

DOMESTIC VIOLENCE: COMMUNITY SOLUTIONS

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Biography of Authors

Donnie Jean "D.J." Brown, began her working career as a high school teacher in both a public and a private high school. For over a year, she and her husband were CASA volunteers together. She initially joined the CASA shelter staff in the position of Woman's Advocate until she was promoted to Shelter Director. As an educator, D.J trains on domestic violence. DJ is no longer a CASA employee but she still cares a great deal about CASA.

Linda A. Osmundson, Executive Director of CASA since 1989, has been working with battered women in three different Florida domestic violence centers since about 1984. She was a founding member of the clemency movement for battered women in Florida and of the Florida Governor's Task Force on Domestic and Sexual Violence. She served as a Task Force member for four years. She is also a past president of the Florida Coalition Against Domestic Violence and served on the Steering Committee of the National Coalition Against Domestic Violence. She was a delegate to the 4th U.N. World Conference on Women in Beijing and has traveled to Russia, Germany, Costa Rica, Nicaragua, Bogota, Uganda, Cyprus, India and Panama to visit domestic violence programs. She presented at the first International Conference on Domestic Violence in Singapore and was a keynote speaker for a conference in Melbourne, Australia. She holds a Master's Degree in Public Administration from the University of Southern California.

Kelly Twiss, began her career as a preschool educator. She worked for many years in the substance abuse field for Operation PAR, a widely recognized substance abuse program, and began the first daycare center in the country for drug involved families. Kelly began working with CASA's children in 1991 and worked for CASA for 13 years. She has been in great demand as a trainer of students, teachers, professionals and community groups on the dynamics of domestic violence and, especially, its effects on children. In her last position at CASA she supervised all of CASA's outreach prevention and early intervention programs. Kelly has an A.A. in Early Childhood Education from St. Petersburg Junior College.

ABSTRACT

Domestic violence is a social problem that has a profound effect on the health and welfare of women, children and men in our communities. Healthcare professionals are frequently the first professionals to come in contact with domestic violence survivors and their children in emergency rooms, doctor's offices and clinics. Unfortunately, many healthcare professionals fail to recognize the root problem of domestic violence and diagnose and treat the symptoms incorrectly. With appropriate training, healthcare professionals can learn to recognize survivors, provide non-judgmental intervention and make appropriate referrals to community-based domestic violence centers.

Through the use of a true case example, this course will discuss the prevalence of domestic violence. Typical behaviors and common symptoms and injuries of domestic violence victims are presented and constructive methods of working with survivors are suggested. The health care provider is a vital link to the development of the coordinated community response to domestic violence. Survivors may depend on healthcare providers as their only link to survival. This course will train the provider to become an active intervener in domestic violence with their patients, clients and co-workers.

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What is Domestic Violence?

Domestic abusers abuse because they can. That is, they abuse because society has decided a tolerable level of violence in families is admissible in smoothly functioning families. Violence, euphemistically called spanking, is an acceptable, even commendable, form of discipline of children, the smallest and most vulnerable of our populace. Certain religious values would appear to support violence in child discipline with the Biblical admonishment, "Spare the rod, spoil the child."¹ Violence is a significant part of our culture.

Domestic violence abusers can be extraordinarily charming and loving to their wives or partners. They are masterful manipulators. Survivors report being, "swept off their feet" by a man who could not live without them. Relationships bloom rapidly and cohabitation or marriage follows quickly. Physical violence may not begin immediately but the stage is set for ensuing controlling behaviors.

Ann² was a 32 year old professional when she met Henry. Their courtship was a whirlwind. Henry was charming and persistent. He proposed after they dated for only a few months. Ann was lonely and flattered he wanted to marry her. He was funny and exciting and different than any man she had known. He made her feel beautiful.

Domestic abuse is a pattern of behavior used to establish power and control over an intimate partner. Abuse is any controlling, hurtful act, word, or gesture that injures physically or emotionally. Domestic abuse is not just a disagreement, argument or marital spat. Domestic violence is primarily a gender-based crime. That is, most victims are female and most perpetrators are male.³ In heterosexual relationships, females may use violence in self-defense or retaliation for violence but males are generally the primary aggressors. Violence appears to occur in gay or lesbian relationships at about the same level as in heterosexual relationships.⁴ For purposes of this article, we shall use the generic pronoun "she" to describe the victim and "he" to describe the perpetrator. This

¹ This is derived from Proverbs 13:24 "He that spareth his rod hateth his son: but he that loveth him chasteneth him betimes." The rod is an allusion to a shepherd's crook, used to guide sheep but never to hit them.

² The story of Ann and Henry is true but the names have been changed for safety and privacy.

³ In a report entitled, "Prevalence, Incidence, and Consequences of Violence Against Women: Findings from the National Violence Against Women Survey" by the National Institute of Justice and the Centers for Disease Control and Prevention, eight thousand women and eight thousand men were surveyed by telephone between November 1995 and May 1996. One in four female respondents (25%) and two in 25 male respondents reported being raped and/or physically assaulted by a current or former spouse, cohabiting partner, or date some time in their life. This translates into 1.5 million women and 834,000 men who are raped and/or physically assaulted annually by an intimate partner.

⁴ The prevalence of domestic violence among Gay and Lesbian couples is approximately 25% to 33%. Barnes, "It's Just a Quarrel"; American Bar Association Journal, February 1998, p. 25.

should not be construed to invalidate the experiences of gays or lesbians or the occasional heterosexual male victim.

