippines, it would be more comfortable, because if it were a mixed group, you can't really say what you really want to say, you'd still feel uncomfortable. But if it were just us of course, it is a sisterhood, we are here to support each other and the only way to do that is like we are in one family, we are there for everybody."

"Perhaps, it doesn't matter. But it may be good that there would be Filipinos there even just one other because women, all women have problems. Women have the same problems whatever culture. But it would be good to be referred to a Filipino so you can understand each other better."

**Children and teens: needs and issues**

Participants said that their children need support for coping with DV and education to be able to recognize it and know what to do if it is occurring in the family. One woman suggested that there be play groups for children who do not live with their fathers so that they could get be with other children and not feel uncomfortable because of their family background. Other suggestions were for more general financial and
emotional support from the Church and through the schools for children. One woman
said that she hoped that there could be services that would help Filipino children adapt
to American culture. Others said that services should help to keep the family together.
One woman expressed a strong concern that Child Protective Services divides families
and takes kids away from parents. She said that for Filipinos this causes more
problems than it solves.

*The children need to know about the programs and services so that they know also if their mothers are victims.*

*Education while still kids and teenagers, educating them on the signs of DV. Like me, I didn’t know that, I thought that what I saw at home that it was normal.*

*Like some play thing like playing basketball, like a boy’s club. Somewhere the kids can go to where they already know where [the kids] are coming from. ‘Cause in school they maybe are embarrassed because they have no father. Somewhere where the providers already know their family background and situation. Yes, that’s important.*

**Women’s ideas for helping other women**

Filipina participants provided a range of suggestions for helping women who are in DV
situations. A key recommendation was for a range of supportive services for women,
children and families. Several women thought that a culture and language specific
support group would be very beneficial. In addition, parenting classes and marriage
counseling were also recommended. Individual and group mental health was another
suggestion; several women further said that this help should not only be for women but
also for their families and abusers. Another suggestion was for a 24-hour crisis line for
Tagalog speakers. The emphasis throughout was on culturally appropriate assistance
that helps to strengthen families, and to make these services more fully available to
limited English speaking women. Some women said that they would like these services
to be available through institutions within the Filipino community.

*There are many available support groups you can go to but they are not applicable to us because we have a different culture so I think for me, if we really want to help friends, Filipinos, maybe we need a group that is focused towards us.*

*How about support groups and mental health counseling for victims of DV, not only the victims but also their families?*

*So I think the person helping me should also speak to him. My social worker always asks me if he will hurt me more and I said I don’t think so because he doesn’t listen to me. I think that they should go to our house and talk to him...*

*Yes, there should be counseling not only for the victims but they should also be for the abusers.*

*Education, we need to educate these women that being a victim is not something to be ashamed of, that you are not a loser if you are in a situation like DV. Like in church or in school I didn’t hear anything about DV. I tried to call my church for help but there is nothing. Because the church, the school, centers are close to the community.*

Other ideas women had for helping others included providing more housing, childcare,
financial assistance and clothing and food. Many women said that education is very
important and women need opportunities to further their education and gain skills that
will help them to be independent.
Findings: Filipina

If I had $500,000, I would build a house for women to take shelter in so they don't need to stay with their abuser, that there is a safe place for them to run to and provide jobs for them. So I think first I will provide housing and then jobs so they can be independent and raise their child after they leave their abuser.

I will have a house built for people like me who have no family here.

Of course, free food, clothing, like those. Or if someone needs to get back to work we will also help. Or if they want to go back to school to improve their lives we need to help them. Like me, I only finished high school in the Philippines And also learning more English cause I don't know a lot of English so I can get a better job. I don't want to just stay where I am, I want to have a better paying job to improve my life.

I wish that we can create programs to help people with limited education, people who only finished high school. For such women, all they know is to stay home, cook or serve their husbands, so they don't know.

Better legal protection was also mentioned. Ideas included threatening abusers with stiffer penalties and helping to ensure the safety of victims by locking up perpetrators.

Outreach

Outreach ideas included providing DV information at community events such as Pista sa Nayon (a Filipino event during Seafair, a large summer festival in Seattle), trainings, workshops and conferences; engaging community leaders (from churches and schools); writing articles for Filipino newspapers; posting flyers in places Filipinos are likely to frequent. Another suggestion was to provide outreach and education to children so that they will be able to recognize DV. One person cautioned that educational and outreach materials should be in as many dialects as possible since not everyone reads Tagalog.

We should do everything, anything we can think of because if we only reach one person we have saved one life. But it is a lot of work. We cannot just send information in the mail, it doesn't work that way, we have to see them face to face.

Whenever there is a Filipino community event, we should also announce an accurate count of how many women are being hurt, who is being hurt. Let's say we don't need to mention names but announce the statistics of women being hurt, talk openly about it.

Prevention

Participants felt that in order to prevent DV there will have to be significant community education so that people are able to talk about the issue openly. Women's comments reflected a desire to see attitudes towards victims change and for community members to be more supportive. In addition, there needs to be education for women on resources that can help them address the violence in their lives. Some said that community education should be face-to-face, rather than in writing.

Parents should realize that they should be open-minded, their children should be supported not be ashamed of. They should also be educated, not the victims alone but the parents who love them.

Education, we need to educate these women that being a victim is not something to be ashamed of, that you are not a loser if you are in a situation like DV.

You have to educate them, educate them what DV is and tell them what to do and tell them where to go—educate them.
LATINA

Community and family awareness and attitude toward domestic violence

Latina women who were interviewed felt that there is very little awareness of domestic violence (DV) as being inappropriate or abnormal. Women said that because it occurs in so many marital relationships, Latino men and women see it as the norm. This makes it very difficult for victims to identify domestic violence as being “wrong” and makes it much more difficult for them to turn to friends and family for help when needed. Women have seen it happen in their families and sometimes then believe it is normal. Some families are supportive of women leaving relationships while others are reluctant to hear about a woman’s victimization, and fear retaliation by the husband. Embarrassment and shame keep women from talking about it.

They consider it to be a natural part of our customs. I say, as a natural part of our customs because, I spoke recently with the sponsor at my wedding, and she asked me what exactly was I doing and why was I separated from my husband? She said that there are always quarrels in any marriage, and one has to go through all this. I told her no, because in my opinion this is not right. It was affecting my daughter, and when I left him, I was thinking about my daughter. She told me that I should rather go back [to my town], because whatever I was doing up here was not right. That I should be with my husband, because he is my husband. Then, as you can see they consider it [DV] to be normal.

They keep quiet. They don’t tell anybody when things happen. They think that this must be something that happens in the majority of homes.

Men that beat women, many times consider it normal because they have grown up in a culture where they have seen it happen. They think it’s normal, since they have seen people in his family doing it. They think that everybody does it, and men are also victims.

We [the women] keep quiet, and most of all, partly because Latin American women think first about our children, we do not want any scandal and we try to keep it confidential. This is because we know that’s very hard for the children. Then we tend to endure it, and this way we don’t improve anything.

What abuse looks like

Descriptions

For Latina women, DV takes many forms, some of them similar to mainstream descriptions and some more unique to the cultural traditions of Latino communities. Examples of the types of abuse include:

- Verbal abuse.
  
  DV is...the verbal abuse of so many bad words.
  
  He tells her bad words....

  A person always telling you what to do, when to be home – being in trouble if you arrive after that time, being screamed at for arriving late “he’s going to be screaming at me.”

- Isolation, intimidation and threats.

  When I recently arrived here with my husband, he never helped me to go out or find out how people were here. He always had me stay at home. I was not allowed to go out of the house, because he would...
threaten me, telling me that something bad could happen to me on the street, and he didn't want to be blamed for it. So, he would threaten or scare me with many different things.

➢ Husband not listening or not trying to be reasonable with his wife.

Sometimes I would try to talk with him to reason, but no way. Even though he is having a terrible time, he wouldn't give in.

➢ Use of male privilege and tradition as an excuse to abuse and isolate.

He used to tell me 'You have to do whatever I told you to do, because I am your husband and I am a man.' Then I would tell him to remember what the priest told us [at our wedding]. That we were one person now, nobody should be more and nobody should be less. That he shouldn't be treating me like this. Then he would mumble and said that he was the breadwinner in our home. When I would tell him that I wanted to work, he would tell me that I was crazy, that I was ignorant, that I didn't know anything about how things were here. That I wasn't even able to tell my name [in English], how could I possibly get a job here. But this is not so. Thank goodness, I realize that what he told me is not true.

➢ Physical abuse and the anticipation of physical abuse.

DV is the beating.

Pushes her, kicks her, beats her in many different ways....

This time he didn’t hit me, but he may hit me next time.

➢ Sexual abuse.

Then when I got pregnant again...that’s when I left. He forced me to have sex with him, and it was the following day that I decided to leave him. My daughter was only two months old at the time. I left him, but he had already gotten me pregnant.

➢ DV which involves children, both through exposure to violence between adults (identified as one way in which a man victimizes a woman), and through direct violence towards children (which women described in the context of children’s attempts to defend them).

I don’t know how to explain to her about the time that he almost killed us.

The abuse of suffering all this beating in front of my children when they were looking....

She never saw her dad beating me up, but I think she could hear us shouting and so at night. With all this, and she would cry and be scared.

Now that they [my children] are away from the DV, they are not living with it. I can see the difference with my two children. My little girl, she always seems kind of scared, unsecured...When I was pregnant with her, I underwent a lot...a lot of trouble...Then when I got pregnant again...that’s when I left. He forced me to have sex with him, and it was the following day that I decided to leave him. My daughter was only two months old at the time. I left him, but he had already gotten me pregnant. Then, during all my pregnancy I was alone, more calmed without violence or shouting. This was possible because I was alone with my children. I can see the big difference between my two children. This affects children very much. My boy usually behaves like nothing [normal], but my daughter usually is sort of scared because of the DV she experienced during two months, and previously during my pregnancy when she was in my womb.

My daughter being pushed away receiving the same abuse when she tried to defend me.
**Previous abuse in family of origin**

Some women witnessed abuse growing up in their country of origin, while others never did. The first experiences of violence for them were with their partners.

*I saw it in my own family. I saw it happened to my parents; but, fortunately, my mother was a person that believed that if this should happen to you, you shouldn't give any opportunity to let it happen again. Also, one should look for the well being and protection of the children.*

**Batterer characteristics**

Latina women did not enumerate traits of a “typical” batterer. However, they did note that their partners took the position that women must follow what they say because they are the breadwinners.

**Responding to abuse**

Women respond to abuse in various ways depending on their backgrounds and resources. Their responses were described as either feelings or actions.

**How women feel**

Feelings as a result of DV were varied. Women described fear, flashbacks, gradual dissipation of anger and hopelessness. The women did not speak at length about this, but did give individual examples or descriptions of their own feelings. One woman received counseling and said that she is learning that she has been traumatized by what happened to her. Another woman said that because she is out of the situation she finds that her anger towards her husband is dissipating, as if time is helping to heal the wounds. Another observed that a woman’s upbringing, education and where she comes from influences her reactions to abuse. She emphasized that everyone who experiences domestic abuse feels pain and that women need relief from experiencing so much emotional and physical pain.

*I still have nightmares daily with that man...I don't know if it's fear, because I am in the same apartment as before...and I hope he is not going to show up... And since he has received so much support, he feels like a king. As I say, I hope he won't make up his mind to cause me some damage, because he feels so supported...What happens with me is that I'm really very upset because I was not able to escape.*

*I kind of continue to live it every day, every day because of the program I'm in. I have to talk about him and remember everything, especially when I had to go to Court. Even though I'm not with him, I have to live it again, and this is all what he left me.*

*...I don't have that anger, I don't feel anything...well, I don't feel that resentment that I used to feel before. I used to feel so angry, angry against my husband and his family, because his family mistreated me quite a lot. Now, I have come out of this. ...[1]f I would see him again, I think that anger is not there anymore.*

*When we have such a big problem like this, we need a relief and we need to talk to somebody. Tell them what exactly happened, and look for solutions.*

*Sometimes I wonder what could I possibly do to make my husband change and wouldn't treat me like this...*
Actions women take

Only two women talked about actions they took as a result of experiencing DV. One woman described using medication to calm her nerves. She also stated that she became suicidal at times. Another woman said she began to feel stronger at some point when her husband tried to abuse her. She said that she was able to stop him and felt mentally stronger to oppose him.

Now, I'm taking pills to calm my nerves down. I need somebody to help me, because this man is going to kill me, or I am going to kill myself, because I cannot stand it anymore!

Staying in the relationship

Many women referred to the belief that a woman is supposed to stay with her husband, no matter what, as a very strong reason to stay with an abuser. Cultural ties and childhood influences can be very strong. DV to some is seen to be normal and a natural part of their customs. Other women talked about the fear of being alone as one of the reasons they stay. Additionally, family and friends can be very convincing if women turn to them for help and are told that “quarrels are normal in any relationship”. One woman stated that lack of information about available resources was one reason that she stayed. She did not know that she had other options.

No matter what happens, we are supposed to stay with the husband. This is because life over there [Mexico] is very different from here. Therefore, many of us keep quiet and stay in it.

They say no. What am I going to do all alone; I better stay here [with him].

Seeking help-deciding to or not

Four different responses summarized why women finally seek help: 1. Learning about available services; 2. Realizing that her partner was not going to change; 3. Being raped by her husband; 4. Realizing that her child was suffering.

Survivor needs

Latina women’s needs are directly related to their feelings of isolation from a community which they feel accepts DV and their isolation from a support system here in the U.S. since they sometimes do not speak English or understand how to use public services. Women mentioned four primary needs: emotional support and advice, housing, English language advocacy in court and assistance in negotiating with Child Protective Services. Family, friends and Consejo were cited as people or places to receive help for such needs.

It is very important to receive some support at that moment of crisis. Especially when one needs to leave the home, and like in my case, one doesn't have relatives close by.

Yes, what I want is a place where to live. Yes, I would like them to help me with Seattle Housing if they can.

I want my children back. My baby is almost 8 months old, and she was taken away from me when she was only 3 weeks old. My God!
Use of services

Awareness of domestic violence services

Word of mouth tends to be the most common way for women to learn about services. Women are learning from their friends and family about the resources that they have accessed in the past. Also, having a good relationship with a nurse or doctor allows for a woman to feel comfortable and eventually ask for help. Since many Latina women do not read or write in English, they depend on others who may have been through a similar situation to provide support and referrals. The consensus among focus group participants was that most women did not know that DV was something for which they could receive help. One woman said that when she arrived in the U.S., she did not realize how many services were available to women and she didn’t know there was help for victims of DV. Another woman said that she did not know about any services for victims of DV until her social worker gave her the information. Another said that the Hispanic community is not very aware of available resources. Many women think that they have no alternative but to live with the abuse. Some thought that only their family could help them by listening to them and possibly talking to the abuser on their behalf.

Use of services

The major services women mentioned having accessed were:

- Consejo. Consejo’s services include counseling, offering support, giving strength and knowledge, helping with legal issues, helping children and providing other needed social services.
- Health clinics. Women reported that clinic staff provided referrals for women to shelters and to Consejo.
- Shelters.
- Seattle Housing Authority.
- Courts.
- Social workers.

Access issues

There was little mention of access difficulties, however one woman had difficulty finding emergency shelter when she needed it.

How services work

Women described a number of services which had worked very well for them.

- Consejo was said to have provided emotional as well as material help with housing, food and clothing. Advocates connected women to counselors for themselves and their children. One woman was particularly grateful for help in finding a job. Many women expressed gratitude for the encouragement that the women's support group has offered; they felt they have been given a new
outlook on life and are growing stronger. They have learned about the
dynamics of DV. This helped one woman to feel stronger when she had to
communicate with her husband. They said they also felt less lonely thanks to
the group. One woman says that it is worth it to her to take two buses and walk
uphill in order to come to Consejo’s support group.

All the people here at Consejo were very good. It is important to know that there are people that can
make you feel that you are not alone and insecure, and that help you change and strive in order to move
forward for the children’s sake and yourself.

For example... that you need to go to Court. Well they come with you and all. This is very good! They
don’t leave you all by yourself. It has been three or four people that have helped me very much. They
have always come with me to court. This is a wonderful support that they do give you. They have
advised me what to do so that things won’t go wrong. They have given me very good leads so as not to
make the same mistakes.

Well, it [counseling] has been very helpful to me because they have really given me ... the social workers
have worked with my children with counseling, they have sent them to school, they have made sure that
somebody is there with them to teach them how to read and write and they have helped us all. They have
gone with me to every school.

Women also had good experiences with the shelters. One woman found shelter space with the help of a friend. The shelter in turn connected her to Consejo, and shelter staff helped her to find transitional housing. Another woman praised the shelter support groups.

We called, but they didn’t have any room. That same night I had problems with my husband and the
following day I asked my friend to help me. I told her I really needed to get out of there because I
couldn’t stand it any longer. She then called New Beginnings and that same day there was an opening.

I consider I won’t be able to ever forget this because this has been such a big help for my daughters and
me. This is not the same to be in a transition home than being in a shelter. I feel this has been the
greater help I could possibly receive from the people that have been helping me.

I really like the support group. There I get courage and strength to keep on with my life. I met other
women that have suffered quite a lot more than I have and they have excelled and overcame this. So I
tell myself that I should surpass all this to.

Other services which women said had been effective were certain medical
clinics and social workers. One social worker escorted a woman to a shelter and
connected her with Consejo. Women praised providers who were attentive and
affectionate towards their children.

I didn’t know that places like these really existed. I thought that maybe the interpreter or the social
worker were going to take me to their home or something like that. ...[T]hen in less than half an hour,
was there with the nurse. They took me to the shelter.

Well, whenever I would bring my daughter to the clinic for check ups, the nurse very attentive would
always ask if she was alright, if she had everything she needed like clothes....The same happened at the
shelter.

When it comes to services that worked poorly, women stated that the language barrier
was a main problem. Latinas feel frustrated when they cannot express themselves or
understand the court system or Seattle Housing Authority. Some also felt that
discrimination based on their economic status prevented them from receiving appropriate assistance.

**Importance of same culture/language provider**

For the most part, participants felt it was important that providers share their culture and language. Additionally, for non-English speaking women, Spanish-speaking providers are critical. This is to ensure that the provider understands the background of the Latina women, makes them feel more comfortable. In regard to having mixed-ethnicity support groups, several women felt that it was important that everyone share the same cultural background. This commonality enables them to understand their situations better, and to know that they are not alone. Women saw it as essential that all participants speak the same language in order to help and listen to each other.

*Because they need to understand where are we coming from when we have been mistreated and how does the Latino woman react.*

*They give talks and they can also speak my language. Sometimes it can get confusing if people don't speak the same language.*

- One woman disagreed and felt that it was not important where the provider came from or the language that they spoke, as long as they were able to provide the women with help.

*No, this is not important. What is important is to receive some help regardless of the language and culture.*

**Children and teens: needs and issues**

Most women with children expressed that their children's needs were at least as high as their own when in crisis. They felt mostly satisfied with counseling referrals but still feel as though they as mothers need more help with their children. Daycare for children while their mothers are working was identified as a persistent problem. Many women wanted to see more special programs for children such as field trips and recreational activities.

*They should take children out for rides so that they get distracted and they can see different things. Take them to the park to see the flowers or something like this; play ball games; let them have some sports.*

**Women's ideas for helping other women**

**Outreach**

Ideas for ways to reach other Latina victims/survivors were varied. First, the women said information could be given out in churches and in communities where Hispanic people live. Another way was to offer various activities for women. This would give them the opportunity to go out and interact with others. This was important because it takes trusting someone in order to open up to them about their personal pain. Making friends with someone who may be suffering abuse was another option. This would enable women to support each other in the community. Radio programs were
suggested as a forum for educating about DV. Many people listen to the radio and this could be a safe way to provide information about services. Educational information should be on Spanish language programs.

One should try to make friends with her. I think that the only way to have let you know how is the relation with her husband is to offer her a clean friendship, as if I wouldn’t know everything about it [DV]. I think this would be the best way to come close to this person. Talk to her, and tell her that you don’t know how is her life, but if she is suffering, give a telephone number where somebody can help her.

I think there should be a program in the radio, since there are many people that listen to the radio. There should be talks about DV and make sure to tell women that it is possible to get a way from your abuser.

**Prevention**

Women thought that educating men, women and children is essential in order to prevent DV; women noted specifically that educating children was a way to stop the cycle of violence. Participants would also like to see more programs for families, to educate both men and women about the effects of DV. Some women stated that men are victims of cultural expectations and of personal abuse, and may not feel as though they know any other way to be.

Educate the men and the women too, of course. Teach them what DV is in order to avoid it.

The most important thing about all this is to have a program to educate the women, because many of us come from husbands that kept telling us that we are good for nothing. Then, we keep this idea that we are not able to do things. This is so that we can stop depending on welfare. To teach them through programs and school to learn to depend on themselves, and to stop feeling insignificant. That way they will learn to work and rely on themselves.

To educate the parents because the children are the ones who are going to continue that violence. In order to cut off violence parents need to be educated so that they can in turn educate their children.

A common theme for how to help women was to build, find or provide safe housing for women and their children. One idea was to have women work on cleaning up and fixing run-down houses in order for them to someday be their own (following the Habitat for Humanity model). Women highlighted the importance of child care in order for mothers to be able to work, and the necessity of free child care for women to be able to escape abuse.

Well, just in thought….. I would get more houses where women could live more comfortably without pressure. I would create more programs for women, with or without papers, to teach them how to defend themselves, look for a job and all that.

My way of thinking is that one can help the victims of DV by setting a shelter, because I know that for the women is hard, and many think like I used to think: that there is nobody that can help you. So, I think one should help them with shelters and trained people so that they can receive counseling and let them know that there is a way out.

I would do the same thing. Yet, since I love children very much, I would look for women with children and I would build them a home with day care, where mothers could go to work without a lot of pressure.

Counseling was another significant area of need. Participants felt that Latinas need support to gain self-confidence, to improve their self-esteem, to be independent, and to get a job and “stop depending on welfare”. Women also said that whoever is providing
support should know where the victim is coming from and how she is feeling. In other words, they would like to see survivors supporting new victims.

*I think the person that should offer support should be someone that has experienced the same situation, and most of all, they should resort to people that can help, such as you, the people from Consejo - people that understand the situation when DV occurs.*
LESBIAN, BISEXUAL AND TRANS

In this section, findings from the lesbian, bisexual and trans interviews will be presented. Because the lesbian, bisexual and trans focus groups included survivors with a wide range of gender and sexual identities, the word “queer” will be used to refer to these groups and the communities they represent. While some people do not identify with this term, many prefer it as an empowering term which is inclusive of a diverse community. Please note that the agency serving lesbian/bisexual/trans survivors has changed its name from Advocates for Abused and Battered Lesbians (AABL) to The Northwest Network or Bisexual, Trans & Lesbian Survivors of Abuse. However, focus group participants used the name AABL when referring to the agency. For consistency, the agency is also described as AABL in the text.

Community awareness and attitude toward domestic violence

Nearly all lesbian, bisexual and trans participants reported that the level of awareness regarding DV in their communities was quite limited. Participants offered several explanations for this limited awareness. They identified a general lack of information about queer relationships and a specific lack of information about same-sex domestic violence, as well as a minimization of the seriousness of women’s use of violence, and a reluctance to draw negative attention to relationships that are already under siege.

Level of awareness

Most participants reported that awareness of same-sex DV within queer communities is very limited.

But, on a whole for the community, they had a hard time grasping it, and in fact I was the one that educated them more or less, with what I was going through.

Everybody said to me, straight and gay said, “We had no idea the statistics were that high. Are you sure? Where did you get your information?”

Others reported that DV within queer communities is known about, but not taken seriously.

[The attitude is,] “Well, everybody hits their girlfriend, you know. What’s the big deal?”

Several participants reported that awareness of abuse was limited to physical abuse, and that emotional and sexual violence were more rarely talked about and more difficult to identify.

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3 We use trans as a term that encompasses a wide range of gender and sexual identities. A person who is trans chooses ways of presenting themselves that are different from what is expected of the gender they have been assigned. For example, a person who is assigned a role of “boy” by a doctor at birth but experiences herself as a woman may identify as trans whether or not she uses medical procedures to change her body.
Findings: LBT NU

Although I knew at different times that the relationship was emotionally abusive, because it wasn’t physically abusive, there was always the seed of doubt in my mind about the level of abuse... that was going on.

Many reported that while people in their communities do not have the language to name or label abusive relationships, they still discuss them. They found that people might joke about these relationships, talk about them without identifying the abuse or refer to them in other terms.

I think my friends really, you know, tried to understand the... one-on-one personal distress that I was in, but as a topic, they didn’t consider it domestic violence at all... They considered it an incident that needed to be taken care of, and then moved away from.

Also one of the things I’ve noticed too is that people will be able to talk about relationships that are fucked up or abusive or whatever, but don’t have the same kind of language that relates to domestic violence like they would if it was a [heterosexual] relationship.

Reasons for lack of awareness and response

Because the perception that DV is a heterosexual issue persists, many participants reported that queer communities do not have information about how to recognize and respond to abuse.

I think they think it's out there [outside of the community]. So when it was right next to them, it was like, didn't have a way to like, really handle it.

Participants indicated that this was even true for people in queer communities who have connections with the DV movement and have a great deal of information about the dynamics of abuse.

I mean it just makes me insane when I see people that are working in the movement and are educated on what domestic violence is, and then you hear them say something about what their partner is limiting them on and you’re just like, oh my God, I can’t even believe that you can’t see this and you are completely immersed in it.

Many said that because the DV information they had access to is premised largely on heterosexual relationships, it was difficult to recognize abuse in their same sex relationships.

It can happen in any type of relationship, but maybe in, um, same sex partners, they think of it only happening in certain types of couples and certain structures. Let’s say, you know, a real strong woman with a weaker woman.

Several participants connected the silence around woman-to-woman DV with a cultural unwillingness to take seriously women’s use of violence.

Yeah, because they’re gay, and women don’t really hit each other. Women don’t hit women.

...I kind of had an assumption that, you know, that I’d had some bad experiences with men, but that women were different and nice...And actually I feel like I was really caught off guard because of my assumptions.

A number of participants felt that the lack of awareness about queer DV was due to resistance rather than an insufficient availability of information. Instead, they linked this resistance to the community’s experience of homophobia.
We have so much fear of prejudice and of—I mean, we're queer... Everywhere you go that's enough of a stigma, why, I think that people are very afraid to add to that by saying, you know, not only are we queer, but we also have violence in our relationships and in our community... I think that we're afraid to have faults outside of—it's a huge strike that society, you know, sees.

I don't really think that it's a matter of being, of the information not being out there. I think it's a matter of nobody wants to pick it up and read it. You know, it's too much to think about. It's really a place that most of my friends just don't want to go.

And then the gay people would say to me, oh, you know, they just don't want to hear it. They want me to shut up as soon as possible.

Many survivors identified this silence about queer DV as contributing significantly to their sense of isolation.

I really didn't know anyone else that was having that problem.

**What abuse looks like**

Participants described a wide range of criminal abuse experiences, including physical and sexual violence, threats of homicide, stalking, and destruction of property. Although these experiences were shared by many, most participants focused the majority of their attention on describing (and, in focus groups, comparing notes about) emotional abuse, which encompasses a wide range of abusive behaviors. Queer participants described the tactics of emotional abuse used by their partners in both private and public spheres as subtle and complex. This section will present these findings.

Participants described emotional abuse as being slippery or sneaky enough to over-ride their defenses.

There's a part of the gay community that really tries to empower the human being, [that encourages its members to be powerful people]. So, to me, it's not something where it's this big obvious thing, and you are a prisoner for 5 years after the first month of your relationship... It really is a very, very subtle thing.

Many group participants noted that they had difficulty defining their experience as abuse. One of the explanations given for this was minimization by the abuser.

I thought I kind of exaggerated, you know? Cause she had me brainwashed so bad...I thought I couldn't get out.

Several noted that because they did not expect women to be violent or controlling, they were less prepared to recognize and respond to the abuse.

So she's forcing herself, snuck herself into this building where we used to live and snuck in there through the porch in the apartment, and I kind of laughed it off because I am not physically intimidated by her...

I felt a conflict because my partner is virtually the same size as me and I felt like, well, I could protect myself, if it came right down to it, but it was more about the emotional abuse where, I think in a heterosexual relationship where the man is so much stronger than the woman, then it's more accepted.

Many participants noted that they were confused about who was the abuser in the relationship, and that they, in fact, believed themselves to be abusive. They attributed this to a lack of information about same sex DV, and said that the heterosexual model of DV obscures the ways in which one woman may establish a system of power and
control over another. For example, a heterosexist model stresses the role of male privilege as a source of coercive power, and assumes that men are physically more powerful than women and therefore able to dominate them. For survivors of same-sex DV, this model leaves them little to go on in identifying patterns of coercion in their own relationships, and they may believe themselves to be at fault.

Size, sex, you’re relating to the same community, it’s really hard to figure out who’s—what power dynamic is at work.

I know that the thing that keeps getting brought up when [my friend] relates to me is the fact that she feels like she also is abusive, so—and she’s really not, she’s just defending herself, but in her perception, she feels like she’s acting out too so she deserves what she’s getting.

In addition, many participants reported being told by their abusive partners that they were themselves abusive.

She would attack me, and I would fend her off, and she would end up with scratches or something, and [she] would be like, “See! She’s abusing me.”

Isolation was almost universally identified as central to experiences of abuse. Participants described a variety of means of being isolated. Many noted that their abusers were well-liked by their friends and were able to take advantage of the small size of the community, and the fact that both knew the same people to cut survivors off from their friends.

I know that if I were to tell any of the friends of my abuser they would not believe me. They would say she’s such a great person and she’s so outgoing and she’s so charming and she’s so gorgeous and so funny and so capable and she’s told them things about me, that I’m crazy, and they wouldn’t believe me.

Participants also observed that because their abusive partner was female, she was able to access all of the same supports, resources, and spaces as the survivor. This made it increasingly difficult for survivors to have any community contacts that did not also involve their partners.

There’s a specific way of [cutting me off from other friends and support] that works in queer relationships that I think wouldn’t in straight relationships, and that is just being there. Like everywhere I was she would be there... If it was a guy you wouldn’t have access to all of the places that she was able to have access to. There was just no shaking her.

Participants also reported that abusive partners had used threats and intimidation to prevent them from making connections within the community.

I know that my batterer said, “If you tell anybody, you’re dead. And not just you, but your friends. I’ll shoot them through both their eyes and drag their bodies home on the porch”.... Batterers tend to be very charismatic and well-loved, and “oh, she would never do that,” you know, “you must be just as nuts or you have PMS or whatever.”

For many participants, isolation in general and from queer communities in particular was connected with the commonly reported experience of abusers challenging the authenticity of survivors’ queer identities. Challenges to authenticity or “realness” were reported by many participants across a variety of identities. Participants reported that such challenges served as a means of coercion, sometimes connected to sexual abuse, and were made more effective by survivors’ existing isolation.
"Well, why don't you want to have sex? Hello, you must not really be a lesbian if you don't want to have sex or this kind of sex. Well, why do you want that kind of sex, do you really want a penis?"

With my case it was like trans stuff. Like, "Oh, this person's more trans..." Pressure that way.

My partner gave me a really hard time for being femme... Like because I was so femme, that I was incompetent, that I was incapable...She wanted me to dress really sexy and stuff but on the other hand because I was femme...[my partner would act as if] I'm not capable of dealing with my car, or she knows what's right...Also there was definitely an undercurrent of if I was femme was I really a lesbian?...I was too femme and I wasn't femme enough, depending on the day.

