

California State University, San Bernardino

CSUSB ScholarWorks

Theses Digitization Project

John M. Pfau Library

2007

Intimate partner violence among Latina women: In their own words

Sarah Anne Yeung

Yvonne Leticia Quesada

Follow this and additional works at: <https://scholarworks.lib.csusb.edu/etd-project>



Part of the [Domestic and Intimate Partner Violence Commons](#), [Race and Ethnicity Commons](#), and the [Social Work Commons](#)

Recommended Citation

Yeung, Sarah Anne and Quesada, Yvonne Leticia, "Intimate partner violence among Latina women: In their own words" (2007). *Theses Digitization Project*. 3116.

<https://scholarworks.lib.csusb.edu/etd-project/3116>

This Project is brought to you for free and open access by the John M. Pfau Library at CSUSB ScholarWorks. It has been accepted for inclusion in Theses Digitization Project by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

INTIMATE PARTNER VIOLENCE AMONG LATINA WOMEN:
IN THEIR OWN WORDS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work


by
Sarah Anne Yeung
Yvonne Leticia Quesada
June 2007

INTIMATE PARTNER VIOLENCE AMONG LATINA WOMEN:
IN THEIR OWN WORDS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

by
Sarah Anne Yeung
Yvonne Leticia Quesada
June 2007

Approved by:



Dr. Herb Shon, Faculty Supervisor
Social Work

05/16/07
Date



Amanda Turek, Community Outreach and
Development Manager YWCA/WINGS



Dr. Rosemary McCaslin,
M.S.W. Research Coordinator

ABSTRACT

Intimate Partner Violence (IPV) is a social problem that affects men and women in all ethnicities, socio-economic classes, sexual orientations, and social classes in American society. This research project focused on understanding the diverse experiences among Latina women experiencing IPV who reside in Los Angeles County. The purpose of this study was to develop a deeper understanding of the experiences of Latina women in IPV relationships. This study used a qualitative method because of the sensitivity of IPV and the richness of the data that will be obtained. This method allowed for an in-depth face-to-face analysis and a comprehensive understanding of the experiences Latina women have with IPV relationships. The study was conducted at Young Women's Christian Association-Women In Need Growing Stronger (YWCA-WINGS). The benefit from this research is an increased sensitivity for the topic of IPV, knowledge of the services and interventions needed, and a better understanding of the experiences of Latina women involved in IPV relationships.

ACKNOWLEDGMENTS

We would like to acknowledge the help and support given to us by several key people throughout the duration of this project. First of all, we would like to thank our faculty advisor, Dr. Herb Shon, PhD. We appreciate his quick response time, constant encouragement, and dedication to our project. Secondly, we could not have completed this project without the help of Amanda Turek, Community Outreach and Development Manager, and the staff at YWCA-WINGS. Amanda supported this project from the outset and was instrumental in scheduling interviews, helping gain access to the support groups and outreach center, and promoting this project. Thirdly, we would like to acknowledge Dr. Tom Davis, PhD, for his excellent guidance on the formulation of this project and the revision of our first three chapters. Lastly, we appreciate the support of our families. They have loved and encouraged us each step of the way.

DEDICATION

We would like to dedicate this project to all the victims and survivors of Intimate Partner Violence, especially the women who participated in this research study. These women are among the bravest that we have ever met and we truly appreciate their openness and willingness to share their lives and experiences with us.

¡Si se puede!

TABLE OF CONTENTS

ABSTRACT iii

ACKNOWLEDGMENTS iv

LIST OF TABLES vii

CHAPTER ONE: INTRODUCTION

 Problem Statement 1

 Purpose of the Study 7

 Significance of the Project for Social Work 10

CHAPTER TWO: LITERATURE REVIEW

 Introduction 13

 Theoretical Orientation 13

 Culture/Risk Factors 16

 Intimate Partner Violence Effects 19

 Prevention of Intimate Partner Violence 21

 Summary 24

CHAPTER THREE: METHODS

 Introduction 25

 Study Design 25

 Sampling 26

 Data Collection and Instruments 28

 Procedures 30

 Protection of Human Subjects 31

 Data Analysis 33

 Summary 33

CHAPTER FOUR: RESULTS

Introduction 34
Presentation of the Findings 34
Awareness of Violence 38
Informal Support 42
Family Support 44
Family History of Intimate Partner Violence 46
Utilization of Social Service Organizations 48

CHAPTER FIVE: DISCUSSION

Introduction 52
Discussion 52
Limitations 63
Recommendations for Social Work Practice,
Policy and Research 66
Conclusions 68

APPENDIX A: QUESTIONNAIRE 70

APPENDIX B: INFORMED CONSENT 75

APPENDIX C: DEBRIEFING STATEMENT 78

APPENDIX D: FLYER 81

APPENDIX E: RESOURCE LIST 84

APPENDIX F: AGENCY APPROVAL LETTER 87

REFERENCES 89

ASSIGNED RESPONSIBILITIES PAGE 96

LIST OF TABLES

Table 1. Demographic Characteristics of Participants	35
Table 2. Awareness of Violence	39
Table 3. Informal Support	43
Table 4. Family Support	45
Table 5. Family History of Intimate Partner Violence	47
Table 6. Utilization of Social Service Organizations	49

CHAPTER ONE

INTRODUCTION

The purpose of this research project was to develop a deeper understanding of the experiences of Latina women in intimate partner violence relationships. This chapter will (a) define intimate partner violence, (b) describe, from a micro, macro, and policy perspective, the social problem of Latinas that are involved in abusive relationships, (c) state the purpose of the study, and (d) address the significance of this research project to social work practice.

Problem Statement

Intimate Partner Violence (IPV) is a social problem that affects both men and women in all ethnicities, socio-economic levels, sexual orientations, and social classes in American society. It is important to define IPV in order to understand the nature of this social problem. IPV refers to behavior that produces physical, emotional, psychological, and/or financial harm against a spouse or a partner (Frias & Angel, 2005; Gelles, 2000). This includes threats, beating, destruction of personal belongings, and threats against other family members,

pets or close friends. It also includes the intention to harm (Gelles, 2000). Another important aspect of IPV is that of partner violence. Frias and Angel (2005) define partner violence as "acts of abuse between two adults who are intimates, regardless of their marital status, living arrangements, or sexual orientation" (p. 552). IPV, in this research project, was defined as anything that produces actual harm, or the intent of physical, emotional, psychological, and/or financial harm between two adults who are intimate.

IPV is pervasive in society, and among the people that social workers serve. It is estimated that about 8 million women are victims of IPV every year (Robertiello, 2006). The dynamics and well being of the family are compromised in families where there is IPV. Robertiello (2006) notes that children who grow up in homes with abusive parents have a greater likelihood of being abusive towards someone else or being a victim themselves. The same study notes higher levels of Post Traumatic Stress Disorder (PTSD) symptoms in children living in violent homes (Robertiello, 2006).

The statistics, however, show that IPV affects more women than men. Data from the U.S. National Survey of

Families and Households showed that 73% female respondents and 27% male respondents were injured as a result of IPV (McCloskey & Grigsby, 2005). Nationally, women are abused by men in 95% of reported IPV cases (Frias & Angel, 2005). Studies estimate that between two million and six million women are abused each year by an intimate partner (Gelles, 2000). This data show that while men can be victims of domestic violence, it happens less frequently than for women. From the statistics, it is clear that while IPV affects both men and women, women are especially vulnerable.

The solutions to IPV, that have been researched, include both prevention and intervention. Prevention work focuses on education before abuse occurs, while intervention is centered on helping victims access resources. An important component of prevention is educating both men and women to take threats from intimate partners seriously and to develop safety plans before any violence occurs (Campbell, 2004; Tjaden & Thoennes, 2000). The recommendations from the National Violence Against Women Survey included working with the criminal justice system in increasing crime prevention programs that target IPV (Tjaden & Thoennes, 2000). For

intervention to occur, victims need to know where to go for help. According to the literature, two main areas where women in IPV situations turn are the healthcare system and IPV shelters or related social services. Both men and women may access the healthcare system for issues related to IPV or for other health needs (Campbell, 2004). Studies have shown that by increasing screening for IPV when men and women access the healthcare system, there is a greater likelihood of providing support and referrals for services (Campbell, 2004; Belknap & Sayeed, 2002). Another area that is a main focus for IPV intervention is the shelter system. According to Campbell (2004), women who accessed services through an IPV shelter or advocacy system were less likely to be the victims of murder or attempted murder. Shelters can also provide counseling services, crisis intervention, and access to legal and other community resources (Bennett, Riger, Schewe, Howard, & Wasco, 2004). These interventions provide support and assistance to victims of IPV and their families.

This research project focused specifically on understanding the diverse experiences among Latina women experiencing IPV who reside in Los Angeles County.

Nationally, Latinos have the highest rates of IPV compared with other ethnic groups (Kasturirangan & Williams, 2003). According to data from the California Women's Health Survey, about 6% of women in California, from all ethnic groups, suffer physical injuries yearly that are attributed to IPV (Lund, 2002). Yet, the rate of Latinas reporting IPV is 8.3% (Lund, 2002). Latinas also may not seek services as readily as white victims of IPV. Referring to data from the same survey, 20.4% of white survivors sought services from domestic violence programs while only 11.7% of non-whites, including Latinas, did (Kimerling & Baumrind, 2005). This is a problem.

According to the literature, the reasons for this disparity could include the lack of culturally sensitive services or services in the primary language of the recipient, the lack of outreach and education to the non-white population, immigration status, and feelings of powerlessness (Ramos & Carlson, 2004). This research project aimed to understand both the barriers and strengths of Latina women in IPV situations.

On a micro level, social workers that work with IPV victims and survivors provide services such as crisis intervention, counseling, and crisis hotline services

(Bennett et al., 2004). When working with the Latina population specifically, barriers to services include a lack of services in the primary language, cultural expectations of their roles as wives and mothers, and fear among undocumented women that they will be discovered and deported (Ramos & Carlson, 2004; Belknap & Sayeed, 2002). As social workers and service providers understand these barriers and needs of Latina women, they are better able to provide bilingual and bicultural services, assure women that they are safe from deportation, and educate them about their legal rights.

On a macro level, social workers provide advocacy services, and plan community outreach and education programs. Advocacy has been shown to be an effective strategy in working with survivors and victims of IPV (Bennett et al., 2004). Advocates educate IPV survivors about the legal system, and assist them in navigating its complexities (Bennett et al., 2004). Community outreach programs include educating communities about services that are offered so that IPV victims can access services (Campbell, 2004).

The most comprehensive national policy dealing with IPV is the Violence Against Women Act (VAWA), which was

enacted as federal legislation in 1994. The purpose of the VAWA is to improve law enforcement and to provide funding for interventions and services for IPV victims (Cho & Wilke, 2005). At the state level, starting in the 1970s and 1980s, many police departments across the country operated a mandatory arrest policy for IPV offenders (White, Goldkamp, & Campbell, 2005). Recently, there has been an effort to combine mandatory arrest with comprehensive services to the victims of IPV (White et al, 2005). Because of the VAWA legislation and the changing policies at police departments at the state level, the focus has shifted to providing services to the victims of IPV and justice for IPV offenders, instead of concentrating on mandatory arrest (White et al, 2005).