Domestic abuse can be verbal, emotional, psychological, financial, spiritual, sexual or physical and usually falls into several of the following categories:

Using power and privilege for control: The abuser makes all the big decisions, controls all the money, controls information about the family income, prevent the victim from successful employment or causes loss of employment. The abuser makes the children feel guilty and uses the children to relay messages. Abusers threaten to take the children or seek custody of the children. They may physically abuse the children.

Shortly after they married, Ann lost her job, but she and her husband started a business together and bought their first house. Henry was volatile with customers. Ann smoothed things over. He accused her of being insensitive to his needs. After an argument, he would disappear and sometimes not return home until the next morning. Sometimes he would not return in time to work. There were more arguments. He spent their money on drugs and alcohol and charged her credit cards to their limit. The arguments became more intense. He called her terrible names. She especially hated being called a b...h! Once he choked her. He cajoled her into buying a gun "for her safety" and later threatened her with it for hours in the car while he was driving, reminding her he had killed a man once. He drove recklessly when she was in the car. When she begged him to be careful, he drove faster.

Emotional or psychological abuse: This type of abuse includes name-calling, crazy-making behavior, playing mind games and humiliation. Isolation, controlling who their victim's see, what they read, where they go and what they do is common, limiting contact with outsiders, limiting friendships and contact with family. Abusers use jealousy to justify actions and minimizing, denying, and blaming or saying the abuse did not happen, making light of the abuse and shifting responsibility for the abuser's behavior to the survivor.

Ann found a job to pay off the credit cards and worked for Henry on the weekends. She also worked on finishing her Master's Degree. In fact, she worked all the time. He told her he was proud of her education and then called her stupid and mocked her motivation to finish the degree. When they argued, he cursed at her and threatened to smash her face through the window. Ann stood up to him and learned to swear like a sailor. Eventually she always backed down because she feared his rage. Afterwards she felt ashamed. He mocked her religious faith and tried to keep her from attending church. He constantly pressured her to do things that were against her religious beliefs. He did not like her friends and criticized her family. Sometimes he humiliated her in front of others until she stopped inviting people to their home. He would chide her for working late alone in her building, concerned for her safety. Then he would fail to show up with the car after work, forcing her to walk home alone in the dark. Her life was lonely. But just when she had had enough, he became sweet and affectionate and she was reminded why she loved him.

Coercion and intimidation: This type of abuse includes terrorizing threats of harm, abandonment, and suicide, use of intimidating looks, actions, and gestures. Abusers destroy property, abuse pets, display or threaten with weapons.

Ann was offered a new job in another city. Two days before she left, there was another argument. When their dog tried to defend Ann from Henry's rage, Henry tried to kill him with a jagged, piece of a heavy glass ashtray that he smashed on the floor. Instead, he cut Ann's hand so severely she couldn't stop the bleeding. She walked six blocks to the hospital. The busy doctor stitched up the stab wound, but asked no questions and she walked home. Henry apologized profusely and promised to pay the emergency room bill.

Physical /sexual abuse: The abuser denies privacy. He forces sexual acts that the survivor finds uncomfortable or immoral. Unwanted sexual touching is common, as well as expectations of sex after other forms of physical or emotional violence. More obvious forms of physical abuse include slapping, punching, kicking, biting, choking, restraining, pushing, hitting with objects or using weapons. Abusers may deprive survivors of medical attention and regular health care.

Abuse occurs in all types of families regardless of racial⁵, economic, religious, cultural or educational background. Abuse occurs in families regardless of age⁶, disability or sexual orientation.

Different forms of abuse are tactics to maintain control over the partner. Frequently, one or more dangerously violent acts are accompanied by an array of other types of abuse that are not so easily identified. In combination, this firmly establishes the pattern of power and control. Many highly abusive relationships involve only minor or occasional physical violence. Many victims describe the non-physical forms of abuse as more serious and damaging to their self-esteem than even extreme physical violence.

Henry followed Ann to the new city two months later because "he couldn't live without her." But, the arguments began again. He told her he would kill her and the police if she ever called so she never did. Sometimes Henry came to her job to demand money. Ann knew her co-workers could hear through the thin walls of her office so she tried not to argue and gave him money so he would leave. She knew she lost credibility in front of her co-workers because he was rude and insistent.

Florida law defines domestic violence as any assault (threat or attempt to do bodily harm), battery (intentional, unlawful touching or striking) sexual assault, sexual battery, stalking (repeated, willful and malicious pattern of harassing or following),

⁵ "Domestic violence is statistically consistent across racial and ethnic barriers." Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p.3.

⁶ In a 1009 restraining order study, the age of abusers ranged from 17-70. Two thirds of the abusers were between the ages 24 and 40. Buzawa & Bizawa ed., "Do Arrests and Restraining Orders Work (1996), p.195.

kidnapping or false imprisonment or any criminal offense resulting in physical injury or death of one family or household member by another. "Family or household" members, which include same-sex relationships, are defined as any persons who are related by blood or marriage, or who are or were residing in the same single dwelling unit, or who have a child in common.

WHY DO VICTIMS STAY IN ABUSIVE RELATIONSHIPS?

Victims are blamed for being victims. While most victims eventually leave abusive relationships, making the decision is a process of weighing many factors and options. There are hundreds of reasons why individual victims find it hard to leave.

Fear

The survivor realistically fears the violence will escalate if she tries to leave or escape.⁷ The abuser perceives a loss of control and power and may increase the level of violence including becoming lethal.⁸ She may have experienced increased violence and stalking in earlier attempts to leave.⁹ He may threaten to hurt people who try to help her. Survivors fear loneliness. They may believe they will never have another relationship. Their self-esteem has gradually been eroded. The abuser tells her she is stupid, ugly and a bad wife or mother.