It got to the point where I would go out...and I would stare at the ground because I didn't feel like I should make eye contact with men...It just became such...an attack of not just my bisexuality, but just my freedom.

A number of participants reported that their experience of abuse was impacted by not having information about what healthy, non-violent queer relationships could look like. Homophobia dictates silence around same-sex relationships and the lives of queer people. Participants reported that their abusers were able to benefit from this silence because survivors did not have other examples against which to compare their experiences. This was particularly difficult for people in their first same-sex relationship, when they had very little to go on but what their partners were telling them.

...It was like I just thought relationships were like that... You don't really get to see, like on TV and the movies for the most part, especially if you grew up really homophobic like I did, you really don't get to see what [a queer relationship] would look like if it was ugly or what it would look like if it were healthy. So when she went around saying things I just thought, "Well, I guess that's what people do in relationships."

Participants also reported that their vulnerability was greater in their first same-sex relationship because they were not out to anyone (i.e., had not told others that they were queer) and therefore had no one to talk with about what was happening in the relationship.

It was my first queer relationship and so I wasn't out to anybody but her and so it was real easy to just get isolated from everybody because she was the only one who really knew me.

A majority of participants reported that their abusive partners used their own vulnerabilities and weaknesses to manipulate and control them. For example, many survivors reported that their abusers used threats of suicide, fragility, depression, or a history of abuse as a means of manipulation, causing survivors to feel responsible for maintaining the safety and well-being of their partners.

I think the other big thing that she did was to really like manipulate the ways that she was needy and vulnerable, and really use those to keep me there. Or like cutting me off from other people and then being so fragile or f*cked up or whatever... talking about her [abusive] family and really being hurt by that constantly...getting suicidal suddenly when I was trying to leave.

She said she would kill herself and then the police were called again, and I was weak and I was watching out for her because she broke down and cried. So I left so she wouldn't get in trouble and then I came back and she was really nice, and then the next morning she was really evil...

She moved in with me because she didn't really have anywhere else to go, and no money, and she was also suicidal because I had broken up with her. And so I was like taking care of her, and I couldn't talk to anybody because I wasn't out to anybody.
Participants reported that in addition to threats of suicide and physical violence, abusers threatened to "out" them in situations that might have drastic consequences.

I know of a woman whose lover threatened to out her at work, and she's an elementary school teacher and would definitely have lost her job, without question.

Intimidation, with or without physical violence, was used to control and frighten survivors into compliance.

My partner is about the same height as me. She'd use her eyes, her voice...The eyes, the evil eyes.

Responding to abuse

Participants reported a range of emotional responses to abuse. Large number of participants reported feeling depressed or demoralized by the abuse, and lonely due to their isolation. A number of people reported feeling angry or vengeful at times. A considerable number of participants reported blaming themselves for the abuse, believing that they themselves were abusive, or doubting that their partners were abusive at all. Participants noted that the emotional effects of the abuse lasted long after the relationship had ended.

Survivors reported taking a wide range of actions in response to the abuse. Many reported that they tried everything they could to make their partners happy and well cared for. Some said that they stayed in relationships because they were frightened of the possible consequences of leaving. Others reported using violence in response to the abuse they were experiencing. A number of people reported checking themselves into a hospital due to depression caused by the abuse, while others reported using drugs and alcohol to cope, or leaving jobs or changing locations to increase their safety.

Feelings

Participants reported feeling demoralized, depressed, and suicidal as a result of the abuse. Some described profound loneliness both during the relationship and after.

I had become incredibly suicidal because I could not take it anymore, and I didn't value my life after...three years of this. I was completely depressed after I left. I could hardly work. I spent the next three months on the floor of my apartment crying and I would get up, throw up, go to work, come right home and lay down and not be able to eat.

If she didn't end up becoming physical, and end up doing something to really hurt me, I probably would have killed myself eventually.

I was so lonely...

Several people reported feeling desperate enough to consider using violence, or feeling vengeful and angry toward their abuser.

And it just got worse and worse and worse. So if I would have stayed...either I would have killed her or she would have killed me. Because I was ready to get a gun and shoot her, because I was just very [unintelligible; loud bang]—I was out of it.

I was in that mode of feeling really vindictive because I really wanted her to pay and that sort of thing.
A number of participants reported that they felt that they were to blame for the abuse. Often, participants clearly noted that their abusers had told them that they were responsible for the abusive behavior. A number of participants reported that they had believed themselves to be abusive.

And a lot of it was my fault, and if it wasn’t she would say that, but I would start to believe it. And I was very isolated and I couldn’t speak to anybody.

I definitely thought I was, you know—I yelled at that person that day, I must have spurred it.

Several people reported still doubting whether or not the abuse really happened, or that it was legitimate to call it abuse, even several years after the relationship had ended.

When I look at day-to-day what was happening I don’t see anything, you know. But when I look at, okay, what was I like before this relationship and then what was my life like two years later, it was clear that it was devastating. That’s the only way I can see the whole...

Others noted that the emotional effects lasted a long time after the relationship ended, much longer than they expected.

You know, I thought I was gonna be away from her, and that’s it, you know? I didn’t think it would keep lingering on.

**Actions**

Many participants reported that they worked to survive the relationship by attempting to meet all of their abusive partners’ needs and making them happy.

The message that kept coming back to me from her was that relationships are work and you’re not working hard enough. And I was just fucking busting my ass every day to make her happy—but I mean where was my happiness? I completely lost sense of what it was to make me happy.

Many participants reported that they stayed in relationship with abusive partners because they were terrified of the consequences of leaving.

I stayed with the person. I kept sleeping with them. I was scared to death. I was sleeping with them because I was scared to death, and I started to have...increased bouts of anxiety attacks. I started losing weight.

Some reported using violence in response to their abuse, fighting back or destroying property in frustration.

I remember lying in the hospital with broken fingers...I’d ended up hitting a wall in frustration.

Several participants reported checking themselves into a hospital because they were suicidal, or ending their relationships in order to avoid being hospitalized.

I just couldn’t take life anymore. Just wanted to just kill myself that time... I was depressed and crying crying crying my eyes out and before I harmed myself, I thought I’d come [to a local public hospital with in-patient psychiatric care] for a few days, that time. And they treated me and stuff.

Several people mentioned using drugs and alcohol to survive the abuse.

That’s where I found my relief, bars.

Some participants reported that they were forced to relocate or change jobs because of safety concerns or to get away from an abusive partner.
I had to quit my job because of her, so I had to get this crappy job and this other crappy job, and always working, and it’s hard to go out and go to AABL [local DV service provider for LBT people] or meet anyone.

In summary, participants reported a range of emotional responses to their abuse, and many reported significant depression, loneliness, anger, and self-blame. Many said that these reactions lasted long after the relationship ended. Participants described taking action in response to the abuse, including trying to appease their abusive partners, remaining in relationships out of fear, fighting back, hospitalization, drug and alcohol use, and relocation.

Survivor needs

Many participants reported needs related to their experiences of isolation. For example, participants overwhelmingly reported that they needed support in identifying their relationships as abusive, and that they needed to be believed. Participants also reported that they needed support in reacting to the abuse, as well as people to interact with socially. Additionally, people said that they needed friends to help them to feel safe while in community spaces with an abusive ex-partner, and that they needed models of healthy queer relationships to help them identify and make positive choices. In addition, many survivors reported that they needed a safe place to stay. Although participants said that many of their needs were unmet, survivors also reported a range of experiences with community members and friends responding supportively to their needs.

Description

As noted above, participants described tremendous difficulty in identifying abuse in their relationships. Participants overwhelmingly reported that they needed support in recognizing abusive dynamics. Nearly all participants reported that they badly needed to be believed and validated in their experiences.

The first thing I needed was for somebody to tell me that’s what I was experiencing.

I didn’t identify it as abuse at all, but I just identified that I wanted to get the fuck out of the relationship and I needed to just break up with her... And then I started to get some more information and piecing it together and eventually that was the point when I needed, once I kind of had the information that was happening was abuse, was...[for] my friends ...[to] support me and believe me.

I needed someone to talk to, someone to believe me.

Because so many survivors lost their friends to their abusers when they left their relationships, many participants reported that they needed friends to stay with them and offer emotional support.

I felt guilty and I told the guy on the [crisis line] and he didn’t understand... so I hung up on him and I tried to call a bunch of my friends up that night. But I didn’t have any gay friends who weren’t friends of my partner so I didn’t have anybody to turn to...

Maybe to have my friends not judge me, or disappear.

In addition, survivors reported being lonely both during and after their relationships, and needed to re-connect socially with people.
Just talk to people or watch a movie or, you know, something to cut that loneliness. Then I wouldn't have spent so much time obsessing about my ex and how she'd been the sole center of my life for so many years...

Survivors also explained that they needed support in identifying danger and making safety plans. Because many survivors must share a small community and limited community space with their abusers, friends were needed to help navigate these spaces.

[It would be helpful to] have five friends or whatever be like... “If you want to go dancing tonight, I'm there with you, and if she comes up to me, I'll stand in front of her and tell her she's not welcome here.” You know, I would have felt a lot safer 'cause...there's people sticking up for me.

I also did not have enough support for people to say, “Gosh, that's a dangerous situation. You should be out of it no matter what it costs.” There was no one to say that.

Because the silence around queer relationships made recognizing abuse so difficult, many survivors articulated a need for models of healthy queer relationships.

If someone is in their first lesbian relationship at whatever age...are there examples of healthy relationships?

Just some kind of models, and I don't think this is specific...to queer relationships or not, but some kind of models of like being empowered within a relationship.

In addition, many participants reported that they needed a place to stay in order to leave their abuser.

Somewhere to stay. That's the hardest part, is a place to stay.

The thing that I needed the most that took so long was a place to go. I could not find a place to go. It was so strange.

Community responses

Participants described a number of interventions and responses by friends or community members that were helpful in meeting their needs. These ranged from sharing information about AABL, to holding the batterer accountable, to helping the person escape.

The entire group intervened. They kept her away from me, they took me to a movie or something and then others took her to the house that we lived in together to get all of her stuff out, and then they brought me home. And they kept her away from me and gave me some support...

Another thing that was really important was having people help me move out of my house. Cause that was a scary situation, so...Like 12 of my friends came and...everybody came and moved me out of the house.

That is my friend coming to my house and saying, “I'm concerned for your safety. I want you to pack a bag and get all your schoolbooks together, and I'm going to stand here while you do that, and then I'm gonna take you to my house.”

Well, we had drinking buddies, and even then, they saw it. They saw the weird energy dynamics going on. They didn't even say, “Get help.” They said, “Just leave her.”
Use of services

Awareness of domestic violence services

Although some participants reported that they were familiar with mainstream DV agencies, very few had actually accessed them. Most focus group participants were familiar with AABL and had sought services there. However, many reported that they were not aware of AABL while they were being abused. Some reported that when they began to look for support, it took a long time to find out about AABL's services.

Then once I realized [my relationship was abusive]...how do I get out of it?...I had no clue where to go.

There was just a chain of numbers, and eventually I got AABL. I called two or three people and went through the same thing where I'd have to spill my guts, and then they'd say, "Hold."

Many people reported finding out about AABL from their friends. Others had seen fliers or other materials.

Use of services

Most focus group participants had sought services from AABL. A large number had also worked with therapists or couples counselors while in their abusive relationship. Others reported using emergency mental health services such as Harborview Hospital, crisis lines, and Seattle Rape Relief. One person reported receiving support from a mainstream domestic violence community advocate program. Several reported contact with police with varying results. Sometimes they, their partners, or no one was arrested.

I got thrown in jail one time because we were fighting. She got thrown in jail another time.

Several survivors reported obtaining or attempting to obtain protection orders. Others reported contact with medical professionals during their abuse. One person reported attending a self-defense class for support.

Access issues

As noted, many participants reported that there were significant barriers to identifying their relationships as abusive. This was consistently noted as a barrier to accessing services. While many participants reported that they were aware of services, they did not believe that their situation was severe enough, and therefore "real" enough to merit services.

I knew about AABL. I didn't think my situation was important enough to go like to an AABL support group...It wasn't bad enough, or something.

I just didn't feel like it was accessible to me...I also felt like I didn't have a right to ask because I wasn't like physically beaten enough. Or, you know, I wasn't destitute enough.

Many participants reported that using the police or restraining orders was not an option they would consider. Participants reported that they believed that authorities would not treat them respectfully, believe their experiences, or offer them protection.

God, it never would have crossed my mind.
I was like, no way, get a restraining order. It was just like no one was going to believe me on that level. They are not going to believe what’s going on here.

You were lovers with this person, you’re a lesbian, it’s basically relationship or date rape, and very little is done...So don’t bother to put yourself through that process, ’cause it’s just going to be hideous.

In addition, some participants reported that they did not want to involve the police because they were hesitant to subject their partners to authorities that they themselves did not trust.

I wasn’t scared of her physically and just to bring the cops into it seems to bring in a whole other level of ugliness and complication. Even though I want her to stay the fuck away from me, I wouldn’t want to sic the cops on her...

Several participants noted that they were unable to access the legal system because while their lives were being significantly impacted by the abuse, the abuse did not meet their perception of the legal definition of DV.

I don’t think anything illegal ever happened.

No one in the study reported using DV shelters. Many reported that they did not consider seeking support at DV shelters because coming out and possibly facing violent and homophobic reactions created insurmountable barriers. Participants also mentioned doubts about the capacity of shelters to keep them safe by screening out their abusers.

It wouldn’t cross my mind...I’ve heard about lesbians going to shelters, the homophobia, having to hide the violence. It’s usually never the staff, because usually the staff are queer, but the other residents are very homophobic and there’s a lot of violence and trashing.

For about three years I went through this constant struggle in my mind of--am I going to stay at the Y? Or am I going to go and be with my abuser? You know, which sounds worse?...I couldn’t do it, I couldn’t just get myself to go to the Y and say, “Hi, I’m gay, I’m in an abusive relationship.”

Participants also noted that shelters and other emergency housing programs (such as vouchers) were often either full or took too long to access to be helpful in a crisis.

I called a few places, and every single one was booked, and referred the other.

Several participants noted that once they made contact with AABL, getting connected with support was fairly easy.

As far as accessibility, V---- worked around schedules and met with me a couple times a week....

However, several people reported wishing that AABL had longer hours, and was available during evenings and weekends.

Several participants mentioned that it was scary to call for services, and that it was significantly easier when they had information from a friend about what services would be like.

How services work

The majority of focus group participants had received services at AABL, and the majority of these participants indicated that they had had positive experiences. They reported that their needs to understand the abuse, and to be heard and believed, were met, as well as their need to reconnect in the community. Participants also noted that
getting support from people who could understand and name same-sex domestic violence was critical.

_They were so patient... Very patient and understanding... I mean I was with that support group for two years and we all supported each other. And they'd seen the weakness in me and they'd seen the strength in me. And I mean, I miss them so much._

_[When I came to AABL] I was really able to see models and really, really look at it, and be able to name some things and identify with other people._

_AABL was wonderful. I just needed to be heard, and I felt very heard._

_They saved my life, saved my life, and more importantly... saved my sanity._

Many participants reported getting support from therapists and couples counselors during and after the relationship. Most survivors had had bad experiences working with therapists and couples counselors who failed to recognize and name abusive tactics, minimized violence, or made survivors feel that they were to blame for the abuse.

_My therapist at the time was a lesbian and I would definitely say that I don't think it ever occurred to her that I was... she never gave me the impression that I might be in an abusive relationship... She implied that I was to blame by saying that she felt that I had one of those relationships that we brought out the worst in each other._

_I had a similar experience with a therapist who said, “Oh, you know, those are just lover's spats. You should go get her back.” [She was] a dyke therapist who was completely clueless._

_I even went to couples counseling with my partner, and was made to feel like it was my fault, because I was “too nice.”... It just perpetuated me feeling worse about myself. Oh, goodness, I need to do something more._

Participants reported similar experiences with other service providers as well, noting that providers without experience with and information about same-sex DV had the potential to make them feel worse about their situation, or made them feel responsible for the abuse.

_And [the guy on the crisis line] said to me, “Are you in anger management?”... I had never called her a bitch before and I felt guilty and I told the guy on the phone and he didn’t understand that I had been pushed._

_Others reported that therapists were helpful in identifying unhealthy patterns in the relationship, but would have been more helpful had they had put these patterns into context, offering specific information about same-sex domestic violence, identifying and naming abusive dynamics within the relationship, and exploring connections between dynamics within the relationship and broader social forces such as homophobia._

_I don’t think she really understood or knew about queer domestic violence, but she really helped me realize like that I was doing everything for [my ex-girlfriend]... and the amount of control._

_People who did have therapists identify their experiences as abuse or tell them about AABL reported that this experience was helpful and supportive._

_I did have a therapist tell me that she thought that my partner was abusive and that helped me, you know... but I felt like it was pretty few and far between._

Page 92 of 182
Several people who had contact with police reported negative experiences with them, reporting that they had been intimidating or overtly or covertly homophobic, had minimized the violence, or had failed to protect the survivor.

The police put me in jail, they handcuffed me... And didn't the police start up: "Well, you all shouldn't be lesbians anyway."

I understand that they have to make sure of what's going on...But it was very terrifying, and it was very intimidating and it made me feel like it was my fault...[The police said], "Well, you know we have to arrest somebody because you made this phone call." Which came across to me as really demeaning, and really like, "We know you didn't really mean to do this, and now we're gonna punish you by taking her away." When I'm like, "That's why I called you!"

One participant noted that she was treated very differently when being stalked by a man than when her abuser was female, and attributed this difference to homophobia and refusing to take seriously the potential danger of a female abuser.

They went and hunted him down and found him, and served him the papers...and I had a detective that was on my case, who called me like every week so see how I was doing... [They were] drastically different experiences. And that was really frustrating.

Several people reported better experiences with police, describing situations where police were able to correctly identify the abuser and work respectfully with queer survivors.

I hear sometimes that the Seattle police can be mean to us, but I haven't had nothing but good experiences with them.

I guess she beat me up and then called the cops and was going to have me arrested. But then they came and saw me and saw her and heard the stories and I was protecting her and saying, "Yeah, yeah, I hurt her," when obviously I was the one pretty much thrown around. And so then they took her away.

No one reported positive experiences with protection and no-contact orders, having found that they did not increase their safety. Some reported that they were under a great deal of pressure from their abuser to have the orders dropped.

They don't do anything. They are not worth anything. They're no protection. [laughs]

**Importance of same culture provider**

Many participants stated that working with a queer service provider was extremely important, and nearly all identified it as important to some degree. Many felt strongly that they would not have sought services at all if queer-specific services had not been available, and many were also clear in describing the extent to which it made a difference to be connected with a culturally competent provider who had specific information about same-sex abuse.

Totally and completely important. I would never have gone any other way...Even if my choice was straight people or straight people, I would have chosen none.

I knew that I didn’t want to try to sit in a room with straight women and explain what it was, where that difference was...And when I went and I sat in the first group, it was the most amazing feeling to sit in a room full of women who knew exactly what I was feeling, and who...may as well have taken the words out of my mouth.
Findings:

Being at [a mainstream program], like talking to straight women, and then coming here and talking to an advocate at AABL, you know, there's a big difference...[She asked me about] all these different areas that normally wouldn't have gotten hit.

Several people mentioned that while they would have accessed non-queer services if specialized services had not been available, they believed that being in a group of other lesbian, bisexual and trans survivors significantly impacted their experience.

Like I have no effort saying "she" [in a queer support group], whereas probably in another group I would have had to constantly make clear that I was a queer, and look around the group, and is that OK. I don't know how that would have worked out.

One participant reported being unconcerned with how providers actually identify themselves, as long as they were able to provide appropriate support.

I could care less what their identity is as long as they're willing to accept mine.

Several people expressed some fear about coming to a culturally-specific program because they feared that their batterers would already have connections there.

When I even came to the building I was in such a space that I thought my abuser was gonna be in that building, I was in such a space of feeling so paranoid and having such bad flashbacks that I thought that maybe the people at AABL would somehow find out who my abuser had been [laughing] and like have called her and have her there to like do a little mediation.

You know, is there someone there that knows me, that's gotta know that this is my girlfriend, and so protecting her.

Survivors' ideas for helping other survivors

Survivors suggested an enormous range of solutions for supporting lesbian, bisexual and trans survivors of abuse and for ending domestic violence. These solutions primarily involved community organizing and community building, which will be discussed in this section. Survivors also suggested several possible changes to existing systems, which will also be presented here.

It is important to note that several people stressed the importance of making all services and events accessible to survivors. For example, one survivor suggested providing child care and cab fare to make it possible for survivors to attend community events and services.

Community solutions

Most survivors expressed a strong desire to work against domestic violence within the community. Participants identified a wide range of ways in which queer communities might work together to support survivors, hold batterers accountable, and eliminate the conditions that allow domestic violence to occur.

Survivors stated that they hoped to support their friends in identifying abuse. In addition, survivors reported a need for support systems that are equipped with enough information to both support and challenge them.

A safe place where people who were educated in domestic violence could help me figure it out and then help me be safe and not feel completely insane and chained.
I'll say, "You know, honey, that's abuse." So when...I've been in those situations, I don't want my friends to tell me what to do but I want them to call me on it.

And then if people are seeing that happen, that one person is being controlled and manipulated by somebody else, that they need to step up and say, "This is not OK that you're treating this person this way."

Participants reported that it is therefore important to bring information about same-sex DV to queer communities so that survivors can identify their own experiences, and communities can learn to create systems of support and accountability. Specifically, survivors stressed the importance of sharing information about the complexities of emotional abuse, and the specific experiences of queer survivors. They suggested using community forums, ads in The Stranger (a free local queer-friendly newspaper), radio shows, and other media. One participant also stressed the importance of getting information to survivors in homeless shelters.

I think it is vital that information be put out there that domestic violence is more than just having your girlfriend punch you when she's drunk.

I was speaking out as a butch dyke who had been battered, [and] lots of butch dykes came up to me afterwards and said, "My God, I felt so much shame, and I am so embarrassed I haven't told anybody."

...Educating people who aren't currently experiencing it, in hopes that if they ever get into that situation and start to see the signs of it, they'll recognize them. So I think that it's way more important, almost, to put it out to the entire community.

Participants also called for the creation or enhancement of community norms regarding relationships. They suggested sharing information within communities about what vibrant, healthy queer relationships could look like and setting limits. In addition, participants suggested that communities could create the expectation that intimate partnerships should support community connectedness, not undermine it.

...Having models for kids and young adults about how...relationships work. Like how to set boundaries, how to...get your needs met, that sort of stuff.

[There should be a value that] it's not cool to fall off the face of the earth. You should have...friends that are your own, she should have friends that are her own, you should have some common friends...And not just throw it away...or assume that you are not going to hear from [your friend] for the next six months because they're in a brand new relationship.

As noted above, several participants stressed that such information would be especially crucial for people when they are first coming out.

What I saw was unhealthy, all I saw was drama, constant drama that was just like, "Oh, this is what my relationship is supposed to be like. My girlfriend is supposed to be running to the bathroom with tears streaming down her eyes, you know, for whatever reason. I'm not supposed to be jealous that she's kissing her ex-girlfriend because that's what you do"...I mean if there was some way to reach into that community and have it be a good healthy space to do that in...

Many participants called for the creation of community spaces. These sites would be places where members of the community could connect with each other, break isolation, learn from each other's relationships, and get support and information about their own identities. They were described as places where survivors could get support, and also as spaces that would move toward the elimination of the conditions that make DV possible.
Making more space for queer people... to be supported in different queer identities... A huge thing for people I know that contributes to isolation is coming out about gender stuff and dealing with gender and being trans... not having support around that, or all kinds of other queer identities, keeps people in relationships if that is their only link to that kind of thing.

I think it would be nice to have a place where people could go hang, or stay the night if they were in a scary situation, that they just needed to get away for a while.

One of the things that you may lose when you leave an abusive relationship is your entire friendship network, because she might take that with her... Just being able to find a whole other network to, you know, hold you and support you in that time, it's easier reevaluating your relationship with her...

The creation of communities that talk about queer relationships and value connectedness would create opportunities for members of the community to reach out to each other when they saw abuse happening. Many people described the possibility of powerful outreach and information networks, and stressed that they themselves were much more likely to seek support if they heard about it from friends.

The goal would be that wherever you are... if you’re just talking about your life, if you’re at... the barbershop or wherever and you’re talking about your life, there will be somebody that could say, “Well, that sounds like this is what's going on for you,” and get some support about that.

I think if I’d have seen a poster I wouldn’t have come... I had to be able to see healthy, queer relationships. I had to be able to identify unhealthy queer relationships and I think it would have had to come through friends.

Participants also suggested bringing Parents, Families and Friends of Lesbians and Gays (PFLAG) and other ally groups into these networks so that non-queer people would have the information necessary to skillfully support their loved ones.

They expressed a wish for accountability and support for abusers within the community. Suggestions included sharing information about who has battered previous partners, creating a climate where survivors can tell their stories and abusers are expected to own up to their behavior, and providing support for abusers who are working to change their behavior.

A big part of the support would be for the batterers to know that there are going to be consequences, that they are not just going to walk away and leave us fucking basket cases in safe houses or in therapy or in hospitals or whatever, and just keep going on.

I’d like to have a place to go to check where they’d have lists of lesbian batterers, so if you start dating this woman...

And so if [abusive behavior] is something that’s learned, then it can be unlearned if someone is able to recognize it and is willing enough. I don’t know that there are that many abusers that are, but if they’re there, there needs to be some way to help them do that. Because, God, yeah, the fewer of them we can have the better.

Participants noted that without such support, abusers may simply move on to victimize other members of the community

I’m thinking about my experience of seeing my ex-girlfriend getting involved with somebody else... I saw things that happened with us [happening with her] and I felt the pressure lift off of me and I’m sure it’s being put onto [her new partner]... It’s not really preventing domestic violence, it’s preventing it on me.
Since many survivors reported that they believed themselves to be abusive, it is crucial that those providing support to both abusers and survivors have the capacity to recognize abusive dynamics and to discern perpetrators from victims.

*I carried the number around for a long time without using it because eventually I had to use it because I thought I was abusive. And so I kept having to call and tell them my scenario and say, "Please tell me if I'm abusive and if I am what can I do to stop this behavior because I can't stand the idea of being an abuser." And every time they would say, "You're in trouble, you're not an abuser, you're in an abusive relationship with an abuser."

A number of participants also noted that addressing the larger systems of oppression that make DV a possibility is a necessary step in ending abuse in queer relationships.

*If you stopped wars you might be able to stop people feeling like they can hit people... There's always somebody telling somebody else that they're either more powerful than they are or that they don't deserve their place. And as long as that continues on, I just don't see [ending domestic violence].

*I think completely reconstructing society would be helpful. [Laughter.] Start with that.*

**Improvements to existing systems**

Some participants reported that there was a need for more crisis services. For example, some people who reported that AABL provided much-needed support stated that they wished AABL was capable of providing longer hours. People saw a need for a 24-hour crisis line with the capacity to offer specialized support to queer survivors. In addition, several people indicated a need for more shelter and safe housing for survivors to escape abusive partners.

Several people hoped to increase the capacity of a range of systems to be more supportive for queer survivors, suggesting education and training for service providers and police about homophobia and same-sex DV.

*Just to have the police actually be respectful and then maybe try being compassionate, and believing.*

*I'd make it mandatory for all health practitioners, therapists, ambulance drivers, everybody, to...learn about domestic violence for straight people and learn about domestic violence for queers...*
NATIVE AMERICAN

Community awareness and attitude toward domestic violence

Community

According to Native American women involved in this study, community members are aware of domestic violence (DV) but "turn their heads." DV is often accepted as a way in which men and women behave in relationships and something that others should ignore. Furthermore, women are encouraged to remain in the relationships and endure. This encouragement to endure plays into the belief that if it were really bad, the woman would leave, or even that the problems are the woman's fault—that she "asked for it." Community members may be reluctant to get involved and speak out for various reasons, including the chance that couples may repair the relationship and the cultural assumption that it is not appropriate to talk about other people's problems. Seeing abuse in relationships perpetuates the idea that DV is "normal" and inevitable.

"I think they see. They know it's there. As long as it doesn't pertain to them directly, they don't see it. If it's in their face, then they might do some—then they'll cry for help, maybe, or somebody comes directly to them. If it's someone else in your family, you're on your own pretty much.

But it's like all my life on the reservation, heads turn the other way. People don't want to know. They know that things happen, they just don't want to know.

I've told people, you know, what has happened and that I didn't know what to do, and they would make comments like, "It must not be that bad because you're still there." Or, just comments like that. Or, "You must like it, you've been there that long."

The hard thing is to get other people to realize that you are not the bad person. You know, to realize—I know that I'm not the bad person. I didn't do anything wrong, but the mentality of the general public is "Well, she had to have done something for him to do that to her."

The only way we talk about it, you know, is that they're gone. I couldn't talk about it. We would be running them down if we were talking about it.

My mom was abused, the whole 37 years she lived with my dad. He went as far as beating her up when she lost the twins, two sets of twins. So we watch my mom get beat up ever since we were little. We figure it was okay. And we, my dad used to beat us up and say, "If you can take my beatings, you can take any man's beatings."

You were out partying and someone's going to be fighting, eventually. So it was kind of, no one thought anything about it. It was normal.

Survivors often must experience a significant change in their knowledge and perceptions before they recognize that their abuse is DV and assert that it is not acceptable. Thus, women's beliefs are often congruent with the community's attitudes and awareness. Survivors have learned that abuse is more than just physical abuse. In addition, women described beginning to realize that they are not alone—that other women are abused, too. Furthermore, Native American women are learning that it is not only Natives who abuse one another.

"I think that abuse is . . . you know, I first thought that abuse in the beginning was just physical. I was really naive. I am pretty sure a lot of people were naive in the beginning. And then, came along the
thing that stays with you for life. The mental abuse. Which sticks for you, no matter almost I guess you'd have to almost be brainwashed of it to get it away.

I just thought it was just me, you know. The way I was raised, nothing was told to me.

**Differences in men's and women's awareness**

Several women spoke to a difference between how men and women are aware of DV complexities. Some men have different standards for themselves and for other men; they criticize others who are abusive, but do not recognize their own destructive behavior. This can be compounded by men verbally discounting the reality of DV and bragging about the need to use force to control women.

They're mad if I get beat about but they'll turn around and do the same thing to their old woman. And then if he does them to his woman, her brothers are mad at him and it just—it's weird because they'll be mad at another guy for beating their friend up but they'll turn around and do that to their woman.

It was just getting a bunch of guys together in a bar and they start talking and eventually they bring up their women and say, "Yeah, I had to slap the bitch a couple of times to put her back in line."

**Family**

Families, too, are often aware of DV occurring, but unwilling to intervene for a number of reasons. In some cases, there is a reluctance to criticize family members who are perpetrators, even if women are being victimized. In other cases, families may have been supportive in the past, or at least receptive to hearing about DV incidents, but they become tired of hearing stories and seeing victims return to abusive relationships. Wanting to stay out of other people's business can also limit intervention by family members. Often relatives are embroiled in their own cases of DV and are not available to provide support to women seeking it.

Growing up, watching my mom get beaten, it was just a fact of life, it was just something that happened. And, so I mean I guess, I mean when we would talk to like my grandmother about it, or anything, it was always, "That's just the way things are." So I guess, very, I mean very aware, really. Right or wrong.

The family, they'd cover it up, and keep it quiet. You don't talk about it! I was the one that broke that and I'm kinda outcast for it.