Purpose of the Study

The purpose of this study was to examine the experiences of Latina women in IPV relationships. Latina women is a term that includes women from Central America, South America, and the Caribbean (Kasturirangan & Williams, 2003). People of Mexican background make up the largest subgroup with 66%; people with Puerto Rican heritage make up the second largest with 9%, followed by

people of Cuban descent with 4% (Kasturirangan & Williams, 2003). Latina women were chosen for this study because they consistently report the highest levels of IPV in the United States (Kasturirangan & Williams, 2003). Young Women's Christian Association-Women In Need Growing Stronger (YWCA-WINGS) is a program in Los Angeles County that works with victims and survivors of IPV. YWCA-WINGS provides emergency shelter, legal services, community outreach and education, a domestic violence 24-hour hotline, and a children's program. These programs target services to the Latino population with outreach services, support groups, and individual counseling in the clients' primary language, either Spanish or English (A. Turek, personal communication, October 6, 2006). Staff at YWCA-WINGS estimate that 74% of the IPV victims they serve are Latina women (A. Turek, personal communication, October 6, 2006). YWCA-WINGS agreed to allow the researchers to interview the women attending support groups and living in the shelter. The age range of the women that participated in the research project was between ages 22-53. Because of the high levels of Latina women that report IPV and that access IPV services, it was important to study their unique

experiences with one of the benefits being that agencies and individual providers will be better able design services to meet their needs.

This research project was qualitative and consisted of open-ended questions that left room for opinion and new ideas. The literature supports a qualitative research design because of the sensitivity of the topic and the exploratory nature of the research (Kasturirangan & Williams, 2003; Belknap & Sayeed, 2002). A qualitative study also let Latina women have a voice and tell their story, which adds to the richness of the data (Belknap & Sayeed, 2002). Grinnell and Unrau (2005) state that a qualitative research design "aims to answer research questions that provide you with a more comprehensive understanding of a social problem from an intensive study of a few people" (p. 85). The goal of this research was a comprehensive understanding of the experiences of Latina women in abusive relationships. The questions used supported this goal and included questions about cultural and societal views, experience with IPV, formal and informal support systems, and needs of Latina women in IPV situations (Kasturirangan & Williams, 2003; Belknap & Sayeed, 2002). The questions were taken from key themes

in the literature and were used to facilitate discussion on the specific experiences that the participants have with IPV.

Significance of the Project for Social Work

The findings of this study have the potential to change social work practice and the specific ways that IPV agencies provide services. These include an increased sensitivity for the topic, knowledge of the services and interventions needed, and a better understanding of the experiences of Latina women involved in IPV relationships (Belknap & Sayeed, 2000). Because of the focus on the Latino population, this study has the potential to increase the cultural sensitivity of service providers and allow them to integrate more cultural sensitivity into their practice with adults, children, and families. On the macro level, this study has the potential to influence ways that community programs deliver services and market to clients. A better understanding of the unique views of Latina women would help community programs be able to target the cultural needs of this population and provide culturally sensitive outreach services (Bennett et al., 2004). This study also has the

potential to impact policy development. In a study about the effects of VAWA on the criminal justice system, Cho and Wilke (2005) suggest there has been an emphasis on victim empowerment since VAWA was enacted. In developing future policies, it will be increasingly important to consider the empowerment needs of culturally diverse populations. This study could help with an understanding of the needs and views of Latina women.

This project will focus on three areas of the Social Work generalist model: establishing rapport, assessment, and evaluation. This study can help social workers in becoming more culturally sensitive to Latina women, which would assist them in the first step of rapport building both individually with Latina clients and in a predominately Latino community. In the same way, this study would aid in a culturally sensitive view of assessment, which could help providers in looking at the overall picture of the Latina woman or community. In evaluation, this study could be useful to help programs and individual providers evaluate whether their programs and services were meeting the needs of Latina women.

This study explored the following question: What are the experiences of Latina women in IPV relationships? As

shown in the literature, IPV is a serious social problem in American society today. It currently affects the Latino population disproportionately compared with other ethnic groups (Lund, 2002). The goal of this research project was to find out what Latina women in IPV relationships think and feel about their situation, in their own words. Thus, it has the potential to add to the body of knowledge about IPV and the specific affect it has on Latina women.

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter will examine four categories that are important in understanding the experiences of Latina women in intimate partner violence (IPV) relationships. First, it will look at the theoretical orientations guiding the literature on IPV. Second, it will examine the cultural and risk factors of becoming involved in IPV relationships that are specific to Latina women. Third, it will discuss the effects of being involved in IPV relationships. Fourth, it will look at prevention and intervention strategies that can help Latina women in IPV relationships. In some cases it is necessary to use literature that focuses on IPV in general because there is a paucity of literature about the specific experiences of Latina women in IPV relationships.

Theoretical Orientation

Two perspectives that drive the literature on IPV are feminist and social learning. This section will examine these theoretical orientations and how they will

guide this research project on the experience of Latina women in IPV relationships.

Feminist theory is used throughout the literature to address IPV among Latinas. This theory posits that men use violence against women to maintain their power and control (Zosky, 1999). The basis of this theory is a patriarchal society where men have the majority of the resources and aim to dominate women. This theory may help explain why women are disproportionate victims of IPV because it "recognizes the role of sexism, gender-based oppression, and patriarchy as reflections of the institutionalized system of male privilege that underlies violence toward women in intimate relationships" (Ramos & Carlson, 2004, pp. 239-240). This theory has been used extensively to explain IPV relationships, but it appears to be losing ground because of its socio-political focus (Pyles & Postmus, 2004). In a content analysis review of social work articles published between 1985 and 2000, Pyles and Postmus (2004) found that there was a decrease in theorizing about the causes of IPV from the feminist perspective. Instead, theories that focus on individual relationships and family structure, like social learning theory, are gaining momentum. Feminist theory is still

helpful to use in this research project because of the parallels to gender roles and cultural values inherent in Latino culture.

Two other theories that guide discussion about why violence occurs come from a social learning perspective. The first is the intergenerational transmission of violence theory. This theory holds that people that witness or experience violence as children are much more likely to experience violence in their relationships as adults, either as abusers or victims (Kwong, Bartholomew, Henderson, and Trinke, 2003; Markowitz, 2001). Markowitz (2001) used a sample of ex-offenders and compared it with the general population of the same community. His findings indicated that the ex-offenders were more likely to have experienced violence as children and therefore engage in more violence towards their spouse and children than the general public. Kwong et al. (2003) conducted a telephone survey of 1,249 adults. Their findings indicated that violence in the family of origin predicted future abuse towards children and spouses, or future victimization. Both of these studies indicate a strong relationship between experiencing violence as children and being violent or victims of violence as adults.

Another theory, from social learning perspective, that attempts to explain why people are victims of violence is learned helplessness. This theory states that children who experience or witness violence are more likely to be victimized as adults because they learn to withstand the abuse (Renner & Slack, 2006). Both of these theories, learned helplessness and intergenerational transmission of violence, underscore the importance of learning about the family of origin and history of the women that are interviewed.

Culture/Risk Factors

Latina women have different risk factors for becoming involved and staying in IPV relationships than women of other ethnicities. First, Latina women may be more at risk for IPV relationships because of cultural values. Second, low socio-economic status (SES) may also contribute to IPV among Latina women. Last, Latina women may be more at risk if they were victims of child abuse or witnessed violence in their family of origin.

Latina women may be more at risk for IPV relationships because of family values and gender roles inherent in Latino culture. One of the most important

values in Latino culture is familism (Vasquez, 1999; Kasturirangan & Williams, 2003). Familism is characterized by "strong identification with and attachment to members of nuclear and extended families, including strong feelings of loyalty, reciprocity, and solidarity among members of the same family" (Vasquez, 2003, p. 326). Families are considered to be important support systems, and family pride is cherished and protected (Vasquez, 2003; Kasturirangan & Williams, 2003). Gender roles are also an important aspect of Latino culture. Families generally raise boys and girls differently (Kasturirangan & Williams, 2003). As women, Latinas are expected to bear most of the responsibility for home making and leave decision-making to the men. They are also taught to put the home and well being of the family before themselves (Kasturirangan & Williams, 2003). Men, on the other hand, are socialized to be the head of household, the decision maker, and to maintain the family pride at all costs (Kasturirangan & Williams, 2003). The gender roles and family identity that Latino men and women are taught may have key roles in the development and risk of IPV relationships.

Low SES has also been shown to contribute to IPV relationships among Latinas. Women with low economic resources and economic status may be at an increased risk for abusive relationships (Pyles & Postmus, 2004; Sugihara & Warner, 2002). Sugihara and Warner (2002) studied gender differences among Mexican American men and women and found that low SES predicted violence among both men and women. Women and men with low SES reported being physically violent with their partner or spouse (Sugihara & Warner, 2002). A study by Frias and Angel (2005) compared risk factors for Latina women with low SES and found that women who were not working outside the home, were working part-time, or who were not married to their partners had higher levels of IPV. Low SES is an important risk factor when assessing for violence among Latinos.

Consistent with the intergenerational transmission of violence theory, Latinos who experience violence as children are more likely to live in a home with violence as adults. A study focusing on Mexican American women in IPV relationships found that there was a high number of child abuse in the homes of the women who were being battered (Vasquez, 1998). The same study also found that

about one-fourth of the women in the sample had siblings who were also involved in abusive relationships (Vasquez, 1998). It is important to learn about violence in the family of origin to be able to understand how it has contributed to the overall effects of IPV.

Intimate Partner Violence Effects

Women involved in IPV relationships often have a higher risk of physical and mental health issues related to the trauma and violence that they have experienced. About half of all women involved in IPV relationships are seriously injured, and intimate partners commit about 30% of all female homicides (Tjaden & Thoennes, 2000; Gorde, Helfrich, & Finlayson, 2004). The literature is not specific on how many Latina women are killed or injured by their partners, but there is no indication that Latinas are at higher or lower risk of injury or homicide.

Two of the more common mental health diagnoses associated with IPV include PTSD and depression. Ramos and Carlson (2004) looked at the mental health of IPV victims and found that recent emotional abuse contributed to depressive and anxiety symptoms. A retrospective study

of Latina patient charts at an interdisciplinary clinic revealed that 60% of the women had depressive symptoms at the time of their first visit (Fischer & Shelton, 2006). These symptoms included feeling sad or depressed, changes in sleep patterns, reduced or lack of energy, changes in appetite, feeling hopeless, and suicidal ideations. Some of the women also displayed PTSD symptoms including nightmares, being easily startled, and fear. Of the women with PTSD symptoms, all of them had been severely abused by their partner. Research shows that PTSD occurs in 55-74% of IPV victims (Woods, 2000; Gorde et al., 2004) Women, who experience severe levels of violence including being at risk of homicide by their partner, are especially vulnerable to PTSD (Woods, 2000).