Money

The survivor may lack income, education, or experience to support the children. Living with substantially reduced finances, lack of savings, credit, housing, childcare and adequate, dependable transportation may appear to be insurmountable to a survivor. Survivors have notoriously poor work histories due to physical injuries¹⁰, too-frequent court appearances and frequent interruptions in the workday by the abuser. The abuser may have thwarted opportunities for job-advancement and training. Survivors may have been prevented from access to money or knowledge about family finances or money management skills.

Henry and Ann bought a new car but he totaled it a month later, causing more debt. Ann's good credit was always at risk and she was never able to catch up with his debt. He kept her up at night so she rarely had more than two or three hours of sleep. Her

⁷ "Separated/divorced women are 14 times more likely than married women to report having been a victim of violence by their spouse or ex-spouse." Bureau of Justice Statistics: Female Victims of Violent Crime, (1991).

⁸ "65% of intimate homicide victims physically separated from the perpetrator prior to their death." Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, (1997), p.47, table 7.

⁹ "If stalking occurs within an intimate relationship, it typically begins after the woman attempts to leave the relationship." Domestic Violence, Stalking and Anti-Stalking Legislation, an Annual report to Congress under the Violence Against Woman Act, National Institute of Justice research. (1996), p.1.

¹⁰ 15% to 50% of abused women report interference, from their partner, with education, training or work. Raphael & Tolman, "Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare,(1997), p. 21.

work required travel. While she was away, Henry slept with a woman in Ann's bed. Henry sometimes brought Ann presents of gold jewelry and small appliances he bought on the street. Ann constantly worried these were stolen items and she might be implicated if they were in her home. Sometimes he pawned her things. He even pawned his wedding ring and never retrieved it. There were more exhausting arguments. Sometimes Ann became so afraid and so weary, she walked out and spent the night with a friend. But she always returned, wondering what she was doing wrong in her relationship.

Love

Few relationships are abusive all of the time and even the best relationships face challenges.¹¹ Achieving power and control over one's partner only requires intermittent reinforcement. Love binds our relationships together through good and bad. Realistic adults do not expect their relationships to be blissfully happy all of the time. We evolve into interdependence and fill our lives with hopeful memories, emotional bonds, commitments, and expectations. We share experiences, children, property and dreams together. Survivors may not want the relationship to end, just the violence and abuse.

Ann feared losing her job if anyone really knew what happened at home. She didn't identify as a battered woman, after all. She was an educated professional. He rarely hit her. She should be able to handle her marriage. She desperately tried to regain control of her finances. She thought about leaving and fanaticized about his dying. She feared he would stalk her if she tried to leave. Once she watched him stalk a man, who owed them money, for weeks. Then there were good times, the flowers, cards and promises. Most of the time she felt confused. How could someone who loved her act like this? She had never experienced anything like this before. Even when Henry went to prison for dealing in stolen property, many years passed before she could file for divorce because she feared what he might do even from prison.

Cultural/Social/Spiritual

We are a composite of values we learned from our families and peers, spiritual traditions and cultural communities. These values are deeply imbedded and may be the strongest and most illusive reasons why battered women have difficulties separating from their partners. The survivor may have married outside of cultural norms and feel reluctant to appear to validate the family's objections. Divorce or separation is shameful in many cultures. Women, in particular, feel responsible for the success of their family so divorce feels like a failure. The survivor feels intensely isolated if her spiritual advisor demonstrates little understanding or training on family violence and expresses disapproval of divorce or separation. The isolation is enhanced when the survivor's family or cultural community also opposes the separation. The batterer may successfully marshal the family against the survivor. Her attempts to achieve separation and safety make her seem erratic and the family may become convinced the abuse has been caused by the survivor's "crazy" behavior. If the survivor has become chemically dependent, family and peers may have even more opportunity to blame her for the demise of the

¹¹ "47% of men who beat their wives do so at least three times per year." AMA Diagnostic & treatment Guidelines on Domestic Violence, SEC:94-677:3M, 9/94 (1994).

relationship. When family, friends and spiritual advisors withdraw their support, she may feel she has no one who cares about her besides the abuser. This also reinforces what the abuser has been telling her and she stays out of fear of loneliness and isolation.

Children

Cultural values emphasize the importance of two-parent families. The survivor may remain in the relationship because she believes it is best for the children. She may even believe the children are unaware of the violence. Some survivors believe their abusive partner is a good parent. The abuser may provide childcare for the children so the survivor is able to work outside the home. Children may feel guilty or responsible for the violence and attempt to keep their parents together. They may align themselves with the most powerful parent, usually the abuser. The survivor may fear losing the children in a custody battle.

Lack of Realistic Options

The survivor may have become so isolated that she does not know about domestic violence centers, other community services, legal remedies, or resources that are available. Survivors feel trapped because abusers seem omnipotent and because they have access to money and power.

Leaving an abusive relationship takes courage, support and planning for the survivor. Leaving is a process. Survivors may leave and return to their relationships several times. Most battered women successfully leave their relationships, eventually.

RECOGNIZING SIGNS OF VIOLENCE

Jealousy: In new relationships, jealousy masquerades as love and desire to be close. As the relationship evolves these traits begin to feel more like entitlement and possession. There may be false accusations about infidelity. Jealousy causes isolation for the survivor who stops seeing friends, family and clergy to try and please the jealous partner.