I stayed for almost a whole year. At the beginning, because I couldn't go to my family 'cause, half of them were drinking, and anyway they were all his friends and not my friends. They'd say, "Doesn't she know he's just drunk?" You know, "What's wrong with her?" Because, you know, they were his buddies. Even though they were my family, they were not my buddies. They didn't care about my black eyes, my broken eardrum, my broken nose. "She must have done something to piss him off."

R: And then it's like if you split up with a guy so many times, everybody gets tired of listening to your crybaby stories. Wah, wah, wah.
R: They know that you're going to go back anyway.
R: There's not support for crybaby stories.
R: They start making a joke of it instead of being serious.

Cause you know, they don't want to get involved, too. They don't want to be in the middle of a mess.

Well, mom used to get it still, you know she was, you know even though I was married already and into that. And, then my sister, too. She was into her abusive relationship. So, there's nowhere to go. You know. Where could I go?
A few women spoke about families which were protective and supportive. This may take the form of direct intervention by a father, brother of friend. In other cases, it may appear as verbal support and queries about how healthy a relationship is and whether or not a woman needs help.

In my family, I had a very large extended family, and a very large support group. The men, if they saw that, they would then immediately go over. My dad especially. He went right over to the guy’s house. My dad was a fairly large guy and he would pick the guy up by the collar when he answered the door. He would get face-to-face with the guy and say, “You know what, if you need to beat someone up, you had better choose someone your own size.”

To this day, [my grandma] still asks how I am and where I am and what kind of man I’m with and does he beat me. She always says, “You’re okay if he doesn’t beat you.”

What abuse looks like

For Native women, as for women in all of the groups, abuse takes many different forms, physical, emotional, or sexual. It may involve abuse of children or pets, destruction of belongings, verbal abuse, economic control, and threats. Abuse plays into women’s insecurities, creating them and perpetuating them.

Descriptions

- Stalking

They tell you that they're going to track you down and kill you if you ever leave them. You believe what they say because they've beat you up so many times... you believe them.

- Physical abuse

One time, we'd just moved into a—I was little but I remember—we'd just moved into a new house and my step-dad had just beat the crap out of my mom and she was laying out on the sidewalk.

- Emotional abuse — taking advantage of a woman’s past and her weaknesses

I think it's a lot to do with when you get with a man and you tell him your past history and how the other boyfriend mentally abused you and physically. And then they find out your weak spots and that's where they do you.

- Verbal abuse — name calling

The things the guys say to you is what you think about yourself, “You’re stupid, you’re bad.” Things like that, you believe it. And sometime in every conversation we go through, you'd be surprised at how much verbal abuse we take.

Being called dirty nasty names like punta, and dumby-ho, and stupid and you know, like for nothing, for no reason, just mental. To me that's mental abuse.

- Rape

... both of my nieces are teenagers and they were raped by their friend and my sister's boyfriend.

- Destroying belongings

I tried to leave him one time, I passed out all my stuff and when I came back for the next load of stuff, he had smashed up my stereo.

- Abusing children

Page 100 of 182

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He hit me once but then he started hitting my child. I would go to work and then I would find bruises on him.

- Controlling time and outside activities

I couldn't even hold a job. If I went to work, I had to call just as soon as I got to my job. Time-wise, I was always monitored for everything that I'd done. And call before I left to go back home, and if I was one or two minutes late I was beat black and blue.

- Locking in home

- Physically abusing other family members

Every time I tried to reach out and go see my mom, he even beat up my mom. So whichever way I went, whoever I had contact with, they'd get it, too.

- Economic control

There was no money so that I could go home because he would never give me any money or let me go anywhere.

- Isolation

I think one of the successful things about DV is to isolate. It's really important to isolate. They build those controls so they can punch you and your children. When you get out of that situation, the fear is still in there.

Making sure that I was in at a certain time. Not being able to have any friends, you know? And I have noticed that among other women who were in similar situations, that there was a lot of a sense of isolation. And a lot of the fear of just doing something wrong and the consequences of doing something wrong.

- Abuse of pets

I was with a man and there was never physical violence, but I could feel when he started that emotional abuse I could feel that physical violence was lurking somewhere, and he suddenly started abusing my cat. He said he didn't but I know he did.

- Instilling helplessness and fear

Before I ever got hit or was afraid for my life, a lot of abuse went on that strikes at the core. They teach you to be helpless. I was a very successful, hard driving woman before that. All of it is feared.

- Threatening to take children

You know what he told me? My abuser, or our abuser? "You know that I can convince anyone that comes in here and I'll tell them not only that you abuse your children but you will never see them again." And when I walked out the door, he told me, "I will take those children away from you, if I have to work on it for the rest of my life." Because he knew that he had done everything to me that he could possibly do and I was still standing and able to walk out, and I didn't go crazy over some of the things he did to me. And he knew the one thing was the kids.

- Monitoring phone calls

- Jealous rage, silent treatment, threatening to commit suicide

- Infidelity

- Abuse on reservations and outside King County looks similar to abuse here.

My mom was from X reservation. My mom was abused, the whole 37 years she lived with my dad.
I was scared to leave the house 'cause somebody would find out and it would be back to him. And I
would get beat up or kicked around or slapped around or whatever. If dinner wasn't right, he'd throw the
plate on the ground and make me pick it up and sometimes with my mouth, even.

Previous abuse in family of origin

Exposure to violence growing up was a strong theme in many women's stories. They
observed DV from the time they were quite young and in numerous variations: fathers
beating mothers, parents abusing other siblings, often with the additional complexity of
alcohol or drug use. Furthermore, women reported experiencing abuse directly from
other family members, whether it was from parents, siblings, foster parents or extended
family and friends. As in the case of DV experienced as adults, the DV women
experienced as children took many forms, ranging from emotional abuse to physical
abuse to sexual abuse. Women observed that their exposure to violence contributed to
their acceptance of it as adults and their perspectives that it was “normal.” This in turn
may play into their difficulties recognizing abuse as wrong and getting help.

I mean, I have memories of being seven years old, watching my mother being thrown down steps by her
own brother. And that every man that was in her life was horrible to her, and it was always, “That's just
the way things are.” And it's taken me twenty years to discover that that's not just the way things are,
and that that's not the way things are going to be.

We happened to bring something up at one time where we were in school. That we were being sexually
abused by my father. All of us girls. It happened at both ends. He kept going to jail and they separated.
We went to several different foster homes. Other than that we never talked about it. I was kind of upset
being in a strange place and being abused again by a foster family.

I was beaten since I was five and I kept telling my mom and she didn’t believe me until one day, she
walked into the kitchen and he was throwing me across the room.

The emotional abuse I went through was what I remember the most and it is also more painful cause it is
the tapes that always go on in my head. For me it was just like when the issue would start I would spend
most of my times focusing on getting away from that situation at that time, so when I’d get to a point
when I could sit and relax and breathe, it would be like another thing would be popping up. Another
violent incident, and I would forget about the incident I just got over.

Something else I discovered since I've been out here is, I've been emotionally abused all my life.

Only one woman spoke about witnessing DV between her parents which was dealt with
quickly and effectively. In this case, the parents explained the situation to the children,
and it was never repeated. There were no other reports of similar responses to family
violence.

Only once [my father beat my mother], us kids jumped on him. We were maybe four or five. My dad, he
just sat down on the floor and started crying. He and my mom talked it over and they brought us back
into the room and they explained that that was totally unacceptable behavior and he was very sorry and
that he would never, never do that again, get to that point. And he never did.
Alcohol and drug use

Alcohol and its destructive effects have a long history in Native American communities. This is no different in the case of DV. Women spoke about how alcohol impacted their relationships and their abilities to respond to DV—both negatively and positively.

I just think that you learn from the bigger people around you how to live life and if those people are teaching you to live life by selling you to their boyfriend for drugs or abusing you when they’re drunk or controlling everything that happens to you, then you’ll think that’s what’s normal. If someone treats you nice, you get suspicious and worry when is the shoe going to drop.

➢ Alcohol and drugs act as a catalyst for violence.

He’s the first guy I’ve been with who hit me when he was actually sober.

He got drunk one night and broke my nose and broke my eardrum.

➢ Drinking puts women at risk. Often abuse occurs when they have been drinking.

We would only fight when we got drunk. I’d get jealous when he was talking with other girls. When I was staying with my mom when I was growing up, she got beat up all the time. Dad get drunk and Dad would beat the shit out of her.

When I was living on the X Reservation with my girlfriend, it seemed like, everybody—like you said, it was expected. It just went with that part of the territory. What mostly people got into fights when they were drinking and stuff, and that was the repercussion of drinking. You know, like, went hand in hand.

➢ Trying to stop drinking or drug use makes some men and women more violent.

It was mostly when he came down off his drugs that I really was abused.

➢ Stereotypes about Native Americans as alcoholics may interfere with getting help, through women’s personal perceptions and when seeking services, especially from police.

I think a lot of people think—I’ve heard a lot of people say to the effect that all Indians are drunks. I mean, I’ve heard it all my life.

➢ Some women related their own alcohol use to a response to abuse, or saw it as a motivator to leave an abusive relationship.

I went straight to drinking to relieve that feeling and run.

I had to drink in order to get him out of my life. I didn’t have no courage when I was sober.

Characteristics of Batterers

Perpetrators are not all alike. However, Native women did talk about some traits that stood out with respect to the profile of their abusers. These included experiencing abuse as a child, using drugs or alcohol, and being abusive to children as well as women. In addition, the women asserted that the perpetrators would have to want to change in order to do so.

He was abused sexually by an aunt when he was young and he talked about it all the time. He didn’t want to be the way he was.

It has to be a choice for the men to do it.
Once a person with DV... you take a person that beats on a woman and throw them in jail, it’s not going to do nothing. It will just get them more pissed. Get them even more mad at the person who threw them in jail, even if the lady didn’t want to do it, they still do it anyways. Get ‘em counseling and try to figure out why they’re so mad. Why they’re so mean. Maybe when they were younger they seen their mom beat up by their dad and think that is what’s supposed to happen.

**Responding to abuse**

**How women feel**

Experiencing abuse caused the women to internalize criticism and question their self-worth.

- **Believing emotional abuse and criticism.**

  *The things the guys say to you is what you think about yourself, “You’re stupid, you’re bad.”* Things like that. You believe it.

  *He affects everything I think, say, do. I’m always thinking... I mean, I can never forget him, he’s just messed me up in my head. He’ll tell you you’re worthless and no good. It stays in there and your self-esteem is low and it’s hard to come out of it.*

- **Fear.**

  *I was afraid of everybody.*

  *I was afraid of what the future was going to be holding.*

  *Psychologically, I am afraid of a relationship.*

- **Depression.**

  *Anyone that lives what we’ve been through, there’s really no way that you wouldn’t be depressed about it.*

  *I cried until I was almost sick.*

  - **Dependency on others.**

  - **Personal values become confused.**

    *You stop believing in your value system. You stop believing in, like OK, well, nobody should hit you, but you see it all happening and you know all the time. And then once it does happen to you, it is just like, you want to just let it go, because it is just the one time.*

  - **Feeling like they deserve it.**

    *I accepted that because I felt that I wasn’t worthy enough to be. And that’s what I deserved. That I asked for this. I brought this on.*

  - **Disbelief.**

    *I couldn’t believe that a person that I loved, that said he loved me, could hurt me like that.*

  - **Shame.**

    *Shame. I’m ashamed that I’m—I don’t know. Just ashamed.*

  - **Destructive feelings and actions towards self and others.**

    *I tried to commit suicide and thought that I wasn’t capable of love, being loved. So I think, get out of that relationship with that person that hurt you.*

Page 104 of 182

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Wanting to respond with violence or hurt someone else.

I found myself really wanting to hurt someone. I felt that I could probably kill the man. And it scared me half to death.

You grow up being abused, and so you take abuse. And you don’t have to. And sometimes you turn into the abuser.

Keeping others away; not letting anyone get close.

I live on my own, and I have lived on my own for so long, I think it is really hard for me to let someone else come really close to me.

The guy I’m with now, he’s so nice and I don’t know how to respond to somebody that’s so nice because I’ve been treated so mean. And I turn around and be like that to him.

Until what was once—ah—warm and caring—it’s almost like your heart shrivels up. It has this cocoon around it and it’s covered with black so nothing can get through.

Actions women take

Women’s actions in response to abuse could be either self-destructive or empowering and leading to escape from the relationship.

Actions which were either self-destructive or perpetuating violence included: attempting suicide, using/abusing medications, using violence in response, or drinking.

That’s when I started commit—attempting suicide. Because they were threatening to kill me and I wasn’t going to give them the satisfaction. I figured if I was goin’ to go I was going to take myself out.

I’m on medication. Some days, I cannot get out of bed.

She stabbed her man, she’s paying for it.

I did find myself on top of him, trying to strangle him once.

My first husband hit me one time and I beat the crap out of him. I sent him to the hospital and—but he was emotionally abusive.

Other actions included calling for help or fleeing by leaving all belongings behind and taking on a new identity.

Finally one day, I made up my mind and grabbed some canvas bags. I packed what would fit into my car and I drove away.

Women also employed coping strategies such as ignoring the abuse, hiding and trying to stay away between beatings, getting counseling, talking to a friend, staying and trying to pacify the abuser.

So basically, from seeing my mother abused so much, I was able to stay with the man, and try to pacify him, to try to please him, everyday. So I wouldn’t be hit again.

Staying in the relationship

Women had a number of reasons for staying in relationships. For some, physical constraints effectively imprisoned them, and long-term isolation resulted in little available personal support. For others, psychological constraints prevented them from accessing help. Women also referred to practical and material difficulties, including
limited economic resources, reluctance to leave behind belongings, and the lack of available shelter space.

I know a lot of women out there that are just hanging out with the guys because they have got a home or they don't want to be alone, or they feel useless like their self-worth is so shot.

I stuck with him, 'cause I didn't have no money and he had a car and stuff.

As far as the possessions, I would rather burn up the house than leave it for him.

Emotional constraints included: terror that leaving means putting oneself in greater jeopardy for abuse, belief or recognition that reporting abuse is ineffective, reluctance to accept that the abuse is really happening, loving feelings for the abuser, time invested in the relationship, fear that the perpetrator will hurt himself, and concern about impact on the children. Concern about children is a barrier to leaving for some and a catalyst for escape for others. For some women, the only way to overcome these barriers was for the perpetrator to be incarcerated.

This one incident, I got beaten so bad, he parked the car. I think he thought he'd killed me because he choked me out and I wasn't movin'... I couldn't see out of my eyes... The detective come and found me and they took pictures, went to court. I went to court and they gave him—how much is six months—180 days. And he's never served any of it. He's never paid for my hospital bills or nothing, you know. Right there it showed me there was nothing I could do. Even if I did want help, it wasn't going to be there. So it's just a kind of no win situation so any time I got beat up after that, I never reported it.

Once it does happen to you, it is just like, you want to just let it go, because it is just the one time. You know, it is just a little incident. You just want to go on and be normal.

I still love him because he's all I got—all I know.

You stay in it because he's got 20 suicide attempts if you leave, you know, something like that, especially with children. I grew up with the vows, for better or worst, richer or poorer, in sickness or in health, so I'm here, you know, and I'm learning.

You know, you don't want to leave because the kids thing, and you're in love and all that stupid stuff, so uh, I guess now I would.

The only way I could get out of it, 'though, is 'cause he went to prison.

Seeking help—deciding to or not

For many women it took a dramatic change or awareness to cause them to seek help. This might be in the form of such severe physical abuse that a woman realizes the need to escape, or witnessing violence perpetuated by children and wanting to break the cycle. Deciding to seek help is the first decision to be made. However, having available resources to get necessary help then determined whether or not a woman was able to leave.

I finally listened to her when it came down that he finally had me almost blacked out in the bathroom.

I seen my son hitting my boyfriend, and then, I don't know, something snapped in my head. I said, "Gee, there's the degeneration of my family." So then, that was it.

Fortunately, that's how I got away, is a friend let me move in.
**Survivor needs**

**Description**

Native American women outlined diverse needs which correlated directly with the forms of abuse mentioned above. These needs were consistent across focus groups and fell into two basic categories: physical and emotional support. Although few needs appeared unique to this cultural group, resources to successfully address the needs might take unique forms based on cultural issues such as communication styles.

Physical needs included:

- Legal assistance.
- Emergency shelter and housing assistance.

*I would have money in my pocket and I would try to rent a place and they would be like, “You're on AFDC, you got to get a co-signer.” Nobody would want to co-sign for you.*

- Finding something productive to do.

*So it made me feel a whole lot better when I got my job. And I started learning things.*

- Medical care and medication.
- Transportation.

*It’s hard when you don’t have no way to get around. Sometimes I have to do a lot of walking to go eat, and wonder where I’m going to go eat. You know, I stash all my stuff here and there. I wonder where I’m going to shower at. And no one to talk to because I don’t know anyone around here.*

- Money.

*There was no money so that I could go home, because he would never give me any money or let me go anywhere.*

- Help to escape.

*Somebody to believe me. Somebody really to listen to what I had to say, and somebody to protect me ... when I actually made the move of getting away from the person.*

Psychological and spiritual needs included:

- Treatment for depression.

*I think a lot of women who have gone through abuse suffer from depression. Probably almost all of them do. I mean, that’s a big thing that you need to take care of.*

- Learning that they deserve to be loved.
- Case management and follow up.

*Legal help, and diligence, on somebody’s behalf. Because the person who is the victim is really weak! You know, they’ve been tore down and just totally smashed by the criminal! To feel like they are just this big, and they deserve nothing. You know, and I think that there needs to be kind of someone behind them to pump them up. To say, “You are bigger than this! You are better than this! You can fight this!” . . . There needs to be some strong advocacy out there on behalf of victims.*

- Victims’ advocacy.
Findings: Native American NU Final Report

- Anger counseling.
- Someone to talk to with whom women are comfortable: friends and companionship.

Companionship. Somebody that's gonna treat you better, then you can get away from that situation. 'Cause if you stay in that situation you never go beyond that point, or that household. You know, if you don't go out and communicate with other people, you're gonna forever be in that abusive relationship.

You need friends, you need people outside of your relationship that can talk to you or help you or something.

I thought it helped me out a lot, just talking about it instead of keeping it in, and maybe just listening to other people, thinking, "I'm not the only one going through this."

I needed an ear and a shoulder to cry on.

The Crisis Line. When it happened over here, I talked to the person on the phone. That helped. Just having somebody to talk to. It helped a lot.

- Getting out and getting perspective on the situation.
- Support system.
- Treatment for alcoholism.
- Understanding of and education about the cycle of abuse.

And, if you don't get that kind of education, then you're just going to go right back into another one.

- Support groups.

It's really, it's really tough. I mean, the gals that I have seen in the support, the group that I am in right now, they don't understand Reservation life, you know, they don't understand even growing up in the country. You know? I come from a very different background than they do.

Availability

Women spoke primarily of the fact that resources were not available to meet their needs. In some cases this was because family and friends were drained—the women talked about how people get tired of listening and supporting—and in other cases providers were not available or were over-committed. The precarious nature of a DV situation meant that even when women were able to find service resources, their own instability prevented them from accessing them. For example, there was no way to leave phone numbers when calling for help.

There's no support for crybaby stories.

I'm 18 right now. There's no shelters. We've been hunting for three days.

I sleep outside every day, every night. I have—for the past eight months I filled out papers for housing. I haven't gotten no answer, no nothing.

There are no resources. There is no housing.

I always get answering machines, there is no numbers you can leave, to say "Oh, well you can call me here!" And it would just be like this phone craziness.

Some women were successful in finding help to meet their needs. Often in those cases, available resources came through friends. Helpers included: friends, crisis lines, shelter...
staff, other shelter residents, counselors, neighbors, family members, case managers, police, attorneys, Seattle Indian Health Board doctors, churches, and Seattle Housing Authority.

I never went and got professional help or anything. I'd tell a friend.

At the shelter, I feel very, very safe. I'm with women who I know and feel like I do. They don’t say, “You're stupid” or “Why did you stay that long?” or other stupid things, and it makes you feel better.

**Use of services**

**Awareness of domestic violence services**

Very few women were aware of the range of services available until after they had gained entrance to the system. Awareness was a huge barrier to using services.

I'd tell a friend. I didn't realize there was so much available to you. When you're in a shelter, and even when you leave a shelter, they give you a whole bunch of numbers and places you can stay hooked up with because you have to have, you know, counseling for the rest of your life.

Well, my husband beat me up really bad and I didn’t know who to call. I didn't know anything about DV places. When I got beaten up, I didn't have no place to go and I had to walk downtown 'cause there wasn't any buses. And I didn’t know where to call.

That's something that I didn’t know about, was shelters. I didn't know nothing like what I could have access to, as far as getting away from the situation.

I never, I always had a stigma about shelters, I just always thought they were like for homeless people, like they were dirty or something....I never thought about...I was kind of naive. And I never knew that there was women and children out on the streets when I was younger.

I didn’t know that they had shelters.

I, I know here, I guess, the crisis line.

There was none that I know of. The only help that I got was through alcohol. Or stealing to survive.

I know now we have shelters. That's good. I know that, that they help 'em. So then they, they can hide 'em, you know—hide the women and the children.

**Use of services**

Participants cited the following agencies, institutions, and services as avenues for assistance:

- Emergency shelters
- Community-based DV advocacy
- Seattle Indian Health Board
- DV classes
- Court

So we went to court, and I had to take abuse counseling and anger management.

- Anger management counseling
- 911/police
I got help from calling 911 on a neighbor that was beating up his girlfriend.

The cops have been to my house numerous times.

- Hospital
- Case manager
- Psychiatrist
- Seattle Housing Authority

My case manager convinced me to go with her to Seattle Housing, and I thank God for that. I now have my new apartment in Seattle Housing. I feel safe. The people are nice to me. It's just remarkable how a case manager and the people who really care about you with the Seattle Housing can help you. That's what you need unless you really love this gentleman.

- Treatment centers
- Attorneys
- Child Protective Services
- Crisis phone line
- Restraining order
- SSI

Access issues

The women described a number of barriers to accessing resources, which might meet their needs. These barriers included lack of time, lack of child care, difficulty reaching people by phone, no transportation, and no money.

- Transportation.

You know what else is hard is when the police do get there and they ask you if you want to go to a shelter, there isn't no transportation.

They're way out in [south King County] and you have to walk a mile and a half to get to a bus station and a mile and a half to get back.

- Shelter issues, including age limits and lack of space.

Three kids. I put them in the Toyota and went around to all the shelters. I was in a line with a bunch of other women. I couldn't get into them. They're full. "We'll call you." Yeah, but if Mother leaves the house then there's no one there. He listened to every phone call. He monitored every conversation. And then he grilled me on it. . . . When Mom moved, I spent a week. I stayed out all day, all day until about midnight. Then I would come in and sleep and be out of the house by 6:30 or 7. Looking for a place to stay. Then I decided, "Well, we can live in the car with two babies and a son that wasn't on the proper behavior medications." No way, no way. So I tried thinking of all the alternatives and what I came up with was I don't have any options right now because I don't have any money. I decided to go back and if he kills me at least they will have a dead body to show that he did it, and my children will be safe because he will be in jail and he will be made responsible for what he did to us. That is my best alternative and I made peace with it. So I went back and I wrote out for my mother what to do, her to do for them. I wanted her to take care of them and if she couldn't because of her age, I wanted her to maintain guardianship of them and find a family member who could.

- Difficulty making contact with services.
When I was living with my abuser . . . every time I would pick up the phone, somebody else would pick up the other line. When I left the house, they knew right where I was going. I was not able to do anything, really.

- Difficulty accessing services because of lack of childcare.

Other barriers included psychological factors such as fear and distrust, women’s refusal to leave behind personal belongings, isolation, fear of being alone, and a belief that women have to handle problems themselves.

Every time I tried to reach out and go see my mom, he even beat up my mom. So whichever way I went, whoever I had contact with, they’d get it too.

Which I was told so many times. “Once,” you know, “once you lose me, then what do you have?” Kind of thing is what I was constantly told. “You are not going to have anybody.”

- Fear.

You know, I had a hard time signing the papers to send him to jail. . . . [The policeman] told me, he saw my face and said, “Sign the papers, he can’t own you.”

- Ignorance about available services.

I was really naive to what was out there to help. You know, my friends weren’t helping, it’s like, you know, she said, nobody wanted to get involved.

- Reluctance to ask white strangers for help.

Being a Native I depend a lot on my family, and going to a shelter is like asking a strange white person for help, you know. And I can’t do that.

- Not trusting self.

I didn’t trust my plan. Because I didn’t really know if I wanted to do it.

- Double bind of being lesbian and Native—not comfortable seeking services from specialty provider for the Lesbian/Bisexual/Trans community.

- Confidentiality—not wanting small community to see them.

- Shame.

- Distrust of the legal system (often based on previous experiences).

That is one thing that I am kind of angry about, is that my son’s dad never got to go to jail. But then again, what is jail? They get to watch TV, they get to play cards, I found out that jail is not really that bad! The thing is, though, that still I am kind of upset that the fact that he didn’t have nothing bad happen to him. You know, he is upset he has to pay child support now, but he thinks that I’m making him to pay child support because of the things he did to me! And it is like, I am still taking verbal abuse from him!

- Navigating and understanding complex legal system.

Right now I’m kind of scared because when I went to court the other day, his lawyer came up to me and wanted an investigator to talk to me about what would happen. Just say she wanted to tell the judge, you know that this was going from April through July, every day when he was still getting drunk.

- Fear and difficulty in dealing with Child Protective Services. This was probably the biggest system complaint.
If CPS saw them, they would have removed my children because they would have blamed me. And they would have taken them and left me with this person that I had just called the police on. And I knew what that meant. And I had to work with this unreasonable agency trying to get my kids back.

When I was in my abusive relationship with my husband, I went to CPS and asked them to help me. "I need somewhere to go. I'm in an abusive relationship." They said, "We can take the children but we can't take you, try to find a shelter." I said, "Please, I've tried shelters. None are open." They said, "Well you can turn your kids over to our care. When you're on your feet, well give your kids back to you." I said, "I don't think so." I got beat up and called the police, and they took my kids from me. They said that I was in an abusive relationship. That it was my fault... And, they're going to give my ex-husband visitation rights when he sexually abused them and physically. It's just a screwed up system all the way around.

The system's way of helping, helping is to take the children away.

I kept going through the same cycle the same thing again. They'd say, "Well do this and you could get your kids back." So I'd do it. Then they'd say, "No, well you gotta do this now, and you can have your kids back." And, I'd do it. Then they say, "Naw, now you gotta go over here and do this, and then this and this and this." And it was a circle, and then they want me to start all around the circle again. So, one day I said, "That's it. I'm done, I'm finished, I'm through. And going crazy as it was. And they didn't have no reason to take my kids, none whatsoever. Period.

> Concerns that foster homes are abusive.

I just think that the group homes, they're really out there, you know. Foster homes, they don't... they need to get better ones for better people 'cause we're... you know, me and my sister, were mistreated just as bad in foster homes as where we were.

We are victimized by the system oftentimes.

How services work

Women reported that a number of services worked well for them:

> Court mandated anger management class.

It helped. Anger management helped me to go to someplace quiet and meditate. It really helped.

> Shelters.

There's twenty-four hour crisis counseling. It's always available to you. They can hook you up with anything that you need. And you are very safe. That's a big issue, that you're feeling safe.

I would recommend a DV shelter to anybody. It's the best thing that can happen to you.

'Cause I was at a woman's shelter and they got me to employment, food stamps, money. I got into treatment. You know. It was just really amazing.

Safety's the key. Where I am they have cameras outside. They don't even open the door until they see who it is. And, every door is locked behind you. It's almost like jail. You don't feel like that when you're inside. You know you're just safe.

Probably I would say that what was mostly helpful was the people that were helping me. That were greeting me at the door. Because I was expecting a bad attitude from anybody, anywhere, everybody. It was just like... and just their kindness, the people in the shelter's kindness helped me. And the understanding, that helped me, too.

> Section 8 housing/Seattle Housing Authority.

I went to a shelter and sometime in that year my Section Eight came in, and that helped a lot.
Findings: Native American

➤ 911 mandatory response.

Well, at first, I'd try and call 911. Luckily I found out that if you called and your partner hung up, they'd still come out. You know, so that was good.

➤ Case management.

➤ Doctors (including staff at the Seattle Indian Health Board).

➤ Counseling.

➤ Crisis line.

The Crisis Line. Because the person I was talking to on the phone didn't have to know my name and didn't have to know anything about me. When she explained to me that I was always good enough, I was always important enough. That I should be able to step forward and do something, before I ever did. She made me realize that my little girl was worth living for.

At the same time, women reported that some of the same services (and some additional ones) did not work well:

I think the one thing that has always been consistent is that nobody believes me. I have therapists that say "she has classic symptoms of DV." I am being treated for PTSD, depression, anxiety and panic attacks. Everyone just ignores it. The man has admitted to being brutal and sexually inappropriate. And they don't even know all his hang-ups. Even by his own admission of those things. He made a sexual encounter on my four-year-old daughter. All I can say is whose penis is it. And nobody—the court just ignores. Everybody, the parent evaluators, my free attorney, everybody just down the line. They just believe him, and that goes to a larger question in our society.

➤ Police.

I was still kind of upset that the police didn't take that extra initiative, maybe find out what nationality he was, or what my current situation was.

When the cops were involved instead of taking her away, they would just make me leave the apartment, you know. Because they didn't really take it serious or something. Because it was two women. . . . When they did come out, they would throw me out of the house! You know? I'm the one bleeding, but it's her apartment.

I remember trying to explain the situation and they would interrupt me. It's like they have their own agenda, you know.

The police department says they're going to help and they don't help. It's just that time when he was slapping me around and I was bleeding from the nose. They came, finally. They did take him away. They wanted to take me away because he convinced the police that I started it. But who's the one who has the bloody nose and the hand print on the face?

I called the police and all they did was take him out of there and he was right back the next day and flogging me again. Ah—it seems like when you need help—the police—you can't get any. They seem to be on the side of the abuser. For me, they seem to be.

In Canada, he wasn't allowed to be near me at all. There was no phone calls, no contact, nothing. Over here, he contacted through the phone and came right to the place.

I said to the policeman, "I have to come in here with two broken arms or dead before you'll believe there's a problem."

➤ Legal system.
That’s the thing I am the most mad about, is the judicial system. Is when you call, how they have the law, I don’t know if it has changed now, but they have to have four hours. After that four hours, they can’t find the domestic violent, the criminal, he is free to go!

My problem is now that they’re going to be releasing him because he pled guilty on one felony. He said that he could walk that day. If I didn’t pull strings that day after he went to court, he could have been out.

> Seattle Housing Authority.
> Shelters—geographically inaccessible or unavailable.
> Attorneys.
> Child Protective Services.

When they’d send my daughter home to visit, I’d cry. She’d have only underwear on. Holey shirts, no socks. She would have bugs in her hair. This was in Native American homes that were supposed to be taking care of babies. They’re not doing it. Then they have the nerve to say, “We’ll do better for your kids if you turn them over to us.” Thank you, I’d rather send my kids home.

> Housing—needing a co-signer or previous rental agreements.

She couldn’t get into housing because she had had no prior rental agreements.

> Native counselors.

For me, I know the counseling I’ve had around Seattle in different facilities here that are Native-based, I find really unprofessional, a lot of ‘em. I’ve had confidentiality . . . you know . . . I mean, the counselors out at the bars and you know . . . . It’s got to be a lot more professional, I think, than what they have now.

Importance of same culture/language provider

Responses vary as to whether or not a same culture provider is important, but the majority of women felt that it was important due to issues of spirituality, race discrimination, history of persecution, mutual trust, understanding of cultural ceremonies, and stereotyping.

I think so, because of the spiritual part of it.