One of the effects of these mental health symptoms is an impairment of the ability to perform routine life tasks effectively (Gorde et al., 2004). These tasks include managing a home and finances, managing stress, effective parenting skills, and seeking and maintaining adequate employment. Women with mental and physical health issues generally have a harder time with these routine tasks.

Prevention of Intimate Partner Violence

There are several protective factors that may help prevent IPV among women. They include social support, education about life skills, and characteristics that Latina women find helpful in a service provider.

One of the protective factors associated with helping women cope in IPV relationships is social support (Waldrop & Resick, 2004). Social support can be both formal and informal. Formal social support includes social service agencies, the criminal justice system, and professional staff working with IPV victims (Liang, Goodman, Tummala-Narra, & Weintraub, 2005). Informal social support includes friends and relatives who provide emotional, and/or material support (Liang et al., 2005). Social support can be a way for women to get their immediate emotional and financial needs met, and also a way for women to gain an accurate view of the stressors in their lives (Waldrop & Resick, 2004). Latina women may experience a lack of social support due to families being spread out in different countries or different states (Ramos & Carlson, 2004). Because of the emphasis of the family as the main avenue for social support, Latinas who do not have close family near them may have a harder time

getting the informal support that they need. Latinas may also have a harder time getting the formal support that they need because of language and cultural barriers (Belknap & Sayeed, 2002).

As stated in the previous section on mental health, many women involved in IPV relationships lack routine life skills in the areas of managing finances, seeking and maintaining employment, and managing stress (Gorde et al., 2004). Without these skills, they may be more dependent on the abuser, and unable to live on their own. According to Gorde et al. (2004), there are few social services that focus on helping women learn these routine life skills. In a survey of women participating in various programs at a comprehensive domestic violence agency, managing finances, and finding a safe and stable place to live were their priorities (Gorde et al., 2004). Learning these life skills in conjunction with crisis services, mental health counseling, and community resources could assist women in coping with their IPV relationships. In Latina women, specifically, immigration status and gender roles can lead to impairment in these routine life skills (Ramos & Carlson, 2004). Latina women may not be able to obtain high-paying, steady jobs, or

stable places to live because of their immigration status. Also, cultural norms that emphasize gender roles of placing Latinas in the home could prohibit them from obtaining employment in the first place (Ramos & Carlson, 2004).

Latina women have identified certain characteristics that would help them when talking to service providers about their experiences with IPV. Belknap and Sayeed (2002) conducted a qualitative study of Latina women and asked them questions about what inhibits them from openly discussing their IPV relationships. The main characteristics that would aid Latinas build trust and open up with their service provider about IPV are sincerely listening to life stories, asking questions that pertain to their lives, and helping connect them with community services (Belknap & Sayeed, 2002). One of the most interesting findings in this study was that their healthcare provider had asked none of the women interviewed about abuse, even though they had symptoms of abuse (both physical and emotional). This study indicates that there could be more effective prevention of IPV if there were routine screenings and if service providers

possessed the characteristics necessary that could build trust with their clients.

Summary

In summary, this literature review examined the following four points. First, it identified the theoretical orientations that guide this project. Second, it examined the culture and risk factors for Latina women in IPV relationships. Third, it discussed the effects of IPV on Latina women. Last, it looked at prevention and protective factors for women in IPV relationships. Missing from the literature on IPV is a qualitative study on the experiences of Latina women in IPV relationships. Much has been written about IPV and its effect on women in general, but because of a difference in culture, it is not adequate to assume that all women will have the same experiences with IPV. Latina women have unique culture and risk factors for becoming involved in IPV relationships. The aim of this research project was to shed light on these differences.

CHAPTER THREE

METHODS

Introduction

The purpose of this study was to develop a deeper understanding and knowledge about the experiences of Latina women with intimate partner violence (IPV) relationships. To accomplish this, a qualitative study was conducted. This chapter focuses on the methods that the researchers used in collecting the data. This chapter covers the following areas: (a) study design, (b) sampling, (c) data collection and instrument, (d) procedures, (e) protection of human subjects, (f) data analysis and (g) chapter summary.

Study Design

The purpose of this study was to develop a deeper understanding of the experiences of Latina women in IPV relationships. This study used a qualitative method. A qualitative method is supported in the literature because of the sensitivity of IPV and the richness of the data that was obtained (Belknap, & Sayeed, 2002; Kasturirangan, & Williams, 2003). This method allowed for an in-depth face-to-face analysis with the result that

the study is a comprehensive understanding of the experiences Latina women have with IPV relationships.

Interviews were conducted with open-ended questions designed to leave room for further discussion and exploration. The questions are covered in a subsequent section. The questions were designed as prompts to give the women room to share their personal experiences. These prompts also allowed the researchers to clarify and more deeply investigate the women's experiences. The interviews were conducted individually with one of the researchers. The researchers found that Latina women gave rich information about their experiences with IPV.

Sampling

The participants in this study were recruited from an existing IPV program within Los Angeles County, Young Women's Christian Association-Women In Need Growing Stronger (YWCA-WINGS). The participants were Latina women who are currently participating in either a Spanish-speaking support group or live in the Domestic Violence shelter. Flyers with the research study focus and requirements were posted two weeks prior to the

interviews at both the agency's outreach office and the shelter.

The women who met the criteria and voluntarily chose to participate in the study signed up during the presentations to the groups. The interviews took place during the week between 9:00 AM to 5:00 PM with participants that attend the Spanish and English support groups. The interviews took place in a private office behind closed doors. The interviews with the participants from the Domestic Violence shelter were held on Fridays and Mondays from 10:00 AM to 2:00 PM, in a private conference room behind closed doors at the shelter. The women who were interested at the shelter contacted their case manager to set up the interview time with the researcher. The researchers conducted the interviews at the outreach office and shelter because the women felt comfortable there. The interviews were conducted in the participant's preferred language. Both researchers are fluent in Spanish and English. The researchers found that both of these factors led to genuine answers and openness on the part of the participants.

The women that were interviewed are Latina, between the ages of 22-53, and have been or are currently

experiencing IPV in their relationships. The researchers recruited 33 women to participate in the survey. Of the 33 women who signed up to participate, 21 completed the interviews. The researchers collected the data during the month of February 2007.

The sampling method that was used is purposive sampling. This research study supports purposive sampling because the population that is being studied has specific characteristics, it is being conducted at one agency, and the researchers will only interview women that voluntarily participate from that agency (Grinnell & Unrau, 2005).

Data Collection and Instruments

The data that was collected was a comprehensive understanding of the experiences that Latina women have with IPV relationships. A questionnaire was used to collect this data. Because there is no standard instrument to collect the data for this particular population and social problem, questions were drawn from key themes in the literature. A pre-test was conducted on a Spanish-speaking Latina woman, in her late twenties who was an intimate partner violence survivor. The purpose

was to test the content validity of the questions on the instrument. The questions were then clarified throughout the pre-test interview. The pre-test indicated that the questions were clear and posed in non-threatening language.

The following questions and prompts were used to engage in a dialogue with the participants. The demographic questions provided a better understanding of the participant's background and family support. Demographic questions included: preferred language for interview, age, ethnic background, marital status, employment, number of years living in the United States, and family support. The demographic questions were also used to engage and build rapport with the participants before asking specific questions about their experiences with IPV. The questions that focused on the experiences of Latina women in IPV relationships were based, in part, on studies by Kasturirangan & Williams (2003) and Belknap & Sayeed (2002). The following five questions were the initial prompts to learn about the respondents' experiences with IPV: (1) When was the violence apparent to you? (2) Who do you talk to when you have problems with your partner? (3) What do you need from your family

as a survivor of domestic violence? (4) Has anyone in your family been a victim of domestic violence? (5) What has been helpful to you from social service organizations? The researchers asked further questions to clarify the responses to these questions.

There were several limitations with this study design and instrument. First, the questions on the instrument may not have captured the deepest experiences of participants. Second, the participants may not have answered the questions authentically due to social desirability. The participants may have answered the questions based on what they thought the researcher wanted to hear, and not what their experience has been. Third, many of the interviews were conducted in Spanish and translated into English after the interview took place. During the translations process, some of the meaning of the participants' experiences may have been lost.

Procedures

The researchers completed twenty-one interviews. The interviews took an average of fifty minutes each to complete. The interviews were personally conducted by one

of the researchers at the agency's outreach office or Domestic Violence shelter. The entire interview was conducted in the participants' preferred language. The researcher explained informed consent and the limits of confidentiality with suicidal ideation and/or intent, homicidal ideation and/or intent, and child and elder abuse. After the interviews were conducted each day, the researcher walked out of the outreach office or Domestic Violence Shelter with the data in a sealed envelope marked "confidential" and placed the data in a locked box. To ensure confidentiality, only the two researchers know where the data is secured and stored. Participants received a \$10.00 gift card for their time and effort after the interview was completed. The raw data will be kept under lock and key for five years after which it will be shredded. None of the interviews have identifying information on them as participants choose alias names which the researchers used throughout the interview and subsequent analysis.

Protection of Human Subjects

To ensure anonymity, the participants assigned themselves an alias name and marked an "X" for the

informed consent. The participants were free to end the interview when they wanted to, they did not have to answer any question they did not want to. Participants were able to withdraw from the study at any point. Participants were encouraged to stop the researcher at anytime if they felt uncomfortable or needed clarification. The consent form, debriefing statement, and resources were provided in the participant's preferred language to ensure that the participants understood the information given to them and also to provide clarity.

There was no deception used during the study. Participants were aware at all times of the purpose of the study, the reasons the particular questions were asked, and why the information was being gathered. If the participants experienced any discomfort during the interview, the interview was stopped. In case the participants experienced any psychological discomfort, all participants were provided a list of resources including crisis hotlines, referrals for counseling, and referrals to their case manager. This list was given to them after the interview was completed and was attached to the debriefing statement. The debriefing statement

consisted of the purpose of the study and gave names and department phone numbers of the researchers and research advisor. The debriefing statement also encouraged the participants to call the researchers or research advisor if there were any questions.

Data Analysis

This study used qualitative cross-table categories that have been extracted and recorded by hand. Such tables are common among qualitative research. Themes were analyzed for coding content and patterns. The constructs that emerged as reasons for IPV among Latina women included cultural, socioeconomic, and intergenerational factors.

Summary

This chapter covered the study design, sampling, data collection and instruments, procedures, protection of human subjects, and data analysis. Through conducting a qualitative study the researchers were able to gain a deep understanding of the experiences Latina women have with intimate partner violence relationships.

CHAPTER FOUR

RESULTS

Introduction

The sample consisted of twenty-one self-identified Latina women who have been or are currently experiencing intimate partner violence (IPV) in their relationships. This chapter will cover a) the demographic characteristics of the participants, b) participants' awareness of violence, c) participants' informal support, d) participants' family support, e) participants' family history of IPV, and f) their utilization of social service organizations.