History of Violence: Abusers may use force or violence to solve many types of problems. A quick temper, overreacting to minor problems and frustrations, throwing objects in anger, punching walls, cruelty to animals or a criminal record for violence are strong warning signs for future violence.

Substance Abuse: The link between violence and alcohol or other legal or illegal substances and domestic violence is very strong. However, substance abuse and domestic violence should be dealt with separately or, sometimes, concurrently. Achieving sobriety does not end the violence. The domestic abuser may use the substance abuse as an excuse for the violent behavior toward a partner.

Rigid Gender-Role Expectations: Domestic abusers may have very traditional beliefs, sometimes based upon religious values, about their entitlement to be the boss in the

relationship. The abuser may expect his partner to abide by strict, stereotypical gender roles. Tradition, culture and religion are used to justify the abuse.

Weapons: The presence and availability of guns and other weapons and the threat of their use enhances the risk of homicide or suicide.

Family History: Domestic abusers may have been raised in an abusive family. Perpetrators of domestic violence may have been abused as children or witnessed one parent abusing or threatening abuse of the other. The use of violence is seen as an effective behavior to solve problems. Violence may be considered a normal event for the family.

COORDINATED COMMUNITY RESPONSE TO DOMESTIC VIOLENCE

Solving the problem of domestic violence requires appropriate responses from many systems. The justice system, including law enforcement, prosecutors, judges and probation officers must cooperate to be sure the perpetrator does not fall through the cracks. Cooperation from the healthcare system is vital because victims may be forced to go to their doctor or an emergency room for help. It is important that the clergy and other spiritual advisors have good training on domestic violence because some survivors may not trust others or be allowed to talk to others. Employers may be a key link in saving a survivor who is allowed out of the house only for work. Social service systems should be well informed about domestic violence because survivors may turn to a counselor or social worker. Unless there is coordination, many abusers will continue to commit violence against their partner or wife and children with few negative consequences.

Domestic Violence Centers

Founded by battered and formerly battered women and their advocates, there are 38 certified domestic violence centers that serve all of Florida. They are certified by the Department of Children and Families and partially funded by Marriage License Fees. The centers are usually non-profit organizations and members of the Florida Coalition Against Domestic Violence (FCADV). The centers are connected by a statewide hotline provided by FCADV: 1-800-500-1119. This number can be called from anywhere in the state and the phone will ring to the domestic violence center closest to the caller.

Each domestic violence center provides the same core services. These include a 24-hour crisis line (CASA's crisis line is 727-898-3671), emergency shelter, food, clothing, advocacy, information, referrals, safety planning, community education and children's programs. In addition, some centers provide child care, legal advocacy, court watch programs, transitional housing (like CASA Gateway), substance abuse education, support groups, cell phone programs, legal advice or attorney referrals, supervised visitation, monitored exchanges, batterer's intervention programs, prevention programs, school-based programs, programs for underserved populations including the deaf, elderly, gays and lesbians, ethnic and racial "minority" populations, rural and non-English

speaking and immigrant populations and many other services. Most centers use volunteers extensively and provide required training for volunteers.

Domestic violence centers may be reached by calling their crisis lines. When a survivor calls, they can ask questions and receive crisis counseling on the telephone. If they request shelter, there may be a brief telephone screening and arrangements made to meet the survivor at a public location such as the police station or hospital. Then the survivor and children will be transported to the shelter where they will be provided with beds, linens, food, clothing and other items they may need. Shelters have different rules, policies on confidentiality and differing maximum lengths of stay.

Many counties have domestic violence task forces or councils that meet regularly to work on a coordinated response to domestic violence. A few counties have domestic violence mortality review teams to assess what could have been done to prevent a domestic homicide. It is crucial that organizations, individuals, businesses, healthcare providers and workers in the justice system coordinate their work with the local domestic violence center. These centers are available to assist survivors, their helpers and advocates to define a safety plan and a course of action. The centers are usually highly experienced in working with domestic violence survivors and advocating for change in the system. They are generally available to provide training, education and coordination for the community on the complexities of domestic violence. Most domestic violence centers have programs designed to teach the prevention of domestic violence and a strong commitment to work with the community in this effort.

ASSESSING DANGER AND LETHALITY

All abusers are dangerous to their victims. Some may also be dangerous to the victim's family or those who help the victim. Assessing danger is important for the safety of the survivor. Assessment should be a dynamic process because violence tends to escalate in abusive relationships. There are no absolute assurances that the abuser is or is not lethal but there are many warning signs that can be evaluated and observed. Sometimes survivors are not fully cognizant of the danger they face because violence has become so routine.

Some abusers feel like they own their partners. The marriage license is a hitting license that entitles them to dominate and control their partner. Abusers may make statements like, "If you leave me, I will kill you, " or "If I can't have you, no one can have you." It may be a fundamental belief of the abuser that his partner has no right to a life without him or separate from him. This abuser may be threatened by his victim's success in obtaining a job, achieving a promotion, or advancing her education. Positive achievements may be perceived as an enhancement to her independence and a betrayal of her loyalty to him and their relationship.

Abusers may threaten suicide, asserting that he cannot live without her. This is an attempt to garner sympathy from her and the family. Any threat to kill or commit suicide

is considered extremely dangerous for a domestic violence survivor. Many homicide-suicides are linked to domestic violence.¹² Abusers may fanaticize to their partners about homicide or suicide. When these fantasies include realistic, practical details such as type of weapon, time and place, they should be considered highly lethal.

In Largo, FL a man, despondent that his wife had filed for divorce, took off in his truck with their small son and drove across the state. When police pursued him because he was driving at high speeds, he deliberately drove into a concrete embankment, killing himself and his son.