I think in some ways it is really hard for [white people] to understand the struggle. Because they live in a white-powered society, where they are more accepted and probably less, how do you say it? Not criminal-ized or demoralized, or picked upon or picked out. You know, or prejudice against, etc. They are la-di-da. Walking through, everything is OK, you know. And I think dealing with somebody on the same color classification and maybe speaking my same language, if I decide to speak some ghetto-ness, they can understand what I am speaking as far as ghetto-ness!

It helped me a lot because Native Americans have a different way of cleansing themselves. And just like I said, I could go like maybe a white person would not be able to say what kind of religious things I could do to cleanse myself. They might say go to church, but they wouldn’t know the history of that. And I kind of know the history.

Yeah! They won’t pull out the smudge bowl. That helped me a lot, is smudging and just doing a lot of different things about being strong and protecting myself, you know. The Native person can teach me how to protect myself in a Native way, like smudging, and not cutting my hair, and just leaving it on the ground so someone can stomp on it! And you know, just things like that, little things. And the music, the
powwow music was a big healing for my heart and made my heart strong again. And that is not something I would feel a white person could understand.

I feel they'd be with the identity. You know you'd be able to [relate] with the similarity. The Native, they've walked in your moccasin. They know how you feel, they know how far to push you and how far not to. You know, the outsider race, they'll continue pushing us, and then we close up. Like a little shell.

The Natives are more humble. They're not competitive all the time, pushing people around, just you can feel it. I'm real sensitive. You're dirt, don't go talk to them.

You're Native, you're probably an alcoholic. You know, just stereotype us.

When, in my own experience, when you don't have anything else to hang onto, the one thing you can hang onto is who you are and where you come from. And that's becoming more and more apparent in my life, as I am slowly trying to dig out of the hole that I was in. And try to discover more about who I am, and try and cling on to my own traditions. So, yeah, I do think that's important.

Because with Native women, you know, you, you think alike. You don't think like White people do or Black people. We know how we feel.

➤ Other participants did not feel that the provider's background was significant.

I'll get the help anywhere I can. Don't matter who's giving it. Whether the therapist is blue or pink.

➤ Several women reported that experience of the counselor as a survivor helps.

It was the women that were abused themselves, that listened, who talked to me, that helped me the most. They really know what you're talking about.

Children and teens: needs and issues

Native American women are very concerned about how DV affects their children. This is obvious from the significant role children play in women's decision-making about leaving abusive relationships. Furthermore, their biggest systemic complaint and distress comes from their interactions with Child Protective Services. These women have knowledge about specific children's and teens' issues based on their own childhood experiences. In addition, many of them are parents. Their requests and recommendations regarding child welfare resonate with the other cultural groups struggling with issues of children exposed to DV. Native women ask for the following services or options to address the needs of children and teens:

You have to show the children that they are respected, too. And that is how they learn respect.

➤ A place for teens to go with activities, counseling, etc.

A place where you can do what you want. If you want to talk about problems, that's okay, but if you don't, okay. It was hard for me to talk in front of a lot of people about what's happened to me. You need a place to go where you don't feel like a prisoner.

➤ A place for kids to play where it is safe.

➤ Classes and education about DV for kids.

Teach them early—you can't teach them when they're already, you know, abused or anything. You know, you have to teach them early.

What I'd do, top of the list, is to make sure there is something for the kids. And not like just a nursery, but I'm talking about to teach them about—it's not right for Daddy to hit Mama. So they can understand
it, because they know what they've seen. And it may have to be done a special way if they're little, but there has to be some place for kids. They need to know that it's not right.

- Support groups and individual therapy for children.

They should have a kids' program that they could go to that's confidential, but to where they go and they talk to the kids' support group so that they don't call their parents. Oh yeah, or somebody goes to CPS and they get a knock on the parent's door, oh yeah, "Your child came to this abused children group and ah, we're here to talk to you guys about your kids."

If you're gonna have something [for] women . . . the kids need it too, 'cause they go through it too. They see it, and they need counseling too.

- Native culture atmosphere.

I don't know if you are like leaning towards children, like if we get children more involved like in Native type of atmospheres, would it make an impact on the future? I think, yes, if we got them involved and kept them involved. On a positive level.

- Housing and other services specifically for teen women and parents.

- Housing for women with children.

- Safe childcare.

The main one is childcare. Something that's confidential, something that is going to be private, you know. And so, I mean, I think that's the hardest one, is trying to get my son into a safe place, where he is not going to be found, you know? So I think that would probably be the hardest one, is childcare.

- Services for children with special needs.

- Drug and alcohol treatment for children and teens.

Women’s ideas for helping other women

Outreach

Suggestions for ways to reach out to Native women included: more media coverage, (including television), billboards, flyers, diligent case management follow-up, word of mouth referrals, and 1-800 numbers to reach services.

Prevention

Prevention has to take many forms, directed at various different segments of Native society. It also must include non-Natives, especially since some of the Native women's perpetrators were non-Indian. Furthermore, some preventive steps speak to women in abusive relationships who need help preventing further abuse while others address societal issues of preventing abuse on a larger scale.

- Prevention for women should include: education for women about DV warning signs; adequate housing for as many women as need it; free daycare; innovative, free shelters; regular women's support groups, some just for Native women; treatment and services which are confidential; and more survivors' counseling, both individual and group.
Findings: Native American

[It would be good] if victims were made aware of those little things that you can look for in a person that would set off that inner alarm.

First I would buy a whole block of nice little houses, a whole block of houses, and no woman would be turned away. And if they needed to not care for their children for a while because they have such difficult issues that they can't work on the children's issues, then the children would be taken care of inside that group.

I would buy about a hundred acres with a twenty room house so everyone could come that was hurt or injured or something. And anyone could come. They could help with the garden. They would have a girl who'd have her own cattle and her own wheat and stuff like that. They'd be free to live with the real things. They could come until they felt ready to go out on their own again. I'd have swimming pool, too, because that's how I got better, with a swimming pool.

My son was caught shoplifting in the mall . . . and when he was caught, he had lifted a staple gun, and two boxes of band-aids. He was going to build a shelter for abused children. That's a child's point of view. DV shelters really offer a lot. A lot of services. And electric fences might make us feel safer because they can't hurt us down. I'd feel 100% safer.

➢ Prevention for children should include: More education of children about DV and about respecting themselves and others; cultural events for families; and programs to re-build strong family units.

Why not go into the schools and teach the kids when they are young?

Things to bring the community together. Cultural? They can be cultural? They can be social events, arts events. Something to involve the whole family.

➢ Prevention for perpetrators should include: prosecuting and making perpetrators responsible, treatment for perpetrators, and anger management training.

I think the key is to making men responsible. Grown men responsible for what they do, just like Seattle Rape Relief. The number one thing that they say is you have the right to be safe. The second thing is that the perpetrator will be held responsible for what he did.

Then I would take about twenty thousand dollars, maybe a hundred thousand, and get the person that was abusing them.

Get 'em counseling and try to figure out why they're so mad.

Money should go to anger management to teach appropriate behavior. A lot of young men have never been told what is appropriate and what is not appropriate in their behavior. Peer help and peer pressure.
RUSSIAN-SPEAKING

Community awareness and attitude toward domestic violence

Community

Most women who participated in focus groups reported that the Russian community is not very aware of domestic violence (DV). They said that it is often a hidden issue that is seen as a woman's own problem. Some women said that it is considered the norm in relationships between men and women, and it's expected that women should tolerate abuse from their husbands. Several women compared the experience of DV in the former Soviet Union to their experience here, saying that in their countries of origin people did not talk about DV and there was no support for women experiencing it, in contrast with the U.S.

DV is a normal thing. It is part of the destiny and you have to tolerate it.

Yes, an attention was not paid on that [in the former Soviet Union], nobody emphasized that, like they do it here. Nobody paid attention to that. It was considered normality.

Russian women said that for them, talking about DV in public is not comfortable, nor is it considered appropriate. Several women said it is considered airing dirty laundry.

It is shameful to us. We were raised differently. I do not know, maybe this is a very developed country and maybe they think it is best if they tell everyone what is going on in their families, their lives and everything. We are not used to that. We were ashamed of that. But here it is all different.

Yes, not polite. What if someone thinks of your family poorly? Yes, to take a dust out of your house [Russian idiom—to wash one's dirty linen in public]. Yes, yes. In general, they are hiding it. American families in fact are also hiding it.

Several participants said that Russian women in general tend to be patient and because of this tolerate abuse for a long time. They said that keeping the family together is a value and women often try to smooth things over with their partners, and are not likely to immediately ask for help.

Our women are very patient...They ask for help at a very last case. It is exactly like that. Only if is life-threatening situation and something terrible is happening the woman asks for help, because I know that our women are very patient. I think this is one of the characteristics of our nationality.

A few women said that it's important to be selective about to whom you disclose DV.

If she shares that with a friend, if she has a good friend, loyal friend, the friend would usually tell her to be patient because of the life, etc. That we all went through this. But if you tell this to a different person, that person could blame you in any way, therefore you do not say that to anyone because it becomes like a gossip.

Some women pointed to gender roles in the former Soviet Union as contributing to the community's attitude towards DV. Some said that back home men were considered head of the household and women were often in subordinate positions. Several women said that because of this they did not feel as though they had any choice but to accept abuse.
The education here plays a big role. We were taught that men are the head of something and women have to obey them and lead a second role. She must do every single chore in the house and also to earn money and look after their kids. And they do whatever they want to.

Even when the woman comes here, her mentality doesn’t change. She always thinks that her husband is the feeder of the family. It was the same thing I had in my family—my husband is the feeder. I had to tolerate a lot because he was the feeder of the family and my child. It will take me some time to change my mentality. It is hard to do in the Russian community.

Several women mentioned that in the former Soviet Union there were no services for women who wanted help for DV. One woman linked this to difficulty seeking help in the U.S. She said that for many Russian women it is not in their experience to use community services for DV and added that the longer Russians live in the U.S. they will likely grow increasingly comfortable with using the system to respond.

There are many organizations here that help women and therefore our women were more silent because there was no place to go for help because nobody would help. And here they have many organizations which help women because that is their responsibility.

What abuse looks like

Descriptions

Women described the violence in their lives in many ways. In most cases women experienced abuse by husbands or partners, although some mentioned abuse by extended family members or children. In all of the focus groups, there were participants who were currently or formerly married to Americans who came to the U.S. on fiancée visas or to marry American citizens. Sometimes women in such relationships are referred to as “mail-order brides.” Often descriptions of abuse were situated in this context—the difficulty of leaving one’s home country, relocating to the U.S., not speaking the language, not having a social support system, not having personal financial resources or the ability to garner them, and entering into an abusive relationship. Abuse was clearly linked to women’s status as “mail-order brides.” These women frequently did not know their rights, and were often coerced by partners who said that they had control over the women’s ability to stay in the U.S. In addition to the particular forms of abuse experienced by “mail-order brides”, women also described a broad range of abusive behaviors, including emotional, physical, and sexual abuse, and financial control. The following quotes describe various types of abuse women reported.

Several women described being isolated and prohibited from meeting other people or leaving the house.

I practically did not communicate with anyone. I was lonely, never seen anyone. I was at home with my husband and his family and I have seen several friends of his. He is not very communicable. In principle, during the last six or seven months we have met only three married couples at most.

Financial control was another aspect of abuse women reported. Some said they were not given any money, were forced to ask for it, and were not allowed to work. Other women worked outside of the home, but their husbands controlled the money they earned.
He did not want me to go to work, he wanted me to stay home. And on another side, he would not want to give me any money. It turns out that I depend on him, like on a short leash. If I had to buy some stamps to send a letter, I had to ask him. And if I needed, I am sorry, to buy underwear, I also had to ask. I could not live like that, it was so disgusting.

He was just taking all the money away from me and I had a feeling that he needed a fool from this country, women who knew nothing besides the communism, who knew absolutely nothing and had no rights.

Emotional abuse was discussed frequently and the damage inflicted by it was equated with physical abuse. Women described instances of physical abuse less frequently.

It is so much abnormal, that you begin thinking that you are really crazy and you are not normal, and you are going crazy or a bad person. That is what they are telling you: “You are so and so.” It just simply humiliates your self-respect. If there is no physical abuse, then the psychological abuse at such a high level that is practically impossible to tolerate.

As my husband said; "I do not quite understand what punched eye are you talking about, why your daughter called the police. Well, now, do you have a bruised eye or not? After I even bought you tickets to the concert. I do not understand, what bruised eye? How ridiculous." When he hit me in the eye for the first time I was in shock, but he said it was not a big deal, he did not know what I was talking about.

Several women reported that abusers not only threaten their wives or partners but also those who try to help them.

My girlfriend helped another friend, allowed her to stay. Then her husband was jumping into the house, threatening to kill everyone, after which my friend told me, “I will not help anyone. Why is he crawling into my window? Seems like a decent person.”

Threats of deportation were common, as was keeping women uninformed about the immigration process, not doing necessary paper work, and not allowing women to get green cards.

He wanted for me to send my daughter away. He said that I fit his family, like shopping in a store and she does not. “Does not fit,” he said. Well, “she does not fit therefore [she has] to go home.” He never thought whether or not I will be able to see her again. He was not preparing documents for me, and he was holding me on the short leash. Meaning that I constantly thought, “Why is he not doing anything?” Well, at first to get married or not to get married. For three months he held me in total ignorance.

I do not want to be kicked out from here as my husband would want to. He told me once, “I love you so much that I cannot allow you find another man. I brought you here...and I can send you away if I want to. It would be easier to cut you out of my life.” He wanted to send me back to suffer in Belarussia.

One woman said she was forced to live in substandard conditions.

I got married to this American and when I was brought in here, in America, it was also a very shocking thing to me because in the letters it was one thing, absolutely and when we came here we were put to live in a garage. That’s all. The garage was cold and that is how my child and I lived. That was my marriage.

A few women described incidents of abuse from extended family members.

I was dealing alone with the whole family. What they were doing over there was totally impossible. I cannot even tell you what was happening. I decided to leave. I did not hide it, I told them that I couldn’t live in such atmosphere. Then they started to mock everything and me. They set my husband against me. He began to beat me. Every day I was losing my conscious, in such atmosphere.

For one woman, abuse included her partner’s attempts to make her get an abortion.
So, I was at home and time passed. Finally, what happened, I got pregnant. When I got pregnant I told him that we would have a child, he said, "No, you will need to have an abortion. If you will not have an abortion, I will, I will get you out of here."

A few incidents of sexual abuse were also mentioned.

I have an acquaintance of mine, she married an American and he was married four times here. Of course she did not know anything about it. After living there for two months her child was sleeping at the doorsteps [i.e. there was no place for him in the house] although the house was huge. Well, what was there? Moral abuse, sexual abuse with the use of stuff bought from store, as it called here "Love Shop" store. He tried to use on her all the things. Indeed she had not English, nothing. The person just came here. He tried to contrive her and use all of this stuff with her. In two months his former wife helped her to escape the house.

A few women who were married to Americans reported that they were discouraged from speaking Russian at home.

We start speaking Russian [mother and daughter], he said that they, as he said that they indignant that we talk about them badly, and if we want to speak Russian we have to close in the room so none could listen and talk. We did not have time because she is coming from school at four and I start feverishly to prepare dinner before he comes. He told me, "We do not like to wait," but when they sit at the table everything must be on the table. Of course, I tried to hurry, I did not have time to speak with my daughter. She told me, "Mama I am missing you, I am alone."

Women also reported that men lied about marital status and previous marriages.

When I was cleaning the house I found the papers, he told me that he was married once and have a child with that woman, but in Immigration papers I found that he had two other women, one from China and another from Egypt. He never told me about it. When I asked him that question he said, "I just helped my wives, these women to come here from their countries, just brought them here." Then I started to watch him very well, and I saw that all the papers, he lied to me about everything.

Characteristics of Batterers

Although we did not ask explicitly about batterers, in the course of describing abusive incidents, women also described some of the characteristics of the men who abused them. A few women found out that their husbands had histories of international marriages and abuse. Additionally, women in international marriages said that men promised them all sorts of things before they came to the U.S. but the reality was very different.

They found out that he was married six times, and I was his sixth wife. And two other women filed the petitions that he sexually abused their children.

Well, in writing to us it was one thing, and at the end it was another, absolutely. I was so abused that I cannot even tell you about it.

Responding to abuse

How women feel

Frequently during the focus groups, women talked about their feelings as a result of being abused. Humiliation was a strong theme. Another was feeling a loss of strength and emotional fortitude. Some said they felt as if they were going crazy. Another common feeling was nervousness and stress. As in some of the other cultural groups in
the study, we heard from a few women who said that they were ready to kill themselves or their abusers.

I started to disrespect myself and constantly felt humiliated, constantly.

I never cried so much as here, through all my life I have never cried so much. As I was crying here, I thought I would die.

R: Please do not think that I, I truly was very strong in Lithuania, very strong, emotionally stable, rather strong. But here, I was completely worn down at the heels, that I could not believe it because I was completely worn down.

R: Yes, yes.

R: Yes, worn down.

R: Yes.

R: I was totally leveled with the ground, I could not believe in my strength, I was forgetting who I am, and what I am, I was forgetting where I put my tooth brush, completely everything. I was forgetting everything and I could not see anybody around me...

Psychologically it is such a huge step, even if you come here and everything is all right, it is shocking to you. But when you get abused, you completely lose your mind.

I was in such nervous condition, I was under stress, my whole face was swollen, and because of my nerves I could barely hear.

Just by accident I met a person who helped me. That was at the last moment, when I did not know, I was, I was ready to die because I did not know what to do.

Because when I was living with my first husband, I caught myself for several times that I was holding my hand on the knife, that I wanted to kill my husband. I was looking at myself like that, feeling that I was holding a knife in my hand. In my thoughts, I wanted to strangle him at night. I was thinking to commit suicide, all kinds of thoughts. I was totally crazy.

Actions women take

There were several strategies women used to respond to abuse in their relationships. Some talked about trying to make things work and taking a conciliatory approach to the abuser.

I try to do something, I say, "[Daughter], go away and hide in the room." I try to do something here and there to make everything good, nice and quiet, etc. He is a king, in the bad mood.

Yes, to smooth it out if you are being humiliated, and one day he will decide to hit you and kill you within one second, it will be too late.

Others discussed getting out of the relationship and taking steps to become independent of the abuser. They said that this was often a difficult option since divorce may be looked upon with disapproval by others in the community.

Then I left them and did not know where to go. I was happy to meet people who sheltered me. I lived with complete strangers to me for one month and a half before she found an apartment for me.

I do not know, I did not tolerate anything. I think that every person looks at this differently. I am such a person, I can tell you my own stories. I can tell you that Americans helped me a lot, they directed me to the right path, where to go, what to do, and I instantly was explained all the laws...I expelled my husband from the house, from his own home. And until now he cannot believe that, he said that Russian women [are] much more lashing than Americans.

For us it was completely, how could you divorce your husband?
Some women tried to talk to trusted friends or acquaintances, while others described not having anyone to turn to since they could not speak the language and were intentionally isolated by their abuser. One woman said she was so desperate for help due to her isolation and inability to speak English that she walked the city streets listening for Russian speakers. Finally upon hearing a familiar language she approached two female strangers and asked for help.

**Staying in the relationship**

Many of the Russian-speaking women we spoke with had left abusive relationships, while others were still in them. The strongest theme regarding why women stay in their abusive relationships was a strong desire to keep the family together. Another significant issue was the experience of being alone in the U.S. and not having support. In one of the focus groups participants questioned why one woman was still in her relationship:

*R:* Why do you allow them to humiliate yourself?
*R:* People are all different.
*R:* Yes, exactly people are all different. Therefore some of them allow to...
*R:* I know that it is all wrong. Well, I have a family...OK, you are here to build the family and to keep the family.
*R:* So, why do you have to suffer so much?
*R:* And I know that nothing is going to work out at this family, that eventually I will have a divorce.
*R:* Then why do you have to suffer?
*R:* Because we are here all alone. In Russia we have the whole family, but here we are all alone.

**Seeking help—deciding to or not**

There was little explicit discussion of what made women decide to seek help. However, for one woman, it was escalating abuse that involved her husband’s attempts to cause her to miscarry.

**Survivor needs**

**Description**

Focus group participants identified a wide range of needs that they have at all stages of relationships, ranging from information which would help them to live independently, assistance with legal issues, and basic social and health services.

Information of all types was a priority for Russian-speaking women. Women currently or formerly in international marriages talked about the need to get information—before leaving Russia—about the possibility of DV in their new relationships, as well as information on resources to turn to if necessary. Another informational need is the rights a woman has as a legal resident of this country. Women also said they need more information on American laws, and a better understanding of immigration policies and procedures in particular. Otherwise, they are often dependent on their abuser for such information, which increases their vulnerability in relationships.
Information, information, information. We do not have any information. You sit and know nothing. Looks like you have no way out. No information. Because of that you go crazy.

Well, I wanted to divorce my husband and my son wanted to stay with him, with my husband. I needed to know my rights. Was it possible for him to stay or if I could take him with me? Then, how can I, which apartment can I stay in, whether I can use the Section 8 program or not. I needed to know everything.

If you live in your own country, no matter how it is, it is still your country. But when you get here, please, be kind enough, if you invited us here, be kind enough to protect us, so people would not drive crazy and the children would not have to see what is going on here. We have to have some kind of information that if you let Russian woman to go abroad, please provide her with the defense.

We do not know anything about laws, nothing. It would be nice to have, to have more information.

Yes, more. So she would talk to us, educate us about laws and how other people live here. As I may say, when we came here we do not know anything. We do not know how to behave ourselves, what is acceptable here and what is not, and how to behave, what to do. It is completely different country. Everything for us is new here.

We would really want to have someone since we are in this country for not too long, to explain us the laws, and to have more information for men so they stopped mocking at their wives and knew about these laws. Maybe later it would be easier and everything would be in Russian. So people could be educated or at least read about it. Men should know about the punishments when they abuse their wives.

In addition to information, Russian-speaking women expressed a variety of material needs. For women with few economic resources, resources for food, housing and transportation were seen as critical.

Well, when I had desire to leave my husband, I could not because I had very little of money...

You see, at the moment when the divorce becomes final and you have a child, you get maintenance before your next marriage. It comes up to, if you left the house, you also get money from your former husband and he has to pay for that. All of this happens at the very end. You see, I am coming back to, please help a woman at the beginning when she has no place to live, she does not have a normal job, no language, not many friends. And this particular moment is very difficult for everyone who goes through all of this.

And I have a small child. When my mother was here for six months, everything was normal. But when my mother left, my baby was six and a half months old and our day care began. I was getting up at four in the morning, and I was walking for two and a half miles with a stroller because buses are not going there. Buses do not go there. Two and a half miles, I was dropping him off there then it was taking me a half a mile to find a bus stop to get to work. And after work I was going back to pick him up, walking for two and a half miles again, because there was not a direct bus that went there.

In my situation, I did not have absolutely anything, just an empty pockets, absolutely nothing. Of course I had, I had a job but when I lost everything, even my own clothes, lost, had no place to live, I got to the shelter for one month. Well, what is there? How can I save something within one month to be able to rent an apartment? Anyhow, it was the biggest problem.

Yes, it is impossible, because an apartment, when you do not have money, you pay some fees as a down payment, for the first and the last months, and it comes to a couple of thousand dollars. And it is good if an apartment is inexpensive. But sometimes it is even $1500.

Other needs included daycare for children and help learning English.

Yes, English is a very big problem. Yes, especially with the language, my girls have tried to translate something, they give information in Russian. I did not have any problems but it is a problem...At first, I had difficulties to understand, she said, "I gave you an information, why did not you go?" But it was written with scribbles, I could not understand.
Russian-speaking women discussed at length their need for legal assistance regarding filing for and obtaining a divorce, and for help with immigration issues. Another area of need was medical insurance and medical help for women and children. Women said that they wanted to seek psychological help to cope with their experiences, and also needed general physical and dental health services for themselves and their children.

I am an absolutely physically healthy person, but something happened to me. Some kind of depression, maybe. That is, my head started to jerk. But I am [an] absolutely normal person, but I could not find doctor. Any medical help was needed. If I would have three to four sessions, everything would be beautiful. It is hard to have those sessions—no insurance and no doctor, nothing. Well, it is OK, I survived.

Another need expressed by women in many of the cultural groups was to be able to have some time for herself, often away from her children in order to cope with her situation.

I was thinking to leave a child with someone for two to three days so the woman could go by herself. No, just to relief the stress, to dive into the normal life, to have a normal look at your own situation. Then you would not need neither psychologists nor sociologists...

Services

Awareness of domestic violence services

Russian-speaking women reported that finding out about services to help women in DV situations was neither straightforward nor easy. Some had no idea they might be eligible for such services due to their immigration status. Some were told by their husbands or partners that no one would help them. Others said that since such services did not exist in Russia, women did not know that help might be available. Many women reported that they were unaware of services, and found out about them by accident. They were referred to services by a variety of people. For some, an acquaintance gave them the phone number for ReWA or another DV agency. Another woman was referred by a Russian attorney. Another confided in an official at the school she was attending, and was provided with the phone number of a DV agency. Still another was helped by the ex-wife of her abuser. In general, women felt that it was difficult to find out about services, and it often happened by coincidence, i.e. meeting the right person or asking the right question.

In my situation I did not know anything. The Russian community that I was surrounded by also did not know anything. I had only several Russian girlfriends from the college. They did not know about any assistance, and I was choosing the path 'til the very last moment to stay in patience, and another way was to go back....Just by accident I met a person who helped me. That was at the last moment when I did not know. I was ready to die because I did not know what to do.

I personally found this out by complete accident, in spite of the time that I was a victim for a long time myself, that accidentally when I talked to L----- I asked her, “Who are you, where are you coming from?” She told me, “I am with such and such organization and I can help you.” Well, I grabbed onto her and asked her to help me. If we would [not] have [had] this conversation, I would probably suffer for another ten years.

ReWA was often the point of entry for Russian-speakers accessing services. Once a woman found ReWA, she was referred to many more services. Finding ReWA (and,
specifically, the right advocate) was said to facilitate access to and awareness of other services.

Yes, an acquaintance of mine, a girl, also gave me L-----’s phone number, and she told me that she helps these kind of women who get into such situations. It was a bright light at the end of a tunnel for me. That was the feeling I had. I was glad that something exists here, because I did not know anything about these organizations. You just sit and think what to do, where to go. I was running a high fever, I was laying in bed without health insurance, and he did not want to take me to the doctor.

Several women say that they would have accessed services sooner if they had been aware of them.

Well, once a month we gathered together at Refugee Women Alliance, where M----- works. We had something exactly relating to DV. Everybody was there: Philippines, Americans, Russians, Ukrainians, Vietnamese and all nationalities. We were explained, told about...well, you sitting there, and thinking for yourself. “If I would have this knowledge two years ago, oh my God, how everything would be different.”

Yes, if anything happens, I know where to call, who to talk to and what to do next. I am very please that I know a little bit about the law. When I came here I did not know anything, what and who to talk to. Now I know a little bit of that.

Use of services

Women described using a variety of services. Some women got referred to services after they accessed emergency shelter. Others accessed ReWA first and got referred to a number of services for shelter and other basic needs. Some women also reported using the police, accessing private lawyers, interpreter services, welfare and the courts for divorce and restraining orders.

- ReWA
- DV Shelters
- Community-based DV advocacy
- Police
- Legal services
- Private lawyers
- Interpreter services
- Welfare (Department of Social and Health Services)
- Courts: restraining orders and divorce

Access to services

Women reported a variety of experiences accessing services for DV. One of the strongest themes was the difficulty getting information about services. Women frequently said that they found help by coincidence. Language was a barrier for many women who could not read the phone book or speak enough English to ask someone for help.
In addition, isolation by the abuser impeded women's access. One woman said her movements were so controlled by her abuser, she was not able to leave the house to try to get help.

In my case, I did not know English, and I had terrible tragedy at home, my husband is saying, "Do not go anywhere, I speak English and you are nobody." I started to walk around and to listen for people who spoke Russian. At the post office I heard Ukrainian language, an older woman spoke with her daughter. I came closer to them and started to cry, I told them what was happening to me. It was a month before my awful circumstances. I told them that I feel bad at home, and you see, I told them everything in general viewpoint. Then after that her daughter started taking me to the church and began speaking with the management, and they gave me the phone number to some lawyer.

I had such an English that I could not even explain what was happening. They told me an address where I should go. I did not have a car. He was controlling me all the time and I simply could not go out anywhere.

Personally, I was followed everywhere, everywhere. I could not leave home alone.

Sometimes women had no idea they were even eligible for assistance because of their immigration status. Abusers told women that they would not be able to get help and sometimes instilled fear of police.

My husband always told me that, "No one would help you here, ... no one needs you here. Go back. If you do not want to handle it—go home." Meantime I had no idea that shelter can help me, that being an alien I am eligible for some kind of assistance.

Other factors that influenced access to service were barriers such as lack of money and transportation. In addition several women said that they were embarrassed to ask for help, and ashamed that they needed assistance. Several women tried to access emergency DV shelter and were told that none was available.

But I tried to pick up a phone and call here, but it was embarrassing to call from the shelter to different places. I called twice, three times but "No available places, no available places." I gave up for a while, lived in the hotel and went to live with those people, Samaritans. We do not have not only information, but also available places.

I am very ashamed to ask that, because first of all I do not have enough English, and secondly I am embarrassed to press my problem on them. But I do not understand a lot...I can bring some values to this society, very much so, because I have a huge work experience, thirty years. I studied all my life, but how to find myself here, how to utilize myself. I do not know how to ask someone.

Russian women also said that ReWA’s location is not convenient for those who live in the north end or on the east side [of Seattle and King County]. They suggested that culturally specific services for Russians be available in these locations as well.

Some women reported using informal help because they couldn’t get housing otherwise.

I have not had money at that time. L----- has sent me to live with an American family for one more month. They accepted me free of charge.

Women find out about services through friends and others they are in contact with, such as attorneys, churches and teachers. Some said that people in the Russian community, with whom they can most easily communicate, are not very knowledgeable about services.
How services work

Once they were able to access them, Russian women found many services to be helpful. They said services provided them with safety, peace of mind, moral support, help navigating systems such as courts and immigration process, and needed information on U.S. law and their rights. In addition, a number of community based organizations were highlighted as having been particularly helpful. Women praised services where they and their children were treated with respect, where they were connected with other services and where they felt supported by staff.

Even if you were rejected only once, just once, you have to hit another door. Why did I dial a telephone number, just went outside to call, requesting Russian interpreter? Right now. I was connected to the special line with person, then another, then third and all four women on the line, they all talked between themselves, while I was on the line also. I asked them: "My visa expires, what do I have to do? I am standing outside with my child, I do not know where to go here. You understand where do I have to go? Please explain to me what to do. I do not know where to go. I am standing at such and such street, and I do not know what to do because I am with my child."

R: Did you just call them on the phone?

R: Yes, just on the phone. Four of them, four of them began to... maybe you have a Russian church here or something else where I could go to. In spite of my shocking condition, you have to look for the way out. Women on the line... we are all together talked and they told me - shelter. The only way out is shelter, shelter. That was all, they connected to people, and... While we were standing in that square, other women came up to us, women picked us up. Do you understand how was it? In any situations we have to try... for the sake of our children, at least. We have been in such... do you remember our country? How many times we were slapped in the face, how many times we defended our lives. After that you still turn the other cheek, then you forgive and then go on with your life. Therefore, we have to get stronger and go on.

ReWA's services were highlighted often. Women were able to get connected with many resources and services in the community through ReWA, as well as emotional support. Lessons on laws and DV offered by ReWA were thought to be very helpful.