Presentation of the Findings

The following are significant findings from the demographic characteristics of participants (see Table 1). The participants were all women between the ages of 22 and 53, with an average age of 33.7 years old. More than 3/4 of the women (n = 18) were self-identified as being Mexican, followed by a single participant (n = 1) for each of the following ethnic categories: Mexican-American, Hispanic-Guatemala, and Latina-Brazil. A little over 1/3 of the participants (38.1%) were

Table 1. Demographic Characteristics of Participants

Variable (N=21)	Frequency (n)	Percentage (%)
Interview Language		
Spanish	14	66.7
English	7	33.3
Age		
	Mean = 33.7	
20-25	3	14.3
26-30	3	14.3
31-40	12	57.1
41-55	3	14.3
Ethnic Background		
Mexican	18	85.7
Mexican-American	1	4.8
Hispanic-Guatemala	1	4.8
Latina-Brazil	1	4.8
Marital Status		
Married	8	38.1
Separated	5	23.8
Cohabiting	3	14.3
Divorced	2	9.5
Widowed	2	9.5
Single	1	4.8
Source of Income*		
Employment		
Full-time	3	14.3
Part-time	1	4.8
Supplemental Income		
CalWorks	6	28.6
Other	6	28.6
Child/Spousal Support	4	19.0
Husband/Partner Support	3	14.3
Unemployment	2	9.5
Social Security	2	9.5

Variable (N=21)	Frequency (n)	Percentage (%)
Years living in the U.S.		
Born in U.S.	5	23.8
Not born in the U.S.	16	76.2
	Mean = 15.3	
1-10	4	19.0
11-20	9	42.9
21-30	2	9.5
31-50	1	4.8
Family living near by		
Yes	16	76.2
No	5	23.8
Talks with Family		
Daily	8	38.2
Weekly	7	33.3
Monthly	2	9.5
Other	4	19.0
Sees Family		
Daily	5	23.8
Weekly	3	14.3
Monthly	5	23.8
Other	8	38.1

*Total number and percentage exceeds n = 21 and 100% due to multiple sources of income.

married; almost a quarter were separated (23.8%), and 14.3% were cohabiting. The remaining women in the sample were either divorced (9.5%), widowed (9.5%), or (4.8%) single. In addition, 2/3 of the participants (66.7%) completed the interview in their primary language of Spanish and 1/3 (33.3%) in English.

Of the participants, 17 out of 21 interviewed (81%) did not work and relied on income from various other sources. These included 28.6% being CalWorks participants, and 28.6% were in the process of receiving CalWorks or child/spousal support, had a savings account, lived with a family member, and 19% were receiving child/spousal support. Other sources of income included full-time employment (14.3%), husband/partner support (14.3%), unemployment (9.5%) or Social Security benefits (9.5%), and part-time employment (4.8%).

In regards to years living in the U.S., less than 1/4 (23.8%) of the participants were born in the U.S. and over 3/4 (76.2%) have been living in the U.S. between 3 and 34 years, with an average of 15.3 years. More than 3/4 (76.2%) of the participants had a family living near-by; more than 1/3 of the participants talked with their family daily (38.2%) or weekly (33.3%), while eight participants (38.1%) reported not seeing their family between 8 months to over 21 years. One of the eight reported seeing her family every three months, and ten of the participants reported seeing their family either daily (23.8%) or monthly (23.8%).

The participants were asked five questions related to their personal experience with IPV. To ensure confidentiality, alias names were chosen by each participant at the time of the interview and will be used to quote some of their responses to the questions that follow. The following findings were relevant to the specific IPV situations in which these women were involved.

Awareness of Violence

The first question asked by the interviewers was, "When was the violence apparent to you?" This question was designed to gain a better understanding of when the violence became apparent to the participant. The following are significant findings of the participants' awareness of IPV in their relationship (see Table 2). Although not prompted, almost all participants started their answer with a history of their experience with IPV. The type and onset of the violence became apparent to all of the participants only after attending the Spanish support groups or living at the Domestic Violence shelter at Young Women's Christian Association-Women In Need Growing Stronger (YWCA-WINGS). One participant, Maricela,

Table 2. Awareness of Violence

Question/Responses (N=21)	Frequency (n)	Percentage (%)
When was the violence apparent to you?*		
Education		
Spanish Support Group	17	81.0
Other (AA group, DCFS involvement, marriage counseling)	6	28.6
Domestic Violence Shelter	4	19.0
Television	2	9.5
Pamphlets	1	4.8
Years in abusive relationship** Mean=7.2		
1-10	14	66.7
11-20	3	14.3
Types of abuse		
Verbal	14	66.7
Physical	13	61.9
Emotional	13	61.9
Psychological	5	24.0
Childhood abuse	3	14.3
Sexual	2	9.5
Types of Control***		
Social interactions	7	33.3
Where they went	6	28.6
What they did	6	28.6
Parental responsibilities	5	23.8
Financial	4	19.0
Employment	4	19.0
Household chores	4	19.0
How they dressed	1	4.8
Types of Threats***		
Deportation	4	19.0
Suicide/Homicide	4	19.0
Taking children away	2	9.5
When abuse started		
While dating	12	57.1
Moved in together	4	19.0
First day/First month of marriage	3	14.3
Married for over 8 years	2	9.5

*More than one response is possible for this question.

**Four of the participants did not specify years of IPV.

***Total number and percentage exceeds n=21 and 100% due to more than one response is possible for this question.

stated, "*Si no me golpea no es abuso.*" ("If he doesn't beat me it's not abuse.").

Of the participants, 9 out of the 21 (43%) learned about abuse through pamphlets, television, Alcoholics Anonymous groups, Department of Child and Family Services (DCFS) involvement, and marriage counseling. More than half of the participants found it to be "*muy difícil*" ("very difficult") to go to an agency and share their lives with complete strangers. One of the participants, Maria, stated, "*Por vergüenza no dije nada pero abrí los ojos a la realidad, te escuchan y no te reprochan.*" ("Because I felt ashamed I didn't say anything, but I opened my eyes to the reality. They listen and they don't criticize you.").

Of the participants, 3 out of 21 (14.3%) stated that they had experienced a form of abuse in childhood by either their mother, father, or both. A little less than half (42.9%) of the participants stated, "*Pensaba que era normal.*" ("I thought it was normal.") when referring to the abuse in their relationships. Without any prompting, 19% stated that alcohol was always present during the abuse episodes. Of the 21 participants, 17 (81%) women remained in their abusive relationships between 1 to 20

years with an average of 7.2 years. Of the participants, 4 out of 21 (19%) did not specify how long the abuse occurred.

A common theme that emerged from the interviews was that the vast majority (81%) of the participants experienced more than one type of abuse over the course of their relationship. The different types of abuse identified were: verbal (66.7%), physical and emotional (61.9%), psychological (24%), and sexual (9.5%). Of the participants, 16 out of 21 (76.2%) stated that their partner used various forms of control and/or threats to instill fear in them to coerce them to remain in their abusive relationships. The issue of control most commonly involved finances (19%), employment (19%), social interactions (33.3%), where they went (28.6%), what they did (28.6%), how they dressed (4.8%), household chores (19%), and parental responsibilities (23.8%). The most common types of threats were of deportation (19%), taking children away (9.5%), homicide and/or suicide (19%).

The abuse started at various stages of these women's relationships. One participant, Wendy, stated, "*Era normal de una pareja es lo que yo pensaba.*" ("It was normal for a couple; that's what I thought."). Of the 21

participants, 12 (57.1%) stated that their abuse started when they were dating; four (19.0%) stated that the abuse started when they moved in together with their partner, and three (14.3%) stated that the abuse started between the first day to the first month of marriage. Of the 21 participants, 2 (9.5%) stated that the abuse started eight and twenty-one years into their marriage with their husband, with one participant, Maria, stating, "*Haga lo que te haga tu estas casada por toda la vida.*" ("Regardless of what he does to you you're married for life.").

Informal Support

The second question asked was, "Who do you talk to when you have problems with your partner?" This question was asked to have a better understanding of these women's support system during the time of the violence. The following are significant findings of the participants' use of their informal support system (see Table 3). Of the 21 participants, 2 had more than one source of support during their IPV, 7 (33.3%) stated that they were not allowed to have friends during the time of the violence, and 7(33.3%) stated that they had one to two

Table 3. Informal Support

Question/Responses (N=21)	Frequency (n)	Percentage (%)
Who do you talk to when you have problems with your partner?*		
No one	7	33.3
Friends	7	33.3
Family	7	33.3
Religion/Spirituality	2	9.5

*More than one response is possible for this question.

friends they could rely on to let them vent their feelings and supported them emotionally. One-third of the participants, (33.3%) stated that their support during the abuse was their family members, but some of these family members lived in Mexico, which made it difficult to communicate with them.

Two out of the 21 participants (9.5%) stated that during their abuse they turned to religion and spirituality for strength and courage to cope. One participant, Maricela, stated, "*Lo que mas quería es que me escucharan.*" ("What I really wanted was to be heard."). A common theme was that these women confided in someone who they could trust and relate to, and someone who would give them emotional strength.

Family Support

The third question asked was, "What do you need from your family as a survivor of domestic violence?" This question was asked to gain a deeper understanding of the participants' family support systems and what these participants needed as survivors. The following are significant findings of the participants' family support system (see Table 4).

Two-thirds of the participants (66.7%) stated that they felt supported by their families during and after the violence. The different forms of support, varying from family to family, were financial, emotional, moral, and psychological. Some of the participants stated that not all of their family members were supportive all the time, but rather support came from only a sibling or one parent.

More than 1/3 of the participants (38.1%) stated that they did not need anything from their families as a survivor of domestic violence. Five of the participants viewed their needs as a domestic violence survivor as something that they must now fulfill for themselves. One participant, Shannon, stated, "*Yo misma estoy llegando a lo que yo necesito para sobrevivir la violencia*

Table 4. Family Support

Question/Responses (N=21)	Frequency (n)	Percentage (%)
What do you need from your family as a survivor of domestic violence?*		
Nothing	8	38.1
Types of Support		
Financial	6	28.6
Emotional	6	28.6
Housing	3	14.3
Understanding	2	9.5
Clarifying question: Have you gotten the help you need?*		
No	7	33.3
Yes		
Financial	8	38.1
Emotional	8	38.1
Moral	2	9.5
Psychological	1	4.8

*More than one response is possible for this question.

domestica." ("I am starting to realize what I need in order to survive domestic violence."). Another participant, Yesenia, stated, "*Aliento y esperanza que si se puede salir adelante sola.*" ("Encouragement and hope that I can leave and move forward alone."). Of the 21 participants, 17(81%) stated that as a survivor of domestic violence they needed different forms of support. Those included financial, housing, understanding of participants' experience, and emotional support.

A further question was asked, "Have you gotten the help you need?" This question was asked to clarify if the participants had already received help and what type of help they received from their family support system (see Table 4). One-third of the participants (33.3%) stated that their families were not part of their support system for various reasons, including discord with parents, cultural expectations, parental unawareness of abuse, geographical location of family and/or placement in the foster care system. Of the 21 participants, 14 (66.7%) stated that they received various types of support from their family, and some of received more than one type of support. The types of support that the participants received were financial (38.1%), emotional (38.1%), moral (9.5%), and psychological (4.8%).