Some abusers are obsessive about their partner. They demand detailed accounts of her day and express extreme jealousy over her friendships, coworkers, and perceived relationships with an employer, clergy, or teacher. This abuser idolizes the victim, stalks her and demands complete and absolute loyalty and obedience. Life is entirely focussed on his partner. The abuser is fatalistic about the survivor's departure and believes that losing her is to lose everything and all reason to live. Believing they have no more to lose, the abuser may kill his victim to prevent her from leaving.

Only a small number of abusers suffer from mental illness and even fewer mentally ill abusers are homicidal. However, abusers experiencing an acute psychotic episode may be more dangerous. Intense depression and hopelessness may be linked to homicidal or suicidal tendencies.

Substance abuse is a factor in at least 65% of abusive relationships. Use of drugs and alcohol can also increase potential for lethality.

Domestic violence abusers who have easy access to guns and other weapons that they have used in the past should be considered potentially lethal. Threats of arson should also be considered highly dangerous.

Abuse of family pets closely correlates with domestic violence. Abusers who mutilate or kill pets may be giving a warning to their victims about their potential danger.

A history of past criminal behavior including past domestic violence, violations of probation, and violations of injunctions may increase the potential for lethality.

While lethality is impossible to predict with any degree of certainty, any of the above factors should be considered a warning for potentially extreme danger. Combinations of two or more factors heighten the danger of lethality. Those who may assist survivors should remind them of the factors in evidence and act with extreme caution to protect the entire family. Careful safety planning is vital when the survivor and children may have any contact with the abuser.

¹² "In 1994, 38% of domestic homicides were multiple-victim, usually combining a spouse homicide and suicide, or child homicide." Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, (1997), p.52, table 29.

SAFETY PLANNING

Personal safety for the survivor and the children should be the highest priority in homes where domestic violence occurs. Survivors should be prepared with a safety plan for every activity, from shopping to driving to work.

If the survivor chooses to stay with the abuser she must plan for the next dangerous incident that inevitably will occur. Plan for a safe place if an argument begins to escalate, avoiding rooms with only one exit such as bathrooms or rooms with obvious weapons like the kitchen. Make arrangements with a neighbor or family member in case she needs to leave quickly.

The children should be included in all safety planning, including teaching them about safe places to hide in the house. Children should be given permission to avoid the abuser, run to a neighbor or call 911 for help. Children need reassurance that their job is to stay safe, not to protect the victim.

The survivor should be familiar with the technology in their home that may endanger her. Technology may assist the abuser in searching previously sent e-mail or redialing the phone to find out from whom the survivor sought assistance or information. Caller ID and other telephone answering or computer systems may trace incoming and outgoing phone calls that will assist the abuser in locating or isolating the survivor.

Survivors should attempt to avoid isolation by communicating with trusted family members, friends and co-workers. Remaining connected with the family and community provides a support system and a reality check for survivors.

Survivors should call police if the danger escalates. Survivors are also encouraged to call their local domestic violence center's 24-hour crisis line for additional information and detailed safety planning.

Keeping a bag packed for quick escape will allow the survivor to leave with essentials she may need. Items packed may include spare car keys, spare change for the telephone, taxi or bus fare and a list of important phone numbers. Copies should be made of important papers like birth certificates for herself and children, Social Security cards, driver's license, school records, medical prescriptions and medical records because abusers know it is much more difficult to get help without these records. A change of clothing and items for babies and children should be packed. The survivor may want to ask a friend or family member to keep this bag.

If the survivor has decided to leave the relationship, possibly permanently, before the next incident occurs, there will be some additional planning necessary. The survivor should be prepared that the decision to leave may increase the danger level.

The survivor may decide to contact the domestic violence center to arrange to stay at an emergency shelter in order to remain in a confidential location temporarily. The children

should be informed about the immediate situation and plans that have been made for their safety to reduce their fear.

Survivors may want to make application at the civil court for an Injunction for Protection. They can contact the Clerk of Courts or their local domestic violence center for information and assistance.

Survivors should be very cautious in public and when staying with friends or family who are known to the abuser. Varying routines such as changing driving routes and times to school, work, childcare, shopping and recreational activities are good precautions. Survivors should try not to be alone for awhile. Some abusers stalk their victims obsessively.

The decision to stay or leave an abusive relationship is the decision of the survivor. Understanding the patterns of abuse in her relationship may help the survivor to recognize danger prior to a violent episode. This knowledge may help the planning to allow her to leave before the next attack is immanent.

EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN

At least half of children, who live in homes where there is domestic violence between adults, experience some level of physical violence from the violent adult in their home.¹³ Many experts believe that children suffer from abuse simply by witnessing (hearing or seeing) the abuse. The violence may affect children differently at different ages.

During pregnancy, women are subject to increased miscarriages due to being beaten or to stress. They are subject to pre-natal problems due to poor health, lack of proper nutrition, insufficient sleep and irregular or inadequate pre-natal care.

Infants in violent homes may be irritable or cry incessantly. They may have digestive problems. Like their mothers, they may suffer from sleep disturbances.

Toddlers or preschoolers may be either more aggressive or more withdrawn than other children. They suffer from general fearfulness, anxiety and lack of confidence to start new tasks. Delays in verbal development, impaired cognitive abilities or poor motor skills are common. They also may fail to control their bowel and bladder after the age of three years.