It is very well organized here. For instance, there is an organization, Women Refugee Alliance where I went. They have people there who work with people of different nationalities, like L----- works with Russian-speaking population. With African group, a woman who knows their language. With Spanish group, theirs. When you call there requesting this kind of assistance, they connect you with the representative who speaks your language. L----- solve it all, like the roof above your head and food...

I had lessons with L----- and I have a certificate on DV. I know all the laws in the State of Washington, absolutely from A to Z, on what kinds of rights do I have. It helped me tremendously. If not these classes at the time when I was getting married for a second time, I would run into that again, very difficult situation.

Many women highlighted the help they got at local women's shelters such as New Beginnings, Eastside Domestic Violence Program, and the YWCA.

First of all, even people themselves are very benevolent, they even smiled, sympathized to make us feel easier. When I arrived there I was nothing. Even then they were like, they were nice, maybe with an exception of one or two women, but the rest of them were wonderful. Secondly, upon your arrival you are assigned to someone who was taking care of our accommodations. She showed me the way, sat down with me and talked. We filled out the paperwork. She instantly told me they will help me to find a social worker, Russian-speaking and that was exactly what she did. Then she told me where I can find the food...
and gave us the address of the food banks. Oh yes, they also gave [my daughter] and me the raincoats because when we came here it was raining. [My daughter] had only winter coat and I had leather coat.

At the beginning my child and I got into the shelter. Of course, for about three days we slept and did not want to wake up, feeling that we are free. I did not understand that it was a shelter. It was some kind of escape.

That is what I was saying before, I needed absolutely everything. At that time, I got into the shelter and I started to learn how women here get protection, already after that. I got into the shelter. It was like a paradise for me. I began to come back to normal. I started to live, started to breathe, started to even smile after two weeks. I thought that I got into the fairy tale story after my home. That is how; little by little I began to live from nothing, from insanity.

For instance, my first shelter in [south King County] was beautiful. My daughter and I lived there... Nobody bothered us, nobody. I fell in love with that Eastside Domestic Violence. I agree to go to the shelter. I like Eastside Domestic Violence so much, although they were saying it was bad in there. I consider myself very lucky, because all services that I was offered, they helped me with everything, everything they could. The only thing they could not do, the lawyer’s things, but I have a very complicated issue. I am so grateful to Transitional Housing and Eastside Domestic Violence program, I have no complaints at all. Upon my request at Eastside Domestic Violence, I lived in the shelter for two weeks. We also had very strict rules, but we never felt so much pressure, because rules are rules. But in spite of the rules they told us “If your child wants to eat bring him to us if you need anything, bring him to us. If you need to take something, feel free, feel free.”

New Beginning’s transitional housing, which provides long-term, temporary housing, got high marks.

I know the New Beginnings program not from the shelter’s view, I know New Beginnings from new transitional housing program. They separated, and they are completely different. Back there, you feel yourself like a human being. They are trying there very hard, really trying. I have the most wonderful feelings from them...

I do not know about your program, but I really enjoy the program New Beginnings, I pray on the New Beginnings. It is OK that we had a very good room, but once a week they have these kinds of meetings, we had a free daycare. Totally free meetings, if you want you can go, if not, too. For instance, I always want to go and everybody else, too. Over there they do some kind of psychological tests, games, and tell us how to improve our self-esteem. Sometimes we sing with candlelight and do potlucks, just like that because of having an interest. I learned a lot about different information that was available that I did not know before. I joyfully started to tell that to all Russian women who do not know anything about it. How did you get all of this? I was just so lucky that it is amazing. It is amazing how somebody gets all and somebody does not.

Interpreter services at meetings/support groups were appreciated greatly.

Every time they had meetings, they called for an interpreter. Sometimes I thought to myself, oh my God how expensive I am here in this country, interpreters and everything else. What can I say, I am very grateful for everything. They have great respect for people.

The Salvation Army was highlighted for helping with rent and providing financial assistance

There is another program, Salvation Army, it is a program that helps you to rent an apartment for six months, pays fifty percent, it is like a start. After that you have a job placement. Well, they help in everything from inside out, lift up women from inside out.
The services provided by Northwest Immigrants’ Rights Project, Columbia Legal Services, and Overlake Legal Services were said to be very helpful.

Then I went to Columbia Legal Services, it is also a volunteering organization that helps low income and abused women. There I met O----, O----- helped me in fact with papers.

Overlake...Overlake Legal Service. They helped me to pay my electricity bills, because in the winter the cost for electricity was up to two hundred dollars per month. Then they helped me to get an education. Thanks to that organization, I finished my education and I am able to work. I earn $10.30 per hour and of course, it is not a lot of money, but at least I can pay for my own bills.

I can only thank these people. Meantime, they continue to help me. And I am studying in the college.

Government assistance such as welfare and medical coupons were essential for helping women provide for themselves and their children. Some women reported positive experiences with the police.

With me, they were very polite...

When police came, they do not talk to you initially, they will talk to you first or him, what you want to do, what he wants to do. And he said that he wants to take his wife home. I told them, “I am very afraid because he is very drunk and insists that I have an abortion and I cannot. But please do not take him to the jail because he never drinks. I saw him drunk only twice. Do not do anything to him.” And the officers went inside the house, they sent us home also, and he was left outside. Several minutes later the officer run in, and then they called two more cars, because they found a loaded shotgun. So he came to pick me up with a loaded shotgun, an illegally loaded shotgun. Then I did not know anything. The police told me, “You have to think for yourself what to do, an abortion or something because you have not rights, nothing.” I had absolutely nothing. And they asked him, “Why do you need a shotgun?” And he said that he wanted to kill himself, and he did not want to come there. In short, they got scared and called for another two cars, they took him away.

Some women used private attorneys and psychologists and found their services to be very helpful.

Other services did not work well

Some women had negative experiences when they accessed services for DV. One of the biggest criticisms was of shelters. Although some women had very positive experiences there were others for whom stringent rules and lack of privacy made their shelter stays very uncomfortable. A few women said that they did not feel that shelter workers and residents offered moral or emotional support.

The girls told me about shelters, that the rules are very strict, that many people are trying to get inside your soul that is very closed. They explained that it is best for a woman but I think it is best here. It considers the best for a woman to live with two to three women in the same room, in case if she wants to hang herself. In some cases, probably it is worse. You understand, some women need to be alone... I have my sorrow, and here I have somebody else’s and you have to carry on your shoulders your own and
someone's nearby. It is very difficult. You just want to close up within yourself and not to listen to anything. I do not know, it is very difficult.

When I got to the first shelter, I thought how lucky I am, what a great service. If I would still be in Ukraine we would probably be dead by now. We were so happy there, it was such luck. But when we went to the next shelter, I though to myself, "It is not as nice as it looks, my suffering just only starting." It started when my child could not understand why she cannot eat just a sausage, or why she could not watch there...listen to a music, or TV downstairs, that is all. Well, you could not and that's it. At nine everyone had to go to their rooms, like in the prison. It was very difficult. Even for children who survived do something before then, again... some kind of pressure, again, they were thinking, where did we get to?". My daughter asked me, "Is America all like that?," she said, "It is so bad here".

Other problems with services had to do with lack of availability. Free lawyers and legal help was often not available, or there was a long waiting list. ReWA's services were lauded, but in several focus groups participants said that the Russian advocate is too busy and does not have enough time to assist them thoroughly with their needs. The only criticism of ReWA's services was that the Russian-speaking advocate has too many clients and is too busy.

R: I am not very well informed but L----- is almost the only one like that in Seattle, who speaks Russian and can help, like shelter, etc. But it is not enough.
R: Yes, Yes. It is absolutely not enough.
R: But I am sorry. You cannot have everything all at once.
R: Because, how many Russians are here? You know... It is more than 100,000 people here.
R: For as long as I lived here, L----- was the only one here.
R: Seattle...Bellevue...
R: I think it would be more than 100,000. Well, Russian-speaking...

*Facilitator: Thirty thousand...
R: Even then, to have only one like L----- is very little.
R: Of course, very little...
R: We need two L-----'s.
R: One is not enough for us.

Women also had difficulty accessing medical services for themselves and their children. Some women expressed displeasure with police services they had received. Poor treatment, lack of access to interpreter services and jurisdictional confusion in getting a protection order served were some of the specific problems mentioned.

The police here, especially in Bellevue, is really something, you know. They have nothing sacred to them absolutely nothing, especially in Bellevue. I asked him to give me slippers and he did not. He walked me barefooted and my child saw it, how they put me in the police car. And now my child asks me, "Mom, will police take you away?"

What can we say about the police? When I asked for an interpreter, he told me, "You speak a very good English." He knows my English better than anyone else, or me. Well, it was awful, of course. Again, you do not feel that you have any rights.

And the police at this moment...I am sorry I have something else to say because it has to do with deficiency in...to do a restraining order, I also had to deal with that. First, I had restraining order for one month, two months, up to nine months, after that they made restraining order for two years. OK, the computers... In one police department your name is in the computer system and in another you are not. When I call the police, they arrive, telling me that they do not have any records. And then from my house they call, requesting the information and it is not available. When another police arrives, from another department, they have everything. It is a complete disagreement. I was telling them, "Trust me, I have a restraining order." Then they wanted me to show them my documents. How can I show that to
them, when I do not keep any of my documents with me in the house? I have to keep all of my documents at my friend's house. I cannot take my documents with me. Somebody trusts on my word, requesting information on my restraining order through the health computer system. Here, it would be better to...organize this kind of work...at least, to have the same records. That is all.

I also called the police when he was abusing me. When the police arrived, the person was very well built he asked me, "Where you physically abused, or not? I said: "No, he did not beat on me but he is abusing me..." In two words I explained to him that I came from another country, that I did not know any English and he prohibited me to study English. Although I could communicate a little bit, he did not allow me to go to school. And the policemen...he was set against me right away, he said, "If you were not physically abused, we cannot help you here."

That is exactly what I am saying. It is exactly why I did not call the police...

You probably have to go and hire an attorney. The police officer had to tell me where to go and look for help.

One woman reported having a conflict with police who told her that she should leave her house and go to a shelter. She refused, arguing that her husband should have to leave and that she was legally entitled to stay.

One woman contacted her embassy for protection and was told to contact a lawyer.

In my case, free lawyer did not help me. I had problems; I had to pay for another lawyer. Now it is all going on for two and a half years, it is all going on. Well, free lawyer is good, like for consultation but if you really have something serious not always they can help.

**Importance of same language/culture provider and services**

Most women felt it was very helpful to get assistance from women who share culture and language. They cited as reasons the difficulty of working through interpreters and cultural differences, and said that often it is easier to talk with other Russian women. Hearing the Russian language helped to put some women at ease; others felt that it is easier to trust a Russian helper. A few agreed that they feel Americans look down on Russian women who come here to get married.

Everybody understood me, in the shelter they were nice to me, L----- also, well, I did not feel, you know, humiliation or shameful feeling. When you go to such organization you feel somewhat awkward because you are at the certain age that you can deal with it yourself or find such assistance. Well, you are here because you do not know the language. You are so helpless here. And when you see, when I see a Russian person I feel that my compatriot can do only good thing to me.

I do not speak English. I speak Lithuanian and Russian with mistakes, and that is all. My husband spoke Russian and in America, as he came here, he spoke in English, he completely forgot Russian. I was walking with my big ears open like the elephant, catching on the Russian language. It is very important.

R: It is their opinion that if you got married just to come here...it is like a stigma on us. But if the person is Russian, like L-----, it is a different story, it is all different. You feel that this person is worrying about you and understands you.

R: Yes, they understand.

R: Because we have the same culture.

R: Because of the culture. Because they better understand us in our situations.

R: Because Americans think of us as we came here to get their husbands, something like that.

R: Yes, I frequently hear that.
Findings: Russian

R: As a rule, they do not know what was going on, or the circumstances, but they already feel biased toward us. Because American women do not play around with these men. It takes them two to three months to realize who he is, and what it is, and they give it up immediately.

We also asked about the importance of culture and language specific support groups. Women were divided on this issue. Some thought that the cultural and language make-up of the group would not matter to them and that it would be helpful to be with women from other cultures to recognize similarities with other women. Others said that being with other Russian women in a support group is very important because of cultural differences with Americans.

All women are equal. Women are women. In contrary, you feel yourself like, someone would think, I do not know, some kind of picky, or something, and as you look around you see from India, and Americans are here, and Filipinos, and from Laos. It means that I am not the only one like that, but all women. No, it is normal. It is even better if the support group is international. We do not need only Russian-speaking groups. Most of them lived in clusters in Auburn, Seattle, South Seattle, and North Seattle areas anyway. And here with your problems you run into someone with similar problems you recently talked to on the street, it's already uncomfortable. But if they are Americans, it doesn't matter.

In my opinion, I think that it would be useful to get an information from American women. Why? Because many of them went through that, and they know how to behave in that situation, they can give an advice, they can explain. If I would listen to...maybe everything would be different. But I am, by my closed nature, very favorable person... What do you say to change the lock? What do you say to make a no contact order? How can these happen? I had to do it instantly, momentarily, because they, Americans, know what needs to be done, you understand?

Children and teens: needs and issues

We asked women if the needs of their children and teens were addressed when they sought services, and also what women think should be done to provide better help for children and teens. Women talked about needing more help in taking care of the material needs of their children. Daycare was an important aspect of this.

I think that we do not have enough childcares, which have the schedule, that... I, for instance, I sometimes work in the evening, until ten in the evening and I do not have a childcare. I also work on the weekends, and I do not have childcare then also. It is very difficult, very difficult and the government, DSHS gives...for instance, the pay...depending on my income, right now; they pay only $260 per month. For $260 a month...and I pay $260 also, it means that for $520 dollars nobody will look after your child. Many people want us to pay from under the table, do you understand that?

There was some discussion about interaction with Child Protective Services and fear that children might get taken away. One woman felt that a lawyer at the shelter asked her daughter too many questions, which she felt caused trauma for her daughter.

They obviously wanted to know the story from her point of view. I think that they traumatized her even more. I would not allow them to do that. I told them later, "I think that you should not ask these questions." After that they treated me with coldness because they thought I was hiding something. I simply did not want to traumatize my child even more.

Several women thought that it is important to provide activities for teens in shelters and in the community so they can focus on their own lives rather than on their mothers' problems. Some services for children and teens have been very helpful, in particular
counseling services, Big Brothers and Big Sisters, and the Day Camp at Garfield, a local community center.

I have an example. I am using the organization that is called Big Brothers and Big Sisters. You would not believe but my boy, who is thirteen years old, they gave him a "Big Brother". This Big Brother, he is twenty-three years old, his name is X and he is very positive, very positive guy. He is Catholic, Catholic...religion and he has a fiancée, and at his free time he spends time with my boy. They go fishing together, he has a huge boat. These organizations exist for Big Sisters. If you have a girl, you can... He also takes him to all kinds of games, basketball at the Key Arena, the basketball of the super stars. This organization provides them with tickets, free tickets, completely. Then, he took him for hiking. They went up into the mountains. I am very happy. And my boy also feels that he has a man by him, who always calls when he is going to pick him up. If he cannot, he also calls. At six o'clock in the morning this man comes with his boat, takes my child... I am very happy.

Women's ideas for helping other women

How to better help women in domestic violence situations

Russian women had many ideas for helping others from their communities who are in DV situations. These suggestions address most of the previously mentioned needs and concerns and are listed below with selected quotes to illustrate the concept.

➢ More help with housing and financial assistance,
➢ More classes for women to learn English.

I think that the most important is, if the woman does not speak English, is to allot some money to learn new language.

➢ Faster green card processes.
➢ More Russian-speaking advocates.

Let's add someone on the payroll to help L-----. Take me, for example. Maybe not me, just add someone. She has so many cases, she does not have time to do them all because social worker has to have twenty-five cases maximum. Fifteen is good. Often she has more, she does not have time for it. She tries to split her soul, but the hat is not tearing [Russian idiom]. She needs an assistant.

➢ More information for women in DV situations.

I, for instance, think that a woman, Russian woman when she gets her visa at the embassy in Moscow or somewhere else, it is imperative for her to have a brochure about DV. Everything must be in Russian and the list of organizations helping....

That is why if we knew about that organization where L---- works...we would probably feel, nobody would go out of his or her minds. We would feel firm, to stand on our feet. We would not worry and have not grown more gray hair. Before flying over there it is very important to give away the flyers...Meantime, the crowds are getting married. No matter what people who went through all of this say, "Please stop. It is not your culture, it is completely not yours. It will not help you, it will not help you. Look what is going on there."

But if we would get it right away, information, I am sorry, we would not throw money away in the air for a long time. We would go study long ago...It is very difficult when you waste two years to get established here only because you do not have information.

➢ Help with transportation.
Money for legal assistance.

In my opinion I think that the system of free attorneys is really badly developed. The help of free attorneys is needed at the time when a woman does not have money to pay for their services and have totally nowhere to go, when practically people look at you strangely, you are without any documents. As I remember, I called different companies, community organizations, “Please wait, we have a long waiting period. Wait.” And I was saying, “How can I wait?”

Help with education.

The work is very important. If you have a stable job, you have everything. Therefore, education is a very important thing.

They do not take our diplomas, therefore, you have to do something that is irrelevant to your profession, and it is even bigger shock. That is how you get depressions, because back there you were somebody but here, you have to get down ten ranks lower, and it seems like there is no way out.

Services throughout the greater Seattle metropolitan area.

I would really like to have these organizations to be at different locations, because we do not have anything like that in the North, Bellevue, or Kirkland.

More shelters with sufficient privacy so women feel at home.

Help ensure safety for women and children.

To have a safety, because it is the most important thing for a woman. If she would have children, she would be offered a room and place to stay for kids also. They would eventually find a housing for her or something. But for the first time she would live in such houses, until everything else is done. It would be very good.

Help finding a job, more help with the job search, jobs that are near housing.

Outreach

Russian women thought outreach to Russian women who are victims of DV could be done in a variety of ways. Some said that the best time to give women information about services, in the case of international marriages, is before women come into the U.S. Another suggestion was to place ads in places where women are likely to see them, such as the Russian newspaper, at the church or on buses. In particular, women thought that information about ReWA’s services needs to be distributed throughout the Russian community. One woman said that because her abuser was always with her, she would not have been able to read an ad in a public place. She said that information needs to be passed by word of mouth.

R: You can put an ad in the Russian newspaper. We have Russian newspapers. Maybe yes, by the way...
R: Maybe editorial staff will not go for it...to write about it.
R: Why not? They will go for it if it is paid.
R: Yes, you are right, as long as it paid. To pay, put an ad...Russian women do read newspapers. Or, at least through friends... “I saw an advertisement,” they could say, or...Russian newspaper – is a good idea.

Prevention

Some women thought that if women were not dependent on men, DV could be prevented. Others thought that education could be important in preventing violence. They said girls must be taught about DV and men should be taught not to insult women.
As for preventing abuse in international marriages, women had many ideas. One was to provide women with background information on her fiancé, such as whether he had brought other women into the country on a fiancé visa.

I would really want Immigration Services to have all of my paperwork, how he brought me here, how he promised me a lot. And when he brought me here he started to abuse me. He told me once, “I will go to Australia and bring myself a wife from there.” He told me that after we separated. Therefore it is very important to have some sort of documentation that in case he brings another woman from overseas...she would have access to such information, the history...

Again, another very strong recommendation is to provide women with information on DV and services before they come to the U.S. to get married.

Some kind of information, like a brochure...in Russia, or for those women who are leaving Russia. They must be available at the consulates and, as you call it, embassies. So, they would think...that if he starts to do this and that, because when you are going there you do not imagine to yourself that you can be abused.... When you leave your country and everything there, you are doing that to dedicate your life to a new person, a new life, you do not imagine that you can be manipulated, abused, or used. Because when they come there, they look so much in love with you, promise you a lot, telling that cannot live without you, calling you and speaking to you on the phone for half an hour. It is terrible how much he loves you, and after they get here, they start abusing you. And here...of course, they must come here if they love each other, but in case something bad happens, the information must be available, they must know where to go. They must have some kind of information in case if you will be abused, where do you need to go. Even if he starts threatening, you would know what to do and where to go, “Whether I am coming back or you stop doing that, because I will go and complain on you.”

Further, participants suggested that the INS do background checks on American men who are bringing women from overseas. They felt that there should be some restrictions on men who are bringing women into this country.

In my opinion, I would issue the law for all Americans who want to have wives from our countries in order for Immigration Services to watch out for them and look how they live, what kind of purposes they pursue in their marriage...

I would prohibit people like him to get out of the country and marry foreign citizens. I would just prohibit that.
VIETNAMESE

Community awareness and attitude towards domestic violence

Vietnamese women in the study spoke about the general lack of awareness within their community regarding domestic violence (DV). However, this lack of awareness seemed a function of how marital conflict is conceptualized and labeled within Vietnamese culture. The women reported that among Vietnamese there is awareness of marital conflict but the concept of “DV” is a result of migration to the U.S. and the acculturation process.

Community

➢ Awareness of marital "conflict," but conflict is not conceptualized as "DV" until migration to U.S.

In the Vietnamese point of view, a husband is the head of the family. Therefore, when the husband says something and his wife wants to voice her opinion, he won’t take it and a conflict arises. If the wife listens to him, then it’s OK. If not, the husband will physically abuse her. He gets upset, then he does whatever that he wants. When we are in U.S.A., we get used to it, therefore those Vietnamese husbands who also know and understand about the laws of this country, they become less to abuse their wives. Wherever we live we must know the laws of that place.

➢ Marital conflict is perceived as "ordinary", not unusual. It is considered a personal, private family matter. Little attention is given to it as a problem.

There are some people, if we tell them, then they would laugh at us. Vietnamese people see it as an ordinary thing. Vietnamese women usually are very enduring...no matter how hard their husband beat them, they still stay quiet. They think of their children, they think about their honor, then they also think about women personal honor. They think maybe she is a very bad wife, therefore, her husband must treat her that way.

Most of the time, our Vietnamese people don’t think about the DV matters... we think that it's a personal matter of other family. Therefore, nobody pays attention to other family’s matter. That is the usual way.

➢ The larger perception is that the wife is responsible for any marital conflict.

Husband is the master and wife is a servant.

Yeah, blame on women...That’s the way of Vietnamese society.

See, if we tell them our family matters, then they will jump in and say about woman, “They don't think about man.”

➢ Cultural values expressed in gender roles reinforce the perspective that the woman is responsible for maintaining harmony in the family/household. Thus, if there is conflict, it is because of her failure to be a good wife.

In Vietnam, the family’s relatives or neighbors usually sit down and talk. They persuade the wives to be more patient with their husbands, to obey their husbands. They don’t say anything to their husbands.

For example, fathers abuse mothers, husbands abuse wives. Vietnamese women obey their men. If they want to say something constructive, they must know what and how to say it. The less they say, the better they are.
Awareness of DV within the Vietnamese community evolves along a spectrum and is linked to resettlement in the U.S., is associated with an awareness of the legal implications of DV and is stimulated by the concern about bringing negative attention to one's self, family, or community.

In Vietnam, this kind of matter happens too often, people ignore them. In this country, if there is DV, then the police will be called. In Vietnam, no. They continue to hit, argue. They hit each other out in the street, they yell very loud in the street. They chase each other from one end of the street to the other end.

These men are used to the way in Vietnam, that is male are more important than female. Now they are here, they understand it better, but still not quite understand.

Women also reported that men blame women for the DV problem because once in the U.S. they learn American cultural ways.

We come to this country, if there is a DV problem, men normally blame on women because they say that they brought us here, then we learn American way. That's right; many men say that. That's correct!

Self awareness

A distinction between marital conflict and DV often emerges as a result of migration to U.S.

In Vietnam, I also was beat by my husband several times, but endured. Like, I think to have a husband I must follow him. If he kills me, it's OK, but when I come here, I have a different way of thinking, difference from Vietnam. A man is also a human being. A woman is also a human being. I think it's equal. Women can make money. Men can make money. Why coming home, man is just like a king, woman is like a servant. That means us—women don't have any rights. That's not fair for us—women.

Vietnamese women in this study reflected an emerging awareness of the psycho-emotional dimensions of abuse. They displayed a conscious awareness of how expectations of gender roles are shifting as a result of migration. They discussed these differences in expectations regarding women's behavior in Vietnam and the adaptive changes women undergo once in the U.S.

DV doesn't need to be physical. It's also about mental abuses, verbal abuse. They say things that are intended to be cruel and hurtful, curse and degrade us.

The conscious awareness of conflict that is labeled as DV is linked to women's participation in ESL classes and social/educational encounters that facilitate the newcomers' adjustment to their new cultural setting.

After five years of my husband abusing me I went to an ESL class. I also learned about DV.

Ambiguity and ambivalence is reflected in some contradictory observations offered by some of the women and suggests multiple, complex dimensions to their experiences. For example:

1. Women contrasted their life in Vietnam with life in the U.S. In Vietnam women recalled that their role is to suffer silently, assume all the blame for problems, and endure. Yet, when comparing life in the U.S. to life in Vietnam, their general feelings of isolation and difficulties adjusting to a new cultural...
setting merge with their responses to abuse. Women recalled that in Vietnam they could at least talk to their neighbors and friends if they were being abused, while in the U.S. they have no one to talk to, because of their isolation. This suggests that while the common cultural expectation is that of silent endurance, in Vietnam women were not necessarily without informal means of support. Both possibilities co-existed. Women were expected to silently suffer and endure, but in Vietnam, at least they had neighbors and friends with whom they could informally and privately talk.

In the U.S. of America... we keep the sadness inside of us. We don't have friend, nobody to talk or share our feelings with. In Vietnam if we suffer from DV we can talk with our neighbors about it.

Here, we cannot see because everybody stays in his or her house. Doors are closed and you can't see anything.

We women cannot confide with anyone. If, for example,... I just get aquainted with you, I talk with [you] and you'll laugh at me fight? You would say this little lady just meet me and she tells me everything in her family. But, in fact, sometimes a woman talks to other like that to relieve their sadness.

2. The apparent contradiction between the cultural value of silent endurance coexisting with the norm of receiving informal support from neighbors and friends, as well as admonitions against speaking out now that they live in the U.S., all reflect a spectrum of acculturation experienced by Vietnamese women.

We are still affected by the Vietnamese way of life.

I came here, I see and it seems that male and female are equal, but in reality, the male side seems stronger than females.

When we see our friend who has that kind of problem [R2: Yes], we're a good friend in the neighborhood, we see that we should say something and usually we need to talk with the woman...try to advise the woman. She needs to put up, to let things go.

Family

Because marital conflicts and DV are considered intensely private, family matters, there are strongly held cultural prohibitions against public disclosure of any family problems. Any perception of wrong-doing brings embarrassment and shame to the entire family, not just to a given individual.

If I have DV in my family, I am ashamed.

What abuse looks like

Descriptions

Women reported a range of descriptions of abuse, often linked to escalating marital conflict. Because Vietnamese households may continue the cultural practice of extended families where the husband and wife reside with the husband’s parents, abuse by the woman’s mother-in-law was discussed as well. Descriptions of abuse were also linked to traditional expectations of gender roles, particularly that of wife’s obedience to husband. Thus, if women got into trouble with their husbands, they could be
punished. The women reported that the less they said the better. Saying more could get them into trouble with their husbands, risking physical and emotional punishment.

Fathers abuse mothers, husbands abuse wives. The less they say, the better they are. If they say more than is necessary, they'll be in trouble with their husband. They'll be punished physically. Most of the Vietnamese women are dominated by their husbands. The men act like the boss.

They abuse us 100%. Husbands are greedy. They know that the culture is on their side. They treat us as their slaves. We are nothing in their eyes. They keep hitting us so we don't have a chance to say anything. They abuse women, but they want women.

Conflict with mother-in-law.

When I was in Vietnam, I got hit everyday because my mother-in-law would tattle on me to my husband. My husband hits me. My mother-in-law is very mean [cries].

A mother-in-law came from Vietnam, brought a lot of money and told her son to leave his wife. He blames everything on his wife. He threw a party and ordered his wife to publicly apologize and then he left her. She tried to kill herself a few times.

According to the way of Vietnam, she [mother-in-law] still having the power over her daughter-in-law. But, while living here, the daughter-in-law still has to go to work. Coming home, she is tired, therefore, sometimes is lazy to do the house chores. Her mother-in-law complains about it. The daughter-in-law walks down to her room, then calls to talk with her younger sister... Her husband walks in and sees her and hears her talking about the sufferings, just complains this and that, he walk in and hits her right away. The mother-in-law hears the two of them hitting like that. This lady is weak. She can't fight back because the husband always is stronger. Not fighting. But the mother-in-law walks down and sees this lady pushes him away. But the mother-in-law says that "I saw you hit him," and joins in with her son, curse, cursing loudly.

Husband repeatedly hits wife; worse if police are called and he returns home.

My eight-month old baby watches as my husband hits me. Someone called the police. Police took him to the station. He came home and hit me again. I try to explain and he hits me again. I answer his questions and he hits me again. He hit me all over. Terrible. I got hit either way, talking or not. I got hurt, but I didn't have money for treatment. Nowadays, I still have pain in my chest due to the physical abuses.

Hitting is the most common form of abuse; descriptions include being hit once to multiple beatings.

Normally, in the Vietnamese community, we see beating is the most. Yeah, beating is the most.

Throwing things.

Husband follows wife wherever she goes.

Husband has affairs; spends household money on other women.

Husband brings prostitutes home when wife is there to insult her.

Public humiliation of the wife.

Cursing.

Keeping the woman isolated so that all she knows is her husband and children.

The husband wants to go out by himself only. The wife stays home, preparing the meals and taking care of the kids. Wives don't know anything else. She is like a bird in a cage.
But he does not want her to go anywhere because he afraid that if she goes out she will learn and be just like other ladies. We go out to learn about different agencies so we can help others to go out in life to learn.

- One woman provided a description of another woman whose ex-husband sexually assaulted her with a bottle.

- Alcohol related abuse: husband instigates conflict, then hits children.

...[H]e doesn't beat me, but he drinks alcohol. He drinks and comes home and does things against my ways. There was once, he came home after drinking, he got mad at me, but he afraid to beat me then he hit the kid,...he slaps the little girl. It's the same for all time, because of alcohol. My husband only lives for alcohol.

- Cultural expectation of husband's role as head of the family. When he doesn't get his way, he becomes physically abusive.

In their examples, women noted contrasts between abuse in Vietnam and abuse experienced in this country. Women appeared to perceive an impact on abuse by laws in this country against DV. They said that there are no such laws in Vietnam. It was their perception that both the presence and awareness of laws against DV help to mediate incidences of DV. Some reported a perceived decrease in abuse when Vietnamese men come to the U.S. However, perceptions of whether laws against DV really have an impact varied.

...[T]herefore, those Vietnamese husbands who also know and understand about the laws of this country, they become less to abuse their wives.

Yes, in this country there is laws for everything, nobody dares to do that. I see in U.S.A., the law is very important.

While there were lively group discussions regarding whether there was a decrease of abuse once Vietnamese came to this country, most agreed that there seemed to be less abuse when contrasted with abuse observed and experienced in Vietnam. However, many insisted that abuse continues here in the U.S.

When the men come to this country, they become better....But this problem still exists.

In Vietnam, I saw husbands abuse wives, but here I don't see that problem. When the men come to this country, they become better....

But this problem still exists...

In Vietnam husbands work and give money to his wife. When they come to this country, husband works to make money and keeps his. Wife works to earn money and keeps hers. He dictates about the finance in the family.