Family History of Intimate Partner Violence

The fourth question asked was, "Has anyone in your family been a victim of domestic violence?" This question was designed to understand the participants' early exposure to violence and its effect on them. The following are significant findings of the participants' family history of IPV (see Table 5).

Table 5. Family History of Intimate Partner Violence

Question/Responses (N=21)	Frequency (n)	Percentage (%)
Has anyone in your family been a victim of domestic violence?		
Yes*		
Parents	11	52.4
Sisters	7	33.3
Other (Child abuse, IPV in husband's family)	7	33.3
Cousins	2	9.5
Aunts	2	9.5
No	5	23.8

*More than response is possible for this question.

Of the 21 participants, 11 (52.4%) stated that there was domestic violence between their parents during their childhood and through part of their adolescence.

Participant, Gina, stated, "*No se habla de las cosas feas o problemas. Se mantienen tapado.*" ("You don't talk about ugly things or problems. They remain covered.").

Of the 21 participants, 11 (52.4%) stated that their sisters (33.3%), cousins (9.5%), and/or aunts (9.5%) were victims of domestic violence. Of the 21 participants, 23.8% reported that either their siblings or themselves were the victims of child abuse, and 9.5% stated that although no domestic violence was apparent in their own

family, it was so in their partner's/husband's family. Five (23.8%) of the participants had no history of domestic violence in their families. One participant, Marta, stated, "*Yo soy la primera y la ultima.*" ("I'm the first and the last.").

Utilization of Social Service Organizations

The fifth question asked was, "What has been helpful to you from social service organizations?" This question was designed to understand the participants' experience in utilizing social services. The following are significant findings of the participants' use of social service organizations (see Table 6).

The types of social service organizations that these participants have utilized are YWCA-WINGS (100%), welfare (28.6%), DCFS (14.3%), unemployment (9.5%), police department (4.8%), self-help mutual aid groups (Alcoholics Anonymous, Al Anon, Co-dependents Anonymous, Victims of Violent Crimes, and faith-based groups) (23.8%), legal system (4.8%), medical doctors (14.3%), other domestic violence shelters (9.5%), school districts (4.8%), and mental health services (14.3%).

Table 6. Utilization of Social Service Organizations

Question/Responses (N=21)	Frequency (n)	Percentage (%)
What has been helpful to you from social service organizations?*		
Organizations utilized		
YWCA-WINGS	21	100.0
Welfare	6	28.6
Self-help Mutual Aid groups (AA, Al Anon, CoDa, Victims of Violent Crimes, faith-based)	5	23.8
DCFS	3	14.3
Medical Doctors	3	14.3
Mental Health Services	3	14.3
Other Domestic Violence Shelters	2	9.5
Unemployment	2	9.5
Police Department	1	4.8
Legal System	1	4.8
School District	1	4.8
Help received		
Empowerment	10	47.6
Counseling	7	33.3
Financial assistance	6	28.6
Referrals	5	23.8
Legal assistance	4	19.0
Resources	2	9.5
Adult education classes	1	4.8
Barriers to Service		
Language	3	14.3
No Medical Insurance	2	9.5
Immigrant Status	2	9.5
Shelter Limitations	2	9.5
Clarifying question: Is there a different kind of help that they could give you?		
No	13	62.0
Yes		
Vocational training	2	9.5
Adult education classes	1	4.8
Bereavement program	1	4.8
Leadership skills	1	4.8
Childcare	1	4.8
Counseling for Children	1	4.8
Parenting Skills	1	4.8

*More than response is possible for this question.

The type of help that these participants received from these social service organizations included resources (9.5%), referrals (23.8%), counseling (33.3%), legal assistance (19%), financial assistance (28.6%), adult education (4.8%), and empowerment (47.6). Of the 21 participants, 10 (47.6%) stated that they felt a sense of empowerment after utilizing YWCA-WINGS, other domestic violence shelters, mental health services, and self-help mutual aid groups (faith-based). Although not part of the original question asked more than one-third talked about barriers to service. Therefore these responses have been included in the data of Table 6. Nine of 21 (43%) participants identified structural barriers to accessing needed services. For example, 3 of the 21 participants (14.3%) stated that there was a language barrier in locating a social service organization that could help them, and 5 of 21 (23.8%) reported that not having medical insurance and being an immigrant were barriers to accessing services. Two of the participants (9.5%) had a difficult time being admitted into a shelter because many shelters have a limit of how many children a mother can bring with her.

A further question was asked, "Is there a different kind of help that they could give you?" This question was asked to clarify if the participants needed any additional services that were not being offered from these social service organizations (see Table 6). Thirteen of the participants (62%) stated that they were satisfied with the services received and didn't perceive a need for additional services. Of the 21 participants, 8 (38.1%) stated that in addition to the services already offered, the participants felt that additional programs would enhance these social service organizations such as vocational training (9.5%), adult education classes (4.8%), bereavement programs (4.8%), teaching leadership skills (4.8%), providing childcare (4.8%), counseling for children (4.8%), and parenting skills (4.8%). Overall, the participants were very satisfied with the services they had received thus far. All of the participants stated that they hoped to encourage other women in violent relationships to get help and to let their voices be heard.

CHAPTER FIVE

DISCUSSION

Introduction

This chapter will present the findings of this research project. First, there will be a discussion of the themes that emerged through the qualitative interviews. Second, the study's limitations will be discussed. Third, the recommendations for social work practice, policy, and research will be presented. Fourth, the conclusions will be discussed.

Discussion

There was rich data and themes that emerged from the interviews. These can be grouped into six categories: (a) demographic characteristics, (b) awareness of violence, (c) informal support system, (d) family support, (e) family history of intimate partner violence, and (f) utilization of social service organizations.

The demographic questions were asked to obtain characteristics of the women and build rapport before asking the participants about their experiences with IPV. The demographic characteristics showed that the sample matched the sample that the researchers anticipated and

that some of the women showed risk factors and preventative factors consistent with the literature on IPV. The sample consisted of Latina women between the ages of 22-53. This matched the characteristics of the women initially targeted by the researchers. The questions about employment showed that the majority of the women were not working or working part time and that their income was from child or spousal support or government programs like CalWorks and Social Security. While the researchers did not ask about income level, it can be inferred from this data that the majority, if not all of the women, are considered low socio-economic status (SES). One of the risk factors for IPV mentioned in the literature is low SES. Latina women who are not working or working part-time and have low SES are at a greater risk for abusive relationships (Pyles & Postmus, 2004; Sugihara & Warner, 2002).

The final questions asked the women about how often they see and talk with their families. The researchers asked these questions to understand if the women had family close by and if they communicated with the family. According to the literature, a preventative factor for IPV is social support (Waldrop & Resick, 2004). Most of

the women talk with or see their families on a consistent basis, while a little more than a third had not seen their family for at least eight months. This could be explained because their families live far away or because their families have not been supportive. Question three of the interview asked the women to go into more depth about the way that their families contributed to their support system. The demographic questions gave the researchers a composite picture of the participants and also helped build rapport with the women prior to the open-ended questions about their experiences with IPV relationships.

The in depth interview about the participants' experiences with IPV consisted of five open-ended questions. Question one asked the participants when they became aware of the violence. As noted in Chapter 4, the majority of the women became aware that their relationship was categorized as "violent" after receiving information, in various ways, about IPV. The education received varied between media, written and verbal information from agencies serving domestic violence victims, other social service agencies, conversations with friends, and being investigated by the authorities.

These women became aware that their relationships were violent after they were explicitly told about the violence or learned about violence through written or visual information. It is safe to assume that no woman wants to be in an abusive relationship. Yet, the reason that these women may not have inherently understood their relationship to be abusive may be because of the gender roles and family values inherent in Latino culture. Families are considered to be support systems and family values are strongly upheld in Latino culture (Vasquez, 1999; Kasturirangan & Williams, 2003). Samantha's family did not think she should leave her partner just because he hit her. They told her, "He's your husband. How are you going to leave him?" The message that they sent was that her marriage to her husband was more important than her life or safety. Many of the women needed to be educated about violence and abuse because their culture and value system did not enable them to conceptualize that their relationships were violent or that there was anything maladaptive about their immediate families and their attitudes, beliefs and behaviors.

Question two asked about informal support systems with the question: "Who do you talk to when you have

problems with your partner?" The responses to the interviews showed that informal support systems varied. One-third of the participants stated that they did have friends that they could rely on and share their feelings with. According to Waldrop and Resick (2004), social support is key in helping women cope with IPV. It is unknown if these women sought help earlier or were better able to care for themselves and their children than women without social support. Some of the women that reported the most stable friendships met their friends in support groups or rehabilitation centers. Some of their friends were also in IPV situations and could relate to their experiences.

About one-third of the participants indicated that they did not have any friends they could rely on for social support. One of the main reasons given was that their partners kept them isolated from friends. They were unable to communicate with people and therefore felt very isolated and alone. Along with isolation imposed by their partners, Latina women tend to look to their families for support (Belknap & Sayeed, 2002). Some of the participants stated that they would turn to their families for support, but because their families live in

Mexico, these women are unable to count on them. This is consistent with the literature on Latino families (Ramos & Carlson, 2004). Some of the women did not have friends because they had been betrayed in their friendships. Samantha talked about a friend who had been a bad influence on her and re-introduced her to drugs. She now feels that she cannot trust or turn to anyone for support. Maria talked about how she confided in a friend about her abusive relationship. Her friend talked about it with other people and broke Maria's trust. She says that she has friends but cannot count on them because, "they tell my stuff." It is unclear why people broke confidence and told private things. Perhaps the participants chose friends, who like the abuser, took advantage of them. Perhaps the friends of the participants were so overwhelmed by the needs of the participants that they could not hold their information in and needed support themselves. Or perhaps, the friends of the participants thought that if they told other people, the abuse might stop.

Many of the participants gave ideas about the kind of support they need from friends. They look for people they can trust, who understand their situations, and can

give them emotional support. None of the participants said that they did not need people in their lives. Many of them did not have stable support, but all of them indicated the need for support.

Question three is related to question two and asked about how the participants felt about their families and whether they considered them to be a part of their support system. The majority of participants responded that their families had been a positive support to them during and after the violence and their families provided a variety of support. One implication of this finding is the appropriateness of involving families in treatment for IPV. While not all families were supportive, many of the participants found their families to be helpful to them in providing for their material and emotional needs. These families could be utilized to provide emotional support for survivors of IPV. They could also provide material support like rides to groups, financial assistance, or a safe place to live.

Some of the participants reported that their families were unable to be a part of their support system. One of the main reasons for this was a lack of family members living close by. Ramos and Carlson (2004)

caution that Latina women may not be able to include their families in their support systems because they live in different geographical locations. This was a main reason cited in the interviews.