School age children may experience poor grades and failure. They may have low self-esteem, poor social skills, and appear withdrawn and dependent. Others may be generally aggressive bullies, with violent outbursts of anger. Physical symptoms may be manifested in bedwetting, nightmares, digestive problems, ulcers and headaches.

¹³ "In homes where partner abuse occurs, children are 1,500 times more likely to be abused." Department of Justice, Bureau of Justice Assistance, Family Violence: Interventions for the Justice System, (1993).

Teenagers may continue to experience low self-esteem and immaturity resulting in poor grades, failure and quitting school. They may be withdrawn, have few friends, learn not to bring friends home and may stay away or run away from home. Some teens feel responsible for taking care of the home and the adult victim. Teens may have violent outbursts, destroy property, abuse pets and join in beating their adult parent. They may also abuse their dating partner. Teens may experience nightmares, bedwetting, severe acne, ulcers and digestive problems.

Many survivors of domestic violence believe that their children do not know about the violence because it occurred when they were sleeping or away at school. However, the children can often describe and even draw or act out the violence in great detail. Sometimes they only witness the results of violence by observing injuries, and a chaotic home. At the very least, they feel the fear and anxiety of their abused parent. Children who grow up in violent homes are more inclined to turn to criminal behavior.

LEGAL RELIEF

There are several legal precautions survivors may take for protection from abuse from calling the police to filing for an Injunction for Protection.

When the police are called and there is probable cause to make an arrest, the case may go before the criminal court with a charge such as assault or battery. In Florida, abusers arrested for domestic violence will be held without bond until an advisory hearing that must occur within 24 hours. The State Attorney will determine whether there is enough evidence to prosecute the case. Most domestic violence cases are misdemeanors. Offenders may plead guilty to a felony or misdemeanor crime and be sentenced to prison, jail, probation, counseling, payment of a fine, court costs or be ordered to pay restitution to the survivor.

Civil Court

The civil court hears non-criminal cases such as divorce, child custody and Injunctions for Protection.¹⁴ Domestic violence may be a legal consideration when the judge makes decisions regarding child custody. However, some violations of Injunctions for Protection are considered criminal and may be heard in criminal court. If a civil order is not obeyed, the Judge may hold the violator in contempt of court.

In Florida, any adult who has been a domestic violence victim can file for an Injunction for Protection. This is a civil protection that may order the perpetrator (respondent) to stop the violence, move out of the home if he is living with the survivor (petitioner), to avoid contact with the survivor at home, work or school, to attend batterer's intervention programs and other appropriate counseling. The Injunction may also provide for custody, visitation, and support. There is a cost for applying for an Injunction but fees may be waived or the respondent may be required to pay the fees.

¹⁴ Injunction for Protection (IFP) is the correct legal name in Florida. Equivalent orders are sometimes called a restraining order, peace bond or protection order in other states.

A temporary injunction may be granted the same day and will be in effect for up to 15 days after the Sheriff serves the defendant with the Injunction. Both parties will be called to court within 15 days. At the return hearing the injunction may either be extended permanently or the Injunction may be dismissed.

Filing for an Injunction is a courageous decision and survivors will need to make a serious safety plan. Violence may even escalate. Survivors should be reminded to keep a certified copy of the Injunction with them at all times. Additional copies should be given to the childrens' school and to the survivor's employer.

Safety planning is crucial when a survivor applies for an Injunction for Protection. This may be an especially dangerous time because the perpetrator feels he is losing control. He may try to regain control with increased violence and threats of violence.

Criminal Court

When law enforcement is called, a determination is made about whether there is probable cause to make an arrest. If an arrest is made, the officer determines whether to charge the abuser with misdemeanor or felony domestic violence¹⁵. In felony cases, an investigation is set in order to collect evidence and sworn testimony about the violent incident. The survivor may bring an attorney or request a CASA advocate to be with her in the investigation.

If charges are filed, the alleged perpetrator may choose to plead guilty or go to trial. The perpetrator will be assigned to a public defender. This attorney does not represent the survivor. The other side is the State Attorney who represents the interests of the state (not the survivor). When a crime is committed in violation of state law, the State accuses or charges the perpetrator with a crime. While they may offer their opinion, victims do not have the authority to command the State to drop the domestic violence charges. The State Attorney has the final decisions to press or drop charges. Domestic violence cases can be successfully won in court by the State without the testimony of a terrified victim or child witness. The State depends on good evidence collection from law enforcement, healthcare providers and others in order to defend a case.

DOMESTIC VIOLENCE: A HEALTH CONCERN

Most of the early work on domestic violence centered on civil or criminal justice issues. However, many survivors never call the police or apply for an injunction for protection. Instead, they choose to seek other kinds of help through the health care system. Sometimes, due to injuries, survivors are forced to seek help from a private physician or an emergency room. Many report that they received treatment for the injury or complaint but no one asked

¹⁵ "Only about one-seventh of all domestic violence assaults come to the attention of the police." Governor's Task Force on Domestic Violence and Sexual Violence, Florida Mortality Review Project, (1997), p.3.

about the cause of the injury.¹⁶ It is crucial that nurses, doctors and other health care providers receive training on the dynamics of domestic violence. Health care personnel may need to assess their own attitudes and perceptions about domestic violence survivors.

Patients should be routinely screened for domestic violence with the goal to validate and empower the survivor, while attending to the immediate health needs. Patients should be screened in a confidential setting away from the hearing of anyone who may accompany her, including the children or the abuser. Questions should be phrased simply without judgment in an atmosphere that is respectful and responses are taken seriously. Safety planning, information and referrals are imperative. Survivors ultimately must make their own decisions.