Abuse of husbands by wives was noted and examples of mutual abuse were offered. In these situations, typically, the wife gets frustrated and throws things or yells, and then her husband slaps her.

There are many families where the wives abuse their husbands....Many women take advantage and push further. Those guys leave them.

If they can't live together, then it's better to leave each other than to stay and throw things at each other. Someone might get hurt.
Women also recounted abuse experienced through their husbands' total control of money, making women completely economically dependent on the husbands. When a man does not get his way, he withholds financial support, like rent. He may gamble household money away or pawn his wife's jewelry for more money. *He does not beat her, but he never gives her money. That is mental abuse. ...If she complains, he will stop everything altogether, even the rent money. She doesn’t have money to pay for it.*

**Descriptions of abuse in Vietnam**

Except where noted above, abuse in both cultural settings is strikingly similar; below are examples which stand out as particular contrast in Vietnam. Two examples are framed within the context of husband as a survivor of a concentration camp or political imprisonment. In one case abuse was a post-camp experience. The other example is less clear, but both need to be interpreted within the context of political prisoner survivorship. The literature on mental health and refugees supports an association between prison camp experiences and psychological sequelae, including family violence.

*There is a guy, after he got home from a concentration camp he was jealous of his wife. He confined her inside the house, locking the doors, and then he beat her to death with a shovel.*

Women's observations about the differences between Vietnam and the U.S. focus on the absence of laws against DV in Vietnam. One woman told an anecdote that is particularly violent, involving a husband beating his wife so badly that she miscarried. In the context of the focus group discussion, it was not entirely clear as to whether this description was an anomaly or whether it represented the extreme end along a spectrum. Women seemed to perceive that differences between the U.S. and Vietnam center around the "degree" to which DV occurs and that the difference is due to U.S. legal sanctions against DV.

**Alcohol and drug use**

Consistent with findings in other groups studied, examples of the correlation between abuse of alcohol and DV were also present in the Vietnamese group.

*She sees the husband got drunk all day long. He doesn’t have any authority, but after getting drunk, he shits and urinates, then she has to clean them up. She has to raise three kids and takes care of the house and tries to earn money. His business fails, then he get drunk and makes a mess. His wife has to clean.*

*To me, this country has the laws, but they are just the external laws. In their house they still have fights. For example, the husband harasses his wife, the wife comes home from work. She is already tired. He drinks alcohol and tells her to cook for him. If the meal is not what he likes then he gets upset, he yells at her or something else....This still happens often.*

**Characteristics of Batterers**

Batterer traits are reflected in the descriptions of abuse quoted above. They seem to find particular expression in culturally-sanctioned power that reflects male preferences and through gender role expectations that reflect women's responsibility for maintaining family harmony. Many of the descriptions portrayed batterers as controlling men who kept women isolated and economically dependent on them.
Men are stubborn. They have a hot temper. They do whatever they want to. They are haughty.

Women also made connections between abusive behavior and alcohol abuse.

**Responding to abuse**

**Community and family**

Women noted contrasts in community attitudes towards intervening in family matters in the U.S. and in Vietnam. In addition, the consequences for such attempted interventions differed. In Vietnam, consequences could include accusations towards whoever intervenes as being attracted to the wife. In the U.S., consequences reflect some ambivalence between concerns about attracting negative public attention towards the Vietnamese community or the family in question, and the sense that “something needs to be done.”

*Most of the time, our Vietnamese people don’t think about the DV matter….most of the time, we think it’s a personal matter of the other family. Therefore, nobody pays attention to the other family’s matter. That is the usual way.*

*If we see one family that is having some problems and we come to try to stop the fight or talk with them, they would say that we stick our nose in their business. The second thing is, in U.S.A., usually never interfere with other family. If we see them fighting, bleeding, call 911, but absolutely do not, do not interfere.*

*If they intervene, then they are afraid that the husband will say, “Ha! You want my wife.” If the wife intervenes, then the wife will say, “You want my husband.” Therefore, it’s kind of hard.*

*If we live next to each other in Vietnam, if anything happens, nobody would interfere. We are Vietnamese people….Because people might think that the Vietnamese community is the same, anyone can beat his wife. But if American people, they might intervene. They give women more protections. American is OK, but not Vietnamese, because they are concerned about the problems that can come to them.*

Some women expressed the expectation that good friends should say something if marital conflict or abuse is observed. However, descriptions revealed that comments and advice were typically directed toward the wife: she was advised to be a good wife.

*When we see our friend who has that kind of problem, we’re a good friend in the neighborhood, we see that we should say something and usually we need to talk with the women, try to advise the women. She needs to put up, to let things go. We don’t try to talk with the man.*

Women said some in the community would laugh at any women who spoke of being abused.

*[A]fraid to say to anyone. Vietnam friends? There are some people if we tell them, then they would laugh at us.*

If abuse exists within one’s family, then one feels shame. A typical theme was that Vietnamese people do their best to hide family problems from public knowledge. Thus, they don’t always tell the “truth” about abuse or violence in the family.

*Because Vietnamese people try to hide their problems, they don’t tell the truth.*
Women's responses

Women's responses reflected a range of examples that included being passive to attempting suicide. Passive action included remaining silent, enduring, yielding, and letting things go.

*I think the better way to deal with these men is don’t argue, keep quiet, take a passive action.*

We’re women, we continue to think that we must yield for husband, for the children.

Discussions regarding suicide, however, were associated with the consequences of suicide on children. Thus, women’s responses of feeling like “dying” or killing themselves were tempered by reflections on the impact suicide would have on their children.

[S]uicide...But I think, I think, “Oh no, can’t. If I do that, who will raise my kid?”

*I hold a bottle of medicine that I can take them any time I want to, but I have three children. Then I think about my kids. If I die, my husband is just the same the way he was. Then he won’t be able to raise my three kids.*

Like, my mentality is very disturbed, very uncomfortable. At that moment, I just want to die. It’s very uncomfortable. It makes me unhappy. I still, I still have to live. Must live for my kids.

Women said that abuse interferes with being able to trust their husbands.

Whatever he says, I will keep quiet. I won’t answer, but I don’t trust him.

We distrust them. No matter what they say. They abuse us.

Women also said that they would move out if they have a place to go. One woman had relatives in another state so she packed up her belongings and moved as a response to abuse. Women also said they threatened to leave their husbands. One woman told of the outcome when she threatened to leave her husband:

*I asked him to pledge his words, then I called his parents in Vietnam and asked him to pledge with his parents that he will never beat me again. I put up with him for three years already. Therefore I told to pledge his words with me, if not I will divorce him. In Vietnam, if I had divorced him then he would have killed me.*

Some participants said that in the U.S., women should go to an agency for help.

Actions Women Take

Women in the study identified a range of actions that women could take in response to abuse. They included:

- Get a job, go to work and get information about the outside world; end isolation and increase awareness.
- Threaten divorce.
- Confide in friends or neighbors.
- Call police; go to an agency; run away.
Staying in the relationship

Concern for their children was a powerful incentive for women to stay in a relationship. They expressed concern that their children would suffer if they left, and worried that children would be sad and possibly drop out of school, missing out on their education.

...[B]ecause of the love for my kids, I think about them. I don’t know if they get up and go to school. What will they have for breakfast tomorrow? This ties me up.

...[M]y children are grown up. If I make a big deal out of it, then my children will be uncomfortable. It’s not good for them. It means that they will get depressed and quit school. If they don’t study they won’t have anything in the future. Therefore, the mother must try to digest the insults.

Other women acknowledged suffering and staying in a relationship, especially for their children. But once circumstances became unbearable, they left.

In Vietnam, if I had divorced him then he would have killed me. Therefore, I tried to tolerate his abuses for the well-being of the children. Then we came here. I thought that if I leave him then he will be lonely, so I couldn’t. If I leave him people will say I left him for another man. That’s not right. I’ve always valued the relationship, but the matter got worse. So I did what I had to do.

Women also expressed fears about leaving:

Because we don’t want to disturb the family, we are afraid that neighbors will laugh at us, afraid to lose the family happiness, afraid to be ashamed. Afraid of our siblings and relatives who would say to us, “Why you guys keep fighting like that?” Therefore we have to accept and stay quiet without saying anything.

Women who were Catholic stated that an incentive for remaining in an abusive relationship was their Catholic faith. Another powerful incentive for staying was the cultural value placed on preserving the family.

...[T]he Vietnamese women try to tolerate these abuses in order to save the marriage and family. Our Vietnamese culture tries to save the marriage. We seldom think of divorce. We try to change ourselves, our husbands, to protect the family. If all else fails, then divorce is the last alternative.

Finally, women said that they stayed out of fear of retaliation from their husbands.

Seeking help—deciding to or not

Vietnamese women described the steps a woman would take in order to get help for abuse. First she would turn to her parents and talk to them. Next she would talk with her siblings.

➢ If nothing helps after talking with parents, then siblings, then use the legal system.

➢ If a woman is here without parents or family, then she will talk to friends.

➢ Women said that they were fearful of saying anything and fearful that husband might go to jail. They all wondered where they would live if they left and were concerned that children would hate them when they grow up for leaving the husband.

➢ Other women responded that they would call the police; call 911.
There is a contrast of responses from keeping quiet and enduring to calling 911/the police and having the abuser arrested. The latter seems more linked to living here in the U.S. as a contrast to living in Vietnam, where there seem to be no options but to suffer the abuse.

Women encouraged others to attend classes; study and learn about different agencies that have help and resources.

**Survivor needs**

*Description*

When asked what they most needed, women talked of overcoming their isolation. They spoke of needing people in whom they could trust, in whom they could confide and from whom they could find comfort in dealing with DV. They identified the need for a support group. At the same time, they stated a need for programs that work with men who are abusive; otherwise, these men will just return to their patterns of abuse.

*We need a support group. We think that if the law punishes these men, then lets them come back to us without making any effort to change them for the better, it won't solve the DV problem. When they're in jail they should have a program that makes them become a better person for when they return to society.*

Women described the need for programs and services that would provide a place to go for help.

Participants identified a need for legal assistance to help them with court proceedings and obtaining a divorce if that was a decision they reached.

Women in the study also spoke of mental health needs, primarily expressed in terms of supportive counseling and education.

The need for interpreters was an extremely important one for many of the women. Interpreters and translation services were needed so that women could learn what assistance and range of services were available, as well as how to access them.

*Availability*

In speaking about the availability of resources and services as well as their accessibility, women stated a need for Vietnamese language newspapers, flyers, and radio programs to provide information on about what is available as well as where to go for assistance, and, especially, how to use services and resources. They further suggested free bilingual classes that would provide education and information. Another suggestion was for services for abusers that help them change their abusive behavior.

*Who helped*

When asked who provided help when they needed it, multiple responses included:

- Friends, especially friends who speak the same language
- Neighbors
Findings: Vietnamese NU Final Report

- Sometimes friends of the husband intervened by talking with the husband and telling him to stop the abuse.
- Adult children
- Identified in order of preference: parents, siblings, and the court system.
- Police
- Sponsor
- Hospital social workers
- ESL classes
- Agencies which provide DV services
- Information gained from television about what to do

Women offered examples of adult children who intervened to mediate a father's abuse of a mother. Descriptions included providing comfort and support for the mother and admonishing the father who often responded by cursing everyone. Children typically encourage the mother to endure with a reminder that the father will not live much longer.

**Barriers**

Fear was a barrier to seeking help. Women were fearful of possible consequences if they reported abuse and feared that calling for help would only make the situation worse.

I'm afraid, I want to call someone, but I'm too scared. Therefore, I try to endure and get by one day at a time.

In the Vietnamese community there aren't any programs to help the women who are suffering from DV. Most Vietnamese women don't want to reveal their secrets. They don't know whom to trust and talk with. They're afraid that if they talk with those workers who don't know much about DV things will only get worse.

Other barriers include the following:

- **Language**
  Language barriers are why we can't express our thought or desires. We talk, but no one can understand us. Therefore, we stop trying.

- **Isolation**
  In the U.S. of America most of us who don't have parent and/or relative here with us are lonely and cry a lot. We don't know how to drive a car. We can't speak English. We don't know how to operate a computer. The husbands go out with other women, we don't even know. We keep the sadness inside of us. We don't have friends, nobody to talk or share our feelings with. In Vietnam if we suffer from DV we can talk with our neighbors about it. Here in this country, everybody stays in their own home. We don't know whom to talk with. In Vietnam we know our way around. We can go here and there. We can speak the language. We have friends to talk with. In the U.S.A. we don't know our way around. We don't know where to go. No way of transportation. No friends to talk with.
Lack of information was cited as a reason for not seeking help; not knowing what was available; not knowing that they had options or choices.

Use of services

Awareness and availability

Women stated that there was a lack of services for DV in the Vietnamese community. When discussing services, multiple references were made to ReWA. Many women were only able to identify ReWA as a resource. Thus, their description of services used clustered here. The limitation to services offered here centered on the agency having only one Vietnamese speaking staff person. Participants stated that problems and needs exceeded one staff person's ability to assist. Other Asian community service organizations were not readily identified. The Asian community mental health agency was perceived as focusing only on psychiatric problems. Women in the study seemed to lack an awareness of any other DV programs. One participant accessed services through the maternity care she received at a local hospital, where a social worker provided assistance.

Description

Services that women primarily obtained included protection orders, assistance with shelter or housing, filling out paperwork; obtaining a divorce, referrals for mental health services and ESL classes.

Services described that worked well centered primarily on ReWA followed by the mention of employment services.

Then I know this agency. It helps me feel comfortable, so I have a chance to confide with the person who works with me because this person listens and makes my mind better.

Mental health services were largely identified as the support they received from ReWA and also from a hospital-based maternity social worker.

Access issues

Some of the women stated that they only utilize services when they know the people. Because of cultural reasons and their description of Vietnamese women as having "shy personalities", women stated that they have a difficult time accessing and utilizing services. This is consistent with the multiple descriptions across categories which reflect the persistence of cultural beliefs and values regarding gender roles and the cultural value of enduring suffering for the greater benefit of the family. Also cutting across categories were women's stated fears, including fear of consequences if one speaks out and that a situation will be worse if abuse is reported. These fear-based perceptions of possible negative outcomes are barriers to accessing and utilizing services by Vietnamese women. Geographic distance was also cited as a barrier. Even when women were aware of services, access was a problem because they could not get to them. Either they were too far away or transportation difficulties made them impractical to access.
Importance of shared language/culture of service providers

Women made references to the role of religious leaders, in particular, the Vietnamese Catholic priest, in the intervention and mediating impact on DV. Vietnamese speaking religious leaders who used their forum to speak out against abuse of women by their husbands were identified as significant to both prevention as well as intervention of DV. Because these religious leaders share the same language and culture, women viewed them as people husbands would respect and to whom husbands might listen.

...I see in my congregation if a fight happens then the Father will come to advise. After that if [it] still continues then he will talk about that in front of the congregation once then twice or a third time. This family will stop fighting. The husband won’t beat his wife again.

There was cross-cutting agreement among the women on the importance and value of having services from those who share the same language and culture.

When we go out, go to work, go to school, if we meet other women who speak the same language as ours, then we can share our confidentiality.

We want to be with people who have the same cultural and language background. It will help us to understand each other.

There was a collective perception that only those with a shared cultural background could understand the meaning of what women were experiencing and what they were trying to share about these experiences.

Because of the culture and their shy personalities, the Vietnamese women have a difficult time getting help from those services. Other reasons are that they are afraid their husbands will know and it’ll make matters worse.

When language and culture between providers of services and the women needing these services were shared, women stated that they experienced greater understanding, greater trust, and greater assurance about confidentiality. The importance of receiving services from the same gender also was emphasized. There was a shared perception that Vietnamese men would not accept advice from women.

Children and teens: needs and issues

Women in the study did not distinguish differences in needs or issues between children and teens. Instead they spoke of the needs of their children in general. They recognized that there were more services for adults than there were for children. The major theme was to keep kids busy so that they don’t get into trouble or join gangs. Generally identified needs included:

- Youth groups, associations or clubs where children could go to participate in sports, exercise and swimming.

I think young people should have some groups like youth association to keep them busy, so they won’t get into gang. Helping them to avoid do wrong things.

They can be a scout. Go to a club. Play sports. Exercises. Go swimming. Exercise will help them forget the bad habits.

- Providing Vietnamese classes so that children don’t forget their roots.
Findings: Vietnamese

Places for kids to go like the library or office spaces.

Women's ideas for helping other women

Outreach ideas

Women in the study suggested using newspapers, flyers and radio programs in Vietnamese to reach women.

If they advertise on newspapers about their services and have Vietnamese speaking staff ready to help then many...will come for help.

They felt that having free classes on a variety of topics offered in Vietnamese would be very helpful for women.

Prevention

Prevention suggestions centered on education oriented activities:

- Classes and programs to educate women.
- Classes and programs that include both men and women.

For the classes, if they come that mean they show their good will and when we see that they have a good will then DV problems will gradually decrease. Therefore, whenever there is a discussion we must have two people come. That is the best way. Not only a woman comes.

Strategies to engage men in educational classes were discussed. Many felt that required classes for men should be available at places of employment. Others suggested that there should be a law that requires them to receive education about DV as a way of learning about life in the U.S. Still others thought that making a video for men on DV was a good idea. Finally, some had suggestions that involved "manipulating" men into attending to classes. Cross-cutting all these suggestions, however, was the primary theme of the need to educate men on domestic violence.

We hope there will be many support groups of offices, services to help us learn how to prevent DV before it happens. We believe that if the husband realizes that his wife knows and has some insight into about what's going on in the family and the outside world, then he will think harder twice before he starts the DV. This is saying to prevent the disease is better than curing it.

...If there is some form of association, like giving them the idea, then I think men might change a little bit. That would help to protect the family.

It's better to have class to educate them [men]. If they think it's voluntary, they won't go. If I have this authority, I will make a law. If you don't go you will be fined.

Women emphasized using money to develop long term programs to prevent DV. There was a sharp awareness that successful prevention depended on programs that addressed long term support for women.

We would open an office and hire a Vietnamese staff to help us. We would have an emergency fund to provide help when needed. Provide temporary shelter for the victims of DV.

We hope that with this money we can provide a long term program in order to change and prevent DV from happening again.
How to better help women

The primary theme on how to better help women focused on ways that assisted women in achieving independence.

- Emergency funds to assist women.

In this country, if we don't go to work we have to ask our husband for money. We depend on their mercy. We need an office, a department, money to help us when we're in need.

- Shelter specifically for, and staffed by, Vietnamese women.

- Utilize money to assist Vietnamese women to achieve independence.

Our women, we must have the way to have self-controlled our own body. If we continue to live for them all our live then we will never lift up our head because they always in power. A husband controls us. He keeps beating us, treating us like a servant, like dog. We can't stand. We must decide to unite our body so we don't be beat by husband. We have a new life, like being independent.

- Open an agency that will help Vietnamese survivors of DV to find jobs.

- Support groups.
DEVELOPMENT OF THE PARTNERSHIP: FINDINGS FROM THE PROCESS EVALUATION

It was our goal in these process interviews to gain insight into our community partners’ personal experiences of collaborative research. We wanted to know what did and did not work well, and to learn how future projects could be improved. We also wanted our partners’ opinions on the cultural appropriateness of the ways in which project planning, training, and data collection were conducted.

Project staff developed a series of 22 questions. QRT members including research staff and partners were individually interviewed by the research assistant, with the understanding that their responses would be kept as confidential as possible.

Topics covered included:

- How Partners Got Involved
- Personal/Professional Growth
- Assessment of Project Process
- Cultural Appropriateness
- Assessment of Collaboration
- Relationship of Partnering Agency to Project
- Attitudes about Research

**Personal growth**

*Question: Did you learn anything that will help you either personally or professionally as a result of being part of the project?*

Interviewees reported improving communication skills, increasing sensitivity to the commonality of battering in all women’s experience, and increasing awareness that DV can happen to any woman. Respondents expressed a need for greater vigilance in their own relationships. One respondent felt she gained new insights into her own biases and beliefs, and learned not to interpret the quietness of others as inattention or disinterest. She experienced increased understanding of working with partners from cultures with which she had had little previous contact.

**Professional growth**

The professional benefits of participation included improved relationships with co-workers and the opportunity to network with and get to know other “special population” advocates, including hearing about the similar difficulties they encounter in advocating for immigrant or non-majority victims/survivors.

*I learned some about women from different cultural groups. The biggest thing that I saw was how similar the issues were between immigrant women from different cultural groups as opposed to Native or African*
American women. Also, the barriers faced by lesbian, trans and bi women are much larger than I knew. Gaining a greater awareness about different groups of women was invaluable.

Some respondents gained a deeper insight into the limitations of occupying the role of “professional” too rigidly, and wanting to invite survivors’ feedback more in the future. There was frustration that victims/survivors who consulted other professionals, such as therapists, for help were being met with ignorance on the subject. Two respondents mentioned learning about how some mental health counselors’ lack of training in DV had endangered the women they serve.

...I just feel like this served as a huge check for how much we get into this professional setting as DV [service] providers, and we know the answers, and... [laughs]... and that, you know, we can spew rhetoric about what it looks like, but it’s actually getting closer and closer to therapy and counseling. And so to give the opportunity to survivors to tell us exactly what they want to say, and what worked for them and what didn’t work for them when they were accessing services was just like, totally, a breath of fresh air...

A few people with little or no group facilitation experience learned that they enjoy facilitating groups and stated that they would like to do more in the future. Several respondents said participation in the project improved their facilitation skills.

I learned how to facilitate a focus group. I learned how to shift the focus when one person talks too long, and to get participants to talk to each other. I would like to speak in my own language. I would like very much to do support group in my own language.

Needs and preferences of women in domestic violence situations

Question: As a result of your involvement in this project, have you come to any new understandings about the needs or preferences of women in DV situations?

Particularly among partners working with immigrant women for whom there have been no same-language, same-culture support groups, there was unanimous agreement that ongoing support groups for women is a great need.

...some of the women I have in the group, they are already out of the DV, and they been through it, but some of the women they are still going through it. So what I saw is that the people who are still in the DV situation, they were learning from the women that had already experienced it. And they were saying it’s not going to get better, the women who have been through the DV, they even turn around to the other woman and tell them, “You have to get out because it’s not going to get better. I went through it, I experienced it. If you’re hoping it’s going to get better, it’s not going to get better, so you have to get out.”

Planning phase

Question: During the planning phase when we developed fliers, places to recruit, safety suggestions, questions, etc., did you feel that:

A) your ideas were heard?
B) you had an influence on the project? If so, how?
C) you were a full member of the project?

Almost all respondents felt comfortable contributing their ideas during the planning phase. Researchers were perceived as being welcoming and open to partner
participation, and genuinely interested in the input and cultural expertise of community partners. Respondents said they felt they had an influence on the project and that they were full members. However, a few of the non-native English speaking partners shared that they felt shy, and some were reluctant to speak out in the groups in English. One participant suggested that more opportunities to practice speaking in small groups would have been helpful in eliciting participation.

*When we were planning the questions it was really nice because we all evolved the questions together. It wasn't like, 'here are the questions, now you edit them.' It was 'what do you see?'; so that was nice.*

*I felt I had an influence on the project, but I am very shy in English. In my own language I am not shy. I felt like a full member of the project and I liked getting to know the other advocates.*

**Recruitment**

**Question: What was it like for you to recruit participants?**

This emerged as the most difficult part of the entire project for respondents and research staff. There was frustration, stress, and for many partners, a feeling of having been overwhelmed by the addition of recruitment time demands to already heavy case and workloads. With the exception of one partner who said that recruitment was a good experience, there were many partners who felt recruitment did not go well, and that they could have done more but didn't have the time. Two partners felt badly having to report to researchers that recruitment was going poorly. Cultural factors came strongly into play in the amount of time necessary to recruit participants. Partners said some participants were worried they might encounter acquaintances from their communities which might jeopardize safety or confidentiality. Others did not want to be tape-recorded.

*I had to do my job and plus this [recruiting], which was time consuming. It was too much.*

*The most frustrating [experience] was recruiting. I know it wasn't necessarily our fault or our job or pressured to do this. It was just uncomfortable to always come back to meetings: "No, we couldn't get anyone again." I knew that no one was going to say, "Oh, you bad recruiters," but I really wish more people had participated. I don't know how much more I could have done.*

The advocates of non- or limited-English speaking women spoke a lot about not having had enough time for recruitment in relation to their other job duties, but also in the scope of the project as a whole, they felt they needed a few more months. Respondents said that culturally it was inappropriate to call a client or former client and just inform her of the study. They said that in order to interest women in participating, it was necessary to first pay respect by asking women how they were doing and then listening for some time, often up to an hour. Partners said it would be rude and would damage trust to have done otherwise. The issue of trust was foremost in the process evaluation interview responses. The need to take this much time with each call created significant personal stress for some of the partners.
Training

Question: Do you feel that the training in focus group facilitation and interviewing (and for alternates, training in DV basics and speaking about DV cross-culturally) prepared you to conduct the focus groups and interviews? If not, why not?

In particular, respondents who already had DV and support group facilitation experience found that the training prepared them well for interviewing. One person expressed appreciation for cross-cultural insights presented in training by one of the staff anthropologists. Another felt well received in asking many questions, and said that the training taught her how to separate advocacy from research. Yet another advocate commented on the fact that she conducts support groups for her agency, but has never received training. As a result of the focus group facilitation training, she was able to gain some new insights into how to lead her support groups.

A number of advocates reported having felt rushed during meetings, and wished we could have taken more time in the research training process.

A few respondents said it would have been helpful if more time had been spent observing and practicing interviewing techniques through small group exercises and role-play. One respondent commented on how she adapted a style of asking questions for her ethnic group based on a training demonstration that inspired her.

One research staff member felt that much more training needed to have been provided, and perhaps using a different training model. She suggested that more role-playing and practice interviewing would have helped our partners. Furthermore, she questioned if having the alternates who were less experienced in DV issues but who were not employed by any DV service providers was worthwhile in the long run. Other researchers added that with the partners being new to research, more time was needed to present information and to have time to absorb trainings. As partners were also unfamiliar with the issues of research ethics and informed consent, there was need to review those issues throughout the course of the project.

Conducting interviews

Question: If you conducted focus groups or interviews, what was it like for you?

Conducting interviews was a very positive experience for most of the respondents. Partners described the experience as being “rejuvenating, great, touching, and amazing.” Partners gained empathy, built trust with participants, became better acquainted with clients, and learned more about survivors’ needs, such as shelter and same-language support groups. One person said it was difficult for her to facilitate rather than participate considering her background running support groups. A few respondents said it was helpful to have the interview protocols and questions on paper at each focus group. A few respondents had trouble operating the tape recorders.

...It has been fun to be at the groups and hear the women talk afterwards about how important it was to them to be able to share their stories. I mean, that’s happened at most of the groups that I’ve been at where I’ve talked to the participants afterwards. That’s been great.
The actual facilitating the groups and hearing the information directly from survivors was amazing, and totally made it worthwhile.

Some of the bilingual respondents complained that the translated questions were unclear, and that it was necessary to rephrase certain questions a number of times before participants could understand them. There may have been some conceptual subtleties that did not translate well cross-culturally.

Cultural appropriateness

Question: In what ways do you think the research as it was conducted was or was not culturally relevant?

With the exception of the fliers that were used in recruitment, there was almost complete agreement by partners that the project as it was conducted was culturally appropriate. Partners appreciated having been given discretion in working with their own cultural groups, honoring their cultural expertise. Advocates for non- or limited-English-speaking women said it was very helpful for women in interviews not to have to struggle with speaking English. Many partners mentioned that having focus groups and interviews conducted by women of the same ethnicity or language group as participants allowed participants to speak openly. Partners reported having been told by participants that they very much enjoyed being in the focus groups, and many of them even wanted to meet again. One partner mentioned that the focus groups were more culturally relevant than the DV groups offered at her multicultural agency where women of different languages are mixed together for groups which requires time-consuming translation and leaves little time for cross talk.

I think it was culturally relevant because you had an [X] person conduct that focus group, and for the Hispanic community you had a Hispanic person, so I think it wouldn't have worked any other way. It definitely would have been question and answer, question and answer, where you're not comfortable being honest, you're not comfortable talking about such a sensitive issue.

Finally, a few advocates mentioned that the statement recruiters were required to read to participants to apprise them of their rights was not culturally appropriate for some, although they were translated into the various languages. The vocabulary and concepts of the opening statement had been far too academic.

Just again to reiterate that the whole idea of a study group or a focus, or a research... at least that's what I'm thinking was the reason why we didn't get any more participants. I asked my mom if she would do it, and she said no. I said, "Why?" She said, "I've never done it. No one's ever talked to me about..." You know, it's just such a weird concept to some cultures.

Non-native English speaking partners strongly criticized fliers as having been culturally inappropriate because women would not call a stranger to discuss personal matters, regardless of offers of compensation. Partners said a trusted individual needed to present the project to participants. Additionally, the fliers posed a barrier for potential participants who are unable to read.

The cultural appropriateness of the inclusion and training of our partners was addressed in some of the process evaluation responses. Overall, partners appreciated the efforts made by research staff to include everyone. There was appreciation expressed for the
Development of the Partnership

There were a few complaints that the level of English vocabulary in meetings was difficult at times, and some partners were shy to either ask questions or to speak up at all. One partner was not comfortable asking questions because she felt others were more advanced then she in both English and DV knowledge. Another partner suggested that it would have been nice to have had more time to get to know one another, and to have had more small group time in which to practice speaking to one another. Two partners felt put on the spot in a QRT meeting during a role-play exercise on focus group facilitation. They said the role play involving self-exposure and public speaking was uncomfortable. One partner offered that such activity counters her cultural upbringing. Partners often felt rushed in meetings because the agendas were full and time was tight. It seems that allowing for more personal, and less strictly agenda-based meetings would have put some partners more at ease to participate. One partner felt the research staff could have displayed more curiosity and listened to her expertise more when she tried to explain “moving out of the language of lesbian” to understand the more subtle gender gradations within lesbian/bisexual/trans identification.

Two of the researchers discussed challenging one’s own cultural lenses and prejudices and examining the ways in which team members may have misunderstood each other due to cultural differences. One researcher felt there were presumptions made by the researchers that all people of color get along and understand one another, and that as a person of color, she was occasionally thrust into the role of taking care of problems amongst people of color. She expressed the need that there be cultural competency on the part of researchers and that they make an ideological commitment to learn more about what cultural competency and congruency means.

... from the nature of this project, if I needed to point out a concern I had about any of the -isms, I felt like I had a place... to do that. It's never comfortable, and it's never easy. And it takes a lot out of you. So I do think that it was a project that allowed for me to be able to stand up and say, "Hey, this is what this looks like. This doesn't feel comfortable. For me, this is not a fit, and I need to let you know that."

There were times when I was pretty blunt about my role, that kind of strange role of being both someone who’s coming from a couple of the different communities that we’d been looking at, someone who also first had community based work and now is a researcher. So kind of straddling both sides. And I think that when I... when there were things that happened that I had a very different perspective on, I do think the team was very good at listening to that. I really do. So I didn’t feel... I guess maybe the more succinct way [of saying it] is: I have not felt inhibited in the least from saying what I felt I needed to say.

Assessment of collaboration

Question: How was it for you working on a diverse and multi-ethnic team?

All the respondents reported feeling very positive and comfortable about having worked together. Some of the partners already work in multicultural agencies, so the experience of being in a multicultural group is familiar. One person said she liked knowing she was not alone on “the English issue”, that is, not speaking English as a first language. A few people said they learned about cultures of which they had little
previous understanding. One partner was personally challenged by the open talk about lesbianism, as the acceptance of it is culturally foreign to her.