Question four asked about a family history of violence. This question is related to the theory of intergenerational transmission of violence. This theory posits that people who witness violence as children are much more likely to tolerate violence in their relationships as adults, either as victims or abusers (Kwong, Bartholomew, Henderson, and Trinke, 2003; Markowitz, 2001). The researchers found that a significant portion of the respondents did have a family history of domestic violence. Some of the answers that the participants gave shed light on the reasons for intergenerational transmission of violence. Karina stated that she thought that the reason she stayed with her partner for so long was because she had seen her parents fight and be violent towards each other. Samantha said that she witnessed violence all her life, both IPV and community violence and thought it was "okay." Sofia said that as a child she learned, "*Tu vas a ir a que tu esposo te mande.*" ("You will go where your husband tells you

to.""). Her parents taught her that violence and control was normal through their actions and through the advice they gave her. These themes of violence as a normal part of life, parents being violent with each other, and parents telling their female children that their husbands had a right to control them were repeated throughout the interviews.

Many of the respondents also had a history of other forms of abuse and trauma, including sexual abuse, child abuse and neglect, and exposure to community violence, throughout their lives. This is consistent with literature on abuse and trauma (Cohen, Mannarino, Murray & Igelman, 2006; Saunders, 2003; Slep & O'Leary, 2001). According to Cohen, Mannarino, Murray, and Igelman (2006), people who experience abuse or trauma are more likely to experience multiple types of abuse or trauma. This also may explain why the majority of the participants considered their abusive relationships to be normal. Because they had grown up around violence and abuse and had personal experience with it, they were unable to recognize that their intimate adult relationships were abusive.

There was a small minority of participants whose first experience of abuse and trauma was their own abusive relationships. One participant, Tasha, who had never experienced abuse before, said that her partner was controlling at the beginning of the relationship. She conceptualized his control as love. She was flattered at first by how much he wanted to spend time with her, felt protected when he wanted to know who she was with and where she was going, and thought that his motivation was that he cared about her. It may be that because of their innocence to violence, these women were also trapped. Precisely because they had never experienced violence firsthand, had never been taught about it on the streets, and had never thought it could happen to them, they were unaware of the warning signs—like control and psychological abuse—that their partners gave them.

Question five dealt with the utilization of support services and asked what had been helpful about the support the participants had received from social service organizations. Two of the main ways that the agencies had helped the participants were through education and the group experience. The participants said that it was helpful to learn about what was normal in a relationship

and what wasn't normal. Along the same lines, many said that it was helpful to learn about different kinds of abuse. Some of the women commented that they didn't think their relationships were abusive because they thought their husbands had to hit them to categorize their relationships as abusive. It was enlightening for them to learn that there are many forms of abuse, not just physical violence.

For many of the participants, the group experience had been particularly valuable. They said that they felt that they could share things with the group that they had never told another person, that they knew they would not be judged, and that it helped to hear about others' experiences. For Marisol, the group experience helped her feel more confident about herself and her situation. She said that because of the groups, if she ever needs to leave her husband, or be on her own, "*Me siento segura, me siento preparada.*" ("I feel secure, I feel prepared.").

Some of the participants talked about barriers that they had encountered in accessing social services. These barriers included language, lack of medical insurance, immigrant status, and limited space at shelters. These

answers highlight the necessity of understanding the reasons why Latina women have a difficult time accessing services and finding solutions to these barriers.

Limitations

There were several limitations to this study.

Although the study was rich in data, there were only 21 participants and the results cannot be generalized to the entire Latina population. Each of the participants was receiving treatment for IPV which may have influenced their responses to the study's questions. For example, the findings about education may have been so prevalent because the participants were specifically educated about IPV through their treatment program. While the results of this study suggest recommendations for treatment and prevention, it is important to note the limitations of sample size and participant characteristics.

One of the main limitations in conducting the interviews was scheduling conflicts, including cancellations and no shows. Of the 33 women that committed to the interview, only 21 completed the interview. Several of the women did not show up to the scheduled interview. Several women arrived late resulting

in rescheduling interviews or having to wait various lengths of time before the interviews were conducted. Each of the women was given a reminder call the day before their scheduled interview. This helped ensure greater participation but there were still significant no shows.

The majority of reasons for not coming to the interviews were unknown as no further contact was made with the women. Most of the reasons for not coming to the interview or arriving late had nothing to do with the violence the women experienced in their relationships. The reasons included lack of transportation, the bus system running late, a last minute doctor's appointment for a child, and a friend needing help. However, one woman did not come to her scheduled interview because her husband did not want her leaving the house that day. She was not rescheduled for another interview. Many of the women also had difficulty scheduling their interviews because they needed to be home to cook or clean for their partners. Clearly, these women still were in the midst of controlling and possibly abusive relationships. All of these reasons speak to barriers that women have in getting help for IPV.

The women were told the limits of confidentiality at the beginning of each interview, including that the researchers would need to report specific references to child abuse. It is unclear whether this tainted the women's responses or caused them to use caution in answering any questions. One CPS report was indicated after the participant showed bruises to the researcher and disclosed that the children had been inside the home when the abuse occurred, although had not witnessed the abuse. Because of the confidential nature of the interviews, there were no known addresses, phone numbers, last name of the participants, or children's names. The report was not taken by CPS, and the participant was referred to her case manager and given a list of resources.

A final limitation was the ethnicities and positions of the researchers themselves. Both of the researchers are fluent in Spanish and were able to conduct the interviews in the preferred language of the participants: English or Spanish. Both of the researchers were born in the United States. One of the researchers is Latina and of Mexican origin and learned Spanish in her family of origin. The other researcher is Caucasian and spent three

years in a South American country immersed in the culture and language. It is unclear whether culture and ethnicity impacted the way that the participants related to the researchers, or how they answered the questions. There could also have been problems of interpreting and translating the interviews and questions. Both researchers noted that they needed to clarify the questions in Spanish much more often than in the English questions. This could have led to confusion on the part of the participants and may have skewed the data that was collected.

Recommendations for Social Work Practice, Policy and Research

There are several recommendations for social work practice, policy, and research based on the interviews in this project. First, it is clear that more research on Latina women, their experiences with IPV, and the interventions and prevention that will be helpful to them is needed. Latina women are at risk for IPV and have higher rates of IPV compared with other ethnic groups. They also have many cultural and structural barriers that need to be uncovered in order to increase access to services.

Second, because the majority of participants stated that education helped them understand the violence in their relationships, there needs to be more education and knowledge about IPV. Outreach would be helpful as so many women stated that they were aware of the violence in their relationship only after it was pointed out to them. Also, it is clear from the interviews that the women are learning key lessons about IPV, like the cycle of violence and different forms of violence. This form of psycho-education has worked for this population and may work for other women.

Third, there is a significant amount of work and education that can be done internationally. Social workers can share information about interventions, program development, and policy. According to Midgley (1997), "social work practice, as well as social policy practice can be strengthened when international experiences are shared between professionals in different countries" (p. 16). Many of the women implied that nothing was done about IPV in their country of origin. Marisol gave a haunting explanation of IPV in her family in Mexico, "*No era nombrado, era normal, no hay justicia en México.*" ("It was not named, it was normal, there is

no justice in Mexico.”). According to the issue paper on Mexico written by the Research Directorate, Immigration and Refugee Board (2003), there are many barriers that women face in reporting IPV in Mexico. Usually women try to take care of any violence or abuse without involving the legal system out of fear of repercussion for their families and children (Research Directorate, 2003). Social workers have an ethical obligation to educate about and fight against injustice and this is a prime area.

Conclusions

This study examined the experiences of Latina women in IPV relationships. Many of the findings were consistent with the literature and theories about IPV. The results of the interviews indicate that many of the women in the study experienced violence from a young age and that education about violent and abusive relationships can help women understand their own relationships and may encourage them to seek help. More research is needed about the effects of IPV on Latina women and the barriers that they face in accessing services. Increasing knowledge about the experiences that

Latina women face in IPV relationships will help social workers seek justice for these survivors.

APPENDIX A
QUESTIONNAIRE

Instrument

Demographic Questions for Latina Survivors of Domestic Violence

I will be asking you the following questions about your background and family situation. This will give me a better understanding of who you are. These should be brief answers because I will be asking more specific questions about your experience with domestic violence after I am done with the background questions. I will be filling in the blanks and circling your answers for this portion of the interview. Feel free to stop me at any time if you feel uncomfortable or if you need clarification. If you don't want to answer the questions, let me know so we can stop the interview. You are free to leave at any time. Thank you for participating in the interview.

1. For the purpose of this study please assign yourself an alias name:

2. What language do you prefer the interview to be in? English or Spanish
3. Age: _____
4. What is your ethnic background? _____
5. Marital status:
Single Married Divorced Separated Cohabiting
6. Are you employed? Yes or No
If yes: Full-time or Part-time
If no: What is your source of income? _____
7. How many years have you been living in this country? _____
8. Do you have family living nearby? Y or N
9. How often do you talk with your family? Daily Weekly Monthly
Other _____
10. How often do you see your family? Daily Weekly Monthly
Other _____

Preguntas Demográficas Sobre la Violencia Doméstica entre Mujeres Latina

Las siguientes preguntas serán acerca de su experiencia y situación con su familia. Estas preguntas me darán una mejor comprensión de quien es usted. Sus respuestas deberán ser breves porque le haré otras preguntas más específicas acerca de su experiencia con la violencia doméstica. Yo llenare sus respuestas en las líneas vacías y circularé sus respuestas durante la primera parte de la entrevista. Siéntase con la libertad de decirme si usted se siente incómoda o si usted necesita clarificación. Si usted no quiere contestar las preguntas, permítame saber para que podamos terminar la entrevista. Siéntase libre de concluir la entrevista a cualquier momento. Por lo tanto gracias por participar en la entrevista.

1. Para el propósito de este estudio por favor escoja un nombre falso:

2. ¿En que idioma prefiere la entrevista? Inglés o Español

3. ¿Cuántos años tiene? _____

4. ¿Que es su grupo étnico? _____

5. Estado Matrimonial:

Soltera Casada Divorciada Separada Viviendo juntos

6. ¿Esta trabajando? Si o No

Si: Tiempo completo o Medio tiempo

No: ¿Como se mantiene? (Para hacer pagos) _____

7. ¿Cuántos años tiene viviendo en los Estados Unidos? _____

8. ¿Tiene familia que vive cerca de usted? Si o No

9. ¿Con que frecuencia habla con su familia? Cada día Cada semana Cada mes
Otro _____

10. ¿Con que frecuencia visita su familia? Cada día Cada semana Cada mes
Otro _____

Questions about Domestic Violence among Latina Women

I will be asking you the following questions. Feel free to stop me at any time if you feel uncomfortable or if you need clarification. I may ask you some additional questions to get a deeper understanding about your experience with domestic violence. If you don't want to answer the questions, let me know and we can stop the interview. You are free to leave at any time. Remember that I am a mandated reporter and am obligated to report verbal or physical abuse regarding a child, adult, or elder. I will write down the answers that you tell me so that I can remember what you say. Thank you for participating in this interview.