Specific behavioral signs may be obvious in a health care setting. The patient may be fearful, ashamed, embarrassed or evasive. She may have difficulty in completing paperwork, not have identification or fail to produce medical insurance cards. She may not make eye contact and minimize the extent of injuries. The patient may be reluctant to speak for herself if the abuser is present. The abuser may aggressively insist on accompanying the survivor and refuse to leave the treatment area. The abuser may display overt signs of jealousy or possessiveness.

Domestic violence patients may have contusions, abrasions, lacerations, fractures and sprains. Injuries to the head, neck, chest, breasts, chest and abdomen are most common. Repeated or chronic injuries and multiple sites of injury may be observed. Sometimes the patient will have injuries that appear inconsistent with the explanation of the cause.

Other medical findings may include chronic pain or headaches, psychogenic pains or pains due to diffused trauma without visible evidence. Patients may frequent emergency rooms describing vague complaints or symptoms without corroborating physical evidence. Physical symptoms related to stress, chronic post-traumatic stress disorder or other anxiety disorders and depression, including threats or attempts of suicide, abdominal and gastrointestinal complaints. Patients may complain of palpitations, dizziness and chest pains as well as gynecological problems like frequent vaginal and urinary tract infections and pelvic pain. Frequent use or abuse of minor tranquilizers or pain medications may indicate domestic violence.

During pregnancy the health care provider may observe injuries or unexplained pain to the breast, abdomen and genital areas. Substance abuse, poor nutrition, and late or sporadic attention to prenatal care are common. Risks to the fetus may include "spontaneous" abortions, miscarriages, premature labor, low birthrate, stillborn, pre-term infant and fetal fractures may be evidence of domestic violence.

¹⁶ "Although battered women comprise 20% to 30% of ambulatory care patients, only 1 in 20 is correctly identified as such by medical practitioners." Hyman et al., *Laws Mandating Reporting of Domestic Violence: Do they Promote Patient Well-Being?* *Journal of the American Medical Association*, vol. 273, no. 22, p. 1781 (June 1995).

Domestic violence abusers may limit the victims access to routine or emergency health care and cause noncompliance with prescribed treatment. Survivors may miss appointments or be prevented from obtaining or taking medication. Victims may be unable to convince their partners to use condoms or other contraceptive methods.

Medical documentation of violence is important for the patient. Medical records should be a clear and precise description of the cause of the patient's injuries. Quoting the patient's own words is preferable, along with the physician's assessment.

A detailed description of the nature of the injuries using a body chart is helpful along with injury type, number, size, location and possible causes. With the patient's permission, take color photographs of injuries before treatment from different angles, both full body and close up. Photos should be dated and the patient's face included in at least one of the photos. A coin or ruler used in the photo can be helpful to demonstrate size of bruises and other injuries. Keep a record of others present and the name of the photographer.

If the patient denies injuries were caused by domestic violence, but the attending physician suspects otherwise, documentation may be even more crucial. An opinion about whether the explanation of the cause of the injuries is plausible is important. Retaining evidence such as torn or bloody clothing in appropriate containers will be especially helpful in proving a future criminal case.

DOMESTIC VIOLENCE AND THE WORKPLACE

The effects of domestic violence on the workplace can result in reduced productivity, increased medical expenses, absenteeism, and increased risk of violence at work. While workplaces are an ideal place for employees facing domestic violence to get help, most employer policies have been to simply fire the battered woman. The most important action an employer can take is to develop a policy to protect both the organization and its employees, including domestic violence survivors. The policy should not tolerate any level of violence. National corporations such as Polaroid, Honeywell and Marshall's have taken a leadership role in developing policy and employee assistance programs for domestic violence.

Making a Decision on How the Organization Will Respond

The policy set by the organization regarding domestic violence victims says a great deal about the corporate culture. Having a policy at all is still unusual. The goal for your business is to create an environment free of abuse and violence.

The employer will need to know the law, including civil and criminal remedies on domestic violence, wife abuse, stalking, and child abuse. Becoming educated about the legal liabilities and requirements as they relate to employee personal safety for your business is crucial for your policy. Automatically firing either the victim or the abuser will just pass the problem to someone else.

The survivor has a need for privacy and safety, but talking with someone trusted in the workplace such as a supervisor, human resources manager or employee assistance counselor can be of great assistance. Interactions with the survivor are best when handled gently and respectfully. Some survivors may use drugs or alcohol as a way to cover up the abuse. Making referrals to substance abuse counseling or groups may be helpful but should probably be concurrent with a support group for domestic violence.

Questioning an employee about their relationship at home may seem too personal. However, it is likely that if she is being beaten or abused at home, the quality of her work may be affected. Possible signs of domestic abuse may include changes in behavior or work performance, lack of concentration, increased or unexplained absences, receiving harassing phone calls, unexplained bruises or injuries. The employer or supervisor can be trained to be persistent and listen without judgement. Survivors need assurance that they do not deserve to be abused. The supervisor will also need to contend with other employees' fear for themselves or their co-worker.

Safety planning for victims in the workplace is important. With permission of the survivor, security should be notified of safety concerns. A picture of the abuser and a copy of the Injunction for Protection will be useful for security, supervisors and reception staff. General safety precautions include evaluating lighting, installing security cameras and reviewing the safety of parking arrangements. Providing escorts to parked vehicles may be advisable or relocating the parking space nearer the building entrance.

Security precautions may include transferring the survivor to a different department or relocating the workspace to a more secure area where the survivor is never or rarely alone. Consider flexible or alternating work hours.