An additional focus group was conducted with the partner advocates which included questions about their experience working as special population advocates, challenges they face, and cultural appropriateness in services provision. A number of respondents cited the advocate “focus group”, in which there was much sharing across cultures as having been a particularly enjoyable part of the project.

Question: Are there problems you feel this project created for you, your agency, or the community you serve?

Most respondents said participation in this project did not create problems for their communities or agencies, although a few advocates said their clients were upset because advocates were not as accessible due to project demands on their time. Many partners complained that the added workload was overwhelming, tiring, and stressful. One partner reported personal financial loss as a result of her project participation. Others felt they should have been paid individually, as their project participation was on top of their regular workload. Partners were not compensated individually for the extra time they put into the project.

Stressed out! I’ve been really stressed out. Things just get out of hand. I’m running here, there, try to get on times [be on time]. I’m really having a difficult time in terms of keeping up on the schedule...it [the project] kind of adds up our duties. We have lots of clients to work with, and most of the times we are really busy, and then when they give us this project, we are working extra, extra hours. I think it [the project] is something that separate from our regular work schedule, and then we should get PAID.... We don’t have any time off for working with this project.... It would have helped a lot, at least emotionally.

The agency which provided translation services for the project miscalculated translation costs, and in addition to other problems, this led to discord between Public Health researchers and the contracted agency. One researcher felt that as a result, her relationship with the agency would no longer be the same.

The only problem is we had some real issues with the agency that we ended up contracting to for translation/transcription. And that turned out to be what I would call a pretty ugly scene, agency to agency. And it’s not yet been resolved. It involves budgets and a number of other things. That is a problem that the project has created. It’s not the project’s fault. There were a number of reasons. But as a result, my interactions with that agency will not be the same.

Question: What was it like for you to participate given your other responsibilities and job duties?

A number of advocates expressed concern about having been able to adequately serve clients with safety and crisis needs because of the time taken up by the project. There was criticism of the lack of structure provided by partners’ agency management in blocking project time, and disagreement with managerial directives to cut back on direct services to clients in order to work on the project.

I guess before management accept a project such as this that they should have a clear direction on how it should be done and that it can be monitored properly so that it can be successful and that the amount of work or effort is distributed accordingly to each advocate, so that it won’t be out weighed so that one advocate will [not] be really bogged down...how am I going to fully help with this project and then also
fully assist my client, and not jeopardize my existing and new clients that are coming in. Especially with their crisis. You know, if there’s safety involved, if they’re a victim defendant where I have to go to the jail and see them and stuff like that. I would say that management should give a clear direction. Like how many, like for instance four hours should be spent on direct services with existing client. Two hours with new clients, and maybe another hour for the QRT.

**Relationship of agency to project**

*Question: Do you feel your participation was a good use of your work time?*

Overall, respondents felt involvement in the project was a good use of their work time. Most respondents expressed gratitude for having had the opportunity to learn more about their clients and about research, and to step out of their established patterns of relating to survivors from within “professional” roles, and to listen openly and objectively to women speak about their experiences.

...My sadness would be, where this research is going to go. What is going to happen after this research? Are we being used like guinea pigs? If that’s going to be, that’s going to be a waste of time. But if there is going to be some difference, if I gave feedback to the way we’re going to do business, that’s going to be helpful, and besides, the Health Department, not being (behaving as) a big institution, bringing it down to the people who are going to be doing the work, listening to their voices and trying to do something about this research, that will be great. That will make me really really happy, that will make my involvement complete.

A benefit of advocates having spent work time conducting focus group interviews with clients was expressed by a number of respondents. In some cases, focus groups resulted in outreach to those in need of DV services.

...when they finished the [focus] group, they were asking me for my business cards. It became another form of outreach. Because, to tell you the truth, all of these women were ESL students [at another program within the same agency], but they didn’t know about the DV program. They are told, but the presentation is very brief.

*Question: Do you think the findings from the research will influence how your agency serves women in DV situations?*

Most respondents said either they did not know how findings would be used or that they doubted findings would influence their agencies in DV service provision. One person said if findings were to result in increased resources for her agency, then providers could be more available to those in need. Another respondent expressed hope that there would be information learned in the project that would improve services.

**Attitudes about research**

*Question: Do you think it’s important for researchers and providers/advocates to collaborate or work together like this when conducting research?*

There was agreement that researchers need the cultural and DV expertise of community partners in undertaking such a project. People thought that collaboration is important for determining the concept, procedures and community acceptance of a given project, and assuring that relevant and appropriate questions are asked of participants in order to get accurate information. A few advocates said that they could not do research without the help of the researchers. One participant commented that working together made
things go more smoothly, whereas a staff researcher felt the collaboration made things harder in many ways because of the complexities involved in coordinating five agencies and nine advocates. She did go on to say, though, that the cultural perspectives of the partners were very important and that the partnering was essential to conducting the research.

*I think it's key to work together, otherwise you're wandering around not knowing where you're going. Ultimately the information is for the community so it's essential that they are involved.*

*I think if researchers had come in without the background in DV, that I think a lot more inappropriate questions would have been asked. And I think it wouldn't have gotten to the same information. So I definitely think it's important in order to get the accurate information.*

The three researchers interviewed were in agreement that although including community partners throughout the phases of the research project created logistical difficulties, their participation was crucial to the success of the project in areas such as safety planning, developing questions, recruitment, interviewing, interpretation of data and follow-up.

*I think it's vital. ...I keep coming back in my mind to safety. I mean, we went to a lot of work to make sure that we had safety protocols, which we would not have had had we not had our providers with us. And it's scary to think what could've happened if we hadn't been so rigorous about that. So, on a topic like violence and this kind of thing, which also includes a lot of topics that have to do with drug and alcohol use, and homelessness, those kind of things ...you can't take a chance on not having providers on the team.*

**Question: Do you think this research has value for the populations you serve? Why?**

All respondents except two were very positive about the value of this research for the populations they serve, although their reasons were varied. One respondent said that when we assist women in this generation who are in DV situations that we begin to decrease the cycle of violence in the next generation. Another respondent commented on the benefit to Asian women, saying women who came together for focus groups learned more about their rights, equality and freedom in the U.S., and recognized the need to get together more often at the agency from which they receive services. A number of respondents said the need for same language support groups clearly emerged as a result of survivor participation, and advocates commented on how much the participants enjoyed speaking together.

*Yes, very much so. One hundred percent. Because women who presents the vital key in family structure and that's the root, I think the root of the violence in our society when they learned it in the family area. So when women that are in the DV situation are being assisted, then perhaps the cycle will be changed for the best that violence will no longer exist within the next generation. So, breaking the cycle again.*

One researcher felt that the project could have value to women because there was the potential, through putting findings into action, that services for and cultural understanding of survivors would be improved. Another researcher expressed concern that the groups studied were too many and too broad, which could result in the perpetuation and creation of stereotypes instead of increasing understanding.

...we're hoping for and really working on...to see the findings put into action in terms of making services better for women. And not just services, but understanding DV in their community more in society. So a
better understanding about what DV is outside the traditional model. So I think it has a lot of potential to serve women, and I think in some very basic ways it did serve women.

We were asked to be covering eight different ethnic cultural groups, of which any one of those, you know, it would have even been barely adequate to do any in-depth exploration. See, I think the risk of doing it so broadly and so thinly is that we generate more stereotypes than we transform or transcend them.

**Partners’ recommendations**

**Question:** If the Health Department were going to work on a similar project in the future, what suggestions would you make to them?

Partners recommended that more time be allowed for the project overall, but specifically that more time be left for recruiting, which was seen by most as being the most difficult and time consuming part of the project. Ideas for future projects included studying other ethnicities, studying teens in abusive relationships with a focus on young and older men, and looking at DV trauma services in hospitals. One respondent felt researchers could be more respectful of community partners’ existing workloads, and that there should have been more time invested in learning about other people’s cultures and communities. Another wanted partners to be involved with future projects from the time of inception, feeling this would create a sense of ownership for all.

*The time [for recruitment], the time is very short. We need lots of time to convince them to come, maybe six months... recruitment is very, very time consuming.*

*To have more time. For recruitment. For everything. This one [this project] gives me the feeling it was a little bit rushed.*

There were a few areas related to translation issues that a researcher identified as needing improvement. First of all, it is more important that translations are conceptually comprehensible to native speakers than that they strictly translate back and forth between languages. Secondly, Public Health researchers ought to have had a clearer idea of a reasonable estimate for the volume of translation the contractor was to provide. This could have alerted us earlier on to foreseeable problems with the time and costs associated with translating and transcribing multiple groups in multiple languages. We also used the same contractor for the pool of alternate interviewers for the project. In requesting alternate interviewers, we needed to have specified more clearly the skills we were looking for. If we had shared more control in the decision-making process of personnel selection, we might have fared better. Although some of the alternate employees were excellent, others did not have the skills necessary for interviewing.

One researcher shared the concern that there was not funding available beyond the end of the project for follow-through with findings.

*...at the funding level and at the policy-making level—that if you’re going to do socially responsible research, you’re going to link that socially responsible research with resources, with ways of actually doing direct services. Otherwise ... you devalue the whole meaning of collaboration. There has to be a continued ongoing linkage between research, policy, direct services and social change. You have to have those things working continuously and simultaneously. That’s what partnership is.*
IMPLICATIONS FOR THE JUSTICE SYSTEM

Most of the findings from this project have implications for the justice system. For example, one community's awareness of domestic violence and descriptions of abuse for a particular cultural community should impact the way in which the arms of the justice system respond to DV in particular cases. However, it is not possible, and would be redundant, to reiterate all of these findings here. Instead we will focus briefly on our findings from the participants' words as they specifically relate to service delivery through the justice system.

Note: In this section we discuss Child Protective Services. We recognize that Child Protective Services is not technically part of the justice system, but because child welfare issues often involve contact with the police and legal systems, we believe that implications for Child Protective Services should be covered here.

Service access issues

A number of barriers inhibit victims' access to and satisfaction with the justice system. Several of these are based on fears women have either from their own previous experiences or from hearing about others' experiences. Participants reported being afraid to access police and courts without some shelter to go to; afraid that the police will arrest the wrong person; afraid of losing the perpetrator's economic support if he goes to jail; afraid that any contact with the system will put them at risk for repercussions such as Child Protective Services intervention; and afraid that contacting the police will make men more angry and exacerbate the abuse. This last is especially true for women who have been threatened with death if they contact the police. For immigrant women these worries are compounded by fear of immigration problems (including deportation), sometimes as the result of an abuser's threats. Women are also concerned about the effect that police contact might have on their children and families.

Participants also recognized that intervention by police or the courts is sometimes delayed and often temporary. They are concerned that police response is too slow to help and the length of time needed to get a protection order means lack of protection for some period of time. Knowing their abusers, they recognized that jail is temporary but that perpetrators' determination is long-lasting. Furthermore, there are no safety guarantees, even once charges have been filed or a perpetrator has been jailed.

Victims/survivors have a number of personal and cultural beliefs which also inhibit access to the justice system. A general lack of awareness of DV prohibits certain women from seeking help from the police and courts; women do not always know what is legally acceptable and what is not. For some, they do not want to let others know about their problems due to shame and embarrassment. LBT survivors felt cautious about bringing negative publicity to the LBT community. Others do not want "the police in my business." Some women in same-sex relationships, feel that police and courts do not take them seriously. Women from several cultures reported that the police only respond if there is physical violence. For non-English speakers, there is a
lack of awareness of justice services and a lack of ability to communicate. Many believe that legal help costs money that they simply do not have. For certain women, the cultural judgments which occur if a husband is sent to jail outweigh the costs of staying in an abusive relationship. Finally, isolation, threats and intimidation that are powerful tools of perpetrators of DV are some of the most important factors that work against victims/survivors who are trying to access services. Because there are barriers to accessing the justice system on many levels, various strategies should be employed to improve access. A great deal of work is necessary to make justice system services accessible to diverse victims/survivors. Providers of community-based DV services are important facilitators of access to the system. Their intensive efforts must be acknowledged and adequately funded. Additionally, more intensive community outreach to all women to alert them of their options is warranted.

**Services that worked well**

Participants reported that a number of judicially-related services worked well for them. In the case of the police department, police officers provided necessary support and assistance such as transport to a hospital. Police responded when victims called 911 and the system then ensured that perpetrators were required to appear in court. Some felt that the mandatory response to a 911 DV call is a good thing because often the victim cannot call twice. Furthermore, when police arrived and offered to have a female officer present to verify abuse through physical evidence, victims felt respected and validated. Thorough police investigation of the immediate situation was praised. One immigrant woman stated that “You get real help in America only when you call the police.”

The legal system is thought to be helpful when men know what the law is. This is particularly true for some immigrant and refugee groups who praised the existence of U.S. laws against domestic violence (Vietnamese, Amharic-speaking, Cambodian). In addition, knowing the laws is a help for victims to prevent further or future abuse because they know their rights and are less susceptible to threats by perpetrators regarding issues such as deportation.

The court system was praised by some immigrant women for providing effective protection and restraining orders and divorce proceedings. However, victims reiterated over and over the need to have someone who can help them with paperwork and “hold your hand” through the process. Programs mandated by the courts such as an ex-offenders program which helped with employment location and abuse counseling and anger management were seen as helpful.

**Services that worked poorly**

Study participants had many examples of judicial system services which worked poorly for them.

Police responded poorly to a variety of calls when victims tried to get assistance. Response times for 911 calls was problematic for those who were abused further while
waiting for police to show up. Some police were insensitive to a victim’s immediate situation, such as refusing to get a woman her shoes before she was removed from the scene. In several instances, victims described being told by police to leave their homes because the house was in the perpetrator’s name even if the marriage was legally binding or the abuse was obvious. Some women ended up in the role of victim defendants because police were unable or unwilling to distinguish accurately between perpetrator and victim. Victims were treated as though they had no rights. In other cases, police refused to help if there was no evidence of physical abuse (only examples of harassment) and instead relied exclusively on referrals for the victims. For those who went so far as to get a restraining order, they were sometimes frustrated to discover that police departments had separate computer systems and could not track orders between departments. Furthermore, restraining orders only work if the survivor can call the police when the abuser appears. For women caught up in the psychological dynamics of abuse, this is not always possible (language may also be a barrier in such a situation).

Several cultural groups identified examples of prejudice by police. For Native American women this might mean the label of “drunken Indian” applied to the victim so that she is then not listened to; for African American women this could mean that if a White perpetrator were involved, he would be believed rather than her. For those in same-sex relationships, police may break up the fight and ask one person to leave, but not take the perpetrator to jail. LBT survivors reported that police were sometimes disrespectful to them during the arrest of their abusers.

The legal system was criticized for failing in a number of areas. Public defenders were seen as ineffective or unprofessional, or simply too difficult to access quickly. The time it takes to get a protection order puts victims at further risk for abuse. Keeping a perpetrator in jail long enough to establish or increase safety is difficult, and women are very frightened about further abuse once a perpetrator is released. Those who were left supporting their children alone felt that there was inadequate pursuit of child support payments, especially in terms of investigation of fathers’ complete incomes.

Participants were resoundingly critical about their contact with the child welfare system, and victims in numerous situations specifically identified Child Protective Services as the object of serious concerns. Victims said that even when their children were not directly involved they are sometimes questioned about a parent’s partner abuse. For some cultural groups, this investigative procedure is considered to be unacceptably intrusive, and even seen as a form of child abuse itself. Child Protective Services was also thought to be ineffective in meeting teens’ needs. Women described Child Protective Services as not well connected with other services, so that in a crisis situation, workers are unable to provide adequate referrals for shelters or other emergency services. Women reported that even after the abusive relationship ends, they encounter great difficulties in regaining custody of their children because the Child Protective Services system is convoluted and confusing.
Implications for the Justice System

Children and teens: needs and issues

Several issues are particular to DV victims with children. Participants called for improved coordination between victims’ services and Child Protective Services. They asserted that there is a need to help keep families together and to serve children without dividing them from their mothers. Better enforcement of child support payments would help to ensure that children’s material needs are adequately met. Single mothers described needing help to raise children alone, and particularly to keep boys from becoming gang members when there is no father in the house. Since DV victims in crisis may try to take children across state lines or out of the country, the judicial system may need to re-evaluate the definition of child kidnapping. Finally, victims felt that the judicial and child welfare systems need to be more sensitive to hearing them when they report that abusers are also abusing their children.

Relationships with the system

Participants reported a number of concerns they have about how systems respond to their needs. In some cases their perspectives are based on their own experiences. In other cases, they have developed conceptions about how systems work based on stories they have heard from other women. Both types of knowledge drive their use of, and interactions with, the judicial system.

Police

Victims report that when police respond, they take both perpetrator and victim to jail. Police will arrest the person without bruises and scratches, or other physical evidence of conflict. Police make mistakes about who is the perpetrator and who is the victim. This is seen as further victimizing the victim. Participants also reported that police get tired of “false alarms,” such as repeat calls which involve no physical abuse or which a woman retracts upon arrival of police, and then fail to respond to “real” calls from individual victims. Victims feel they are not heard, and that at all levels of the system authorities do not believe them.

Courts

Participants reported that their perpetrators get away without serving any of their sentences. One woman observed that women in prison are often victims of abuse who were finally pushed too far and reacted with abusive or violent behavior themselves.

Child Protective Services

Child Protective Services was generally seen as ineffective and problematic. One person described, “The system’s way of helping, helping is to take the children away.” Women fear that contact with one system means being tracked by others. For example, they fear that if their children access counseling, Child Protective Services will be contacted, and children subsequently will be removed from their homes. Participants criticized existing programs for dividing parents and children. In some cases this means placement of children in foster homes which women see as neither healthy nor
safe. In addition, some mothers commented that they feel they can no longer discipline their children or the state system will intervene.
LIMITATIONS OF THE RESEARCH

This research had a number of limitations. We discussed some limitations in our Methods section, including: appropriateness of focus groups for small communities; participants' possible reluctance to speak based on cultural norms or the difficulty of subject matter; using QRT members (agency advocates) rather than (neutral) alternates as group facilitators or interviewers; varying communication styles; first language not matched perfectly with all Amharic- and Russian-speakers; translation issues (both with interview instruments and in transcripts); and generalizability of findings. Further discussion of some of these and certain additional limitations are noted below:

➤ Recruitment. This affected primarily Amharic speakers, Filipinas, Latinas and LBTs. We were unable to recruit as many participants as we would have liked for these groups. We feel that the findings for these groups are still valid, although they are based on fewer responses than would have been ideal in order to reach saturation. This limitation suggests the need for further research to confirm and expand our findings. Possible reasons for the difficulties recruiting from these communities may include the short time-frame in which to recruit, religious norms which may have inhibited open discussion of DV, and heightened fears of confidentiality due to small community size. Additionally, we had varying success recruiting participants who had not accessed services. However, it is important to remember that survivors who have used services may well have had to overcome access barriers themselves, and are therefore capable of speaking to the issue. Another limitation is that barriers to services may also be barriers to participating in a study like this; such barriers may include extreme risk of lethality, isolation, and concerns about confidentiality.

➤ Translation of instrument. Although extensive efforts were made to ensure that translations were accurate, during data collection we discovered that the focus group question guide was unclear for some languages (Cambodian, Amharic-speaking). This may have been due to the complexity of the topic or simply to poor translation. Either way, it required facilitators to re-word questions, sometimes multiple times, to convey a concept or query. Again, this does not invalidate the data, it simply increases the complexity of analysis.

➤ Use of known facilitators. As mentioned, after recruitment was clearly stalled for several groups (Latina, Filipina, Cambodian, Vietnamese, Amharic-speaking), we made the decision to use known individuals to facilitate or interview. This decision was not taken lightly and was made only with respect to groups where initial recruitment was not progressing well. Following the advice of our QRT partners, staff decided that only by running groups facilitated by the advocates for these communities would women agree to participate. In the case of Latinas and Filipinas, one interview was conducted with the QRT member because, despite the change in protocol, we were not able to increase recruitment. In the case of Amharic-speakers and Cambodian and Vietnamese women, we were able to run several groups with each QRT member facilitating.
Since our original protocol was designed to avoid any potential biases as the result of providers interviewing their own clients, we were concerned about the effects this change might have on our data. However, because the data for these two groups are not dramatically different (regarding satisfaction with provider services) from those groups conducted with alternate facilitators, we do not anticipate that the protocol difference negatively affected data reliability or validity.

Socioeconomic level of participants. In all of the groups, participants of low socioeconomic status (SES) dominate the sample. This is probably due to the fact that there was a monetary incentive for participation, and may also be due to recruitment strategies. We do not feel that this limits the validity of the findings for women of higher socioeconomic groups, since the findings seem to stem more around cultural issues than around economic ones. However, we do caution the reader not to assume that the demographics of our sample are indicative of the demographics of the DV problem in these communities. We have every reason to believe that DV is taking place throughout these communities and is not selective based on SES.
RECOMMENDATIONS

Lessons learned about conducting participatory research

Both researchers and advocates are in clear agreement that a participatory approach was critical to the success of this research. The benefits of collaboration are clear; advocate participation helped to ensure the safety of participants, the cultural appropriateness and relevance of the research, and was crucial for recruitment. The researchers felt strongly that the project simply could not have been conducted without a participatory approach.

The process evaluation shows that some aspects of the collaborative model worked well. Advocates and researchers both reported personal and professional growth and learning from participation. Relationships among advocates and between researchers and advocates were developed and strengthened. All believe that the project helped us to learn important information about the communities involved.

Time to conduct research

Despite these successes, however, challenges in conducting participatory research remain. Adequate time to conduct the project is one of the biggest challenges. We planned the study to fit into a fifteen-month time frame in order to stay within the project budget. However, it is clear that it would have been helpful to have more time for the study. Advocates could have benefited from more time for recruitment and the entire research team could have benefited from a more relaxed timeline that would allow for more thorough training and activities that would have helped us to get to know each other and develop trust.

Burden on community partners

The burden that participatory research projects place on community partners is another significant issue that should be considered further in future projects. The model we used in this project was to reimburse DV agencies for the time their advocates spent on the project. However, we learned through the process evaluation that often individual advocates put in extra hours in order to work on the project and continue to serve their clients, and they were not compensated for their extra work. We recommend that researchers discuss these issues with community-based agencies and come to an agreement before starting a project on how the agency will balance existing staff workloads with participatory research.

Translation

We also learned during the course of the project that it would have been helpful to give more attention to the quality of translations. We did not want to burden our advocate partners with translation so we had all of our instruments translated by our contractor. We learned later on that certain word choices may not have been appropriate for the educational level of participants. In future projects, it would be helpful to build in
more time and money for field-testing translated documents with community participants, and revising them when necessary.

Cultural appropriateness of research protocols

We also learned from advocates' feedback that the language required by the University of Washington's Institutional Review Board for introducing the project did not work for potential participants. For some, research of this sort is a new concept and mainstream explanations of it are often not appropriate. Consent forms were also difficult for participants to understand; advocates had to spend a fair amount of time explaining the documents since some participants were unable to read and the language was technical and legalistic. Researchers and community advocates should work with Institutional Review Boards to develop appropriate language and techniques for explaining participants' rights, and the purpose, risk and benefits of research. We must do a better job of conveying these ideas to diverse audiences, otherwise the fundamental intent of informed consent is lost.

Linking research to funding

Finally, and perhaps most importantly, participatory research must lead to real change within communities. It is important for funders as well as researchers to recognize that our relationships with communities must be reciprocal. Communities have consented to research for years only to see few tangible results. If we are to convince communities of the value and utility of research we must demonstrate linkages between research findings and funding for programs. Integration of these efforts will ultimately lead to better programs, since they will be based on scientific information, and to better research, since affected communities will be directly involved. Funders should consider a coordinated approach in which funding for programs and evaluation follows participatory research. We cannot emphasize this strongly enough. Tangible benefits for communities from participating in research are critical if meaningful partnerships are to be sustained over time.

Recommendations for improving services in the communities studied

The following are preliminary recommendations for improving responsiveness to victims from the communities studied. As is consistent with our participatory approach, a fuller and more developed set of recommendations will develop through the efforts and interests of our partners and consultants. We are already engaged in ongoing dialogue about these findings with DV service providers, systems leaders and community leaders, and anticipate that more formal and specific recommendations will emerge from these connections. Recommendations presented here are based on the suggestions from participants themselves as well as interpretation of the data.

These recommendations may well have implications for other communities, but they are presented here in the context of the communities studied. Although they may also resonate for mainstream communities, it is important to recognize the complexity of DV for disadvantaged and marginalized victims. Not only are they coping with DV but
also with racism, homophobia, anti-immigrant sentiment, linguistic isolation, and economic marginalization. Efforts to address DV in these communities must also address these underlying social issues and recognize their relationship to DV and to victim responses, and to system responses. Recommendations are organized into three categories: systems-level (refers to public sector systems); service-level (refers to community-based services); and community-level. The effects of DV are pervasive in women's lives and in communities. For this reason, the recommendations are far-reaching and span social sectors.

**Systems level**

*Immigration and naturalization services*

**International Marriages**

International marriages were an area of concern for women in several of the ethnic groups in this study (Russian, Amharic-speaking). They pointed out a number of difficulties women in these situations may face.

Recommendations made by victims themselves point to the need for investigation into the potential for changes in Immigration and Naturalization Service policy regarding international marriages. Specific suggestions include: prohibiting those convicted of prior domestic violence offenses from bringing a spouse from overseas; making applicants' criminal and marriage history available to fiancées before they come to the U.S.; and providing women with information in their own languages about domestic violence resources in the U.S. (such as the national DV hotline phone number) before they leave their home countries.

**Education for immigrants and refugees**

Refugee and immigrant participants emphasized the need for more information on all aspects of U.S. law and government and immigration services as they relate to domestic violence. This information should be given out as women enter the country. Education should be geared to both women and men and clearly explain laws relating to domestic violence and women's rights, and how they might differ from laws in women's countries of origin. In addition, women need easily understood information about immigration status and rights, welfare, police and legal services, and how to access help. This should be provided in all languages with particular attention given to creative communication strategies to reach those who are unable to read.

**Importance of the social safety net**

The past five years have seen significant criticism of the national welfare system and major changes and limitations in federal entitlement programs. Welfare is a lifeline for victims who are fleeing domestic violence, and benefits programs can provide the support necessary to make violence-free living possible for some women and their children. New time limits on welfare and work requirements may put victims at risk of staying in abusive relationships. For those who leave abusive relationships, the emotional consequences and physical risks are significant, and this must be taken into account when planning work-force re-entry. Provision of affordable and accessible
Recommendations

childcare is essential. Greater advocacy is needed to preserve what remains of the safety net and to ensure appropriate special considerations for DV victims.

**Criminal justice system**

Criminal justice system protection of victims remains a significant challenge. For people in non-mainstream communities, knowledge of the system, trust, racism, homophobia, and fear of stereotyping are all barriers to using services. For non-English speaking women, access to the criminal justice system is dependent on knowing that DV is against the law, that they have the right to get help, and that their immigration status will not cause them to be arrested. While many immigrant and refugee women view police as potentially protective, these barriers must be addressed. For African American, Native American and LBT people, historic relationships with the police, racism, homophobia and a sense that police do not serve people in their communities are significant impediments. A specific, recurring recommendation highlights the need to educate police about determining who the victim is in a domestic dispute. This issue cut across the groups studied. Cross-jurisdictional issues relating to enforcement of protection orders is another concern that could be addressed with enhanced computer systems.

Additionally, outreach by police to ethnic and sexual minority communities is one way for officers to have positive presence in these communities. Greater attention should be paid to recruitment of bilingual, bicultural, gay, lesbian and female officers.

The 911 system seems to work well and the concept was well understood across groups as a way to access help. Although Seattle is known for its DV response system, police response time remained a concern for some participants and if possible should be improved.

Continuing to support legal advocacy during the protection order and court process is very important for ensuring access. Participants said that without advocacy they would not have been able to access the system successfully. Bicultural, bilingual advocates make access smoother.

Continued and close collaboration between the criminal justice system and DV providers is essential. There were some positive examples of components of the system working well together, such as police referring to community-based providers that further collaboration could help to strengthen.

Some participants called for tougher sentences for perpetrators and more focus on batterer rehabilitation. Participants across groups called for better communication to victims about the whereabouts of their batterers after they are arrested. When batterers are released, victims need to be notified promptly, no matter how difficult to coordinate that process may be. In Seattle, there is a new computerized system being implemented to notify victims when batterers are being released.
Child support enforcement

Child support is an important financial resource for victims with children who are leaving abusive relationships. More attention needs to be given to requiring men to pay and to investigating accurately all sources of income that men might have.

Child protective services

Fear of Child Protective Services involvement in their families is a key barrier to services for DV victims. Women from ethnic minority communities feel at an extreme disadvantage when interacting with this institution. While the researchers realize that Child Protective Services and other branches of the child welfare system have attempted to improve worker training and sensitivity around issues of cultural competence, participants in this study were clear that as DV victims and as people of color, they were not well served by Child Protective Services. Participants felt that the process of leaving an abusive relationship created a situation of double jeopardy, in which women’s attempts to secure help for themselves and their children put them at risk of losing their entire families. Additional specialized training and skill development of child welfare workers with particular attention to the differences in family dynamics and parenting styles across cultures is much needed. Innovative programs which seek to provide supportive services to families within the context of their cultural norms might usefully bridge the gap between the need for services and the fear of interference.

Service level

Address isolation and promote social support

Community-based services should focus on building-in ways to address the extreme isolation many victims experience. Participants across groups expressed a strong desire to come together with other women in their communities to overcome their own abuse and help their communities.

Focus group participants often referred to the comfort and support they felt being in a group with others who share their culture and their language, and expressed the desire to continue receiving such support. Many reported gaining strength and insight into their own situations through their contact with other women who had also suffered domestic violence. Rather than identifying a need for more traditional, therapeutic support groups, participants asked for a forum to come together for mutual support as well as skill building. Some of the specific activities they requested included social events, learning how to use community resources such as public transportation and banks, learning how to drive and discussion of parenting issues.

Culture-specific support groups are available in some communities (African American, Native American and Latina) but there are currently no other culture or language-specific support groups in Seattle. Additionally, traditional support groups often have a therapeutic and didactic focus which is only a small piece of what participants described. Same culture and language support groups could serve as a forum for victims to organize themselves and their communities against domestic violence, and reach out to other victims, since many study participants saw this as an important role for survivors.
Another model identified by LBT participants was the creation of community gathering spaces for survivors to come together for the purpose of learning from each other, reducing isolation, and organizing against domestic violence. Women in many other of the cultural groups articulated a similar vision in which a central community space would serve as a place for survivors to create opportunities for interaction with each other for support, mutual learning and skill building as well as community building.

Another approach to promoting social support is to develop networks of volunteer survivors who could outreach to other victims and educate community members about DV. Many survivors saw this as their role but funding would be needed to support coordination and training.

Skills for independence
While participants said they have been helped greatly by community-based DV services, they are also calling for other types of services to help them to develop the survival skills necessary for independence. Particularly for the communities of color in this study, participants envisioned expanded services supporting them to access the education, jobs, and job-training programs that would help them acquire the skills to support themselves and their children. For non-English speaking women, ESL programs and other basic skills such as how to use the bank, take public transportation and access various community services are a critical part of community-based DV services. This suggests an expanded role for community based DV providers which would include closer collaboration with job training programs and community colleges. Funding to support such integrated programs is essential in order for these collaborations to meet the full range of survivors' needs.

Outreach
It is clear that much more work must be done among non-mainstream communities to get information about services to survivors. Multiple strategies are needed to accomplish this, including developing networks of survivors to do word-of-mouth outreach, advertisement in community newspapers, on buses and through community institutions. In several communities, public service announcements on language-specific radio stations were identified as critical tools for reaching isolated and women who are unable to read. Outreach, however, must be accompanied by expanded culture and language specific service capacity since most specialty providers in Seattle are operating at capacity.