11. I understand that you come to this agency for help because of domestic violence with your partner. I want to understand what it has been like for you and I am wondering if you would feel comfortable talking about it. When was the violence apparent to you? (Clarifying questions—How old were you when the violence started? How long has the violence been going on?)
12. Who do you talk to when you have problems with your partner? Ex. Financial or relationship issues. (Clarifying questions—What is your relationship to that person/persons? How often do you talk to them? Do you talk to them face-to-face or over the phone? Do you feel like you get support? If not who else would you go to? What kind of help do they provide for you?)
13. I want to understand if your family is part of your support system and what you feel that you need from them. What do you need from your family as a survivor of domestic violence? (Clarifying questions—Have you gotten the help you need? Do you need resources like money or clothes or transportation or do you need support like someone to talk to?)
14. I also want to know if there is a family history of domestic violence. Has anyone in your family been a victim of domestic violence? (Clarifying questions—Who has been a victim? What is your relationship with that person? Do you still talk to that person?)
15. Now I want to understand the kinds of help that you have received through social service organizations. What has been helpful to you from social service organizations? (Clarifying questions—Have you gotten help at this organization or other organizations? Is there a different kind of help that they could give you? Are you satisfied with the help that you have received?)

Preguntas Sobre la Violencia Doméstica entre Mujeres Latinas

Las siguientes preguntas serán mas específicas sobre su experiencia con la violencia domestica. Siéntase libre detenerme si usted se siente incómoda o necesita clarificación. Si usted no quiere contestar las preguntas, permítame saber y podemos terminar la entrevista. Siéntase libre de concluir la entrevista a cualquier tiempo. Recuerde que soy obligada reportar por el Estado abuso físico o verbal contra los niños, adultos y adultos mayores de edad. Estaré anotando sus respuestas para recordar lo que usted dice. Gracias por participar en la entrevista.

11. Sabiendo que usted viene a esta agencia para ayuda a causa de violencia doméstica con su pareja. ¿Como ha sido para usted hablar acerca de lo que usted ha experimentado? ¿Cuándo fue la violencia obvia para usted? (Clarificando las preguntas— ¿Cuántos años tenia cuando la violencia empezó? ¿Por cuanto tiempo ha pasado la violencia?)
12. ¿A quién tiene usted para el apoyo con problemas financieros o problemas con su pareja? ¿Con quién habla usted cuando tiene problemas con su pareja? (Clarificando las preguntas— ¿Como es su relación con esas persona/personas? ¿Con qué frecuencia habla usted con ellos? ¿Habla usted cara a cara o por teléfono? ¿Se siente como que usted tiene apoyo? ¿Si no, a quien mas tiene que le da apoyo? ¿Qué clase de ayuda le dan a usted?)
13. Quiero saber si su familia forma parte de su sistema de apoyo y lo que usted necesita de ellos. ¿Qué necesita usted de su familia como una sobreviviente de la violencia doméstica? (Clarificando las preguntas— ¿Ha obtenido lo que usted necesita de ellos? ¿Necesita usted recursos como dinero, ropa, transportación o necesita usted apoyo como alguien con quien puede hablar?)
14. ¿Hay una historia en su familia de la violencia doméstica? ¿Tiene alguna persona en su familia que fue una víctima de la violencia doméstica? (Clarificando las preguntas— ¿Quién ha sido una víctima? ¿Como es su relación con esa persona? ¿Todavía habla con esa persona?)
15. Quiero saber la clase de ayuda que usted ha recibido de organizaciones sociales de servicio. ¿Le han ayudado estas organizaciones sociales de servicio? (Clarificando las preguntas— ¿Ha recibido ayuda en esta organización u otras organizaciones? ¿Hay una clase diferente de ayuda que ellos le podrían dar? ¿Esta satisfecha usted con la ayuda que ha recibido?)

APPENDIX B
INFORMED CONSENT

INFORMED CONSENT

The study in which you are being asked to participate is designed to examine the experiences about domestic violence among Latina women. This study is being conducted by Yvonne Quesada and Sarah Yeung, Master of Social Work students at California State University, San Bernardino under the supervision of Herb Shon, Ph.D., LCSW, Assistant Professor of Social Work at California State University, San Bernardino. The Department of Social Work Sub-Committee of the Institutional Review Board at California State University, San Bernardino has approved this study.

In this study you will be asked to respond to several questions regarding domestic violence. The interview should take about 30 to 45 minutes to complete. Your responses to this study of domestic violence will remain confidential with the understanding that if the researchers hear explicit references to verbal or physical abuse to children, or the elderly, the researchers, as mandated reporters will forward that information to the authorities. Your name will not be reported with your responses. All data will be reported in group form only. You may receive the group results of this study upon completion September 2007 at the following location Pfau Library at California State University, San Bernardino (909) 880-5091.

Your participation in this study is totally voluntary. You are free not to answer any questions and withdraw at any time during this study without penalty. When you have completed the interview you will receive a debriefing statement describing the study in more detail. In order to ensure the validity of the study, we ask that you not discuss this study with other participants. Your participation in this study will benefit you by gaining knowledge and increasing your awareness of domestic violence. Upon the completion of the interview you will receive a \$10.00 gift card from Wal-Mart. The risk of participating in this study is that the questions may cause some distress due to the sensitive nature of the subject matter.

If you have any questions or concerns about this study, please feel free to contact Herb Shon, Ph.D., LCSW at (909) 537-5532. By placing a X on the line below, I acknowledge that I have been informed of, and that I understand, the nature and purpose of this study, and I freely consent to participate. I also acknowledge that I am at least 18 years of age.

Place an X here: _____

Today's date: _____

CARTA DE CONSENTIMIENTO

El estudio fue diseñado para examinar las experiencias acerca de la violencia domestica con las mujeres Latina. Este estudio es realizado por Yvonne Quesada y Sarah Yeung, estudiantes de trabajo social en la Universidad Pública de California, San Bernardino bajo la supervisión de Herb Shon, Ph.d., LCSW, el profesor agregado de trabajo social en la Universidad Pública de California, San Bernardino. El Departamento de Trabajo Social Sub-Comité de La Tabla Institucional de Revisión de la Universidad Pública de California, San Bernardino ha aprobado este estudio.

En este estudio usted será invitada ha responder a varias preguntas con respecto a la violencia domestica. La entrevista debe tomar acerca de 30 a 45 minutos de completar. Sus respuestas a este estudio de la violencia doméstica se quedarán confidenciales con el entendimiento que si los investigadores escuchan referencias explícitas de abuso verbal o físico a niños o a las personas mayores, los investigadores están obligados legalmente reportar esa información a las autoridades. Los resultados del estudio se obtendrán de manera grupal, por lo que su nombre no será asociado con sus respuestas. Usted puede recibir los resultados del grupo de este estudio en Septiembre de 2007 en la Biblioteca Pfau en la Universidad Pública de California, San Bernardino (909) 880-5091.

Su participación en este estudio es totalmente voluntaria. Usted es libre de no contestar ciertas preguntas y retirarse cuando lo deseé. Cuándo usted termine la entrevista usted recibirá una explicación que describe el estudio en más detalle. Para asegurar a la validez del estudio, nosotras pedimos que usted no discute este estudio con otras participantes. Su participación en este estudio le beneficiará porque recibirá una tarjeta de regalo de Wal-Mart de \$10.00. Además, usted aumentara su conocimiento de la violencia domestica entre las mujeres Latinas. El riesgo de tomar parte en este estudio es que las preguntas pueden causar alguna incomodidad debido a la naturaleza sensible del tema.

Si usted tiene cualquier pregunta o preocupación acerca de este estudio, puede contactar a Herb Shon, Ph.d., LCSW (909) 537-5532. Marcando una X en la línea abajo, yo reconozco que he sido informada, y que entiendo la naturaleza y el propósito de este estudio, y consiento libremente participar. Reconozco también que soy por lo menos 18 años de edad.

Marque una X aquí: _____

La fecha de Hoy: _____

APPENDIX C
DEBRIEFING STATEMENT

Debriefing Statement

Thank you for your participation in this study examining the experiences of Latina women who are involved in Domestic Violence relationships. The study used an interview to try to understand how Domestic Violence has affected you. There has been no deception used in this research project.

If your participation in this study raised any issues or caused you any stress and you would like to discuss it further, there are resources available for you to talk with someone. A list of resources has been attached.

If you have any questions about the study please contact Sarah Yeung, Yvonne Quesada, or Dr. Herb Shon at the Department of Social Work at 909-537-5532. If you would like more information about the results of the study, a copy will be available in the Pfau Library at California State University, San Bernardino, 909-537-5090.

Explicación del Estudio

Gracias por su participación en este estudio examinando las experiencias de mujeres Latinas quienes son involucradas en relaciones de Violencia Domestica. Este estudio utilizó una entrevista para intentar entender como usted ha sido afectada de la Violencia Domestica. No hemos utilizado decepción en este estudio.

Si su participación en este estudio le ha causado problemas y le gustaría hablar sobre los problemas, hay recursos disponibles. Una lista de los recursos esta incluida.

Si usted tiene algunas preguntas sobre el estudio favor de comunicarse con Sarah Yeung, Yvonne Quesada, o Dr. Herb Shon en el Departamento del Trabajo Social al numero 909-537-5532. Si usted requiere mas información sobre los resultados del estudio, una copia será disponible en la biblioteca Pfau en la Universidad del Estado de California, San Bernardino, 909-537-5090.

APPENDIX D

FLYER

Would you like to participate in a study?

Participate in a Research Study about the experiences that Latina women have in Domestic Violence relationships

Who: Latina women over the age of 18 who are currently involved in a relationship or have experienced Domestic Violence.

Details: The interview will be held at the shelter or outreach office. The interview will be face-to-face and last 20 to 30 minutes. **Names and interviews will be kept confidential.**

What else?: All women who participate will be given a Wal-Mart gift card as a thank-you.

How do I sign up?: Please contact your case manager or the Community Outreach and Development Manager, Amanda Turek at (626) 338-3123 to set up an appointment.



¿Le gustaría participar en un estudio?

Participe en un Estudio de Investigación acerca de la experiencia que las mujeres Latinas tienen en relación con la Violencia Doméstica

¿Quién?: Mujeres Latinas de más de 18 años que están en una relación o han tenido experiencias con la Violencia Doméstica.

Detalles: La entrevista se llevara acabo en su casa de refugio o en la oficina de alcance. La entrevista será en persona y tomara 20 a 30 minutos. **Su nombre y entrevista será confidencial.**

¿Qué más? : A todas las mujeres que participen se les dará una tarjeta de regalo a Wal-Mart como agradecimiento.

¿Cómo inscribirse? : Por favor llame al director de su caso o a la Directora de Alcance de la Comunidad y Desarrollo, Amanda Turek al (626) 338-3123 para obtener una cita.



APPENDIX E
RESOURCE LIST

Resource List

If your participation in this study has raised any issues or caused you any stress and you would like to discuss it further, there are resources available for you to talk with someone. Please call the resources listed below or contact your YWCA-WINGS case manager for help and referrals.