Some employers or supervisors fear that they will not have skills that can help the victim or that the victim's first reaction to you may not be positive. Phone numbers and basic information about local domestic violence centers or shelters can be posted on employee bulletin boards, newsletters and in women's restrooms. Referrals to domestic violence programs are essential, even if the survivor does not seem interested. The employer or employee assistance program may recommend counseling or support groups provided by the local domestic violence center. The employer may wish to provide speakers and training on domestic violence for employees. Teach respect. Do not tolerate abusive or threatening interactions between individuals at work.

Employers may wish to seek consultation from an attorney to become familiar with legal rights and responsibilities, civil and criminal measures that may help the survivor and protect the employer.

Solutions to the extraordinarily complicated problem of domestic violence are necessarily complex. Domestic violence affects the entire community and may be the root cause of

many other social problems. Shelters and law enforcement are only parts of the answer. Solutions must include clergy, health professionals, addiction professionals, neighbors, friends and family. It takes a whole community to stop domestic violence.

TEST QUESTIONS

1. The local domestic violence center in my community is _____
and their 24 hour crisis line is _____
2. The following define domestic violence:
 - a. a pattern of controlling behavior
 - b. negative behavior caused by stress
 - c. behavior caused primarily by females
 - d. behavior related to mental illness
3. Domestic violence can be a:
 - a. misdemeanor
 - b. felony
 - c. both
4. When Ann argued with her husband, he made fun of her religious beliefs. Which category of domestic violence does this describe?
 - a. Using power and privilege for control
 - b. Emotional or psychological abuse
 - c. Coercion and intimidation
 - d. Physical abuse
5. Florida domestic violence law defines the following as family or household members:
 - a. persons who are related by blood or marriage
 - b. persons who are residing in the same dwelling
 - c. persons who have a child in common
 - d. all of the above
6. Florida domestic violence law defines domestic violence as:
 - a. Name calling and criticism
 - b. Threats to move out of the home
 - c. Threats to commit suicide
 - d. Stalking
7. Henry spent the family's money on drugs and charged their credit cards to the limit. What category of abuse did this describe:
 - a. Using power and privilege for control
 - b. Emotional or psychological abuse

- c. Coercion and intimidation
 - d. Using economic abuse
8. Henry told Ann that he would kill her and the police, if she ever called. What category of abuse did this describe:
- a. Using power and privilege for control
 - b. Emotional or psychological abuse
 - c. Coercion and intimidation
 - d. Physical abuse
9. The following may be recognizable signs of potential violence:
- a. High stress employment
 - b. Feminist philosophy
 - c. Jealousy
 - d. Rigid gender-role expectations
10. Domestic abusers
- a. Always have a family history of violence
 - b. Have unpleasant personalities
 - c. Never abuse the children
 - d. May be jealous of friends, family and clergy
11. Domestic violence survivors will definitely be safe if they:
- a. Apply for an Injunction for Protection
 - b. Leave the abuser
 - c. Go to a shelter
 - d. File for divorce
 - e. None of the above
12. An Injunction for Protection:
- a. Can be obtained in the civil court
 - b. Will be granted 15 days after application
 - c. Is effective the day it is received
 - d. Can be filed by a minor
13. A criminal arrest may be made for domestic violence
- a. If the police are called
 - b. If the police determine there is probable cause
 - c. Only if it is a felony
 - d. The victim presses charges

14. Domestic abusers are more dangerous when:

- a. The survivor loses her job
- b. The abuser threatens suicide
- c. They are diagnosed with mental health problems
- d. They stop drinking or using drugs

15. When making a Safety Plan survivors should:

- a. Learn the domestic violence center's 24-hour crisis line number
- b. Never tell family or friends
- c. Teach the children to stop the abuser from calling them names
- d. Go to work at the the same time every day

16. Effects of domestic violence on children include

- a. Withdrawn, dependent behavior
- b. Aggressive, bullying behavior
- c. Increased respect for the survivor/parent
- d. Using violence in dating relationships
- e. a,b,and d above

17. Children usually:

- a. are unaware of the violence
- b. are not afraid unless they are physically abused
- c. feel fearful and anxious about their parent
- d. rarely see the violence because it happens when they are asleep or in school

18. Health care providers should:

- a. screen for violence when the whole family is present
- b. investigate to see if the domestic violence survivor is telling the truth
- c. refuse to see someone who doesn't comply with prescribed treatment
- d. screen routinely for domestic violence

19. A health care provider who suspects domestic violence should:

- a. question the patient until she admits what happened
- b. keep records of the injuries even if the patient returns home to the abuser
- c. convince the patient to leave the abuser right away
- d. scold the patient for not coming in sooner
- e. omit the patient's statements from medical records

20. A health care provider can help the survivor by:

- a. helping to make a safety plan
- b. listening to the survivor's story
- c. offering medication for stress
- d. requiring photographs
- e. all of the above

21. Domestic violence centers offer the following core services:

- a. 24-hour crisis line
- b. free attorney to provide legal advocacy
- c. individual therapy
- d. shelter
- e. all of the above
- f. A and D above

22. It is important to coordinate with your local domestic violence center because:

- a. they provide comprehensive services for survivors
- b. they can provide training and resources on domestic violence
- c. centers are part of the coordinated community response to domestic violence
- d. all of the above

Key to Test Questions

1. CASA, 727-898-3671
2. A
3. C
4. B
5. D
6. D
7. D
8. C
9. C or D
10. D
11. E
12. A
13. B
14. B
15. A
16. E
17. C
18. D
19. B
20. E
21. A and D
22. D