Culture and language specific services
Community-based, culturally and linguistically appropriate services are playing a vital role helping those experiencing domestic violence. It is critical to continue supporting culture- and language-specific services and to promote them as a viable model across the country to serve an increasingly diverse national population. Serving non-mainstream victims is complex. Particularly for non-English speaking women, assisting with their multiple needs is time-consuming and resource intensive. Advocates for women from these communities serve as interpreters, cultural brokers, educators, liaison to police, courts, Immigration and Naturalization Services (INS), and...
mainstream DV services. Often they need to transport clients to appointments or teach them how to use public transportation. Advocates also need to be able to help women work with the INS, the Department of Social and Health Services, and other complex government bureaucracies. Economically disadvantaged victims in general have more complex needs and advocates must spend considerable time helping them meet basic needs for themselves and their children. Funders must take into consideration the unique challenges of providing services in non-mainstream communities.

Additionally, it is often a priority for victims from the communities studied to try to resolve DV within their own families to keep the family and the community intact. Service providers must be sensitive to these culture-specific concerns, which may afford providers the opportunity to develop creative and innovative programs to meet new service challenges. Divorce or moving may be for some women either a last resort or no option at all. These women need supportive, culturally appropriate services to help them stay safe and reduce harm. More attention to treatment and rehabilitation of batterers is important for all communities. For some, like the LBT community and certain immigrant groups, small community size makes rehabilitation critical since it may be impossible for survivors to avoid their abusers completely.

Providers who serve non-mainstream women are often in a unique position to provide leadership within their communities for building community capacity to address DV. However, since these agencies are primarily providers of services to victims there is often insufficient funding or flexibility to support these broader community-level activities. Funding service providers to expand their role in the community to promote greater awareness of DV, its impact on families and communities and to work collaboratively with others to develop preventive strategies is recommended.

Mainstream services

A single recommendation provides context for all of the others: DV survivors need multiple options for services. Not all services can be universally appropriate, and women need access to a variety of programs, sometimes at different points in their lives, or depending on their cultural backgrounds or whether or not they have children. In general, though, mainstream services must be made more accessible and available to all victims. While many participants said they prefer to access services within their communities, for some it is not safe or comfortable. It is incumbent on all providers to make accessibility to all a priority. For example, reaching out to LBT people in brochures to make it clear that services are not only for heterosexual women and hiring bilingual, bi-cultural staff are two ways to improve access. In order for this to work well, staff must be able to work with victims from non-mainstream communities, which includes understanding some of the issues women from diverse cultural groups face, and being equipped to help them make appropriate choices given the family and community contexts in which they live.

Shelters

Emergency shelter for victims of DV continues to be an important need. Although it is not feasible to have an individual shelter for every cultural group, in every community, shelters could work to gear services toward specific communities by hiring bilingual,
bicultural staff, providing appropriate food and being attentive to cultural communication styles. Additionally, more outreach should be conducted among ethnic and sexual minority communities to let victims know that emergency shelter services are available to them.

New shelters should be designed with the close involvement of diverse shelter residents. Designs should consider the importance of private space for women and children who are coping with abuse. Shelter employees are most effective when they show care and concern for the woman and her children. Expanded childcare for residents and more attention to the needs of children are recommended.

Strict rules in shelters are problematic and made shelter stays unpleasant for some women. Explaining the purpose of shelter rules to residents so that they do not seem arbitrarily punitive would help. In addition, shelter staff could re-examine the purpose of house rules and consider whether it may be possible to relax them.

**Housing**

More housing of all types is needed including emergency shelters, transitional housing, and long-term affordable housing. In Seattle, as in many urban areas of the U.S., housing is becoming increasingly unaffordable for low-income and even middle-income families. Many victims stay in abusive relationships simply because they cannot afford the cost of housing on their own. Focus group participants challenge all of us to advocate for more low-income housing so women do not have to choose between homelessness and violence. For women with few personal economic resources, access to secure and affordable (most likely subsidized) transitional and permanent housing is essential.

**Transportation**

Lack of adequate public transportation continues to be a barrier to services and independence for women from the communities studied. DV services, emergency and transitional housing must be situated in locations that are convenient to public transportation. Funders of community-based programs must be aware that resources to help with transportation are essential.

**Services for Children and Youth**

Childcare that women can depend on is essential for survivors with children. Often women must perform shift-work and need access to childcare during non-traditional work hours. Expanded childcare in shelters and transitional housing is recommended, as well as expanded community-based care. Because victims leaving DV situations often have to cut ties with family and community, they may be particularly challenged to find safe and affordable care for their children. Also, their children urgently need consistent care from skilled providers who can meet the additional needs of children who have been exposed to violence.

In addition to childcare, more attention must be given to children and their special needs related to domestic violence. Across groups, women saw violence as a learned behavior and viewed starting with children as critical for prevention. A range of services was recommended such as counseling and recreational activities, as well as
promoting support in the community for youth to develop healthy relationships. Educational programs that promote healthy family relationships, address gender and sex role stereotyping and provide culturally appropriate models of healthy relationships should be developed and implemented throughout communities. In addition, effective secondary prevention strategies to prevent children who have witnessed violence from becoming victims or perpetrators must be made accessible to non-mainstream women.

Community level

Intervening at the community level to address DV seems especially promising as a form of prevention. Many creative ideas emerged from the groups and form the basis of our recommendations.

Community education

Culturally and linguistically appropriate community education campaigns that raise awareness about DV and services for victims should be implemented in diverse communities. In order for community education to be successful, messages must be tailored to individual communities. Community leaders and institutions must be involved in the development and implementation of such campaigns so that they will be culturally appropriate, and viewed as legitimate and acceptable to community members. In some communities significant work with community leaders may need to take place before community education can take place.

Children have special needs related to domestic violence which deserve additional resources and attention at the community level as well. Across all groups, participants saw violence as a learned behavior and viewed starting with children as critical for prevention. Women recommended a range of services such as counseling and recreational activities, as well as promoting support in the community for youth to develop healthy relationships. Educational programs that promote healthy family relationships and provide culturally appropriate models of healthy relationships should be developed and implemented in the schools.

In many communities DV is not discussed openly and there remains a sense of isolation and shame on the part of victims. The fact that we heard so often that DV is viewed as normal in adult intimate relationships suggests that combating this notion should be a major thrust of educational campaigns. Campaigns should be targeted to the entire community, including victims, abusers, friends and neighbors. Personal and community support networks may in some cases be the best resource for those who need help. For this reason, community education and advocacy are essential.

Community education should:

- Explain what DV is, including culturally specific definitions of abuse.
- Counter the notion that DV is the norm in relationships.
- Address shame; clarify that DV is not a woman's fault.
- Provide information on resources that are available to help victims, and explain that these services do not cost money.
➢ Provide information to women about their right to live without violence and to get help for DV. Provide information on how the law can help to protect women.

➢ Provide information to community members about how they can best help and support those in DV situations.

➢ Promote culturally appropriate models of healthy relationships.

➢ Address stereotypes of who abusers are.


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Appendix A
Focus Group and Interview Protocols:
DV Focus Group/Interview Project

Focus Groups

At each focus group, the following people will be present:

Facilitator: The facilitator has primary responsibility for conducting the focus group. She is responsible for explaining the study to participants and for obtaining informed consent. She will facilitate focus group discussion and ensure that all participants have an opportunity to speak. She is responsible for audio-taping the focus group discussion.

Crisis counselor: The crisis counselor will not participate in the focus group. Rather, she will be on-call to counsel women outside of the group if a participant experiences an emotional crisis.

Childcare providers: Childcare providers will care for participant’s children in a separate room from where the focus group is being held. They will be aware of the topic of the focus group but will not reveal this to the children. At least one of the childcare providers must be experienced in caring for children of DV victims/survivors.

At each focus group, the Health Department staff will bring the following supplies:

- Cell phone
- Name tags
- Tape recorder
- Paper and pencil
- Short demographic survey
- Consent forms
- Educational brochures
- Referral information
- Food
- Cash Incentives
- Tissues

The facilitator will do the following:

- Greet women at the door
- Answer any questions they might have before the group begins.
- Facilitator will open the group by briefly introducing herself.
- Briefly re-introduce the study topic
First of all, we want to thank you for coming to share your valuable time and expertise with us. There is no expertise as great as that which comes from first-hand experience. In sharing your experience and opinions today, you will be contributing to new and very important research. The purpose of this research is to get a clearer picture of the best ways to help women in domestic violence relationships. The information you share will be used to help other women and to identify areas of funding need.

- Answer any remaining questions
- Explain the consent form and obtain informed consent from each participant
- Read the following ground rules.

All information shared in the group is to stay in the group. This means that no one should tell other women’s stories to friends, family or co-workers. By having this agreement honored in the group, you can know what you share will be kept private too. In this way, we can help to maintain each other’s safety. If you recognize someone in the group that you know from another part of your life and you are not comfortable for any reason speaking in front of her, please tell the facilitator and we can reschedule you for another time.

If you find yourself feeling upset and needing to take a break from participating, feel free to leave the room and talk with the crisis counselor. She will be happy to speak with you and provide you with any immediate support you might need. When you are feeling ready to rejoin the group, you may reenter the room. Leaving the group to speak with the crisis counselor will not affect reimbursement.

Because the discussion today is so important, we will be taping all of the valuable information each of you has to share. This means it will be necessary to speak only one at a time so that each word will be clearly audible on tape.

We want to make sure that everyone has a chance to talk. Some of you may disagree with each other and that’s fine, we want to hear all sides of issues.

- Talk about reportable information.

We recognize that DV is a bigger issue than just violence against women and that sometimes children are also involved, we are really interested in hearing about your experiences and not instances where children are involved. If you tell us about ongoing or recent child or dependent elder abuse, we must report this to the authorities. We are also required to report risks of imminent harm to others or to yourself. This is a requirement mandated by state law. Please structure your comments accordingly.

- START TAPE
- Facilitator conducts focus group
Take care to ensure that all participants have an opportunity to speak. If at any time facilitator believes that a participant is experiencing an emotional crisis ask if she would like to meet with the crisis counselor.

At the end of the focus group tell participants that you have information on resources in the community for victims/survivors of domestic violence.

Let participants know that if they'd like to schedule an appointment to talk with the agency serving their ethnic/cultural group, facilitators can arrange this on the spot.

Health Department staff will reimburse participants.

Thank participants.

Interviews

The Interviewer will bring the following to the interview:

- Tape recorder
- Interview guide
- Consent forms
- Referral Information
- Educational brochures
- Tissues

The Interviewer will do the following:

- Greet participant
- Reintroduce topic briefly and explain interview procedures
- Answer any questions
- Obtain informed consent
- Explain that if she experiences emotional distress that you will help her access an appropriate crisis line
- Explain that while we recognize that DV is a bigger issue than just violence against women and that sometimes children are also involved, we are really interested in hearing about their experiences and not instances where children are involved. Explain clearly that if a woman talks about ongoing or recent child or dependent elder abuse, we must report this to the authorities. This is a requirement mandated by state law. Women should structure their comments accordingly.
- START TAPE
- Conduct interview
- At the end of the interview tell participant that you have information on resources in the community for victims/survivors of domestic violence.
- Let participant know that if she'd like to schedule an appointment to talk with a counselor you can assist with this.
- Reimburse participant
- Thank participant.
Appendix B.
Focus Group and Interview Questions

Awareness: Within a Cultural Context

1. I’d like to talk about DV among Xs (e.g. African-Americans, American Indians, Latinos, Lesbian/bisexual/transgendered community, Vietnamese, Cambodians, Russian speakers, Amharic speakers, Filipinos):
   - How aware do you think your community is about DV?
   - How do you think X view DV?

2. How do people in the X community talk about DV? What do they say? Who is most likely to talk about it?

3. You probably know some women who have been mistreated by their husbands or partners or maybe by his family members. What are some examples of abuse you see in your community?

NEEDS:
Let’s talk a little about your own experiences:

4. What kinds of help have you needed when you were experiencing DV?
   - Was this help available?
   - Were you able to access it?
SERVICES:

Let’s talk more about services:

5. What services do you know about that help women who are experiencing DV?

6. What kinds of services have you used?

- What was it like for you to access these services?

7. As you recall your experience in using DV services, can you tell me a story about a time when getting those services worked really well for you?

- Where was it really helpful and you felt comfortable?

- What was it about that experience that made it work for you?

8. I’d like you to think about some services that you received but then decided to no longer use. What were some of the reasons that you decided to stop using these services?

9. Again, in thinking about some services that you have used, have these services been offered by women who are of your cultural and language background?

- Is that important to you?

- Why?
10. If you participate in support groups, how important is it for you to be with women who share your cultural and/or language background?

**DV AND CHILDREN/TEENS:**

Now I'd like to ask some questions about what the experience is like in using services when a woman has children:

11. When you used services, were the needs of your children taken care of, too?

- What about for those of you with teenagers, were their needs addressed, too?

- What do you think needs to be done to provide better services for children and teens?

**VISION FOR THE FUTURE:**

Now I'd like you to imagine the opportunity to create real social change in helping women who have survived DV and putting an end to DV.

12. Let's pretend you've been given $500,000 to help women experiencing DV. How would you spend it?

13. What is the best way to reach out to women in your community who are being mistreated by their partners or husbands?

14. What could be done to prevent DV in your community?
Appendix C

Recruitment Protocols 1, 2, 3 and 4:
Domestic Violence Focus Group/Interview Project

We will recruit participants from a variety of community and institutional settings, including DV victim services, health care providers, social service agencies, and local community sites.

Protocol 1:

In most settings we will recruit potential participants by distributing a flyer. (Please see list of sites where we will post flyer.) The flyer (Appendix F) will invite those interested in the project to contact the study representative at the phone number specific to their ethnic or cultural group, who will screen for eligibility. The study representative will screen potential participants on the phone (see screening protocol, Appendix I). If screening questions confirm eligibility, the participant will be invited to a focus group or interview.

Protocol 2:

We will also recruit participants through our partner DV provider agencies, including Ina Maka Family Program, the Seattle Indian Health Board, Advocates for Abused and Battered Lesbians, Refugee Women’s Alliance, East Cherry YWCA, Consejo Counseling Services. Study representatives who work at these agencies will introduce the project to women being served at their agencies. They will introduce the project in a neutral manner by saying:

*I am working with Health Department and University researchers on a research project that is trying to understand how we can better meet the needs of women who are experiencing violence or abuse in intimate relationships.

*We would like to talk with women who have experienced either physical, sexual or emotional abuse in an intimate relationship. The study will involve participating in either a two-hour interview or a 1 1/2 hour focus group discussion. If you are interested in participating, you will have the option of an individual interview, participating in a focus group interview with your current support group, or participating in a focus group interview with other (Latina, Indian, etc.) women outside of a support group. Whether or not you decide to participate will not in any way affect your relationship with (the agency introducing the study) or the Seattle-King County Department of Public Health. The study will compensate participants $35 hours for their time and will provide transportation and childcare upon request.
*If you are interested in participating, we can talk more about it now and I can schedule you into a focus group or interview (use Screening Protocol beginning with Question #7 to schedule participation). Or, you can call the study later at (phone #). Feel free to take one of these flyers that explains the study if it is safe for you to do so. The safety of potential participants is of the utmost importance. Please do not volunteer to participate in the research project if doing so could put you or other participants at risk.

Protocol 3:

We will also be doing face-to-face recruitment through non-partner agencies and settings (types of partner agency and settings are described above). Providers will approach clients who identify with one of the ethnic groups included in the study or self identify as a lesbian/bisexual or transgender. The provider will give their client a flier for the study and will say:

*The Health Department is conducting a research project that is trying to understand how to better meet the needs of women who are experiencing domestic violence. They would like to talk with women who have experienced domestic violence in an intimate relationship--either physical, sexual or emotional abuse. This flier explains the study and has a contact number you can call if you are interested in participating. Feel free to take one of these flyers if it is safe for you to do so. The safety of potential participants is of the utmost importance. Please do not volunteer to participate in the research project if doing so could put you or other participants at risk. It is entirely up to you whether or not you decide to participate. Either way, it will not affect your relationship with (the agency introducing the study) or the Seattle King County Department of Public Health. If you are interested, please call the number on this flyer and the study staff will tell you if you qualify for the study.

Protocol 4

Flyers will be posted in communal locations at the Kent Regional Justice Center. The flyer (Appendix H) will invite those interested in the project to contact the study representative from the SIHB either by phone or in-person, who will screen for eligibility. The study representative will screen potential participants on the phone or in-person (see screening protocol, Appendix I). If screening questions confirm eligibility, the participant will be invited to her choice of a focus group or interview.
Appendix D
Screening Protocol: Ethnic Communities:
Domestic Violence Focus Group/Interview Project

When a potential participant contacts the study we will administer the following screening tool:

Questions:
Thank you for calling the Women’s Health Study at the Seattle-King County Public Health Department and the School of Public Health, Health Services Division of the University of WA. We are interested in talking to women who have experienced violence or abuse in relationships with their partners or husbands and learning about their experiences getting help. In order to figure out if you are appropriate for this study, I’d like to ask you a few questions. I recognize that this may be difficult to talk about but I need to ask you some very personal things about abuse and violence in your present or past relationships. You are free not to answer any questions you do not wish to answer.

Can we continue?

If you do not end up participating in the study we will not keep the answers to your questions on file. They will be destroyed.

First of all, are you in a safe place right now? Is it OK for you to talk about your relationship?

[If not safe, discuss when she could call back when she will be safe.]

Identification as an ethnic minority
1. Ask the woman to identify her ethnic background in an appropriate way. Examples:
   - How do you identify your ethnicity?
   - Where are you from?
   - What is your cultural background?
   - What is your race?
   - What is your ethnic background?

Identification of domestic violence
2. Are you 18 years of age or older? If no, let prospective participant know that she needs to be 18 or older in order to participate. Thank her for her time, offer her resources and hang-up.

3. Have you ever been in a relationship where your partner threatened you with or hurt you physically, sexually or emotionally?
4. Has your partner/ex-partner ever shouted, swore or cursed, called names, put the other person down, ridiculed identity, insulted, lied or otherwise hurt emotionally.

10/16/00
5. Has your partner/ex-partner ever insisted you give up friends/family, or made it difficult for you to have friends and family, taken your keys to keep you from leaving, taken your money or checkbook, controlled your use of money, locked you out of house, not allowed you to leave the house, threatened you with deportation, or not allowed you to learn English.

6. Has your partner/ex-partner ever pushed, grabbed or carried you against your will, spit, bit, scratched, punched, kicked, hit, forced sex or otherwise hurt you physically.

   If yes to any of the above, caller is eligible to participate. Proceed with screening.

   If no to all of the above, say the following:

   Thank you calling the study and participating in this short interview. Because we are interested in hearing from women who have experienced domestic violence, we will not need your participation. We appreciate your time.

**When relationship occurred**

7. How long ago was the relationship or are you still in it?

**Explain the study to participant:**

This research study is trying to understand how we better meet the needs of women who are experiencing violence or abuse in intimate relationships. The study will involve participating in either a two-hour interview or a 1½ hour focus group discussion with other women of your ethnicity. You may choose whether to talk to the researcher one-on-one or in a group setting. Interviews and focus groups will be audio-taped. Please be aware that if you decide to participate in a focus group there is a possibility that you may know one or more participants. This may be a safety risk to you.

It is entirely up to you whether or not you choose to participate in the study. Your decision will not in any way affect your relationship with the Seattle-King County Department of Public Health. We will reimburse participants $35.00 for their time and will assist with childcare and transportation if necessary.

8. Are you interested in participating in the study?

   If yes, continue with remainder of questions. If no, thank her for her time, offer her resources and hang-up.

**Safety issues/risk for participation**

9. This subject matter can be very difficult. You may feel uncomfortable talking about these issues with a researcher. We want to make sure you understand that this is a research project, not a counseling session. Do you feel prepared to discuss your experiences with researchers? If yes, continue. If no say the following:

   This research project will be going on through September. If you feel ready to participate a later date you may call back. Thank you for your time. Would you like to
know about resources that can help women who have experienced domestic violence?

If no, thank her, say good-bye and hang up. If yes, give her the phone number for either ReWA (721-0243), E. Cherry YWCA (568-7845), Consejo (461-4880), the Seattle Indian Health Board (324-9360 x2291) or AABL (568-7777).

10. Is it safe for you to attend a focus group or interview?

11. Is your partner currently stalking you, or has he recently threatened to kill you?

If woman says that it is not safe for her to attend a focus group or interview, or indicates lethality factors, discuss safety planning and offer her phone numbers of DV agencies that help women who are in unsafe situations. Let her know we must consider the safety of other participants, and that we are concerned for her safety and we strongly recommend she access services and that at this time we can not accommodate her participation in the study.

12. How will you explain to your partner where you are at the time of the interview/focus group if this is necessary?

Discuss a plausible cover story that participant can tell her partner and her children (if applicable).

13. Would you prefer to participate in a focus group of women like yourself or in an individual interview?

14. Have you ever received services from (agency serving her ethnic group)?

If she has received services from the agency, schedule her into focus group being facilitated by an alternate. If not, schedule her into agency-run focus group.

If the participant opts for a focus group, schedule her into a focus group, tell her the time and location and let her know that on-site childcare will be provided. Ask her if she intends to bring any of her children with her (record # of children). Ask her if she thinks her child will be able to participate cooperatively in a 2-hour childcare group. If no, ask her if she can leave her child with a friend or a relative. Otherwise, we will not be able to accommodate her participation at this time. Ask her if she will have any difficulty getting to and from the focus group. If so, let her know that the study will reimburse her afterwards for transportation costs up to $XX.

If the participant opts for an individual interview schedule a convenient and safe time and location.

15. Read following statement on safety and confidentiality

Because domestic violence is a serious threat to the health and safety of women, your safety and the safety of other participants is of utmost importance to us. As a participant in the study we are relying on you to help us ensure your safety and the safety of others. We ask that you keep the topic of the study confidential from everyone including children and that you do not disclose the location of focus groups to anyone. You will also be asked to promise not to discuss with others what
you heard in focus groups. Your participation in this study will be confidential. You will not need to use your real name or disclose information that could put you at risk at any time. Please be aware that we ask that you not use alcohol or drugs for at least 24 hours before your focus group or interview. We will reimburse you $35.00 for your time.

Would it be safe for us to make a reminder call to you as the date of your scheduled focus group/interview approaches?

If so, are there specific times that we SHOULDN'T call you?

IF OK TO CALL. What is your phone number? ____________

16. We look forward to seeing you on X date. If you find you will not be able to attend, please call me at this number. If you have friends who might like to participate please have them call the study phone number. If you have any questions about the study, please call Kirsten Senturia at 205-0562.
Appendix E
Screening Protocol: Lesbian/Bisexual/Transgender
Domestic Violence Focus Group/Interview Project

When a potential participant contacts the study we will administer the following screening tool:

Questions:

Thank you for calling the Women's Health Study at the Seattle-King County Public Health Department and the School of Public Health, Health Services Division of the University of WA. We are interested in talking to women who have experienced violence or abuse in relationships with their partners and learning about their experiences getting help. In order to figure out if you are appropriate for this study, I'd like to ask you a few questions. I recognize that this may be difficult to talk about but I need to ask you some very personal things about abuse and violence in your present or past relationships. You are free not to answer any questions you do not wish to answer.

Can we continue?

If you do not end up participating in the study we will not keep the answers to your questions on file. They will be destroyed.

First of all, are you in a safe place right now? Is it OK for you to talk about your relationship?

[If not safe, discuss when she could call back when she will be safe.]

Identification as lesbian or bisexual
1. Do you identify yourself as lesbian, bisexual or transgender?

Identification of domestic violence
2. Are you 18 years of age or older? If no, let prospective participant know that she needs to be 18 or older in order to participate. Thank her for her time, offer her resources and hang-up.

3. Have you ever been in a relationship where your partner threatened you with or hurt you physically, sexually or emotionally?
   Please tell me if you or your partner/ex-partner have done to each other any of the following things.

4. Shouted, swore or cursed, called names, put the other person down, ridiculed identity, insulted, lied or otherwise hurt emotionally.

5. Insisted the other person give up friends/family, or made it difficult to have friends and family, taken keys of property to keep from leaving, taken money or checkbook, controlled the use of money, locked out of house, or not allowed to leave the house.

10/16/00
6. Pushed, grabbed or carried you against your will, spit, bit, scratched, punched, kicked, hit, forced sex or otherwise hurt physically.

   If yes to any of the above, caller is eligible to participate. Proceed with screening.

   If no to all of the above, say the following:

   Thank you calling the study and participating in this short interview. Because we are interested in hearing from women who have experienced domestic violence, we will not need your participation. We appreciate your time.

When relationship occurred
7. How long ago was the relationship or are you still in it?

Explain the study to participant:

This research study is trying to understand how we better meet the needs of women who are experiencing violence or abuse in intimate relationships. The study will involve participating in either a two-hour interview or a 1½-hour focus group discussion with other lesbian, bisexual or transgender women. You may choose whether to talk to the researcher one-on-one or in a group setting. Interviews and focus groups will be audio-taped. Please be aware that if you decide to participate in a focus group there is a possibility that you may know one or more participants. This may be a safety risk to you.

It is entirely up to you whether or not you choose to participate in the study. Your decision will not in any way affect your relationship with the Seattle-King County Department of Public Health. We will reimburse participants $35.00 for their time and will assist with childcare and transportation if necessary.

Are you interested in participating in the study?

   If yes, continue with remainder of questions. If no, thank her for her time and hang-up.

Safety issues/risk for participation
8. This subject matter can be very difficult. You may feel uncomfortable talking about these issues with a researcher. We want to make sure you understand that this is a research project, not a counseling session. Do you feel prepared to discuss your experiences with researchers? If yes, continue. If no say the following:

   This research project will be going on through September. If you feel ready to participate a later date you may call back. Thank you for your time. Would you like to know about resources that can help women who have experienced domestic violence? If no, thank her, say good-bye and hang up. If yes, give her the phone number for AABL (568-7777).

9. Is it safe for you to attend a focus group or interview?

10/16/00
10. Is your partner currently stalking you, or has she/he recently threatened to kill you?

   *If woman says that it is not safe for her to attend a focus group or interview, or indicates lethality factors, discuss safety planning and offer her phone numbers of DV agencies that help women who are in unsafe situations. Let her know we must consider the safety of other participants, and that we are concerned for her safety and we strongly recommend she access services and that at this time we can not accommodate her participation in the study.*

11. How will you explain to your partner where you are at the time of the interview/focus group if this is necessary?

   *Discuss a plausible cover story that participant can tell her partner and her children (if applicable).*

12. Would you prefer to participate in a focus group of women like yourself or in an individual interview?

13. Have you ever received services from AABL?

   *If she has received services from the agency, schedule her into focus group/interview being facilitated by an alternate. If not, schedule her into agency-run focus group/interview.*

   *If the participant opts for a focus group, schedule her into a focus group, tell her the time and location and let her know that on-site childcare will be provided. Ask her if she intends to bring any of her children with her (record # of children). Ask her if she thinks her child will be able to participate cooperatively in a 2-hour childcare group. If no, ask her if she can leave her child with a friend or a relative. Otherwise, we will not be able to accommodate her participation at this time. Ask her if she will have any difficulty getting to and from the focus group. If so, let her know that the study will reimburse her afterwards for transportation costs up to $XXX.*

   *If the participant opts for an individual interview schedule a convenient and safe time and location.*

14. Read following statement on safety and confidentiality

   *Because domestic violence is a serious threat to the health and safety of women, your safety and the safety of other participants is of utmost importance to us. As a participant in the study we are relying on you to help us ensure your safety and the safety of others. We ask that you keep the topic of the study confidential from everyone including children and that you do not disclose the location of focus groups to anyone. You will also be asked to promise not to discuss with others what you heard in focus groups. Your participation in this study will be confidential. You will not need to use your real name or disclose information that could put you at risk at any time. Please be aware that we ask that you not use alcohol or drugs for at least 24 hours before your focus group or interview. We will reimburse you $35.00 for your time.*

   10/16/00
Would it be safe for us to make a reminder call to you as the date of your scheduled focus group/interview approaches?

If so, are there specific times that we SHOULDN’T call you?

*IF OK TO CALL.* What is your phone number?___________

15. We look forward to seeing you on X date. If you find you will not be able to attend, please call me at this number. If you have friends who might like to participate please have them call the study phone number. If you have any questions about the study, please call Kirsten Senturia at 205-0562.
### Appendix F

#### Analysis code book

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<th>Definition</th>
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<td>What ethnic group or LBT does respondent represent?</td>
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<td>How aware is the community of DV?</td>
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<td>What are barriers within the community to talking about DV?</td>
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<td>How has awareness changed based on length in the USA?</td>
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<td>Examples of what abuse looks like in this community in US</td>
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<td>Examples of what abuse looks like in country of origin</td>
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<td>What did women FEEL as reactions to being abused?</td>
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<td>62</td>
<td>Description</td>
</tr>
<tr>
<td>63</td>
<td>Availability</td>
</tr>
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<td>64</td>
<td>Access</td>
</tr>
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<td>65</td>
<td>Who provided the help to fill the need—family, friends, agencies?</td>
</tr>
<tr>
<td>71</td>
<td>Services</td>
</tr>
<tr>
<td>72</td>
<td>How did you find these services?</td>
</tr>
<tr>
<td>73</td>
<td>Awareness</td>
</tr>
<tr>
<td>74</td>
<td>Have there been problems?</td>
</tr>
<tr>
<td>75</td>
<td>Services that worked well</td>
</tr>
<tr>
<td>76</td>
<td>Services that didn’t work</td>
</tr>
<tr>
<td>77</td>
<td>Importance of some services</td>
</tr>
<tr>
<td>78</td>
<td>Influence of language barriers</td>
</tr>
<tr>
<td>79</td>
<td>Service issues particular to women with children</td>
</tr>
<tr>
<td>80</td>
<td>Service issues particular to women with teens</td>
</tr>
<tr>
<td>81</td>
<td>How can we improve DV outreach to your community?</td>
</tr>
<tr>
<td>82</td>
<td>How can we prevent DV in your community?</td>
</tr>
<tr>
<td>83</td>
<td>Traits of batterers e.g. needs, history</td>
</tr>
<tr>
<td>84</td>
<td>Influence of alcohol or drugs in incidence or experience of DV</td>
</tr>
<tr>
<td>(13)</td>
<td>Gender-based violence &amp; abuse</td>
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<tr>
<td>(14)</td>
<td>Small community &amp; children</td>
</tr>
<tr>
<td>(15)</td>
<td>What should we do to help?</td>
</tr>
<tr>
<td>(16)</td>
<td>Relations with the court</td>
</tr>
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<td>(18)</td>
<td>Those you’d trust</td>
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<td>(19)</td>
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<td>(20)</td>
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</tbody>
</table>
Appendix G
Short Demographic Survey:
DV Focus Group/Interview Project

1. What is your age?
2. What is your ethnicity?
3. Have you ever received services for domestic violence?
   a. What kind?
   b. From whom?
   c. How long ago was the relationship in which you experienced physical, emotional, or sexual abuse?
   d. From whom?
   e. What is your family’s approximate yearly income? (Circle income range)

   $0-$9,999
   $10,000-$14,999
   $15,000-$19,999
   $20,000-$29,999
   $30,000-$39,999
   $40,000-$49,999
   $50,000-$74,999
   $75,000-$99,999
   $100,000+