YWCA-WINGS Outreach Office
626-915-5191

YWCA-WINGS 24-hour hotline
626-967-0658

House of Ruth 24-hour hotline
909-988-5559

National Domestic Violence Hotline
800-799-SAFE

House of Ruth—Counseling and Community Services
Claremont- Spanish & English
909-623-4364

Citrus Counseling Center Domestic Violence Program
Covina- English & Spanish
626-967-7585

Acacia Counseling Services
Glendora- English & Spanish
626-335-6114

SPIRIT Family Services
Glendora- English & Spanish
626-335-8153

San Gabriel Latino Family Center
Baldwin Park- English & Spanish
626-813-0288

Bilingual Family Counseling
Ontario- English & Spanish
909-986-7111

West End Family Counseling Services
Ontario- English & Spanish
909-983-2020

Lista de Recursos

Si su participación en este estudio le ha causado problemas y le gustaría hablar sobre los problemas, hay recursos disponibles. Contacta por favor los recursos en la lista abajo o llame al dirigente de su caso de YWCA-WINGS para la ayuda y referencias.

YWCA-WINGS Outreach Office
626-915-5191

YWCA-WINGS 24-hour hotline
626-967-0658

House of Ruth 24-hour hotline
909-988-5559

National Domestic Violence Hotline
800-799-SAFE

House of Ruth—Counseling and Community Services
Claremont- Spanish & English
909-623-4364

Citrus Counseling Center Domestic Violence Program
Covina- English & Spanish
626-967-7585

Acacia Counseling Services
Glendora- English & Spanish
626-335-6114

SPIRIT Family Services
Glendora- English & Spanish
626-335-8153

San Gabriel Latino Family Center
Baldwin Park- English & Spanish
626-813-0288

Bilingual Family Counseling
Ontario- English & Spanish
909-986-7111

West End Family Counseling Services
Ontario- English & Spanish
909-983-2020

APPENDIX F
AGENCY APPROVAL LETTER

eliminating racism empowering women

ywca

YWCA of San Gabriel Valley

October 11, 2006

To Whom It May Concern:

My name is Amanda Turek and I am the Community Outreach and Development Manager at YWCA WINGS (Women In Need Growing Strong) Domestic Violence Program in West Covina, California. I am writing in regards to the research project "Intimate Partner Violence Among Latina Women: A Needs Assessment" proposed by MSW candidates Yvonne Quesada and Sarah Yeung.

We at YWCA WINGS fully support and endorse Ms. Quesada and Ms. Yeung in their research proposal and we look forward to working with them in the future to conduct the research with our clients. WINGS provides an excellent client population for their study, as 74% of our clients are Hispanic.

My staff and I will fully assist Ms. Quesada and Ms. Yeung with this project. Should you have any further questions, please do not hesitate to contact me at 626-338-3123 extension 15 or via email at Aturek@ywcawings.org.

Toward a Violence Free Future.



Amanda Turek
Community Outreach and Development Manager
YWCA WINGS
www.ywcasgv.org

CORPORATE OFFICES
PROGRAM CENTER

351 South Glendora Avenue
West Covina, CA 91790
Phone: 626-950-2855
Fax: 626-914-6447
www.ywcasgv.org

SENIOR SERVICES

Intervale Senior Services
1644 W. Garvey Avenue N.
West Covina, CA 91790
626-950-3773
www.ywcasgv.org/intervale.php

DOMESTIC VIOLENCE

**WINGS Domestic
Violence Services**
Post Office Box 1454
West Covina, CA 91793
Office: 626-914-5191
Fax: 626-950-5140
www.ywcawings.org
Hotline: 626-957-0658

CHILD CARE

Cameron Extended
Day Care
Cameron Elementary School
1725 East Cameron Avenue
West Covina, CA 91790
626-914-2852

REFERENCES

- Belknap, R. A., & Sayeed, P. (2002). Te contaria mi vida: I would tell you my life, if only you would ask [Electronic Version]. *Health Care for Women International, 24*, 723-737.
- Bennett, L., Riger S., Schewe, P., Howard, A., & Wasco, S. (2004). Effectiveness of hotline, advocacy, counseling, and shelter services for victims of domestic violence: A statewide evaluation [Electronic Version]. *Journal of Interpersonal Violence, 19*, 815-829.
- Campbell, J. C. (2004). Helping women understand their risk in situations of intimate partner violence [Electronic Version]. *Journal of Interpersonal Violence, 19*, 1464-1477.
- Cho, H., & Wilke, D. (2005). How has the Violence Against Women Act affected the response of the criminal justice system to domestic violence? *Journal of Sociology and Social Welfare, 32*(4), 125-139.
- Cohen, J.A., Mannarino, A.P., Murray, L.K., Igelman, R. (2006). Psychosocial interventions for violence-exposed children [Electronic Version]. *Journal of Social Issues, 62*, 737-766.

- Fisher, J. W., & Shelton, A. J. (2006). Survivors of domestic violence: Demographics and disparities in visitors to an interdisciplinary specialty clinic [Electronic Version]. *Family Community Health, 29*, 118-130.
- Frias, S. M., & Angel, R. J. (2005). The risk of partner violence among low-income Hispanic subgroups [Electronic Version]. *Journal of Marriage and Family, 67*, 552-564.
- Gelles, R. J. (2000). Estimating the incidence and prevalence of violence against women [Electronic Version]. *Violence Against Women, 6*, 784-804.
- Gorde, M. W., Helfrich, C. A., & Finlayson, M. L. (2004). Trauma symptoms and life skill needs of domestic violence victims [Electronic Version]. *Journal of Interpersonal Violence, 19*, 691-708.
- Grinnell, R. M., & Unrau, Y. A. (2005). *Social work research and evaluation* (7th ed.). New York: Oxford University Press, Inc.

- Kasturirangan, A., & Williams, E. N. (2003). Counseling Latina battered women: A qualitative study of the Latina perspective [Electronic Version]. *Journal of Multicultural Counseling and Development, 31*, 162-178.
- Kimerling, R., & Baumrind, N. (2005). Access to specialty mental health services among women in California [Electronic Version]. *Psychiatric Services, 56*, 729-734.
- Kwong, M. J., Bartholomew, K., Henderson, A. J. Z., & Trinke, S. J. (2003). The intergenerational transmission of relationship violence [Electronic Version]. *Journal of Family Psychology, 17*, 288-301.
- Liang, B., Goodman, L., Tummala-Narra, P., & Weintraub, S. (2005). A theoretical framework for understanding help-seeking processes among survivors of intimate partner violence [Electronic Version]. *American Journal of Community Psychology, 36*, 71-84.
- Lund, L. E. (2002). Incidence of non-fatal intimate partner violence against women in California, 1998-1999. Retrieved October 7, 2006 from http://www.dhs.ca.gov/epic/publications/EPICgrams/EPICgram4_IPV.pdf

- Markowitz, F. E. (2001). Attitudes and family violence: Linking intergenerational and cultural theories [Electronic Version]. *Journal of Family Violence*, 16, 205-218.
- McCloskey, K., & Grigsby, N. (2005). The ubiquitous clinical problem of adult intimate partner violence: The need for routine assessment [Electronic Version]. *Professional Psychology: Research and Practice*, 36, 264-275.
- Midgley, J. (1997). *Social welfare in global context*. Thousand Oaks, CA: Sage Publications, Inc.
- Pyles, L., & Postmus, J. L. (2004). Addressing the problem of domestic violence: How far have we come? [Electronic Version]. *Affilia*, 19(4), 376-388.
- Ramos, B. M., & Carlson, B. E. (2004). Lifetime abuse and mental health distress among English-speaking Latinas [Electronic Version]. *Affilia*, 19(3), 239-256.
- Renner, L. M., & Slack, K. S. (2006). Intimate Partner Violence and Child maltreatment: Understanding intra and intergenerational connections [Electronic Version]. *Child Abuse and Neglect*, 30, 599-617.

- Research Directorate Immigration and Refugee Board
Ottawa, Canada (2003). Issue Paper, Mexico: Domestic violence and other issues related to the status of women. Retrieved April 19, 2007 from <http://www.unhcr.org/home/RSDCOI/3f548b534.pdf>.
- Robertiello, G. (2006). Common mental health correlates of domestic violence [Electronic Version]. *Brief Treatment and Crisis Intervention, 6*, 111-121.
- Saunders, B.E. (2003). Understanding children exposed to violence [Electronic Version]. *Journal of Interpersonal Violence, 18*, 356-376.
- Slep, A.M., & O'Leary, S.G. (2001). Examining partner and child abuse: Are we ready for a more integrated approach to family violence? [Electronic Version]. *Clinical Child and Family Psychology Review, 4*(2), 87-107.
- Sugihara, Y., & Warner, J. A. (2002). Dominance and domestic abuse among Mexican Americans: Gender differences in the etiology of violence in intimate relationships [Electronic Version]. *Journal of Family Violence, 17*(4), 315-340.

- Tjaden, P., & Thoennes, N. (2000). Extent, nature, and consequences of intimate partner violence: Findings from the national violence against women survey. Retrieved September 26, 2006 from <http://www.ncjrs.gov/pdffiles1/nij/181867.pdf>
- Vasquez, M. J. T. (1998). Latinos and violence: Mental health implications and strategies for clinicians [Electronic Version]. *Cultural Diversity and Ethnic Minority Psychology, 4*, 319-334.
- Waldrop, A. E., & Resick, P. A. (2004). Coping among adult female victims of domestic violence [Electronic Version]. *Journal of Family Violence, 19*, 291-302.
- White, M. D., Goldkamp, J. S., & Campbell, S. P. (2005). Beyond mandatory arrest: Developing a comprehensive response to domestic violence [Electronic Version]. *Police Practice and Research, 6*(3), 261-278.
- Woods, S. J. (2000). Prevalence and patterns of post-traumatic stress disorder in abused and post-abused women [Electronic Version]. *Issues in Mental Health Nursing, 21*, 309-324.

Zosky, D. L. (1999). The application of object relations theory to domestic violence [Electronic Version]. *Clinical Social Work Journal*, 27, 55-69.

ASSIGNED RESPONSIBILITIES PAGE

This was a two-person project where authors collaborated throughout. However, for each phase of the project, certain authors took primary responsibility. These responsibilities were assigned in the manner listed below.

1. Data Collection:

Team Effort: Sarah Yeung & Yvonne Quesada

2. Data Entry and Analysis:

Team Effort: Sarah Yeung & Yvonne Quesada

3. Writing Report and Presentation of Findings:

a. Introduction and Literature

Assigned Leader: Sarah Yeung

Assisted by: Yvonne Quesada

b. Methods

Assigned Leader: Yvonne Quesada

Assisted by: Sarah Yeung

c. Results

Assigned Leader: Yvonne Quesada

Assisted by: Sarah Yeung

d. Discussion

Assigned Leader: Sarah Yeung

Assisted by: Yvonne Quesada